



**ATLANTIC COMMUNITY
CHARTER SCHOOL**

SPECIAL EDUCATION AND RELATED SERVICES MANUAL



Atlantic Community Charter School

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WELCOME

As the parent/guardian 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 manual provides you with clear and accurate information that will help you work effectively with school personnel. It does not replace state laws and guidelines, which are detailed separately throughout your child's education. This manual is a resource in tandem with your personal communication with school personnel at Atlantic Community Charter School (ACCS).

ALL ABOUT SPECIAL EDUCATION SERVICES

Evaluation and intervention services are provided to students by the Child Study Team (CST), special education instructional staff, intervention and referral services staff, and related services specialists. A referral to the CST may be initiated by a parent/guardian, teacher, school nurse, school administrator, special services staff, medical specialist or other professionals who support students' well-being when an educational disability is suspected. Public schools are required by law to develop a process for identifying potentially educationally disabled students. Such a student who may experience difficulties of a physical, emotional, academic, intellectual, or social nature and may not be able to function effectively in a regular education program. In these cases, a CST evaluation is necessary to determine the basis of the difficulties and whether the student is eligible for special services. If the student is deemed eligible for special education and related services, an Individualized Educational Program (IEP) is developed.

With the federal passage of the Individuals with Disabilities Education Improvement Act (IDEIA) in December 2004, parents/guardians became recognized members of the IEP Team. This team plans an appropriate school program while developing a formal IEP for the educationally disabled child. Parents and school personnel work together throughout this process in developing an appropriate program to meet the unique needs of the student.. The district provides the full continuum of program options as outlined in the New Jersey Administrative code (N.J.A.C. 6A: 14). The complete rules and regulations pertaining to CST procedures and students with disabilities are contained in the New Jersey Administrative Code, Title 6A, Chapter 14, Special Education.

Child Study Team (CST)

The CST is a multi-disciplinary educational team whose responsibilities are 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 district to provide consultative, evaluative, and prescriptive services to teachers and parents. The team provides diagnostic services to children from age 3 to 21 who have been identified as having a potentially disabling condition. Counseling and consultative services are available for any school-aged student experiencing difficulty in learning or behavior.

The 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 the parent/guardian, a school psychologist, learning disabilities teacher/consultant, school social worker, and, in some cases, a speech-language specialist.

School Social Worker

The social worker's primary responsibility as a CST member is to conduct a "social history evaluation." Such an evaluation provides an assessment of the 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 CST member who functions as an educational diagnostician, instructional programmer, 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's Board of Education. It shall include a 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 as social workers, school psychologists, and learning consultants, these CST members 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 evaluating 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.

Special Education Department

Staff & Title	Contact	Areas of Responsibility
Dr. Shelly Richards	srichards@atlanticcommunitycharter.com	Lead Person
Mr. Steve DiMatteo	sdimatteo@atlanticcommunitycharter.com	Principal/Director of Special Education/ I&RS Administrator/ 504 Compliance Officer
Ms. Patricia O'Connell	poconnel@atlanticcommunitycharter.com	Curriculum Supervisor/I&RS team member
Ms. Linda O'Donnell	lodonnell@atlanticcommunitycharter.com	Asst. Principal/ I&RS team member
Ms. Mary Seddon	mseddon@atlanticcommunitycharter.com	School Nurse
Ms. Noel Hartman	nhartman@atlanticcommunitycharter.com	School Social Worker
Mr. Christopher Landzert	CLandzert@atlanticcommunitycharter.com	School Psychologist
Ms. Rachel Cohen	rcohen@atlanticcommunitycharter.com	English Language Learner Instructor
Ms. Makenna Sacco	MSacco@atlanticcommunitycharter.com	School Counselor

CHILD FIND PROCESS - 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, and reading and math specialists. The purpose of the I&RS process 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 classrooms. 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 Director of Special Education.

6A:16-8.2 Functions of Intervention and Referral Services

I&RS teams work collaboratively to:

1. Identify the learning, behavioral and/or health difficulties of each student;
2. Collect information on the difficulties identified;
3. Develop and implement action plans that provide for or make referrals to appropriate school or community interventions;
4. Provide support, guidance and professional development to school staff who are generally the first professionals (within the school) to observe students' learning, behavioral and/or health difficulties;
5. Provide support, guidance and professional development to school staff who participate in each building's system for planning and providing intervention and referral services;
6. Actively involve parents or guardians in the development and implementation of intervention and referral services action plans;
7. Coordinate the delivery of school resources and services for achieving outcomes identified in intervention and referral services action plans;
8. Coordinate the services of community-based social and health provider agencies and other community resources for achieving outcomes identified in intervention and referral services action plans;
9. Maintain records of all requests for assistance, intervention and referral services action plans, all related student information and records. Other record keeping concerns are also mandated by Federal and State laws that ensure the confidentiality of student records;
10. Review and assess the effectiveness of each intervention and referral services action plan in achieving the identified outcomes, and modify each action plan to achieve the desired outcomes; and
11. At a minimum, annually review intervention and referral services action plans and the actions taken as a result of the building's system of intervention and referral services, and make recommendations to the principal for improving school programs and services, as appropriate.

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 handbook 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 CST office or by visiting <http://www.nj.gov/education/specialed/form/prise>.

The procedural safeguards must be distributed once each school year and at one of the following times:

- When your child is first referred for evaluation or when you request an evaluation;
- When you request a copy of the procedural safeguards;
- When your child is removed for disciplinary reasons and the removal results in a change in placement;
- 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
- Upon revision to the procedural safeguards.

SPECIAL EDUCATION PROCESS

Referral – Evaluation – Eligibility – Individualized Education Plan – Placement –
Annual Review / Reevaluation Meeting

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 and should identify the parents' specific concerns as well as their child's current strengths and needs. The referral is presented to the Director of Special Education (Dr. Tina Figueroa) who assigns the referral to a designated case manager. The case manager is then responsible 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 them during the referral process. They can obtain this information by calling the school at 609-428-4300.

Evaluation

Informed, signed, parental consent must be received in order for the school to proceed with the evaluation. It is important for parents to understand the components of the evaluation and how the results of the evaluation are used to determine eligibility for special education services. An initial evaluation consists 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. Team members will only conduct evaluations in those areas in which they have appropriate training, professional licensure, or educational certification. The specific kind of evaluations a child needs is decided on an individual basis. Persons from varying disciplines including a school psychologist, speech-language therapist, physical therapist, audiologist and/or occupational therapist may conduct evaluations.

The common elements of a comprehensive assessment generally include the following:

- 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 receive information regarding *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.

Parents can provide information about their child that they wish to be used to determine if a disability is present. 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 Atlantic Community Charter School. 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) determines if a child has a disability and needs special education and/or related services. The IEP Team includes the insights of the child's parents as well as professionals who are knowledgeable about the child's learning and school behaviors. 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, 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 2004, 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 (caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, working, eating, sleeping, standing, lifting, bending, reading, concentrating, thinking, and communicating- functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions). 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 calculator, tape recorders, word processors, may be considered reasonable accommodations. Although there is no legal requirement to do so, in some cases OT and PT are provided in a 504 Plan.

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 collaborative Child Study Team finding report 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.

IEP Team Attendance

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

- The guardian(s) of the child;
- At least one regular education teacher;
- At least one special education teacher or, where appropriate, at least one special education provider of the child;
- A representative of the local education agency (LEA) who
 - a) The representative is qualified to provide, or supervise the provision of, specially designed instruction to meet the unique needs of children with disabilities;
 - b) The representative is knowledgeable about general curriculum; and
 - c) The representative is knowledgeable about the availability of resources of the local educational agency;
- An individual who can interpret the instructional implications of evaluation results. This person may be the LEA representative described above;
- 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
- 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 guardian(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, mediation or a due process hearing.

Refer to the PRISE handbook for further details regarding dispute resolution.

Disabilities Covered Under IDEA of 2004

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 audio logical 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.
- **Cognitively impaired** 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:
 1. An inability to learn that cannot be explained by intellectual, sensory or health factors;
 2. An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
 3. Inappropriate types of behaviors or feelings under normal circumstances;
 4. A general pervasive mood of unhappiness or depression; or
 5. 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:
 1. Physical, including gross motor, fine motor and sensory (vision and hearing)
 2. Cognitive
 3. Communication
 4. Social and emotional
 5. 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:
 - Basic reading skills;
 - Reading comprehension;
 - Oral expression;
 - Listening comprehension;
 - Mathematical calculation;
 - Mathematical problem solving;
 - Written expression; and
 - 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, 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. Listed below are acceptable accommodations and modifications for standardized testing as per the New Jersey Department of Education.

ACCEPTABLE ACCOMMODATIONS AND MODIFICATIONS

A. Setting Accommodations

1. Administering the assessment:
 - a) individually in a separate room
 - b) in a small group in a separate room
 - c) in the resource room
 - d) in a special education classroom
 - e) at home or in a hospital (this will depend on the nature of the assessment task)
2. Seating the student in the front of the room near the examiner or proctor
3. Seating the student facing the examiner or proctor
4. Providing special lighting
5. Providing special furniture e.g., desks, trays, carrels

B. Scheduling Accommodations

1. Adding time as needed
2. Providing frequent breaks
3. Terminating a section of the test when a student has indicated that he/she has completed all the items he/she can. The examiner must ensure that the student has attempted all items in a section since items are not ordered by difficulty. When this accommodation is used, the test must be administered in a small group or individually to avoid distraction.

C. Test Materials Modifications

1. Administering the large-print version of the test
2. Administering the Braille version of the test

D. Test Procedure Modifications

1. Administration modifications

- a) reading directions aloud
- b) reading test items aloud (do not read aloud or sign the reading passages in Language Arts Literacy –the reading items may be read or signed); **ONLY** the teacher who must read the test items aloud or sign is permitted to have a test booklet assigned to him/her for this task
- c) providing and ensuring that amplification (hearing aid and/or FM system) is in working order
- d) using a sign language or cued speech interpreter to sign or cue the directions or test items but **NOT** the reading passages
- e) masking a portion of the test booklet and/or answer folder to eliminate visual distractors or providing reading windows
- f) repeating, clarifying, or rewording directions **ONLY**
- g) providing written directions on a separate sheet or transparency
- h) using an examiner who is familiar with the student
- i) using an examiner who can communicate fluently in sign language (American Sign Language or a form of Manually Coded English)
- j) providing manipulatives for math items e.g., number line, counting chips, abacus (for NJSLA 3-8 **ONLY**)
- k) using graph paper for students taking the NJSLA grades 3-8
- l) using a Braille ruler and talking calculator or large-face calculator
- m) using tactile or visual cues for deaf or hard of hearing students to indicate time to begin, time remaining, and time to end a particular part of the test
- n) using calculators for NJSLA Mathematics

2. Response modifications

- a) having an examiner record the student's identification information on the test booklet and/or answer folder

- b) dictating oral responses to a scribe (examiner or proctor who writes from dictation)
- c) using a Braille writer to record responses
- d) signing responses to a sign language interpreter (student must indicate all punctuation and must spell all key words)
- e) recording responses on a word processor (all editorial functions MUST be disabled)
- f) providing an augmentative communication device
- g) using a larger diameter or modified special grip # 2 pencil
- h) circling answers in the test booklet (the examiner subsequently transfer the answers to the answer folder); for the NJSLA grades 3-4, the examiner bubbles the student's answer choice in the scan able test booklet
- i) allowing separate additional continuation pages for writing tasks

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. In accordance with the least restrictive environment provision, 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:

1. Prompting, cueing and redirecting student participation;
2. Reinforcing of personal, social, behavioral and academic learning goals;
3. Organizing and managing materials and activities;
4. Implementation of teacher-designed follow-up and practice activities;
5. Consultation regarding
 - a) the development and demonstration of techniques and strategies;
 - b) data collection on the effectiveness of the techniques and strategies;
 - c) development of positive behavioral supports.

- 6 Adapted instructional materials;
- 7 Supports to address environmental needs (e.g. preferential seating, altered physical room arrangement);
- 8 Specialized equipment (e.g. wheelchair, computer, software, etc.);
- 9 Assignment modification;
- 10 Testing modifications

Resource Programs

Resource Programs provide specialized instruction by a special education teacher to students with disabilities in the general education setting (Push-In) or in a separate Resource Center Classroom (Pull-Out) for each subject area.

Self-Contained Special Education Classes

For students in need of more intensive and specialized instruction, placement in a self-contained special class program may be the least restrictive appropriate educational placement. Self-contained 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 this educational setting typically remain in this class for a major portion of the day, but may also participate in general education classes and/or programs appropriate to their needs.

Extended School Year

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.

DISCIPLINE

Removal School for Up to Ten Days

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.

Unless the IEP explicitly requires it, IDEA 2004 no longer requires consideration of whether:

- The IEP, services and placement were appropriate, and appropriately implemented; or
- The disability impaired the child's ability to understand the impact and consequences of their behavior or to control their behavior.

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.

RELATED SERVICES

Related services - The term related services means transportation, and such developmental, corrective, and other supportive services (including speech-language pathology and audiology services, interpreting services, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, social work services, school nurse services designed to enable a child with a disability to receive a free appropriate public education as described in the individualized education program of the child, counseling services, including rehabilitation counseling, orientation and mobility services, and medical services, except that such medical services shall be for diagnostic and evaluation purposes only) as may be required to assist a child with a disability to benefit from special education, and includes early identification and assessment of disabling conditions in children.

