The ESU #9 Special Education Handbook was developed and training was provided to insure compliance within the Nebraska Department of Education, Special Education. This handbook does not intend to be inclusive of all Federal Special Education law and State of Nebraska guidelines. Please refer to U.S. Department of Education and Nebraska Department of Education, Special Education for further information.

Link to ESU #9 Sped handbook:  
Below Age Five * Referral * Assessment * Re-evaluation
Services Coordinator (SC) Receives Referral

Services Coordinator (SC):
* Notifies BA 5 Supervisor
* Obtains Permission to Test (SC Form) from the parent
* Gives Parental Rights in Special Education (SPED-03)
* Creates SRS student file

BA 5 Supervisor:
* Notifies school district representative
* Obtains school district signature on Referral Form (PS-01)
* Collaborates with SLP supervisor to review referral and assign diagnosticians
* Provides assessment team with copies of referral, permission to test and all intake information
* Notifies SC with list of assessment personnel
* Obtains physician's letter if needed
* Scans referral for data collection

Services Coordinator (SC):
* Collaborates with ECSES to create the MDT form on SRS
* Lists team members to allow SRS privileges
* Determines assessment settings, date, and time
* Notifies BA 5 Supervisor of evaluation date(s)

Evaluation & Assessment completed in natural environment settings
Assessment team composes diagnostic reports on SRS

BA 5 Supervisor notifies and contacts additional assessment personnel as needed (OT, PT, Deaf Ed., Vision, etc.)

SC coordinates MDT meeting and collaborates with ECSES to send Notification of MDT Conference (and IFSP as needed) to team

ECSES enters date & prints MDT signature page

MDT meeting held, verification determined, and Parental Rights in Special Education (SPED-03) given
MDT Draft given to parents
Complete signature page in SRS following meeting
Finalize Notification of MDT Conference

MDT finalized - include educational needs
ECSES sends MDT final notice and MDT report to BA5 Supervisor electronically
Original signature pages sent via mail within 2 weeks

Verified

Ineligible

IFSP Meeting

BA 5 Supervisor documents retest recommendation date if needed

9/2011

BA 5 Supervisor:
* Checks MDT report for compliance.
* Sends parents and SC final MDT reports
* Files MDT report electronically
* Creates permanent SPED file.
THREE-YEAR OLD NATURAL ENVIRONMENT EVALUATION & ASSESSMENT PROCEDURES

**BA 5 Supervisor:**
- Receives, completes, and processes Referral Form (PS-01)
- Notifies and obtains School District representative signature on Referral Form (PS-01)
- Collaborates with SLP supervisors to review referral and assign diagnosticians
- Notifies ECSES

**ECSES:**
- Creates SRS student file
- Obtains signature on Notice and Consent for Initial Evaluation and gives Parental Rights in Special Education (SPED-03)
- Has family fill out Developmental History form
- Sends Finalized Notice and Consent for Initial Evaluation & Developmental History form to BA 5 Supervisor electronically & sends original page via mail

**BA 5 Supervisor:**
- Provides assessment team with copies of referral, Notice and Consent for Initial Evaluation and all other information
- Obtains physician's letter if needed

**Diagnosticians:**
- Collaborate/set up evaluations
- Complete evaluations
- Compose diagnostic reports on SRS
- ECSES keeps BA 5 Supervisor informed of progress

**ECSES:**
- Creates MDT form on SRS
- Allows team member privileges

**BA 5 Supervisor notified and contacts additional assessment personnel as needed (OT, PT, Deaf Ed, Vision, etc.)**

**Diagnosticians notify ECSES that testing is completed**

**ECSES:**
- Coordinates MDT meeting and sends Notification of MDT Conference (and IEP as needed) to team members
- Notifies BA 5 Supervisor of MDT date

**ECSES enters date & prints MDT signature page**
- MDT meeting held and verification determined
- MDT Draft given to parents
- Complete signature page into SRS following meeting
- Finalize Notification of MDT Conference. Send to BA 5 Supervisor electronically. Signature page via mail to BA 5 Supervisor.

**MDT Finalized - include educational needs**
- ECSES sends copy electronically to BA 5 Supervisor within 2 weeks & original signature page via mail

**Verified**
- IEP Meeting

**Indigible**
- BA 5 Supervisor documents retest recommendation date if needed

**BA 5 Supervisor:**
- Sends copies as designated
- Files Report

If staff receives referral -- notify BA 5 Supervisor immediately (fax, call, hand deliver, email asap)
THREE - FIVE INITIAL EVALUATION & ASSESSMENT PROCEDURES FOR CLASSROOM REFERRAL

ECSES:
- Completes Referral Form (PS-01)
- Notifies School District representative-Obtains signature
- Creates SRS student file
- Obtains signatures on Notice and Consent for Initial Evaluation and gives Parental Rights in Special Education (SPED 03)

ECSES sends to BA 5 Supervisor:
- Completed Referral Form
- Finalized Notice and Consent for Initial Evaluation electronically. Original parent signature via mail
- Speech/Language screening information
- Current Child Portfolio Information

BA 5 Supervisor:
- Notifies SLP supervisor of referral
- Provides copies of referral, Notice and Consent for Initial Evaluation and all other information as needed
- Obtains physician's letter if needed
- Creates MDT form on SRS
- Allows team member privileges

Diagnosticians:
- Collaborate/ set up evaluations
- Complete evaluations
- Compose diagnostic reports on SRS

ECSES keeps BA 5 Supervisor informed of progress

Diagnosticians notify ECSES that testing is completed

ECSES:
- Coordinates MDT meeting and sends Notification of MDT Conference (and IEP as needed) to team members
- Notifies BA 5 Supervisor of MDT date

ECSES enters date & prints MDT signature page
- MDT meeting held and verification determined
- MDT Draft given to parents
- Complete signature page into SRS following meeting
- Finalize Notification of MDT Conference. Send to BA 5 Supervisor electronically. Signature page via mail to BA 5 Supervisor.

MDT Finalized - include educational needs

ECSES sends: electronic copy to BA 5 Supervisor within 2 weeks; original signature page via mail

BA 5 Supervisor:
- Sends copies as designated
- Files Report

Verified

IEP Meeting

Ineligible

BA 5 Supervisor documents retest recommendation date if needed

No SAT for preschool; enter "monitor progress and re-evaluate as needed" in the SAT box on page 1 of SRS MDT
THREE-FIVE INITIAL EVALUATION & ASSESSMENT PROCEDURES FOR OUTSIDE REFERRAL

<table>
<thead>
<tr>
<th><strong>BA 5 Supervisor:</strong></th>
<th><strong>ECSES:</strong></th>
<th><strong>Diagnosticians:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>* Receives, completes, and processes Referral Form (PS-01)</td>
<td>* Creates SRS student file</td>
<td>*Collaborate/set up evaluations</td>
</tr>
<tr>
<td>* Notifies and obtains School District representative signature on Referral Form (PS-01)</td>
<td>* Obtains signature on Notice and Consent for Initial Evaluation and gives Parental Rights in Special Education (SPED-03)</td>
<td>*Complete evaluations</td>
</tr>
<tr>
<td>*Collaborates with SLP supervisors to review referral and assign diagnosticians</td>
<td>* Sends Finalized Notice and Consent for Initial Evaluation to BA 5 Supervisor electronically &amp; sends original page via mail</td>
<td>*Compose diagnostic reports on SRS</td>
</tr>
<tr>
<td>*Notifies ECSES</td>
<td></td>
<td><strong>ECSES keeps BA 5 Supervisor informed of progress</strong></td>
</tr>
</tbody>
</table>

**If staff receives referral -- notify BA 5 Supervisor immediately (fax, call, hand deliver, email asap)**

**ECSES:**
*Creates MDT form on SRS
*Allows team member privileges

**BA 5 Supervisor notified and contacts additional assessment personnel as needed (OT, PT, Deaf Ed, Vision, etc.)**

**Diagnosticians notify ECSES that testing is completed**

**ECSES:**
*Coordinates MDT meeting and sends Notification of MDT Conference (and IEP as needed) to team members

<table>
<thead>
<tr>
<th><strong>BA 5 Supervisor:</strong></th>
<th><strong>ECSES:</strong></th>
<th><strong>Diagnosticians:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>* Provides assessment team with copies of referral, Notice and Consent for Initial Evaluation and all other information</td>
<td>*Notifies BA 5 Supervisor of MDT date</td>
<td>*Obtains physician's letter if needed</td>
</tr>
</tbody>
</table>

**MDT Finalized - include educational needs**

**ECSES sends copy electronically to BA 5 Supervisor within 2 weeks & original signature page via mail**

<table>
<thead>
<tr>
<th><strong>Verified</strong></th>
<th><strong>Indigible</strong></th>
<th><strong>IEP Meeting</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BA 5 Supervisor:</strong></td>
<td><strong>BA 5 Supervisor documents retest recommendation date if needed</strong></td>
<td><strong>No SAT for preschool: enter &quot;monitor progress and re-evaluate as needed&quot; in the SAT box on page 1 of SRS MDT</strong></td>
</tr>
</tbody>
</table>

**ECSES enters date & prints MDT signature page**

MDT meeting held and verification determined

MDT Draft given to parents

Complete signature page into SRS following meeting

Finalize Notification of MDT Conference. Send to BA 5 Supervisor electronically. Signature page via mail to BA 5 Supervisor.

**MDT Finalized**

**Verified**

**Indigible**

**IEP Meeting**

9/2011
THREE - FIVE RE-EVALUATION PROCEDURES

IEP team reviews data and determination is made for:

- Testing
- No testing

Case Manager completes Determination Notice

Copy to BA 5 Supervisor electronically & sends signature page via mail

ECSES:
- Finalizes Notice and Consent of Re-evaluation and gives Parental Rights in Special Education (SPED-03)
- Sends to BA 5 Supervisor electronically & sends original signature page to BA 5 Supervisor via mail

BA 5 Supervisor:
- Provides assessment team with copies of Notice and Consent of Re-evaluation
- Obtains physician’s letter if needed

Diagnosticians:
- Collaborate/sets up evaluation
- Complete evaluations
- Compose diagnostic reports on SRS

ECSES keeps BA 5 Supervisor informed of progress

Diagnosticians notify ECSES that testing is completed

ECSES:
- Coordinates MDT meeting and sends Notification of MDT Conference (and IEP as needed) to team members
- Notifies BA 5 Supervisor of MDT date

ECSES enters date & prints MDT signature page

MDT meeting held and verification determined
- MDT Draft given to parents
- Complete signature page into SRS following meeting
- Finalize Notification of MDT Conference. Send to BA 5 Supervisor electronically. Signature page via MDT Finalized

VerIFIED

ECSES sends to BA 5 Supervisor within 2 weeks electronically signature page

BA 5 Supervisor:
- Sends copies as designated
- Files Report

BA 5 Supervisor documents retest recommendation date if needed

No SAT for preschool; enter "monitor progress and re-evaluate as needed" in the SAT box on page 1 of SRS MDT

ECSES:
- Creates MDT form
- Allows team privileges on SRS

BA 5 Supervisor notified and contacts additional assessment personnel as needed (OT, PT, Deaf Ed, Vision, etc.)

9/2011
THREE-FIVE EVALUATION & ASSESSMENT PROCEDURES FOR VERIFIED STUDENTS MOVING IN

ECSES or BA 5 Supervisor obtains parent signature on Authorization of Disclosure of Information (SPED-20) and MDT/IEP from previous district

Review of MDT completed by BA 5 Supervisor, school psychologist, and SLP supervisors

ECSES or BA 5 Supervisor receives notification

Testing is needed

ECSES or BA 5 Supervisor:
* Receives, completes, and processes Referral Form (PS-01)
* Notifies & obtains school district representative signature on Referral Form (PS-01)
* Collaborates with SLP supervisors to review referral and assign diagnosticians
* Notifies ECSES

Testing is needed

No Testing/MDT accepted

ECSES:
* Completes MDT card report

Team holds IFSP/IEP meeting

ECSES:
* Creates SRS student file
* Obtains signature on Notice and Consent for Initial Evaluation and gives Parental Rights in Special Education (SPED-03)
* Sends finalized Notice and Consent for Initial Evaluation to BA 5 Supervisor electronically & signature page via mail

BA 5 Supervisor:
* Receives, completes, and processes Referral Form (PS-01)
* Notifies & obtains school district representative signature on Referral Form (PS-01)
* Collaborates with SLP supervisors to review referral and assign diagnosticians
* Notifies ECSES

BA 5 Supervisor:
* Provides assessment team with copies of referral, Notice and Consent for Initial Evaluation and all other information
* Obtains physician's letter if needed

Diagnosticians:
* Collaborate/set up evaluation
* Notify BA 5 Supervisor of testing schedule
* Complete evaluations
* Compose diagnostic reports on SRS

ECSES keeps BA 5 Supervisor informed of progress

Diagnosticians notify ECSES that testing is completed

ECSES:
* Coordinates MDT meeting and sends Notice of MDT Conference and IEP as needed to team members
* Notifies BA 5 Supervisor of MDT date

ECSES enters date & prints MDT signature page
MDT meeting held and verification determined
MDT Draft given to parents
Complete signature page into SRS following meeting
Finalize Notice of MDT Conference. Send to BA 5 Supervisor electronically. Signature page via mail to BA 5 Supervisor.

MDT Finalized include educational needs
ECSES sends electronic copy to BA 5 Supervisor within 2 weeks. Original signature page via mail

Verified

IEP Meeting

Ineligible

ECSES sends electronic copy to BA 5 Supervisor within 2 weeks. Original signature page via mail

BA 5 Supervisor:
* Sends copies as designated
* Files Report

BA 5 Supervisor notifies and contacts additional assessment personnel as needed (OT, PT, Deaf Ed, Vision, etc.)

BA 5 Supervisor notified and contacts additional assessment personnel as needed (OT, PT, Deaf Ed, Vision, etc.)

No SAT for preschool; enter “monitor progress and re-evaluate as needed” in the SAT box on page 1 of SRS MDT
BIRTH TO THREE IFSP PROCEDURES

Ifsp Team Responsible for:
* Sending Notification of IFSP Meeting
* Including Parental Rights in Special Education (SPED-03)
* Printing draft copy for signature

Initial IFSP

Complete draft IFSP prior to meeting
Complete draft of Notice & Consent for Initial Placement and print for signature
Print IFSP signature page as draft from SRS

IFSP Meeting

Obtain signatures of team members (including parent signature)

Following IFSP meeting:
* Finalize Notification of IFSP Meeting - Print
* Finalize Notice for Change of Placement in Special Education Services - Print

Finalize IFSP, print, and send out to parents and IFSP team members

Send the following to the preschool central office:
* Notification of IFSP Meeting
* Finalized IFSP with signature page
* Notice and Consent for Initial Placement in Special Education Services or Notice for Change in Placement in Special Education Services

Review progress & document status on current IFSP goals/objectives
Duplicate IFSP to be updated on SRS (Dupe)
Complete draft IFSP prior to meeting reflecting changes as needed.
Complete draft of Notice for Change of Placement (if applicable) - print for signature.
Print IFSP signature page as draft from SRS

IFSP Review

Obtain signatures of team members (including parent signature)

Following IFSP Meeting:
* Finalize Notice for Change of Placement (if applicable) - Print

9/2011
Three to Five
Individual Education Plan
(IEP)
THREE - FIVE IEP PROCEDURES

Case Manager:
* Sends Notification of IEP Meeting
* Includes Parental Rights in Special Education (SPED-03)
* Prints draft copy for signature

**Initial IEP**

- Complete draft IEP *prior* to meeting
  - Print IEP signature page as draft from SRS
- Complete draft of Notice & Consent for Initial Placement and print for signature

**IEP Meeting**

- Obtain signatures of team members (including parent signature)

**Following IEP Meeting:**
* Finalize Notification of IEP Meeting - Print and attach to IEP
* Finalize Notice and Consent for Initial Placement - Print and attach signed copy of signature page to IEP

**Finalize IEP, print, and send out to parents and team members**

Send the following to preschool central office:
* Notification of IEP Meeting
* Finalized IEP with signature page
* Notice and Consent for Initial Placement or Notice for Change of Placement (if applicable)

**IEP**
* Annual
* Update
* Review

**Review progress & document status on current IEP goals/objectives**

- Duplicate IEP to be updated on SRS (dupe button)
- Complete draft IEP *prior* to meeting reflecting changes as needed
- Print IEP signature page as draft from SRS

**Following IEP Meeting:**
* Finalize Notification of IEP Meeting - Print and attach signed copy to IEP
* Finalize Notice for Change of Placement (if applicable) - Print and attach signed copy to IEP
* Finalize IEP - Print copy of signature page and attach to IEP
RtI & SAT

ESU #9 SAT Process Flowchart

SAT Form Examples

ESU #9 Essential Elements of RtI

Nebraska RTI Implementation Support Team
General Education

STUDENT ASSISTANCE TEAM (SAT) PROCESS

Classroom Teacher Contacts parents

Parent/Teacher Conference to Determine Interventions Needed

Interventions implemented

Interventions are successful, classroom teacher continues to monitor student progress

Interventions are not successful

Classroom teacher completes referral to SAT

SAT Meeting:
- Parents invited
- Classroom Teacher
- SAT Chair

Team reviews interventions and results (Observation or baseline data)

Determine research-based intervention plan

Implement plan for 3-4 weeks (document, baseline, checkpoints, etc.)

Review plan at periodic intervals

Intervention is successful, continue to monitor student progress

No Improvement

Team reviews and modifies interventions. Best practice is to implement multiple interventions.

No Improvements

Referral to Multidisciplinary Team for evaluation

Continuous documentation & communication

Interventions are successful, classroom teacher continues to monitor student progress

9/2011
EXAMPLES OF FORMS USED BY STUDENT ASSISTANCE TEAMS

Purpose and Description

Before a student is referred to a multidisciplinary team for an individual evaluation, a student assistance team or comparable problem solving team documents problem solving intervention strategies to assist the teacher in the provision of general education. Each school district decides how to document the required information. The student assistance team documentation is completed as the student assistance meets. The information is included in referrals for a multidisciplinary team evaluation.

Completed By

Chairperson of Student Assistance Team
Student Assistance Team Report
Initial Referral Form
Sutton Elementary School

Referral Information:

Referred by: ___________________________ Date of Referral: ________

Student’s Name: ___________________________ Grade: ________
Age: ________ Birth Date: ________________
Classroom teacher: ___________________________

Parent’s Name: ___________________________
Address: ___________________________
Phone: ___________________________

***********************************************************************************************

Reason for Referral/Areas of Concern:

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

Strengths:

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

***Submit This Page to SAT Team Leader When Completed***
First SAT Referral Meeting

SAT Meeting Date: __________________________ Meeting Site: ________________

Members Present and Title (i.e. teacher, student, parent, administration, specialist, etc)

Name: ___________________________ Title: ___________________________

Name: ___________________________ Title: ___________________________

Name: ___________________________ Title: ___________________________

Name: ___________________________ Title: ___________________________

Name: ___________________________ Title: ___________________________

Name: ___________________________ Title: ___________________________

Name: ___________________________ Title: ___________________________

Review SAT Process: (start each meeting by reviewing the SAT process from beginning to end and identify where we are in the process)

- If referral begins with a teacher/school staff, the parents have already been notified of a concern prior to the referral. Strategies between home and school have been attempted and results are documented.

- The Initial Referral Form has been completed and submitted to the Student Assistance Team leader. *The school staff may choose to meet one time prior to meeting with parents to organize strategies.

- First SAT meeting (includes parents) to assess strengths and concerns, develop first observation strategies, develop action plan, and develop an observation timeline.

- Team recommendations: (choose one)
  
a. Initiate a second observation period with additional strategies
b. Determine testing is not necessary and initiate an Active SAT plan of Assistance (POA)
c. Refer for testing
d. If a student does not qualify for special education services, initiate an Active SAT Plan of Assistance (POA)
e. Area of concern has been corrected; no further action is necessary
Action Plan for Observation Period

1. Describe strategies currently in place and/or previously implemented

2. Assessment scores and background information about this student that will be helpful in understanding this student as a learner.

3. New strategies and modifications to be implemented during the first observation period.

4. Timeline: Observation Period

   Observation period begins: ________   Observation period ends: ________

   Total calendar days for observation period: ________

   Date for next Meeting: _________________________________
Second SAT Meeting: End of Observation Period

1. Review SAT process – identify where we are in the process

2. Action plan results during first observation period for strategies and modifications

3. Team Recommendations: (choose one of the five)

   _____ Initiate a second observation period with additional strategies. If there is a decision to initiate an additional observation period, a new Action Plan page must be completed at this time.

   _____ Determine testing is not necessary and initiate an *Active SAT Plan of Assistance (POA)

   _____ Refer for testing

   _____ If a student does not qualify after testing for special education services, initiate an Active SAT Plan of Assistance (POA)

   _____ Area of concern is corrected, no further action is necessary

*An Active Plan of Assistance (POA) is for students who do not qualify for special education services, but are in need of on-going assistance. The strategies developed through the SAT process becomes their Plan of Assistance, which is then implemented and re-assessed annually.

Team Members Present: (sign and date)

__________________________________________  ________________________________

__________________________________________  ________________________________

__________________________________________  ________________________________

__________________________________________  ________________________________
SAT Observation Period Worksheet

Student’s Name: _______________________________ Grade: _________

Staff’s Name: _______________________________ Position: ______________

Observation Period: Start Date ___________ End Date _______________

*****************************************************************************

Instructions:

1. Document the strategies used during the observation period and provide an assessment on those strategies.

2. Bring this completed form to the meeting held at the end of the observation period. If you are unable to attend the meeting, return this form to the team leader prior to the meeting.

Documentation: Strategies Results During Observation Period

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

Signature: _______________________________ Date: _______________
Student Assistance Team  
Sutton Public School District

The Referral Process:

- The SAT process begins with the teacher (parents may also request to initiate the process).

- The teacher observes and subsequently documents concerns in the classroom.

- The teacher contacts the parents with concerns, gathers more information from home and documents any parent concerns.

- If the strategies developed between the classroom teacher and home does not improve the concerns, the teacher will complete the Initial Referral Form.

- The Initial Referral Form is submitted to the SAT Team Leader. The team leader will then schedule the first team meeting.

- All stakeholders (teachers, parents, students when appropriate, etc) will attend the SAT meetings.

- During the first SAT meeting an Action Plan will be developed and implemented, and all timelines will be established.

Role of the SAT Leader:

- Communicate to staff, parents and student about the referral process.

- Communicate to the SAT when the meetings will be held; date, time and place.

- Organize the meeting – collect all necessary information from all of the stakeholders.

- Lead the team through the development of the action plan and development of strategies.

- Establish follow-up meetings and guide through the process until concluded.

- Incorporate Special Education staff as a team resource.
SAT Team Member Responsibilities:

• Attend all SAT meetings

• Assist with developing Action Plan strategies

• Share insight and information about the students

Administration’s Responsibilities:

• Establish the SAT process

• Contact parents to let them know a SAT referral has been made

• Attend SAT meetings
# Student Assistance Team Action Plan

**Student:** ____________________________  
**Date:** ________________________________

**GOAL # ____:**

____________________________________________________________________________________________________________________________________________________

<table>
<thead>
<tr>
<th>Date</th>
<th>Objectives</th>
<th>Person(s) Responsible</th>
<th>Target Date</th>
<th>Date Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

24
<table>
<thead>
<tr>
<th>Team Leadership</th>
<th>Intervention Delivery</th>
</tr>
</thead>
</table>
| **District Leadership Team**—(Superintendent, Principal, Special Ed. Director)  
- Establish leadership  
- Assist in implementation of RtI  
- Ensure fidelity of RtI  | **Conducted and/or supervised by certified personnel**  
**Building Leadership Team**—(Principal, Special Ed. Director, General and Sped Teachers, Parents, School Psych, Reading Specialist, Behavior Specialist, SLP, District Rep.)  
- Assist in implementation of RtI at building level  
- Meet regularly to review school wide data  
- Ensure core curriculum and interventions are researched-based  
- Monitor school wide plan  
- Communicate RtI process with entire building  | **Non-certified personnel must be trained and supervised by certified personnel**  
**Interventions conducted for a minimum of 14 weeks and 56 sessions**  
**Minimum 30 minute sessions 4 days a week**  
**At least one intervention change within the 56 sessions, which occurs after seven data points**  
**Intervention based on student need based on diagnostic assessment**  
**Increase intervention intensity if student is not responsive**  |
| **Grade Leadership Team**—(PLC’s, Grade Level Teams, and Faculty Study Teams)  
- Review universal screening data and identify needs  
- Data-based instructional grouping for intervention  
- Implement intervention plan and monitor progress  | |
| **Individual Student Team**—(Parent, Teacher, and Intervention Team)  
- Monitor progress  
- Identify specific problem  
- Plan and adjust interventions  | |

<table>
<thead>
<tr>
<th>Scientifically or Research Based Core Instruction and Interventions</th>
<th>Universal Screening Assessment</th>
</tr>
</thead>
</table>
| Establish criteria and document scientifically or researched based materials and instruction  
Use of scientifically or researched based curriculum, interventions, and materials  
Differentiation of instruction based on student need  
Systematic scope and sequence  | **Screening assessments are valid and reliable**  
**Data collected for all students**  
**Screening at least three times per year; each screen conducted during a two week window**  
**Professional development on administration**  
**Team meetings to analyze data and make decisions**  
**On-going reliability checks**  |

<table>
<thead>
<tr>
<th>Individual Progress Monitoring</th>
<th>Planned Service Delivery Decision Rules</th>
</tr>
</thead>
</table>
| Valid and reliable progress monitoring  
Clearly specified goal based on diagnostic testing  
Progress monitoring graph for each student in Tier II and Tier III interventions  
- Base line for specific skill  
- Aim line  
- Goal line  
- Phase change lines  
- Minimum of seven data points prior to deciding effectiveness of intervention  
- Monitored weekly  | **Clear guidelines to determine student movement between and within tiers**  
**Decision rules provide guidance for evaluation of student goals and changes in performance**  
**Decision rules for multi-tiered intervention selection and responsiveness to intervention are establish before RtI is implemented.**  |
| Data is updated regularly and shared with appropriate personnel | |

<table>
<thead>
<tr>
<th>Parent Involvement</th>
<th>Fidelity of Instruction</th>
</tr>
</thead>
</table>
| Informed of RtI process  
Involved in School Improvement Team  
Informed of student progress  
Involved in intervention meetings  
Involved in home interventions | Plan in place to ensure fidelity is present in core, supplemental, and interventions  
Plan includes who, when, how, and what  |

<table>
<thead>
<tr>
<th>SLD Verification Reporting Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Includes successful adherence and full documentation of the RtI procedures specified in all of the Essential Elements</td>
</tr>
<tr>
<td>Team Leadership</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Scientifically or Researched Based Core Instruction and Interventions</td>
</tr>
<tr>
<td>Individual Progress Monitoring</td>
</tr>
<tr>
<td>Parent Involvement</td>
</tr>
<tr>
<td>SLD Verification Reporting Requirements</td>
</tr>
</tbody>
</table>
INITIAL SCHOOL AGE
REFERRAL PROCEDURES

Case Manager determined and creates SRS student file

Case manager obtains signature on Notice and Consent for Initial Evaluation and gives Parental Rights in Special Education
*Mark areas to be assessed*
(See handout-Guidelines for Notice and Consent for Initial Evaluation

Complete MDT Referral and send to School Psychologist (obtain required signatures)

Finalize Notice & Consent for Initial Evaluation - Print and attach signed copy of signature page

Case Manager:
* Creates MDT form on SRS
* Allows team members privileges

Team members evaluate student

Send Notification of MDT Conference to team members

Case Manager coordinate dates with all team members including: ESU and school personnel, administration, and parent for MDT meeting

MDT Meeting
Determine verification
Case manager enters parent input & prints MDT signature page
Members sign indicating yes/no at MDT meeting
Case Manager completes the signature page on SRS following meeting
MDT remains in Draft form

Finalize Notification of MDT Conference - Print and attach signed copy of Response Form

Does Qualify: See IEP Process

Does Not Qualify: Refer to SAT for Plan of Assistance

Best practice to set up IEP meeting for a future date within specified time limit according to Rule 51

Case Manager finalize MDT within 2 weeks of MDT meeting

School Psychologist place finalized MDT on ESU office server-electronic files

Best Practice to Finalize MDT within 2 weeks of MDT meeting

Parents should be included
INITIAL REFERRAL PROCEDURE

When a student demonstrates significant academic, behavioral, or emotional problems that are interfering with their ability to succeed in school, that student may be referred to the school district's Student Assistance Team (SAT).

No SAT procedure is necessary if low-incidence impairment is suspected, (e.g., visually impaired, hearing impaired, orthopedically impaired, severely mentally handicapped). In these cases, the Multidisciplinary Team Referral and Notice and Consent for Initial Evaluation should be completed and forwarded to the ESU #9 Psychologist.

MDT Referral

After the SAT has determined that options in regular education have been exhausted, the student may be referred for assessment to determine if they qualify as a student with a disability according to Rule 51

- Notice and Consent for Initial Evaluation is completed and signed by the parents/guardians.
- Parental Rights in Special Education must also be given to the student's parents.

If parents refuse consent to the proposed evaluation, then the SAT information, referral form and written evidence of parent refusal are placed in student's cumulative folder and the student is referred back to the SAT team. The school should reconsider the matter and how to serve the student appropriately without special education as an option.

Steps in Referral Process:

1. Be sure you have obtained parent consent for evaluation (Notice and Consent for Initial Evaluation and Parental Rights in Special Education).

2. After obtaining parental consent, complete the Multidisciplinary Team Referral. Send the MDT referral and parental consent to School Psychologist. MDT referral form should be complete except for scores from testing in progress (i.e. speech language and achievement testing). Send these evaluation results to Psychologist when completed.
3. School Psychologist reviews the referral with all documentation, sets evaluation date(s) and notifies the school district. Note: School districts need to contact PT/OT personnel if needed.

**Multidisciplinary Team Procedures:**

1. Evaluation of student is completed.

2. A meeting is held with parents, school staff, and other diagnostic personnel to determine whether or not the student qualifies for special education services as outlined in NDE Rule 51.
   - Consult with MDT team members to determine possible meeting times.
   - Contact the parents prior to MDT meeting to determine a mutually agreed upon date, time and place for the MDT. Document parent contacts.
   - If a date is agreed upon, mail a Notification of MDT Conference to the parents. Document attempts to contact the parents to set MDT meeting date, time and place.
   - Notify other MDT members of agreed upon date/time for meeting.

Note: Required participants are listed in Rule 51 and change according to verification.

3. At the MDT meeting, a Multidisciplinary Team Report is completed and signed by team members.
   - If the multidisciplinary team has determined that the student qualifies as having a disability, an IEP meeting will be held within 30 calendar days to determine what program and related services are needed to meet the student needs.
   - If the Multidisciplinary Team has determined the student does **not** qualify as having a disability, then educational strategies will be generated to share with SAT members for the local school team to develop a Plan of Assistance or to consider a 504 Plan.
Guidelines for "Notice and Consent for Initial Evaluation"

<table>
<thead>
<tr>
<th>1. <strong>Explanation of why the district proposed to evaluate your child:</strong></th>
<th><strong>School Age</strong></th>
<th><strong>Preschool 3-5</strong></th>
<th><strong>Verified Move in</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>The SAT has met &amp; is concerned with (student name)'s progress in (grade level) in the area(s) of (choose one or more: fine or gross motor skills, receptive &amp; expressive language, academic skills, etc.).</td>
<td>(Parents and preschool team) have concerns about (student name)'s (choose one or more: language, learning, fine or gross motor development, etc.).</td>
<td>(Student name) moved into our school district with a verification from another state so testing is needed to determine if (he/she) qualifies for special services according to Nebraska Department of Education Rule 51.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. <strong>Any option the district considered:</strong></th>
<th><strong>School Age</strong></th>
<th><strong>Preschool 3-5</strong></th>
<th><strong>Verified Move in</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide SAT support in the general education setting</td>
<td>No Evaluation</td>
<td>Provide SAT support in the general education setting</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. <strong>Reasons why the above options were rejected:</strong></th>
<th><strong>School Age</strong></th>
<th><strong>Preschool 3-5</strong></th>
<th><strong>Verified Move in</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>SAT recommendations had limited progress</td>
<td>Concerns exist</td>
<td>More information needed</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. <strong>This proposal is based on the evaluation procedures, tests, records, or reports described below:</strong></th>
<th><strong>School Age</strong></th>
<th><strong>Preschool 3-5</strong></th>
<th><strong>Verified Move in</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>SAT information</td>
<td>Parent input, ongoing assessment and observation, doctor referral</td>
<td>Previous evaluation results</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. <strong>Any other factors relevant to this proposal:</strong></th>
<th><strong>School Age</strong></th>
<th><strong>Preschool 3-5</strong></th>
<th><strong>Verified Move in</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>none</td>
<td>none</td>
<td>none</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6. <strong>The estimated amount of time for completing the multidisciplinary evaluation and making the verification decision is:</strong></th>
<th><strong>School Age</strong></th>
<th><strong>Preschool 3-5</strong></th>
<th><strong>Verified Move in</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>45 school days</td>
<td>45 school days-Below Age Five 3-5 45 calendar days-Below Age Five Birth-3</td>
<td>45 school days</td>
<td></td>
</tr>
</tbody>
</table>
# Guidelines for "Notice and Consent for Initial Evaluation"

* Mark boxes or put an "x" by the areas that will be tested. * DO NOT PUT NAMES OF TESTS.

<table>
<thead>
<tr>
<th></th>
<th>School Age</th>
<th>Preschool 3-5</th>
<th>Verified Move In</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Academic</strong></td>
<td>Evaluation of student’s present level of performance in reading, math and writing. OR This area will not be evaluated.</td>
<td>Evaluation of the child's development in the areas of pre-reading, pre-math, and pre-writing. OR This area will not be evaluated.</td>
<td>Same as School Age or Below Age 5.</td>
</tr>
<tr>
<td><strong>Intellectual</strong></td>
<td>Evaluation of the student's ability to learn, reason, and problem solve. OR This area will not be evaluated.</td>
<td>Evaluation of the child's ability to learn, reason, and problem solve. OR This area will not be evaluated.</td>
<td>Same as School Age or Below Age 5.</td>
</tr>
<tr>
<td><strong>Perceptual &amp; Motor</strong></td>
<td>Evaluation of the student's fine motor skills such as cutting, writing, grasping, feeding, etc. OR This area will not be evaluated.</td>
<td>Evaluation of the child's fine motor skills such as cutting, writing, grasping, feeding, etc. OR This area will not be evaluated.</td>
<td>Same as School Age or Below Age 5.</td>
</tr>
<tr>
<td><strong>Social &amp; Emotional</strong></td>
<td>Evaluation of the student's interactions with the environment such as interaction with objects and people, adjustment to change, attention, etc. OR This area will not be evaluated.</td>
<td>Evaluation of the child's interactions with the environment such as interaction with objects and people, adjustment to change, attention, etc. OR This area will not be evaluated.</td>
<td>Same as School Age or Below Age 5.</td>
</tr>
<tr>
<td><strong>Speech &amp; Language</strong></td>
<td>Evaluation of the student's verbal and non-verbal communication skills such as speaking, listening, writing, gesturing, using body language, etc. OR This area will not be evaluated.</td>
<td>Evaluation of the child's verbal and non-verbal communication skills such as speaking, listening, writing, gesturing, using body language, etc. OR This area will not be evaluated.</td>
<td>Same as School Age or Below Age 5.</td>
</tr>
<tr>
<td><strong>Other</strong></td>
<td>Evaluation of functional vision skills OR Audiological evaluation OR This area will not be evaluated.</td>
<td>Evaluation of functional vision skills OR Audiological evaluation OR This area will not be evaluated.</td>
<td>Same as School Age or Below Age 5.</td>
</tr>
</tbody>
</table>

Children Ages 3-5: When psychological and speech language evaluations are included, mark the following: Academic, Intellectual, Social Emotional, Speech Language. When an OT and/or PT evaluation is included mark the following: Perceptual-Motor

8/23/11
SCHOOL AGE RE-EVALUATION PROCEDURES

Best Practice to evaluate all verified students within the final 2 years of education

IEP team reviews data
Determination is made for:

Testing

No testing

Case Manager completes Determination

Case Manager:
* Sends Notice & Consent of Re-evaluation and gives Parental Rights in Special Education (SPED-03)
* Prints draft copy of signature page
* Includes Response Form
* Finalizes Notice & Consent of Re-evaluation *Prints and attaches signed copy of signature page
* Creates MDT signature page
* Mark ONLY areas to be assessed (refer to handout:

Evaluation and review of data completed

Case Manager:
* Coordinates dates for MDT meeting
* Sends Notification of MDT Conference to parents and team members

Best Practice - School psychologist attends MDT if a change of verification occurs or upon request

MDT Meeting
Determine Verification
Case manager enters parent information & prints MDT signature page
Members sign indicating yes/no at MDT meeting
Case manager completes the signature page on SRS following meeting
MDT remains in Draft form

Finalize Notification of MDT Conference * Print and attach signed copy of Response Form

Case Manager finalize MDT once all information and reports are attached

If Child does not qualify, refer to SAT for Plan of Assistance

If the child does requalifies - complete IEP if appropriate

Psychologists place finalized MDT report on ESU office server

9/2011
## Guidelines for "Notice and Consent for Reevaluation"

<table>
<thead>
<tr>
<th>1. <strong>Explanation of why the district proposes to reevaluate your child:</strong></th>
<th>School Age</th>
<th>Preschool 3-5</th>
<th>Seniors</th>
<th>Additional Related Services for School Age &amp; Below Age Five</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Student name) is due for (his/her) three year reevaluation.</td>
<td>(Student name) is due for (his/her) three year reevaluation.</td>
<td>Reevaluation is needed for post secondary planning.</td>
<td>IEP team has concerns with (choose one or more: communication skills, fine motor skills, gross motor skills, functional vision skills, etc.)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. <strong>Any options the district considered:</strong></th>
<th>Reevaluation without testing</th>
<th>Reevaluation without testing</th>
<th>Reevaluation without testing</th>
<th>No evaluation</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>3. <strong>Reasons why the above options were rejected:</strong></th>
<th>More information needed</th>
<th>More information needed</th>
<th>Current information needed</th>
<th>More information needed</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>4. <strong>This proposal is based on the evaluation procedures, tests, records, or reports described below:</strong></th>
<th>IEP, MDT, assessment information</th>
<th>IEP, MDT, assessment information</th>
<th>IEP, MDT, assessment information</th>
<th>IEP</th>
</tr>
</thead>
</table>

| 5. **Any other factors relevant to this proposal:** | None | None | None | None |
Guidelines for "Notice and Consent for Initial Evaluation"

| No boxes to be marked in SRS. Include information under EACH category EXCEPT for Other; Other will only be used if necessary. |
|-----------------|---------------------------------------------------------------|
| **Birth to 3**  | **Adaptive Development** Information on basic self-help skills through developmental assessment and/or screening, observations, parent reports, etc. |
| **Cognitive**   | Information in problem solving skills and learning rate through developmental assessment and/or screening, observations, parent report, etc. |
| **Physical Development (including vision & hearing)** | Information in coordination of fine & large motor skills with consideration of vision and hearing through developmental assessments and/or screening, observations, parent report, etc. |
| **Social and Emotional Development** | Information on how the child relates to other people in his/her environment through developmental assessment and/or screening, observations, parent report, etc. |
| **Speech and Language (Communication)** | Information in communication, including speaking, listening, gestures, etc through developmental assessment and/or screening, observations, parent report, etc. |
| **Other**       | Information obtained from other health professionals and/or agencies. |
STUDENT TRANSFER PROCEDURES

District is notified that student qualifies for special education
District notifies ESU #9 personnel
District Personnel:
*Obtain parent permission for special education files
*Give Parental Rights in Special Education (SPED-03)

and

MDT Process

Current MDT Report Provided
Appropriate MDT members review MDT
Determine if further assessment is needed

YES
*Complete Notice and Consent of Re-evaluation and give Parental Rights in Special Education (SPED-03)
*Complete evaluation
MDT Meeting

Out of State
Refer to Current MDT Process

Eligible
Refer to Current IEP Process

Not Eligible
*Student is placed in regular education
*Refer to SAT

Complete Notice of Discontinuation on SRS

NO
Written MDT report not provided
Regular education placement - possible referral to SAT

IEP Process

Current IEP NOT Available
*Contact previous school district to obtain IEP
*Have IEP faxed or sent via mail or SRS and document request for records

YES
*Implement IEP immediately with services comparable to those described in the previously held IEP, in consultation with the parents.
*Complete Notification of IEP Meeting
*Put new IEP on SRS (create new IEP or "dupe" previous one)
*IEP meeting is not to be held until eligibility is determined.

NO
Regular education placement - possible referral to SAT

Refer to Current IEP Process

Written MDT report not provided
Regualar education placement - possible referral to SAT

MDT Report NOT Available
Contact previous school district

Written MDT report provided
Refer to Current MDT Process

IEP

Current IEP Provided

District is notified that student qualifies for special education
District notifies ESU #9 personnel
District Personnel:
*Obtain parent permission for special education files
*Give Parental Rights in Special Education (SPED-03)
School Age Referral/Assessment/Re-evaluation/Move-Ins/Refusal of Services

Initial MDT Notice & Meeting

⇒ Rule 51 does not require an initial MDT notice ("Notification of MDT Conference") & meeting

⇒ It is best practice to hold an initial MDT meeting & send a "Notification of MDT Conference" to all MDT members

⇒ It is best practice to develop the IEP/IFSP at a different date after the initial MDT meeting

⇒ "Notification of IEP/IFSP Meeting" is not to be sent with the initial MDT notice

⇒ It is the parent’s choice to hold the IEP/IFSP meeting immediately after an initial MDT meeting

⇒ If IEP/IFSP meeting is held immediately after an initial MDT meeting, the following must be documented on the IEP Notes page or on the IFSP Priorities section:
  o The parents were provided a choice of having the IEP/IFSP immediately after the initial MDT or having the IEP/IFSP at a later date. The parent chose to waive their right to wait to have the IEP/IFSP at a later date.
  o "Notification of IEP/IFSP Meeting" is completed
Adding Related Services

⇒ Related Services (SLP, OT, PT, etc.) can be added to a student’s IEP/IFSP by the IEP/IFSP team at an IEP/IFSP meeting

⇒ IEP/IFSP team determines that additional information or services may be needed
  o Related service provider can document the need for the related service and add documentation and services to the IEP/IFSP
  o Complete Change of Placement Form

OR

  o Related service provider can evaluate the student to determine the need for the related service
    ▪ “Notice and Consent for Reevaluation” is required
    ▪ Evaluation is completed
    ▪ Services are added to IEP/IFSP at an IEP/IFSP meeting
    ▪ No new MDT
    ▪ Complete Change of Placement Form

⇒ Resource Services can be added to the IEP at an IEP meeting OR through evaluation/cross referral process
**Student Move Ins**

**Move in From Another State**

⇒ **Appropriate MDT members review evaluation information to determine if student qualifies according to Rule 51 or if testing is needed**
⇒ New MDT is completed – with or without testing – new MDT date
⇒ Complete Change of Placement Form
  • Initial Nebr. Placement

**Move in From a Nebraska School District**

⇒ **Appropriate MDT members review evaluation information to determine if student qualifies according to Rule 51**
  o MDT is reviewed and accepted – MDT date remains the same
  o MDT team determines new/additional information is needed, complete Notice and Consent for Evaluation.
⇒ Once eligibility is determined an IEP/IFSP is completed with a new IEP/IFSP date
⇒ Complete Change of Placement Form – best practice
Revocation of Consent by Parent

⇒ SPED-21 – “Parent/Guardian Refusal of Special Education Services” – Revised 3/30/09 – revised form includes all parent notifications that school district is required to provide when parents revoke consent

⇒ If parents want to revoke consent for a particular service, the IEP/IFSP team needs to determine that FAPE would still be provided without that service

⇒ If parents revoke ALL special education services, the school age student is referred back to the SAT

⇒ After revoking consent, if parents want special education services, the process of an initial referral is followed including SAT, obtaining permission to test, testing, MDT, etc.

⇒ Complete “Notice of Discontinuation of Special Education Services”, exit as “Returned to Regular Ed” and inform NSSRS school contact
IEP DEVELOPMENT

The IEP meeting includes:

• Current level of educational performance and strengths of the student
• Student input
• Parent input/concerns
• How the student's needs affect involvement and progress in the general curriculum based on results of the most recent evaluations (For preschool children, how the disability affects participation in appropriate activities.)
• Participation in assessments
• Special considerations
• Areas of educational need

Please include information on the current level of educational performance and strengths of the student. This information may be in paragraph or list form but needs to convey accurately the current level of educational performance.

NOTE: If this is an initial IEP or a Multidisciplinary Team Report has been recently written, the MDT report may be attached as part of the current level of performance.

Parent Input

The IEP case manager will contact the student's parent(s) and request input regarding their child.

Examples of questions to parents to gather parent input may include the following:

• What are your hopes and dreams for your child?
• What are your child's strengths?
• What would you like to see happen with your child this year?

Special Considerations (Complete ALL)

If the team determines that a specific consideration does not apply to the student, indicate by using “Considered but not necessary at this time.”

1. Behavior-- A behavior plan should be attached when the student exhibits extreme behaviors or patterned behaviors impede the student's ability to learn.

2. Limited English Proficient--Consider language needs with relation to educational performance.

3. Blind or Visually Impaired--Consider current or future need for Braille instruction.

4. Consider communication needs for all students.

5. Consider need for assistive technology device or service and provide an explanation if a device or service is necessary.

Present Level of Academic Achievement and Functional Performance

The IEP team will provide an explanation of how the disability effects involvement and progress in the general curriculum.

Examples:

• Mobility may effect participation in sports and/or keyboarding.
• The student may require small group intervention in order to progress in the general curriculum.

9/2011
Measurable Annual Goal
These pages of the IEP document measurable annual goals as determined by the IEP team. In addition, progress reports are sent to parents on a regular basis.

• Annual goals must match the educational needs

Annual goals must be measurable and include the expected behavior as well as the criteria used to measure student progress toward each annual goal.

Short Term Objectives or Benchmarks
The steps necessary to assist the student in achieving the annual goal must be included for students taking Alternate Assessment.

Progress Report
The following areas include documentation of progress toward the annual goal.

• Schedule - Choose Quarterly or suggest your own schedule for evaluation of progress.
• Evaluation Procedures/Instruments - Select evaluation procedures used for the annual goal.
• Person Responsible - Please indicate who is responsible to carry out the instruction for this goal.
• Statement of how student’s progress will be reported to parents - Indicate how student progress will be reported to parents. Progress may be reported by only one method or a combination of methods.

NOTE: Parents need to be regularly informed of student progress at least as often as parents are informed of their non-disabled children's progress.

Services
1. Statement of Special Education and Related Services
• School Age – Student will receive additional reading instructional support to improve vocabulary.
• Preschool – Student will receive instruction in an inclusive environment to provide opportunities for peer interactions.
• Speech/Language – Student will receive specific instruction to improve communication.
• Life Skills – Student will receive instruction through a functional curriculum.

Describe what educational needs of the student cannot be met in the regular class even with adaptations and modifications. Some examples may include the need for: one-on-one instruction; a more restrictive environment for behavior management; physical interventions such as tube feeding, toileting, exercises, and/or rest; additional time on a life skill activity. The student must not only participate but also demonstrate individual progress and advancement in the general curriculum.

2. Special Education Service
Select primary special education service

3. Special Education Related Services
Select all related special education services
4. Supplementary Aids and Services
If this does not apply to the student, indicate by using “Considered but not necessary at this time.”

5. Program Modifications and Accommodations
List and explain any special considerations and accommodations needed in regular education and whether or not special education support is necessary.

   Examples:
   • Extended time to complete tests.
   • Sign language interpreter for participating in regular education classes.
   • Additional and/or paraphrased instructions for seat work.
   • Assistance in completing written work.

6. Assistive Technology Devices or Services
If this does not apply to the student, indicate by using “Considered but not necessary at this time.”

7. Supports for Personnel
Supports for school personnel may include: staff development, consultation, paraeducators, and time for collaboration, etc. The purpose of personnel supports is to assist the child in progressing in the achievement of annual goals, being involved and progressing in the general curriculum, participating in extracurricular and non-academic activities, and being educated and participating with disabled and non-disabled children.

Transportation
School District contracts for transportation:
___________ school district contracts with an outside agency for transportation. If transportation is unavailable, the school district will reimburse parents for mileage.

School District handles their own transportation:
___________ school district provides transportation. If transportation is unavailable, the school district will reimburse parents for mileage.

Assessment
Determine how the student will participate in district-wide assessments and describe any accommodations needed. See the IEP Team Decision Making Guidelines and reference the “Allowable Accommodations document” provided by NDE for NeSA. Accommodations are to be written within the IEP and used through the year. If the student participates in Nebraska standards with extended indicators, provide an explanation specifying the use of the NeSA Alternate Assessment.

Extended School Year Services
ESY is for children with disabilities during periods when school is not in session. When considering ESY Services, reference the NDE TA document. If this does not apply to the student, indicate by using “Considered but not necessary at this time.” or other explanation of why student will not participate.
SAMPLE IEP AGENDA
Discuss agenda items with parents and team members prior to the meeting.

IEP Agenda—Details for IEP Case Manager

Introductions
• Participant introductions & Agenda Overview
• Review confidentiality guidelines
• Explanation of purpose of meeting
• Generic and/or specific outcomes

Present Level of Performance/Strengths and Needs
• Classroom teachers share student’s strengths, concerns, and present level of performance
• Parents share student’s strengths, concerns, and present level of performance
• Prioritize the needs and have them be the Goals

Goals and Objectives
• Establish new goals and objectives based upon strengths and needs
• Be sure to include a goal for each listed need

Program Placement/Services
• Consider LRE
• Be sure to include participation in non-academic/extracurricular activities

Classroom Modifications & Accommodations
• Go over needed modifications and accommodations for student

Transition—if age appropriate
• Post-Secondary goals

Participation in state and district assessment
• Discuss participation in assessment as well as the allowable accommodations needed for the assessment(s)

MIPS
• Parent Signature of consent of MIPS (only for PT, OT, and SLP services)
• Check with PT, OT, and SLP prior to the meeting to see if MIPS applies

Signatures of attendees
IEP MEETING PROCEDURES

PRIOR TO THE IEP MEETING

1. Contact parent prior to IEP due date to determine a mutually agreed upon date, time and place for the IEP.

2. After the date is agreed upon, mail a Notification of IEP Meeting to the parent along with Parental Rights in Special Education. Document attempts to contact parent to set IEP meeting date, time, and place.

3. Be sure all IEP team members have been consulted on the date and time of the meeting. NOTE: Be sure to Refer to Rule 51 to be sure you have included all members of the IEP team (team membership will vary based upon student verification and need.

4. Send Notification of IEP Meeting to all team members.

5. LAST RESORT ONLY—If parents are unable to attend, be sure you have documented all previous attempts to set meeting date, time and place.

6. Develop and print the draft of Initial IEP including signature page.

   OR

   If the IEP is a review or update, then review progress and document status on current IEP goals/objectives. Duplicate previous IEP, make changes as needed, and print draft including signature page.

7. If transition age, include measurable post-secondary goal and obtain written permission from parents/guardians to invite outside agency. (Annually)

8. Be sure to complete draft of necessary placement forms prior to the meeting either Notice and Consent for Initial Placement in Special Education Services or Notice for Change in Placement in Special Education Services (if necessary)

DURING THE IEP MEETING

1. Be sure to have the parents sign the Notification of IEP Meeting at the meeting if they have not sent the form to you previously.

2. Conduct the IEP meeting.

3. Obtain signatures of IEP participants.

4. Provide parents with a draft of the IEP and signature page.
5. As a result of the IEP meeting, complete the Notice and Consent for Initial Placement in Special Education Services (if Initial) OR complete the Notice for Change in Placement in Special Education Services (if needed.)

*See Sample IEP agenda and IEP Development

FOLLOWING THE IEP MEETING

1. Finalize the IEP on SRS and send to parents.

2. Finalize any notices including Notification of IEP Meeting, Notice and Consent for Initial Placement in Special Education Services or Notice for Change in Placement in Special Education Services and send to parents.

*Best Practice indicates that the final IEP needs to be sent to parents within 5 school days.
Secondary Transition Procedures

Transition activities begin by the age of 16. Best practice begins at age 14.

Summary of Performance (SOP) needs to be completed senior year or at termination of IEP

Measurable Post-Secondary Goals
Based on student’s vision statement and transition assessments

Transition Services/Supports:
- Instruction
- Course of Study
- Related Services
- Community Experiences
- Development of Employment
- Daily Living
- Functional Vocational Evaluation

Interagency Linkages:
- Vocational Rehabilitation
- Developmental Disabilities, etc.

Graduation Options:
Address Prior to Graduation

Annual Goals
Relates back to Measurable Post-Secondary Goals

IEP
Secondary Transition

**Federal Requirements of Transition**

- IDEA maintains the requirement that transition be included in a student’s IEP beginning not later than the first IEP to be in effect when the child is sixteen (16) and updated annually thereafter. As best practice, ESU #9 recommends starting transition at the age of fourteen (14).

- Transition is the term for the “bridge” between school and adult life for students with disabilities. This is the time to be used for preparing students for life after high school and includes planning for post-secondary education or training, employment, and community living.

- The transition plan is to focus on the student’s school courses and provide details on how instruction and community experiences will be provided to prepare the student for adult living and employment.

**The IEP must include:**

- **Measurable Postsecondary Goals**
  - IEP team must identify and include measurable postsecondary goal(s) based on student’s vision statement and age appropriate transition activities related to training, education, employment, and where appropriate, independent living skills

- **Team Members**
  - Student
    - If student does not attend, get his/her input
  - Parents/Guardians
  - Regular Education Teachers
  - Special Education Director/Principal
  - Counselor
  - Transition Specialist
  - Outside Agencies-Vocational Rehabilitation or Developmental Disabilities
    - In order for an outside agency to attend an IEP meeting: Special Education Teacher must get **written permission prior** to the IEP meeting from parents/guardians every year. This must be done when setting up the IEP meeting.

- **Transition Services/Supports**
  - Instruction
    - Activities/strategies that are necessary to prepare for and take part in college, continuing education, or further skill training.
  - Course of study
    - Classes/activities that are determined necessary to reach the goal(s).
  - Related Services
    - Activities/strategies in this area should consider the current and projected related service needs of the student.
  - Community Experiences
    - Activities/strategies listed in this area emphasize community experiences generally provided outside the school building.
- Development of Employment
  - Activities/strategies listed in this area focus on development of work-related behaviors, job seeking and job maintenance skills, career exploration, skill training, and actual employment.
- Daily Living
  - Activities students will be doing every day which may include preparing meals, budgeting, maintaining a residence, paying bills, etc.
- Functional Vocational Evaluation
  - Activities that will help determine vocational interest and skills.

- Graduation and Participation in Graduation Ceremony (see flowchart)
  - Option 1
    - A student completes a standard course of study based upon meeting all requirements for graduation and IEP/transition goals.
  - Option 2
    - A student completes a standard or modified course of study but not the IEP/transition goals.
  - Option 3
    - A student completes his/her IEP/transition goals but not the standard course of study.

Summary of Performance (SOP)
- Needs to be completed in conjunction with the student by the end of senior year or at termination of IEP
- Do Not include any test scores

Discontinuation Notice
- Discuss at IEP meeting
- Add date of graduation
GRADUATION AND PARTICIPATION IN GRADUATION

Option 1
Completion of standard course of study and IEP/transition goals -usually age 18

Regular signed diploma and goes through graduation ceremony with peers

Option 2
Completes standard or modified course of study but not IEP/transition goals

Does NOT receive regular signed diploma but can go through ceremony with peers

Option 3
Student completes IEP/transition goals but not the standard course of study

Does NOT receive regular signed diploma but can go through ceremony with peers

Student receives a signed regular diploma when IEP is terminated due to student reaching age 21 by the end of the school year or student completes IEP transition goals

9/2011
GRADUATION CONSIDERATIONS

- Graduation plans must be a part of all IEPs for students 16 and over. Graduation should be considered in developing the course of study and reviewed annually.

- The receipt of a signed, regular diploma terminates the service eligibility of students with special needs.

- All diplomas awarded by a school district must be identical in appearance, content and effect. Symbols or notations may be added to individual student diplomas to reflect official school honors or awards earned by students.

- A student who receives a certificate is eligible to continue receiving special education services until receipt of a signed, regular diploma or until the end of the academic year in which the student turns 21.

- At the exit IEP meeting, the IEP team will review and document that all requirements for receipt of a signed, regular high school diploma have been met.
Discipline
Discipline

ESU #9 Discipline Procedures Flowchart


1. Essential Elements of a Functional Behavioral Assessment
2. Essential Elements of a Behavioral Intervention Plan

Website Resources

3. Nebraska Positive Behavioral Interventions and Support Website (NPBiS)

Form Examples

4. Functional Behavioral Assessment Checklist
5. Functional Behavior Assessment (Description, Function, & Behavior Intervention Plan)
6. Functional Assessment Data Collection Summary Form
7. Manifestation Determination Form
DISCIPLINE PROCEDURES

Out of School Suspension

- No IEP meeting needed or change of placement
- 10 days of out of school suspension without special education services provided
- Notify parents and provide Parental Rights in Special Education (SPED-03)
- IEP team meets (prior to the 11th day of suspension) to determine special education services
- *Manifest Determination* *Functional Behavioral Assessment (FBA)* *Services and Placement needs to be addressed*
- 11th day special education services are provided

Best Practice
When a pattern of behavior exists best practice is to complete a Functional Behavioral Assessment (FBA) prior to frequent or long term suspensions

In School Suspension

- No IEP meeting needed or change of placement
- Special education services continue to be provided
- IEP team meets (prior to the 11th day of suspension) to determine special education services
- 11th day special education services are provided

Out of School Suspension

- 10 days of out of school suspension without special education services provided
- Notify parents and provide Parental Rights in Special Education (SPED-03)
- IEP team meets (prior to the 11th day of suspension) to determine special education services
- *Manifest Determination* *Functional Behavioral Assessment (FBA)* *Services and Placement needs to be addressed*
- 11th day special education services are provided

Expulsion

- Drugs, weapons and serious bodily injury
- Remove student to an interim alternative education setting for not more than 45 days
- Notify parents and provide Parental Rights in Special Education (SPED-03)
- *Manifest Determination* *Functional Behavioral Assessment (FBA)* *Services and Placement*
- IEP team meets (prior to the 11th day)
- IEP team determines placement - no manifest needed
- Special education services provided at a site determined by the IEP team
- Expulsion according to school district policy

Please contact ESU #9 Special Ed. Dept. when multiple suspensions or ongoing behavior concerns

Best Practice
When a pattern of behavior exists best practice is to complete a Functional Behavioral Assessment (FBA) prior to frequent or long term suspensions

9/2011
Behavior Definition:

- An objective and behaviorally specific definition/description of the behavior(s) of concern is developed.

Data Collection:

- The scope and comprehensiveness of data collection is tailored to the particular behavior(s) of concern.
- Existing data is reviewed, particularly prior measurable and goal-directed attempts to address the behavior(s) of concern.
- Both qualitative and quantitative data are collected and considered.
- Strengths or areas of competence are identified.
- Data collection is individually tailored.
- Data collection procedures are valid and reliable.
- Information is collected and considered in a culturally competent manner.
- Additional information is collected when needed.
- When relevant, data is collected from multiple settings, i.e., school, home, and community.
- When relevant, diagnostic/descriptive information is collected through collaboration with professionals/agencies external to the school.

Analysis:

- Multiple sources of relevant information are considered, including:
  - The setting(s) in which the behavior(s) occurs
  - The specific behaviors of the student
  - Student traits, including personal/affective characteristics

- Analysis focuses on:
  - Understanding the purpose and function of the behavior(s) of concern;
  - The individual’s social, emotional and behavioral functioning in relationship to expectations;
  - The development of interventions; and
  - The identification of needed supports.

Communication with parents throughout the functional behavioral assessment process is critical.
**Intervention Planning and Implementation:**

- There is a clear link between the functional behavioral assessment data collected and the intervention(s) selected.
- The intervention strategies are selected based on the nature of the defined problem, parent input, and professional judgments about the potential effectiveness of strategies.
- Specific target goals are written which clearly describe projected improvement or remediation of the problem.
- Specific target goals are directly related to the student’s present level of educational performance.
- Specific target goals are written that are clearly related to accomplishment of the goal.
- Target goals and objectives include strategies that will increase positive behavior and decrease undesirable behavior, including planned disciplinary procedures, if necessary.
- Strategies for generalizing and maintaining positive behavior outside of the training situation are included.
- The behavioral intervention plan is implemented with integrity, i.e., interventions are actually implemented in the manner in which they were designed, and consistent with established professional standards and practices.

**Monitoring of Intervention Effects:**

- Student performance data are collected and documented on a regular and frequent basis.
- Modification of the behavioral intervention plan is made as frequently as necessary, based on monitoring information.
- Progress monitoring information in a way that communicates whether the intervention is accomplishing its intended effect.
- Progress monitoring information is used frequently and repeatedly to determine whether the anticipated outcomes for the individual are being met and whether the placement and services are appropriate to the individual’s learning needs.

Communicating with parents is critical throughout the development and implementation of a behavioral intervention plan.
<table>
<thead>
<tr>
<th>Step</th>
<th>Activity</th>
<th>Status</th>
<th>Action Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Collect Information</strong></td>
<td>1. Include key individuals in the initial assessment meetings.</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. Review relevant records.</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3. Collect informal direct observation data.</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3. Interview individuals who have direct experience with the student.</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td><strong>2. Develop Summary Statement</strong></td>
<td>1. Define problem behavior in observable terms.</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. Identify daily routines that are and are not associated with problem behavior.</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3. Identify triggering antecedents events.</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4. Identify maintaining consequence events. Select the ONE, most effective, maintaining reinforcer.</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td>5. Identify possible setting events/establishing operations.</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6. Develop summary statements based on 1. – 5.</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7. Determine level of agreement/confidence individuals have in resulting summary statement.</td>
<td>Y</td>
<td>If agreement/confidence high (4-6), go to Step 3. If low (&lt;4), go back to Step 1 and collect more direct observation data.</td>
</tr>
<tr>
<td><strong>3. Confirm Summary Statement</strong></td>
<td>1. Collect formal direct observation information on behavior, antecedents, &amp; consequences.</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. Determine if direct observation data confirm summary statement.</td>
<td>Y</td>
<td>If summary statement confirmed, go to Step 4. If not confirmed, go back to Step 2. Consider need to conduct formal functional analysis.</td>
</tr>
<tr>
<td><strong>4. Develop Competing Behavior Pathway Summary</strong></td>
<td>1. Identified desired replacement behavior (long term objective).</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. Identify common reinforcing consequences for desired replacement behavior.</td>
<td>Y</td>
<td></td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th><strong>5. Identify Strategies for BIP</strong></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Identified alternative replacement behavior(s) based on function of problem behavior (short term objectives).</td>
<td>Y N</td>
<td></td>
</tr>
<tr>
<td>4. Determine level of agreement/confidence in competing pathway summary.</td>
<td>Y N</td>
<td>If agreement/confidence high, go to Step 5. If low, repeat Step 4.</td>
</tr>
<tr>
<td>1. Select strategies &amp;/or environmental manipulations that neutralize impact of setting events.</td>
<td>Y N</td>
<td></td>
</tr>
<tr>
<td>2. Select strategies &amp;/or environmental manipulations that make triggering antecedents irrelevant.</td>
<td>Y N</td>
<td></td>
</tr>
<tr>
<td>3. Select strategies &amp;/or environmental manipulations that teach student skills that make problem behavior inefficient.</td>
<td>Y N</td>
<td></td>
</tr>
<tr>
<td>4. Select strategies &amp;/or environmental manipulations that make consequences for problem behavior ineffective.</td>
<td>Y N</td>
<td></td>
</tr>
<tr>
<td>5. If necessary, develop additional (beyond current school-wide) crisis prevention &amp; intervention procedures.</td>
<td>Y N</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>6. Develop Implementation Scripts for BIP</strong></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Develop scripts &amp; routines for implementation of BIP.</td>
<td>Y N</td>
<td></td>
</tr>
<tr>
<td>2. Identify who will implement BIP.</td>
<td>Y N</td>
<td></td>
</tr>
<tr>
<td>3. Determine if resources &amp; capacity to implement BIP available.</td>
<td>Y N</td>
<td>If capacity adequate, implement. If resources/capacity inadequate, obtain resources, modify context, &amp;/or adjust implementation requirements.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>7. Develop Evaluation &amp; Monitoring Procedures</strong></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Identify measures to assess impact: (a) target behaviors, (b) social validation, (c) lifestyle, etc.</td>
<td>Y N</td>
<td></td>
</tr>
<tr>
<td>2. Develop schedule for on-going evaluation of implementation impact.</td>
<td>Y N</td>
<td></td>
</tr>
<tr>
<td>3. Develop procedures for assessing accuracy of implementation of BIP.</td>
<td>Y N</td>
<td></td>
</tr>
<tr>
<td>4. Assess progress toward achieving long term objective.</td>
<td>Y N</td>
<td>If adequate progress, continue. If criteria met, develop new objective. If inadequate progress, go back to Step 1.</td>
</tr>
</tbody>
</table>
**Functional Behavioral Assessment: Part 1 (Description)**

**Student Name:** __________________________       **ID:** _____________       **DOB:** __________       **Case Manager:** _______________________

**Data Sources:**
- Observation
- Student Interview
- Teacher Interview
- Parent Interview
- Rating Scales
- Normative Testing

### Description of Behavior (No. ____):

<table>
<thead>
<tr>
<th>Setting(s) in which behavior occurs:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Frequency:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Intensity (Consequences of problem behavior on student, peers, instructional environment):</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Duration:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Describe Previous Interventions:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Educational impact:</th>
</tr>
</thead>
</table>

---

Page ___ of ___
<table>
<thead>
<tr>
<th>Function of Behavior (No. ____)</th>
<th>Specify hypothesized function for each area checked below.</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ <strong>Affective Regulation/Emotional Reactivity</strong></td>
<td>(Identify emotional factors; anxiety, depression, anger, poor self-concept; that play a role in organizing or directing problem behavior):</td>
</tr>
<tr>
<td>☐ <strong>Cognitive Distortion</strong></td>
<td>(Identify distorted thoughts; inaccurate attributions, negative self-statements, erroneous interpretations of events; that play a role in organizing or directing problem behavior):</td>
</tr>
<tr>
<td>☐ <strong>Reinforcement</strong></td>
<td>(Identify environmental triggers and payoffs that play a role in organizing and directing problem behavior):</td>
</tr>
<tr>
<td></td>
<td>Antecedents:</td>
</tr>
<tr>
<td></td>
<td>Consequences:</td>
</tr>
<tr>
<td>☐ <strong>Modeling</strong></td>
<td>(Identify the degree to which the behavior is copied, who they are copying the behavior from, and why they are copying the behavior):</td>
</tr>
<tr>
<td>☐ <strong>Family Issues</strong></td>
<td>(Identify family issues that play a part in organizing and directing problem behavior):</td>
</tr>
<tr>
<td>☐ <strong>Physiological/Constitutional</strong></td>
<td>(Identify physiological and/or personality characteristics; developmental disabilities, temperament; that play a part in organizing and directing problem behavior):</td>
</tr>
<tr>
<td>☐ <strong>Communicate need</strong></td>
<td>(Identify what the student is trying to say through the problem behavior):</td>
</tr>
<tr>
<td>☐ <strong>Curriculum/Instruction</strong></td>
<td>(Identify how instruction, curriculum, or educational environment play a part in organizing and directing problem behavior):</td>
</tr>
</tbody>
</table>
# Behavioral Intervention Plan

**Date:** __________

**Student Name:** ______________________________  
**ID:** ________________  
**DOB:** ________________  
**Case Manager:** ________________________

<table>
<thead>
<tr>
<th>Behavior Number(s)</th>
<th>Expected Outcome(s)</th>
<th>Goal(s)</th>
<th>Intervention(s) &amp; Frequency of Intervention</th>
<th>Person Responsible</th>
<th>Goal/Intervention Review Notes</th>
</tr>
</thead>
</table>

* Review Codes: GA = Goal Achieved | C = Continue | DC = Discontinue  
**Expected Review Dates:** __________ | __________ | __________

**Signatures:** _____________________  
________________________  
________________________  
________________________  
________________________  
________________________

---

Page ____ of ____
**MANIFESTATION DETERMINATION FORM**

Complete this form when:
- A) The school administrator has recommended long term suspension
- B) Short term suspension days have or will exceed ten calendar days
- C) The school administrator has recommended a student be dropped from one or more courses

| Student: ______________________________________________________________ |
| School: ___________________________ Grade __________________________ |
| Birth date: _______________________ Date ________________________ |

**Current Educational Setting(s):**

1. INCIDENT
   - YES NO
   - ___ ___ Was a weapon involved?
   - ___ ___ Were drugs involved?
   - ___ ___ Did severe bodily injury occur?

Summarize the administrative authority’s written findings: _______________________

**NOTE:** The student may be placed in an alternative setting for up to 45 calendar days when drugs, weapons, or serious bodily harm is evident and while a suspension or expulsion is being considered. Before the end of the 45-day period, the IEP team must meet to determine if the behavior that promoted alternative placement is likely to reoccur and whether the student can return to a regular classroom.

2. REVIEW
   - Date of last evaluation: ____________ Disability: _____________________
   - YES NO
   - ___ ___ Does this accurately assess the student’s special needs?
     a. If yes, proceed with the manifest determination.
     b. If no, table this determination. At a regular IEP session re-evaluate and assess proper placement and reset the manifest determination for a tentative date of:

   Comments by staff: ___________________________________________________
   Comments by parents: _________________________________________________

3. FAPE Requirement Determination (Free Appropriate Public Education)
   - YES NO
   - Did the student:
     - ___ ___ have a current IEP?
     - ___ ___ show progress achieving goals before the misconduct?
     - ___ ___ have an appropriate placement before the misconduct?
     - ___ ___ have chronic attendance problems?
     - ___ ___ have a behavior history indicating a need for a Behavior Intervention Plan (BIP), but one did not exist before the review?
     - ___ ___ have a BIP implemented as written
     - ___ ___ show behavior problems not addressed in the BIP?
     - ___ ___ have an appropriate BIP that needs to change as a result of this incident?

Comments by staff: ___________________________________________________
Comments by parents: _________________________________________________
Was the IEP appropriate and implemented as written before this incident?
YES  NO  
____  ____  a. If yes, proceed with the manifest determination
b. If no, the student may not be suspended long-term. Proceed with IEP for placement

4. RELATIONSHIP LINKING ALLEGED MISCONDUCT TO THE DISABILITY
YES  NO  Prior to the misconduct did the student:
____  ____  demonstrate the ability to follow class and school rules?
____  ____  show they could describe what would happen if they engaged in the misconduct?
____  ____  show they were able to control conduct and act in a socially acceptable manner?
____  ____  have adequate communication skills to express their needs?

DETERMINATION
YES  NO  The misconduct had a substantial and direct relationship to the disability.
   a. If yes, the student may no be suspended long term.
   b. If no, the administrative authority may proceed with the long term suspension or expulsion hearing. An IEP team will need to determine placement for the duration of the suspension or expulsion.

---

Signatures of Team Members   Date

___________________________________    __________________
___________________________________    __________________
___________________________________    __________________
___________________________________    __________________
___________________________________    __________________
___________________________________    __________________
____________________________________   __________________
____________________________________   __________________
____________________________________   __________________

---
NeSA Assessments

* = Links only
*NDE Academic Standards Website
*School Age NeSA Tests for Students with Disabilities

Standards

*Reading
*Math
*Science
*Social Studies

Extended Indicators (links only)

*Reading
*Math

Science (link not available at this time on website)
Social Studies (link not available at this time on website)

IEP Decision Making Flowchart

Flowchart (hardcopy included in Sped Handbook)

Allowable Accommodations

Approved Accommodations (hardcopy included in Sped Handbook)
IEP Team Decision Making Guidelines
Nebraska State Accountability (NeSA) Tests
For Students with Disabilities

The student possesses a current IEP

- Accesses grade-level standards with few or no accommodations.
- Benefits from general education classroom strategies.
- Makes adequate grade-level progress.

The student:
- Accesses grade-level content standards with the use of accommodations outlined in the student’s IEP.
- Benefits from general education classroom strategies.
- Uses accommodations demonstrate knowledge and skills.
- Makes adequate grade-level progress with accommodations outlined in the student’s IEP.

The student:
- Accesses curriculum and instruction closely aligned to Nebraska standards with extended indicators.
- Possesses significant limitations, both in intellectual functioning and adaptive behavior, expressed in conceptual, social, and practical adaptive skills.
- Requires extensive, pervasive, and frequent supports in order to acquire, maintain, and demonstrate performance of knowledge and skills.
- Demonstrates cognitive ability and adaptive behavior that prevents completion of general academic curriculum, even with extensive modifications and accommodations.
- May have an accompanying communication, motor, sensory, or other disability.

NeSA GENERAL ASSESSMENT

NeSA GENERAL ASSESSMENT with Accommodations*

NeSA ALTERNATE ASSESSMENT

* See NeSA Approved Accommodations
http://www.education.ne.gov/sped/assessment.html
The purpose of this document is to provide a quick reference for school districts about the following:

1) **Test Administration Practices** --- Changes or adjustments in test administration that are appropriate for all students.

2) **Test Accommodations** ---
   - *For students with IEPs or 504 plans:* Adjustments or adaptations in the test or the testing process that do not change the test expectation, the grade level, or the construct or content being measured. **Accommodations should only be used if appropriate for the student and used during instruction throughout the year.**
   - *For English language learners:* Changes to testing procedures, testing materials, or the testing situation in order to allow the student meaningful participation in an assessment. **Accommodations may be determined appropriate without prior use during instruction throughout the year.**

3) **Test Modifications** --- Adjustments or changes in the test or the testing process that change the test expectation, the grade level, or the construct or content being measured. **Modifications are not appropriate for state testing.**

### Test Administration Practices (appropriate for all students)

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Test administrator reads directions aloud for student and rereads as needed.</td>
</tr>
<tr>
<td>2.</td>
<td>Test administrator provides an audio recording of directions.</td>
</tr>
<tr>
<td>3.</td>
<td>Test administrator OR student highlights important information in test directions.</td>
</tr>
<tr>
<td>4.</td>
<td>Test administrator reads, simplifies, explains, or clarifies directions in English or native language.</td>
</tr>
<tr>
<td>5.</td>
<td>Test administrator provides oral or written directions in native language.</td>
</tr>
<tr>
<td>6.</td>
<td>Test administrator provides distraction-free space or alternate, supervised location for student (e.g., study carrel, front of room, alternate room).</td>
</tr>
<tr>
<td>7.</td>
<td>Test administrator provides commercial dictionary (English or bilingual) for NeSA-W test.</td>
</tr>
<tr>
<td>8.</td>
<td>Test administrator provides graph paper for NeSA-M.</td>
</tr>
<tr>
<td>9.</td>
<td>Test administrator directs/redirects student focus on test as needed.</td>
</tr>
<tr>
<td>10.</td>
<td>Student rereads and/or restates directions in his/her own words.</td>
</tr>
<tr>
<td>11.</td>
<td>Student uses page marker (e.g., bookmark or straight edge) to maintain place.</td>
</tr>
<tr>
<td>12.</td>
<td>Student marks test booklet (e.g., highlight, annotate, strike-through).</td>
</tr>
<tr>
<td>13.</td>
<td>Student reads aloud to self in quiet manner.</td>
</tr>
<tr>
<td>14.</td>
<td>Student takes test at home or in care facility (e.g., hospital) with district supervision.</td>
</tr>
<tr>
<td>15.</td>
<td><em>These tools are available on the Computerized Assessment and Learning (CAL) online system.</em>*</td>
</tr>
<tr>
<td></td>
<td>- Chooser – an arrow to mark an answer</td>
</tr>
<tr>
<td></td>
<td>- Highlighter – a tool to highlight a passage or item</td>
</tr>
<tr>
<td></td>
<td>- Striker – a red line to cross out options</td>
</tr>
<tr>
<td></td>
<td>- Eraser -- a tool to erase the highlights or striker masks</td>
</tr>
<tr>
<td></td>
<td>- Magnifier</td>
</tr>
<tr>
<td></td>
<td>- Mark for Review – a tool that turns items to yellow to be a reminder to return</td>
</tr>
<tr>
<td></td>
<td>- Pause/Resume – a button to pause and begin again</td>
</tr>
<tr>
<td></td>
<td>- Guideline – a tan bar to keep one’s place when reading</td>
</tr>
<tr>
<td></td>
<td>- Color overlay</td>
</tr>
</tbody>
</table>
# Test Accommodations for Students with IEP or 504 Plan

(includes NeSA reading, writing, mathematics, science)

## II. Content Presentation

16. Test administrator turns pages for student.
17. Audio presentation of directions, content, and test items to student (for NeSA-R test, only directions and test items may be read).
   - Test administrator pronounces individual words in directions or test items upon student request.
   - Test administrator reads test aloud verbatim and rereads as needed.
   - Test materials are provided on audiotapes, IPods, CDs, etc. (to be used in conjunction with the paper/pencil test)
   - Audio is computer generated (i.e., screen reader with/without a speech synthesizer).
18. Student uses specialized presentation of test (e.g., color overlay, colored paper, visual magnification device, large print, tactile graphics, Braille). For NeSA-W, if colored paper is used, please call Statewide Assessment Office for additional information.
19. Student uses audio amplification device (e.g., audio trainer, hearing aids, classroom amplification).
20. Student uses acoustical voice feedback device (e.g., WhisperPhone).
21. Interpreter signs directions, content, and test items to student (for NeSA-R test, only directions and test items may be signed).
22. Test administrator increases white space on the page (e.g., less print on a page, increased space between items, use of a template to reduce visible print).
23. Test administrator provides manipulatives to support student understanding of items/response options.

## III. Response

24. Student responds directly in the test booklet or with a Brailler. Test administrator transfers student responses to the answer sheet.
25. Student uses primary mode of communication (e.g., communication device, pointing).
26. Student uses computer, word processor, Brailler, or specialized writing materials to respond to the NeSA-W test prompt.
27. Student responds orally to test items or writing prompt OR uses sign language to indicate responses.
   - Test administrator records student responses. For NeSA-W test, student must indicate the placement of punctuation, capital letters, indentations, etc.
   - Student uses speech-to-text conversion or voice recognition technology.
28. Student uses material/devices to problem solve or organize thoughts/responses.
   - Computation supports (e.g., calculator, addition/multiplication chart, number line)
   - Spelling/grammar device
   - Visual organizer (e.g., graph paper, graphic organizer, semantic mapping software, place marker)
   - Commercial dictionary (NeSA-M, NeSA-S, NeSA-W)

## IV. Timing/Scheduling/Setting

29. Test administrator provides extra time for the NeSA-W test.
30. Test administrator provides multiple and frequent breaks during testing time.
31. Test administrator provides a flexible testing schedule (if testing schedule exceeds two online test sessions, paper/pencil mode should be used).
32. Test administrator changes testing location to increase physical access or use of special equipment (e.g., standing work station, wheelchair accessible space, special desks).

**IMPORTANT INFORMATION**

1) Each student’s IEP or 504 team should determine the NeSA testing mode (online or paper/pencil) most appropriate for the child. This decision should be conveyed to the District Assessment Contact (DAC) for communication through eDirect.
2) Participation in the Alternate assessment is determined by the IEP team and based on “Decision-Making Guidelines.”
3) All accommodations should be specified in the student’s IEP.
Test Accommodations for English Language Learners  
(includes NeSA reading, writing, mathematics, science)

NDE is providing the following Spanish translations in 2010-11:
- NeSA-R – Spanish-translated directions and items in audio and written format (to be used in conjunction with paper/pencil test)
- NeSA-M – Spanish-translated assessment (available in both paper/pencil and online)
- NeSA-W – Spanish-translated prompt
- DISTRICTS MUST USE NDE PROVIDED TRANSLATIONS FOR SPANISH.

All Spanish translations are state scored.

V. Direct Linguistic Support with Test Directions
33. Test administrator reads directions aloud in English and rereads as needed.
34. Test administrator reads directions aloud in native language and rereads as needed.
35. Test administrator provides written directions in native language.
36. Test administrator provides translated audio recording of directions in English or native language.
37. Test administrator simplifies, explains, or clarifies directions in English or native language.

VI. Direct Linguistic Support with Content and Test Items
38. Test administrator reads content and test items verbatim to student in English and rereads as needed (for NeSA-R test, only test items may be read).
39. Test administrator provides a translator to orally translate content and test items verbatim in native language and reads/rereads as needed. For NeSA-R test, this applies only to test items.
40. Test administrator provides translated audio recording (e.g., audiotape/CD/iPod) of content and test items in English or native language. For NeSA-R test, this only applies to test items and should be used in conjunction with the paper/pencil test.
41. Test administrator provides a translator to translate content and test items into written native language (for NeSA-R test, this applies only to test items).
42. Test administrator provides bilingual word list (allowed on NeSA-M and NeSA-S).
43. Test administrator provides word-to-word bilingual dictionary (allowed on NeSA-M, NeSA-S, and NeSA-W).
44. Test administrator provides commercial dictionary (English or bilingual) for NeSA-W test.
45. Student responds orally in his/her native language. A translator records student responses into online system or regular test booklet in English (not allowed on NeSA-W test).
46. Student responds to NeSA-W prompt in native language. In 2010-11, NDE provides writing prompts in Spanish for grades 4 and 8.

VII. Indirect Linguistic Support
47. Test administrator provides extra time for the NeSA-W test. Other NeSA tests are untimed.
48. Test administrator provides multiple and frequent breaks during testing time.
49. Test administrator provides a flexible testing schedule (if testing schedule exceeds two online test sessions, paper/pencil mode should be used).

IMPORTANT INFORMATION
1. Districts may exempt a recently arrived limited English proficient student from the NeSA-R assessment for 12 months or one reporting period. A district must administer the state mathematics, science, and writing tests to recently arrived limited English proficient students.
2. For NeSA, testing in native language is allowable for up to three years.
3. For NeSA-W responses in languages other than English or Spanish, answer documents should be returned to the writing vendor, DRC. The student will be counted as a participant.
Special Education for Non-Public Students
Calculate Proportionate Share

Superintendent completes Proportionate Share Form on NDE school district portal website

Proportionate Share Form determines amount of money to be spent on services for special education students placed in non-public schools

The school district where the non-public school resides provides proportionate share funds

Proportionate share funds are spent only on services - not on evaluation or child find

Consultation

Annual Meeting
* parent representatives from non-public school
* non-public school officials
* public school officials where the non-public school resides

Purpose
* provide input for development of equitable services for non-public special education students
* develop child find process
* determine proportionate share
* consult with non-public school
* provide written affirmation of attendees

Child Find
* completed by school district where the non-public school resides
* child find activities are the same as in the public school
* costs of child find cannot be included in proportionate share expenditures
* evaluations are completed by the school district where the non-public school resides
* information from the child find and/or evaluation can only be shared with written consent by the parent
* re-evaluation is part of the child find obligation conducted by the school district where the non-public school resides
SERVICES TO PARENTALLY PLACED NON-PUBLIC SCHOOL STUDENTS

Attending Non-public School Within the Resident District

- Student receives FAPE
- Services included on IEP
- Resident public school provides district owned or contracted services

Services provided at public school

Services provided at non-public school

Attending a Non-public School Outside the Resident District

- Student elects FAPE
- Services included on IEP
- Resident public school provides district owned or contracted services

Services provided at public school

Services provided at non-public school

- Student elects Equitable Services
- Services included on Equitable Services Plan
  - Equitable Services dependent on consultation plan
  - Equitable Services may include elements of the IEP
  - Equitable Services Plan revised annually
  - Use Equitable Services Plan form - do not use IEP form

Public school where non-public is located provides district owned or contracted services

- Services provided at public school
  - Transportation provided by the school district where non-public school resides
- Services provided at non-public school

Resident school district obtains parent signature for refusal of services. Complete Notice of Discontinuation Form.

9/2011
# ESU #9 Forms

<table>
<thead>
<tr>
<th>PS-01</th>
<th>Below Age 5 Referral</th>
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</thead>
<tbody>
<tr>
<td>PS-02</td>
<td>Transitioning Students from Preschool into School Age Program Letter</td>
</tr>
<tr>
<td><strong>SPED-03</strong></td>
<td><strong>Parental Rights in Special Education (NDE)</strong></td>
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<tr>
<td><strong>SPED-03 (Spanish)</strong></td>
<td><strong>Parental Rights in Special Education (NDE)</strong></td>
</tr>
<tr>
<td><strong>SPED-03 (Vietnamese)</strong></td>
<td><strong>Parental Rights in Special Education (NDE)</strong></td>
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<tr>
<td>SPED-04 (Referral)</td>
<td>Multidisciplinary Team Referral form</td>
</tr>
<tr>
<td>SPED-04--Checklist</td>
<td>School Age MDT Referral Checklist</td>
</tr>
<tr>
<td>SPED-40 (Referral)</td>
<td>Speech/Language Referral form</td>
</tr>
<tr>
<td>SPED-12</td>
<td>Contact Log</td>
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<tr>
<td>SPED-20</td>
<td>Information Release Form</td>
</tr>
<tr>
<td>SPED-23</td>
<td>Record of Access</td>
</tr>
<tr>
<td>SPED-24</td>
<td>Notification of Destruction of Files-Sample Letter</td>
</tr>
<tr>
<td>SPED-28</td>
<td>Notification of SPED file</td>
</tr>
<tr>
<td>SPED-31</td>
<td>Permission to Use Picture</td>
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</tbody>
</table>

## NDE Information

<table>
<thead>
<tr>
<th>NDE Rule 51</th>
<th><strong>Nebraska Department of Education Rule 51 (2010)</strong></th>
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<tbody>
<tr>
<td>NDE Rule 55</td>
<td><strong>Nebraska Department of Education Rule 55 (2006)</strong></td>
</tr>
<tr>
<td>NDE Verification Guidelines</td>
<td><strong>NDE Specific Learning Disability</strong> (2011)</td>
</tr>
<tr>
<td>NDE Residency Wards of the Court</td>
<td>Wards of the courts placed other than district (2011)</td>
</tr>
<tr>
<td>NDE Residency Non Wards</td>
<td>Non-Wards placed for non-educational reasons (2011)</td>
</tr>
<tr>
<td>NDE Consent to invite outside agency</td>
<td>Consent to invite outside agency (2008)</td>
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Downloads are accessible at ESU #9 website: [http://sped.site.esu9.org/sped-forms/](http://sped.site.esu9.org/sped-forms/)

** Links to NDE websites—copies not in handbook **

9/2011