

District #213 - Osakis Public Schools

Total Special Education System (TSES)

Updated 12/13/17

This document serves as the Total Special Education System Plan for Osakis Public Schools in accordance with Minnesota Rule 3525.1100. This plan also includes an assurance for compliance with the federal requirements pertaining to districts' special education responsibilities found in United States Code, title 20, chapter 33, sections 1400 et seq., and Code of Federal Regulations, title 34, part 300. This document is a companion to the Application for Special Education Funds - Statement of Assurances (ED-01350-29).

Carla Ptacek is Osakis Public School District 213's Director of Special Education. Carla Ptacek may be reached at Runestone Area Education District (RAED), 1204 34th Ave. West, Alexandria, MN 56308, and by phone at 320-763-5559.

I. Child Study Procedures

The district's identification system is developed according to the requirement of nondiscrimination as Osakis Public Schools does not discriminate in education on the basis of race, color, creed, religion, national origin, sex, age, marital status, status with regard to public assistance, sexual orientation, or disability.

A. Identification

Osakis Public Schools has developed systems designed to identify pupils with disabilities beginning at birth, pupils with disabilities attending public and nonpublic schools, and pupils with disabilities who are of school age and are not attending any school.

Infant and toddler intervention services under United States Code, title 20, chapter 33, section 1431 et seq., and Code of Federal Regulations, title 34, part 303, are available in Osakis Public School District to children from birth through two years of age who meet the outlined criteria.

The team determines that a child from birth through the age of two years is eligible for infant and toddler intervention services if:

- A. The child meets the criteria of one of the disability categories in United States Code, title 20, chapter 33, sections 1400, et. seq., as defined in Minnesota Rules; or
- B. The child meets one of the criteria for developmental delay in subitem (1) or the criteria in subitem (2) or (3);

(1) The child has a diagnosed physical or mental condition or disorder that has a high probability of resulting in developmental delay regardless of whether the child has a demonstrated need or delay; or

(2) The child is experiencing a developmental delay that is demonstrated by a score of 1.5 standard deviations or more below the mean, as measured by the appropriate diagnostic measures and procedures, in one or more of the following areas:

- (a) Cognitive development;
- (b) Physical development, including vision and hearing;
- (c) Communication development;
- (d) Social or emotional development; and
- (e) Adaptive development.

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

The team shall determine that a child from the age of three years through the age of six years is eligible for special education when:

- A. The child meets the criteria of one of the categorical disabilities in United States Code, title 20, chapter 33, sections 1400 et seq., as defined in Minnesota Rules; or

B. The child meets one of the criteria for developmental delay in subitem (1) and the criteria in subitem (2). Osakis Public Schools District 213 has elected the option of implementing these criteria for developmental delay.

(1) The child:

(a) Has a diagnosed physical or mental condition or disorder that has a high probability or resulting in developmental delay; or

(b) Has a delay in each of two or more of the areas of cognitive development; physical development, including vision and hearing; communication development; social or emotional development; and adaptive development, that is verified by an evaluation using one or more technically adequate, norm-referenced instruments. The instruments must be individually administered by appropriately trained professionals and the scores must be at least 1.5 standard deviations below the mean in each area.

(2) The child's need for special education is supported by:

(a) At least one documented, systematic observation in the child's routine setting by an appropriate professional or, if observation in the daily routine setting is not possible, the alternative setting must be justified;

(b) A developmental history; and

(c) At least one other evaluation procedure in each area of identified delay that is conducted on a different day than the medical or norm-referenced evaluation; which may include criterion referenced instruments, language samples, or curriculum-based measures.

Osakis Public School District's plan for identifying a child with a specific learning disability is consistent with Minnesota Rule 3525.1341. Osakis Area Schools implements its interventions consistent with that plan.

Link I: Eligibility Checklists - Click below

<http://education.state.mn.us/MDE/SchSup/ComplAssist/Monitoring/Checklists/>

B. Evaluation

Evaluation of the child and assessment of the child and family will be conducted in a manner with Code of Federal Regulations, title 34, part 303. It must be based on informed clinical opinion; and must be multidisciplinary in nature, involving two or more disciplines or professions; and must be conducted by personnel trained to utilize appropriate methods and procedures. The evaluation must include:

A. General.

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

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

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

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

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

(2) As used in this part—

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

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

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

(3)

(i) A child's medical and other records may be used to establish eligibility (without conducting an evaluation of the child) under this part if those records indicate that the child's level of functioning in one or more of the developmental areas identified in §303.21(a)(1) constitutes a developmental delay or that the child otherwise meets the criteria for an infant or toddler with a disability under §303.21. If the child's part C eligibility is established under this paragraph, the lead agency or EIS provider must conduct assessments of the child and family in accordance with paragraph (c) of this section.

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

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

(5) All evaluations and assessments of a child and family will be conducted in the native language or according to MN Dept of Education specifications.

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

(1) Administering an evaluation instrument;

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

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

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

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

C. Procedures for assessment of the child and family.

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

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

(ii) Personal observations of the child; and

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

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

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

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

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

The team conducts an evaluation for special education purposes within a reasonable time not to exceed 30 school days from the date the district receives parental permission to conduct the evaluation or the expiration of the 14- calendar day parental response time in cases other than initial evaluation, unless a conciliation conference or hearing is requested.

Osakis Public School District 213 conducts full and individual initial evaluation before the initial provision of special education and related services to a pupil. The initial evaluation consists of procedures to determine whether a child is a pupil with a disability that adversely affects the child's educational performance as defined in Minnesota Statutes, section 125A.02, who by reason thereof needs special education and related services, and to determine the educational needs of the pupil. The district proposing to conduct an initial evaluation to determine if the child qualifies as a pupil with a disability obtains informed consent from the parent of the child before the evaluation is conducted.

Parental consent for evaluation is not construed as consent for placement for receipt of

special education and related services. The District will not override the written refusal of a parent to consent to an initial evaluation or reevaluation.

Evaluation Procedures

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

A. Osakis Public Schools District 213 shall provide notice to the parents of the pupil, according to Code of Federal Regulations, title 34, sections 300.500 to 300.505, that describes any evaluation procedures the district proposes to conduct.

B. In conducting the evaluation, Osakis Public Schools District 213 shall:

(1) Use a variety of evaluation tools and strategies to gather relevant functional and developmental information, including information provided by the parent, that are designed to assist in determining whether the child is a pupil with a disability and the content of the pupil's individualized education program, including information related to enabling the pupil to be involved in and progress in the general curriculum, or for preschool pupils, to participate in appropriate activities;

(2) Not use any single procedure as the sole criterion for determining whether a child is a pupil with a disability or determining an appropriate education program for the pupil; and

(3) Use technically sound instruments that are designed to assess the relative contribution of cognitive and behavioral factors, in addition to physical or developmental factors.

C. Osakis Public School District 213 ensures that:

(1) Tests and other evaluation materials used to evaluate a child under this part are selected and administered so as not be discriminatory on a racial or cultural basis, and are provided and administered in the pupil's native language or other mode of communication, unless it is clearly not feasible to do so;

(2) Materials and procedures used to evaluate a child with limited English proficiency are selected and administered to ensure that they measure the extent to which the child has a disability and needs special education and related services, rather than measure the child's English language skills;

(3) Any standardized tests that are given to the child have been validated for the specific purpose for which they are used, are administered by trained and knowledgeable personnel, and are administered in accordance with any instructions provided by the producer of such tests;

(4) The child is evaluated in all areas of suspected disability, including, if appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities;

(5) Evaluation tools and strategies that provide relevant information that directly assists persons in determining the educational needs of the pupil are provided;

(6) If an evaluation is not conducted under standard conditions, a description of the extent to which it varied from standard conditions must be included in the evaluation report;

(7) Tests and other evaluation materials include those tailored to evaluate specific areas of educational need and not merely those that are designed to provide a single general intelligence quotient;

(8) Tests are selected and administered so as best to ensure that if a test is administered to a child with impaired sensory, manual, or speaking skills, the test results accurately reflect the child's aptitude or achievement level or whatever other factors the test purports to measure, rather than reflecting the child's impaired sensory, manual, or speaking skills, unless those skills are the factors that the test purports to measure; and

(9) In evaluating each pupil with a disability, the evaluation is sufficiently comprehensive to identify all of the pupil's special education and related service needs, whether or not commonly linked to the disability category in which the pupil has been classified.

D. Upon completion of administration of tests and other evaluation materials, the determination of whether the child is a pupil with a disability as defined in Minnesota Statutes, section 125A.02, shall be made by a team of qualified professionals and the parent of the pupil in accordance with item E, and a copy of the evaluation report and the documentation of determination of eligibility will be given to the parent.

E. In making a determination of eligibility under item D, a child shall not be determined to be a pupil with a disability if the determinant factor for such determination is lack of instruction in reading or math or limited English proficiency, and the child does not otherwise meet eligibility criteria under parts 3525.1325 to 3525.1351.

Additional requirements for evaluations and reevaluations

A. As part of an initial evaluation, if appropriate, and as part of any reevaluation under this part, or a reinstatement under part 3525.3100, the IEP team and other qualified professionals, as appropriate, shall:

(1) Review existing evaluation data on the pupil, including evaluations and information provided by the parents of the pupil, current classroom-based assessments and observations, and teacher and related services providers observation; and

(2) On the basis of the review, and input from the pupil's parents, identify what additional data, if any, are needed to determine whether the pupil has a particular category of disability, as described in Minnesota Statutes, section 125A.02, or, in case of a reevaluation of a pupil, whether the pupil continues to have such a disability, the present levels of performance and educational needs of the pupil, whether the pupil needs special education and related services, or in the case of a reevaluation of a pupil, whether the pupil continues to need special education and related services, and whether any additions or modifications to the special education and related services are needed to enable the pupil to meet the measurable annual goals set out in the individualized education program of the pupil and to participate, as appropriate, in the general curriculum.

B. The district shall administer such tests and other evaluation materials as may be needed to produce the data identified by the IEP team under item A, subitem (2).

C. The district shall obtain informed parental consent, in accordance with subpart 1, prior to conducting any reevaluation of a pupil, except that such informed parental consent need not be obtained if the district can demonstrate that it had taken reasonable measures to obtain such consent and the pupil's parent has failed to respond.

D. If the IEP team and other qualified professionals, as appropriate, determine that no additional data are needed to determine whether the pupil continues to be a pupil with a disability, the district shall notify the pupil's parents of that determination and the reasons for it, and the right of such parents to request an evaluation to determine whether the pupil continues to be a pupil with a disability, and shall not be required to conduct such an evaluation unless requested to by the pupil's parents.

E. A district shall evaluate a pupil in accordance with this part before determining that the pupil is no longer a pupil with a disability.

Procedures for determining eligibility and placement

A. In interpreting the evaluation data for the purpose of determining if a child is a pupil with a disability under parts 3525.1325 to 3525.1351 and the educational needs of the child, the school district shall:

(1) draw upon information from a variety of sources, including aptitude and achievement tests, parent input, teacher recommendations, physical condition, social or cultural background, and adaptive behavior; and

(2) ensure that the information obtained from all of the sources is documented and carefully considered.

B. If a determination is made that a child is a pupil with a disability who needs special education and related services, an IEP must be developed for the pupil according to part 3525.2810.

Evaluation report

An evaluation report is completed and delivered to the pupil's parents within the specified evaluation timeline. At a minimum, the evaluation report must include:

- A. a summary of all evaluation results;
- B. documentation of whether the pupil has a particular category of disability or, in the case of a reevaluation, whether the pupil continues to have such a disability;
- C. the pupil's present levels of performance and educational needs that derive from the disability;
- D. whether the child needs special education and related services or, in the case of a reevaluation, whether the pupil continues to need special education and related services; and
- E. whether any additions or modifications to the special education and related services are needed to enable the pupil to meet the measurable annual goals set out in the pupil's IEP and to participate, as appropriate, in the general curriculum.

C. Plan for Receiving Referrals

I. Osakis Public School District's plan for receiving referrals from parents, physicians, private and public programs, and health and human services agencies is attached as **Appendix I**.

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

Osakis Public School District 213 provides a full range of educational service alternatives. All students with disabilities are provided the special instruction and services which are appropriate to their needs. The following is representative of Osakis Public School District's method of providing the special education services for the identified pupils, sites available at which service may occur, and instruction and related services are available.

Appropriate program alternatives to meet the special education needs, goals, and objectives of a pupil are determined on an individual basis. Choice of specific program alternatives are based on the pupil's current levels of performance, pupil special education needs, goals, and objectives, and must be written in the IEP. Program alternatives are comprised of the type of services provided, the setting in which services occur, and the amount of time and frequency in which special education services occur. A pupil may receive special education services in more than one alternative based on the IEP or IFSP.

A. Method of providing the special education services for the identified pupils:

1. Monitoring in the mainstream classroom
2. Academic support provided in mainstream setting
3. Co-Teaching (Regular Education Teacher and Special Education Teacher)
4. Resource support in addition to mainstream classroom
5. Small group instruction in Resource Room
6. One on one services
7. Self-contained academic setting
8. Homebound Instruction
9. Community Based Instruction

B. Services are provided in the following schools:

1. Pre K - Grade 12 Osakis Public Schools, 500 1st Ave. E., Osakis, MN 56360
2. Collaborative Programs
 - A. Runestone Regional Learning Center, 700 Northside Dr. NE, Alexandria, MN 56308
 - B. Grades 6th-8th SOAR Program, 1204 34th Avenue West, Alexandria, MN 56308
 - C. Minnewaska Day Treatment, 500 John Street, Starbuck, MN 56381
 - D. 18-21 Transition Tech, 1204 34th Avenue West, Alexandria, MN 56308

C. Available instruction and related services:

1. Articulation
2. Academic
3. Academic-Functional
4. Academic- Math
5. Academic- Reading
6. Academic-Written Language
7. Autism

8. Behavioral/Social/Emotional
9. Deaf/Hard of Hearing
10. Early Childhood Special Education (ECSE)
11. ECSE Program Support Assistance
12. ECSE Service Coordination
13. ECSE Academic
14. Extended School Year
15. Fluency
16. Functional
17. Interpreting
18. Language
19. Language-pragmatics
20. Developmental Adaptive Physical Education (DAPE)
21. Motor-Fine Motor
22. Nursing
23. Other Health Impaired
24. Occupational Therapy
25. Physical Impairment
26. Sensory

27. Special Transportation
28. Transition
29. Traumatic Brain Injury
30. Vision/Mobility
31. Physical Therapy
32. Mental Health
33. Social Work

III. Administration and Management Plan

Osakis Public Schools District 213 utilizes the following administration and management plan to assure effective and efficient results of child study procedures and method of providing special education services for the identified pupils:

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

Staff Name and Title	Contact Information (phone/email/ mailing address/office location)	Brief Description of Staff Responsibilities relating to child study procedures and method of providing special education services
<p>Carla Ptacek, Director of Special Education Services</p>	<p>1204 34th Ave. W., Alexandria, MN 56308</p> <p>Phone: 320-763-5550</p> <p>cptacek@alexandria.k12.mn.us</p>	<p>The Director is responsible for the overall operation of Special Education in alignment with the District Mission, Core Values, and Strategic Directions. The Director facilitates the Lead Teacher team meetings ensuring that all current special education requirements are understood and being implemented.</p>
<p>Lead Teacher(s) Laura Radtke</p>	<p>500 1st Ave. E., Osakis, MN 56360</p> <p>Phone: 320-859-2191</p> <p>lradtke@osakis.k12.mn.us</p>	<p>The Lead Teachers will collaborate with the Director of Special Education Services to ensure that district policies and special education due processes are followed, district and state standards are achieved, and the educational needs of all students are met.</p> <p>The Lead Teachers attend Lead Teacher meetings ensuring that all current special education requirements are understood. In addition, the Lead Teachers answer</p>

		initial internal questions about complexities of special education laws, statutes, and requirements. If they are unable to answer the inquiries they consult with Carla Ptacek, the special education director.
Michelle Steele, Coordinator of Early Childhood Special Education Services	Early Childhood Education Center 1410 South McKay Ave., Ste. 102, Alexandria, MN 56308 Phone: 320-762-2141 msteele@alexandria.k12. mn.us	Coordinates early childhood special education programming and advises director regarding needs of the program.

B. Due Process assurances available to parents: Osakis Public School District has appropriate and proper due process procedures in place to assure effective and efficient results of child study procedures and method of providing special education services for the identified pupils, including alternative dispute resolution and due process hearings. A description of these processes are as follows:

(1) Prior written notice to a) inform the parent that except for the initial placement of a child in special education, the school district will proceed with its proposal for the child's placement or for providing special education services unless the child's parent notifies the district of an objection within 14 days of when the district sends the prior written notice to the parent; and b) state that a parent who objects to a proposal or refusal in the prior written notice may request a conciliation conference or another alternative dispute resolution procedure.

(2) Osakis Public School District will not proceed with the initial evaluation of a child, the initial placement of a child in a special education program, or the initial provision of special education services for a child without the

prior written consent of the child's parent. A district may not override the written refusal of a parent to consent to an initial evaluation or reevaluation.

(3) A parent, after consulting with health care, education, or other professional providers, may agree or disagree to provide the parent's child with sympathomimetic medications unless medical, dental, mental and other health services are necessary, in the professional's judgment, that the risk to the minor's life or health is of such a nature that treatment should be given without delay and the requirement of consent would result in delay or denial of treatment.

(4) Parties are encouraged to resolve disputes over the identification, evaluation, educational placement, manifestation determination, interim alternative educational placement, or the provision of a free appropriate public education to a child with a disability through conciliation, mediation, facilitated team meetings, or other alternative process. All dispute resolution options are voluntary on the part of the parent and must not be used to deny or delay the right to a due process hearing. All dispute resolution processes are provided at no cost to the parent.

(5) Conciliation Conference: a parent has the opportunity to meet with appropriate district staff in at least one conciliation conference if the parent objects to any proposal of which the parent receives prior written notice. Osakis Public School District holds a conciliation conference within ten calendar days from the date the district receives a parent's objection to a proposal or refusal in the prior written notice. All discussions held during a conciliation conference are confidential and are not admissible in a due process hearing. Within five school days after the final conciliation conference, the district must prepare and provide to the parent a conciliation conference memorandum that describes the district's final proposed offer of service. This memorandum is admissible in evidence in any subsequent proceeding.

(6) In addition to offering at least one conciliation conference, Osakis Public School District informs parents of other dispute resolution processes, including at least medication and facilitated team meetings. The fact that an alternative dispute resolution process was used is admissible in evidence at

any subsequent proceeding. State-provided mediators and team meeting facilitators shall not be subpoenaed to testify at a due process hearing or civil action under special education law nor are any records of mediators or state-provided team meeting facilitators accessible to the parties.

(7) Descriptions of the mediation process, facilitated team meetings, state complaint, and impartial due process hearings may be found in Osakis Public School District Procedural Safeguard Notice, attached as

Link II: Procedural Safeguard Notices Part B & Part C

<http://education.state.mn.us/MDE/SchSup/ComplAssist/ProcSafe/>

IV. Interagency Agreements the District has Entered

Osakis Area School District 213 has entered in the following interagency agreements or joint powers board agreements for eligible children, ages 3 to 21, to establish agency responsibility that assures that coordinated interagency services are coordinated, provided, and paid for, and that payment is facilitated from public and private sources:

Name of Agency	Terms of Agreement	Agreement Termination/Renewal Date	Comments
Runestone Area CTIC	Appendix II	Ongoing	Established in 2012
Head Start	Appendix III	August 1, 2017- July 30, 2018	Established by district
Region 4- Interagency Early Intervention Committee	http://www.lcsc.org/cms/lib6/MN01001004/Centricity/Domain/106/operating%20procedures-12-18-12.pdf	Ongoing	Established in 2011

Mental Health Collaborative			in 1999
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V. Special Education Advisory Council

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

- A. Osakis Public School District's Special Education Advisory Council is individually established.
- B. Osakis Public School's Special Education Advisory Council is not a subgroup of an other existing board/council or committee.
- C. At least half of Osakis Public School District's parent advisory councils' members are parents of students with a disability.

The District has a nonpublic school located in its boundaries and the parent advisory council includes at least one member who is a parent of nonpublic school student with a disability, or an employee of a nonpublic school if no parent of a nonpublic school student with a disability is available to serve.

Each local council meets no less than once each year.

- D. Osakis Public School's Special Education Advisory Council meets three times per year, once between September and November, once between December and February and once between March and June.
- E. The operational procedures of the Osakis Public School District's Special Education Advisory Council are attached as **Appendix V: At end of manual.**

VI. Assurances

Code of Federal Regulations, section 300.201: Consistency with State policies. Osakis Public School District, in providing for the education of children with disabilities within its jurisdiction, has in effect policies, procedures, and programs that are consistent with the

State policies and procedures established under sections 300.101 through 300.163, and sections 300.165 through 300.174. (Authority: 20 U.S.C. § 1413(a)(1)).

Yes: Assurance given

Appendix I

Referral Process

Referral Process for Students Birth to Pre-K

Local health, education, and social service agencies must refer children under age five who are known to need or suspected of needing special instruction and services to the school district. A full range of education programs and services will be provided for children with a disability.

Primary referral sources include:

- Hospitals, including prenatal and postnatal care facilities;
- Physicians;
- Parents;
- Day Care programs;
- Local educational agencies;
- Public Health facilities;
- Other social service agencies; and
- Other health care providers.

Districts use the following referral process for students between birth to pre-kindergarten:

Referral is the formal, ongoing process for reviewing information related to children who show signs of needing special education services. The referral process includes reviewing screening information and deciding whether or not to conduct an evaluation. A referral may be made by anyone who has a concern.

The individual taking the referral:

- a. Gathers as much information as possible from the referral source and completes the form entitled ECSE Referral Form.

b. There may be arrangements for a home visit to be conducted. This may be an ECSE teacher, a public health nurse, a social worker or a combination of personnel depending upon the known priorities of the child and family.

Reminder: Birth-2: Once the agency receives a referral and has determined the need for an evaluation, the team will complete the evaluation activities and hold an Individual Family Service Plan (IFSP) meeting within 45 calendar days. The 45 day "clock" begins when a phone call of referral is made to the public agency. **Ages 3-5:** Evaluations for children over age three must be completed within 30 school days once written permission is obtained.

Activities for Initial Home Visit:

A. Complete the ECSE Referral Form and Individual Releases for Exchange of Information. Following the initial home visit, give a copy of each form to the parent along with the Infant and Toddler Intervention Procedural Safeguards Notice (Part C) and Part B Notice of Procedural Safeguards.

B. Interview the parent(s)/guardian(s) to gather information needed to complete the correct form: Family Questionnaire: birth - 6 months, Family Questionnaire: 6 months - 12 months, Family Questionnaire: 12 - 18 months, Family Questionnaire: 18-24 months, Family Questionnaire: 24-36 months, Preschool Family Questionnaire and any other informational document desired by the resident district.

C. A Prior Written Notice is required to conduct a developmental screening unless the child was referred from a screening activity such as Early Childhood Screening, Child and Teen Checkup, or a Head Start screening.

D. Summarize the results of the screening and discuss next steps with parent(s)/guardian(s):

If the results of the screening and observation, combined with the information gathered from the parent, indicate no concerns, suggest local resources available to the family. Always leave a contact name and phone number.

OR

If the results of the screening and observation, combined with the information gathered from the parent, indicate no concerns at this time but suggest that

it would be beneficial for additional services, referrals to other agency programs should be made.

OR

If an educational evaluation is indicated, explain next steps to parent. Offer an opportunity for questions and, if possible, schedule a visit to plan the evaluation.

F. When necessary, identify an interagency service facilitator/coordinator.

Part C Service Coordination

Once the public agency receives a referral, a service coordinator is appointed to carry out coordination activities on an interagency basis. Service coordination must promote a family's capacity and competency to identify, obtain, coordinate, monitor, and evaluate resources and services to meet the family's needs.

Service coordination activities include:

1. coordinating the performance of evaluations and assessments;
2. facilitating and participating in the development, review, and evaluation of individualized family service plans;
3. assisting families in identifying available service providers;
4. coordinating and monitoring the delivery of available services;
5. informing families of the availability of advocacy services;
6. coordinating with medical, health, and other service providers;
7. facilitating the development of a transition plan at least 90 days (child is 2 years 3 months - 2 years 9 months of age) before the time the child is no longer eligible for early intervention services, if appropriate;
8. managing the early intervention record and submitting additional information to the local primary agency at the time of periodic review and annual evaluations; and

9. notifying a local primary agency when disputes between agencies impact service delivery required by an IFSP.

Part B Referral Process for Public School Students Ages 5-21

General Education Teachers can effectively meet some of the needs of students with learning and behavior problems within the general education classroom. Situations arise, however when a teacher needs a support system to help with students who present unique learning and adjustment problems. The Osakis School District has Grade Level Teams (GLTs) which meet monthly. The GLTs may assist general educators in solving these problems by determining appropriate pre-referral interventions. Pre-referral interventions help determine if the student's learning problem is specific to the student or a result of the method of instruction or other classroom variables. Grade Level Team meetings are particularly important in creating a partnership between the school and family; it is an opportunity to collect information about the student.

The individual buildings within the district have each developed a child study procedure for their staff. The main function of the team is to provide an orderly and systematic procedure to identify and monitor students at risk of academic or behavioral difficulties by:

- Behaviorally clarifying the presenting problem
- Pulling together and considering existing information as it relates to the presenting problem
- Gathering additional information within the general education setting utilizing general education personnel and/or procedures
- Determining appropriate course of action attempting to resolve the presenting problem
- * **Developing Interventions**
- Recommending when special education assessment seems appropriate.

The Grade Level Teams are generally composed of regular education teachers, counselor or school social worker, building principal, psychologist/sped services coordinator, and others as appropriate such as licensed special education personnel, speech clinician etc. Osakis School District has combined the functions of the teams

to include Early Intervention Services (EIS) and Section 504 referrals as well as referrals for special education.

Individual buildings use the following referral process for students between the ages of 5 and 21:

1. A concern is identified by a parent or teacher;
School districts are under an obligation to respond to either a verbal or written request for evaluation. The U.S. Office of Special Education and Rehabilitative Services (OSERS) clarifies this point:

A school professional may ask that a child be evaluated to see if he or she has a disability. Parents may also contact the child's teacher or other school professional to ask that their child be evaluated. This request may be verbal or in writing. Parental consent is needed before the child may be evaluated. Evaluation needs to be completed within 30 school days after the parent gives consent.

2. Information is gathered on the student using the Student Summary Sheets and FAST data (through the ADSIS Program); and

3. At least 2 pre-referral interventions are conducted and results are documented.

*There are situations when a student's special education evaluation team may waive the pre-referral intervention requirements. This may include a student who enters the district with a documented history of blindness, deafness, cognitive delay, paraplegia, autism, traumatic brain injury, or a student whose disability is well documented or has had an IEP in the last 12 months. Parents may also request an evaluation. The district is obligated to conduct the evaluation if there is evidence of an educational deficit. The district needs to provide in writing through a prior written notice to parents that the child is making adequate educational progress as per MDE guidelines if the district determines an educational assessment is not appropriate.

4. If concerns persist and performance is discrepant from classmates/norms, the grade level team determines interventions, assesses progress monitoring data, and whether to initiate a special education referral.

5. The GLT reviews pre-referral information and interventions and may contact parent, teacher(s) or others for additional information.

The team should consist of the following personnel whenever feasible:

- A. licensed special education staff in the area of the suspected disability;
- B. a person knowledgeable in evaluation for the specific disability;
- C. psychologist/special services coordinator
- D. the referring person (when appropriate)

* Parents must be provided with the opportunity to participate in the decision-making when their child is being considered for special education evaluation. The parent must be notified of the intent to develop an evaluation plan. It is recommended that the parent and classroom teacher discuss concerns regarding the student prior to implementing interventions, to review the interventions already attempted, and to discuss the potential need for evaluation. The district staff assigned will provide the parent with an opportunity to have any questions or concerns answered about the intervention process, progress monitoring, and the evaluation process and the instruments used.

If the parent wishes to be a part of the planning process but is unable to attend the meeting, the case manager should seek input and provide the parent with an opportunity to have questions answered. Attempts to include the parent in the meeting and/or opportunities for participation should be documented on the student's Parent Contact Documentation.

Referral Process for Non-Public or Home School Students

1. The parent, non-public school staff or others identify a concern regarding a student by contacting the principal at the student's neighboring school.
2. The building principal or teacher from the neighboring school will contact the district principal or special services coordinator.
3. A team meeting will occur with district staff and neighboring school staff to review referral information and any previous teacher interventions.
4. The team meeting, which will involve the classroom teacher, determines if additional interventions are appropriate or more data is needed.

a) If pre-referral interventions are implemented the team will monitor effectiveness of the interventions and systematically review the student's progress.

b) If the decision is for an evaluation for special education, a special education teacher is assigned as case manager and an evaluation determination is made and additional evaluation team members identified.

5. If the student is evaluated for special education and found eligible for services an IEP is developed and services initiated. If the student is found ineligible for special education services, the team considers other options or recommendations.

6. If the team determines not to conduct a special education evaluation, a summary form indicating recommendations is completed and kept on file. Some possible recommendations or options include:

- Continue with further EIS interventions;
- Consider a 504 Plan;
- Consider referral to outside agencies;
- No further action, concern resolved.

The student's parent must be provided an opportunity to participate in this review. Best practice would suggest that the parent be contacted by phone prior to sending a Notice of a Team Meeting in order to schedule a convenient date to have the pre assessment meeting, if a need for assessment is determined.

For children birth to age seven suspected of having a hearing or vision disability, the team must include a licensed teacher in each area of suspected sensory impairment.

NEEDED CRITERIA BEFORE ASSESSING SLD OR OHD (ACADEMICS)

1. In LEAP Program (elementary students) or classroom

- a) 2 unsuccessful interventions over the course of about 12 school weeks
Interventions

1.

2.

3.

2. Grades of D or below in core classes for a year or longer

Grades

Present school year-

Last school year-

3. Not meeting standards on recent MCA test score/s

Recent MCA test scores:

4. Minimal attendance issues

5. Consistency in a public school setting

a) Minimal moves

b) Prior school before Osakis 2 school years consistently/ Osakis school 1 consistent school year

Note: for high school students- a high level intensive academic intervention for 6 weeks may be an option

6. No English Language Learner Issues

7. No major adjustment issues or recent traumas

8. Medication issues ruled out

a) ADHD?

b) Medication?

How long?

Recent change of meds?

9. Vision/hearing check before get perm signed.

10. Clinically behind their grade level. Rule of thumb behind by one and one half grade levels. (i.e. 2nd grade would need to be at mid kindergarten level to qualify) with an Average IQ.

Appendix II

Community Transition Interagency Committee's Operating Procedures CTIC SUMMARY

Minnesota law known as the Interagency Services for Children with Disabilities Act was enacted in 1998. This legislation supports the development and implementation of a coordinated, multidisciplinary, interagency intervention system for children and youth with disabilities ages 3-21 and their families. Districts were mandated to provide coordination of services for children up to age 5 beginning January 2001. Beginning July 2001, districts were mandated to provide these services up to children age 9. Starting July 1, 2002, districts are mandated to coordinate services for children up to age 14. By July 1, 2003, coordinated services shall be offered to all eligible children through age 21.

The goal of this legislation is to streamline service delivery by reducing duplication of services from multiple service providers and by increasing collaboration and cooperation among all partners providing services to children, youth and their families. Coordination of services must be offered to families with children eligible for special education services who are also receiving services from one or more of the following programs/services:

- Maternal and Child Health Program
- Medical Assistance
- Developmental Disabilities Assistance and Bill of Rights Act
- Head Start Act
- Rehabilitation Services
- Juvenile Court Act
- Children's Mental Health Collaboratives
- Family Service Collaboratives
- Family Community Support Plan
- Minnesotacare Program
- Community Health Service Grants
- Community Social Service Act
- Community Interagency Transition Committees (CTIC)
- Services provided under a health plan in conformity with an Individual Interagency Intervention Plan

Standardized Written Plan Procedures

Minnesota law requires that each eligible child or student have access to an interagency intervention service system that coordinates services and programs which will be reflected in a standardized written plan.

Standardized Written Plan: Interagency Coordinated Plan (ICP)

The purpose of children with disabilities ages 3-21 is to identify and organize both formal and informal supports to facilitate the development of a plan that addresses the child and family's concerns. While the actual written document contains the mandated plan requirements of many services and programs, the plan itself should be the product of interaction, collaboration, and partnerships between families and professionals.

The written plan used in the districts will be referred to as an "Interagency Coordinated Plan (ICP). The ICP will include the standard Individual Education Plan (IEP) pages which document team membership, present levels of student performance, student needs, goals and objectives, and services. An additional page (Interagency Coordinated Plan) will be used to document shared outcomes and the agency responsible for the provision of services, which implies funding source. The goal of shared outcomes is to encourage multiple agencies to jointly work on common concerns across multiple environments.

Expectations on Implementing the Standardized Written Plan

Local governance agreement

The standardized written plan is a key element within each local interagency system. The Governing Boards of the Interagency Help Me Grow (HMG) Committees are required to develop an interagency Governance Agreement to support coordination of services for children with disabilities and their families that receive services through the standardized written plan. These Governance Agreements should specify the system of interagency child find; screening, assessment, and other system issues such as dispute resolution. They should also outline specific elements such as service coordination and funding and payment responsibilities for services on the standardized written plan.

Framework for documenting, describing, and coordinating services

The standardized written plan should be used as a framework for interagency teams to document, describe, and coordinate services as well as payment arrangements for each individual child and their family.

Provide services to children with disabilities needing services from two or more agencies

The standardized written plan is designed to be used for children with disabilities ages 3-21 who meet Special Education eligibility criteria and who also receive services from two or more agencies. It should be noted here that a family can choose not to use the written plan and the corresponding coordinated service system, even if their child is eligible to use the written plan and to receive services within the provisions of this document.

Those families who do not wish to use the standardized written plan and coordinated interagency service system must be provided with an agreed upon alternative plan that meets their child's education and service related needs.

CTIC Summary

The Runestone Area Community Transition Interagency Committee (CTIC) meets four (4) times per school year. CTIC is organized by a Chair and a Co-Chair. The Chair representative from a local school district. The Co-Chair is a representative from a local agency that supports transition aged youth. CTIC membership is open to anyone in the community that has an interest in or works directly with transition aged youth in counties of Douglas and Pope. Membership includes:

- **Teachers**
- **Parents/guardians of individuals with disabilities**
- **County Social Services**
- **Employment Specialists**
- **Community/Technical College staff**
- **Program manager for DAC**
- **Public Health**
- **Staff of supported living facilities**

Appendix IV - Separate Document

Appendix III

Purpose

The Special Education Advisory Council (SEAC) shall advise Alexandria Public Schools on the education of children with disabilities. The Essence of the Council's purpose is to provide a broad base of input to Alexandria Public School policies, practices, and issues related to the education of children and youth with disabilities who are between the ages of birth to twenty-one.

Functions

The Special Education Advisory Council shall:

Support, advocate, and advise Alexandria Public Schools on special education matters.

Advise the Director of Student Support Services on special education-related issues and engage in at least one substantial project each year.

Provide a forum for parents and staff to share ideas, identify concerns, and advise Alexandria Public Schools, in order to improve services for children with disabilities.

Provide input into the decision-making process of the special education department. Provide a communication link with the community at large.

Advocate for high-quality educational programs for all learners,

Membership

The SEAC shall be comprised of volunteers with a majority of the members being parents of students with disabilities or individuals with disabilities. Membership on the council shall be composed of individuals involved in, or concerned with the education of children with disabilities and may include:

Parents/guardians of children with disabilities;

Individuals with disabilities;

Teachers;

Representatives of institution of higher education that prepare special education and related services personnel;

Local education officials;

Administrators of programs for children with disabilities;

Representatives of private schools;

Representatives of a vocational, community, or business organization concerned with the provision of services to children with disabilities; and

Representative for area juvenile and correctional agencies.

Terms of Membership

The term of each member shall be 2 years and expire on June 30th of the second year.

Members may reapply and continue on the Council if they so choose.

Meetings

The SEAC shall meet as often as necessary to conduct its business, but not less than three (3) times during each fiscal year at a time and place determined by the Director of Student Support Services. Meetings are open to the public. Workgroups may be delegated to work on projects related to goals. Work groups will report to the large group.

A draft of the meeting minutes will be sent for members to view.

Participation by Non-council Members

Individuals who are not SEAC members are welcome to attend meetings and may address an issue on the agenda after being recognized by the Chair.

Notice of Meetings

Notice of the Special Education Advisory Council meetings shall be sent prior to the meetings. SEAC members may submit agenda items for consideration. A central telephone information number and email of the Director of Student Support Services Department will also be listed in the announcement to assist individuals who wish additional information regarding meeting agendas.

Quorum

A quorum shall consist of a majority of the current active members. An active member will be defined as a member who has attended at least one meeting in the current fiscal year.

Dealing with Conflict

SEAC members come from a variety of backgrounds and perspectives. As a result, differences of opinion will inevitably arise. Resolution of conflict will be accomplished with members using flexibility, compromise, and respect.

SEAC Norms

Attend every meeting

Model good listening- no sidebar conversations

Participate positively- no sarcasm or demeaning comments

Attack the problem, not the person

Agree to disagree

Problem solve rather than problem admiration

Listen actively- don't work on other projects

Laugh, enjoy each other