

# **DISTRICT SPECIAL EDUCATION PLAN**

## **LAFARGEVILLE CENTRAL SCHOOL DISTRICT** LAFARGEVILLE, NEW YORK

### **BOARD OF EDUCATION**

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# INTRODUCTION

## PROGRAM OBJECTIVES FOR STUDENTS WITH DISABILITIES

The LaFargeville Central School District is committed to the development and implementation of an appropriate education for students with disabilities who are residents in accordance with the following program objectives:

- To ensure that students with disabilities have the opportunity to participate in District programs to the maximum extent appropriate to the needs of each student, including access to general education curriculum and extracurricular programs and activities, which are available to all other students enrolled in the District;
- To include students in the least restrictive environment based on individual needs with goals designed to help them build the skills, knowledge, and disposition to meet the standards as set forth by the District and New York State.

## METHODS FOR EVALUATING PROGRAM OBJECTIVES

Program objectives will be evaluated on an ongoing and regular basis. In addition to routine classroom assessments and observations, standards are set forth for measuring student success in their educational programs. All students with disabilities shall have at least annual reviews of progress and programs, resulting in revised comprehensive individual education programs (IEP's).

For students in grades kindergarten through eight (K-8), progress with meeting these objectives will be monitored and measured by performance on District evaluations and report cards as well as the New York State assessments.

For students in grades nine through twelve (9-12), progress with meeting program objectives will be measured by individual success with meeting goals on IEP's as well as attainment of credits required to graduate with a regular high school diploma. Students should have attained at least 5 ½ credits by the end of each high school year.

## **SIMILARITY OF NEEDS**

Whenever students with disabilities are grouped together for purposes of special education, they are grouped by similarity of need. The CPSE and CSE identify educational needs in accordance with the following factors:

### **Academic Achievement, Functional Performance and Learning**

**Characteristics** - The levels of knowledge and development in subject and skill areas, including activities of daily living, level of intellectual functioning, adaptive behavior, expected rate of progress in acquiring skills and information, and learning styles.

**Social Development** - The degree and quality of the student's relationships with peers and adults, feelings about self, and social adjustment of school and community environments.

**Physical Development** - The degree or quality of the student's motor and sensory development, health, vitality and physical skills or limitations which pertain to the learning process.

**Management Needs** - The nature of and degree to which environmental modifications and human or material resources are required to enable the student to benefit from instruction. Management needs shall be determined in accordance with the factors identified in each of the three areas previously mentioned (academic, social, and physical development).

## **PRE-REFERRAL INTERVENTIONS AND STRATEGIES**

In accordance with the IDEA and Part 200 of the Commissioner's Regulations, the District maintains a policy and a plan to establish pre-referral interventions to assist a student's educational progress before consideration of referral to the Committee on Special Education (CSE). In keeping with this policy, it is the responsibility of the school's principals and instructional support team (IST) to investigate all possible avenues of general education support services that would enable the student to achieve the learning standards. Such interventions may include, but are not limited to, Academic Intervention Services (AIS), instructional adaptations, classroom adaptations, extra teacher or teacher aide support, student or volunteer tutorial assistance, counseling support, computer assisted programs, assistive technology, and related services. All school-wide approaches to provide remediation activities for students who are at risk of not meeting state standards or meeting graduation requirements will be considered prior to making referrals to the CSE.

## **Response to Intervention Team**

The Response to Intervention Team (Rtl) at LaFargeville Central School was formed to help identify differences in students as compared to their peers, focus on the child's strengths and weaknesses, and to develop strategies for helping students who are struggling to succeed in their education. The IST is composed of general education and special education teachers, support staff, and administration.

### **A referral should be made to the Rtl Team when:**

- A parent or teacher has a concern regarding one or more of the following areas: academic, behavioral, health/hygiene, social, emotional, physical, or attendance issues;
- A teacher has implemented interventions to resolve concerns but to no avail (with documentation of interventions);
- A parent or teacher is in need of further intervention possibilities and input from peers.

### **IST Procedure**

Before a teacher completes a referral to the IST, he/she will first meet with the appropriate administrator to discuss concerns. The referring party will also notify the student's parents to alert them of concerns and referral. An Rtl referral form is then completed and given to the principal. A meeting of the team is then scheduled, and the referring party brings the class work, records, documentation, or other evidence to present to the team. This must include documentation of interventions already attempted, length of interventions, along with the results of these.

During the meeting phase of the Rtl, information is reviewed by the team and input is provided by other individuals who work with the student. Concerns are then defined and prioritized. Previous interventions as well as parental involvement will be discussed. After gathering and reviewing all available information, a plan of action with additional strategies will be developed. This plan will specify who will be responsible and how the plan will be monitored. The Rtl team will also schedule when a follow-up meeting will take place, and the plan will be modified as necessary. If, after multiple strategies have been attempted with no success, a referral to the Committee on Special Education may be necessary to identify or rule out any type of learning disability.

# COMMITTEE ON SPECIAL EDUCATION

## COMMITTEE ON SPECIAL EDUCATION MEMBERSHIP

At its yearly organizational meeting, the Board of Education will appoint a Committee on Special Education comprised of at least the following mandated members:

- The parents or persons in parental relationship to the student;
- Not less than one general education teacher of the student if the student is or may be participating in the regular education environment
- Not less than one special education teacher of the student, or, if appropriate, not less than one special education provider of the student;
- A school psychologist;
- A representative of the District who is qualified to provide or supervise special education and who is knowledgeable about the general education curriculum and the availability of resources of the District, provided that an individual who meets these qualifications may also be the same individual appointed as the special education teacher or the special education provider of the student or the school psychologist. The representative of the District shall serve as the Chairperson of the Committee;
- An individual who can interpret the instructional implications of evaluation results. Such individual may also be the individual appointed as the regular education teacher, the special education teacher or special education provider, the school psychologist, the representative of the school District or a person having knowledge or special expertise regarding the student when such member is determined by the school District to have the knowledge and expertise to fulfill this role on the committee;
- The school physician, if specifically requested in writing by the parent of the student or by a member of the school at least 72 hours prior to the meeting
- An additional parent member of a student with a disability residing in the District or a neighboring district, provided that the additional parent member may be the parent of a student who has been declassified within a period not to exceed five years or the parent of a student who has graduated within a period not to exceed five years. Such parent is not a required member if the parents of the student request that the additional parent member not participate in the meeting;
- Other persons having knowledge or special expertise regarding the child, including related services personnel as appropriate, as the school District or the parents shall designate.
- If appropriate, the student.

- **COMMITTEE ON SPECIAL EDUCATION MEMBERS**

- Chairperson: Director of Special Education/Elementary Principal or designee
- Parents of the student or persons in parental relationship to the student
- School physician (with notice)
- All special education teachers
- All regular education teachers (if the student is or may be participating in the regular education environment).
- All related service providers
- A school psychologist, whenever a new psychological evaluation is reviewed or a change to a program option with a more intensive staff/student ratio, as set forth in section 200.6(f) (4) of the Regulations of the Commissioner, is considered
- Parent member
- Student, whenever appropriate.

## **PROCEDURES OF THE COMMITTEE ON SPECIAL EDUCATION (CSE)**

### **Request for Referral for Evaluation**

A written request that the school district refer a student for an initial evaluation may be made by:

- a professional staff member of the school district in which the student resides, or the public or private school the student legally attends or is eligible to attend;
- a licensed physician or judicial officer; or
- a professional staff member of a public agency with responsibility for the welfare, health or education of children;
- a student who is 18 years of age or older, or an emancipated minor, who is eligible to attend the public schools of the District

This request should contain the reason for the referral and include any test results, records or reports upon which the referral is based that may be in the possession of the person submitting the referral. The request shall describe in writing, intervention services, programs or instructional methodologies used to remediate the student's performance prior to referral, including any supplementary aids or support services provided for this purpose, or state the reasons why no such attempts were made; and describe the extent of parent contact or involvement prior to the referral. This request should be submitted to the appropriate administrator, who will then provide the appropriate referral form for completion when indicated.

Upon receipt of a request for referral that meets the above requirements, the school District shall, within 10 school days, either: request parent consent to initiate the evaluation; or provide the parent with a copy of such request for referral ; and (1) inform the parent of his/her right to refer the student for an initial evaluation for special education programs and/or services; and (2) offer the parent the opportunity to meet to discuss the request for referral and, as appropriate, the availability of appropriate general education support services for the student, with the building administrator or other designee of the school District authorized to make a referral if a professional staff member of the school District.

## **Referral**

A referral to the Committee on Special Education is the first step to providing special education services. When a referral is made to the CSE, it indicates that there is a reason to suspect that a child may have a disability that adversely affects his/her educational performance. The CSE is responsible for evaluating all school-age students suspected of having a disability, identifying a disability (or determining that no disability exists), and recommending placement and type of special education programs and/or services **within sixty (60) days of the date of receipt of consent for evaluation**. Referrals can be made at any time during the twelve-month year.

***The evaluation process begins when a written referral for evaluation is made by either:***

- the student's parent or person in parental relationship;
- a designee of the District, who shall be administrators or the CSE Chairperson( s).

The completed referral will be submitted to the CSE Chairperson. It should specify the extent to which the child has received any services prior to referral as well as reasons for believing that the disability exists. Any test results, records or reports upon which the referral is based should be attached/included. It must also describe efforts made by the school and the parent(s) to resolve the difficulties leading to referral or to meet the needs of the student in the general classroom setting. The referral form to the CSE used by the District staff will describe intervention services and programs used to remediate the student's performance prior to services, or instructional methodologies, including any supplementary aids or support services, or the reasons why no such attempts were made.

The Committee will then notify the parent(s) that a referral for an evaluation has been received. The CSE will then send notification and consent for evaluation and provide the parent with their procedural safeguards notice. This notice shall also include a request for a social/developmental history if one is not already available as well as the scheduled date for the evaluation to take place.

### **Withdrawal of Referral**

Within ten (10) school days following receipt of CSE referral or copy of a referral, the building principal may decide to meet with the parent/guardian and/or student to discuss educational services presently being offered and to determine whether the student would benefit from additional general education support services as an alternate to special education, including the provision of speech/language services, remedial instruction, and Academic Intervention Services. The professional staff member who made the referral should also attend this meeting. If at the meeting, the parent and the building administrator agree in writing that, with the provision of additional general education support services, the referral is unwarranted, the referral shall be deemed withdrawn, and the building administrator shall provide the Chairperson of the Committee on Special Education, the person who made the referral if a professional staff member of the District, the parent, and the student, if appropriate, with copies of the agreement. All such agreements about withdrawal of a CSE referral must be in writing and must specify the alternative services to resolve the identified learning difficulty of the student and provide the opportunity for a follow-up conference within an agreed period of time to review the student's progress. A copy of the agreement becomes a part of the student's cumulative educational record.



## DISABILITY DEFINITIONS FOR SCHOOL-AGE CHILDREN

The term **student with a disability** means a child with a disability who has not attained the age of 21 prior to September 1<sup>st</sup> and who is entitled to attend public schools and who, because of mental, physical, or emotional reasons, has been identified as having a disability and who requires special services and programs approved by the NYS Education Department. This includes the following classifications:

**(1) Autism** means a developmental disability significantly affecting verbal and non-verbal communication and social interaction, generally evident before age 3, that adversely affects a student's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. The term does not apply if a student's educational performance is adversely affected primarily because the student has an emotional disturbance. A student who manifests the characteristics of autism after age 3 could be diagnosed as having autism if the criteria in this paragraph are otherwise satisfied.

**(2) Deafness** means a hearing impairment that is so severe that the student is impaired in processing linguistic information through hearing, with or without amplification that adversely affects a student's educational performance.

**(3) Deaf-blindness** means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for students with deafness or students with blindness.

**(4) Emotional disturbance** means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a student's educational performance:

- (i) an inability to learn that cannot be explained by intellectual, sensory, or health factors;
- (ii) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
- (iii) inappropriate types of behavior or feelings under normal circumstances;

(iv) a general pervasive mood of unhappiness or depression; or

(v) a tendency to develop physical symptoms or fears associated with personal or school problems.

The term includes schizophrenia. The term does not apply to students who are socially maladjusted, unless it is determined that they have an emotional disturbance.

**(5) *Hearing impairment*** means impairment in hearing, whether permanent or fluctuating, which adversely affects the child's educational performance but that is not included under the definition of *deafness* in this section.

**(6) *Learning disability*** means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which manifests itself in an imperfect ability to listen, think, speak, read, write, spell or to do mathematical calculations. This term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. The term does not include learning problems that are primarily the result of visual, hearing or motor disabilities, of an intellectual disability, of emotional disturbance, or of environmental, cultural or economic disadvantage.

**(7) *Intellectual disability*** means significantly sub-average general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, that adversely affects a student's educational performance.

**(8) *Multiple disabilities*** means concomitant impairments (such as intellectual disability-blindness, intellectual disability-orthopedic impairment, etc.), the combination of which cause such severe educational needs that they cannot be accommodated in a special education program solely for one of the impairments. The term does not include deaf-blindness.

**(9) *Orthopedic impairment*** means a severe orthopedic impairment that adversely affects a student's educational performance. The term includes impairments caused by congenital anomaly (e.g.: clubfoot, absence of some member, etc.), impairments caused by disease (e.g.: poliomyelitis, bone tuberculosis, etc), and impairments from other causes (e.g.: cerebral palsy, amputation, and fractures or burns which cause contractures).

**(10) *Other health-impairment*** means having limited strength, vitality or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment, that is due to chronic or acute health problems, including but not limited to a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia,

epilepsy, lead poisoning, leukemia, diabetes, attention deficit disorder or attention deficit hyperactivity disorder or tourette syndrome, which adversely affects a student's educational performance.

**(11) Speech or language impairment** means a communication disorder, such as stuttering, impaired articulation, a language impairment or a voice impairment that adversely affects a student's educational performance.

**(12) Traumatic brain injury** means an acquired injury to the brain caused by an external physical force or by certain medical conditions such as stroke, encephalitis, aneurysm, anoxia or brain tumors with resulting impairments that adversely affect educational performance. The term includes open or closed head injuries or brain injuries from certain medical conditions resulting in mild, moderate or severe impairments in one or more areas, including cognition, language, memory, attention, reasoning, abstract thinking, judgment, problem solving, sensory, perceptual and motor abilities, psychosocial behavior, physical functions, information processing, and speech. The term does not include injuries that are congenital or caused by birth trauma.

**(13) Visual impairment including blindness** means an impairment in vision that, even with correction, adversely affects a student's educational performance. The term includes both partial sight and blindness.

## EVALUATION AND RECOMMENDATION

The initial evaluation will consist of procedures to determine whether a child is a student with a disability and to determine his/her educational needs. This will include a variety of assessment tools and strategies, including information provided by the parent, to gather relevant functional, developmental and academic information about the student that may assist in determining whether the child is a child with a disability and the content of the student's individualized education program, including information related to enabling the child to participate and progress in the general education curriculum.

The individual evaluation of the referred student will be conducted at no cost to the parent. It will be conducted by a multidisciplinary team or group of persons, including at least one teacher or the specialist with certification or knowledge in the area of the suspected disability. The evaluation will include:

- A physical examination;
- An individual psychological examination, except when a school psychologist determines that further evaluation is unnecessary. Whenever a school psychologist determines that a psychological evaluation is unnecessary, she will prepare a written report,

including a statement of the reasons the evaluation is unnecessary, which shall be reviewed by the Committee;

- An observation of the student in his/her current educational placement;
- A social history;
- Other appropriate assessments or evaluations, including a functional behavioral assessment for a student whose behavior impedes his or her learning or that of others, as necessary to ascertain the physical, mental, behavioral and emotional factors which contribute to the suspected disabilities.

When the evaluation is complete, the results will be reviewed with the child's parents and forwarded to the CSE Chairperson. A CSE meeting will be scheduled with written notice provided to the parents at least five days prior advising them of the meeting.

In addition, the Special Education Office will call the day prior to the meeting as a reminder. If the parent cannot be reached and does not return the call, a second attempt will be made to reach the parent by telephone. Attempts will be documented in the Clear Track data system and on a separate form in the child's file. If the parent or other members are unable to be physically present for their meeting, arrangements will be made to conduct the meeting via telephone conference whenever possible.

## **ELIGIBILITY DETERMINATION**

The Committee on Special Education, including the parents and, if appropriate, the student will meet to review the evaluation information and to determine eligibility for special education. If the child does meet criteria for a disability as defined in regulation, and, if appropriate, an Individualized Education Program (IEP) will be developed.

### **The IEP includes:**

- The classification of the disability and the recommended placement;
- The student's present levels of academic achievement, performance and individual needs - academic, social, physical and management areas including how the disability affects the student's involvement and progress in the general education curriculum;
- Individual measurable annual goals that contain the evaluative criteria, evaluation procedures, and the schedules that will be used to measure progress towards meeting the annual goals; For those students taking the NYS alternate assessment, the IEP shall include a description of the short-term instructional objectives and/or benchmarks that are measurable

intermediate steps between the student's present level of performance and the measurable annual goal;

- Special education and related services and supplementary aids and services to be provided to the student, or on behalf of the student; Program modifications or supports for school personnel that will be provided for the student;
- If a student is not participating in a regular physical education program, the extent to which the student will participate in specially designed instruction in physical education, including adapted physical education;
- If the student will participate in an alternate assessment on a particular State or District-wide or part of an assessment and why the assessment is not appropriate for the student and how the student will be assessed;
- Any individual testing accommodations to be used consistently for the student in the recommended educational program and in the administration of assessments;
- The projected date for the beginning of the services and modifications and the anticipated frequency, location, and duration of these services and modifications; and
- The general education classes in which the student will receive consultant teacher services.

## **Transition Services**

For those students, beginning not later than the first IEP to be in effect when the student is age 15 (and at a younger age if deemed appropriate), the IEP shall include, under the present levels of performance, a statement of the student's needs, taking into account the student's strengths, preferences and interests, as they relate to transition from school to post-school activities. It will also include appropriate measurable postsecondary goals based upon transition assessments relating to training, education, employment and, where appropriate, independent living skills. Transition service needs, such as participation in a vocational education program will also be included, as well as any needed activities to help facilitate movement from school to post-school activities.

Students in LaFargeville Central School will be invited and participate in an informational meeting with their parents, the CSE Chairperson, ACCES-VR representative, special education teachers, and support staff during their junior and senior years. Applications are completed and submitted with adult-normed re-evaluations as part of the transition planning, unless this is not appropriate for the student or parents request that this not take place. As indicated earlier, all re-evaluations will be conducted with prior parent notification and consent.

## **IEP Implementation, Distribution and Placement**

Within sixty (60) school days of the receipt of consent to evaluate for a student not previously identified as having a disability, or within sixty (60) school days of the referral for review of the student with a disability, the Board of Education shall arrange for appropriate special programs and services. If a recommendation is for placement in an approved in-state or out-of-state private school, the Board shall arrange for such programs and services within thirty (30) school days of the Board's receipt of the recommendation of the Committee. Notice of the recommendation will be provided to the parent, including the procedural safeguards notice.

The CSE will send a paper copy of the IEP to the parent and, upon request, any appropriate service providers. All general education teachers, special education teachers, related service providers, and other service providers who are responsible for the implementation of the child's IEP will be notified by the CSE office and provided with access to an electronic copy of the student's IEP prior to the implementation. Any of those mentioned prior who request, may receive a hard copy (paper copy) of this document.

### **Transfer Students**

In the case of a student with a disability who transferred to LCS who had an IEP that was in effect, the IEP from the previous school will be followed as closely as possible until the Committee on Special Education can convene and develop a formal IEP, if appropriate, for LCS. The Committee will determine at the time of the meeting if any additional information or evaluation is necessary in order to determine an appropriate educational program for that child.

### **Annual Review and Re- Evaluation**

The IEP of each student with a disability will be reviewed and, if appropriate, revised, at least annually to determine if the goals for the student are being achieved and if services and supports continue to be appropriate. Prior to conducting any new assessments, parental consent will be obtained. Parents will be notified by mail at least one week in advance of these reviews. In addition, a draft of the IEP, including any testing, reports, or relevant information, will be forwarded to the parent and members of the Committee at least 5 days prior to the meeting. The letter to the parent(s) that is included with the draft IEP will also contain a reminder of the scheduled meeting date and time.

## **Declassification Support Services**

The CSE must evaluate a student with a disability before determining that the student no longer meets eligibility requirements. A copy of the evaluation report and the documentation of eligibility will be provided to the student's parent(s).

When the CSE determines that the child no longer requires special education services, the Committee may recommend declassification support services to the student for the first year the child receives only regular education. These services may include psychological, social work, speech and language services, non-career counseling, or the assistance of a teacher aide or consultant to the classroom teacher. The CSE must also determine if the test modifications previously documented in the child's IEP should continue to be consistently provided to the student for the balance of his/her public school education.

Recommendations for declassification support services and appropriate evaluation information will be forwarded to the appropriate administrator who will determine any additional services that may be appropriate for the child. The administrator will be responsible for ensuring that teachers are aware of any testing modifications and that they are consistently provided until at such point, if appropriate, a team determines that documented modifications are no longer appropriate and necessary to provide that child with access to the general education curriculum.

# ***DISTRICT PROGRAMS***

## **SUMMARY OF DISTRICT PROGRAMS FOR SCHOOL-AGE CHILDREN**

### **Related Services**

Related services means developmental, corrective and other supportive services as are required to assist a student with a disability and includes speech- language pathology, audiology services, interpreting services, psychological services, physical therapy, occupational therapy, counseling services, including rehabilitation counseling services, orientation and mobility services, medical services, parent counseling and training, school health services, school nurse services, school social work, assistive technology services, appropriate access to recreation, including therapeutic recreation, other appropriate developmental or corrective support services, and other appropriate support services. Related services shall be recommended by the CSE to meet specific needs of a student with a disability as set forth in the individualized education program (IEP). The frequency, duration and location of each such service shall be in the IEP, based on the individual student's need for the service. When a related service is provided to a number of students at the same time, the number of students in the group shall not exceed five students per teacher or specialist. A student with a disability may be provided with more than one such service in accordance with the needs of the student. Related services may be provided in conjunction with a regular education program or with other special education programs and services.

LCS presently has two certified counselors, at PK-5 and 6-12, as well as a certified school psychologist on staff to provide counseling services to students, as well as, support for teachers, service providers, and parents. In addition, LCS contracts with the BOCES to provide services of speech/language, occupational therapy, physical therapy, deaf education, audiology, and interpreter services within the District.

**Speech/Language Therapy:** Specialists in speech and language assist school staff and parents with the identification and instruction of students with speech/ language disorders. They provide diagnostic and remedial services for students with articulation disorders, stuttering and voice disorders, expressive and receptive language problems, hearing deficits, cerebral dysfunction, oral and motor disorders and cleft palate. Much of the activity of these specialists involves



observation, individual testing, related conferences with parents and consultations with teachers regarding instructional methods. For students with disabilities determined to need speech and language services, such services shall be provided for a minimum of two 30-minute sessions each week, and the total caseload of such students for teachers providing services shall not exceed 65. LaFargeville Central presently has one full-time speech therapist that is provided with regular oversight by a speech pathologist from BOCES. Currently, our speech therapist works with 21 students with disabilities with speech/language therapy as a related service, and 10 students who receive speech improvement as a regular education service. The therapist also provides consultation support in primary general education classrooms.

**School Psychological Services:** The following major areas of responsibility are assigned to school psychologists: assessment; observation; test administration and interpretation; participation in the Committee on Special Education (CSE), referral, evaluation and placement; monitoring of student progress; consultation with teachers; student counseling; and liaison activities with community agencies and other professionals. Additional functions relating to special education classes include: assisting teachers in the development of interventions to help students in the development of Individualized Education Programs (IEP); monitoring the delivery of services to special education students; conducting re-evaluations; and training teachers in the implementation of new regulations and procedures. At LCS, there are two full-time school psychologists who also serve as chairpersons and co-chairpersons for the Committee on Special Education and Committee on Preschool Special Education, in addition to other duties.

**Counseling Services:** Counseling as a related service will be recommended by the CSE under the following circumstances: an emotional or management difficulty interferes with a student's ability to make appropriate educational gains; the difficulty is one which, in the clinical judgment of the evaluation team, can be addressed through school-related counseling with a qualified professional; and the student does not appear at the present time to require medical intervention or a therapeutic milieu in order to make educational gains. LCS has a certified counselor for grades PK-5 who provides services for students with IEP's, as well as support services for general education students. The PK-5 counselor is responsible for programs, including Character Education, Life Skills, coordinating the buddy program, and other informal group activities as requested and/or needed. LCS also has a certified counselor at the 6-12 level that provides individual counseling as well as group work on preparing students for the transition into the adult world after graduation. Counseling services are also provided by a certified school psychologist in the District.

**Physical Therapy:** Physical therapy is provided in order for a student with a physical disability to benefit from education or to be maintained in the least restrictive environment. The following services may be provided: coordination between medical agencies and professionals serving the student; evaluation of strength, function, motor development and adaptive needs of the student; program planning and treatment programs when indicated; consultation with general education teachers in the mainstreaming process; and supervision and instruction of nonprofessional personnel in dealing with the physical needs of the students. LCS presently contracts with BOCES for a physical therapist part-time. Presently, there are eight students with a disability who have physical therapy as a related service and ten other students who are provided with physical therapy who are not identified through special education.

**Occupational Therapy:** The occupational therapist serves children whose disabilities prevent them from functioning normally within the school environment. The duties of the occupational therapist include individual assessment, increasing strength and quality of movement of the upper extremities necessary for handwriting and other classroom fine motor tasks, modulating a student's sensory responses that interfere with everyday activities, developing the activities of daily living, providing adaptive equipment as necessary and counseling students with disabilities around their participation in activities. The goal of the occupational therapist is to provide appropriate treatment to increase the student's ability to function independently in the school environment. Presently, LCS contracts with the BOCES for occupational therapy services part-time. Our occupational therapist provides services to 14 students with disabilities. 8 other students are receiving related occupational therapy services. In addition, our occupational therapist provides ongoing consultations, screenings, and evaluations, as needed to help children develop skills in fine motor, handwriting, and sensory responses.

**Deaf Education Services:** Deaf education services are designed to provide direct specialized instruction to students with hearing impairments who are enrolled in a general or special education program. Specialized instruction in speech, reading and auditory training are provided by a teacher of the deaf and hard of hearing. These services are necessary in order for students to benefit from their primary educational program. LCS currently has one student with a disability who receives deaf education services. These services are provided in the regular education classroom and in a separate location.

**Audiology Services:** An educational audiologist provides students identified as having a hearing impairment, deafness, or auditory processing difficulties with comprehensive audiological services to reduce the negative effects of hearing loss on learning and to maximize auditory learning and communication skills. Services include hearing evaluations, determination of a student's need for classroom amplification, equipment management, student, staff and parent counseling, and services such as auditory training

**Consultant Teacher Services:** The services of a consultant teacher are recommended for students who are fully integrated into general education classes. The service is available for students in grades kindergarten through twelve who can benefit from instruction in the general education curriculum, and who require limited special services. The consultant is a certified special education teacher who works directly with the student or indirectly (with the teacher) for a minimum of two (2) hours per week. Through collaboration with the general classroom teacher and other specialists, an individualized program is designed to assist the student's learning within the general education setting.

**Resource Room Services:** The Resource Room program consists of identification and diagnostic assessment, small group and/or individualized instruction in basic skills, language, study and organizational skills. Encouragement and emotional support is provided. Ongoing consultation with general education teachers is an integral part of this program. The program serves students in grades K-12. An instructional group which includes students with disabilities in the resource room program shall not exceed five students per teacher. The composition of instructional groups in a resource room program shall be based on the similarity of the individual needs of the students according to present levels of performance in academic, social, physical, and management needs in the classroom. The total number of students with a disability assigned to a resource room teacher shall not exceed 20 students; except that the total number of students with a disability assigned to a resource room teacher who serves students enrolled in grades 7-12 or a multi-level middle school program operating on a period basis shall not exceed 25 students.

Students in the resource room program must receive services a minimum of three (3) hours per week except that the CSE may recommend that for a student who also needs consultant teacher services may receive a combination for not less than three hours per week. Students shall not spend more than 50% of their time during the day in the resource room program.

At present, LaFargeville Central School has three special education teachers working at the elementary level; one provides consultant and resource room services for K-3, a second provides 15:1:1 services and resource room services for some of the students in grades 3-6, and the third teacher is providing consultant and resource room services for students in grades 4-6.

At the secondary level, there are currently two and a half special education teachers. One teacher provides resource room/consultant services to grade 7 and 8 students, another special education teacher services students in grades 9, 10 and 12, and a third teacher (½ time) services grade 11 for resource room and consultant services.

**15:1:1 Special Classes:** The 15:1:1 programs at LCS consist of up to 15 students, 1 special education teacher, and 1 aide. Classes are designed to provide services to students with disabilities who have similar educational, social, emotional, physical, and management needs. The students may receive an adapted curriculum within the 15:1:1 program, be included in the general education classroom, or be provided with a combination of the two. The chronological age range within the special classes of students with disabilities who are less than 16 years of age shall not exceed 36 months. The chronological age range within special classes of students with disabilities who are 16 years of age and older is not limited. Students are included with their nondisabled peers whenever possible to help assure maximum educational benefit and access to the general education curriculum.

### **Additional Programs Available to Students With Disabilities**

Students with disabilities also have access to BOCES programs for those whose needs dictate that services other than those available in District are required. Alexandria Central School contracts with the BOCES to provide programs for students with disabilities. These include but are not limited to:

**12:1:1 Special Classes** are for students who require additional adult support to access the general education curriculum. Students in this setting also receive instruction which focuses on social skills, life skills, career planning and emotional needs.

**12:1(3:1) Special Classes** are designed for students with multiple disabilities who require a program emphasizing habilitation and treatment. Related services such as speech therapy, adaptive physical education, occupational therapy and physical therapy are integrated into these classrooms. Students involved in programming of this nature require very high levels of support and intervention.

**8:1:1 Special Classes** are designed for students whose management needs are determined to be intensive and who require a high degree of individualized behavioral intervention. Students' participation in general education classes is promoted through the provision of consultant support.

**6:1:1 Special Classes** are designed for students whose highly intensive management and instructional needs can best be addressed in a structured self-contained special education class. Behavioral supports available include student and family counseling and case management services provided by qualified counselors.

**6:1:2 Special Classes** are designed for students with developmental disabilities who have significant management needs. Students in these classes require intensive adult intervention to access academic instruction.

**6:1:2 Collaborative Day Treatment** is a partnership between the BOCES and the St. Lawrence Psychiatric Center (NYS Office of Mental Health). These classrooms are designed to meet the needs of elementary and middle school students who are considered at high risk for psychiatric hospitalization and are in need of intense community based psychiatric services coupled with special education services in a 6:1:2 classroom setting.

**Community Based Training (CBT)** is a program that enables students to develop competencies and behaviors needed to secure paid employment. It is a hands-on approach designed to provide students with supportive job site experiences. A job coach works directly with students to enhance job skills, promote social/emotional growth, and serves as a liaison between business/industry supervisors, staff, parents, and the community.

**Life Skills** is a pre-vocational special class program. This offers students opportunities to explore a variety of career strands, assesses their aptitude and interests, and develops skills that are essential for success in continuing career and technical education.

**Home and Hospital Instruction** is provided to students with disabilities if recommended by the Committee on Special Education. Home and hospital instruction shall only be recommended if such placement is in the least restrictive environment and must be provided: a minimum of 5 hours per week at the elementary level, preferably one hour daily; or a minimum of 10 hours per week at the secondary level, preferably two hours daily.

# COMMITTEE ON PRESCHOOL SPECIAL EDUCATION

## COMMITTEE ON PRESCHOOL SPECIAL EDUCATION (CPSE) MEMBERSHIP

At its yearly organization meeting, the Board of Education shall appoint a Committee on Preschool Special Education (CPSE). The **CPSE** means a multidisciplinary team established in accordance with the provisions of section 4410 of the Education Law. The Committee on Preschool Special Education shall be comprised of at least but not be limited to the following mandated members:

1. the parents of the preschool child;
2. not less than one regular education teacher of the student if the student is, or may be, participating in the regular education environment;
3. not less than one special education teacher of the child, or if appropriate, not less than one special education provider of the student;
4. the CPSE Chairperson who is a representative of the district qualified to provide, or supervise special education and who is knowledgeable about the general education curriculum and the availability of preschool special education programs and services and other resources of the school District and the municipality;
5. an additional parent member of a child with a disability residing in the school district or a neighboring school district and whose child is enrolled in a preschool or elementary level education program, provided that such parent is not a required member if the parent(s) of the child request that the additional parent member not participate;
6. an individual who can interpret the instructional implications of evaluation results, provided that such individual may also be the individual appointed as the regular education teacher, the special education teacher or special education provider, the school psychologist, the representative of the school District or a person having knowledge or special expertise regarding the student when such member is determined by the school District to have the knowledge and expertise to fulfill this role on the Committee.

7. other persons having knowledge or special expertise regarding the child, including related services personnel as appropriate, as the school district or the parents shall designate. The determination of knowledge or special expertise of such a person shall be made by the party (parents or school district) who invited the individual to be a member of the CPSE.

8. for a child in transition from early intervention programs and services, at the request of the parent, the appropriate professional designated by the agency that has been charged with the responsibility for the preschool child;

9. a representative of the municipality of the preschool child's residence, provided that the attendance of the appointee of the municipality shall not be required for a quorum.

Consensus is the preferred decision-making process. Parents of the student being reviewed and other knowledgeable persons are encouraged to share information, outside evaluations and reports with the Committee. Written notice of CPSE meetings is provided to parents at least five days in advance of the meeting date. Meetings of the CPSE are held in the school building as needed to review referrals throughout the school year and during the summer months.

## **LAFARGEVILLE CENTRAL SCHOOL COMMITTEE ON PRESCHOOL SPECIAL EDUCATION**

- Chairperson: School Psychologist
- Parent or person in parental relationship to the child
- General education teacher of the student (if the student is, or may be, participating in the general education environment).
- Special education teacher or service provider
- Parent member
- Representative from local education agency
- Individual who can interpret evaluation results (may be selected from individuals listed above)
- Representative from Early Intervention (if appropriate)
- Representative from Jefferson County (not required for a quorum)

***Preschool Student with a Disability*** refers to a preschool child as defined in section 4410(1)(i) of Education Law who is eligible to receive preschool programs and services, is not entitled to attend the public schools of the school district of residence pursuant to section 3202 of the Education Law and who, because of mental, physical, or emotional reasons, has been identified as having a disability and can receive appropriate educational opportunities from special programs and services approved by the department Eligibility as a preschool student with a disability shall be based on the results of an individual evaluation which is provided in the student's native language, not dependent on a single procedure, and administered by a multidisciplinary team in accordance with all other requirements as described in section 200.4 (b) (1) through (5) of this Part. To be identified as having a disability, a preschool student shall either:

- Exhibit a significant delay or disorder in one or more functional areas related to cognitive, language and communicative, adaptive, socio-emotional or motor development which adversely affects the student's ability to learn. Such delay or disorder shall be documented by the results of the individual evaluation which includes, but is not limited to, information in all functional areas obtained from a structured observation of a student's performance and behavior, a parental interview and other individually administered assessment procedures, and, when reviewed in combination and compared to accepted milestones for child development, indicate:
  - A 12 month delay in one or more functional area(s), or
  - A 33 percent delay in one functional area, or a 25 percent delay in each of two functional areas; or
  - If appropriate standardized instruments are individually administered in the evaluation process, a score of 2.0 standard deviations below the mean in one functional area, or a score of 1.5 standard deviations below the mean in each of two functional areas; or
- Meet the criteria for Autism, Deafness, Deaf-Blindness, Hearing Impairment, Orthopedic Impairment, Other Health-Impairment, Traumatic Brain Injury, or Visual Impairment.

The Committee shall first consider providing special education services in a setting where age-appropriate peers without disabilities are found.



## CPSE PROCEDURES

### Referral

The Committee on Preschool Special Education (CPSE) is responsible for arranging for the evaluation of any student who is suspected of having a disability, who meets the age eligibility requirements specified in the Regulations, and is a resident of the school District. ***The evaluation process begins when a written referral for evaluation is made by either:***

- the student's parent or person in parental relationship;
- a designee of the District, who shall be administrators or the CPSE Chairperson(s), in which the student resides or the school;
- the Commissioner or designee of a public agency with responsibility for the education of the student; and/or
- a designee of an education program affiliated with a child care institution with Committee on Preschool Special Education responsibility.

### Request for Referral for Evaluation

A written request for LCS to refer the student for an initial evaluation may be made by:

- a professional staff member of the school district in which the student resides, or the public or private school the student legally attends or is eligible to attend;
- a staff member of a program serving infants and toddlers or preschool students;
- a licensed physician or judicial officer; or
- a professional staff member of a public agency with responsibility for the welfare, health or education of children.

The referral can be made at any time during the school year. It should specify the extent to which the preschool student has received any services prior to referral. When the CPSE receives a referral, the Chairperson will meet with the parent describing the evaluation procedures and request parental consent for the evaluation. A list of State approved evaluation sites will be provided to the parent. In the event that consent is not provided, the Committee shall implement the District's practices for ensuring that the parents have received and understood the request for consent.

## Evaluation and Recommendations

The individual evaluation of a preschool child shall include relevant functional and developmental information regarding the child's abilities and needs relating to participation in age-appropriate activities. This evaluation will include the following, at no cost to the parent:

- A physical examination;
- An individual psychological examination;
- An observation of the student in an environment appropriate for a student of that age;
- A social history; and
- Other appropriate assessments or evaluations, including a functional behavioral assessment for a student whose behavior impedes his or her learning or that of others, as necessary to ascertain the physical, mental and emotional factors that contribute to the suspected disabilities.

When completed, the evaluation reports will be submitted to the CPSE and a CPSE meeting will be scheduled. The parents will be provided with a copy of the summary reports prior to the meeting. The summary report shall include a detailed statement of the preschool student's individual needs, if any. The summary report shall not include a recommendation as to the general type, frequency, location and duration of special education services and programs that should be provided; shall not address the manner in which the preschool student can be provided with instruction or related services in the least restrictive environment; and shall not make reference to any specific provider of special services or programs. Reports of the assessment and/or evaluation and a summary portion of the evaluation shall be provided to the members of the Committee on Preschool Special Education and to the person designated by the municipality in which the preschool student resides so as to allow for a recommendation by the Committee to be made to the board within 60 days of the receipt of consent. An approved evaluator shall provide the parent with a copy of the statement and recommendation provided to the Committee.

Reasonable measures will be made to ensure that the parent attends the meeting. This means a written notice will be sent to the parent at least five days prior to the meeting date to advise them of the meeting.

The CPSE submits a recommendation to the Board of Education and to the parent of the preschool student within **sixty (60)** calendar days of the date of the receipt of consent. If the Committee determines the student is ineligible for the special education, written notification will indicate the reasons for the finding. If the Committee determines that a student has a disability, an IEP (Individualized Education Program) is prepared which specifies the nature of the disability, the student's current levels of functioning, including how the disability affects the

student's participation in appropriate activities, measurable annual goals, including benchmarks or short-term objectives, and the type of special education program and/or services recommended. The CPSE will seek, in every case, to recommend placement in the least restrictive environment consistent with the needs of the student. If, for any reason, the recommendation of the Committee differs from the preference of the parent, the report shall include the reasons for the Committee's recommendations. The notice will also indicate that, in the event that the parent does not provide consent for placement, no further action will be taken by the CPSE until such consent is obtained.

### **Withdrawal of Referral**

Written consent of the parent or guardian is required prior to initiating an evaluation for a student who has not previously been identified as having a disability. In the event that parent permission is withheld, the parent shall be given the opportunity to attend an informal conference with a designated professional most familiar with the proposed evaluation. If, at this meeting the parent decides that the referral is not warranted, the referral shall be withdrawn.

### **CPSE CONTINUUM OF SERVICES**

A Preschool Student with a Disability refers to a preschool student who has been identified by the Committee on Preschool Special Education (CPSE) and is eligible to receive preschool programs and services. The CPSE must consider the appropriateness of services to meet the student's needs in the least restrictive environment in the following order:

- related services;
- special education itinerant services;
- related services in combination with special education itinerant services;
- an integrated special education preschool program;
- a half-day preschool program; or
- a full day preschool program.