

General Overview of Special Education

Service delivery model in schools:

Regular Education

- ELL
- Title (Reading and Math services)
- At-Risk (academic/social)
- Free and Reduced Lunch/Socio Economic
- Homeless
- Social Care (battered/Abused/AODA/Runway/etc)
- General Nursing/etc.
- Disabled needing only accommodation

Section 504

- Serious health (allergy/Diabetic/Asthmatic)
- Disabled needing modification
- Disabled needing limited related service

Special Education

- Disabled requiring specifically designed instruction
- Disabled requiring specifically designed teaching environment
- Disabled requiring specially designed instruction and teaching environment

(Special thanks to Sandra Buxton, Instructional Specialist and District Diagnostician for the Verona Area School District and faculty member at Cardinal Stritch University School of Education, for use of this information.)

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Basic background summary:

Individuals with Disabilities Education Act

“November 1975, President Gerald Ford signed legislation now known as IDEA into law. The statute focused singular attention on children with disabilities – and required all schools and districts receiving federal dollars to provide such students with “a free and appropriate public education that emphasizes special education and related services designed to meet their unique needs and prepare them for further education, employment, and independent living.”

The law was a watershed for students with disabilities. Before its passage, many students who needed special services did not receive them. Some states had had laws that allowed them to specifically exclude students who required special services from their schools.”

Fast forward...

Reauthorized by Congress and signed into law by President Bush in December 2004, the federal Individuals with Disabilities Act (IDEA-04) guides all special education practices in the United States. IDEA-04 mandates that each student identified as eligible for special education services receive a “free and appropriate public education” in the “least restrictive environment” and be afforded “due process rights” as delineated in the legislation.

Section 504 of the Rehabilitation Act of 1973. It is administered by the U.S. Department of Education, Office of Civil Rights.

Section 504 is a step between Regular and Special Education where the curriculum and or teaching environment is specifically designed for a student with a disability. The best way to describe 504 is to talk about it in terms of a step between..... a child with a disability who can be accommodated for in regular education, by a regular education teacher. No Special education and really no one else, no equipment, nothing out of the ordinary except for accommodations.

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Who Gets Special Education?

Special education and related services are provided to eligible students with disabilities ages 3-21 and to students who qualify for gifted services grades Kindergarten to Grade 12, within the school district. I mention gifted services only because in some districts gifted education falls under special education.

For children ages 3-4, services can be delivered in daycares or in the child's home. In some districts this can be 3k or 4k programs, if the district has them. In these cases, children can be seen at schools where these programs are housed or in area daycares or churches (who are obligated to take all students regardless of religious affiliation, but are supported by the public school for that 3-4k program portion). Infants and toddlers with developmental delays or disabilities are served through Birth to 3 programs.

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What constitutes a disability? A student is determined to meet eligibility criteria in one or more of the impairment areas:

- Autism
- Cognitive Disability
- Hearing Impairment
- Visual Impairment
- Emotional Behavioral Disability
- Orthopedic Impairment
- Other Health Impairment
- Speech and Language Impairment
- Specific Learning Disabilities
- Significant Developmental Delay
- Traumatic Brain Injury

The State of Wisconsin has very specific criteria for each of these areas. The school will get a referral from a **parent**, or a teacher or a medical provider stating they suspect a child has a disability. The school will then start the evaluation process with parent permission. They can test, observe and collect work samples from the child, collect a social history from the family (usually the elementary social workers do this) to help them determine if the child meets the criteria. They can consider outside evaluations from medical, social services, psychological services and other organizations. (**Criteria sheets from DPI website at http://sped.dpi.wi.gov/sped_eligibility.**)

Just because a child has impairment in one of these areas does not mean they qualify for special education services in the school. Once the IEP team determines the child has impairment, the IEP team must then consider whether the student needs special education.

So for example, let's say you have a child with a hearing impairment, who wears hearing aids. When we go through the criteria sheet for a hearing impairment the child meets it, this is after we complete our evaluation and take into account all medical findings. However, when a child is placed in front of the room and the teacher makes accommodations... like she provides written direction in addition to her oral ones, puts on closed captioning when the class watches videos and others... the child does fine academically. This is a child with a disability who does not require special education.

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Difference between accommodation and modification:

An **accommodation**: An alteration of environment, curriculum format, or equipment that allows an individual to gain access to content and/or complete assigned tasks. Accommodations are often seen as good teaching strategy of differentiation tools. Examples include....

- **Pacing** – allowing extra time, varying activity often; omitting assignments that require timed situations.
- **Presentation** – pre-teaching vocabulary, utilizing advance organizers, providing visual cues etc.
- **Grading changes** – giving extra credit for projects, giving extra credit for class participation differences, different grading expectations for different modes of final projects
- **Assignments** – giving directions in small, distinct steps, allowing copying from paper/book; using written back-up for oral directions, adjusting length of assignment; changing format of assignment (matching, multiple choice, fill-in blank, etc.), breaking assignment into series of smaller assignments, reducing paper/pencil tasks

A **modification**: a change in curriculum. Examples include...

- **Pacing** – eliminating portions of the curriculum expectation, reducing the curriculum load, cherry picking the important information “need to know”
- **Grading changes** – changing the weight of exams, not counting some testing, not testing
- **Assignments** – are “off script” from what the rest of the class is getting, they may be portions of the whole or changed in some fashion
- **Presentation** – video rather than text, separate and different lecture, reading a book rather than lecture from teacher that contained different material

Accommodations can be done for regular education students or students with disabilities without an IEP and without a 504 plan. Once you start to make modifications for a child with a disability you need an IEP or 504 plan.

So let's go back to our child who has Hearing Impairment and let's say the team decides she also needs a speaker system in her room. This is a piece of equipment that is not found in the regular education environment, would not be budgeted or maintained by the school normally. The teaching environment would be **modified**. However, a full IEP wouldn't be needed to get her this accommodation. In fact it would be an inefficient and costly way to get her such a resource. So the team would likely design her a 504 plan. This is a right guaranteed her through Civil Rights not through the Department of Education.

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Individualized Education Plan

A child who meets criteria and qualifies for special education then gets an Individualized Education Plan (IEP). The Individual Education Plan, or IEP, describes the special education services a student will receive from the school district. Written by the IEP team, including the parents and the student, if appropriate, the IEP includes information designed to communicate to the school and the parents a plan for delivering services and measuring student growth toward IEP goals.

An IEP meeting must be held within 30 calendar days after it is determined, through a full and individual evaluation, that a child has one of the disabilities listed in IDEA and needs special education and related services. A child's IEP must also be reviewed at least annually thereafter to determine whether the annual goals are being achieved and must be revised as appropriate.

Each child's IEP must contain specific information, as listed in IDEA, our nation's special education law. This includes (but is not limited to):

- The child's present levels of academic achievement and functional performance, describing how the child is currently doing in school and how the child's disability affects his or her involvement and progress in the general curriculum.
- Annual goals for the child, meaning what parents and the school team think he or she can reasonably accomplish in a year.
- How much of the school day the child will be educated separately from nondisabled children and not participate in extracurricular or other nonacademic activities such as lunch or clubs.
- How (and if) the child is to participate in state and district-wide assessments, including what modifications will be made, how often they will be provided, where they will be provided, and how long they will last.
- How school personnel will measure the child's progress toward the annual goals.
- The special education and related services to be provided to the child, including supplementary aids and services (such as communication device) and changes to the program or supports for school personnel.

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What is a Related Service?

- speech-language pathology and audiology services
- psychological services
- physical and occupational therapy
- recreation, including therapeutic recreation
- early identification and assessment of disabilities in children
- counseling services, including rehabilitation counseling
- orientation and mobility services
- medical services for diagnostic or evaluation purposes
- school health services
- social work services in schools
- parent counseling and training
- transportation

You do not need to have an IEP to get many of these services in the school. For example, counselors, school psychologists and social workers see children without IEPs all the time.

However, to get them regularly and specifically to a goal based on your disability they must be a part of a 504 plan or an IEP.

Thus, based on the evaluation results, the IEP team discusses, decides upon, and specifies the related services that a child needs in order to benefit from special education. Making decisions about how often a related service will be provided, and where and by whom is also a function of the IEP team.

It is important to recognize that each child with a disability may not require all of the available types of related services. The related service must be needed:

- to advance appropriately toward attaining the annual goals
- to be involved and progress in the general curriculum (that is, the curriculum used by nondisabled students)
- to participate in extracurricular and other nonacademic activities
- to be educated and participate with other children with disabilities and nondisabled children

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What is a Supplementary Aide or Service?

Supplementary Aides and Services means aids, services, and other supports that are provided in regular education classes, other education-related settings, and in extracurricular and nonacademic settings, to enable children with disabilities to be educated with nondisabled children to the maximum extent appropriate...

Speaking practically, supplementary aids and services can be accommodations and modifications to the curriculum under study or the manner in which that content is presented or a child's progress is measured. But that's not all they are or can be. Supplementary aids and services can also include direct services and supports to the child, as well as support and training for staff who work with that child. That's why determining what supplementary aids and services are appropriate for a particular child must be done on an individual basis.

- Supports to address environmental needs (preferential seating, planned seating on the bus, in the classroom, at lunch, in the auditorium, and in other locations; altered physical room arrangement)
- Levels of staff support needed (consultation, stop-in support, classroom companion, one-on-one assistance; type of personnel support: behavior specialist, health care assistant, instructional support assistant)
- Planning time for collaboration needs by staff
- Child's specialized equipment needs (wheelchair, computer, software, voice synthesizer, augmentative communication device, utensils/cups/plates, restroom equipment)
- Pacing of instruction needed (breaks, more time, home set of materials)
- Presentation of subject matter needed (taped lectures, sign language, primary language, paired reading and writing)
- Materials needed (scanned tests and notes into computer, shared note-taking, large print or Braille, assistive technology)
- Assignment modification needed (shorter assignments, taped lessons, instructions broken down into steps, allow student to record or type assignment)
- Self-management and/or follow-through needed (calendars, teach study skills)
- Testing adaptations needed (read test to child, modify format, extend time)
- Social Interaction support needed (provide circle of friends, use cooperative learning groups, teach social skills)
- Training needed for personnel

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