

SANGAMON AREA SPECIAL EDUCATION DISTRICT

PROFESSIONAL STAFF

POLICY AND PROCEDURES MANUAL

2017-2018

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I. DEMOGRAPHIC DATA

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SANGAMON AREA SPECIAL EDUCATION DISTRICT

A. Introduction

SASED:

was established 1 July 1967

serves 13 school districts in Sangamon, Menard,
Macoupin and Cass Counties

covers 3600 square miles

serves a public school enrollment of over 10,000

PARTICIPATING DISTRICTS:

A-C Central

Athens

Auburn

Community Unit #16

Greenview

North Mac

Pawnee

Pleasant Plains

Petersburg (PORTA)

Riverton

Tri-City

Virginia

Williamsville

State and Federal Legislation requires a free and appropriate public education for all children with disabilities between the ages of 3 and 21. To meet these requirements, Sangamon Area Special Education District, in cooperation with local member school districts, provides special education programs and services.

Programs and services are designed to meet the needs of students who have significant learning problems which prevent them from being totally successful in a preschool setting or in a regular classroom.

Referrals may be made by parents, teachers, doctors, or other concerned individuals. Determination of the child's eligibility for programs and services will be based on the results of a diagnostic evaluation.

Referral forms may be obtained from the principal in your local district or by contacting the Sangamon Area Special Education District, 2500 Taylor Avenue, Springfield, Illinois 62703, (217) 786-3250.

SASED Instructional Programs:

- Supportive Resource Services (SRS) - limited instruction for less than 50% of the school day.
- Supportive Resource Classroom (SRC) - intensive instruction more than 50% of the school day.
- Early Childhood Program ages 3-5
- Community Based Education (CBE) – district-based classes for students with moderate, severe and profound disabilities.
- Emotional Disorder Program – self-contained, resource, and consultative services.
- Visually Impaired Program - resource and consultative services
- Hearing Impaired Program - resource and consultative Services
- Speech/Language Program
- Alternate Education Program
- Autism Program

Specialized Related Services:

- School Social Work Services
- School Psychological Services
- Psychiatric Diagnostic Services
- Vocational Education Services
- Physical/Occupational Therapy
- Orientation and Mobility Training
- Audiological Services

II. ADMINISTRATIVE STRUCTURE

II. ADMINISTRATIVE STRUCTURE

Sangamon Area Special Education District is governed by the Articles of Agreement that are approved and on file with the Regional Superintendent of Schools and Illinois State Board of Education.

The following two boards govern the administration and operation of the Special Education District.

A. Board of Directors

The Board of Directors is composed of the thirteen superintendents from the member districts.

The Board of Directors holds regularly scheduled monthly meetings and has the responsibility to establish policy, rules, and regulations for the operation for Sangamon Area Special Education District, none of which shall be contrary to the specific provisions of State and Federal Laws; Rules and Regulation, Articles of Agreement and the Professional Agreement Contract with certified staff.

B. SASSED Superintendents

A-C Central C.U.D. #262	Mr. Tim Page	476-8112
Athens C.U.D. #213	Dr. Scott Laird	636-8761
Auburn C.U.D. #10	Mr. Darren Root	438-6164
Greenview C.U.D. #200	Mr. Ryan Heavner	968-2295
New Berlin C.U.D. #16	Mr. Adam Ehrman	488-6111
North Mac C.U.D. #34	Dr. Jay Goble	627-2915
Pawnee C.U.D. #11	Mr. Gary Alexander	625-8213
Pleasant Plains CUD #8	Mr. Matthew Runge	626-1041
PORTA C.U.D. #202	Mr. Matthew Brue	632-3803
Riverton C.U.D. #14	Mr. Lance Thurman	629-6009
Tri-City C.U.D. #1	Ms. Jill Larson	364-4811
Virginia C.U.D. #64	Mr. Gary DePatis	452-3085
Williamsville C.U.D.#15	Mr. James Reedy	566-2014

DISTRICTS - PHONE/FAX/ADDRESS

17/18

A-C CENTRAL CUSD #262 FAX 476-8100

Tim Page, Superintendent, 501 W. Buchanan St., P.O. Box 260, Ashland, IL 62612 PHONE 476-8112

Stephen Groll
A-C Central HS
601 West Buchanan
P.O. Box 260
Ashland, IL 62612
476-3312
Fax# 476-3730

Stephen Groll
A-C MS
601 West Buchanan
P.O. Box 260
Ashland, IL 62612
476-3313
Fax# 476-3730

Deb Rogers
A-C Elementary
191 South Bluff St.
Chandlerville, IL 62627
458-2224
Fax# 458-2223

ATHENS CUSD #213 FAX 636-8851

Dr. Scott Laird, Superintendent, #1 Warrior Way, Athens, IL 62613 PHONE 636-8761

Bill Reed (9-12)
Athens HS
#1 Warrior Way
Athens, IL 62613
636-8314
Fax# 636-8851

Matt Rhoades (7-8)
Athens JH
#1 Warrior Way
Athens, IL 62613
636-8380
Fax# 636-8851

Stacy Binegar (4-6)
Cantrall Intermediate
155 Claypool
Cantrall, IL 62625
487-9082
Fax# 487-9104

Eric Szoke (PK-3)
Cantrall Elementary
#1 Braves Lane
Cantrall, IL 62625
487-7312
Fax# 487-7187

AUBURN CUSD #10 FAX 438-6483

Darren Root, Superintendent, 606 North St. Auburn, IL 62615 PHONE 438-6164

Nathan Essex (9-12)
Auburn H.S.
511 North 7th St.
Auburn, IL 62615
438-6817
Fax# 438-6153

Mark Dudley (6-8)
Auburn JH
303 East Kenney
Divernon, IL 62530.
628-3414
Fax# 628-3814

Matt Grimm (3-5)
Auburn MS
601 N. 7th
Auburn, IL 62615
438-6919
Fax# 438-3700

Amy Donaldson (PK-2)
Auburn Elementary
445 N. 5th St.
Auburn, IL 62615.
438-6916
Fax# 438-3912

GREENVIEW CUSD #200 FAX 968-2297

Ryan Heavner, Superintendent, 147 East Palmer, Greenview, IL 62642 PHONE 968-2295

Tim Turner
Principal (K- 12)
147 East Palmer
Greenview, IL 62642
968-2295
Fax# 968-2297

Elementary (PK-5)
Jr. High (6-8)
High School (9-12)

NEW BERLIN CUSD #16 FAX 488-2043

Adam Ehrman, Superintendent 600 North Cedar, New Berlin, IL 62670 PHONE 488-2040

Hattie Llewellyn
New Berlin HS (9-12)
300 Ellis St.
New Berlin, IL 62670
488-6012
Fax# 488-3107

Megan Doerfler
New Berlin JH (6-8)
300 Ellis St.
New Berlin, IL 62670
488-6011
Fax# 488-3207

Casey Wills
New Berlin Elem (EC, PK-5)
600 N. Cedar
New Berlin, IL 62670
488-6054
Fax# 488-6039

NORTH MAC CUSD #34 FAX 627-3519Dr. **Jay Goble**, Superintendent, 525 N.3rd St., Girard, IL 62640 PHONE 627-2915, X4

Rob Horn North Mac HS 231 W. Fortune Virden, IL 62690 965-4127 Fax# 965-4006	Dennis McMillin North Mac MS (6-8) 525 N. 3 rd St. Girard, IL 62640 627-2136 Fax# 627-3503	John Downs North Mac Intern. (3-5) 525 N. 3 rd St. Girard, IL 62640 627-2419 Fax# 627-3407	Michelle Cimarossa North Mac Elem (PK-2) 231 W. Fortune Virden, IL 62690 965-5424 Fax# 965-4342
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PAWNEE CUSD #11 FAX 625-2251

Gary Alexander, Superintendent, 810 4th St. Pawnee, IL 62558-9680 PHONE 625-8213

Tim Kratochvil Pawnee JH/HS (7-12) 810 4th St Pawnee, IL 62558-9680 625-2471 EXT 206 Fax# 625-2251	Jennifer Mendenhall Pawnee Elementary (PK-6) 810 4th St. Pawnee, IL 62558-9680 625-2231 EXT 201 Fax# 625-2251	James Scheffers, Dist. Counselor 810 4 th St. Pawnee, IL 62558 625-2471 EXT 209
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PLEASANT PLAINS CUSD #8 FAX 626-1082

Mr. Matt Runge, Superintendent, P.O. Box 20, Pleasant Plains, IL 62677 PHONE 626-1041 X404

Luke Brooks (9-12) D'Wayne Peterson, Asst. Pleasant Plains HS 500 N. Cartwright St. Pleasant Plains, IL 62677 626-1044 X225 Fax# 626-1667	Ben Theilen Pleasant Plains MS 2455 N. Farmingdale Rd. Pleasant Plains, IL 62677 626-1061 X169 Fax# 626-2272	Jamie Yates (PK-4) Farmingdale Elementary 2473 N. Farmingdale Rd. Pleasant Plains, IL 62677 626-1221 X141 Fax# 626-1839
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PORTA CUSD #202 FAX 632-3221

Mr. Matthew Brue, Superintendent, P.O. Box 202, Petersburg, IL 62675 PHONE 632-3803

Amy McMahan (9-12) Megan Howard, Asst. PORTA HS P.O. Box 202 Petersburg, IL 62675 632-3216 Fax# 632-5446	Megan Howard (7-8) PORTA JH P.O. Box 202 Petersburg, IL 62675 632-3219 Fax# 632-5448	Eric Kesler PORTA Central 1500 Owen Avenue Petersburg, IL 62675 632-7781 Fax# 632-5103	Jeff Hill Petersburg Elementary 514 W. Monroe Petersburg, IL 62675 632-7731 Fax# 632-3551
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RIVERTON CUSD #14 FAX 629-6008

Dr. Lance Thurman, Superintendent, P.O. Box 1010, 6425 Old Rt.36, Riverton IL 62561 PHONE 629-6009

Matthew Moore Jamie Toland, Asst. Riverton HS PO Box 530, 841 N. 3rd Riverton, IL 62561 Phone 629-6003	Brad Polanin Sarah Stanley, Asst. Riverton MS P.O. Box 530, 1014 E. Lincoln Riverton, IL 62561 Phone 629-6002 Fax# 629-6017	Jaclynn Shoufler Jen Carter, Asst. Riverton Elementary P.O. Box 470, 7th & Jefferson Riverton, IL 62561 Phone 629-6001 Fax# 629-6023
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TRI-CITY CUSD #1 FAX 364-4896

Ms. Jilinda Larson, Superintendent, P.O. Box 290, Buffalo, IL 62515 PHONE 364-4811

Christy Kindel (6-12)
Tri-City JH/HS
P.O. Box 290
Buffalo, IL 62515
364-4530
Fax# 364-4812

Kara Cummins (PK-5)
Tri-City Elementary
P.O. Box 290
Buffalo, IL 62515
364-4035
Fax# 364-9418

VIRGINIA CUSD #64 FAX 452-3088

Gary DePatis, Superintendent, 651 S. Morgan, IL 62691-1547 PHONE 452-3085

Aaron Llewellyn
Principal (6-12)
651 S. Morgan
Virginia, IL 62691-1547
452-3085
Fax# 452-3085

Kara Bowman
Principal (PK-5)
651 S. Morgan
Virginia, IL 62691-1547
452-3363
Fax# 452-3088

WILLIAMSVILLE CUSD #15 FAX 566-3890

James Reedy, Superintendent, 800 S. Walnut St, Williamsville, IL 62693 PHONE 566-2014

Doug Furlow
Adam Eucker, Asst.
Williamsville HS
312 South St.
Williamsville, IL 62693
566-3361
Fax# 566-3792

Clay Shoufler
Williamsville MS/JH
900 S. Walnut
Williamsville, IL 62693
566-3600
Fax# 566-2183

Clay Shoufler (5th Gr.)
Williamsville MS
504 S. Walnut
Williamsville, IL 62693
566-4070
Fax# 566-2475

Janis Lindsey
Sherman Elementary
500 S. Walnut
Sherman, IL 62684
496-2021
Fax# 496-2473

SASED CENTRAL SCHOOL FAX 529-8445

Liz Horn, Principal, 2500 Taylor Ave., Springfield, IL 62703 PHONE 529-8849

Sangamon Area Special Education District
Board of Directors Regular Meeting Schedule
July 2017- June 2018

(All regular meetings are at 9:00 a.m. on 2nd Tuesday of each month unless noted differently)

July 11, 2017	9:00 a.m.
August 8, 2017	9:00 a.m.
September 12, 2017	9:00 a.m.
October 10, 2017	9:00 a.m.
November 14, 2017	9:00 a.m.
December 12, 2017	9:00 a.m.
January 9, 2018	9:00 a.m.
February 13, 2018	9:00 a.m.
March 13, 2018	9:00 a.m.
April 10, 2018	9:00 a.m.
May 8, 2018	9:00 a.m.
June 12, 2018	9:00 a.m.

III. CALENDARS

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- A. **Central Office Calendar** - The Central Office calendar is to be followed by SASSED personnel whose building assignment is the central office.

- B. **District Calendars** - Participating districts have developed independent calendars based upon district needs. Subsequently, one district's calendar may not coincide with that of the central office. District or building based personnel are to follow the calendar of their assigned district.

IV. SASED ADMINISTRATION

IV. SASSED ADMINISTRATION

A. Director of Special Education

Mark Strawn is the administrative head of all departments and programs.

B. Assistant Director

Carolyn Assalley assists the Director with all administrative operations of SASSED including programs and services provided to the member districts.

C. Special Education Administrators

Colleen Meadows, Gretchen Reimnitz, Kelly Fraase, Ashley Pasbrig, Katie Rodden, Melissa Cory, and Tami Jones and are assigned to the member districts as the primary special education supervisor. They are responsible for supervising and coordinating all SASSED programs and services within their districts.

D. Technical Supervisors

Melissa Cory is the technical supervisor of speech/language services in each of the 13 districts. Tami Jones is responsible for the supervision and coordination of all SASSED psychologists and social workers.

E. SASSED Central Principal

Liz Horn is the principal of SASSED Central School and is responsible for the supervision and coordination of all SASSED Central School programs and services, including the Autism Program.

F. Comptroller/Business Manager

Gwen Williams is responsible for budget planning and maintenance and preparation of Federal Grants for SASSED. She also coordinates billing and other fiscal needs with Member Districts.

V. SASED SUPPORT STAFF

V. SASSED SUPPORT STAFF

A. Student Data/Administrative Report Preparation – Jessica Smith

Jessica is the Student Claims Manager. She is responsible for preparing and maintaining all state and federal reports and student data.

B. Human Resources Coordinator/Administrative Assistant – Nancy Rapps

Nancy is the Human Resources Coordinator and assistant to Mr. Strawn and Ms. Assalley. She is responsible for the overall management of the Human Resources Office and maintains all personnel records. In addition, she is responsible for all Personnel Approval/Claims reports submitted to ISBE.

C. Financial Services – Nick Williams

Nick is SASSED's bookkeeper. He is responsible for the financial services including payroll and expenditure reports, and maintains the cash flow and fund balances. In addition, he is responsible for the report of all staff absences. He also maintains student Medicaid records and reports.

D. Technology Support - Tony Grider

Tony provides technological support, training, and equipment maintenance for SASSED staff both in the central office and in member districts.

**VI. PROGRAM DESCRIPTIONS
AND
RELATED SERVICES**

VI. PROGRAM DESCRIPTIONS AND RELATED SERVICES

A. Supportive Resource Services (SRS)

The Supportive Resource Service is designed for students with disabilities who are in need of a special education program for less than 50% of the school day.

Emphasis is placed on students' needs as in the Supportive Resource Classroom; however, less time is required during the school day to develop an appropriate program in the least restrictive educational environment.

B. Supportive Resource Classroom (SRC)

Supportive Resource Classroom is a cross-categorical program offered for children with disabilities in need of a special education instructional program for more than 50% of the school day. Emphasis is placed on educational needs based on specific disabilities rather than a categorical classification.

C. Combination SRS/SRC

Where enrollments do not warrant separate SRS or SRC programs, a combination of the two services has been instituted. This program flexibility permits students to receive an appropriate educational program in differing degrees of restrictiveness and still maintain identity with a home school district. A combination of programs may also exist in order to provide the same flexibility at different grade levels.

D. ICAN - Individualized Child Adolescent Network

The I.C.A.N. Program, located in Springfield at 2500 Taylor Avenue, serves special education students ranging from first (1) grade through grade eight (8) which exhibit severe behavioral problems which impact their academic success in their regular education school environment. Students must have an eligibility of ED, SLD, or OHI and evidence of LRE to Restrictive, with documented behavioral interventions, before they can be considered for the ICAN program. The program emphasizes consistency, accountability, personal responsibility, and high expectations. This is accomplished through academic/affective education, and a structured behavioral system that is integrated with the multi-faceted interdisciplinary curriculum.

E. PACE - Progressive Adolescent Center for Education

The P.A.C.E. Program, located in Springfield at 2500 Taylor Avenue, serves special education students ranging from ninth (9) grade through grade twelve (12) which exhibit severe behavioral problems which impact their academic success in their regular education school environment. Students must have an eligibility of ED, SLD, or OHI and evidence of LRE to Restrictive, with documented behavioral interventions, before they can be considered for the PACE program. The multifaceted outcome – based curriculum emphasizes self-worth and preparation for life's demands. Programming includes vocational education/preparation, required and elective coursework, affective education, and emphasizes daily expectations of performance, social interaction, and a structured behavioral system.

F. Autism Program

The Autism Program, also located at SASSED Central School, serves special education students that have been identified with Autism and exhibit severe behavioral problems that are impacting their academic success in the regular education school environment.

Recommendations for programming can only occur after the Autistic Prescriptive Diagnostic Team has evaluated the student, assisted with accommodations/modifications and methodology in the regular education environment and refers the student.

G. CBE - Community Based Education

The CBE - Community Based Education Program services students who are functioning within the mild to moderately mentally impaired range. The program uses a functional community-based curriculum which integrates this population into the local school system and the local community. A continuum services are provided from direct classroom experiences to consultation from the community-based teacher.

H. Early Childhood Programs

SASSED operates Early Childhood Programs throughout the cooperative. The program designed for each child is based on developmental needs in the areas of physical development, cognitive development, communication development, social or emotional or adaptive development. The program serves students ages three to five.

I. Itinerant Services for the Visually Impaired

The Itinerant Visually Impaired Program provides services for students with visual impairments within the local programs of member districts. A continuum of services are provided from direct services with students (including orientation/mobility services as needed) to teacher/parent consultations.

J. Itinerant Services for the Hearing Impaired

The Itinerant Hearing Impaired Program provides services for students with hearing impairments within the local programs of member districts. A continuum of services are provided from direct services with students to teacher/parent consultations.

K. Vocational Education Services

The Vocational Education Program serves all SASSED students ages 14 - 21. A continuum of services are provided for students including vocational assessment, guidance and counseling, career planning, transitional planning, and cooperative work-study experiences. The Vocational Coordinator works in coordination with the local districts and functions as a member of the IEP team.

L. Speech and Language Services

Speech/Language services are available for students from age 3 to 21. Services include screening, evaluation, and therapy for various communication disorders and deviations including:

1. Language disorders involving receptive and expressive language;
2. Articulation disorders (difficulty producing speech sounds);
3. Voice quality, resonance, pitch, and intonation.
4. Fluency, rate, and rhythm of speech (includes stuttering);
5. Language and speech disorders accompanying cleft lip and palate, cerebral palsy, hearing loss, and other conditions.

Besides individual and small group therapy, Speech/Language Therapists may serve students through classroom programs for speech and language improvement. Speech/Language therapists also consult with school personnel and parents to create awareness of factors to prevent communication disorders and contribute to the development of communication competencies for all students.

M. Psychological Services

SASED provides comprehensive psychological services for students who require educational/behavioral intervention. These services may include psychological evaluation, teacher/parent consultation for behavior management and learning problems, and counseling.

N. Social Work Services

SASED provides comprehensive school social work services for students who require educational/behavioral intervention. These services may include social-developmental and/or adaptive evaluation, individual/group counseling, teacher/parent consultation, and liaison services with community agencies and practitioners.

O. Residential Services

Sangamon Area Special Education District offers residential placement for children whose disabilities are so profound or unique that their educational needs cannot be met in a public or private day school program. Placement determination is made in an IEP conference and usually in cooperation with other state agencies who have a responsibility for children's services.

P. Occupational Therapy

Occupational Therapy services are provided to address the functional needs of a student related to performance of self-help skills, adaptive behavior and play, sensory, motor, and postural development. Specifically, a therapy program is designed to assist the development of underlying skills that are prerequisites for academic learning and vocational training. It may include improving gross and fine motor skills, improving coordination skills and learning to dress or to feed oneself for independent functioning. Direct service is provided by Certified Occupational Therapists, or under their supervision, by a Certified Occupational Therapy Assistant.

Q. Physical Therapy

Physical Therapy services are provided to address the needs of a student related to performance of self-help skills, adaptive behavior and play, gross motor control and postural development. Direct service is provided by Certified Physical Therapists, or under their supervision by a Certified Physical Therapy Assistant.

R. Specialized Services

SASED uses outside resource to provide services for low incidence disabilities and for needs which would be difficult for the local district or special education district to provide. These diagnostic services include, but are not limited to, audiological, psychiatric, and neurological evaluation.

Request for specialized services are made to the SASED Special Education Administrators assigned to member school districts. As with any evaluation paid for by the school, it must be limited to aspects which are educationally relevant.

VII. EDUCATIONAL PROCEDURES

VII. EDUCATIONAL PROCEDURES

A. Case Review Teams (s) CRT

Member districts have regularly scheduled meetings within buildings known as Case Review Team Meetings (CRT). Team members may include building principals, SASSED Special Education Administrators, special educators, and related service personnel (Psychologists, Social Workers, Speech/Language Therapists, Nurses, Counselors, etc.).

The primary function of the team is to coordinate special education referral related matters; i.e., processing referrals, monitoring case study components and compliance deadlines, facilitation of communication among special educators, local administrators, etc. The CRT does not function in an IEP capacity or as a forum for anecdotal observations or comments.

B. Description of Case Study Evaluation/Reevaluation Components

This form is given to parents when obtaining consent for initial evaluation or reevaluation or when providing notice of triennial reevaluation. It is intended to provide a brief description of all comprehensive or speech and language case study evaluation components including specialized evaluations. For home/hospital evaluations please refer to the brief description located on the "Parent/Guardian Consent for Initial Case Study Evaluation" form. Please contact your local school district if you have any questions regarding these evaluation components.

SPEECH AND LANGUAGE CASE STUDY EVALUATION

A speech and language evaluation involves select components of a comprehensive case study evaluation. For a description of the five (5) speech and language component refer to all components listed below with an asterisk(*).

COMPREHENSIVE CASE STUDY EVALUATION

* **INTERVIEW WITH YOUR CHILD.** This interview helps the evaluation team to understand your child's perception of the difficulties he/she is experiencing.

CONSULTATION WITH YOU. This provides you the opportunity to describe your concerns as they relate to your child's education.

SOCIAL DEVELOPMENTAL STUDY. This study allows the evaluation team to understand your child's in-school and out-of-school functioning by assessing how the environment affects your child's ability to learn. The study includes assessments of your child's life history, adaptive behavior (how your child functions independently as well as in areas of personal and social responsibility), and cultural background to determine any relationship these may have to your child's functioning in the present educational setting.

* **MEDICAL HISTORY AND CURRENT HEALTH STATUS.** This information helps the evaluation team determine if any current or past medical difficulties are affecting your child's school performance.

* **VISION/HEARING SCREENINGS.** The results of these screenings help the evaluation team determine any visual or auditory problems that would interfere with the testing or school performance of your child. *A speech and language evaluation includes a hearing screening to determine if any auditory difficulties exist that would affect the validity of testing results or school performance.

* **REVIEW OF YOUR CHILD'S ACADEMIC HISTORY AND CURRENT EDUCATIONAL FUNCTIONING.** This involves reviewing your child's previous school records and current levels of functioning in the present educational setting.

EDUCATIONAL EVALUATION OF LEARNING PROCESSES AND ACHIEVEMENT. This evaluation measures traditional academic skills taught in school, such as reading, math reasoning and calculation, and written language. In addition, assessments or observations which determine how the student takes in information, understands the information, and

expresses answers are conducted to help the evaluation team determine the best ways for your student to be taught and learn.

ASSESSMENT OF THE CHILD'S LEARNING ENVIRONMENT. This assessment helps the evaluation team to determine how the student interacts in the classroom environment and addresses the match between student needs and teaching styles. In addition, physical and environmental factors in the classroom are assessed to determine their effects on the educational needs of your child.

SPECIALIZED EVALUATIONS

Depending on the nature of your child's difficulties, additional component(s) may be recommended for your child. Any such components are listed on your consent or notice form included with this sheet.

PSYCHOLOGICAL EVALUATION. This evaluation may include assessment in the areas of intellectual ability, fine/gross motor coordination, social/emotional development, and learning processes and/or academic achievement. Assessment procedures may be formal and/or informal and may include observation, testing, interviewing and/or reviewing available data.

- * **SPEECH AND LANGUAGE EVALUATION.** This evaluation determines the degree and extent of oral receptive and expressive language usage and language processing abilities. The areas of language competency should include rhythm (fluency), voice, articulation, and language.

OTHER SPECIALIZED EVALUATIONS. Any additional specialized evaluations determined to be necessary for your child will be listed on your consent or notice form. Please contact your local school district if you would like additional information regarding any other recommended specialized evaluations.

- * Indicates components conducted in both speech and language and comprehensive case study evaluations.

REQUEST FOR SPECIAL EDUCATION EVALUATION

A referral to special education is recommended when a child exhibits obvious difficulties and needs which adversely affect school performance. At the time of referral, a local district representative will explain and provide a copy of the procedural safeguards to the parent/guardian.

The referral will be reviewed by the Case Review Team (CRT). The decision to conduct or not to conduct a comprehensive special education evaluation will be made after consideration of the child's academic record, health record, educational testing, and classroom performance. If the decision is made to complete an evaluation, a meeting will be held with parent/guardian to determine the domains to be assessed and parent/guardian consent to conduct the evaluation will be obtained.

Once the referral is accepted for comprehensive special education evaluation, regulatory case study requirements including collection of home, medical, school background information, classroom observation, comprehensive diagnostic evaluations, and an eligibility conference must be completed within sixty (60) school days from receipt of written request. The decision to conduct or not to conduct a comprehensive special education evaluation is subject to federal and state regulations.

PROCEDURES FOR REFERRAL TO SPECIAL EDUCATION

- A. Parent, teacher, or other appropriate referral agent secures Request for Special Education Evaluation packet from the local district principal/designee.
1. **Request for Evaluation** form is completed and submitted to the principal/designee by the person requesting the referral.
 2. **Referral packet** is completed and turned in to Principal/designee by designated date.
 3. **Academic History** form is completed by the classroom teacher or other school personnel.
 4. **Evidence of Response to Intervention** forms are completed by the general education teacher or special education teacher.
 5. **Teacher's Report** is completed by each teacher.
 6. **Accommodations/Modifications Checklist** is completed by each teacher.
 6. **Student Behavior Rating Scale** is completed by the classroom teacher(s) if needed.
 7. **Determination of Adverse Effects of ADHD as related to OHI** is completed by the classroom teacher(s) if needed.
 8. **School Based Health** Information form is completed by school personnel.
 9. **Explanation of Procedural Safeguards** is signed by parent/guardian.

PLEASE NOTE: The above procedures must be completed in an expedient manner before presenting the referral at the CRT.

- B. The referral must be reviewed by the CRT and a decision to conduct or not to conduct a comprehensive special education Case Study Evaluation must be rendered.
1. If the decision is **NOT** to conduct an evaluation:
 - a. The CRT will designate the person to send Parent/Guardian Notification of Decision Regarding a Request for an Evaluation (ISBE 34-57A) to the parent/guardian and a copy to the person submitting the referral. A copy of the Notice of Procedural Safeguards for Parents/Guardians of students with Disabilities is to be included.
 - b. The Request for Special Education Evaluation packet and a copy of the Parent/ Guardian Notification of Decision Regarding a Request for an Evaluation (ISBE 34-57A) will be filed in the student's local district temporary record.
 2. If the decision is to conduct an evaluation:
 - a. Following the assessment of the relevant domains, an Individual Education Program Conference (IEP) will be convened within sixty (60) school days from date of written consent. The purpose of meeting is to review evaluation results and make recommendations regarding special education eligibility. If the student is found eligible, then an individualized education plan will be developed.
 - b. Parent/Guardian Consent for Initial Provision of Special Education and Related Services (ISBE 34-57F) must be signed prior to placement in special education.

Student Name: _____

REQUEST FOR EVALUATION CHECKLIST

Section I:

Check type of request being made:

Initial _____

Reevaluation _____

Section II:

Initial request complete items A – J. Reevaluation requests complete items B-J.

- _____ A. Student Input Information Form (Fax to SASSED Office) (Front Page)
- _____ B. Request for Evaluation (page 4) Principal's signature required
- _____ C. Academic History (page 5)
- _____ D. Evidence of Response to Intervention (pages 6-8)
- _____ E. Teacher's Report (page 9)
- _____ F. Accommodations/Modifications Checklist (page 10).
- _____ G. Student Behavior Rating Scale, if needed (page 11)
- _____ H. Determination of Adverse Effects of ADHD as Related to OHI, if needed (pages 12-13)
- _____ I. School Based Health Information (page 14)
- _____ J. Explanation of Procedural Safeguards signed by parents/guardians (page 15)

Also attach to referral packet:

Student Schedule

Report Card

Attendance Record-if concerns

If not available to Psych. and Social Workers, please attach current IEP and last evaluation.

***Procedural Safeguards (ISBE 34-57J) – to be given to parent/guardian**

Guidelines for Reevaluation

I. Routine Reevaluations

- A. Students receiving special education services are to be reevaluated triennially.
- B. In the event of a Pre-K or ECE student, the decision to reevaluate should be determined case by case, depending upon need. For example, if there is need for additional Dx information and the ICS was completed within 3 years, the team may decide to complete a reevaluation to determine appropriate services. Additionally, if a student is transitioning from Pre-K into Kindergarten and there is need to determine eligibility and related services, the student may be reevaluated within the 3 year time span.

II. What constitutes a reevaluation?

- A. For preschoolers, cognitive, language, motor, social/emotional, and adaptive skills should be considered as determined by domain meeting.
- B. Lower end elementary (grades K-2) requires a comprehensive battery; e.g., cognitive assessment, learning processes, achievement, emotionality, coping skills, etc. as determined by domain meeting.
- C. For mid-elementary (grades 3-5), measures of cognitive ability, processing, achievement, social/emotional functioning, and adaptive behaviors are appropriate as determined by domain meeting.
- D. For middle school students, additional cognitive assessment becomes more discretionary. For some a record review and student interview may suffice. However, for others, a thorough reevaluation may be necessary. The thoroughness is determined by need and issues. Assessment of adaptive behaviors remains a critical component of the reevaluation as determined by domain meeting.
- E. High school students are similar in that the thoroughness of the reevaluation is need and issue driven. For students whose program is successful, a brief reevaluation with appropriate documentation is all that may be needed. Possible exceptions are students who are graduating and/or are linking with community agencies as determined by domain meeting.
- F. The Social Developmental Study is as important as the psychological report. Focus on changes since the last evaluation, family dynamics, adaptive behavior, health issues, medications, substance abuse, etc. A summary statement specifying student and parent goals is appropriate as determined by domain meeting.
- G. Other related services will automatically be included in a reevaluation by checking the comprehensive reevaluation box on the parent permission form (i.e., OT/PT, HI, VI, etc.). For students not receiving a related service(s) and there is need to evaluate for a specific service, the permission form is the same. Simply specify the name of the special evaluation under new components as determined by domain meeting.

III. Special Evaluations/Reevaluations

- A. Special reevaluations may be completed at any time. See Policy and Procedural Manual.
- B. DHS evaluations consist of a basic battery: e.g., WISC IV or WAIS-III, brief Hx of special education involvement; academics; emotionality, and impressions. The report should be brief, 1 to 3 pages, highlighting Dx and prognosis. Include DSM-IV nomenclature if available from a psychiatric. If the student is known to DHS, a personality evaluation is not necessary. However, should a student's behavior show significant change, further personality evaluation may be warranted as determined by domain meeting.
- C. For graduating seniors, if previous evaluation is within 3 years, the psychologist and social worker are to write a brief report stating that the student's record was reviewed. Provide a summary statement that the data are relevant and that there is no need for further assessment (condition will not change). If there is need for further assessment and/or, the student is transitioning to community agency, and there is insufficient time to complete a thorough assessment, specify what is needed in the summary statement.
- D. The time window for DHS acceptance of data is 3 years. However, use judgment if there have been significant changes. For seniors whose last evaluation was the first semester of freshman year, complete an appropriate reevaluation. For students who were last evaluated in the spring semester of their freshman year or thereafter, focus on need, critical issue(s), and transition plan.
- E. Data on move-ins will be reviewed in the IEP meeting. If all components are in place and the evaluation is within 3 years, the case may be accepted as is. If components are missing, a reevaluation may address only those missing components. If the 3 year time window is approaching, the student may be scheduled for routine reevaluation by the team to provide current data.

C. Educational Evaluations

An educational evaluation should be completed by the special education team on each new full case study (FCS).

A full case study (FCS) must be completed prior to any child being placed in a special education program.

D. Transfer Student Procedure

If a student transfers into your district from any district outside of SASED and is eligible for special education, class placement shall be according to the following procedures:

- A. Principal or Special Education Administrator contacts previous district by telephone to obtain information regarding placement and services provided.
- B. SASED Special Education Administrator is notified of pending temporary transfer placement.
- C. Case Review Team (CRT) reviews previous data to include: Psychological, social-developmental, I.E.P. and considers the need for updated evaluations(s).
- D. An IEP conference with parental participation and approval of recommendations is held within 10 school days from the date of enrollment.

E. Annual Review Assessment Guide for SRS/SRC Programs

In preparation for annual review of student's IEP progress (or in the event of request for special review), it is necessary to measure current levels of educational performance. Assessment of educational performance may be accomplished in either of two ways or through a combination of the two:

1. **Curriculum - based assessment**, defined as measuring a student's performance on specific component(s) of the standard curriculum and comparing the student's performance to expected performance at the related grade level.
2. **Standardized educational testing**, using one or more instruments recommended below. Use if annual goals indicate increase of achievement from one level to another.

Teacher discretion should be utilized in determining the appropriate assessment method(s) and instrument (s), however, standardized testing is strongly recommended in the following situations:

1. Possible change of placement including dismissal other than graduation.
2. Change of building level (i.e., Elementary to Jr. High, Jr. High to High School).
3. To meet guidelines for participation in a work program.
4. For students who do not appear to be progressing.

The assessment should be directly related to the students' IEP goals and objectives (i.e., a student whose IEP includes math and auditory processing goals need not be assessed in reading).

Please note this annual review assessment guide does not apply to students who are being initially screened, evaluated, or reevaluated for special education.

The following instruments may be considered for annual assessment or assessment for special request of students receiving SRS/SRC services:

ANNUAL REVIEW ASSESSMENT GUIDE

GRADE LEVELS KINDERGARTEN - 1

READINESS	Inventory of Readiness Skills SRA Primary Mental Abilities Test Brigance Inventory of Basic Skills - Section I (selected subtests)
READING	Woodcock Reading Mastery Test - Revised
MATH	Brigance Inventory of Basic Skills
LEARNING PROCESSES	Developmental Test of Visual Motor Integration (Berry VMI) Slingerland

GRADE LEVELS 2 - 8

GENERAL	KTEA – Brief Form
READING	Woodcock Reading Mastery Test - Revised Test of Reading Comprehension (TORC) Gates MacGinitie
MATH	Key Math - Revised
WRITTEN LANGUAGE	Test of Written Language (TOWL) Test of Written Spelling (TWS)
LEARNING PROCESSES	Detroit Test of Learning Aptitude (DTLA-2, Revised) Slingerland Beery - VMI

GRADE LEVELS 9 - 12

GENERAL	Kaufman Test of Education Achievement (K-TEA, brief form)
READING	Woodcock Reading Mastery Test - Revised Gates MacGinitie Test of Reading Comprehension (TORC)
MATH	Key Math (thru 9th grade) - Revised
WRITTEN LANGUAGE	Test of Written Language (TOWL) Test of Written Spelling (TWS)
LEARNING PROCESSES	Detroit Test of Learning Aptitude (DTLA-2, Revised)

F. Eligibility Criteria

INTRODUCTION

Goal 12 of the SASSED Five Year Plan states, SASSED, in conjunction with ISBE and other professionals, will formally adopt and establish eligibility criteria for all disability categories. Implementation objectives include review of existing criteria; identification of problems in diagnosis and programming related to the existing criteria; modification of existing criteria or generation of new criteria to be critiqued by a multi-disciplinary group of professionals for concurrence with current best practice, case law, and regulations; and specification of a severity continuum within each eligibility category.

The philosophy which guided the work of the committee was to produce a document which would be responsive to the task and clear to diagnostic and programming teams. The categories of eligibility used in this document were taken directly from the Illinois Rules and Regulations governing Special Education (Section 226.75). The criteria are designed to be basic and easily implemented. Supportive text, resources, and appendices included at various points in this document are presented to guide in the understanding and application of criteria and are not mandated by law.

The purpose of any criterium is to define parameters (diagnose), identify issues (educational impact), and point the way to appropriate interventions (programming). We have worked to achieve this end.

The Criteria Committee

David Brown, Chair
Chris Harms
Julie Hoyland
Pamela Lucas
Billie Meyers
Nancy Rapps

Accepted 1st Reading: 1/09/01
Accepted 2nd Reading: 2/13/01
Adoption: 2/13/01

Additional Revisions

Developmental Delay: Adopted 5/5/03
Other Health Impairment: Adopted 7/11/06
Speech or Language Impairment: Adopted 7/11/06

Additional Revisions

Intellectual Disability: Adopted 12/11/07
Developmental Delay: Adopted 12/11/07
Emotional Disability: Adopted 12/11/07
Multiple Disabilities: Adopted 12/11/07
Other Health Impaired: Adopted 12/11/07
Specific Learning Disability: Adopted 06/08/2009
Autism: Adopted 05/12/2015
Emotional Disability: Adopted 05/12/2015

AUTISM (AUT)

IDEA Definition: A developmental disability significantly affecting verbal and nonverbal communication and social interactions, generally evident before age 3, that adversely affects a child'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. IDEA 2004, Sec. 300.8 (c)(1)

Eligibility

Criteria: Students must meet the criteria 1, 2, and 3 for autism spectrum disorder listed below (DSM-V, 2013) and these symptoms must adversely affect the student's educational performance.

1. Persistent deficits in social communication and social interaction across multiple contexts, as manifested by **ALL of the following**, currently or by history (examples are illustrative, not exhaustive, see supportive text – Appendix A):

A. Deficits in social-emotional reciprocity, ranging, for example, from abnormal social approach and failure of normal back-and-forth conversation; to reduced sharing of interests, emotions, or affect; to failure to initiate or respond to social interactions.

B. Deficits in nonverbal communicative behaviors used for social interaction, ranging, for example, from poorly integrated verbal and nonverbal communication; to abnormalities in eye contact and body language or deficits in understanding and use of gestures; to a total lack of facial expressions and nonverbal communication.

C. Deficits in developing, maintaining, and understanding relationships, ranging, for example, from difficulties adjusting behavior to suit various social contexts; to difficulties in sharing imaginative play or in making friends; to absence of interest in peers.

2. Restricted, repetitive patterns of behavior, interests, or activities, as manifested by **at least two of the following**, currently or by history (examples are illustrative, not exhaustive; see text):

A. Stereotyped or repetitive motor movements, use of objects, or speech (e.g., simple motor stereotypies, lining up toys or flipping objects, echolalia, idiosyncratic phrases).

B. Insistence on sameness, inflexible adherence to routines, or ritualized patterns or verbal nonverbal behavior (e.g., extreme distress at small changes, difficulties with transitions, rigid thinking patterns, greeting rituals, need to take same route or eat food every day).

- C. Highly restricted, fixated interests that are abnormal in intensity or focus (e.g., strong attachment to or preoccupation with unusual objects, excessively circumscribed or perseverative interest).
 - D. Hyper- or hyporeactivity to sensory input or unusual interests in sensory aspects of the environment (e.g., apparent indifference to pain/temperature, adverse response to specific sounds or textures, excessive smelling or touching of objects, visual fascination with lights or movement).
3. Symptoms must be present in early childhood (but may not become fully manifest until social demands exceed limited capacities), or may be masked by learned strategies in later life).

Note: Although not categories of disability, students with a diagnosis of Asperger's disorder, or pervasive developmental disorder could still qualify for services under the category of Autism if there is an adverse effect on educational performance.

Exclusionary Factors:

- A. The student's educational performance is not adversely affected.
- B. The term does not apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance.
- C. Student's needs are better identified under other eligibility categories. *Individuals who have marked deficits in social communication, but whose symptoms do not otherwise meet criteria for autism spectrum disorder, should be evaluated for Speech and Language eligibility.*

Supportive Text: See Appendix A

PLACE APPENDIX A

INTELLECTUAL DISABILITY (ID)

Definition:

Significantly sub-average general intellectual functioning, existing concurrently with deficits in adaptive behavior. Intellectual disability is manifested during the developmental period and adversely affects a child's educational performance.

Eligibility Criteria:

A. Cognitive

1. Significant sub-average intellectual functioning: an IQ of 70 ± 1 Sem or below on an individually administered intelligence test. For infants, a clinical judgment of significant sub-average intellectual functioning may be used.
2. Four degrees of severity may be specified, reflecting the degree of cognitive impairment (DSM-IV):
Mild IQ level 50-55 to approximately 70
Moderate IQ level 35-40 to 50-55
Severe IQ level 20-25 to 35-40
Profound IQ level below 20-25
3. "Cognitive Impairment, Severity Unspecified@ may be used when there is strong presumption of cognitive impairment but the individual's intelligence can not be measured by standard tests; e.g., with individuals too impaired or uncooperative, or with infants.
4. Cognitive impairment manifests before age 18.

It is required that two individually administered standardized tests of cognitive abilities be administered by a qualified school psychologist. Assessment instruments may include the current revisions of such instruments as the WISC, Stanford Binet, WAIS, K-ABC, DAS, etc.

B. Adaptive Behaviors

1. Intellectual disability exists concurrently with related limitations in two or more adaptive behavior skills areas: Communication, Self-care, Home Living, Social Skills, Community Use, Self-direction, Health and Safety, Functioning Academics, Leisure, and Vocational.
2. Adaptive behavior may be quantified in a manner similar to cognitive levels by use of formal adaptive scales. Assessment instruments may include the current revisions of such instruments as Adaptive Behavior Evaluation Scale-Home/School Versions; Adaptive Behavior Inventory; Vineland Adaptive Behavior Scales.

Mild	Age std. Score of approximately 50-55 to 70
Moderate	Age std. Score of 35-40 to 50
Severe	Age std. Score of 20-25 to 35-40
Profound	Age std. Score <20 or 25

Two adaptive assessments are required with a minimum of one being a formal adaptive behavior scale.

C. Educational Assessment

An educational/developmental assessment will be completed. Such assessments may include current revisions of the Woodcock-Johnson, Wechsler Individual Achievement Test, Brigance, K-TEA, Daberon, Bracken Basic Concepts, etc.

**Supportive
Text**

The AAIDD (American Association on Intellectual and Developmental Disabilities) refers to "Mental Retardation" as a disability characterized by significant limitations both in intellectual functioning and in adaptive behavior as expressed in conceptual, social, and practical adaptive skills. This disability originates before age 18.

Five Assumptions Essential to the Application of the Definition.

1. Limitations in present functioning must be considered within the context of community environments typical of the individual's age, peers and culture.
2. Valid assessment considers cultural and linguistic diversity as well as differences in communication, sensory, motor, and behavioral factors.
3. Within an individual, limitations often coexist with strengths.
4. An important purpose of describing limitations is to develop a profile of needed supports.
5. With appropriate personalized supports over a sustained period, the life functioning of the person with mental retardation generally will improve.

For clarification purposes:

This disability category under IDEA (300.8 (c)(6) is referred to as "Mental Retardation". The Illinois State Board of Education Administrative code 226.75 refers to this category as "Intellectual Disability".

DEAF-BLINDNESS (DB)

Definition:

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 children with deafness or children with blindness.

Eligibility Criteria:

Students must meet the audiological criteria, and at least one of the ophthalmological criteria, and at least one of the educational criteria. Students are eligible only if these characteristics interfere with their academic, emotional, or social development.

1. Audiological Criteria
 - a. Puretone average greater than 90dB in the better ear that precludes the understanding of speech through the ear alone with or without amplification.
2. Ophthalmological Criteria
 - a. Best corrected visual acuity of 20/200 or less in better eye (legally blind)
 - b. Medical diagnosis of visual impairment.
3. Educational Criteria
 - a. Academic performance is significantly below expectancy as a result of concomitant hearing and visual impairment
 - b. The discrepancy between the student's ability and achievement is determined to be severe (one standard deviation below the mean) as determined by standardized testing
 - c. The discrepancy between the student's verbal and performance scores is determined to be severe

Exclusionary Factors:

Student's needs are better identified under other eligibility categories.

DEAFNESS (D)

Definition:

A hearing impairment that is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, that adversely affects a child's educational performance.

Eligibility Criteria

- A. Students must demonstrate a hearing loss that is so severe that even with amplification there is significant interference in their learning processes and/or emotional and social development.
- B. Students must meet the audiological criteria and a least one of the educational criteria. Students are eligible only if these characteristics interfere with their academic, emotional, or social development.
 - 1. Audiological Criteria
 - a. Puretone average 90dB or greater in the better ear that precludes the understanding of speech through the ear alone with or without amplification.
 - 2. Educational Criteria
 - a. Academic performance is significantly below expectancy as a result of deafness in any of the following areas:
 - Reading
 - Spelling
 - Language/English
 - Content subject areas
 - Vocabulary usage and development
 - b. The discrepancy between the student's ability and achievement is determined to be severe (one standard deviation below the mean) as determined by standardized testing
 - c. The discrepancy between the student's verbal and performance scores is determined to be severe.

Exclusionary Factors:

Student's needs are better identified under other eligibility categories.

DEVELOPMENTAL DELAY (DD)

Definition:

Delay in physical development, cognitive development, communication development, social or emotional development, or adaptive development (may include children from three through nine years of age).

Eligibility Criteria:

Children between the ages of three years old through nine years old who meet the criteria of one or more of the following domains: physical development, cognitive development, communication, social or emotional development, or adaptive development, which significantly interferes with the learning process.

1. A delay of 2 standard deviations in **physical development**.
Physical development in gross motor skills, such as the ability to move around and interact with the environment with appropriate coordination, balance and strength; or fine motor skills, such as manually controlling and manipulating objects such as toys, drawing utensils, and other useful objects in the environment.
2. A delay of 2 standard deviations in **cognitive development**.
Cognitive development, such as the ability to acquire, use and retrieve information as demonstrated by the level of imitation, discrimination, representation, classification, sequencing, and problem-solving skills often observed in a child's play.
3. A delay of 2 standard deviations in **communication development**.
Communication development in expressive language, such as the production of age-appropriate content, form and use of language; or receptive language, such as listening, receiving and understanding language.
4. A delay of 2 standard deviations on 2 subtests of standardized **emotional and/or adaptive behavior scale(s)**.

Emotional development such as the ability to feel and express emotions, and develop a positive sense of oneself; or social activity, such as interacting with people, developing friendships with peers, and sustaining bonds with family members and other significant adults.

Adaptive development, such as caring for his or her own needs and acquiring independence in age-appropriate eating, toileting, dressing and hygiene tasks.

5. A delay of 1.5 standard deviations in at least two domains
6. A delay of 30% in 1 or more domain(s) based on play-based assessment tool.

The delay must have a direct and adverse effect on the child's ability to make adequate educational progress without special education and related services.

**Exclusionary
Factors:**

All other eligibility categories, including intellectual disability, orthopedic impairment, visual impairment, hearing impairment, specific learning disability, speech and language impairment, emotional disability, autism, traumatic brain injury, or other health impairment shall be ruled out before identifying a child's primary eligibility as significant developmental delay.

For a child whose initial evaluation is conducted following enrollment in kindergarten, research based intervention documentation must be provided that demonstrates the child is unable to make adequate progress without special education intervention.

The child's functional levels cannot best be explained by environmental, cultural or economic influences, or a history of inconsistent educational program.

Supportive Text:

For early childhood students transitioning to kindergarten with developmental delay eligibility, a reevaluation will be completed prior to enrollment in kindergarten to determine continued special education eligibility.

EMOTIONAL DISABILITY (ED)

IDEA Definition: “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 child’s educational performance : (a) an inability to learn that cannot be explained by intellectual, sensory, or health factors; (b) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; (c) Inappropriate types of behavior or feelings under normal circumstances; (d) a general pervasive mood of unhappiness or depression; (e) a tendency to develop physical symptoms or fears associated with personal or school problems. Emotional disturbance includes schizophrenia.” IDEA 2004, Sec. 300.8 (c)(4)

Eligibility

- Criteria:**
- A. Documentation of symptoms for a minimum of 6 months. May be supported by interviews of parent/guardian and faculty from previous school year.
 - B. Documented failure to respond to systematic social and behavioral interventions implemented as a function of the general education environment. Evidence should be provided that:
 - 1. Reasonable accommodations have been made to support the student in the general education environment including accessing student assistance programs, counseling and/or additional academic interventions available to all students as part of a multi-tiered model.
 - 2. Minimally, data has been collected to support lack of responsiveness over a period of 18 weeks with a minimum of 2 independent tier two interventions designed to improve social/behavioral function. See Appendix B for a list of multi-tiered interventions.

Exclusionary

- Factors:**
- A. “Emotional Disability does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance under this section.” IDEA 2004, Sec. 300.8 (c)(4)(ii)
See Appendix C

- B. Substance abuse (**the symptoms are not due to the direct physiological effects of a substance [e.g., a drug abuse, a medication]** or a general medical condition [e.g. hypothyroidism]).
- C. Behavior or functioning which is the result of infection or physical trauma.
- D. “An expectable or culturally approved response to a common stressor or loss, such as the death of a loved one.” DSM-V, 2013
- E. The disturbance does not affect educational performance.
- F. The student’s needs are better identified under other eligibility criteria.

Supportive

Text:

- A. A **mental disorder** is defined in the DSM-V (2013) as:

“A syndrome characterized by clinically significant disturbance in an individual’s cognition, emotion regulation, or behavior that reflects a dysfunction in the psychological, biological, or developmental process underlying mental functioning. Mental disorders are usually associated with significant distress or disability in social, occupational, or other important activities.”
- B. Psychiatric diagnosis is supportive of the IEP Team decision, but not required if the student otherwise meets criteria as specified.
- C. **Long period of time** > six months without amelioration or remission with treatment. Interventions should be documented for a period of 18 weeks; however, in order to meet criteria, symptoms must be present for a period of six months including the intervention period.
- D. **Marked degree** requires impairment in judgment which results in failure to learn at a level consistent with cognitive ability.
- E. **Social Maladjustment** includes the diagnoses of Conduct Disorder evidenced by a repetitive and persistent pattern of behavior in which the basic rights of others or major age appropriate societal norms or rules are violated. See APPENDIX B
- F. **Co-morbidity** is the diagnosis of more than one condition in the same individual.

APPENDIX B

The following is a list of leveled interventions as they appear at www.pbisworld.com . The reader is referred to that website for detailed implementation explanation.

Tier 1 Interventions

Breaks

- Break, moving position in class
- Have student take frequent breaks or activity
- Send student on errand
- Snack break
- Take a break

Consequences

- Avoid power struggles
- Call parent or note home
- Card Flip
- Clear, consistent, and predictable consequences
- Do unfinished work during recess or unstructured time
- Have student say a nice thing to the student they called a name
- Logical consequence
- Natural consequences
- Office referral
- Reflection sheet
- Remove from room
- Speak in calm and neutral tone
- Take away privileges
- Take away unstructured or free time

Praise

- Acknowledging positive behavior
- Praise student frequently

- Praise when cooperative and well behaved
- Praise when good attitude and involvement occur
- Praise when on task

Rewards

- Rewards, Simple Reward Systems, & Incentives
- Call parent or positive note home

Other

- Alternate Seating In Own Space
- Alternative modes of completing assignments
- Assign a buddy or partner
- Assign a classroom job
- Break down assignment
- Break down directions
- Call on student frequently
- Clear and concise directions
- Color coded folders
- Count to 10
- Daily planner
- Deep breathing
- Draw a picture or write in a journal
- Encourage interaction with a more self confident student
- Engage student
- Explain assignment
- Explain directions
- Frequent eye contact
- Frequent home contact
- Give choices

- Have student repeat directions back
- Headphones
- Helping Students With Home Work
- Help student start assignment

Other Cont'd

- Ignore
- Individual work space
- Listen to music
- Model appropriate language
- More structured routine
- Move to new location in the classroom
- Non verbal cues
- Organize materials daily
- Pause before giving a direction
- Provide a container for the student's belongings
- Proximity to students
- Reassurance
- Redirection
- Reduce assignment
- Reflective listening
- Review PBIS expectations and rules
- Speak in calm and neutral tone
- Speak with student in hallway
- Stand while working
- Start Commands
- Stop, Walk, Talk
- Stress ball or fidget

- Talk one on one with student
- Talk Ticket
- Talk to parent
- Teach conflict resolution skills
- Teach coping skills
- Teach organizational skills
- Teach relationship skills
- Teach relaxation techniques
- Teach social skills
- Teach substitute words
- Touch base with student
- Touch student on shoulder
- Turn desk around
- Use calm neutral tone
- Use seating disk
- Use timer
- Velcro on/under the desk
- Visual schedule

Tier 2 Interventions

- Alternatives To Suspension
- Behavior Contract
- Behavior Intervention Plan (BIP)
- Structured Breaks
- Check In Check Out (CICO)
- Classroom Management Support

- Counselor Referral
- Daily Behavior Form
- Forced Choice Reinforcement Survey
- Functional Behavior Assessment (FBA)
- Individual & Visual Schedules
- Mentoring
- Non-Verbal Cues & Signals
- Organizational Tools
- Peer Tutoring
- Response To Intervention (RTI)
- Reward System
- Self Monitoring
- Sensory Tools
- Social Stories
- Teach Conflict Resolution Skills
- Teach Coping Skills
- Teach Relationship Skills
- Teach Relaxation Techniques
- Teach Social Skills

Tier 3 Interventions

- Alternatives To Suspension
- Behavior Contract
- Behavior Intervention Plan (BIP)
- Behavior Meetings
- Structured Breaks

- Check In Check Out (CICO)
- Collaboration With Student's Physician And/Or Mental Health Provider
- Counselor Referral
- Daily Behavior Form
- Forced Choice Reinforcement Survey
- Functional Behavior Assessment (FBA)
- Individual & Visual Schedules
- Mentoring
- Non-Verbal Cues & Signals
- No Passing Time
- Organizational Tools
- Peer Tutoring
- Response To Intervention (RTI)
- Reward System
- Seclusion & Restraint
- Self Monitoring
- Sensory Tools
- Sexuality, Sexually Inappropriate, Sexualized Behaviors
- Social Stories
- Teach Conflict Resolution Skills
- Teach Coping Skills
- Teach Relationship Skills
- Teach Relaxation Techniques
- Teach Social Skills
- Time Out (Structured Time Out)

APPENDIX C

Often, the most difficult part of determining eligibility for special education services in this category is determining if the student has an emotional disability or social maladjustment. The following is adapted from a chart that was shown at a training I attended by Bruce Bracken. He adapted it from *Social Maladjustment: A Guide to Differential Diagnosis and Educational Options* (Wayne County Regional Educational Service Agency – Michigan, 2004).

Behavior Area	Emotional Disturbance	Socially Maladjusted
School Behavior	Unable to comply with teacher requests; needy or has difficulty asking for help	Unwilling to comply with teacher requests; truancy; rejects help
Attitude Toward School	School is a source of confusion or angst; does much better with structure	Dislikes school, except as a social outlet; rebels against rules and structure
School Attendance	Misses school due to emotional or psychosomatic issues	Misses school due to choice
Educational Performance	Uneven achievement; impaired by anxiety, depression, or emotions	Achievement influenced by truancy, negative attitude toward school, avoidance
Peer Relations and Friendships	Difficulty making friends; ignored or rejected	Accepted by a same delinquent or socio-cultural subgroup
Perceptions of Peers	Perceived as bizarre or odd; often ridiculed	Perceived as cool, tough, charismatic

Social Skills	Poorly developed; immature; difficulty reading social cues; difficulty entering groups	Well developed; well attuned to social cues
Interpersonal Relations	Inability to establish or maintain relationships; withdrawn; social anxiety	Many relations within select peer group; manipulative; lack of honesty in relationships
Interpersonal Dynamics	Poor self-concept; overly dependent; anxious; fearful; mood swings; distorts reality	Inflated self concept; independent; underdeveloped conscience; blames others; excessive bravado
Locus of Disorder	Affective disorder; internalizing	Conduct disorder, externalizing
Aggression	Hurts self and others as an end	Hurts others as a means to an end
Anxiety	Tense; fearful	Appears relaxed; cool
Affective Reactions	Disproportionate reactions, but not under student's control	Intentional with features of anger and rage; explosive
Conscience	Remorseful; self critical; overly serious	Little remorse; blaming; non-empathetic

Sense of Reality	Fantasy; naïve; gullible; thought disorders	Street-wise; manipulates facts and rules for own benefit
Developmental Appropriateness	Immature; regressive	Age appropriate or above
Risk Taking	Avoids risks; resists making choices	Risk taker; daredevil
Substance Abuse	Less likely; may use individually	More likely; peer involvement
<p>Adapted from <i>Social Maladjustment: A Guide to Differential Diagnosis and Educational Options</i> (Wayne County Regional Educational Service Agency – Michigan , 2004)</p>		

HEARING IMPAIRMENT (HI)

Definition:

An impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance but is not included under the definition of deafness.

Eligibility Criteria:

Students must meet at least one of the audiological criteria and at least one of the educational criteria. Students are eligible only if these characteristics interfere with their academic, emotional, or social development.

1. Audiological Criteria
 - a. Puretone average greater than 25dB in the better ear.
 - b. Unaided speech discrimination scores below 80% either in the presence or absence of competing noise.

2. Educational Criteria
 - a. Academic performance is significantly below expectancy as result of a hearing impairment in any of the following areas:
 - Reading
 - Spelling
 - Language/English
 - Content subject areas
 - Vocabulary usage and development
 - b. The discrepancy between the student's ability and achievement is determined to be severe (one standard deviation below the mean).
 - c. The discrepancy between the student's verbal and performance scores is determined to be severe.

Exclusionary Factors:

- A. Hearing impairment does not affect educational performance.
- B. Student's needs are better identified under other eligibility categories.

MULTIPLE DISABILITIES (MD)

Definition: Concomitant impairments, the combination of which causes such severe educational needs that they cannot be accommodated in special education programs solely for one of the impairments.

Eligibility Criteria:

- A. There is evidence of special education eligibility in two or more areas
- B. Impact of each eligibility area is significant enough to stand alone and/or confound determination of primary eligibility.

Exclusionary Factors:

- A. Student's needs are better identified under other eligibility categories.
- B. A diagnosis of deaf-blindness

Supportive Text: Examples may include: Intellectual disability/Blindness, Intellectual disability/Orthopedic Impairment

For Clarification Purposes: This disability category under IDEA (300.8 (c)(6) is referred to as "Mental Retardation" The Illinois State Board of Education Administrative code 226.75 refers to this category as "Intellectual disability".

ORTHOPEDIC IMPAIRMENT (OI)

- Definition:** A severe orthopedic impairment that adversely affects a child's educational performance, includes impairments caused by congenital anomaly, impairments caused by other disease, and impairments for other causes.
- Eligibility Criteria:**
- A. Evidence of impairment including but not limited to: clubfoot, amputation, poliomyelitis, bone tuberculosis, arthritis, cerebral palsy, spina bifida, osteogenesis imperfecta, burns or fractures resulting in contracture.
 - B. Impact of the impairment interferes with student's ability to participate in the learning process/educational setting.
- Exclusionary Factors:**
- A. Orthopedic impairment does not adversely effect educational performance or require environmental adaptations.
 - B. Student's needs are better identified under other eligibility categories.

OTHER HEALTH IMPAIRMENT (OHI)

Definition: Limited strength, vitality or alertness, including heightened sensitivity to environmental stimuli, due to chronic or acute health problems that results in limited alertness in the educational environment.

**Eligibility
Criteria:**

- A. The student must demonstrate **all** of the following:
 - 1. Evidence of chronic or acute health problem
 - 2. Evidence of educational deficits
 - 3. Educational deficits causally linked to the chronic or acute health problem
 - 4. Deficits that are severe enough that the student's educational needs cannot be met in a regular educational program without special education and related services or the student is at risk of further educational delay

- B. The student must demonstrate deficits in **one or more** of the following areas:
 - 1. Cognitive Functioning
 - 2. Communication Skills
 - 3. Social/Emotional Functioning
 - 4. Sensory/Perceptual Functioning
 - 5. Motor Functioning
 - 6. Adaptive behavior

**Exclusionary
Factors:**

- A. The acute or chronic illness does not affect educational performance.

- B. Students' needs are better identified under other eligibility categories.

**Supportive
Text:**

Examples of acute or chronic health problems which may affect educational performance are attention deficit/hyperactivity disorder (***please see additional eligibility criteria information***), heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, diabetes, Tourette's Syndrome, or other diagnosed medical conditions.

These health problems **must** be documented by medical reports and/or consultations.

A diagnosis in one of the above areas does not constitute eligibility for special education services. Eligibility is determined at the Eligibility Determination Conference and adverse effects must be documented.

DETERMINATION OF ADVERSE EFFECTS OF ADHD AS RELATED TO OHI

STUDENT: _____ DOB: _____ DATE: _____

TEACHER/S: _____ GRADE: _____

In order to be eligible for special education services, a student diagnosed with Attention Deficit Hyperactivity Disorder must meet the following criteria.

- 1. The student must have a medical diagnosis of ADHD.
- 2. The student must exhibit significant academic difficulties based on the following characteristics.

Check characteristics that significantly impact educational performance:
(Please rank order the top 5 characteristics and attach copies of observable and measurable data to support the adverse effects).

- Careless mistakes in school or other activities
- Difficulty sustaining attention to task
- Difficulty following multi-step directions/instructions
- Fails to finish or turn in schoolwork
- Difficulty organizing tasks or projects
- Easily distracted by external stimuli
- Forgetful in daily activities
- Trouble concentrating in class
- Need for close supervision to complete assigned tasks
- Verbally and/or physically disrupts instruction
- Fidgety, restless, or physically active
- Often on the go or acts as if “driven by a motor”

Others: _____

- 3. Interventions must have been tried in the past and have been documented. Please mark those that have been tried and attach copies of the documentation to support the interventions.

Interventions:

- 504 Plan-Please attach a copy.
- Formal observation (such as the BOSS-Behavior Observation of Students in Schools).
- Assignment sheet/notebook signed off by teachers and/or parents.
- Proximity to teacher.
- Peer tutoring.
- One-on-one assistance from teacher.
- Use of visual cues to return to tasks vs. verbal directions.
- Frequent breaks-allowing the student to move around the classroom.
- Allowed to redo work.
- Reduce assignment size.
- Assignments on-line or on school website for parent/student information.
- Organizing folders for each academic subject.
- Behavior modification plan with documentation of the effects of the consequences
- Medication
- If medication has been prescribed, an 8-9 week trial period before a referral is made for special education evaluation.

Other accommodations or modifications that have been tried:

4. Student must be failing 1 or more core academic subjects.

RESOURCES FOR TEACHERS AND PARENTS:

Attention Deficit Disorders Intervention Manual-Second Edition written by S. McCarney, Ed.D. and T. Arthaud, Ph.D. Published by Hawthorne Educational Services Inc.

Teaching Learning Strategies and Study Skills to Students with Learning Disabilities, Attention Deficit Disorders, or Special Needs-Third Edition written by S. Strichart and C. Mangrum II. Published by Allyn and Bacon.

The Learning Disability Intervention Manual-Revised Edition written by S. McCarney, Ed.D. and A. Bauer, M.Ed. Published by Hawthorne Educational Services Inc.

The Parent's Guide: Solutions to Today's Most Common Behavior Problems in the Home written by S. McCarney, Ed.D. and A. Bauer, M.Ed. Published by Hawthorne Educational Services Inc.

The Parent's Guide to Attention Deficit Disorders written by S. McCarney and T. Arthaud. Published by Hawthorne Educational Services, Inc.

The "Putting on the Brakes" Activity Book for Young People with ADHD written by P. Quinn, M.D. and J. Stern, M.D. Published by Magination Press.

The Teacher's Guide to Behavioral Interventions: Intervention Strategies for Behavior Problems in the Educational Environment written by K. Cummins Wunderlich, M.Ed. Published by Hawthorne Educational Services Inc.

First Reading: 6/12/06

Second reading and Adoption: 7/11/06

SPECIFIC LEARNING DISABILITY

300.8(c)(10) [226.75] Specific learning disability defined: Specific learning disability is a disorder in one or more of the basic psychological processes involved in understanding or in using spoken or written language that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. The term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term does not apply to students who have learning problems that are primarily the result of visual, hearing, or motor abilities; cognitive disability, emotional disturbance; or environmental, cultural, or economic disadvantage.

300.309(a) [226.130(a)] Criteria for specific learning disability: A group of qualified professionals and the parent of the child may determine that a child has a specific learning disability if:

- 1) The child does not achieve adequately for the child's age or does not meet state-approved grade-level standards in one or more of the following areas, when provided with learning experiences and instruction appropriate for the child's age or state-approved grade level standards:
 - Oral expression;
 - Listening comprehension;
 - Written expression;
 - Basic reading skills;
 - Reading fluency skills;
 - Reading Comprehension;
 - Mathematics calculation; and
 - Mathematics problem solving;
- 2)(a) The child does not make sufficient progress to meet age or state-approved grade-level standards in one or more of the areas identified in this section when using a process based on the child's response to scientific, research-based interventions; or
(b) The child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, state-approved grade level-standards, or intellectual development, that is determined by the group to be relevant to the identification of a specific learning disability, using appropriate assessments, consistent with 300.304 and 300.305; and
- 3) The group determines that its findings under this section are not primarily the result of:
 - (a) A visual, hearing, or motor disability;
 - (b) Cognitive disability;
 - (c) Emotional disturbance;
 - (d) Cultural factors;
 - (e) Environmental or economic disadvantage; or
 - (f) Limited English proficiency.

300.309(b) [226.130] To ensure that underachievement in a child suspected of having a specific learning disability is not due to lack of appropriate instruction in reading or math, the group must consider, as part of the evaluation described in this article:

- (1) Data that demonstrate that prior to, or as a part of, the referral process, the child was provided appropriate instruction in regular education settings, delivered by qualified personnel; and
- (2) Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, which was provided to the child's parents.

In determining eligibility for a specific learning disability, the LEAs must utilize a response to scientific, research-based intervention model (RTI) or as determined by the IEP team, may in addition use a severe discrepancy model.

RESPONSE TO INTERVENTION

Eligibility using RTI will be determined through a comprehensive individual evaluation process which will include:

- Documented failure to respond to scientific, research-based interventions; data collected will show the rate of learning/performance difference and grade level difference over time and interventions using trend line analysis.
Evidence should be provided that:
 1. minimally, data has been collected to support lack of responsiveness with at least eight progress monitoring data points per intervention (ideally one per week) and a minimum of 2 independent interventions
 2. multiple interventions or increased intensity of a single intervention have been attempted in addition to the core curriculum
 3. interventions are of a highly intense nature
 4. interventions have been implemented with integrity
 5. the evaluation team must consider the intensity level of the current intervention(s) and if the student requires continued implementation of those interventions for the student to make adequate progress

- Documented deficit in one or more of the basic psychological processes may be considered, as evidenced through the use of one or more of the following: nationally-normed assessment tools, observations, error analysis, curriculum-based measures, record review, test scores, interviews, etc. To be eligible under the category of SLD, the student may demonstrate a processing deficit that is chronic and intrinsic in nature and which exists across settings as supported by the measures listed above. The assessment of processing areas may include, but not be limited to, the following categories:
 1. Perception (auditory, visual, spatial)
 2. Memory (immediate, short-term, working, long-term)
 3. Conceptualization (classification, problem solving, reasoning, etc.)
 4. Attention (selective, maintenance, detail, self-monitoring)
 5. Perceptual-motor (integration, planning, speed)
 6. Organization (verbal, mental, spatial)
 7. Processing speed

In addition, the following criteria must be used to determine SLD using RTI:

The IEP team must be able to answer YES to the following questions:

- A) Did the student receive at least two independent phases (minimum of 8 weeks each) of intensive Tier III interventions in the general education curriculum that were implemented with fidelity? Is there evidence of the student's non-responsiveness at Tier III that reflects he or she is learning at a rate significantly less than his or her peers?
If No, the district has not gathered sufficient documentation to determine eligibility using the RTI model.

- B) If YES to A, is there evidence of the student's under achievement based on RTI and other existing data that meets at least two of the following three criteria?
 - CBM scores are significantly lower than the scores of the child's peers (e.g., Level of CBM score is at or lower than the 10th percentile of the

child's peer group) and the student's progress (rate of growth) is not closing the achievement gap toward the aim line;

- Individual academic achievement testing is at least 1.5 standard deviations below the mean.
- The intensity level of the current intervention(s), as defined by the local LEA and SASSED IEP team, is to such a degree that continued intervention is unable to be sustained in the regular curriculum exclusively.

Adverse Educational Effect

The disability **MUST** have a direct and adverse effect on the student's ability to make adequate educational progress without special education and related services.

DISCREPANCY MODEL

The Discrepancy Model may be used in conjunction with the required RTI Model per IEP team decision.

Eligibility using the discrepancy model will be determined through a comprehensive individual evaluation process which will include, but is not limited to:

If using the discrepancy model, the group finds that the child has a severe discrepancy of at least 1 standard deviation between achievement and intellectual ability in one or more of the eligibility areas.

- Intellectual ability-When using a measure of intellectual functioning which has verbal and performance scales, the total scale must be used unless there is a difference of more than one standard deviation or a statistically significant difference per that ability measure's manual between the two scores, as outlined by the evaluation instrument. If there is a statistically significant difference between the two scales, then the higher scale may be used.
- Academic achievement (nationally norm-referenced and criterion-referenced) On nationally norm-referenced tests, a severe discrepancy is defined as at least 1 standard deviation difference between achievement and intellectual ability in one or more of the eligibility areas. On criterion-referenced tests, at or below the 10th percentile performance in one of the eligibility areas.
- Observation
- Indirect sources of data (ie. teacher and/or parent reports)
- If the team decides there are other areas of suspected disability, other evaluation(s) must be given including, if appropriate, speech or language, social skills, etc.
- Documented deficit in one or more of the basic psychological processes may be considered, as evidenced through the use of one or more of the following: nationally-normed assessment tools, observations, error analysis, curriculum-based measures, record review, test scores, interviews, etc. To be eligible under the category of SLD, the student may demonstrate a processing deficit that is chronic and intrinsic in nature and which exists across settings as supported by the measures listed above. The assessment of processing areas may include, but not be limited to, the following categories:
 1. Perception (auditory, visual, spatial)
 2. Memory (immediate, short-term, working, long-term)
 3. Conceptualization (classification, problem solving, reasoning, etc.)
 4. Attention (selective, maintenance, detail, self-monitoring)
 5. Perceptual-motor (integration, planning, speed)
 6. Organization (verbal, mental, spatial)
 7. Processing speed

Adverse Educational Effect

The disability **MUST** have a direct and adverse effect on the student's ability to make adequate educational progress without special education and related services.

Supportive

Text:

300.306(c) Procedures for determining eligibility and educational need

(1) In interpreting evaluation data for the purpose of determining if the child is a child with a disability under Sec. 300.8 and the educational needs of the child, each public agency must—

- (i) Draw upon information from a variety of sources, including aptitude and achievement tests, parent input, and teacher recommendations, as well as information about the child's physical condition, social and cultural background, and adaptive behavior; and
- (ii) Ensure that information obtained from all of these sources is documented and carefully considered.

300.307(a) [226.130(a)] Additional procedures for identifying children with specific learning disabilities. In addition to the Federal Definition outlined in **300.8(c)(10)**, in order for a school district to determine a child as having a specific learning disability, the school district:

- (1) Must not require the use of a severe discrepancy between intellectual ability and achievement for determining whether a child has a specific learning disability.
- (2) Must permit the use of a process based on the child's response to scientific, research-based intervention; and
- (3) Must permit the use of other alternative research-based procedures for determining whether a child has a specific learning disability.

300.308(a) [226.130(a)] Additional group members for specific learning disabilities. The determination of whether a child suspected of having a specific learning disability is a child with a disability shall be made by the child's parents and a team of qualified professionals, which must include:

- (1) The child's regular teacher;
- (2) If the child does not have a regular teacher, a regular classroom teacher qualified to teach a child of that age;
- (3) If the child is less than school age, an individual qualified by SEA to teach a child of that age; and

300.308(b)(4) At least one person qualified to conduct individual diagnostic evaluations of children, such as a school psychologist, speech-language pathologist, remedial reading teacher, school social worker, or special education teacher.

300.309(c) [226.130] The school district must promptly request parental consent to evaluate the child to determine whether the child needs special education and related services, and must adhere to the timeframes described in 300.301 and 300.303, unless extended by mutual written agreement of the child's parents and a group of qualified professionals. The district must request such consent if, prior to a referral, a child has not made adequate progress after an appropriate period of time when provided instruction, as described in section 300.306(a)(1) and whenever a child is referred for an evaluation.

300.310(a) [226.130(a)] Observation for specific learning disabilities. The school district shall ensure that the child is observed in the child's learning environment, including the regular classroom setting, to document the child's academic performance and behavior in the areas of difficulty.

The group described in this section, in determining whether a child has a specific learning disability must:

- (1) Use information from an observation in routine classroom instruction and monitoring of the child's performance that was done before the child was referred for an evaluation; or
- (2) Have at least one member of the group conduct an observation of the child's academic performance in the regular classroom.

300.310(b) [226.130(c)] If a child is less than school age or out of school, a group member must observe the child in an environment appropriate for a child of that age.

300.311(a) [226.130(a)] Documentation of eligibility for specific learning disabilities. For a child suspected of having a specific learning disability, the documentation of the determination of eligibility must contain a statement of:

- (1) Whether the child has a specific learning disability;
- (2) The basis for making the determination, including an assurance that the determination has been made in accordance with 300.306(c)(1)
- (3) The relevant behavior, if any, noted during the observation of the child and the relationship of that behavior to the child's academic functioning;
- (4) The educationally relevant medically findings, if any;
- (5) Whether:
 - (a) The child does not make sufficient progress to meet age or state-approved grade level standards consistent with 300.309 (a)(2)(i); and
 - (b) The child does not achieve adequately for the child's age or does not meet state-approved grade-level standards consistent with 300.309 (a)(2)(i); or the child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, state-approved grade level standards or intellectual development consistent with 300.309 (a)(2)(ii);
- (6) The determination of the group concerning the effects of a visual, hearing, or motor disability; cognitive disability; emotional disturbance; cultural factors; environmental or economic disadvantage; or limited English proficiency on the child's achievement level;
- (7) If the child has participated in a process that assesses the child's response to scientific, research-based intervention:
 - (a) The instructional strategies used and the student-centered data collected; and
 - (b) The documentation that the child's parents were notified about:
 - (i) The state's policies regarding the amount and nature of student performance data that would be collected and the general education services that would be provided;
 - (ii) Strategies for increasing the child's rate of learning; and
 - (iii) The parent's right to request an evaluation;

300.311(b) [226.130(a)] Group members to certify reports in writing. Each group member must certify in writing whether the report reflects the group member's conclusion. If it does not reflect the group member's conclusion, the group member must submit their conclusion in a separate statement.

FIRST READING: 5/12/09

SECOND READING AND ADOPTION: 6/08/09

REVISED: 10/09/10

SPEECH OR LANGUAGE IMPAIRMENT (S/L)

Definition: A communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment, that adversely affects a child's educational performance.

**Eligibility
Criteria:**

- A. A student is eligible for speech/language therapy when it is determined that a disability exists which adversely effects the student's educational performance and requires specialized services to address the adverse effect(s). Adverse effects must be documented.

- B. The following severity classifications apply to all disorder areas:
 - 1. Minimally Affects - impairment minimally affects the ability to communicate in school learning and/or other social situations as noted by at least one other familiar listener, such as teacher, parent, sibling, or peer.
 - 2. Interferes With - impairment interferes with the individual's ability to communicate in school learning and/or other social situations as noted by at least one other familiar listener.
 - 3. Limits - impairment limits the individual's ability to communicate appropriately and respond in school learning and/or social situations. Environmental and/or student concern is evident and documented.
 - 4. Prevents - impairment prevents the individual from communicating appropriately in school and/or social situations.

**Exclusionary
Factors:**

A student is not eligible for special education and related services in the area of speech and language under the following conditions:

- A. Articulation
 - 1. Sound errors are consistent with developmental age or are within normal articulation development.
 - 2. Articulation differences are due primarily to unfamiliarity with the English language, dialectical differences, temporary physical disabilities, or environmental, cultural or economic factors.
 - 3. The articulation errors do not interfere with the student's ability to benefit from education.

- B. Language and Literacy
 - 1. Language differences are primarily due to environmental, cultural or economic factors including non-standard English and regional dialect.
 - 2. Language performance does not interfere with the student's ability to benefit from education.

- C. Fluency
 - 1. Is part of normal speech development
 - 2. Does not cause the speaker to modify behavior
 - 3. Does not interfere with the student's ability to benefit from education

- D. Vocal
 - 1. Is the result of temporary physical factors such as allergies, colds, abnormal tonsils or adenoids, short term vocal abuse or misuse
 - 2. Is the result of regional, dialectic or cultural differences
 - 3. Does not interfere with the student's ability to benefit from education

- E. Student's needs are better identified under other eligibility categories.

**Supportive
Text:**

Educational performance in terms of speech/language impairments describes the relationship between a student's communication skills and his or her academic achievement and ability to establish and maintain social relationships and to experience sound emotional development in the school environment.

**APPENDIX D
(Speech and Language)**

SEVERITY RATING GUIDELINES

The severity rating helps to determine the nature and amount of intervention required to meet the needs of students identified as speech/language impaired.

The severity ratings are divided into four categories - minimally affects, interferes with, limits, and prevents communication - each of which is given a point value on the basis of standardized test results, observations, and clinical judgment. The amount of speech/language service a student receives may be proportional to the severity of his/her impairment and is in relation to the nature of the intervention model(s) and the goals and objectives determined by the IEP conference participants.

Minimally Affects	1 service delivery unit	15-30 minutes per/wk
Interferes With	2 service delivery units	30-60 minutes per/wk
Limits	3 service delivery units	60-90 minutes per/wk
Prevents	5 service delivery units	91+ minutes per/wk

ARTICULATION/PHONOLOGICAL

The student with an articulation disorder has deficiency in his/her ability to produce sounds correctly in conversational speech. This disorder is inconsistent with chronological and/or mental age expectancies. Articulation errors are not related to cultural or dialectical differences.

The developmental ages referred to in this section are as follows:

<u>Age</u>	<u>Sound</u>
3	b, p, m, n, w, h, vowels, diphthongs
4	k, g, t, d, ng, y
5	f
6	v, th (voiceless), l
7	s, z, sh, ch, j, zh, r, hw, th (voiced)

Consideration must be given to the student's chronological age, environment, and other handicapping conditions.

Minimally Affects	Intelligible 75% of the time in connected speech. No more than two speech sound errors outside developmental guidelines. Students may be stimulative for error sounds.
Interferes With	Intelligible 50% of the time in connected speech Substitutions and distortions and some omissions may be present. There is limited stimulability for the error phonemes.

Limits	<p>Less than 50% intelligible in connected speech</p> <p>Deviations may range from extensive substitutions and many omissions to extensive omissions. A limited number of phoneme classes are evidenced in a speech-language sample. Consonant sequencing is generally lacking. Augmentative communication systems may be warranted.</p>
Prevents	<p>Speech is unintelligible without gestures and cues and/or knowledge of the context. Usually there are additional pathological or physiological problems, such as neuromotor deficits or structural deviations.</p> <p>Augmentative communication systems may be warranted.</p>

LANGUAGE AND LITERACY

The student with a language impairment demonstrates impairment and/or deviant development of comprehension and/or use of a spoken symbol system. This may include:

1. Language form - the portion of language that refers to the sentence structure of what is said (phonology, morphology, syntax).
2. Language content - the portion of language that refers to meaning of words and sentences including abstract concepts of language (semantics).
3. Language use - the context in which language can be used and the purpose of communication (pragmatics). Children with pragmatic problems demonstrate difficulty in communicating effectively, although form and content may be intact.

Minimally Affects	<p>The student demonstrates a deficit in receptive, expressive, or pragmatic language as measured by two or more diagnostic procedures/standardized tests. Performance falls from 1-1.5 standard deviations below the mean standard score.</p>
Interferes With	<p>The student demonstrates a deficit in receptive, expressive or pragmatic language as measured by two or more diagnostic procedures/standardized tests. Performance falls from 1.5 -2 standard deviations below the mean standard score.</p>
Limits	<p>The student demonstrates a deficit in receptive, expressive, or pragmatic language as measured by two or more diagnostic procedures/standardized tests (if standardized tests can be administered). Performance is greater than 2 standard deviations below the mean standard score.</p> <p>Augmentative communication systems may be warranted.</p>
Prevents	<p>The student demonstrates a deficit in receptive, expressive, or pragmatic language which prevents appropriate communication in school and/or social situations.</p> <p>Augmentative communication systems may be warranted.</p>

In some situations, severity of the disabling condition caused by a language impairment may need to be determined by factors other than standardized tests. In these cases, eligibility and severity would need to be determined by the impact of the language impairment on the student's communicative, academic, and social competence, thereby adversely impacting educational performance. Clinical observations, language samples, and consultation with other school personnel are important components in determining eligibility of language-impaired students.

FLUENCY

A fluency impairment is defined as the abnormal flow of verbal expression. It is characterized by impaired rate and rhythm of connected speech and may be accompanied by struggle behavior.

A tape recorded sample of a minimum of 100 words is recommended to determine eligibility and severity.

Consideration must be given to the student's chronological age and perception of the problem by the student and parents, the contextual situations in which the student functions and the overall impact on educational performance.

It is important to note that the criteria should be interpreted as guidelines and may vary with specific circumstances affecting a particular student.

Minimally Affects	2 - 4% atypical disfluencies within a speech sample of at least 100 words. No tension to minimal tension. The student is aware of the disfluencies. He/she may be frustrated with disruptions in speech flow. He/she speaks freely in most speaking situations.
Interferes With	5 - 8% atypical disfluencies within a speech sample of at least 100 words. Noticeable tension and/or secondary characteristics are present. The student is aware of the disfluencies. He/she shows frustration about stuttering. He/she does not contribute fully in class. He/she avoids some speaking situations.
Limits	9 - 12% atypical disfluencies within a speech sample of at least 100 words. Excessive tension and/or secondary characteristics are present. The student shows a significant reaction to stuttering. He/she avoids many speaking situations and limits choices in activities due to stuttering.
Prevents	More than 12% atypical disfluencies within a speech sample of at least 100 words. Excessive tension and/or secondary characteristics are present. The student shows a strong negative reaction to stuttering. He/she avoids speaking in most situations.

VOICE

A voice impairment is defined as any deviation in pitch, intensity, quality, or other attributes which consistently interferes with communication; draws unfavorable attention; adversely affects the speaker or the listener; or is inappropriate to the age, sex, or culture of the individual. Voice quality may be affected by either organic or functional factors.

A tape recorded speech sample of a minimum of 100 words of connected speech is recommended to determine eligibility and severity.

Minimally Affects	Voice difference including hoarseness, nasality, denasality, pitch or intensity inappropriate for the student's age; is of minimal concern to parent, teacher, student or physician. Medical referral may be indicated
Interferes With	Voice difference is of concern to parent, teacher, student or physician. Voice is not appropriate for age and sex of the student. It is distracting to most listeners. Medical referral may be indicated
Limits	Voice difference is of concern to parent, teacher, student or physician. Voice is distinctly abnormal for age and sex of the student. Effective verbal communication is limited. Medical referral is indicated
Prevents	Speech is largely unintelligible due to aphonia or severe hypernasality. Extreme effort is apparent in production of speech. The student has no affective vocal/verbal communication. Medical referral is indicated

APPENDIX E
SPEECH/LANGUAGE REQUEST FORM

Student _____ **Birthdate** _____

Parent/Guardian _____ **Phone** _____

Teacher _____ **Grade** _____

Request: Classroom Observation _____
One:One Screening _____

Reason for request: (check all areas of concern)

_____ misarticulation of speech sounds

_____ poor vocabulary or word finding

_____ errors in grammar and/or syntax

_____ difficulty following directions

_____ understanding or using language is delayed

_____ stuttering/fluency problems

_____ voice problems, such as hoarseness or nasality

Briefly state concern(s): _____

Have you discussed concerns with parents? Yes/No

Are the parents concerned? Yes/No

Is there an adverse affect in the classroom? Yes/No

List any support services outside the classroom _____

List student's strengths _____

Requested by: _____ **Date:** _____

Date screened: _____ **Results:** _____

Date of notification: _____

**DETERMINATION OF ADVERSE EFFECTS
SPEECH/LANGUAGE CHECKLIST**

Student: _____ **DOB:** _____ **Date:** _____

Teacher: _____

Grade: _____

Check **ALL** that apply:

ARTICULATION

_____ Speech sound production/articulation is understandable or comparable to peers

_____ Speech sound production is not understandable

_____ Understandable with careful listening/often asked to repeat

_____ Inappropriate errors noted

_____ Limited output

LANGUAGE

_____ Language skills comparable to peers

_____ Does not use appropriate grammar/syntax/semantics

_____ Does not ask/answer questions (appropriately)

_____ Pragmatics of language are delayed (speech initiation, eye contact, turn-taking)

_____ Does not understand/use age appropriate vocabulary

_____ Does not follow verbal directions without repetitions

_____ Does not express self effectively

_____ Poor problem solving skills

_____ Difficulty with figurative language

_____ Jargon-speech or babbling present

_____ Adversely affects classroom performance

Additional comments: _____

**DETERMINATION OF ADVERSE EFFECTS
VOICE & FLUENCY**

Student: _____ **DOB:** _____ **Date:** _____

Teacher: _____

Grade: _____

Check **ALL** that apply:

FLUENCY

_____ Dysfluencies are not observed

Dysfluencies are characterized by: _____ prolonged sounds, _____ blocks, _____ repetitions,
_____ extra words/noises, _____ words are "stuck"

_____ Avoids speaking situations

_____ Secondary characteristics present (tension, jerking, gasping, poor eye contact)

Adverse effects on: _____ oral reading
_____ structured speaking task
_____ conversation with peers
_____ conversation with adults

VOCAL QUALITY

_____ voice problems are not observed

_____ vocal quality is raspy, hoarse, harsh, or nasal

_____ student has seen physician regarding voice

Adversely affects: _____ oral reading
_____ structured speaking tasks
_____ conversation with peers
_____ conversation with adults

Additional Comments (parent awareness, academic impact, peer relationships): _____

TRAUMATIC BRAIN INJURY (TBI)

Definition:

An acquired injury to the brain caused by an external physical force resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a child's educational performance. The term applies to open or closed head injuries.

Eligibility Criteria:

- A. The student must demonstrate **all** of the following:
 - 1. Evidence of traumatic brain injury
 - 2. Evidence of educational deficits
 - 3. Educational deficits causally linked to the traumatic brain injury
 - 4. Deficits that are severe enough that the student's educational needs cannot be met in a regular educational program without special education and related services or the student is at risk of further developmental delay

- B. The student must demonstrate deficits in **one or more** of the following areas:
 - 1. Cognitive Functioning
 - 2. Communication Skills
 - 3. Social/Emotional Functioning
 - 4. Sensory/Perceptual Functioning
 - 5. Motor Functioning
 - 6. Adaptive Behavior

Exclusionary Factors:

- A. Brain injuries that are congenital or degenerative, or brain injuries induced by birth trauma.

- B. Student's needs are better identified under other eligibility criteria.

Supportive Text:

The term traumatic brain injury includes *sequelae* from several different types of injuries including Aclosed@ injuries in which the brain may be bruised or injured within the skull but no fractures or opening into the brain occurs, i.e., asphyxial injuries from near drowning; or Aopen@ injuries in which the skin and bone surrounding the brain are disrupted, i.e., a gunshot wound.

Students with TBI eligibility may exhibit learning difficulties and/or behaviors which are similar to other students with special needs. However, because of the unique personal history of the student with TBI eligibility, common approaches, interventions and teaching strategies which have proven effective with other students may fail with the student with TBI. Important differences are:

- 1. TBI is an ACQUIRED disability, not a congenital or developmental disability. Students with TBI have a history of a previously successful experience in academic and social settings.
- 2. Students with TBI have internalized a self-identity of being anormal@ before their injury.

3. Students with TBI have deficits which may fall anywhere along a full continuum of severity across different skill areas, with frequent discrepancies and inconsistencies in performance. Testing usually demonstrates islands of preserved higher-level skills and gaps in other, more rudimentary skill areas.
4. The performance of students with TBI will change, sometimes dramatically, for years after their injury. These changes can either be improvement or decline in one or several different areas.
5. Due to unpredictable spurts of progress or stagnation in acquiring new skills, the recovery process of students with TBI varies and fluctuates.
6. Students with TBI may experience severe deficits in new learning, integration and generalization of skills despite their retaining most basic competencies.
7. Complex combinations of difficulties across motor, sensory, cognitive, social and emotional realms often require an immense variety of compensatory and adaptive strategies.
8. Students with TBI often have a strong base of previously learned behavior and a fund of knowledge which may assist more rapid relearning.
9. Students with TBI may be less likely to benefit from traditional approaches to behavior modification or behavior management because of the neurological and cognitive bases to most of their behavioral difficulties.

VISUAL IMPAIRMENT (VI)

Definition: An impairment in vision that, even with correction, adversely affects the child's educational performance (includes partial sight and blindness).

Eligibility Criteria: Students are eligible for placement if they meet at least one of the ophthalmological criteria and one or more of the educational criteria. Students are eligible only if these characteristics interfere with their academic, emotional, or social development.

1. Ophthalmological Criteria
 - a. Best corrected visual acuity of 20/200 or less in better eye (legally blind).
 - b. Medical diagnosis of visual impairment
2. Educational Criteria
 - a. Academic performance is significantly below expectancy as a result of a visual impairment in any of the following areas:
 - Reading
 - Spelling
 - Language/English
 - Content subject areas
 - Vocabulary usage and development
 - b. The discrepancy between the student's ability and achievement is determined to be severe (one standard deviation below the mean) as determined by standardized testing.
 - c. The discrepancy between the student's verbal and performance scores is determined to be severe.

Exclusionary Factors:

- A. Visual impairment does not affect educational performance.
- B. Student's needs are better identified under other eligibility categories.

**G. Notice of Procedural Safeguards for
Parents/Guardians**

H. Notice and Consent Forms

I. IEP Information

IMPORTANT INFORMATION FOR STARTING THE YEAR

- I. IT IS CRITICAL FOR SASED TO MAINTAIN A CURRENT, ACCURATE CLASS LIST** in order that all students are counted for funding purposes.

Please assist the office by double checking all class lists information for accuracy. Fill out the student input information sheet for all new students, and students who have left the district. Students will be added to the computer program when this sheet is faxed to the office.

- II. Please forward a copy of your schedule within 10 days of the beginning of the school year** to your Special Education Administrator, principal, and the teachers with whom you are working. Schedules should include subjects and student names for each time frame.

III. IEP Procedures

1. Be sure you have a complete IEP for the current school year for each student in your program.
2. Review and monitor the implementation of all related services and other recommendations specified in the IEP's of your students. In most cases, services should be in place by the second week of school. If problems arise, contact your Special Education Administrator. Make sure you have contact with psychologists/social workers regarding counseling per the IEP.
3. Be sure to complete a Communicator form on each student and give to appropriate personnel.

- IV. The Parent Contact Record** is used to document verbal and written communication between yourself and the student's parents. You may wish to include relevant discussions with other teachers. This documentation is vital for accountability purposes.

- V. Check with your home school** concerning local policies for attendance, report cards, lesson plans, location of health forms, full case study reports, and transcripts for high school students.

EDC/IEP FLOW CHART

FUNCTIONING LEVELS

Current levels of performance, grades,
Achievement testing, psychological testing



DISABILITY DIAGNOSIS

Review data to determine disability



ADVERSE EFFECT

Educational considerations



EDUCATIONAL NEEDS

What does the student need to be successful?



ELIGIBILITY

Is criteria met for needing services?



RELATIONSHIP OF DISABILITY TO CLASSROOM PERFORMANCE

Where is the student struggling?



ANNUAL GOALS & SHORT TERM OBJECTIVE

What do we want the student to learn?



PLACEMENT

What/Where is least restrictive environment?

**J. Transition Plan
and
Summary of Performance**

**K. Behavioral Intervention Guidelines
and
Individual Forms and Samples**

Individual Forms and Samples

VIII. SASSED POLICIES

B. POLICY FOR STUDENT FILES

Each district maintains a working file of student temporary records from the time a student is referred until there is a final disposition, whether from dismissal, graduation or relocation. These records include the following:

1. Full case study information consisting of the following:
 - a. Request to the Case Review Team
 - b. Academic history
 - c. Specialized class progress report
 - d. Culture/Language/Communication concerns
 - e. Behavior rating checklist
 - f. Regular education teacher' s report
 - g. School based health information
 - h. Parental consent for educational testing
 - i. Educational evaluation
 - j. Notice of results of educational testing
 - k. Notice of referral to special education
 - l. Social developmental history
 - m. Report of Psychological evaluation
2. Reports of eligibility determination conferences
3. Individualized educational plans
4. Information from prior school districts
5. Information from non-educational agencies, organizations or persons
6. Records relating to due process hearings and appeals
7. Pertinent teacher reports
8. Disciplinary information
9. Other information relevant to the education of the student
10. Record of release of temporary record information

Parents, guardians, divorced parents or students as identified in the School in the Special Code of Illinois and the Illinois Student School Records Act as having the legal right to review and/or copy records may do so by contacting the Records Custodian for the district or his designee.

C. ACKNOWLEDGEMENT OF THE STATUTORY REQUIREMENT THAT SCHOOL PERSONNEL REPORT SUSPECTED CASES OF CHILD ABUSE AND NEGLECT AS SET FORTH IN THE ILLINOIS ABUSED AND NEGLECTED CHILD REPORTING ACT. ILL. REV. STAT. 1985, PAR. 2051 ET. SEQ

Any school personnel, including teachers, administrators, nurses, social workers and psychologist, who have reasonable cause to believe a child, known to them in their professional capacity, may be an abused or neglected child are required by law to immediately report the case to the Department of Child and Family Services (DCFS). An "abused child" is one whose parent, or immediate family member, or other person responsible for the child's welfare, or any individual residing in the same home or a paramour of the child's parent, inflicts upon or creates a substantial risk of physical or emotional injury to the child, commits a sex offense against the child, or commits torture or inflicts excessive corporal punishment upon the child. A "neglected child" is one whose parent or other person responsible for the child's welfare fails to provide the child with the necessary care and support, such as nourishment, medical care, education as required by law, clothing and shelter, or who is abandoned. A child may not be considered abused or neglected solely because a parent or guardian, in good faith, depends upon spiritual prayer alone for the treatment of disease.

A report of suspected child abuse or neglect must be made orally to the DCFS either by calling the statewide 24-hour child abuse hotline number (1-800-252-2873) or by contacting the nearest DCFS office by telephone or in person. The oral report must be confirmed in writing to the appropriate Child Protective Service Unit within 48 hours. School personnel should, but are not required to, inform the school principal that they have reported a suspected abuse or neglect case to the DCFS.

When making a report to the DCFS, the following information is required, if known:

1. The name and address of the child and his/her parents or guardian.
2. The child's age, sex, and race.
3. The nature and extent of the abuse or neglect.
4. Any evidence of previous injuries.
5. The names of persons apparently responsible for the abuse or neglect.
6. The family's composition, including the names, ages, sexes, and races of other children.
7. The reporter's name, occupation, and a place where he or she may be reached.
8. The actions taken by the reporter.
9. Any other information the reporter believes may be helpful.

Any school personnel who report a suspected case of child abuse or neglect have complete legal immunity if the report was made in good faith. The name of the reporter is kept confidential. Any school personnel who willfully fails to report a case of abuse or neglect to the DCFS are guilty of a Class A misdemeanor and subject to a \$1,000 fine or up to one year in prison, or both. Any school personnel who knowingly transmits a false report to the DCFS are guilty of disorderly conduct and may be fined up to and including \$3,000.

ACKNOWLEDGEMENT

I, _____, hereby acknowledge that I have carefully read and understand the above statement, entitled "Acknowledgement of the Statutory Requirement that School Personnel Report Suspected Cases of Child Abuse and Neglect, as set forth in the Illinois Abuse and Neglected Child Reporting Act. Ill. Rev.Stat.14985, ch.23, par.2051 et seq."

Signature: _____

Date: _____

D. HARASSMENT

Workplace Harassment Prohibited

The SASED workplace environment shall be productive, respectful, and free of unlawful harassment. SASED employees shall not engage in harassment or abusive conduct on the basis of an individual's race, religion, national origin, sex, sexual orientation, age citizenship status, disability, or other protected status identified in SASED policy, *Equal Employment Opportunity and Minority Recruitment*. Harassment of students, including, but not limited to, sexual harassment, is prohibited by SASED policy: *Harassment of Students Prohibited*.

Sexual Harassment Prohibited

SASED shall provide a workplace environment free of unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct, or communications constituting harassment on the basis of sex as defined and otherwise prohibited by State and federal law.

SASED employees shall not make unwelcome sexual advances or request sexual favors or engage in any unwelcome conduct of a sexual nature when: (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment; (2) submission to or rejection of such conduct by an individual is used as the basis for employment, education, or participation in SASED activities; or (3) such conduct has the purpose or effect of substantially interfering with an individual's work or education performance or creating an intimidating, hostile, or offensive working/learning environment. Sexual harassment prohibited by this policy includes verbal or physical conduct. The terms intimidating, hostile, or offensive include, but are not limited to, conduct which has the effect of humiliation, embarrassment or discomfort. Sexual harassment will be evaluated in light of all the circumstances.

Making a Complaint: Enforcement

A violation of this policy may result in discipline, up to and including discharge. Any person making a knowingly false accusation regarding harassment will likewise be subject to disciplinary action, up to and including discharge. An employee's employment, compensation, or work assignment shall not be adversely affected by complaining or providing information about harassment. Retaliation against employees for bringing bona fide complaints or providing information about harassment is prohibited (see Board policy, *Uniform Grievance Procedure*).

Aggrieved persons, who feel comfortable doing so, should directly inform the person engaging in harassing conduct or communication that such conduct or communication is offensive and must stop.

Employees should report claims of harassment to the Nondiscrimination Coordinator/Complaint Managers and/or use the Board policy, *Uniform Grievance Procedure*. There are no express time limits for initiating complaints and grievances under this policy; however, every effort should be made to file such complaints as soon as possible, while facts are known and potential witnesses are available.

Contact Person for Reports or Complaints

The Special Education Director shall insert into this policy the names, addresses, and telephone numbers of SASSED's current Nondiscrimination Coordinator and Complaint Managers.

Nondiscrimination Coordinator:

Name Special Education Director
Address 2500 Taylor Avenue
Springfield, IL 62703
Telephone No. (217) 786-3250

Complaint Managers:

Name Asst. Director for SASSED
Address 2500 Taylor Avenue
Springfield, IL 62703
Telephone No. 217-786-3250

Name SASED Central Principal
Address 2500 Taylor Avenue
Springfield, IL 62703
Telephone No. 217-529-8849

The Special Education Director shall also use reasonable measures to inform staff members and applicants of this policy, which shall include reprinting this policy in the appropriate handbooks.

LEGAL REF.: Title VII of the Civil Rights Act, 42 U.S.C. §2000e et seq.,
29 C.F.R. §1604.11.
Title IX of the Education Amendments, 20 U.S.C. §1681 et seq.;
34 C.F.R. §1604.11.
Ill. Human Rights Act, 775 ILCS 5/2-101€, 5/2-102(D), 5/5-102,
and 5/5-102.2.
56 Ill. Admin. Code Parts 2500, 2510, 5210, and 5220.
Burlington Industries v. Ellerth, 118 S.Ct. 2257 (1998).
Fragher v. City of Boca Raton, 118 S.Ct. 2275 (1998).
Franklin v. Gwinnett Co. Public Schools, 1121 S.Ct. 1028 (1992).
Harris v. Forklift Systems, 114 S.Ct. 367 (1993).
Jackson v. Birmingham Board of Education, 125 S.Ct. 1497 (2005).
Meritor Savings Bank v. Vinson, 106 S.Ct. 2399 (1986).
Oncale v. Sundown Offshore Services, 118 S.Ct. 998 (1998).
Porter v. Erie Foods International, Inc., 576 F.3d 629 (7th Cir. 2009).
Sangamon County Sheriff's Dept. v. Ill. Human Rights Com'n., 908
N.E.2d 39 (Ill., 2009).
Uniformed Services Employment and Reemployment Rights Act
(1994), 38 U.S.C. §§4301 et seq.
Ill. Constitution, Art. I, §§17, 18, and 19.
105 ILCS 5/10-20.7, 5/10-20.7a, 5/10-21.1, 5/10-22.4, 5/10-23.5,
5/22-19, 5/24-4, 5/24-4.1, and 5/24-7.
Genetic Information Protection Act, 410 ILCS 513/25.
Ill. Whistleblower Act, 740 ILCS 174.
Ill. Human Rights Act, 775 ILCS 5/1-103 and 5/2-102.
Religious Freedom Restoration Act, 775 ILCS 35/5..
Ill. Equal Pay Act of 2003, 820 ILCS 112.
Victims' Economic Security and Safety Act, 820 ILCS 180/30.
23 Ill. Admin. Code, §1.230.

E. SEXUAL MISCONDUCT POLICY

Sexual Misconduct Policy Statement

Sangamon Area Special Education District (SASED) will not tolerate and will seek to eradicate any behavior by its employees, volunteers, or students, which constitutes Sexual Misconduct toward another employee, volunteer, or student. "Sexual Misconduct" means any actual, attempted, or alleged sexual molestation, assault, abuse, sexual exploitation or sexual injury. "Sexual Misconduct" does not include "sexual harassment". Sexual Harassment is governed by the SASED Sexual Harassment Policy.

Reporting Procedures and Designated Child Abuse Counselor

It is the express policy of the Sangamon Area Special Education District to encourage victims of Sexual Misconduct, and their parents or guardians in the case of minors, to come forward with such claims. SASED has selected a Designated Child Abuse Counselor who shall remain accountable for the implementation and monitoring of this policy. The identity of the Designated Child Abuse Counselor shall remain on file with the District. In order to conduct an immediate investigation, any incident of Sexual Misconduct must be reported as quickly as possible in confidence, as follows:

1. Employees and Volunteers

Employees and volunteers are required to report any known or suspected incidents of sexual misconduct according to the Illinois mandatory reporting guidelines. They must also report to their direct supervisor, the building principal or the Designated Child Abuse Counselor. If the report is made to the supervisor or building principal, that individual shall immediately notify the Designated Child Abuse Counselor. If the person to whom an employee or volunteer is directed to report is the offending person, the report should be made to the next higher level of administration or supervision.

2. SASED Central Students

Each year, parents or legal guardians of students shall be advised of the contents of this Sexual Misconduct Policy and be instructed to report any incident of known or suspected sexual misconduct to a social worker, the building principal or the Designated Child Abuse Counselor, unless that individual is the offending person. If the complaint is made to the social worker, or the building principal, that individual shall follow Illinois mandatory reporting policy and immediately notify the Designated Child Abuse Counselor.

Investigation and Confidentiality

All formal complaints will be given a full, impartial and timely investigation. During such investigation, while every effort will be made to protect the privacy rights of all parties, confidentiality cannot be guaranteed.

Discipline

Any SASED employee or volunteer who is determined, after an investigation, to have engaged in sexual misconduct in violation of this policy will be subject to disciplinary action up to and including discharge. Any student attending SASED Central School who is determined, after an investigation, to have engaged in sexual misconduct in violation of this policy will be referred to the SASED Central Principal in consultation with the student's local district administration for disciplinary action, including suspension and expulsion.

False accusations regarding sexual misconduct will not be tolerated, and any person knowingly making a false accusation will likewise be subject to disciplinary action up to and including discharge, with regard to employees, volunteers, or referral of students to their local districts.

SASED will discipline any individual who retaliates against any person who reports alleged sexual misconduct or who retaliates against any person who testifies, assists or participates in an investigation, a proceeding or a hearing relating to a sexual misconduct complaint. Retaliation includes, but is not limited to, any form of intimidation, reprisal, or harassment.

Child Abuse

Sexual abuse of a minor is a crime.

Child Abuse Incident Reporting and Follow-up:

Any case of known or suspected child abuse of a minor must be reported immediately in compliance with Illinois mandatory reporting guidelines and to the Designated Child Abuse Counselor and a police officer, or the State's Attorney Office.

In the event that the Designated Child Abuse Counselor is first notified of an incident or known or suspected child abuse, the Designated Child Abuse Counselor shall immediately notify the child's parent or legal guardian as the case may be (unless the suspected abuser is the child's parent or legal guardian), and the appropriate legal authorities as required by state or local law. The Designated Child Abuse Counselor shall prepare a Suspected Child Abuse Standard Report and immediately follow-up to investigate the incident and to ascertain the condition of the child. The Designated Child Abuse Counselor is encouraged to communicate any questions or concerns about any incident with legal counsel for SASED.

Any employee or volunteer involved in a reported incident of Sexual Misconduct or child abuse shall be immediately relieved of responsibilities that involve interaction with minors and/or shall be suspended, as determined by the SASED Board of Directors. Reinstatement of employees or volunteers involved in a reported incident of child abuse shall occur only after all allegations of child abuse have been cleared by SASED.

Maintenance of Record and Documents

The Designated Child Abuse Coordinator shall maintain all records and documentation required by law or otherwise required by this and other such related policies of SASED including all documents related to procedures for hiring-screening, employee/volunteer code of conduct, training, sign-in/sign-out, pick-up and release procedures, incident reporting follow-up and disciplinary action.

THIS POLICY IS TO BE REVIEWED AND SIGNED BY ALL EMPLOYEES AND VOLUNTEERS WHO HAVE OR MAY HAVE CHILDREN ASSIGNED TO THEIR CARE, CUSTODY, OR CONTROL.

The undersigned hereby acknowledges that he/she has read this Sexual Misconduct Policy, understands the contents thereof and agrees to abide by all terms set forth in the policy.

Signature: _____

Position: _____

Date: _____

F. EQUAL EMPLOYMENT OPPORTUNITY/MINORITY RECRUITMENT

SASED shall provide equal employment opportunities to all persons regardless of their race, color, religion, creed, national origin, sex, sexual orientation, age, ancestry, marital status, order of protection or arrest record, military status or unfavorable military discharge, citizenship status, provided the individual is authorized to work in the United States, use of lawful products while not at work, genetic information, being a victim of domestic or sexual violence, physical or mental disability, if otherwise able to perform the essential functions of the job with reasonable accommodation, and other legally protected categories.

Persons who believe they have not received equal employment opportunities should report their claims to the Director and/or Complaint Manager(s). The Special Education Director shall be the Nondiscrimination Coordinator. The Complaint Managers shall be the Assistant Director of Special Education and the SASED Central School Principal. No employee or applicant will be discriminated or retaliated against because he or she initiated a complaint, was a witness, supplied information, or otherwise participated in an investigation or proceeding involving an alleged violation of this policy or State or Federal laws, rules or regulations, provided the employee or applicant did not make a knowingly false accusation nor provide knowingly false information.

Administrative Implementation

Annually, July 1st, the Director of Special Education shall appoint Complaint Manager(s) for SASED.

Minority Recruitment

SASED will attempt to recruit and hire minority employees. This policy, however, does not require or permit the Cooperative to give preferential treatment or special rights based on a protected status without evidence of past discrimination.

Civil Rights Compliance Requirement

No person shall, on the grounds of race, color, national origin, age, or handicap, be excluded from participation in or be subjected to discrimination in any program or activity sponsored by the Sangamon Area Special Education District, nor will they be discriminated against on the basis of sex or religion.

LEGAL REF.: Age Discrimination in Employment Act, 29 U.S.C. §621 et seq.
Americans with Disabilities Act, Title I, 42 U.S.C. §12111 et seq.
Civil Rights Act of 1991, 29 U.S.C. §621 et seq., 42 U.S.C. §1981 et seq., §2000e et seq., 29 C.F.R. Part 1601.
Equal Employment Opportunities Act (Title VII of the Civil Rights Act of 1964), 42 U.S.C. §2000e et seq., 29 C.F.R. Part 1601.
Equal Pay Act, 29 U.S.C. §206(d).
Genetic Information Nondiscrimination Act, 42 U.S.C. §2000ff et seq.
Immigration Reform and Control Act, 8 U.S.C. §1324a et seq.
Rehabilitation Act of 1973, 29 U.S.C. §791 et seq.
Title VI of the Civil Rights Act of 1964, 42 U.S.C. §2000d et seq.
Pregnancy Discrimination Act, 42 U.S.C. §2000e(k).
Title IX of the Education Amendments, 20 U.S.C. §1681 et seq., 34 C.F.R. Part 106.

G. UNIFORM GRIEVANCE PROCEDURE

Students, parents/guardians, employees, or community members should notify any SASSED Complaint Manager if they believe that the Board of Directors, its employees, or agents have violated their rights guaranteed by the State or federal Constitution, State or federal statute, or SASSED policy, or have a complaint regarding any one of the following:

1. Title II of the Americans with Disabilities Act;
2. Title IX of the Education Amendments of 1972;
3. Section 504 of the Rehabilitation Act of 1973;
4. Title VI of the Civil Rights Act, 42 U.S.C. §2000d et seq.;
5. Equal Employment Opportunities Act (Title VII of the Civil Rights Act), 42 U.S.C. §2000e et seq.;
6. Sexual harassment (Illinois Human Rights Act, Title VII of the Civil Rights Act of 1964, and Title IX of the Education Amendments of 1972);
7. Bullying, 105 ILCS 5/27-23.7;
8. The misuse of funds received for services to improve educational opportunities for educationally disadvantaged or deprived children;
9. Curriculum, instructional materials, programs;
10. Victims' Economic Security and Safety Act;
11. Illinois Equal Pay Act of 2003, 820 ILCS 112;
12. Provision of services to homeless students;
13. Illinois Whistleblower Act, 740 ILCS 174;
14. Misuse of genetic information (Illinois Genetic Information Privacy Act (GIPA), 410 ILCS 513 and Titles I and II of the Genetic Information Nondiscrimination Act (GINA), 42 U.S.C. §2000ff et seq.
15. Employee Credit Privacy Act 820 ILCS 70.

The Complaint Manager will attempt to resolve complaints without resorting to this grievance procedure and, if a complaint is filed, to address the complaint promptly and equitably. The right of a person to prompt and equitable resolution of a complaint hereunder shall not be impaired by the person's pursuit of other remedies. Use of this grievance procedure is not a prerequisite to the pursuit of other remedies and use of this grievance procedure does not extend any filing deadline related to the pursuit of other remedies. All deadlines under this procedure may be extended by the Complaint Manager as he or she deems appropriate. As used in this policy, "school business days" means days on which SASSED's office is open.

1. Filing a Complaint

A person (hereinafter Complainant) who wishes to avail him or herself of this grievance procedure may do so by filing a complaint with any Complaint Manager. The Complainant shall not be required to file a complaint with a particular Complaint Manager and may request a Complaint Manager of the same sex. The Complaint Manager may request the Complainant to provide a written statement regarding the nature of the complaint or require a meeting with the parent(s)/guardian(s) of a student. The Complaint Manager shall assist the Complainant as needed.

2. Investigation

The Complaint Manager will investigate the complaint or appoint a qualified person to undertake the investigation on his or her behalf. If the Complainant is a student, under 18 years of age, the Complaint Manager will notify his or her parent(s)/guardian(s) that they may attend any investigatory meetings in which their child is involved. The complaint and identity of the Complainant will not be disclosed

except: (1) as required by law or this policy, (2) as necessary to fully investigate the complaint, or (3) as authorized by the parent/guardian of the student witness, or by the student if the student is 18 years of age or older.

Within 30 school business days of the date the complaint was filed, the Complaint Manager shall file a written report of his or her findings with the Special Education Director. The Complaint Manager may request an extension of time. If a complaint of sexual harassment contains allegations involving the Special Education Director, the written report shall be filed with the Board of Directors, which will make a decision in accordance with Section 3 of this policy. The Special Education Director will keep the Board of Directors informed of all complaints.

3. Decision and Appeal

Within 5 school business days after receiving the Complaint Manager's report, the Special Education Director shall mail his or her written decision to the Complainant by U.S. mail, first class, as well as the Complaint Manager.

Within 10 school business days after receiving the Special Education Director's decision, the Complainant may appeal the decision to the Board of Directors by making a written request to the Complaint Manager. The Complaint Manager shall promptly forward all materials relative to the complaint and appeal to the Board of Directors. Within 30 school business days, the Board of Directors shall affirm, reverse, or amend the Special Education Director's decision or direct the Special Education Director to gather additional information. Within 5 school business days of the Board of Directors decision, the Special Education Director shall inform the Complainant of the Board's decision.

This grievance procedure shall not be construed to create an independent right to a hearing before the Special Education Director or Board of Directors. The failure to strictly follow the timelines in this grievance procedure shall not prejudice any party.

Appointing Nondiscrimination Coordinator and Complaint Managers

Annually, by July 1st, a Nondiscrimination Coordinator and a Complaint Manager shall be appointed by the Board of Directors for SASSED. The Nondiscrimination Coordinator may serve as one of the Complaint Managers.

LEGAL REF.: Age Discrimination in Employment Act, 29 U.S.C. §621 et seq.
Americans With Disabilities Act, 42 U.S.C. §12101 et seq.
Equal Employment Opportunities Act (Title VII of the Civil Rights Act), 42 U.S.C. §2000e et seq.
Equal Pay Act, 29 U.S.C. §206 (d).
Genetic Information Nondiscrimination Act, 42 U.S.C. §200ff et seq.
Immigration Reform and Control Act, 8 U.S.C. §1324a et seq.
McKinney Homeless Assistance Act, 42 U.S.C. §11431 et seq.
Rehabilitation Act of 1973, 29 U.S.C. §791 et seq.
Title VI of the Civil Rights Act, 42 U.S.C. §2000d et seq.
Title IX of the Education Amendments, 20 U.S.C. §1681 et seq.
105 ILCS 5/2-3.8, 5/3-10, 5/10-20.7a, 5/10-22.5, 5/22-19, 5/24-4, 5/27-1, 5/27-23.7, and 45/1-15.
Illinois Genetic Information Privacy Act, 410 ILCS 513.
Illinois Whistleblower Act, 740 ILCS 174.
Illinois Human Rights Act, 775 ILCS 5.

Victims' Economic Security and Safety Act, 820 ILCS 180, 56
III. Admin. Code Part 280.
Equal Pay Act of 2003, 820 ILCS 112.
Employee Credit Privacy Act, 820 ILCS 70.
23 III. Admin. Code §§1.240 and 200-40.

H. FAMILY MEDICAL LEAVE POLICY

It is the policy of the Sangamon Area Special Education District to comply with the provisions of the federal Family and Medical Leave Act of 1993 (the "FMLA") and the regulations promulgated thereunder. Employees are to be able to participate in early child rearing of their children and to care for family members with serious health conditions or be absent from work due to their own serious illness without being forced to choose between such family obligations and their job security. Accordingly, all eligible District employees shall be entitled to a Family Medical Leave, on a gender neutral basis, provided the leave is taken in accordance with the following provisions

1. Eligible Employee

An employee who has been employed for at least twelve (12) months has worked at least 1,250 hours during the previous twelve (12) month period and is employed at a worksite where the Board of Directors employs at least 50 employees within a 75 mile radius and is not included in a recognized collective bargaining unit. Effective February 5, 1994 employees included in a recognized collective bargaining unit and who have worked at least 1250 hours in the previous twelve (12) months shall be eligible for the benefits set forth herein. The twelve (12) month period during which the twelve (12) weeks of leave entitlement occurs shall be calculated based upon the District's fiscal year, except the "single 12-month period" to care for a service member begins on the first day the eligible employee takes FMLA to care for a service member as described below and ends 12 months after that date.

- a. An eligible employee may take job-protected unpaid or paid leave or substitute appropriate paid leave if the employee has earned or accrued it, for up to a total of 26 work weeks in a "single 12-month period" to care for a covered service member with a serious injury or illness. Serious injury must be incurred in the line of duty on active duty that renders the service member medically unfit to perform the duties of his office, grade, rank or rating. This does not apply to former members of the armed forces or former members of the National Guard and members on the permanent disability retired list.

2. Purpose of Leave

Eligible employees shall be allowed Family Medical Leave for one or more of the following:

- a. because of the birth of a child of the employee and in order to care for such child;
- b. because a child has been placed with the employee for adoption or foster care;
- c. in order to care for a family member (spouse, son, daughter or parent) of the employee who suffers from a serious health condition as defined in the FMLA regulations at 29C.F.R.825.113; and
- d. because of a serious health condition(as defined in the FMLA regulations at 29C.F.R.825.113) that makes the employee unable to perform the functions of his/her position.
- e. To manage the affairs of a member of the National Guard and Reserves because of any qualifying exigency arising out of the fact that the employee's spouse, son, daughter, or parent or next of kin as defined in the FMLA regulations is a covered military member on active duty (or has been notified of an impending call or order to active duty) in support of a contingency operation. "Qualifying exigencies" are:

- 1) Short-notice deployment;
- 2) Military events and related activities;
- 3) Child care and school activities;
- 4) Financial and legal arrangements;
- 5) Counseling;
- 6) Rest and recuperation;
- 7) Post-deployment activities; and
- 8) Additional activities not encompassed in the other categories but agreed to by the employer and employee.

3. Term of Leave

Eligible employees shall be entitled to a total of twelve (12) workweeks of unpaid leave during the twelve (12) month period, as set forth in paragraph 1, subject to the following:

- a. the entitlement to leave shall expire at the end of the 12 month period beginning on the date of such birth or placement.
- b. a husband and wife who are both employed by the Board of Directors and both eligible for leave, are only permitted to take a combined total of 12 weeks of leave during any twelve (12) month period if the leave is taken because of the birth or placement of a child;
- c. leave may be taken on an intermittent basis (in separate blocks of time due to a single illness or injury) or reduced schedule (reducing the usual number of hours per week or per day) under the following conditions:
 - 1) if medically necessary when the purpose of the leave is to care for a seriously ill family member or because of the employee's own serious health condition.
 - 2) by joint agreement between the employee and the Board of Directors when the purpose of the leave is the birth or placement of a child for adoption or foster care; and
- d. if the employee requests paid accrued leave the Board of Directors shall notify the employee in writing that the paid leave shall be counted against the twelve (12) weeks of leave. This written notice shall be made before the leave begins or before a leave extension is granted.
- e. if the employee requests paid accrued leave and the Board of Directors determines the purpose of the leave is one applicable under this policy, the Board of Directors may notify the employee that the paid leave must be utilized prior to any unpaid leave and will be counted against the employee's twelve (12) weeks of leave granted under this policy. This notice shall be made before the leave begins or before a leave extension is granted, unless the Board of Directors does not have sufficient information to determine the reason for the leave until after the leave has begun.

4. Notice Requirements

When the leave is foreseeable, (i.e., based upon an expected birth or placement for adoption or foster care, or planned medical treatment for the employee or the employee's seriously ill family member), the employee is required to notify the Special Education Director or designee not less than 30 days before the date the leave is to begin of the intention to take leave pursuant to this policy. If the circumstances (i.e., date of birth or planned treatment)

require the leave to begin in less than 30 days, the employee shall notify the Special Education Director or designee as soon as practicable. The employee shall make a reasonable effort to schedule the planned treatment so as not to unduly disrupt operations, subject to the approval of the health care provider involved in administering the treatment. The Board of Directors may deny an employee's leave request until at least 30 days after the date the employee provides notice of the intention to take leave for unreasonable failure to provide timely advance notice for foreseeable leaves.

5. Substitution of Paid Leave

Employees entitled to paid sick leave of less than twelve (12) workweeks within a twelve (12) month period shall also be entitled to the additional weeks of leave on an unpaid basis necessary to attain the total of twelve (12) workweeks of leave granted under this policy. An eligible employee may elect, or the Board of Directors may require the employee to substitute accrued paid sick leave for all or any part of the unpaid twelve (12) weeks of leave granted pursuant to this policy under the following circumstances:

- a. accrued paid vacation or contingency leave may be substituted for leave for any purpose granted under this policy.
- b. accrued paid sick leave may be substituted if the leave is taken in order to care for a seriously ill family member or because of the employee's own serious health condition.

6. Medical Certification

The Board of Directors may require requests seeking leave to care for a seriously ill family member or because of the employee's own serious health condition be supported by medical certification from the family member's or the employee's health care provider. For foreseeable leaves the certification shall be provided to the Special Education Director or designee within fifteen (15) calendar days from the date the Board of Directors requests such certification or as soon thereafter as practicable. For unforeseeable leaves, the employee is required to provide certification as soon as is practicable, under the particular circumstances, after the date of the Board of Directors requests such certification. The certification shall contain the following:

- a. the date the serious health condition began;
- b. the health care provider's best medical judgment concerning the probable duration of the condition;
- c. a diagnosis of the condition and a brief statement of the prescribed treatment regimen, including whether inpatient hospitalization is required;
- d. if the purpose of the leave is to care for a seriously ill family member, a statement that the employee is needed to care for the family member including an estimate of the amount of time the employee will be needed;
- e. if the purpose of the leave is because of the employee's own serious health condition, a statement that the employee is unable to perform the functions of their position;
- f. in the case where intermittent or reduced schedule leave is requested for planned medical treatment, a statement of the dates and duration of such treatment;

- g. in the case where intermittent or reduced schedule leave is requested to care for a seriously ill family member or because of the employee's serious health condition, a statement that the intermittent or reduced leave schedule is medically necessary, as to the seriously ill employee, or necessary for the care of the family member, including the expected duration of its necessity.

In case where the Board of Directors has reason to doubt the validity of a medical certification it may require the employee to obtain a second opinion, at Board of Directors expense. The Board of Directors shall select the health care provider to supply the second opinion. In cases where the medical opinions in the first and second certifications conflict, the Board of Directors may require the employee to obtain a third certification, at Board of Directors Expense. The third health care provider shall be jointly selected by the Board of Directors and the employee and their certification shall be final and binding upon both the Board of Directors and the employee.

7. Medical Recertification

The Board of Directors may request recertification at reasonable intervals, but not more often than once every thirty (30) days except as allowed by FMLA regulations at 29C.F.R.825.308; such certification is at Board of Directors' expense. The Board of Directors may request recertification, regardless of the length of time since the last request, for the following:

- a. when the employee requests a leave extension (at employee expense);
- b. when the circumstances described by the original certification change significantly (i.e., the nature or duration of the illness changes significantly) (at Board of Directors' expense); or
- c. when the Board of Directors receives information that casts doubt upon the continuing validity of the original certification (at the expense of the Board of Directors).

8. Maintenance of Health Benefits

The Board of Directors shall maintain the employee's group health plan coverage for the duration of leave taken pursuant to this policy on the same basis, at the same level and under the same conditions coverage would have been provided had the employee not taken the leave. The Board of Directors and the employee shall continue to pay their respective applicable shares of the health care premiums during the duration of the leave as if the leave had not been taken. The Board of Directors may recover its share of any premium payments for any periods of unpaid leave from the employee if the employee fails to return to work after their leave entitlement has been exhausted. The Board of Directors also may recover any portion of the premium it paid which the employee was obligated to pay. If the employee substitutes paid sick leave for unpaid leave under this policy, their share of the health care premiums shall be paid by the method the Board of Directors normally utilizes during any employee's paid leave. If the leave is unpaid, the employee shall pay their share of the premium under the Board of Directors' existing procedures for employees on unpaid leave. Seniority will accrue during FMLA leaves only for the period of time the employee applies their accrued paid leave.

9. Return to Employment

At the end of the leave period taken pursuant to this policy, the employee shall be returned to the position held immediately prior to taking the leave, except for key employees under the circumstances set forth below. If that position is unavailable, the Board of Directors shall return the employee to an available position the employee is qualified to hold with equivalent pay and benefits and other terms and conditions of employment. The right to reinstatement ceases and the employment relationship between the employee and the Board of Directors will be deemed terminated if the employee unequivocally informs the Board of Directors of their intent not to return to their employment at the end of the leave period.

Key employees as defined by the FMLA shall not be denied any rights to reinstatement.

The Board of Directors may require the employee to submit medical certification from their health care provider that the employee is now able to resume work if the basis for the leave was the employee's own serious health condition that made the employee unable to perform the functions of their job. The certification (fitness-for-duty) shall specifically address the employee's ability to perform the essential functions of the employee's job. The Board of Directors may deny the employee's return to work until the certification is submitted.

10. Special Rules for Instructional Employees

The following rules apply to employees who meet the eligibility requirements in Section 1 of this policy and whose principal function is teaching and instructing in a class, small group or individual setting, including special education aides.

- A. Intermittent or reduced schedule leave: For eligible instructional employees who request leave to care for a seriously ill family member or because of their own serious health condition which is foreseeable, based upon planned medical treatment, and who will be on leave for more than 20% of that employee's total number of working days during the entire period of the requested leave, the Board of Directors may require the employee to:
 1. take leave for a period or periods of a particular duration no longer than the duration of the planned treatment; or
 2. temporarily transfer to an available alternative position the employee is qualified to hold with equivalent pay and benefits which better accommodates recurring periods of leave than their regular position.
- B. Notice Requirements: The notice requirements contained in this policy apply to instructional employees who request foreseeable intermittent or reduced schedule leaves for any of the purposes stated in Section 2 of this policy. If the employee fails to provide timely notice of such leaves the Board of Directors may impose upon the employee either of the requirements contained in paragraphs (A)(1) and (2) of this section of this policy or may deny the employee's leave until the notice requirement is satisfied.
- C. Leave near the end of the school term: The following rules apply to instructional employees who request leaves near the end of the school term.
 1. If the employee requests leave which is to begin more than five (5) weeks before the end of the school term, the Board of Directors may require the employee to continue taking leave until the end of the school term if:

- a. the leave is at least three (3) weeks long; and
 - b. the return to employment will occur during the three (3) week period before the end of the school term.
 2. If the employee requests leave for a purpose other than their own serious health condition which is to begin during the five (5) week period before the end of the school term, the Board of Directors may require the employee to continue taking leave until the end of the school term if:
 - a. the leave is longer than two (2) weeks; and
 - b. the return to employment will occur during the two (2) week period before the end of the school term.
 3. If the employee requests leave for a purpose other than their own serious health condition which is to begin during the three (3) week period before the end of the school term, the Board of Directors may require the employee to continue taking leave until the end of the school term if the leave is longer than five (5) working days.
- D. Return to Employment: Established Board of Directors policies and practices and existing collective bargaining agreements shall be used as the basis for determining how instructional employees will be returned to employment at the end of an FMLA leave period. The employee will be returned to the same or an equivalent position the employee is qualified to hold with equivalent pay, benefits and other terms and conditions of employment; subject to any additional provisions in any applicable Board of Directors policy or collective bargaining agreement and/or applicable SASSED policy which are not inconsistent with the FMLA.

**SANGAMON AREA SPECIAL EDUCATION DISTRICT
FAMILY AND MEDICAL LEAVE REQUEST FORM**

NAME: _____

TITLE: _____

DATE OF REQUEST: _____

PURPOSE OF LEAVE (Check One):

_____ Birth of Child

_____ Expected placement of child for adoption

_____ Expected placement of child for foster care

_____ Serious illness of self

_____ Serious illness of family member

Name of family member _____

Schedule requested _____

THIS FORM IS TO BE COMPLETED BY THE EMPLOYEE REQUESTING LEAVE. ATTACH ANY WRITTEN LEAVE REQUESTS FROM THE EMPLOYEE TO THIS FORM.

**SANGAMON AREA SPECIAL EDUCATION DISTRICT
NOTIFICATION TO KEY EMPLOYEE**

To: _____

The Board of Directors is in receipt of your request for a leave pursuant to the federal Family and Medical Leave Act (the "FMLA") of 1993. This is to notify you that, pursuant to the Act, you are a key employee. A key employee is defined as a salaried FMLA eligible employee who is among the highest paid 10% of all the employees (salaried and unsalaried; eligible and ineligible) employed by the Board of Directors within a 75 mile radius of your worksite.

The Board of Directors cannot deny your leave request on this basis. However, it is the Board of Directors' obligation to put you on notice that the possibility exists that the Board of Directors will not be required to reinstate you to your current position at the end of your FMLA leave. The Board of Directors will not be so obligated if it determines that your reinstatement will cause substantial and grievous economic injury to the Association's operations. If you choose to take the requested FMLA leave, if it is subsequently approved, and the Board of Directors determines it does not intend to reinstate you at the end of such leave period, you will be so notified in writing.

Director

Date

**SANGAMON AREA SPECIAL EDUCATION DISTRICT
REQUEST FOR MEDICAL CERTIFICATION**

To: _____

The Board of Directors is in receipt of your request for a leave pursuant to the Federal Family and Medical Leave Act (the "Act") of 1993. Pursuant to the Act, because the purpose for your requested leave is [to care for a seriously ill family member][your own serious illness] the Board of Directors has the right to request that you provide it with medical certification from [your family member's][your] health care provider. The certification shall be provided to the Board of Directors on or before _____ and should contain the following information:

- a. The date the serious health condition began;
- b. the health care provider's best medical judgment concerning the probable duration of the condition;
- c. a diagnosis of the condition and a brief statement of the prescribed treatment regimen, including whether inpatient hospitalization is required.
- d. If the purpose of your leave is to care for seriously ill family member the certification should also contain the following:
 - 1. a statement that you are needed to care for your family member and an estimate of the amount of time you will be needed;
 - 2. if you are requesting intermittent or reduced schedule leave, a statement that such leave is medically necessary; and
 - 3. if you are requesting intermittent or reduced schedule leave because of your family member's planned medical treatments, the dates and duration of the treatments.
- e. If the purpose of your leave is for your own serious health condition the certification should also contain the following:
 - 1. a statement that you are unable to perform the functions of your job;
 - 2. if you are requesting intermittent or reduced schedule leave, a statement that such leave is medically necessary; and
 - 3. if you are requesting intermittent or reduced schedule leave because of your planned medical treatments, the dates and duration of the treatments.

Director

Date

**SANGAMON AREA SPECIAL EDUCATION DISTRICT
FAMILY AND MEDICAL LEAVE REQUEST APPROVAL FORM**

To: _____

The Board of Directors is in receipt of your request for a leave pursuant to the federal Family and Medical Leave Act (the "Act") of 1993. This is to notify you that your leave request has been granted. Your leave is scheduled to begin on _____ and is scheduled to end on _____. The stated purpose for your leave is _____ and it will be taken on the following basis:

_____ Continuous basis

_____ Intermittent basis

Schedule of leave _____

_____ Reduced schedule

Schedule of leave _____

This is also to notify you that the Board of Directors will require you to substitute _____ [days][weeks] of your accrued paid time for _____ [days][weeks] of your unpaid FMLA leave.

Director

Date

**SANGAMON AREA SPECIAL EDUCATION DISTRICT
FAMILY AND MEDICAL LEAVE REQUEST DENIAL FORM**

To: _____

The Board of Directors is in receipt of your request for a leave pursuant to the federal Family and Medical Leave Act (the "Act") of 1993. This is to notify you that your leave request has been denied. Your leave request has been denied for the following reason(s):

_____ The stated purpose for your leave is not a qualifying purpose pursuant to the Act.

_____ You did not properly comply with the notice provisions contained in the Act.

_____ You did not properly comply with the medical certification provisions contained in the Act.

_____ You have exhausted the twelve weeks of FMLA leave time to which you are entitled under the Act.

_____ Other _____

Director

Date

I. SASED INTERNET USE AND SOCIAL MEDIA POLICY

General Policy Statement

SASED recognizes the value of electronic research and communication via the internet as a communication and educational tool that can enhance educational opportunities for students and the skills of educators. The use of Technology Resources is a privilege, not a right that carries with it many responsibilities. SASED has a responsibility to ensure that the use of electronic equipment and access to the internet does not result in:

- a) disruption of the proper operation of SASED or its member districts
- b) violation of the rights of students or employees
- c) the violation of any laws
- d) gross disobedience or misconduct

Therefore, In order to ensure that SASED employees and students employ such technology consistent with the goals of SASED and applicable state and federal laws governing SASED and its employees and to protect the welfare of both employees and students, SASED has adopted the following policy regarding the use of Technology Resources and Social Media. The policy is intended to apply to all electronic equipment, including, but not limited to computers, software, telephones, and internet access.

In order to protect the users of the technology, the staff, students at SASED Central and the students' parents will be required to sign an agreement concerning the use of Technology Resources.

SASED employees are required to comply with this policy as well as any similar policies adopted by the member school districts of SASED in which the employees are working or are assigned. However, notwithstanding any of the following provisions, this policy is not intended to inhibit or prevent any lawful communication between members of the SASED Education Association or between the Association and its parent organizations in furtherance of any protected activity under state law.

Violations of this policy or administrative procedures implementing this policy by SASED employees or students may result in the loss of use of Technology Resources, disciplinary action and/or legal action.

Definitions

Technology Resources is defined to include:

1. Any and all electronic equipment, including iPads, iTouch, computers, printers, scanners, cameras, DVD players, and telephones, provided by SASED.
2. Compact disks, provided by SASED,
3. Networks, including the internet and e-mail.

Electronic Communication and Social Media include but are not limited to: blogs, twitter, electronic mail, facsimile, instant messaging, telephone, voice mail, text messaging, multimedia and social networking sites such as YouTube, wikis, Facebook, MySpace, LinkedIn, etc.

Acceptable Use of Technology Resources

1. Technology Resources are provided to employees in furthering their duties as employees and enhancing the efficient operation of SASED and educational opportunities for the students. Access to Technology Resources must be for the purpose of educational research or school-related activities. Students shall only be permitted to use Technology Resources for educational purposes and such use shall be monitored by SASED personnel. The use of this Technology for personal use is prohibited. Technology Resources shall not be used in violation of any state or federal statutes and regulations or SASED policies. Any messages delivered via SASED's intranet, voice mail and e-mail system is considered the property of SASED. SASED reserves the right to intercept and review, as needed any messages delivered through such systems which are under the control of SASED. Inappropriate content may result in disciplinary action against the employee.
2. Student use of Technology Resources for accessing the internet shall be limited to internet sites approved and monitored by SASED staff. Hardware and/or software protection measures shall be employed to ensure the safety of students and to prevent access by students to visual depictions that are considered obscene, pornographic or otherwise harmful to minors. Students shall not be allowed to access social networking sites while at school except as otherwise approved by the student's teacher or school administration. Any approved social networking site must be educationally related to the student's program and in furtherance of the student's program as determined by SASED administration or the administration of the SASED member district.
3. Unacceptable Use of Technology Resources by a user shall include but not be limited to the following:
 - a) transmitting any communication, statements or depictions which, threaten or which may reasonably be interpreted to threaten or any person, building or property regardless of the intent of the user or harass any person,
 - b) invading the privacy of individuals that includes the unauthorized disclosure, dissemination, and use of personal information, i.e. telephone numbers, addresses, photographs or other identifying information,
 - c) accessing, creating, transmitting, posting, displaying or possessing any material, which contains defamatory, inaccurate, abusive, profane, pornographic, indecent, obscene or sexually oriented information, inappropriate language or visual images, illegal or racially offensive material.
 - d) using Technology Resources for private and/or commercial purposes, profit or gain of any manner, including e-mails,
 - e) transmitting unsolicited messages or other communications such as chain letters, or communications using false identity,
 - f) accessing any external computer system or account outside the computer system maintained by SASED, unless such access has been approved by SASED administration or the administration of member district of SASED,

- g) accessing information or possessing the same on SASED technology if it constitutes any fraud, libel, slander plagiarism, forgery or violation of copyright or other intellectual property right under state or federal law,
- h) modifying, disabling or otherwise compromising any anti-virus or other security feature maintained by SASED or the member district of SASED,
- i) disclosing any passwords or accessing any other person's password without their consent,
- j) modifying, destroying or corrupting any files of another person or a computer or networking system, or attempting the same. Liability will exist for any damage, including financial damages,
- k) employing encryption software or other password-protecting software regarding any file created or received on any technology maintained by SASED or a member district except as otherwise permitted with prior approval by SASED administration or administration of the member district,
- l) using Technology Resources for any other purpose in a manner that would result in the violation of any state or federal statute or regulation,
- m) posting materials created by another individual without the consent of the individual and the administration or posting anonymous messages,
- n) downloading software without authorization,
- o) political lobbying,
- p) purchasing goods or services without the consent of the SASED administration.

Electronic Communication and Social Media

SASED employees, whether using Technology Resources provided by SASED or their own personal electronic equipment must be aware that as SASED employees they have a professional and legal responsibility to SASED, the students of SASED, and the member districts of SASED. Consequently, any electronic communication or use of social media should not contain material which would be inappropriate in a written letter or memorandum or in face-to-face communications.

Careless or inappropriate information sent or posted on the internet can be damaging, embarrassing, detrimental to others and in some cases in violation of state and federal law. Therefore, SASED reserves the right to require any SASED employees or students to avoid certain subjects or communications or remove inappropriate postings or statements, if SASED determines that it is necessary to do so in order: a) to ensure compliance with state and federal laws governing SASED and SASED policies or b) to protect the rights of students, SASED employees, and employees and school board members of SASED member districts. Therefore employees and students are advised not to post or share:

1. confidential information regarding students served by SASSED or any other students of member districts of SASSED, including but not limited to information contained in any school student records.
2. information proprietary to SASSED or any third party.
3. statements or information which contain defamatory, obscene, threatening, bullying, harassing or otherwise inappropriate information or encourages any illegal activity as determined by SASSED consistent with SASSED policies and state and federal laws.

In addition SASSED employees should neither claim nor imply that they are communicating on behalf of SASSED unless they have received prior approval to do so. Any inquiries received on social media web sites regarding SASSED business or the business of any member district should be referred to the administration of SASSED or the member district.

Communication with Students

SASSED has a responsibility to all member school districts of SASSED and to the students of said school districts. Likewise SASSED employees must maintain a professional employee-student relationship with the students of those districts. To ensure such a professional relationship, SASSED employees are required to communicate with the students of the member districts, (with the exception of the employee's family members), through SASSED approved or SASSED hosted electronic accounts and applications such as SASSED e-mail addresses and the official SASSED website, or any external web site approved by SASSED. Such communications should be limited to school related matters and should not occur on social media web sites.

Violation of Policy by Students

Any student who violates this policy shall be subject to discipline ranging from suspension from Technology Resource usage through expulsion. Appropriate disciplinary sanctions for violation of such policy shall be determined by the SASSED administration based on the nature of the violation and/or the magnitude or severity of the violation.

Limitation of Liability

SASSED does not warrant or represent that the Technology Resources or services provided will be error-free or without defect. SASSED will not be responsible for any damages suffered as a consequence of using the Technology Resources, loss of data or the interruption of services. Further, SASSED shall have not responsibility for financial obligations incurred by any user of the Technology Resources or illegal actions undertaken by any such user.

LEGAL REF.: Children's Internet Protection Act, 20 U.S.C. 6801 et.seq.
Protecting Children in the 21st Century Act, 47 U.S.C.254 (h) (l).
720 ILCS 135/0.01 et.seq.
Tinker v. Des Moines Independent Community School District,
393 U.S. 503, 89 S.Ct. 733 (1969).
Hazelwood School District v. Kuhlmeier, 484 U.S.260,
108 S.Ct. 562 (1988).
Beussink v. Woodland R-IV School District, 30 F. Supp.2d 1175
(E.D. Mo. 1998).
J.S. v. Bethlehem Area School District, 569 Pa. 638, 807 A.2d
847 (23002).

Wisniewski v. Board of Education Weedsport Central School District, 494 F.3d 34 (2d Cir. 2007).
J.S. v. Blue Mountain School District, 593 F.3d 286 (3d Cir. 2010).
Borger v. Bisciglia, 888 F. Supp. 97, 100-101 (E.D. Wis. 1995).

J. PRIVATE PRACTICE POLICY

Regarding Private Professional Practice by Employees Licensed by the Illinois Department of Financial and Professional Regulations

The following guidelines have been established to maintain the quality of service to SASED recipients as well as enable our staff to provide service in the community. This policy includes, but is not limited to speech and language specialists, licensed psychologists, social workers, physical therapists, and occupational therapists. Licensed employee is defined as those who are licensed by the Department of Financial and Professional Regulations.

1. All professional employees shall be expected to adhere to the individual code of ethics governing their respective profession and to obey the state and federal laws regarding the licensing and performance of their skills.
2. An employee shall construe nothing in this policy to authorize private practice where such private practice is prohibited by all applicable ethical codes or guidelines, or any statute, rule, or regulation.
3. Private practice by SASED employees shall **not** be provided on SASED time.
4. SASED will be considered the primary employer, and the needs of the student shall be of primary consideration.
5. Practitioners accepting cases in the private sector from any SASED District are to inform their Special Education Administrator or designee of their intent in writing (Letter of Intent for Licensed Employees Regarding Private Professional Practice-form). Should there be any problems, concerns, or questions regarding the acceptance of private practice as previously mentioned, the Director/Assistant Director of SASED shall notify the employee in writing within 10 days of receipt in the Director's office. *Private practice is professional service rendered to any student outside normal work day for private pay.*
6. In instances of possible conflict of interest between the objectives of SASED and those established in the service being provided in the private sector, the employee will be expected to explain the possible conflict of interest to the client or responsible adult. This could result in not accepting a particular case in the private sector, referral to another practitioner, or in termination of an existing case in a manner which is not injurious to the recipient. *Conflict of interest is having goals for a recipient in the private sector which are in conflict with the objectives in place at SASED.*

7. If a SASED employee maintains a conflict of interest relationship, sanctions may be instituted by SASED. Sanctions could include a letter of reprimand, suspension with pay pending an investigation, termination of employment, and/or referral to the appropriate professional body, licensure board, or the Department of Financial and Professional Regulation of the State of Illinois. *This section on sanctions shall not be intended or exercised to abrogate any rights which exist under the collective bargaining agreement between SASED and SASED EA IEA-NEA. Said collective bargaining agreement currently in effect shall be controlling regarding employee discipline related to the aforementioned.*

Regarding Private Professional Practice by Employees Licensed by the Licensure Division of the Illinois State Board of Education

The following guidelines have been established to maintain the quality of service to SASED recipients as well as enable our staff to provide service in the community. Private practice is defined as any professional service rendered to any student outside a normal work day for private remuneration. Private is defined as payment for professional services. This does not include remuneration from any member district of SASED. This policy is limited to licensed employees, defined as those who are solely governed by the Licensure Division of the Illinois State Board of Education.

1. All professional employees shall be expected to adhere to the individual code of ethics governing their respective profession where said code of ethics exists, and to obey the state and federal laws regarding the certification and performance of their skills. The employer shall make available to all professional employees a reference copy of the individual code of ethics pertinent to their profession.
2. An employee shall construe nothing in this policy to authorize private practice where such private practice is prohibited by any applicable ethical code or guideline, any statute, rule or regulation.
3. Private practice by SASED employees shall **not** be provided on SASED time.
4. SASED will be considered the primary employer and the needs of the student shall be of primary consideration.
5. Practitioners accepting cases in the private sector from any SASED Districts are to inform their Special Education Administrator or designee of their intent in writing (Letter of Intent for Licensed Employees Regarding Private Professional Practice-form). Should there be any problems, concerns, or questions regarding the acceptance of private practice as previously mentioned, the Director/Assistant Director of SASED shall notify the employee in writing within 10 days of receipt in the Director's office.
6. In instances of possible conflict of interest between the objectives of SASED and those established in the service being provided in the private sector, the

employee will be expected to explain the possible conflict of interest to the client or responsible adult. This could result in not accepting a particular case in the private sector, referral to another practitioner, or in termination of an existing case in a manner which is not injurious to the recipient. *Conflict of interest is having goals for a recipient in the private sector which are in conflict with the objectives in place at SASSED.*

7. If a SASSED employee maintains a conflict of interest relationship, sanctions may be instituted by SASSED. Sanctions could include a letter of reprimand, suspension with pay pending an investigation, termination of employment, and/or referral to the appropriate professional body, Licensure Division of the Illinois State Board of Education. *This section on sanctions shall not be intended or exercised to abrogate any rights which exist under the collective bargaining agreement between SASSED and the SASSED Education Association. Said collective bargaining agreement currently in effect shall be controlling regarding employee discipline related to the aforementioned.*

Revised: November 2013

Adopted: January 2014

IX. FORMS

REQUEST FOR PERSONAL DAY

A **REQUEST FOR PERSONAL DAY** must be completed by any employee who is absent from their position for reasons other than illness or pre-approved professional meeting or activities.

Please submit to your immediate supervisor at least two (2) days in advance of the date requested.

NAME _____ PROGRAM _____

SCHOOL _____

DATE(S) ABSENT _____

Employee's Signature

Building Principal's Signature

Action Taken by SASED

Special Education Administrator

**SANGAMON AREA SPECIAL EDUCATION DISTRICT
PROFESSIONAL MEETING REQUEST**

NAME _____ SCHOOL _____ POSITION _____

NAME OF CONFERENCE _____ CONFERENCE DATE _____

LOCATION _____ SPONSORING ORGANIZATION _____

What presentation(s) and activities will you attend?

ANTICIPATED EXPENSES

Transportation Mode _____ Cost _____

Registration Fee _____

Lodging _____

Meals (not to exceed \$30/day) _____

Total _____

Date Requested _____

APPROVED

DISAPPROVED

Principal's Signature _____

Date _____

Special Educ. Administrator _____

Date _____

Director's Signature _____

Date _____

Please submit two copies to the Director of Special Education ten (10) school days prior to the meeting date.

OFFICE USE ONLY

Budget Account _____

Budget Account Approval _____

Signature/Date

**SANGAMON AREA SPECIAL EDUCATION DISTRICT
REQUEST FOR PAYMENT OF EXPENSES**

Please send this completed form and receipts for registration, meals, transportation, and lodging expenses to the Director's office within one (1) week after conference attendance.

NAME OF CONFERENCE: _____

LOCATION: _____

DATE (S): _____

TRANSPORTATION:

Car: _____ Miles _____

Other: Air/Bus/Train Fare _____

REGISTRATION FEE: _____

LODGING: Nights _____ @ _____

MEALS: Actual cost not to exceed \$30/day _____

No reimbursement w/o receipts

OTHER: _____

TOTAL AMOUNT OF REIMBURSEMENT REQUESTED _____

Receipts _____

Employee's Signature/Date _____

Special Educ. Administrator/Date _____

TOTAL AMOUNT OF REIMBURSEMENT APPROVED _____

Director's Approval/Date _____

OFFICE USE ONLY

Budget Account _____ Item Description _____

Budget Account Approval _____
Signature/Date _____

**SANGAMON AREA SPECIAL EDUCATION DISTRICT
REQUEST FOR COURSE(S) APPROVAL**

All certified personnel are entitled to additional horizontal increments for training beyond the Bachelor's Degree Program when such training applies toward a Master's Degree or training beyond a Master's Degree or when course work applies to an advanced degree or for improving professional performance as related to a staff member's special area or for the benefit of the district. Prior approval from the Director must be obtained for all Master's Degree and Advanced Degree programs.

The Executive Committee will pay for up to twelve (12) semester hours for approved course work per school year for each staff member at a rate not to exceed seventy dollars (\$150.00) per semester hour. A maximum of forty (40) hours of approved credit will be allowed for payment during the staff member's employment with the Sangamon Area Special Education Cooperative. (See ARTICLE XV for exact contract language)

I AM REQUESTING THAT THE FOLLOWING COURSE (S) BE APPROVED:

University	Course #	Course Title	Sem.Hours	Date
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PLEASE CHECK ONE OF THE FOLLOWING THAT APPLIES TO YOU:

- I have been accepted in an accredited Master's Degree program.
- I have been accepted in an accredited Advanced Degree Program.
- I wish to take course work for professional improvement as it relates to my specialized area.
- Other(Please Specify)_____

After approval and completion of the course(s), I must submit an official transcript and a request for reimbursement form (Appendix VI) to the Director in order to receive proper credit and reimbursement.

Master's/Advanced Degree Program_____

University_____

Applicant's Signature Date

Administrative Authorization:

Approved Course and Reimbursement Not Approved Approved - Course Only

Director's Signature Date

**SANGAMON AREA SPECIAL EDUCATION DISTRICT
REIMBURSEMENT REQUEST FOR COURSE WORK**

Staff members completing approved course work as provided in Article XV are entitled to reimbursement of \$150.00 per semester hours for twelve (12) semester hours per school year. A maximum of forty (40) hours of approved credit will be allowed for payment during the staff member's employment with Sangamon Area Special Education Cooperative.

Please complete the following form for reimbursement:

Course Title _____ Semester Hours _____ Completion Date _____

Course Title _____ Semester Hours _____ Completion Date _____

Course Title _____ Semester Hours _____ Completion Date _____

Course Title _____ Semester Hours _____ Completion Date _____

Total Hours Completed _____ Date _____

Total Accumulative Hours Completed _____ Date _____

It is necessary to submit this Reimbursement Request For Course Work and an official transcript in order to receive proper credit and remuneration.

Applicant's Signature _____ Date _____

Total semester Hours @ \$70.00 per hour for a total of _____.

Director's Approval

Date

**SANGAMON AREA SPECIAL EDUCATION DISTRICT
REQUEST/REPORT OF ABSENCE**

Date: _____

Approved: _____

Denied: _____

Employee: _____

Reason for Absence: _____
(Use Code)

Dates of Absence: _____

AM PM All Day (Circle One)

CODES

A Accident on Duty
F Death in Family
J Jury Duty
S Sick
V Vacation
L Leave of Absence
PL Personal Leave
PrL Professional Leave
AL Association Leave
ML Military Leave
CL Comp Time Leave
CW Comp Time Worked

Employee Signature

Building Principal Signature

SASED Administrator Signature

If "PrL" code is used, please name conference attended: _____

REPORT OF SUBSTITUTES

Name of Substitute: _____

Address: _____ City: _____ ZIP: _____

Phone: _____ Social Security No. _____

Date Substituted: _____

Total Number of Days: _____

District's Rate of Pay: _____

Amount Due: _____

Substitute Signature

**APPENDIX X
APPLICATION FOR INCREMENTAL CREDIT
BASED ON SIXTEEN (16) HOURS OF PROFESSIONAL GROWTH EXPERIENCE**

ARTICLE 15.6 "Members are entitled to receive one hour of incremental credit for every sixteen hours of professional workshops, computer consortium course work, and SASSED In-services attended. To obtain the incremental credit, the workshops and/or course work must have prior approval of the Director. The hours shall be taken within a two year period. The hours must be at no cost to SASSED and must be earned outside the school hours."

I. Preapproval

(Applicant Name) _____ Date _____

Type of Professional Experience (briefly describe)

Estimated number of hours of participation _____

Starting date _____ Date ended _____

Signature of Applicant

Approved _____ Not Approved _____

Director's Signature _____ Date _____

II. Certification of Participation

This section is to be completed by the Presenter or Organizer of the Professional Experience.

This is to certify that the applicant participated in the Professional Experience as described above for a total of _____ hours.

Presenter or Organizer Signature

III. Final Approval

Return completed form to Director of Special Education

Approved _____ Not Approved _____

Director's Signature _____ Date _____

**PROCEDURES
EXTRA DUTY ASSIGNMENT**

1. The Special Education Administrator determines need for a certified special education teacher to perform duties outlined in Section 10.3, Article X of the Professional Agreement.
2. SASED certified staff is then requested to perform the extra duty assignment. If the staff agrees, the form is completed by all parties. A copy is then given to the personnel office and to the extra duty assignment staff.
3. Within two weeks of the completion of the semester, the teacher signs off, indicating that the work has been performed throughout the semester. The form is then given to the SEA who will approve and forward to the Assistant Director.
4. The Central Office Personnel Department will maintain a file of those staff members performing approved extra duty. When payment authorization is received, it is matched to approval on file. The stipend will be charged to the program where the extra duty is being performed.

First Reading: 11/14/00

Second Reading and Adoption: December 12, 2000

EXTRA DUTY ASSIGNMENT

As stated in Article X, Extra Duty Assignments, Section 10.3:

10.1

A special education certified teacher and/or a Speech/Language Therapist may be assigned by the Special Education Administrator to perform academic diagnostic assessments and prepare IEP goals for students assigned to a program taught by a full-semester or a full-year substitute. The teacher and/or Speech/Language Therapist may elect to accept or reject such assignment. If the teacher elects to accept the assignment, the teacher shall receive a stipend of \$100 per student case up to a maximum of \$500 per semester payable with the last paycheck of the semester.

Name of Certified Special Education Teacher

Semester / Year

Substitute Teacher/District/Classroom
(for whom work will be performed)

Number Students Receiving Service

Special Education Administrator Authorization

Date

Director Authorization

Date

At the end of the semester, complete the following and submit it to the Special Education Administrator for payment processing:

Teacher Signature

Date

Special Education Administrator

Date

Director

Date

Office Use Only:

Account Number: _____ Approval _____

Date: _____

REPORT FORM FOR ATTACKS ON SASSED PERSONNEL

This form is to be used to report an aggravated battery against school personnel. The administration will review the report to determine if an aggravated battery took place, and if so, report the aggravated battery, as required by statute, to local law enforcement. This form is separate from and in addition to any internal investigation SASSED may conduct into any incident of student or personnel misconduct.

Reporter Information

Name of SASSED personnel completing this report: _____

Position: _____ Date of Report: _____

Date of Incident: _____

Parties Involved

Name of SASSED personnel who was the victim of the attack (if different than the person completing this report): _____

Position: Teacher Teacher Aide Administrator Other _____

Who was the person who committed the attack?

Name: _____ Student School Personnel Other _____

Reporter's relationship to the incident: Witness Victim Other _____

Were others involved? *If so, please name them and describe in what capacity others were involved.* _____

Description of the Incident

Where did the incident occur?

On School Property Specify location: _____

Off school property during a school activity. Specify location: _____

Off school property, not during a school activity. Specify location: _____

Describe the incident:

Description of the Incident (cont'd):

What was the victim doing at the time of the incident?

Was the victim using any type of restraint on the attacker at the time of the incident? *If so, please describe type of restraint and reason for use.*

Was there a struggle between the SASSED personnel/victim and the person who committed the attack? *Please describe.*

Injuries Sustained

What physical injuries did the victim sustain?

Did the victim seek medical treatment for the injuries?

Reporter's Signature _____ **Date** _____

-----**Reporting Information (for administrative use only)**-----

Date Report Received: _____ Report verified with victim (if necessary): ____

Was a battery committed against SASSED personnel? ___ Yes ___ No

If so, was this immediately reported to local law enforcement? ___ Yes ___ No

Local Law Enforcement Agency _____ Date _____

If so, was timely report made to the Illinois State Police's Crime Reporting Program?

___ Yes ___ No Date _____

**LETTER OF INTENT FOR LICENSED EMPLOYEES
REGARDING PRIVATE PROFESSIONAL PRACTICE**

To: _____(Special Education Administrator)
From: _____(Licensed employee) District(s) served
Re: Private Professional Practice
Date: _____

This letter will serve as notice that I desire to accept the following student (from any SASED member district),

_____ for Private Professional Practice. The parents of this child are _____ who reside in the _____ School District.

This Private Professional Practice shall begin on _____.

This Private Professional Practice shall be in the form of _____
(tutoring, counseling, therapy, other).

SASED will notify me if this does or does not constitute a conflict of interest within 10 school days of receipt in the Director's or Assistant Director's office.

Employee Signature

Approved by Director/Assistant Director

Date

X. Insurance and Payroll