



Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

INDEX (Click on the titles below to go directly to the topic section)

[Questions related to the Evaluation Team Report \(ETR\)](#).....page 1

[Questions related to the Individualized Education Program \(IEP\)](#).....page 7

[Questions related to the Services Plan \(SP\)](#).....page 17

[Questions related to Other Topics](#).....page 18

[Questions related to Education Management Information System \(EMIS\)](#).....page 20

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

Evaluation Team Report (ETR)

<p>Accepting In- State ETR when Transferring to New School</p>	<p>What is a district required to do regarding acceptance of an in- state ETR for a child with a disability transferring into the district?</p> <p>When a child with a disability transfers into a new district, the receiving district must hold an IEP team meeting. In the meeting, the participants must review the child's IEP from the previous district and determine whether it can be implemented as written, or whether alterations are needed. The IEP team must determine if the ETR is up to date and valid and whether it will accept the ETR or do a new ETR. Unless the district chooses to do a new ETR, any alterations may be completed through an amendment process. Therefore, most of the IEP team members may be excused from the meeting, and the meeting may be a telephone conversation lasting as little as 15 minutes. All work must be done within two to three weeks of the child's enrollment in the district. EMIS captures the required work.</p> <p>Although some parts of the federal law assume all in- state districts will automatically accept ETRs from other districts in the same state, other parts of the federal law clearly state that districts have the right to do an evaluation for any child at any time the districts feel it necessary. Therefore, districts are able to do an evaluation for a child transferring from another district within the state. EMIS now requires districts to enter data indicating when there is a new evaluation.</p>
<p>Accepting Out- of- State ETR</p>	<p>Can a district attach a new cover page and signature page to an out- of- state evaluation report to document their acceptance? If so, would the district have a new ETR date and follow the three- year reevaluation timelines?</p> <p>If a district accepts the out- of- state ETR as its own, the district does not need to alter the ETR. The district simply provides the parents prior written notice and files that document in the child's file. The district then conducts a reevaluation at the three- year anniversary date. The fact that there is no additional ETR and that a prior written notice has been given to the parents stating they are accepting the out- of- state ETR clearly shows that the district has done so.</p>
<p>Accepting Out- of- State ETR and EMIS</p>	<p>What are the options when a district decides whether or not to accept and out- of- state evaluation and, based on the options, what date should be reported in EMIS?</p> <p>When a child moves into Ohio from another state, the Ohio school district has several decision points and options. The Ohio district must convene an IEP team and determine the following:</p> <ul style="list-style-type: none"> ▪ Will the district accept the child's out of state ETR? <p>The Ohio district may do this if it finds the out- of- state ETR to have all of the required components of an Ohio ETR and the Ohio district agrees with the conclusions of the ETR. If the Ohio district does accept the out- of- state ETR, it is, in effect, adopting the out- of- state ETR as its own. Therefore, the next ETR that the Ohio district completes for the child will be a reevaluation and <i>not</i> an initial evaluation.</p> <p>The code for this is the TETR. The event date entered is the date that the district staff met and decided that the ETR had the required components and the district agreed with the conclusions. The outcome start date is the same as the event date; the outcome end date is the day before the three- year anniversary date.</p> <ul style="list-style-type: none"> ▪ If the Ohio district decides that it will not accept the out- of- state ETR as its own, the Ohio district must complete an evaluation. This evaluation will be an <i>initial</i> evaluation. While the district is completing this evaluation, it will provide the child with the supports and services contained in the child's out- of- state IEP or it will provide comparable services to the services contained in the child's out- of- state IEP. The district will not create a new IEP until the district completes the initial ETR that the IEP team decided to do. <p>The code here is IETR. Until the district completes an Ohio ETR, it does not report the outcome codes. Although the district continues to provide the supports and services from the previous state, the district has not yet come to agreement on the conclusions of an ETR, and so it can't yet accurately report. Once the ETR is completed, the district reports the date of the completed ETR as an IETR event, with outcome start</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

	<p>dates as the same date of the event. The district can't back- date its decision, even though it was providing services prior to the ETR completion.</p>
<p>Classification of Evaluation after Parents Previously Revoked Consent</p>	<p>If parents request that their child be provided special education and related services after they previously revoked their consent for those services, does the district have to complete an evaluation, and, if so, would it be considered an initial evaluation or a reevaluation?</p> <p>The U.S. Department of Education, Office for Special Education Programs, determined that under this circumstance, the district is required to complete an evaluation and it would be considered an initial evaluation with the 60- day timeline.</p>
<p>Consent Revoked By Parents</p>	<p>If parents revoke consent, does the district still need to offer a three- year reevaluation when it is due?</p> <p>When parents revoke consent, the child is no longer considered a child with a disability. The district is no longer required to provide the child special education, including a three- year reevaluation.</p>
<p>Determining Disability Category</p>	<p>Does the ETR team need to consider the adaptive area and the cognitive area equally when making a determination of a specific learning disability (SLD)?</p> <p>The criteria for SLD and cognitive disability (CD) are not identical with the difference being deficits in adaptive behavior.</p> <p>In the case of a child identified with a cognitive disability, the child's IEPs should have addressed the child's areas of deficit in adaptive behavior and should have been needs driven, not category driven. The child should have been making progress in the areas of adaptive behavior where he or she has deficits. There should be great concern if the adaptive behavior deficits have remained as severe as when the child was first identified. That would indicate the child is not making progress, even when provided with special education supports and services listed on the IEPs. Changing the disability category without addressing the underlying needs would be inappropriate. The ETR team needs to review all the information and data and make an informed decision.</p>
<p>Dissenting Opinion - SLD</p>	<p>Does a dissenting opinion trigger completion of the SLD form when the other team members believed that there was no SLD?</p> <p>Hopefully, there is consensus. If there is not, the district representative is the tie breaker and determines what will be done and what will not be done. This person should listen carefully to the experts on the team, i.e., the school psychologist and teachers of the child. If the district representative overrides the experts' opinions, he or she must document why they did that in the prior written notice.</p>
<p>Discrepancy Formula Considered an Option</p>	<p>In the ETR form, Section 3, letter C: "... if the evaluation team used alternative research- based procedures to determine if the child exhibited a pattern of strengths and weaknesses in performance..." Does the "severe discrepancy" still count as an option to identify students?</p> <p>The discrepancy formula may still be used as one component of the data documentation that is gathered and analyzed to determine if a child is a child with a SLD. It may not be the only item that qualifies a child, however, that has never been the case.</p>
<p>ETR Necessary When Adding or Deleting Related Services</p>	<p>Can related services such as occupational therapy (OT) come and go on an IEP from year to year without doing a new ETR?</p> <p>That is correct. In an ETR meeting, the team discusses and reports the child's deficits and skill levels, but does not have to say if a student qualifies or does not qualify for OT services. At each IEP meeting, the team determines whether a child needs OT based on the child's current needs for that year.</p> <p>For example, a child may have sensory integration dysfunction but is meeting all OT goals and objectives this school year that require the support of OT services, so this service may be removed from the IEP as part of the IEP team meeting with the parents. If the parents disagree with this decision, the district must provide prior written notice to the parents when it provides them a copy of the revised IEP.</p> <p>Let's say that next year, the child begins to have significant problems related to sensory. The district is no longer required to do a complete reevaluation to add a related service to the child's IEP. However, the team must do an assessment in the area of OT to determine whether the child does need OT services. The team determines the components of the OT evaluation, and this assessment may consist of additional testing, review of documentation and observations by a therapist. When completed, this OT evaluation is reviewed by the IEP team and attached to the current ETR. This assessment does not change the date that the current ETR must be reviewed and revised. If additional assessments will be part of the OT evaluation, the district must secure parental consent for the testing.</p>
<p>Help Me Grow to Preschool</p>	<p>Are evaluations for children transitioning from Help Me Grow (HMG) to preschool considered initial evaluations?</p> <p>Children are moving from one system to another, and it is their first entrance into Part B/619 (preschool special education). As such, it is an initial evaluation under the rules for ages 3-21.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

<p>High Quality Instruction</p>	<p>If a teacher is not a highly qualified teacher (HQT), in what ways may the team document "high quality instruction?"</p> <p>By the time a student is referred for an evaluation (or as part of a comprehensive evaluation), interventions should have been conducted within general education that would provide data on the child's performance when provided with scientific, research- based interventions. The team should document the length, intensity, frequency and duration of the intervention(s) and collect data to monitor the child's progress.</p> <p>If the team ensures that high quality interventions (as defined above) were implemented as designed, and the child still does not close the gap between his actual and expected performance, this information can provide documentation that the child received high quality instruction in regular education settings, but requires more intensive services. These data should be considered within the context of the child's educational history and mastery of academic content standards in order to demonstrate that the child received appropriate instruction in the general education setting.</p>
<p>Identification on Charter School ETR Differs and Parents Refuse Consent for a Reevaluation</p>	<p>When an ETR from a charter school labels a child as having multiple disabilities (MD), even though the disabilities are speech and SLD, and the district wants to do a reevaluation to determine the primary disability, what can the district do if the parents refuse to give consent for a reevaluation?</p> <p>Any other combination of disability categories may be used, along with meeting the other criteria for MD, but not LD. If the parents do not consent to new assessments, the district can use a records review to do an evaluation and determine the child as eligible under a separate category. If a records review would not provide the level of information needed to make a determination, and the evaluation is not expired, i.e., over three years old, the district must take the parents to a due process hearing to force the evaluation. This would include mediation and a resolution session. If the three years have expired and the parents refuse, the child would be exited from services and would receive no special education until parental consent could be secured to do an evaluation.</p> <p>If a community school is identifying children as MD and stating one of the disability areas is SLD, this is a violation per rule 3301-51-06(I) (1). SLD may not be used as one of the disability categories in identifying a child with multiple disabilities.</p>
<p>Location of Observation for Online Child</p>	<p>If a child receiving instruction online needs to be observed for the ETR, should this be done in the child's home?</p> <p>This is an IEP team decision, but the home makes sense since this is the child's learning environment.</p>
<p>Medicaid School Program (MSP) Plan of Care (POC) Related to ETR Requirements</p>	<p>What are the ETR requirements regarding the Medicaid School Program (MSP) Plan of Care (POC)?</p> <p>A medical practitioner who meets the certification requirements as defined in OAC 5101:3-35-05 must conduct those ETR evaluations/ assessments that may be claimed for reimbursement under the Medicaid School Program (MSP) for those evaluations/ assessments to be reimbursed. Academic assessments conducted by a school psychologist would not meet the criteria for cost reimbursement.</p> <p>Each Medicaid- qualified practitioner will complete a Part 1: Individual Evaluator's Assessment form located in the ETR for any evaluation/ assessment that is conducted as part of the ETR process. The practitioner who conducts the evaluation/ assessment must sign the form. If a person whose license stipulates supervision does the evaluation/ assessment, the qualified supervisor must also sign the form. The date entered next to the signature should be the date when this evaluation/ assessment was completed. This date (not the date of the ETR meeting) will be used when determining when the child must be reevaluated/ reassessed to meet requirements for the MSP cost reimbursement.</p> <p>Although the qualified practitioner is not required to attend the ETR meeting, if he or she chooses to do so, the practitioner would sign and date the signature page of the ETR. If the practitioner does not attend the ETR meeting, the practitioner would sign the signature page either before or after the meeting.</p> <p>Per IDEA, the date of the ETR meeting establishes the basis for determining when the next ETR is due (within three years).</p> <p>For more information, see the Medicaid Schools Program (MSP) under Ohio Resources on the www.edresourcesohio.org Web site or search for <i>MSP</i> at www.education.ohio.gov.</p>
<p>Need Not on ETR</p>	<p>When an ETR does not outline a need, but the team feels a need exists, can that need be included in the IEP as a goal, and can services be provided in that area?</p> <p>The ETR should address all of the child's areas of need and show that the needs exist. Therefore, it would unusual if a need is addressed in the IEP but there is no mention of it in the ETR.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

<p>Not Receiving Appropriate Instruction</p>	<p>Please provide an example of a situation in which a child has not received appropriate instruction.</p> <p>An appropriate instruction example would be a child who attended a community school where the teachers were not intervention specialists or were not highly qualified in the area they were teaching. Intervention specialists and HQT teachers are currently not required for community schools, but they will be very soon. Therefore, a child may return to the district academically behind after being at a community school for a period of time. This may be due to a lack of appropriate instruction. The decision of whether the child received appropriate instruction or not would be left to the team.</p>
<p>Observations</p>	<p>Section 2 - Team Summary of the ETR form calls for observations for preschool and (SLD). In the past, observations were collected for emotionally disturbed (ED) students. Are these observations still a requirement and, if so, should the results be entered in Section 2 Summary of Observations?</p> <p>Under the law there is no requirement to do observations for children suspected of having a disability under the ED category. However, the evaluation or IEP team must determine what information the team needs to make a decision on whether or not the child is a child with a disability and - if the child is a child with a disability - what supports and services that child will need to make progress in the general curriculum. To make this determination, the team may need to do an observation.</p>
<p>Observation Required for Reevaluation</p>	<p>If a district is using block scheduling and a child identified as having a SLD in math is due for a reevaluation but does not have math until the second semester, should the child be observed in a setting other than math in order to complete the observation within the three- year timeline?</p> <p>The child needs to be observed in math. Observing the child in another setting (e.g., reading), may not provide the IEP team with the documentation needed to complete the reevaluation and determine if the child continues to have a SLD in the area of math.</p>
<p>Other Health Impaired (OHI) Eligibility</p>	<p>What is the expected procedure for documenting the presence of a "chronic or acute health problem" for other health impaired (OHI) eligibility?</p> <ul style="list-style-type: none"> ▪ Is a medical diagnosis required? <p>This is an IEP team decision, but the ODE/ OEC recommends that in a majority of the cases, medical information will be necessary to find a child eligible under this category.</p> <ul style="list-style-type: none"> ▪ If so, is a separate written report of the medical diagnosis required? <p>A separate written report is not necessarily required. It depends on who does the medical diagnosis and what the medical report contains.</p> <p>Is a school psychologist deemed an appropriate professional to make a diagnosis of attention deficit hyperactivity disorder (ADHD) so the child may be eligible under OHI without gaining a "private" diagnosis of the disorder?</p> <p>School psychologists are trained to conduct evaluations for students with activity and attention issues and to determine the extent to which these problems respond to conditions of effective educational practice, including instructional and behavioral interventions. Being based within the school setting, school psychologists are uniquely positioned to observe a student across a wide variety of situations and settings to rule out other factors in the school environment that may explain the student's behavior.</p> <p>Best practice is a close collaboration between the school psychologist and the child's family physician when making a diagnosis of ADHD (that would qualify the student for special education services within the category of OHI). ADHD is both a medical and educational issue and medication is only one treatment option. Even when medication is prescribed, the relationship between the school psychologist and family physician is critical to assess the impact of the medical and educational interventions on the child's behavior and school performance.</p>
<p>Participation of Required Members for ETR</p>	<p>IDEA allows waving participation of required members for the IEP. Does this apply to the ETR as well?</p> <p>If this refers to the meeting where the team reviews the data and documentation and determines eligibility, the IEP team does this work so the answer is yes. Even in an initial IEP, the required members of the evaluation team are the same as the IEP team.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

Planning Form – Consent for Change	<p>Is a new consent required if the district needs to make a change to planning form? And does this start a new clock?</p> <p>It depends whether the change is covered under the original consent. If the change is significantly different from what was covered in the original consent, a new consent form is needed. Parents must sign a new form to indicate that they understand the change.</p> <p>If it is a minor change that will not alter the parents' understanding of what is taking place, it is not necessary to get parents' consent to change the planning form, but it is necessary to have the parents initial or sign the change. The clock is not restarted.</p>
Planning Form – Required	<p>Why is the planning form at the end of the ETR? Is it still to be completed first, and is it required?</p> <p>The form is at the end of the document because the creator of the forms assembled the attachments in that manner. The planning form is required and still must be used prior to beginning the evaluation process.</p>
Preschool to School- Age	<p>When transitioning from preschool to school- age (assuming child qualifies for services), is this transition considered an annual review with change of placement or no change of placement?</p> <p>This is considered a reevaluation. There is a change of placement only if the child actually changes placement on the continuum of placement options. For example, if the child previously was fully included in a classroom with nondisabled peers and will be transitioning into kindergarten receiving all supports and services in the kindergarten classroom, there is no change of placement. If, on the other hand, the child transitions to kindergarten and is pulled out of the regular classroom for speech when not pulled out of the preschool classroom for instruction, there is a change of placement that requires corresponding action. It is the same as it would be for any other school- age child.</p>
Prior Written Notice (PWN)	<p>Must a prior written notice be completed at the conclusion of a reevaluation, when the child's eligibility remains the same?</p> <p>The district must provide Prior Written Notice to Parents PR-01 form after the reevaluation is completed only if the parents disagree with the reevaluation or the reevaluation results in a change in the child's disability category.</p>
Early Reevaluation and Parent Consent	<p>Legally, if you are doing a reevaluation early and you are collecting additional data, does the 60- day timeline apply to parent consent?</p> <p>The 60- day timeline is only for initial evaluations. If a reevaluation is being done early, it must be completed within a reasonable amount of time. A reasonable amount of time is measured by the amount of testing that must be done and the amount of documentation that must be collected and summarized. Reevaluations can be done early, but they cannot go beyond the anniversary date of the last ETR.</p> <p>Parents must give informed consent for all evaluations. In this case, that the parents have an understanding of all that is involved in the reevaluation. If the parameters of the evaluation/ reevaluation change between the signing of the consent form and the actual carrying out of the assessments, the district must get another informed consent from the parents and provide another prior written notice.</p>
Retention of Checklists	<p>If teacher checklists that are submitted for teacher input related to gross motor skills, vision and other areas summarized by psychologists on the Part 1 page of the ETR, must the checklists be attached to the ETR?</p> <p>Summarizing what is on the checklists and keeping the checklists electronically would be an acceptable practice.</p> <p>If the checklists are sent to the psychologist in an e- mail attachment and the information from all the checklists is summarized for the Part 1 page, must paper copies of the checklists be retained, or should the e- mail with the checklist attachments be kept only until after the parents sign off on the ETR, in case there are questions?</p> <p>The district needs to follow its records retention policy and retain these records for as long as the district policy states they should be retained. The retention period is usually based on how long the record must be kept to complete the task at hand. Therefore, once the evaluation is completed, the parents sign off on the evaluation and an IEP is written and implemented, it makes sense that these checklists may no longer need to be kept. However, this is a district decision that should be captured in the district's records retention policy.</p> <p>Must the gym teacher and others who completed a checklist sign the ETR signature page, even though the psychologist summarized the checklists for the actual Part 1 page?</p> <p>This question relates to how a district conducts business, so it is a district decision. It could be handled either way, since the gym teacher is not actually completing a Part I for the ETR.</p>
Rtl – District Decision and Documentation	<p>How/ when will a district make the decision to use Rtl or not? How will the decisions be documented?</p> <p>This is a local district determination based on decisions made by district leadership.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

<p>Rtl vs. Parental Choice of Discrepancy</p>	<p>What does a district do in the following scenario? A student is home- schooled and parents request an ETR. The suspected disability is SLD. The district has adopted Rtl but the parents refuse to provide interventions or assessments in the Rtl process. The parents want the district to test using the discrepancy model.</p> <p>The child's evaluation team must decide what evaluations are necessary to determine if the child is a child with a disability. If the team determines that Rtl will be used as part of the evaluation process or as part of the intervention process, and the parents will not want to use Rtl, the district must either send staff to the child's home to provide this procedure or transport the child to a neutral site to provide the Rtl. If the parents refuse to make the child available for the evaluations determined by the evaluation team, the district is no longer responsible for testing until the parents make the child available for testing.</p>
<p>Timeline for Behavior Assessment after IEP Had Been Signed</p>	<p>At an annual IEP meeting prior to a three- year evaluation, the parents of a student consented to the upcoming reevaluation of certain non- behavioral areas. Six months later (mid- way through the IEP year), the child began exhibiting behavioral problems. The parents requested a functional behavioral assessment (FBA) or other behavioral assessment. The school obtained the parents' consent for this, since behavior was not addressed at the previous IEP meeting where consent was given for other issues.</p> <p>What is the timeline for completing the behavioral assessment - 60 days, as for an ETR; or six months, on the reevaluation date?</p> <p>The behavioral assessment must be completed within a reasonable amount of time from the date of the parents' request for the testing. The ODE/ OEC defines a reasonable amount of time as three to four weeks unless exceptional circumstances exist that would cause this timeline to be lengthened.</p>
<p>Unable to Reach Parents to Review ETR Assessment Results</p>	<p>What happens if parents cannot be reached to review the assessment results for an initial ETR? Is it okay to proceed with the meeting without them, after attempts to contact them have been documented?</p> <p>If parents do not respond to a request to review assessment results for an initial ETR, and the district has made numerous attempts to contact the parent, i.e., e- mails, phone calls, certified mail, regular mail, and possibly a home or work visit, the team documents all attempts to reach the parents and conducts the meeting without them. The team will review the test results and determine whether the child is a child with a disability. The team sends the parents a copy of the ETR and a prior written notice.</p> <p>Even if the team determines that the child is a child with a disability, the child cannot be served until the parents sign the consent for an initial IEP. If the parents never sign consent, the child may not have an initial IEP for services.</p> <p>If parents respond that they are unable to attend a meeting that is scheduled by the district to review the assessment results, the district must reschedule the meeting in sufficient time to accommodate the parents.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

Individualized Education Program (IEP)

Amount of Time for Related Services	<p>If related services are to be provided weekly, should time and frequency reflect this or should/ can it be stated as a per month amount?</p> <p>You can state the amount of time the services will be provided per month. However, if the services can be delivered on any day of any week of the month and the district is off two days that month, then it will be assumed that the child will still receive services for the full amount of time per month. If the child is to always receive services on a Friday, that needs to be noted.</p> <p>If ODE/ OEC is figuring time and the IEP has a monthly amount of time and the day of the week the service is to be provided(e.g., Friday), but the district had a Friday off, then ODE/ OEC can subtract that service time. The time would still be recorded for an entire month but there would be the additional information that all service will be provided on Fridays.</p>
Amount of Time for Services - Direct and Indirect	<p>When completing Section 7, Description of Specially Designed Services, on the IEP form, is it acceptable to enter 150 minutes per month direct service and 120 minutes per year indirect services in the "Amount of Time" block?</p> <p>Yes. If you enter the time in this manner, ODE/ OEC suggests that the provider document the time spent in each activity, and that the provider's notes and documentation outline what services were provided during these minutes.</p> <p>If you are increasing or decreasing the minutes of speech therapy being provided to a child within this total amount of time, is assessment required or just documentation (e.g., noted on the child's progress report)?</p> <p>Only documentation is necessary, unless the IEP team members feel there is a need for direct assessment.</p>
Amount of Time for Services - Providing Additional Time	<p>If 30 minutes of speech therapy are indicated on the IEP, but the speech language pathologist (SLP) provides more than 30 minutes of service, is this a problem? Could this lead to legal action, just like providing less time than is documented on the IEP?</p> <p>No, districts may always go over the minimum requirements. Usually this does not result in a request for a due process hearing.</p> <p>Does it make a difference if the location where the additional services are provided is in the general education classroom?</p> <p>It should not. If, however, the additional speech therapy, not listed on the IEP, is interfering with other instruction and activities that the child needs to be successful in the general education curriculum, the IEP team may need to meet and address how the child will receive the instruction and services he or she needs during the school day.</p>
Amount of Total Time for Services	<p>Can one list multiple goals (goals 1,2,3) under specially designed instruction, if they are all for reading, and then add the times for all three? In the past we were told to list the time per goal even if several goals pertained to reading. Is this a change in IEP requirements?</p> <p>Yes, this is a change from prior years. The key to this issue is clarity. All parties, including people who are not on the IEP team such as ODE/ OEC staff, must be able to tell exactly what services the child is receiving, for how long and where. If there are three goals and 90 minutes for service written after each goal, one would assume that the child is receiving 270 minutes of service. If the child is, in fact, only receiving a total of 90 minutes for all three goals, this must be made clear. To correct this matter, the new form is asking for the <i>total</i> amount of time for each service and service provider rather than for each goal. If the child is to receive specially designed instruction from a reading specialist and that reading specialist will work on three goals, the team would record the <i>total</i> amount of time the reading specialist will be working with the child.</p>
Assessment - Allowable Accommodations	<p>If an accommodation on the IEP for the Ohio Achievement Test (OAT) states that a visual math sheet may be used (no words on the sheet/ samples only/ providing visual guidance/ not changing the content of the test), is this permitted?</p> <p>Formula or reference sheets are not allowable accommodations for the OAT. These would change what the test is intending to measure, and use of the sheet would change or enhance the child's response. These are two of the four criteria used to determine allowable accommodations.</p> <p>Additional information on testing and allowable accommodations is included in the Ohio Statewide Testing Program Rules Book, page 29, Accommodations and Appendix H, Statewide Assessment Accommodations. This document is posted on the ODE Web site at www.education.ohio.gov, keyword search: <i>testing rules</i>. Check the rules booklet yearly for any changes in allowable accommodations.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

Assessment – Child Excused from Consequences	<p>If a child's IEP indicates that the child will participate in the Ohio Graduation Test (OGT), but the consequences for not passing the test are excused and this is reported in EMIS, does the district take a "hit" on the child's score for the local report card?</p> <p>Yes, the district does take a "hit" for the scores. Federal law (NCLB) requires that every child take the OGT once – even if the child's IEP excuses him or her from having to pass the test to graduate.</p> <p>When children take the OGT, even if they fail, their scores count as part of the school's and district's data for Adequate Yearly Progress (AYP), for the state indicators and for the Performance Index. Presumably they would fail since they were exempt from passing the OGT.</p> <p>If the IEP team determines that a child is excused from the consequence of passing any part or the entire OGT at the 10th grade level prior to administration of the OGT, can the student wait until the senior year before participating at all in the OGT?</p> <p>No. The test must be taken during the 10th grade year. The test measures what 10th graders know, not what 12th graders know.</p>
Assessment – Documenting OGT Participation	<p>IEP Section 12 - Statewide and District Wide Testing, does not have an area where the district can indicate the subjects in which the child has met the testing participation requirements for the OGT. A child may meet the participation requirement in one area of the OGT and not another. Can the form be adjusted to include this? If not, are there any suggestions for districts on how or where to indicate this?</p> <p>At this time the form cannot be changed. Therefore, the district, if it believes it needs this information on the IEP, may write it in on the testing page.</p>
Assessment – Refusal to Participate	<p>What should a school district do when parents refuse to have their child with a disability participate in a statewide test?</p> <p>The district should ask the parents to provide a written refusal which the district should place it in the child's education record. This will have an impact on the district's accountability data.</p>
Assessment – Use of Accommodations	<p>What should a district do if a child with a disability refuses to use or doesn't have an opportunity to use an accommodation that is identified on his or her IEP when taking a statewide test?</p> <p>If the child did not use the identified accommodation either because the child refused or the test proctor was unaware or refused to have the child use the accommodation, the IEP team should meet to determine if the child's test should be invalidated.</p> <p>If a child has a testing accommodation identified on his or her IEP and is choosing not to use the accommodation in testing situations (classroom, districtwide and statewide), the accommodation should be removed from the child's IEP.</p>
Assistive Technology	<p>If a district has provided a child with an assistive technology device and it has been broken numerous times when sent home, can the IEP team determine:</p> <ol style="list-style-type: none"> 1. A lower technology device is more appropriate due to breakage and cost of repairs? <p>This determination cannot be based on breakage. However, the IEP team can decide that another technology device is appropriate and provides the child with a free appropriate public education (FAPE).</p> 2. The device will not be sent home? <p>If the child can complete homework assignments at home without the school- purchased assistive technology device, the IEP team can determine that the child does not need access to the device at home to receive FAPE.</p> 3. That the parents are responsible for damages after several repairs have been made on the device and the repairs are due to negligence or abuse? <p>Parents cannot be held responsible for the repair of the device. The school district must make assistive technology devices available to a child with a disability if required by the IEP in order to provide FAPE.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

<p>Attendance of Child at IEP Meetings</p>	<p>We know that a child 14 years or older should be invited to the IEP if transition is being discussed. However, what if the child is extremely uncomfortable in this situation or the parents don't want the child to be present for whatever reason. Must the child be invited or is it a team decision?</p> <p>The child must be invited. The child and the parents then determine if the child will accept the invitation and participate.</p> <p>If a child is invited and chooses not to miss his or her classes to attend the IEP meeting, is it indicated on the IEP? If not, where is this documented?</p> <p>A child should not have to miss classes to attend an IEP meeting. An IEP meeting must be at a mutually agreed upon date and time. The meeting should be scheduled during study halls or before or after school.</p> <p>The Parent Invitation PR-02 form serves as the documentation that the child was invited to the IEP meeting. The child should respond to the invitation and that response should be recorded and kept with the written invitation. This is not documented on the IEP form.</p> <p>If the child attends only part of the IEP meeting, does the child sign in the section of the IEP form for "People Not in Attendance?"</p> <p>Yes, and then a note can be added that the child attended a portion of the meeting.</p>
<p>Benchmarks and Objectives</p>	<p>As defined in the Operating Standards, there is a distinction between "benchmark" and "objective." Which should typically be used since either can be chosen?</p> <ul style="list-style-type: none"> ▪ "Benchmark" means a specific statement of what the child should know and be able to do in a specified segment of the year. Benchmarks describe how far the child is expected to progress toward the annual goal and by when. Benchmarks establish expected performance levels that allow for regular checks of progress that coincide with the reporting periods for informing parents of the child's progress toward achieving the annual goals. ▪ "Objective" means a smaller, more manageable learning task that a child must master as a step toward achieving an annual goal. Objectives break the skills described in the annual goal into discrete components that, when mastered, allow the child to successfully obtain the goal. <p>Whether the IEP team will use benchmarks or objectives depends on the educational needs of the child. Objectives are most commonly used to measure the progress on goals. However, the IEP team may chose to use benchmarks depending on the goal, the service and what is to be measured.</p>
<p>Consultation Services</p>	<p>Should the IEP team document consultative services being provided by the speech language pathologist (SLP) to the regular education teacher on the IEP?</p> <p>Yes. If the regular education teacher is implementing suggestions made by the SLP and the SLP is observing the child to determine if the child is responding. This service would be included on the child's IEP under Section 7, just as other direct services are recorded including the goals addressed, the provider title, and duration and location of services.</p>
<p>Dates – Calamity Days</p>	<p>If the school year has been extended due to calamity days and the district has used the adopted school calendar as the start and end dates on the IEP, must the parents be notified that the current IEP will serve their child through the extended days?</p> <p>No. If the IEP says it will be in effect for the adopted school calendar and that calendar changes, the district does not need to notify the parents. If the IEP contains actual start and end dates and the calamity days go beyond those dates, the district does not need to hold an IEP meeting and revise the dates. The days being made up are days that were required in the IEP. The child did not receive the services he or she was entitled to due to the calamity days. Those services are then provided during the extended school year.</p> <p>What do you advise to prevent the recurrence of this problem?</p> <p>The new IEP form includes a statement on the front page that the IEP will be implemented during the regular school term. If the school calendar changes, the IEP must still be implemented during the school term, revised or not revised.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

<p>Determination of Specialized Services</p>	<p>When a child qualifies for one of the 13 categories of disabilities outlined in IDEA, the child receives the services determined by the IEP team. Who determines what is written on the IEP if the services are reading recovery, specialized instruction by an intervention specialist or reading interventions as part of general education?</p> <p>The IEP team determines the services based on the needs of the child. The examples listed must rise to the level of specialized instruction to be included on the IEP.</p> <p>Can those services be classified as specialized instruction if the child doesn't qualify for SLD?</p> <p>Those services can be classified as specialized instruction because the child simply has to qualify in one of the 13 categories, and speech/ language is one of the 13 categories.</p>
<p>District Representative – Speech and Language Pathologist</p>	<p>If the district designates the speech and language pathologist (SLP) to be the district representative at an IEP meeting for a child with speech as the primary disability condition, does the SLP sign in both boxes - Intervention Specialist and District Representative - under Section 13 Meeting Participants, of the IEP?</p> <p>Yes. Make sure the SLP meets all of the criteria for a district representative; i.e., has a good working knowledge of the general education curriculum, can provide or supervise the provision of specially designed instruction, and can commit district resources.</p>
<p>Documenting Instruction for Preschool</p>	<p>How do you record a breakdown of preschool instruction for each goal in the IEP? In pre- kindergarten (PK), instruction is integrated and diverse from day to day; for example, PK does not teach a 30 minute reading block daily to make 150 min/ wk for reading goal #1.</p> <p>Documenting of the amount of time is needed for Medicaid reimbursement. Teachers are not part of that system. Given the integrated daily schedule of preschool, it would be acceptable to indicate the times of day the instruction occurs such as: circle time, small group, learning centers, motor/ outdoor play, or free choice. This may require writing multiple routines that are targeted. Some adaptations may occur under specially designed instruction all day and those may be noted as "integrated into the daily routine," or the average amount of time over a week for a specific goal or adaptation may be noted.</p> <p>The amount of time for a related service would be specific (for integrated activities in the classroom or for the small number of pull out sessions that may occur).</p>
<p>Documenting Services for Medicaid Billing</p>	<p>If you're billing Medicaid for speech therapy, where on the IEP is it written? Is it written under "Related Services" or "Services to Support Medical Needs" or both?</p> <p>The service could be written under either heading depending on what the actual service is, but the same service should not be written under two different headings. A service should appear only once so the reader does not think that the child is receiving more services than are actually being provided.</p>
<p>ESY and Ratios</p>	<p>Do the service provider ratios and age ranges identified in rule 3301-51-09 of the Operating Standards apply to extended school year services (ESY)?</p> <p>Since rule 3301-51-09 is not specific to the school year, the ratios and age ranges would be in effect for ESY services. However, depending on a school district's specific situation, it may want to request a waiver. The Waiver Application form for school- aged services is posted on the ODE Web site, keyword search: <i>school-age waiver</i> or e- mail Shelly Rensch, Office for Exceptional Children, at Rensch@ode.state.oh.us, to assist you with the completing the application process.</p>
<p>Excusals from IEP Meetings</p>	<p>Is a related service provider required to have a written excusal from an IEP team meeting? The Operating Standards address excusals and refer to the IEP team member's area of the curriculum or related services.</p> <p>Only the district representative; the regular education teacher, if the child participates or may be participating in the regular education class; the special education teacher, and an individual who can interpret the instructional implications of evaluation results may be excused, in whole or in part, from an IEP meeting.</p> <p>When an IEP meeting will not be dealing with the curriculum or related services about which a required team member is knowledgeable, that team member may be excused if the parents and the school district <i>agree in writing</i> that the attendance of that member is not necessary.</p> <p>When an IEP meeting does involve a modification to or discussion of the required IEP team member's area of the curriculum or related services, that team member may be excused if the parents and the school district <i>consent in writing</i> to the excusal. The member being excused must submit, in writing to the parents and the IEP team, input into the development of the IEP prior to the meeting.</p> <p>If a speech and language pathologist (SLP) is acting as the special education teacher because the child is receiving only speech services and that is the child's "specially designed instruction," the SLP would be a required member of the IEP team. In this case, the SLP is the special education teacher and would need a written excuse prior to the IEP meeting. Since the SLP's services will be discussed, the parents and the school district must <i>consent in writing</i> to the excusal.</p> <p>The district representative, a required member of the IEP team, may be excused from the IEP meeting but ODE/ OEC and OSEP do not recommend this practice. In most instances the district representative is the</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

	<p>team member qualified to provide or supervise specially designed instruction and commit resources for implementing the child's IEP. The parents and the school district should give careful consideration to the importance of having the district representative attend the IEP meeting before consenting to his or her excusal.</p>
<p>Extracurricular – Access to Tuition-Based Program</p>	<p>A school district is serving a child with a disability in a half- day special- education preschool program and provides the child with an aide. The district also has an optional tuition- based preschool program. If the parents choose to enroll the child in the tuition- based preschool program, does the district need to provide an aide, since it is a district sponsored program?</p> <p>If the IEP team determines that the child needs to participate in the tuition- based preschool program to provide the child FAPE, then the child's IEP is implemented, as written, just as it is in the special- education preschool program.</p> <p>If the IEP team determines that a special- education preschool program will provide FAPE to the child and the parents voluntarily choose to enroll the child in the tuition- based preschool program, the district must determine if the child needs the aide to participate in the tuition- based preschool program. Under this scenario the district must ensure that the child has access to the program and not FAPE.</p>
<p>Extracurricular and Nonacademic - Clarification of Requirements</p>	<p>Would you please provide clarification for the new IEP, Section 9, Nonacademic and Extracurricular Activities?</p> <p>There are two requirements that must be met relative to children with disabilities.</p> <ol style="list-style-type: none"> 1. The first requirement applies to the provision of a free appropriate public education (FAPE). <p style="margin-left: 40px;">IDEA requires that each school district must ensure that each child with a disability has the supplementary aids and services determined by the child's IEP team to be appropriate and necessary for the child to participate in nonacademic and extracurricular activities. Aids and services are identified in the IEP under Section 9, Nonacademic and Extracurricular Activities. This section documents that opportunities for participation in nonacademic and extracurricular activities with the child's nondisabled peers are necessary to provide the child FAPE, and the child is required to participate in the activities as recorded in the IEP.</p> 2. The second requirement applies to children with disabilities who voluntarily wish to participate in nonacademic and extracurricular activities. <p style="margin-left: 40px;">If the aids and services needed for a child with a disability to participate in nonacademic and extracurricular activities are not included on the IEP, the question becomes what accommodations are necessary to provide access and an equal opportunity for children to participate in these activities in a nondiscriminatory manner. This is an issue addressed under Section 504 of the Rehabilitation Act and enforced by the Office of Civil Rights (OCR).</p> <p style="margin-left: 40px;">The new IEP form is written in a way that promotes conversation between the parents and the district regarding both of these requirements for nonacademic and extracurricular activities.</p>
<p>Extracurricular – Making School Events Accessible</p>	<p>Must a school district make all events, such as sporting events and concerts, accessible to children who require aides to assist them with socializing while attending such events?</p> <p>Under federal law, all public events must be accessible to people with disabilities. This would include children with disabilities. To determine the extent a district must go to make an event accessible, ODE/ OEC suggests contacting the Office for Civil Rights in Cleveland. This office can provide the specific parameters for accessibility under the law. The phone number is 216-522-4970.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

<p>Extracurricular - Latchkey Programs</p>	<p>If a school offers a latchkey program, does that meet the criteria for nonacademic and extracurricular services? Yes.</p> <p>If the child needs supports (e.g., an individual aide) to participate in the latchkey program, must the district provide them?</p> <p>Yes, the district must make the program accessible to children with disabilities. If the child is in a wheelchair, the district must make sure the child can get into the room. If the child is emotionally disturbed or autistic and needs assistance in controlling behaviors to be in the program, the district must provide an aide, training for the latchkey personnel, or whatever else is necessary to ensure the safety of the child and other children in the program.</p>
<p>Graduation – Parents Want Child to Remain in School until 22</p>	<p>When a high school child has accumulated all of his or her credits and is a good candidate for a vocational program but the parents want the child to stay in school until he or she is 22, what options does the district have?"</p> <p>This is an IEP team decision. If the child has completed all requirements to graduate from high school and all FAPE requirements, the IEP team may determine that the child will graduate and provides the parents with a prior written notice letting them know of the team's decision. If the parents disagree, they may file for a due process hearing.</p> <p>The IEP team should determine whether the child has all of the necessary skills and education to move into a postsecondary activity such as a sheltered workshop, additional training, or postsecondary schooling. If the child possesses the necessary skills and education, the team may determine the child can graduate. If the child does not graduate, the team must determine what else the child needs to successfully transition to postsecondary life and provide those services. This is not determined by the parents. The parents are members of the IEP team and do provide input; however, the final decision is a team decision based on the requirements of the law.</p>
<p>Graduation - Participation in Commencement Exercises</p>	<p>If a child with a disability is deferring his or her diploma but has met all credit requirements set by ODE and the local board of education, is it permissible for the child to participate in commencement exercises?</p> <p>Participation in the graduation ceremony is strictly a local decision.</p> <p>If the IEP team has determined the child has yet to fulfill the IEP requirements and would technically not be ready to receive his or her diploma, there may be local reasons for which participation in graduation might be considered.</p> <p>However, if the team determines that all of the requirements, IEP and curricular requirements, have been met and the testing has been completed, a diploma is to be awarded. If the parents or the child disagree, the district must provide a prior written notice.</p>
<p>IEP Forms</p>	<p>If a district used the old IEP forms in writing IEPs for next year, can the district amend that document, if needed, next year? Yes.</p> <p>Does a completely new document (new IEP form) have to be written? No.</p>
<p>Inclusion</p>	<p>What is meant by "full inclusion?"</p> <p>The Individuals With Disabilities Education Act (IDEA), as amended in 2004, does not require inclusion. Instead, the law requires that children with disabilities be educated in the "least restrictive environment appropriate" to meet their "unique needs." And the IDEA contemplates that the "least restrictive environment" analysis will begin with placement in the regular education classroom.</p> <p>However, IDEA recognizes that it is not appropriate to place all children in the regular education classroom. Therefore, the law requires school districts to have a "continuum of placements" available, extending from the regular education classroom, co- teaching in the regular education classroom, small group instruction, resources rooms, and one- on- one tutors to residential settings, in order to accommodate the needs of all children with disabilities. Using the continuum concept makes it more likely that each child would be placed appropriately in an environment that is specifically suited to meet his or her needs. The law intends that the degree of "inclusion" be driven by the student's needs as determined by the IEP team, not by the district's convenience or the parents' wishes.</p> <p>IDEA requires that in developing the Individual Education Program (IEP) for a child with disabilities, the IEP team must consider placement in the regular education classroom as the starting point in determining the appropriate placement for the child. If the IEP team determines that the "least restrictive environment" appropriate for a particular child is not the regular education classroom for all or part of the IEP, the IEP team must include an explanation in the IEP of why the regular education classroom is not appropriate.</p> <p>The purpose of these requirements is to carry out the intent of the IDEA, which is to educate as many students with disabilities as possible in the regular education classroom, while still meeting their unique, individual needs.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

Lack of Instruction	<p>A child must not be determined to be a child with a disability if the determinant factor is "lack of instruction." What about children who have moved so frequently that their problems are probably due to lack of instruction? These children often are far behind and, even with interventions, do not make adequate progress. If the team feels these children need specially designed instruction, is there a time when they can be found to be a child with a disability?</p> <p>This is an IEP team decision based on the unique needs and circumstances of the child. If the child has always been in public schools that have a requirement to provide high quality instruction taught by highly qualified teachers, the team is probably accurate in saying that the disability is not due to a lack of instruction in reading and math, but this is a case- by- case determination.</p>
Location of Services	<p>As therapists we work in all areas of the school - hallways, classroom, sensory room, gym, pool, cafeteria, play ground. Do all locations need to be listed on the IEP or is "public school/ all areas" sufficient? What if services are provided in this manner in a separate facility (i.e., MR/ DD)?</p> <p>The law requires each service provider to list the location and the frequency and duration of the service they are providing. Therefore, the service provider must determine where services will be provided for each child they will be serving and identify the location on the IEP. It is not acceptable to just put "the school" on the IEP. This does not tell the parents or the team what is going on.</p>
LRE Justification	<p>Should the justification provided in Section 11 of the IEP form, Least Restrictive Environment (LRE), include the percent of time the child is in and out of the general education classroom?</p> <p>No, this is an EMIS indicator and is not appropriate on the IEP.</p>
Measuring Progress on the Goals	<p>If an intervention specialist (IS) and speech and language pathologist (SLP) both provide services to support the acquisition of a specific goal on a child's IEP, how do you identified the preferred method for monitoring progress on the IEP?</p> <p>The team should clearly state on the IEP who will be providing data to show progress on the goal and what that data will consist of. This may mean that both the IS and the SLP will be providing data, or it may mean that only one of them will provide the data as outlined on the IEP.</p>
Modifications for Children Who are Not Cognitively Impaired	<p>The IEP annotations state "Modifications are provided to those children whose disabilities include a cognitive impairment such as traumatic brain injury, cognitively disabled or multiply disabled." Does this mean that children with a specific learning disability (SLD) or other health impairment (OHI) cannot be given shorter spelling lists or instructional content at a lower grade level?</p> <p>A shortening of assignments or material is an accommodation and not a modification. A child receiving a shorter spelling list would still be receiving the same level of spelling words as all other children in the class, but would be responsible for fewer words. If the child does not have a cognitive impairment, modifying the curriculum so it is several grade levels below the child's current grade level may be problematic.</p> <p>If the child has normal intelligence and is receiving high quality instruction and appropriate supports and services, it is assumed that the child can learn at grade level. The problem then becomes why the child is not learning the grade- level material. It is the district's responsibility to ensure that the correct instruction, supports and services are in place to allow this to occur.</p> <p>The example in the Annotations for the New IEP PR-07 Form stresses that modifications should not be used for children without cognitive impairments. However, there may be occasional exceptions. If a child has normal intelligence but cannot learn the grade- level material, the curriculum must be modified for the child to receive FAPE. However, the ODE/ OEC cautions against modifying the curriculum for a child who has only a learning disability.</p>
Preschool - General Education Teacher	<p>The <i>Annotations for the New IEP PR-07 Form</i> include the following statement on page 31: "A kindergarten teacher is not a preschool teacher unless the child is attending kindergarten as a preschool child with a disability. In these cases, a kindergarten teacher may be used to fulfill this requirement." This is referring to the requirement for a general education teacher to be in attendance at an IEP meeting. Since children in kindergarten may no longer be in the preschool program, why is this in the Annotations?</p> <p>A general education teacher is required to attend an IEP meeting. As some children may not be enrolled in a preschool or child care class, or a district may not have a general preschool teacher on staff, there may be RARE cases where a kindergarten teacher can fulfill the role of a general preschool teacher. For federal purposes, five year olds are preschoolers whether the child is in preschool or kindergarten. To meet federal requirements, a kindergarten teacher can suffice if there is no other recourse. Districts should make every effort possible to have a preschool teacher as part of the meeting. If a district is reviewed for compliance, ODE will be ask what measures are being taken to ensure a general preschool teacher is included in future IEP meetings.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

<p>Present Levels and the Profile</p>	<p>The <i>Annotations for the New IEP PR-07 Form</i>, page 16, include several examples of information that should be included in the present level statements:</p> <ol style="list-style-type: none"> 1. Information that is not indicative of a deficit; 2. Information demonstrating the need for the continuation or elimination of the goal statement; 3. Performance and pre- academic skills in relation to a suspected disability; and 4. For preschool, present levels in each of the child's developmental domains. <p>This seems to divide the clear baseline data leading to each goal. Shouldn't this type of information be included in the profile area?</p> <p>The IEP team needs to look at all information when establishing the baselines. The team should be looking at all sections of the IEP that provide data and information and form the goals according to the total "picture" of the child. The information you have referenced may be included in either the Profile section or the Present level section. An IEP team may place all the data for a child in a particular section, if they find this to be helpful. Anything that assists the team in considering all information is a good practice.</p>
<p>Progress and Interim Reports</p>	<p>If interim reports are provided to all children in the district, is the district required to send both interim reports and IEP progress reports for children with disabilities, or is one or the other sufficient?</p> <p>If all children receive an interim report, all children with disabilities must receive an interim report as well as a progress report. Not to provide interim reports to children with disabilities simply because they have a disability is discrimination.</p>
<p>Provision of FAPE in GED Program</p>	<p>When a child with a disability enrolls in a GED program, does the IEP continue to be implemented?</p> <p>The IEP must continue to be implemented if:</p> <ul style="list-style-type: none"> ▪ The child has not received a regular high school diploma; ▪ The child has not yet reached their 22nd birthday; and ▪ The entity providing the program meets the definition of a "local educational agency" as defined in the federal law.
<p>Provision of Private Therapy Documented in the IEP</p>	<p>If parents provide private therapy for their child with a disability, is it acceptable to list the provider's name and contact information in the "Other Information" Section of the IEP? Would you need to indicate "parents providing private therapy?"</p> <p>The IEP documents the supports and services that are being provided by the public agency or agencies to provide the child with FAPE. If the district is contracting with the parents or in some other way has a formal arrangement with the parents to provide services that are part of the child receiving FAPE, it can be placed on the IEP under "Other Information."</p> <p>If the district is not providing the service, this would be considered "background information" for the child and should be included under Section 3, Profile.</p>
<p>Related Services – Annual Review of Needs</p>	<p>What is the best way to prompt an IEP team to look at a child's needs each year to see if OT, PT, speech, work study or other services are needed?</p> <p>The IEP team is required to review the entire IEP once each year. This annual review includes all related services and discussions about: whether all goals and objectives have been met; and whether new goals and objectives in the related service area are necessary to provide the child FAPE.</p> <p>If a child has underlying motor/ sensory deficits, should the OT continue to attend the IEP meetings, even if OT services were discontinued on the previous IEP?</p> <p>This is a district determination.</p> <p>If a child still has deficits, should OT and speech consultation services be included in the IEP for once or twice a year so the child's needs can be reassessed?</p> <p>This is an IEP team decision that should be made based on the educational needs of the child.</p>
<p>Related Services - Options for IEP</p>	<p>Some districts use IEPs in which the vendor has pre- populated the list of related services with the related services identified in the "IEP Annotations." These IEPs provide no options to edit or choose other related services. Are the services listed in the Annotations the only related services choices?</p> <p>No. All IEPs need to provide an option for writing in additional information. ODE's monitoring teams have consistently found districts out of compliance if the district does not have an IEP that has the "write- in" option available.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

Related Services or Specially Designed Instruction	<p>Is adapted PE a related service or specially designed instruction?</p> <p>It may be either. It depends on the intensity of the child's need as to whether or not the service would be considered a related service or specially designed instruction.</p>
Report Cards - Documenting a Modified Curriculum	<p>Is it permissible to indicate on a child's report card that a curriculum or program is being modified for the child?</p> <p>Yes, as long as the purpose is to inform the parents of the child's progress.</p> <p>The Office for Civil Rights issued a letter in 2006 clarifying that as long as the purpose for including such information on a report card is to provide parents with meaningful information regarding their child's progress, this is acceptable. Transcripts, however, cannot identify a child as receiving special education services. The difference in treatment is that transcripts are frequently provided to employers and colleges, and thus, create the possibility that the information would be used as a basis for discrimination.</p>
Service Providers – Identifying on the IEP	<p>The OT or PT is ultimately responsible for services provided by an OT assistant or PT assistant. If the OT or PT assistant is providing services to a child, should we list the provider as an OT/ certified occupational therapist assistant (COTA) or PT/ physical therapist assistant(PTA) in Section 7, Description of Specially Designed Services, of the IEP or do we only identify one person?</p> <p>Section 7 of the IEP must identify, by title, the provider who is providing the direct services, i.e., in the above situation, the COTA or the PTA.</p>
Services - Provided by an ESC	<p>If a preschool child is being provided itinerant services through an educational service center(ESC), and receiving therapy services through a school district, which agency is written on the IEP as district of service?</p> <p>The district of residence is always responsible for the IEP. The ESC is a service provider. If the ESC fails to provide the service, the district is responsible for providing that service. Therefore, the itinerant service is still the district's responsibility but the service provider is the ESC.</p>
Services – Provided through a Webcam	<p>May special education services be provided remotely through a Webcam? If so, how is that indicated in the IEP?</p> <p>This is an IEP team decision based on the severity of the child's needs. The IEP team can agree to provide services using this venue. Use of a Webcam must be documented in the IEP.</p>
Signatures for Speech and Language Pathologist	<p>If the only service a child is receiving is speech, is the speech and language pathologist (SLP) considered the "intervention specialist," and does the SLP sign the IEP on the intervention specialist line?</p> <p>Yes. If the only special education a child is receiving is a related service such as speech, then the SLP is the intervention specialist for the child and fulfills that role. Therefore, the SLP may sign on the intervention specialist line.</p>
Single Plans for English Language Learners (ELL)	<p>If a child has an English Language Learner (ELL) plan and is found to have a disability in his or her native language, does the IEP include language acquisition goals, objectives, and services from the ELL instructor? Do these two plans blend or do they stay separate plans? Does the IEP supersede the ELL plan?</p> <p>Yes, there can be a single plan which jointly describes required Limited English Proficient (LEP) services as well as services to address the disability. However, the LEP services must be provided by the English as a Second Language (ESL) or bilingual education staff who have the qualifications to work with LEP children. There are federal mandates relating to appropriate services for LEP children that must be adhered to.</p> <p>Neither special education regulations nor LEP regulations supersede each other. It makes sense to have special education staff and ESL staff work together on developing an appropriate plan, an IEP for children with disabilities who are also identified as LEP, to coordinate the provision of services in order to minimize confusion.</p>
Specially Designed Instruction	<p>If the child is identified as "speech impaired" and receives speech therapy services and services with an intervention specialist (IS), are both listed as specially designed instruction on the IEP?</p> <p>It depends on what the speech pathologist is doing. The IS will always be providing specially designed instruction in some form or other. The speech pathologist may be providing specially designed instruction depending on the nature and severity of the speech disability. The speech pathologist and IEP team are the best entities to make this determination.</p> <p>Is the SLP the specially designed instructor and the intervention specialist the related service provider? No.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

**Transportation of
Preschool Children
with Disabilities**

Is the school district responsible for transporting preschool- aged children with disabilities?

No. If a child has transportation as a related service on his or her IEP, then the district is required to transport the child whether the child is a preschool or school- aged child with a disability.

Transportation is included on a child's IEP if the child's disability requires the child to have specialized transportation to safely get to school. If the child's disability does not require specialized transportation, the child's parents are responsible for ensuring that the child attends school, just like all children without disabilities.

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

Services Plan

<p>Dual Enrollment with Public School</p>	<p>If parents want to send their child with an IEP to a nonpublic school for kindergarten and go to the district of residence for SLP and OT services, can the child receive intervention services under a services plan at the nonpublic school, as well as services under an IEP for speech and OT at the district of residence?</p> <p>The answer to this question depends on whether a district has a policy on dual enrollment. Basically, these parents are asking to be enrolled in two places, i.e., part time at the nonpublic school and part time at the school in the district of residence. Some districts allow this practice, others do not. This is a local board policy decision. If the board at the district of residence allows this practice, the child would be eligible for all services that both enrollments provide. Therefore, the child could have a services plan that provides some services and an IEP that provides additional services.</p> <p>If the board does not allow dual enrollment, the child may still be able to have SLP and OT services, depending on what services the nonpublic school has chosen for its children with disabilities to receive through the services plans, and what the district has agreed to provide to those children.</p>
<p>Need for Addressing Postsecondary on Services Plan</p>	<p>For students on a services plan who are 14 years old or older, must postsecondary transition be addressed?</p> <p>Postsecondary transition must be addressed only if the services plan team determines that the child will receive transition services as part of their services plan. Children with disabilities attending nonpublic schools have no entitlement to transition services. They simply have an entitlement to some services as a group, i.e., services that the proportionate set-aside funding will pay for. The nonpublic school and the public school must determine what services will be provided to which children, based on the funding available. This means children may or may not receive transition services.</p>
<p>Purpose of Other Information section on Services Plan</p>	<p>Should all academic and behavioral information provided by the ETR that is not linked to the few measurable goals written for a services plan be included in the "Other Information" section on the services plan?</p> <p>It is not necessary to be that prescriptive. The "Other Information" section of the services plan is used for information that the team feels is critical for the providers to know, and there is nowhere else on the form to place it. Including academic and behavioral information from the ETR is a good example of information that would be useful, but adding that type of information is not required.</p>
<p>Specially Designed Instruction & Services Plan</p>	<p>When developing a services plan, what type of information should be included under Specially Designed Instruction in Section 2, Description of Specially Designed Services? Is this where we should include information about small- group instruction, individual instruction, and co- teaching (regular education and intervention specialist)?</p> <p>The services plan team may never use this particular box. This would only be completed if a public school employee is providing specially designed instruction to a child attending a private school. The services plan includes the supports and services that the public school has agreed to provide to a child who attends a private school, and those services are provided by a public school employee. If a child is not receiving specially designed instruction, this box will not be filled in.</p>
<p>Who Writes Services Plan for Parochial School</p>	<p>Who can write a service plan for a parochial school?</p> <p>A services plan is a public school document that outlines the services that the public school district where the nonpublic school is located will provide to children with disabilities parentally placed in a chartered or non-chartered nonpublic school. Since this document is a commitment by the public school for service to children with disabilities attending the nonpublic school, the public school district is responsible for convening the services plan meeting and writing the services plan. A representative from the nonpublic school must participate in the services plan meeting. The nonpublic school representative can attend the meeting or participate in the meeting by phone conference or video conference.</p> <p>In some cases, the public school allows the nonpublic school to be its representative and allows the nonpublic school to convene the services plan meeting and write the services plan. This practice, although not ideal, is allowable as long as the public school honors whatever is written on the services plan completed by the nonpublic school.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

Other

<p>Divorced Parents with Joint Custody</p>	<p>If the parents of a child with a disability are divorced and share joint custody that includes educational decision making authority, does the school district need permission from both parents for actions that require informed parental consent (e.g., initial evaluation and initial provision of services)?</p> <p>No. The district only needs informed consent from one of the parents.</p> <p>If the parents disagree and are threatening legal action or revocation of consent, ODE/ OEC recommends that the district:</p> <ul style="list-style-type: none"> ▪ Contact the judge that wrote the divorce decree; ▪ Explain that the joint custody for educational decision making is interfering with the provision of services for the child; and ▪ Seek the judge's assistance in resolving the parents' disagreement. <p>ODE/ OEC recommends these steps be taken when legal action or revocation of consent is being proposed, since disagreements between the parents could result in one parent providing informed consent to serve the child and the other parent revoking consent. If a parent revokes consent the district cannot take the parent to a due process hearing to obtain a ruling that services may be provided.</p>
<p>Mandatory Medication</p>	<p>Regarding - 300.174 Prohibition on Mandatory Medication - "A school district may NOT require the parents to obtain a prescription for a child as a condition of attending school, receiving an evaluation or receiving services."</p> <p>Is this provision related only to prescriptions for medication? What if a contracted provider for OT and PT requires prescriptions prior to evaluation and service?</p> <p>The section of the federal regulations is very specific and states that it includes "substances identified under schedules I, II, III, IV or V in section 202(c) of the Controlled Substances Act (21 USC 812(c)). Therefore, it does not include prescriptions for OT or PT services.</p> <p>A number of years ago, the Ohio General Assembly passed legislation that allowed PTs to provide services in limited circumstances without a prescription. This flexibility was left to the sole discretion of the PT who could decide as the whether he or she would exercise this option and exercising this option incorrectly could cost the PT his or her license. Contact the Ohio Occupational Therapy, Physical Therapy and Athletic Trainers Board for further clarification. The address and phone number are 77 S. High St.,16th Floor, Columbus, OH 43215-6108, 800-871-1921. The Web site is www.otptat.ohio.gov.</p>
<p>Nonpublic Supplies & Equipment</p>	<p>How does a public school properly handle requests from nonpublic schools in the district for equipment and supplies for the students with disabilities served by the nonpublic school?</p> <p>The issue is that the materials and supplies belong to the public school and not the nonpublic school. Therefore a public school employee should be ordering the equipment and supplies and ensuring that they are used for the purposes intended under IDEA. The federal law states, "Equipment and supplies may be placed in the private school for the period needed for the Part B program. The LEA (public school) must control and administer the funds used to provide special education and related services and hold title to materials, equipment and property purchased with said funds."</p> <p>The LEA (public school) must maintain control of all materials, equipment and property purchased with nonpublic service amounts.</p> <p>Inventory records must be maintained for audit purposes. The LEA (public school) must remove equipment and supplies from the private schools if the equipment and supplies are no longer needed, as removal is necessary to avoid unauthorized use.</p> <p>Funds cannot be used for repairs, minor remodeling or construction of private school facilities.</p> <p>The LEA (public school) must sign the paperwork involved.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

<p>Physical Eye Condition</p>	<p>In the Operating Standards, the definition for "visual impairment" means (a) A visual impairment, not primarily perceptual in nature, resulting in a measured visual acuity 20/70 or poorer in the better eye with correction, OR (b) a physical eye condition that affects visual functioning to the extent special education placement, materials and/ or services are required in the educational setting. What are examples of "physical eye condition?"</p> <p>The language referenced has been rule language since at least 1982, so this part of the definition for visual impairments is not new. The language is saying if the child has vision so limited that the child needs specially designed instruction to learn, the child is a child with a visual impairment and may be identified as such under IDEA.</p> <p>For specific eye conditions that may result in a child being a child with a visual impairment, contact the Ohio Center for Autism and Low Incidence (OCALI), the Ohio School for the Blind or the SST serving the area.</p>
<p>Provider of Services for Child not Qualifying for SLD</p>	<p>Who provides reading intervention service for a child who has speech and language as a primary disability and also has reading weaknesses but does not qualify for SLD?</p> <p>The district implementing the IEP provides the service. A child who has only a speech disability is a child with a disability under IDEA and is entitled to all supports and services needed to progress in the general education curriculum and to be provided FAPE. Therefore, if a child who has only a speech disability needs additional supports and services beyond speech services, the IEP team convenes and adds those services to the existing "speech only" IEP.</p>
<p>Ratios</p>	<p>What are the ratios (preschool and school age) for COTAs and PTAs when they are supervised by OTs and PTs?</p> <p>There are no ratios for COTAs or PTAs required by the Ohio Department of Education (ODE). The rules that govern the licensure and work of OTs and PTs discuss ratios for these disciplines and for the work of COTAs and PTAs. OTs and PTs, as well as COTAs and PTAs, should be familiar with their own professional licensure and work standards and follow them accordingly.</p>
<p>Surrogate Parents</p>	<p>What is ODE's policy regarding the appointment of surrogate parents for children who are wards of the state? Are surrogates appointed for a child who is in temporary custody of the state, or only for a child who is in the permanent custody of the state and the rights of the child's biological parents have been terminated?</p> <p>If a child is a ward of a state, the district must consider whether a surrogate parent needs to be appointed, but the district is not automatically required to appoint a surrogate parent. The district must first consult any judicial decree and follow the decree. Furthermore, if there is a specific person who meets the definition of parent, other than a parent from whom custody is being removed by court order, that person can make educational decisions for the child. If the child will be placed in foster care, a surrogate parent will probably need to be appointed, as a foster parent is not a parent. If the court is removing a child from the custody of a parent, the district need not presume that that parent retains authority to make educational decisions for the child, if the decree is silent on this issue.</p>
<p>Two Roles for the Same Person</p>	<p>Can a person be employed and act as a school psychologist and a special education supervisor in the same buildings with the same IEPs?</p> <p>These personnel may fill both roles if they meet the criteria for district requirements.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

EMIS

EMIS Requirements Regarding Time	<p>Does EMIS require the amount of time to be stated in minutes per week? If so, how does this work if we use the 3:1 model and write minutes per month?</p> <p>EMIS does not require minutes per week. It will accept minutes per month.</p>
EMIS Requirements Regarding Time	<p>Is it feasible to write 150 minutes per month direct and 120 minutes per year indirect services?</p> <p>ODE/ OEC suggests that the provider document the time spent in each activity, and that the provider's notes and documentation outline what services were provided during these minutes.</p>
Out- of- state ETR & EMIS	<p>When a district accepts the out- of- state evaluation, what date should be reported in EMIS?</p> <p>When a child moves into Ohio from another state, the Ohio school district has several decision points and options. The Ohio district must convene an IEP team and determine the following:</p> <ul style="list-style-type: none"> ▪ Can the district accept the child's out- of- state ETR? The Ohio district may do this if it finds the out- of- state ETR to have all of the required components of an Ohio ETR and the Ohio district agrees with the conclusions of the ETR. If the Ohio district does accept the out- of- state ETR, it is, in effect, adopting the out- of- state ETR as its own. Therefore, the next ETR that the Ohio district completes for the child will be a reevaluation and <i>not</i> an initial evaluation. <p>The code for this is the TETR. The event date entered is the date that the district staff met and decided that the ETR had the required components and the district agreed with the conclusions. The outcome start date is the same date as the event date; the outcome end date is the day before the three- year anniversary date.</p> <ul style="list-style-type: none"> ▪ If the Ohio district decides it will not accept the out- of- state ETR as its own, the Ohio district must conduct and complete an evaluation. This evaluation will be an <i>initial</i> evaluation. While the district is completing this evaluation, it will provide the child with the supports and services contained in the child's out- of- state IEP, or it will provide services comparable to those contained in the child's out- of- state IEP. The district will <i>not</i> create a new IEP until the district completes the initial ETR. <p>The code here is IETR. Until the district completes an Ohio ETR, it does not report the outcome codes. Although the district continues to provide the supports and services from the previous state, the district has not yet come to agreement on the conclusions of an ETR, and so cannot yet accurately report. Once the ETR is completed, the district reports the date of the completed ETR as an IETR event, with outcome start dates as the same date of the event. The district cannot back- date its decision, even though it was providing services prior to the ETR completion.</p>
Placement of EMIS Codes on IEP Form	<p>Where on the new IEP form do we put the disability codes and LRE codes that were entered in the summary section of the signature page on the old IEP?</p> <p>The new form does not include EMIS codes. The old IEP also did not include a place for EMIS codes, but some districts wrote them in on lines that were meant for other information. An EMIS code <i>cannot</i> be used to identify the LRE or the disability. The disability would be addressed in the present levels of performance and the child's profile. The LRE is identified in that section of the form by the district answering the questions appropriately.</p> <p>EMIS codes are something the district does to document what the IEP says, but the actual codes do not appear on the form.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

<p>Reporting Child with Speech Disability</p>	<p>How are speech therapist services reported for a child whose disability is speech and language?</p> <p>If a child has a speech disability and has an IEP that was preceded by an ETR, the child is entered into EMIS as having a speech disability, All services required by the IEP, including speech therapy, must be reported to EMIS.</p> <p>Speech is a disability category. There is no such thing as a "speech only" IEP for which only some EMIS elements are reported, or that does not identify some of the services needed by the child. The IEP for a child with a speech or language impairment includes all the services that the child may need. For example, occupational therapy could be included as a related service on the IEP for a child who has a speech or language impairment.</p> <p>Speech therapy is listed as a related service in the operating standards OAC 3301-51-01 (B) (52). The word "related" in a "related service" refers to "related to accessing academic content" and differentiates services from academic instruction provided by a classroom teacher. An intervention specialist is a teacher – providing instruction in content specified by the academic content standards – and EMIS collects data about the courses she or he teaches and the children in those courses. ODE collects the related services data to assist in calculation of student ratios; making assumptions about which services are required based on disability category would compromise those calculations. EMIS does not collect similar data about the activities, courses, students of other related service providers.</p> <p>Some districts provide speech therapy for a few children with delays or idiosyncrasies in articulation that do not affect their access to the general curriculum. These students do not have IEPs and are not considered students with disabilities for either funding or accountability. If a district chooses to provide speech services to children not on an IEP, and those services thus are not funded by the state and federal funding for special education, the services are not part of an IEP and need not be reported to the state.</p>
<p>Speech Language Services Only as Special Education</p>	<p>Is it correct that speech language services must be checked on the EMIS form for those students who receive only speech language services as their special education?</p> <p>For all purposes, students with speech and language disabilities are considered to be students with disabilities. They are subject to the same laws, rules and regulations as all other students with disabilities. A student with a speech disability has an IEP that was preceded by an ETR. Districts must report those events for students, even for students whose only special education required by the IEP is speech therapy.</p> <p>Speech therapy is listed as a related service in the operating standards OAC 3301-51-01 (B) (52). Related services are reported in EMIS whenever they are included, and only when they are included, on an IEP, regardless of the disability of a child. A service that is reported as a "related service" may be the only special education that a child receives – in such cases, the service is the special education.</p> <p>The word "related" in a "related service" refers to "related to accessing academic content," and it differentiates services from academic instruction provided by a classroom teacher. An intervention specialist is a teacher – providing instruction in content of the academic content standards – and EMIS collects data about the courses she or he teaches and the children in those courses. EMIS does not collect similar data about the activities, courses, students of other related service providers. ODE collects the "related services" data to assist in calculation of student ratios; making any assumptions about which services are required based on disability category would compromise those calculations.</p> <p>Some districts provide speech therapy for a few children with delays or idiosyncrasies in articulation that do not affect their access to the general curriculum. These children do not have IEPs, and are not considered children with disabilities for either funding or accountability. If a district chooses to provide speech services to children not on an IEP, and thus those services are not funded by the state and federal funding for special education, the services are not part of an IEP and need not be reported to the state.</p>
<p>SWD and Pregnancy</p>	<p>When a child with a disability of SLD becomes pregnant and goes on Home Instruction with the disability of OHI, (1) should RIEP and RETR be entered in EMIS, or should there be a letter of amendment changing LRE instead of a new RIEP date....and another letter of amendment when the child returns to school? or, (2) should the home instruction disability of OHI be entered as an RETR? If so, what should be done when the child returns and is SLD again?</p> <p>Being pregnant is NOT a disability. The OHI status cannot be based on a normal pregnancy. If the pregnancy has contributed to an additional medical condition that affects the child's access to the general curriculum and the district wants to change the disability code for the child, the district must do a reevaluation. If medical conditions change how a student is instructed (not where she is instructed), her disability code will change. The IEP team will meet to determine the child's placement.</p> <p>When the child is no longer pregnant and having whatever complications caused the OHI disability, a new evaluation must take place, as well as a subsequent IEP team meeting.</p>

Questions to and Answers by ODE/ OEC - June 2009

Questions are related to the ETR, the IEP, the Services Plan, EMIS, Nonpublic, and Other

Timing of Events

If an event occurs now and the IEP indicates a specific membership code for the remainder of this year, but a different code for next year, does an event have to be entered in the fall as well as now?

The codes that result from events reported in the special education record are disability category and education setting. They cannot be changed without a new event occurring. A special education category can *only* be determined as a result of an ETR; a change in placement requires an IEP team meeting. Thus, not only must an event be *entered* in the fall if there is a change, there should actually be an event that *occurs* in the fall.