What’s New In Special Education?

How the changes to Chapter 14 Regulations will affect you and your student

Sponsored by: The Arc of Pennsylvania, in partnership with PaTTAN, Pennsylvania Department OF Education/Bureau of Special Education
What’s New in Special Education?

I. Chapter 14 – PA School Code Special Education Regulations

II. Forms- New and Revised

III. Inclusion – What Does the law say? What does it look like?

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I. Chapter 14 – PA School Code
Special Education Regulations

Key: Yellow Highlight-
Words: Indicates either new, moved, changed, or previously just referenced

Sections: Indicates new section, new title, moved, or just previously referenced

Disclaimer:

We have omitted some parts of Chapter 14 – Including reserved sections; cross references to IDEA; court decisions; and other information, in the interest of space. The complete version can be found at www.pacode.com under Title 22, Chapter 14
Chapter 14.101 - Definitions

Early Intervening Services vs. EI

• Early Intervening Services:
  
  Is a set of coordinated services for students in Kindergarten through grade 12 who are not currently identified as needing special education or related services, but who need additional academic and behavioral support to succeed in a general education environment.
What Is Early Intervention?

Early Intervention in Pennsylvania is services and supports designed to help families with children who have developmental delays. Early intervention builds upon the natural learning occurring in those first few years. It is a process that promotes collaboration among parents, service providers, and others significantly involved with your child. With your help, early intervention services and supports can enhance your child’s development by:

- answering your questions about your child's development;

- enhancing your capacity to meet the developmental needs of your child throughout daily routines at home and in the community;

- enhancing your child's developmental and educational growth;

- supporting your child with developmental delays to become more independent;

- preventing the need for more and costly intervention in the future; and

- supporting communities to become more aware of the gifts and abilities of all its children.
Who is eligible for Early Intervention Services?

If your child is

Birth to three years old:

Infants and Toddlers who have:
- A significant delay in one or more areas of development; OR
- A specialist’s determination that there is a delay even though it doesn’t show up on the assessments (called informed clinical opinion); OR
- Known physical or mental conditions which have a high probability for developmental delays.

Three to the age of beginners*:

Preschoolers who have:
- A significant delay in one or more areas of development compared to other children of the same age; OR
- Any of the following physical or mental disabilities: autism/pervasive developmental disorder; serious emotional disturbance; neurological impairment; deafness/hearing loss; specific learning disability; mental retardation; multiple disabilities; other health impairment; physical disability; speech impairment or blindness/visual impairment; AND
- Are in need of special education and related services.
Chapter 14.105 – Personnel Paraprofessionals

Instructional Paraprofessionals

Effective July 1, 2010 must

– Have completed at least two years of postsecondary study
  OR

– Possess an associate degree or higher
  OR

– Meet a rigorous standard of quality as demonstrated through a State or local assessment.

§14.105(a)
Personnel: Paraprofessionals

Instructional Paraprofessionals

Effective July 1, 2008:

• Each school entity, charter school and cyber charter school must provide evidence of 20 hours annually of staff development activities related to a paraprofessional’s assignment.

• No provisions in this section are to supersede the terms of a collective bargaining agreement in effect on July 1, 2008.

§14.105(a)
Personnel: Paraprofessionals

Personal Care Assistants

• Provides one-to-one support and assistance to a student, including support and assistance in the use of medical equipment (e.g. augmentative communications devices; activities of daily living; and monitoring health and behavior).

• May provide support to more than one student, but not at the same time.
Personnel: Paraprofessionals

Personal Care Assistants
Effective July 1, 2008:

• Each school entity, charter school and cyber charter school must provide evidence of 20 hours annually of staff development activities related to a staff member’s assignment.

• The 20 hours of training may include training required by the school-based ACCESS program. This includes the requirements for CPR and First Aid but not training related to paperwork requirements.

§14.105(a),
Chapter 14.106 - Access to Instructional Materials

- The Board adopts the National Instructional Materials Accessibility Standard (NIMAS)
- Pennsylvania is coordinating with the National Instructional Materials Accessibility Center (NIMAC)
- Pennsylvania has defined timely manner for the provision of high quality accessible materials

§14.106(a)
Access to Instructional Materials

Agencies act in a timely manner in providing instructional materials if they take all reasonable steps to ensure that children who are blind or other persons with print disabilities have access to their accessible format instructional materials at the same time that students without disabilities have access to the instructional materials.

§14.106
Chapter 14.107
Complaint Procedure

Office of Dispute Resolution (ODR)
Timelines/Procedures for Due Process

Included in Resource Section V.
Chapter 14.108 - Access to Classrooms

• Parents must have reasonable access to their child’s classrooms, within the parameters of local educational agency policy.

– In PA, each LEA is required to have in place a policy regarding school visitation.

New language to Ch. 14, but current practice.

§14.108
Chapter 14.125 - Criteria for Determining Specific Learning Disabilities (SLD)

- Each school district and IU must develop procedures for determination of SLD that conform to State criteria

- Procedures must be included in special education plans

§14.125(a)
To determine that a child has SLD, the school district or IU must use one or both of the following procedures:

1. A process based on the child’s response to scientific, research-based intervention, documenting that
   - Student received high quality instruction in regular education
   - Research-based interventions were provided to the student
   - Student progress was regularly monitored

§14.125(a)
Criteria for Determining Specific Learning Disabilities

To determine that a child has SLD, the school district or IU must use one or both of the following procedures (continued):

2. A process that examines whether a child exhibits a pattern of strengths and weaknesses, relative to intellectual ability as defined by a severe discrepancy between intellectual ability and achievement or relative to age or grade.

§14.125(a)
Criteria for Determining Specific Learning Disabilities

Pennsylvania has developed criteria and guidelines regarding the determination of Specific Learning Disability.

These guidelines are included, in Section V - Resources.
Chapter 14.131 - IEP

Contents of IEP
(1) Type(s) of Support (continued)

- Autistic support
- Blind-visually impaired support
- **Deaf and hard of hearing support**
- Emotional support
- Learning support
- Life skills support
- Multiple disabilities support
- Physical support
- Speech and language support

14.131(a)
IEP

Autistic Support

The IEP for these students must address needs as identified by the team which may include, as appropriate:

– The verbal and nonverbal communication needs of the child;
– Social interaction skills and proficiencies;
– The child’s response to sensory experiences and changes in the environment
– Daily routines and schedules, and,
– The need for positive behavior supports or behavior interventions

§14 .131(a)
Deaf and Hard of Hearing Support

For these students, the IEP must include a communication plan to address:

– Language and communication needs
– Opportunities for direct communications with peers and professional personnel in the child’s language and communication mode
– Academic level
– Full range of needs, including opportunities for direct instruction in the child’s language and communication mode

§14.131 (a)
Contents of IEP

...the IEP of each student with a disability must include:

(2) Supplementary aids and services – Handout in pocket of manual

(3) A description of the type or types of support relating to personnel (This relates to the amount of services).
   – Itinerant
   – Supplemental
   – Full time

§14.131(a)
Contents of IEP

... the IEP of each student with a disability must include:

(4) The location where the student attends school and whether this is the school the student would attend if the student did not have an IEP.

New language to Ch. 14, but current practice.

§14.131 (a)
Contents of IEP

... the IEP of each student with a disability must include:

(5) For students who are 14 years of age, (or younger if determined appropriate by the IEP team), a transition plan that includes appropriate measurable postsecondary goals related to training, education, employment and, when appropriate, independent living skills.

§14.131 (a),
Contents of IEP

- Every student receiving special education and related services provided for in an IEP developed prior to July 1, 2008, must continue to receive the special education and related services under that IEP, subject to the terms, limitations and conditions set forth in law.

§14.131 (a)(7)
Chapter 14.132 - Extended School Year (ESY)

- Expeditious determinations of ESY eligibility required for students with severe/multiple disabilities.
- Target group: Students with severe disabilities such as
  - autism/pervasive developmental disorder
  - serious emotional disturbance
  - severe mental retardation
  - degenerative impairments with mental involvement
  - severe multiple disabilities

New language to Ch. 14, but current practice.

§14.132(d)
Extended School Year (ESY)

- Parents of students with severe disabilities must be notified by the school entity, charter school, or cyber school of the annual review meeting to ensure their participation.
  - IEP review meeting must occur no later than February 28
  - NOREP must be issued to the parent no later than March 31

- For a student with severe disabilities transferring into the school entity after the above dates, the determination and program content must be decided at the IEP meeting.

§14.132(d)
Extended School Year (ESY)

• School entities, charter schools and cyber charter schools must consider the eligibility for ESY services of all students with disabilities at the IEP meeting. ESY determinations for students other than those with severe/multiple disabilities are not subject to the same timelines. However, these determinations must still be made in a timely manner.

• If the parents disagree with the school entity’s recommendation on ESY, the parents will be afforded an expedited due process hearing.

§14.132(e)
Chapter 14.133 - Positive Behavior Support

Positive, rather than negative, measures must form the basis of behavior support programs to ensure that all students and eligible young children must be free from demeaning treatment, the use of aversive techniques and the unreasonable use of restraints.

§14.133(a)
Positive Behavior Support

• **Behavior support programs and plans must be based on a functional assessment of behavior and utilize positive behavior techniques.**

• **When an intervention is needed to address problem behavior, the types of intervention chosen for a particular student or eligible young child must be the least intrusive necessary.**

§14.133(a)
Positive Behavior Support

Restraints

The use of restraints to control the aggressive behavior of an individual student or eligible young child must cause

– the school entity, charter school, or cyber charter school to notify the parent of the use of the restraint

– a meeting of the IEP team within 10 school days of the inappropriate behavior causing the use of restraints, unless the parent, after written notice, agrees in writing to waive the meeting.

§14.133(c)
Positive Behavior Support

Positive behavior support plans –

A plan for students with disabilities and eligible young children who require specific intervention to address behavior that interferes with learning. A positive support plan must:

• Be developed by the IEP team,
• Be based on a functional behavioral assessment,
• Becomes part of the individual eligible young child’s or student’s IEP

§14.133(b)
Positive Behavior Support

Positive behavior support plans

Such plans must include methods that utilize positive reinforcement and other positive techniques to shape a student’s or eligible young child’s behavior, ranging from the use of positive verbal statements as a reward for good behavior to specific tangible rewards

§14.133(b)
Positive Behavior Support

Restraints –

• The application of physical force, with or without the use of any device, for the purpose of restraining the free movement of a student’s or eligible young child’s body

• Does not include briefly holding, without force, a student or eligible young child in order to calm or comfort him, guiding a student or eligible young child to an appropriate activity, or holding a student’s or eligible young child’s hand to safely escort him/her from one area to another

§14.133(b),
Positive Behavior Support

Restraints-

Excluded from this definition are hand-over-hand assistance with feeding or task completion and techniques prescribed by a qualified medical professional for reasons of safety or for therapeutic or medical treatment, as agreed to by the student’s or eligible young child’s parents and specified in the IEP.

§14.133(b)
Positive Behavior Support

Restraints

Excludes such mechanical restraints as

• Devices used for physical or occupational therapy
• Seatbelts in wheel chairs or on toilets used for balance and safety
• Safety harnesses in buses
• Functional positioning devices

§14.133(b)
Positive Behavior Support

Restraints

Restraints to control acute or episodic aggressive or self-injurious behavior may be used only when the student is acting in a manner as to be a clear and present danger to himself, to other students or to employees, and only when less restrictive measures and techniques have proven to be or are less effective.

§14.133(c)
Positive Behavior Support

Restraints

The use of restraints to control the aggressive behavior of an individual student or eligible young child must cause

– the school entity, charter school, or cyber charter school to notify the parent of the use of the restraint

– a meeting of the IEP team within 10 school days of the inappropriate behavior causing the use of restraints, unless the parent, after written notice, agrees in writing to waive the meeting.

§14.133(c)
Positive Behavior Support

Restraints

At this meeting, the IEP team must consider whether the student or eligible young child needs a functional behavioral assessment, reevaluation, a new or revised positive behavior support plan, or a change of placement to address the inappropriate behavior.

§14.133(c)
Positive Behavior Support

Restraints

The use of restraints may only be included in a student’s or eligible young child’s IEP when:

• Utilized with specific component elements of positive behavior support
• Used in conjunction with the teaching of socially acceptable alternative skills to replace problem behavior
• Staff are authorized to use the procedure and have received the staff training required
• There is a plan in place for eliminating the use of restraint through the application of positive behavior support.

§14.133©
Restraints

The use of prone restraints is prohibited in educational programs. Prone restraints are those in which a student or eligible young child is held face down on the floor.

§14.133(c)
Positive Behavior Support

• School entities, charter schools and cyber charter schools have the primary responsibility for ensuring that positive behavior support programs meet regulatory requirements, including
  – the training of personnel for the use of specific procedures, methods and techniques
  – having a written policy and procedures on the use of positive behavior support techniques and obtaining parental consent prior to the use of restraints or intrusive procedures

• In accordance with their plans, agencies may convene a review, including the use of human rights committees, to oversee the use of restrictive or intrusive procedures or restraints.

§14.133(f)
Chapter 14.162 - Procedural Safeguards

Impartial due process hearing and expedited due process hearing

If the parent fails to respond or refuses to consent to the initial provision of special education services, neither due process nor mediation may be used to obtain agreement or a ruling that the services may be provided.

New language to Ch. 14, but current practice.
Impartial due process hearing and expedited due process hearing

The decision of the hearing officer regarding a child with a disability or thought to be a child with a disability may be appealed to a court of competent jurisdiction. In notifying the parties of the decision, the hearing officer must indicate the courts to which an appeal may be taken.

New language to Ch. 14, previously adopted by reference.

§14.162 (o)
Impartial due process hearing and expedited due process hearing
The Secretary may contract for coordination services for hearings related to a child with a disability or thought to be a child with a disability. The coordination services may include arrangements:

- For hearing officer services (including the compensation of hearing officers)
  - The compensation of hearing officers does not cause them to become employees of the Department
Procedural Safeguards

Impartial due process hearing and expedited due process hearing

A hearing must be held after the conclusion of the resolution session or after one of the parties withdraws from mediation or the parties agree to waive or agree to end the resolution session.

New language to Ch. 14, but current practice.

§14.162 (q)
Procedural Safeguards

Impartial due process hearing and expedited due process hearing

During the pendency of any mediation proceeding, unless the school entity, charter school and cyber charter school and the parents of the child agree otherwise, the child that is the subject of the mediation must remain in the current education placement until the mediation process is concluded.

§14.162(s)
Procedural Safeguards

Prehearing Conference

All references to Prehearing Conferences have been deleted from Chapter 14.

§14.162(s)
Procedural Safeguards

Impartial due process hearing and expedited due process hearing

PDE will report to the Board by September 1 of each year on:

• the number of impartial due process hearings held during the previous school
• a Statewide summary of the results of the hearings in a manner that will not violate the confidentiality of children and families
• actions taken during the previous school year and future plans to strengthen the activities of due process hearings proceedings.

§14.162
Resolution Session

The resolution session will be available to parents of both school age and eligible young children with disabilities. Parent advocates may attend the sessions.
II. Special Education Forms

New & Revised
III. Inclusion

• What does the law say?
• What does it look like?
Least Restrictive Environment

“To the maximum extent appropriate, children with disabilities including children in public or private institutions, or other care facilities are educated with children who are not disabled and special classes, separate schooling or other removal of children with disabilities from the education environment occurs only when the nature or severity of the disability of a child is such that the education in regular classes with the use of supplementary aides and services still cannot be achieved satisfactorily.”

» From the 1997 Amendment of IDEA
Oberti Decision

“Inclusion is a right, not a privilege of a select few.”

Third Circuit Court of Appeals
1992
Oberti test

1. Can education in the regular classroom, with the use of *supplementary aids and services*, be achieved satisfactorily?
2. If placement outside of a regular classroom is necessary for the child to benefit educationally, has the child been *mainstreamed to the maximum extent appropriate*?
What does the law say about Inclusion?


Coordinating this title with local education service agency, state and federal school improvement efforts – in order to insure that such children benefit from such efforts and that special education can become a service for such children rather than a place where such children are sent.
Best Practices for Inclusion

1. Teaming is critical
2. Administrative Support
3. Welcome family involvement
4. Create a receptive atmosphere
5. Shared planning and collaboration time are a priority
6. Instructional activities and curriculum are varied
7. Varied models of service delivery
8. Adaptations for assessment and grading
9. Friendship building
10. Transition planning
Nick’s Story

Nick is a 13 year old young man who has Down syndrome. He is now a student in the seventh grade at Latrobe Junior High. He transitioned out of elementary sixth grade where for most of his elementary years he experienced a variety of inclusive settings. In preparation for Junior High he attended math and Spanish camps this past summer.
1. **The Team Approach**

A team from our local school district attended the Temple University Disability Institute’s C2Pc training on ‘Middle School Inclusion’. The team included; a parent, and administrative representative (Director of Pupil Services), a regular education teacher and a learning support teacher. Although it was a huge time commitment for all of us, (seven weekends from September through May), we always left knowing it was time well spent. The workshop provided us all with The Big Picture of what inclusion can really look like. This helped increase our confidence in our ability to make inclusion work.

Having gone through this inclusion process has heightened all of our awareness on how the school or parents feel. As a team, we are better equipped to offer encouragement and support to everyone involved in the inclusion process.

2. **Administrative Support**

The Director of Pupil Services was more than cooperative. When approached with the idea of attending the C2P2 workshops, she immediately gathered a team and realized that this training would benefit all students. Once the seven trainings were completed, the team trained 16 additional teachers and support personnel on information essential to a successful inclusion at the middle school level.
3. **Family Involvement**

My involvement was crucial to the success of my son’s inclusion. I was definitely thought of as part of the inclusion team. We worked together as a cohesive group, whereas my suggestions were welcomed and not taken as a mere suggestion, but as a possible solution. We worked together for the success of not only my son, but for the success of many students. We got to know one another, became a real team and each of us became more than just our role as teacher, parent, and administrator, and that is, we became people to one another and realized we all have something to contribute.

4. **Receptive Atmosphere**

My son and I were part of the inclusion training of the additional educators by the team. The educators and support personnel had the opportunity to meet Nick informally and were able to put a face and personality to all the IEP verbiage. Some of the regular education teachers had never worked with an IEP, let alone have someone ‘like Nick’ in their classroom. This alleviated a lot of apprehension and created a much more relaxed and receptive atmosphere.

We worked as a team to ease Nick into an inclusive middle school setting by providing him with opportunities in the elementary school including having him ‘ride the big bus’ home from elementary school, and including him into the regular education social studies and science classes. This gave him an idea of what was going to happen at the middle school.
5. **Shared Planning and Collaboration Time**

This is the piece that is the MOST IMPORTANT to successful inclusion. If you have an open dialogue between teachers; learning support and regular educators, and involve the parent and student, your plan is much easier to implement. We continue to revamp and revise goals and needs as needed. I cannot emphasize enough what this has meant to my son’s inclusion.

6. **Instructional Activities and Curriculum**

Just as all children learn differently, Nick has his own learning style. He is very visual as well as an auditory learner. The curriculum is presented in such a way that he is able to grasp the educational component. As well, the curriculum is presented so that it applies to life experiences for Nick. An example is the unit that Nick had on ancient Egypt in elementary school. He learned about hieroglyphics, oracles and mummies.

When we took him and a friend to see ‘Raiders of the Lost Arc’, he immediately recognized the writings on the wall and the mummy he identified as King Tut. Without the inclusion into the regular ed classroom, these things would have been just another part of the movie that he did not understand. He was very proud of himself and this experience reiterated to us why inclusion is vitally important.
7. **Varied Models of Service Delivery**
   Nick’s schedule is filled with a variety of situations. He is in learning support and regular education classrooms, co-teach classes, group and team instruction where he benefits from peer interaction, and of course life experiences as demonstrated above.

8. **Adaptations for Assessment and Grading**
   Minimal modifications have been made for testing. If the test consists of 15 questions, Nick may only be responsible for 8 to 10 questions. We did receive the test prior, but slowly eliminated ‘studying to the test’. Also, sometimes the test is given verbally and answered orally, other time the answers are written. The modifications are based on the lesson content and tests.
9. **Friendship Building**
With Nick being included in the regular education setting, he is able to interact with his peers. He has many friends in the community and they have embrace Nick and have made his transition to middle school a lot more comfortable for him. We have given Nick the opportunity to ‘work’ as a library aide, which has given him the chance to see even more friends and in an uncompetitive environment. He loves this opportunity and relates to us at dinner who he saw during the library period. This makes him feel more like ‘one of the guys’. Lunch is another opportunity for Nick to ‘fit in’ in a relaxed atmosphere.

10. **Transition Planning**
   Nick is only 13, but we have identified a few goals for inclusion. His opportunity as a library aide has been one example of skill development, and he is also prompted to advocate for himself on many occasions. At school as well as home we keep reminding Nick about acceptable social skills so that they are age appropriate for him to be successful in school as well as the community.
Harper’s Story

Harper is a 15 year old Sophomore at Windber Area High School. He has Cornelia de Lange Syndrome which presents social, communication, behavioral and intellectual challenges. He has been included in general education classes since starting at Windber schools as a kindergarten student. He attends general education classes for 77% of the school day.
1. **Teaming is critical**

   Harper's inclusion in regular education would not be possible without a team approach. We (the "team" and I, as Harper's parent am included) meet monthly to talk about how things are going, problem solve, review strategies and see if we need to add/delete anything to his programming - it is a very fluid process.

2. **Administrative support**

   Without the support of the administration within our district, success would not be possible. It has been the building principals who have ensured that the teachers have planning time to work together and collaborate regarding Harper's program. They have been vital in identifying peer supporters and facilitating that process. They worked with the team to identify a "core" team of teachers that would be trained and act as "guides" and leaders for other teachers and peer supporters to facilitate Harper's inclusion not only in the school day and general education classes, but also in extra-curricular activities.
3. **Welcome family involvement**

   Again, I am a welcomed member of Harper's planning team. And, whenever we have encountered some stumbling block, the school staff routinely include me and my input into the problem solving so that we can move forward.

4. **Create a receptive atmosphere**

   We have approached Harper's inclusion as something that IS going to happen - looking for solutions to barriers and problems with the understanding that they are just that - problems to be solved, that will be solved and we will move forward with Harper included.
5. **Shared planning and collaboration time are a priority**

This is crucial. It has been identified as one of the important threads to successful inclusion of a student with more significant disabilities. The teachers have the opportunity to collaborate and plan jointly. In addition, the district has identified and provided a "case manager" for Harper and his team. The case manager is employed by the district and is not tied to a classroom, therefore, has the ability to be available to help problem solve when needed - by Harper, or any member of the team. The case manager also assists in coordinating participation in extra-curricular activities, coordinates with other agencies that provide services - acts as the "glue" that keeps the programming moving forward in the right direction.
6. **Instructional activities and curriculum are varied**

Curricular modifications and varied instructional activities are not only necessary, they are vital to Harper's success and perception by his fellow classmates that he is a contributing member of the class. By varying what is happening in the classroom, Harper is able to participate with his peers and contribute to the activities of the class. One really nice example comes from a business class that he took. The class was talking about economics and the teacher was aware that Harper had visited a site where a company was constructing and operating windmills as an alternative energy source. Harper had prepared a PowerPoint presentation on wind energy for his science class. The business teacher was able to tie the use of alternative energy sources to the economics lesson occurring in the business class. The business teachers face glowed as he shared with the team the success of having Harper present his PowerPoint on wind energy to the business class and how Harper truly was teaching his classmates. How they were able to ask questions and Harper was able to answer and how valuable that was to all involved.
7. **Varied models of service delivery**

We have incorporated many varied models of service delivery into Harper's programming - direct instruction, group activities and team approaches, peer support, hand-on activities and direct life experiences to build the program and make education and participation in general education meaningful to Harper - and often, to make the content more meaningful for his classmates as well.

8. **Adaptations for assessment and grading**

We incorporate the use of alternative assessment to most of Harper's class work. He has the opportunity to present his knowledge to his teachers via PowerPoint presentations, alternative tests that are developed in collaboration with the case manager and special education teacher, via oral presentation, constructed models and/or whatever works to demonstrate knowledge and competency. The teachers have learned that "thinking outside the box" is crucial and have embraced doing so to measure Harper's success. They have found that by being creative, they are able to measure and see the real success and progress that Harper has made in class.
9. Friendship building

Peer support and facilitated friendship is crucial. Harper does require some sensory breaks throughout the course of the day. Instead of creating a separate, "sterile" place where he can access necessary sensory breaks, the school district dedicated a "room" to be available not only for sensory breaks, but for socialization and friendship building. The team has worked to make this a "cool" and inviting place that peers are interested in visiting as well - we always have snacks and other "comfort" things available. Harper and his peers are able to use the room (for example, during study hall) to play games, etc. The team is also working to expand the "circle of friends" that has been established and use these peer supporters to assist in facilitating Harper's participation in extra-curricular activities.
10. Transition planning

There is NO aspect that is more crucial than transition planning! For all the success that we have experienced in school, it is meaningless if it doesn't carry over to life outside of school - Some examples of things we have done and the carry-over success are: This past summer, the school district worked with our local recreation department to secure an opportunity for Harper to work as a junior camp counselor at the Recreation Department's Summer Day Camp. He was VERY successful (with supports in place to help him succeed) and was able to build relationships with the other counselors from the Camp. Peers with whom he has exchanged cell phone numbers and now stays in touch via calls and texting! He has plans to get together with these summer friends to meet at Starbucks for coffee and do other "regular" things in the community as a result of the relationships he built during his summer work experience. We are building both work skills as well as social skills that will carry on long after his school experience is completed.
Scott’s Story

Scott is now 24 years old. He carries the labels of Down syndrome and PDD, NOS (Autism) and is considered to be non-verbal, although he can and does speak. His inclusion began when he was in the 3rd grade. He was part of the Gateway Project, which was the first inclusionary program to bring kids back to their home School Districts. Because of the challenges he presented with it was a very overwhelming time for us all! Scott was not included in academic areas, but he was included for all specials and throughout the day as the team determined it to be appropriate.
1. **Teaming**

Teachers were identified prior to Scott coming back to his home school and it continued each year through to completion at age 21. The first teachers that he had were the true pioneers, but became experts on Scott in the school setting. They were invaluable to the next teachers in line. Both my husband and I were also considered part of the team, as we were the true experts on Scott. At first we had monthly team meetings to discuss how it was going and anything that happened that they were concerned about.

2. **Administrative Support**

Success of an inclusive program must start at the top! If the administration doesn’t support it then the rest of the team will have difficulty supporting it. The administrators were very beneficial in identifying supports and allocating the resources so the program was successful.
3. Welcome Family Involvement

I was welcomed as a FULL team member. If there was a problem I was asked for input in ways to resolve the issue. Of course when things went smoothly they took the credit, but that was ok because it was working for Scott!

4. Create a receptive atmosphere

Scott was there so it was going to happen. I remember going to open house and introducing myself to the foods teacher. She just gaped at me and took three giant steps back! She had never had a kid like Scott in her class and she asked me “What do you want me to teach him!” My response was I want you to take ownership and I want you to teach him the same things you are teaching the other students, how to be safe in the kitchen, how to prepare a simple snack, to work as part of a group and most importantly to hold him accountable. She took the bull by the horns and Scott blossomed in her class. I could always tell when he acted up in her class. He would clap his hands, throw his head back and announce “Mr. Leggens! it is my turn to talk!”
5. Shared planning and collaboration time are a priority

All through school the teacher all had a common planning time scheduled. It made it easy for the school team to get together and talk about progress and roadblocks. They also were able to talk about what worked and what didn’t work. One teacher was identified as the “Team Leader” and was the go to person if there was a problem. It was a crucial component in the success of Scott’s school program. It was so successful for Scott that the school adopted this as a guiding principal for ALL their students.

6. Instructional activities and curriculum are varied

Because Scott was not fully included in the academic vein this was a critical component in his programming. Teachers felt he had to do the same things the other students did to be in the class. What the team did was to pick components of the curriculum that we wanted to focus on for Scott.
7. Varied models of service delivery

Various models were used in Scott’s programming. We had small group instruction and began to do a push in model for all his therapies. We felt it was important if you were going to teach him to use a communication device in Speech it was more important to teach him to use it in environments he would be using it. The most important model we implemented was the use of his peers. Scott was much more open to accepting things from his peers. They used a natural consequence approach when interacting with Scott. He VERY quickly learned what was cool and what wasn’t cool!

8. Adaptations for assessment and grading

Scott always used alternative assessments in the school setting. He couldn’t take the typical tests and he couldn’t answer questions, so he had to SHOW them what he knew. Most times the teachers or aides would monitor him in the classroom setting doing a specific activity and they would determine from the data they were collecting whether or not he was making progress on his IEP goals.
9. **Friendship building**
   Friendship is a very important component. I asked for peer support when Scott started back at his home school. Administration had some concerns with this. They told me they couldn’t force the other kids to be his friends. The homeroom teacher decided to post a buddy chart in the class for the kids and allowed them to pick and choose when they wanted to help out. What happened blew us all away. All the kids signed up and there were so many that they had to change buddies for each activity. To be his buddy was a VERY coveted position. This continued throughout his school career. The support then spilt over into extra-curricular activities, such as pep rallies, bon fires, clubs, Special Olympics and trips to go tubing and to the amusement parks!

10. **Transition planning**
    Transition planning is so important on so many different levels. In the school setting it was a critical part of planning from year to year. We identified the next year’s teachers well in advance so they could observe Scott in class. They would observe him in class, greet him in the hall and then Scott would make trips to their classroom just to learn the new routine. It helped him make the leap with little or no upset. When at the High School level Scott was involved in job training activities and the teachers and peers were able to help him with this transition and it has continued to this day, as he still volunteers at the local food bank.
IV. Who Can Help?
The Arc of Pennsylvania

Advocacy, Resources for Citizens with cognitive, intellectual and developmental disabilities.

The Arc is the largest advocacy organization in the United States for persons with cognitive, intellectual and developmental disabilities. The Arc of Pennsylvania is the state chapter of The Arc and works with local chapters serving 47 counties throughout the state. The mission of The Arc of Pennsylvania is to include all children and adults with cognitive, intellectual and developmental disabilities in every community. The Arc of Pennsylvania pursues its mission through public policy advocacy, family training, public awareness, and community resources.

1.800.692.7258 (in PA only)
717.234.2621
www.thearcpa.org
Pennsylvania Department of Education
Bureau of Special Education

The mission of the Pennsylvania Department of Education is to lead and serve the educational community to enable each individual to grow into an inspired, productive, fulfilled lifelong learner. The Department provides overviews of educational reforms, resources, home pages of schools, including performance reports, LRE Tier Listings, right to know laws and many more services.

ConsultLine 1.800.879.2301
Out of State ConsultLine 1.717.541.4960 x3332

www.pde.state.pa.us
The Pennsylvania Training and Technical Assistance Network (PaTTAN) is an initiative of the Pennsylvania Department of Education, Bureau of Special Education. PaTTAN supports the Department of Education's efforts to lead and serve the educational community by offering professional development that builds the capacity of local educational agencies to meet students' needs. PaTTAN's primary focus is special education. Resources on website include: training information, special education forms, and specific learning disabilities guidelines.

1.800.360.7282 (in PA only)
1.717.541.4960
www.pattan.net
Office of Dispute Resolution

The Office for Dispute Resolution is located at the Pennsylvania Training and Technical Assistance Network building in Harrisburg.

ODR, 6340 Flank Drive, Harrisburg, PA 17112
717-541-4960

To expedite ODR's response to a caller, it is suggested that the ODR Staff list be reviewed to determine the appropriate individual to contact for the caller's particular issue.

Mediation: 1-800-222-3353
IEP Facilitation: 1-800-222-3353

www.odr.pattan.net
For thirty years, the Education Law Center (ELC) has worked to make good public education a reality for Pennsylvania’s most vulnerable students – poor children, children of color, kids with disabilities, English language learners, children in foster homes and institutions, and others.

Website resources include: publications and guidelines on the law and your students rights.

www.elc-pa.org
Disability Rights Network (DRN)

Formerly known as Pennsylvania Protection & Advocacy, Inc. (PP&A) and the Disabilities Law Project (DLP) have merged to form the Disability Rights Network of Pennsylvania (DRN).

Disability Rights Network of Pennsylvania (DRN) is a statewide, non-profit corporation designated as the federally-mandated organization to advance and protect the civil rights of all adults and children with disabilities. DRN works with people with disabilities and their families to ensure their rights to live in their communities with the services they need, to receive a full and inclusive education, to live free of discrimination, abuse and neglect, and to have control and self-determination over their services.

Philadelphia Office  
The Philadelphia Building  
1315 Walnut St., Suite 400  
Philadelphia, PA 19107–4798  
(215) 238-8070 (Voice)  
(215) 789-2498 (TDD)  
(215) 772-3126 (Fax)  
drnpa-phila@drnpa.org

Pittsburgh Office  
1901 Law & Finance Building  
429 Fourth Avenue  
Pittsburgh, PA 15219-1505  
(412) 391-5225 [Voice]  
(412) 467-8940 [TDD]  
(412) 391-4496 [Fax]  
drnpa-pgh@drnpa.org

Harrisburg Office  
1414 North Cameron Street  
Suite C  
Harrisburg, Pa 17103  
(717)236-8110 [Voice]  
(800)692-7443 [Toll Free]  
(877)375-7139 [TTY]  
drnpa-hbg@drnpa.org
PEN is a coalition of parents whose children represent a full range of disabilities and ages from birth to adulthood. PEN provides consultation, technical assistance, workshops, and literature about special education to the eastern region of Pennsylvania. PEN’s services are free and available to both parents and professionals.

Voice & TTY: 717-600-0100
1-800-522-5827 (in PA)
1-800-441-5028 (Spanish, in PA)

www.parentednet.org
The PEAL Center is an organization of parents of children with disabilities reaching out to assist other parents and professionals. The PEAL Center provides workshops, training, and information about early intervention, special education, and inclusive education to the western and central regions of Pennsylvania. Parent advisors assist families with information about the special education process and problem-solving strategies.

Voice: 412-422-1040
TTY: 412-281-4409
Toll Free: 866-950-1040

www.pealcenter.org
Parents, educators, advocates, and attorneys come to Wrightslaw for accurate, reliable information about special education law, education law, and advocacy for children with disabilities. Wrights law has thousands of articles, cases, and free resources about dozens of topics.

www.wrightslaw.com
On May 5, 1972, the Federal District Court for Eastern Pennsylvania made final the order, injunction, stipulation and consent agreement in the suit filed by the Pennsylvania Association for Retarded Children (PARC), currently The Arc of Pennsylvania, against the Commonwealth of Pennsylvania, the Secretary of the Department of Education, the State Board of Education, the Secretary of the Department of Public Welfare and all their instrumentalities on behalf of 13 Children with mental retardation who had been denied access to a free public program of education and training PARC v. Comm. of Pa. 343 F. Supp. 279 (1972).

The agreement mandated the development of a Commonwealth Plan for the Identification, Location and Evaluation of Mentally Retarded Children (COMPILE)

COMPILE provided for the establishment of a state task force and 29 local task forces (one in each intermediate unit) whose primary purpose is to insure that the intent and spirit of the Right to Education Consent Agreement is carried out throughout the Commonwealth.
V. Resources

• Acronym list
• Timelines
• Flow Chart - IEP/Evaluation
• Guidelines for Identifying Students with Specific Learning Disabilities (SLD)