

Individualized Education

An Overview of the Special Education Process



A joint training developed by the Maryland State
Department of Education and the
Parents' Place of Maryland

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SPEAKER NOTES:

Welcome to Individualized Education, An Overview of the Special Education Process

Title: Individualized Education – An Overview of the Special Education Process

Audience: The primary audience for this training module are parents and families of children with disabilities. Professionals, school staff and other community members who support children with disabilities and their families would also benefit from attending this training.

Purpose: The purpose of this training module is to enhance participation by providing a basic sequential overview of the special education process. This training will be presented in local jurisdictions by local Family Support Services Coordinators/Educators (Family Support Network, Preschool Partners, Partners for Success) and/or by Parents' Place of Maryland staff. All presenters will attend a Train-the-Trainer workshop presented jointly by the statewide Family Support Services Coordinator and Parents' Place of Maryland before conducting the training in their local jurisdictions.

Outcomes:

Participants will:

- gain a basic understanding of the special education process for more effective participation in this process.
- understand that special education is individualized to meet the unique needs of each student.
- gain knowledge and insight regarding parent rights and parent involvement in the special education process.
- receive additional resources about the special education process for further information and an extension of their learning.

Evaluation: Participants will be asked to complete an evaluation at the end of this training module.

This training module is aligned with the Maryland Teacher Professional Development Standards.

What you will learn

- Special Education is **individualized** to meet the unique needs of each student
- Parent rights in the Special Education process
- Resources



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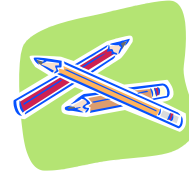
SPEAKER NOTES:

•Outline which resources you plan to use in this workshop. Local system contact information, Parental Rights – Maryland Procedural Safeguards Notice, Understanding the Evaluation, Eligibility, and Individualized Education Program (IEP) Process in Maryland, Building IEP’s with MD Families, etc.

•Briefly review the primary laws that govern special education - Federal law – Individuals with Disabilities Education Act (IDEA) and State law - Code of Maryland Regulations (COMAR). It is suggested that you have copies of these with you to show participants.

•Also explain that “parent” will be used throughout the training, but that the term “parent” refers to a biological or adoptive parent, a guardian, a relative with whom the student lives or individual who is legally responsible for the child’s welfare, or a person appointed as parent surrogate. If necessary you can explain further that while COMAR now says a foster parent who has limited guardianship is a parent, the federal law says a foster parent must be an appointed parent surrogate to serve as a parent.

How did I get here?



PERHAPS...

- a preschool teacher noticed that your child has a speech delay
- your child is consistently listed as being below grade level in reading and/or math
- your doctor noticed a developmental delay
- you noticed your child struggling with homework
- your child was born with a disability or special healthcare need
- your child has challenging behaviors that impact learning
- your child is transitioning or has transitioned from your local Infants and Toddlers program

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SPEAKER NOTES:

- There are many ways that parents and teachers discover that a child may have a handicapping condition that affects their ability to learn
- Talk about what challenging behaviors may look like (inability to pay attention, difficulty getting along with peers, angry or aggressive, sad or withdrawn, etc.)..

OPTIONAL SMALL GROUP WARM UP ACTIVITY:

- There are many paths that lead us to Special Education. Perhaps a preschool teacher has noticed that your child's language is delayed, or that they cannot hold a crayon or scissors. Maybe you have had concerns that your child is not progressing or that he or she may be regressing, and that he or she no longer seems to want to play with any toys. Or, maybe you have a teacher who has discussed with you the possibility of a learning disability due to concerns about achievement.
- In small groups ask each participant to share their journey; if group is teachers and parents, match a parent with a teacher; match parent to parent if this is a group of newly diagnosed families.

Referral Process

- Parent referral
- Child Find
- School based team
- Transition from Early Intervention to Special Education



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SPEAKER NOTES:

- Discuss each item – a written referral can be made by the student’s parents or by a representative of the local school system
- Discuss the obligation of Child Find, to Locate, Identify and Evaluate each child in their jurisdiction who may have a disability which affects learning.
- Provide Child Find contact information for your local school system..
- Discuss school based team and how this works in your local jurisdiction
- Give a scenario of each:
 1. **Preschool referral due to behaviors** (a teacher notices that a child is continually disruptive to structured group activities, she spends most of her time addressing his behavior which leaves no one teaching the other children. The child runs around the room, knocks over toys and chairs, takes toys from other children and at times has been aggressive.)
 2. **ADHD** (A child in elementary school can’t sit still, constantly squirms in their seat or gets up out of their seat frequently, struggles to pay attention but is unable to, is distracted by everything, in this case a teacher or parent could make the referral.)
 3. **Down syndrome** (A child is born and diagnosed as having Down syndrome, and the doctor makes a referral for early intervention services.)

Evaluation Process

- To determine eligibility for Special Education services, Special Education laws require the child to have an initial evaluation.
- An evaluation is a careful look at a child's abilities, strengths and weaknesses, by a team including the child's parents, of teachers and specialists. An evaluation is based on a review of assessment data, information from parents, observations by teachers, and classroom-based, local, and State assessments, to determine whether a child has a disability and requires special education instruction and related services.

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SPEAKER NOTES:

- Discuss that in Maryland, assessment is the process of collecting data by conducting tests, observation, etc and evaluation is the process of reviewing the information and interpreting what it means.
- Clarify that multiple sources of data may used prior to “formal” evaluation such as curriculum based assessments, medical records, parent observations. Tie this back to slide 4.

SUGGESTED HANDOUTS:

- Alliance – “Special Education Evaluation” and “Evaluation: What Does It Mean for Your Child?”
- Understanding the Evaluation, Eligibility, and Individualized Education Program (IEP) Process in Maryland

What rights do you have at the Evaluation stage?

- **Consent**

Before your child may be evaluated by the school system, the parent/guardian must agree in writing. If you do not agree, the school can request a due process hearing.

- **Timelines**

An IEP team must complete an initial evaluation of student within 60 days of parental consent for assessments; and within 90 days of receiving a referral.

- **Free Evaluation**

Any assessments / evaluations must be provided at no cost to you.

- **Independent Evaluation**

If you disagree with an evaluation obtained by the school system, you have the right to request an evaluation at public expense by someone who does not work for the school system. If you do so, the school system must either provide the Independent Educational Evaluation or request a due process hearing to defend its evaluation.



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SPEAKER NOTES:

- Review and make participants aware that parental rights are covered more extensively in the “Parental Rights – Maryland Procedural Safeguards Notice,” the document “Understanding the Evaluation, Eligibility, and Individualized Education Program (IEP) Process in Maryland” and in COMAR – www.dsd.state.md.us.

- Consider having copies of “Parental Rights” and “Understanding the Evaluation, Eligibility, and Individualized Education Program (IEP) Process in Maryland” available for those participants who do not have a copy of this document.

The Parent's Role in Evaluations

- Talk to anyone who interacts frequently with your child
- Be candid, factual and express ALL of your concerns
- Review developmental milestones with your healthcare provider



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SPEAKER NOTES:

- You are a vital team member and you are the home information specialist.
- Remember to talk to anyone who interacts frequently with your child such as a neighbor, friend, family member, child care provider, coach, etc.
- Suggest that parents plan a structured time to observe their child and take notes.
- Review the Developmental Categories with your Health Care Provider and contrast to your own observations.
- Review your child's learning styles. How difficult is homework? Is there a consistent pattern with low test scores? Observe the ability to attend to tasks... are they easily distracted? Are they easily frustrated?

OPTIONAL HANDOUTS - Insert pages 16-30 from U.S.E (Understanding Special Education) here if you would like to give parents a tool for home based observations. There are also parent observation tools in the informational guide "Stepping Ahead to Success – Transition at age 3" that could be copied for participants.

The Role of Educators and School Specialists

- A team of teachers and specialists will collect information about your child.
- Information is collected through:
 - * Parental Input
 - * Assessment Tools
 - * Medical Information
 - * Classroom Observations



Assessment tools can be class work, standardized testing administrations, responses to tiered instructional approaches, and teacher observation

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SPEAKER NOTES:

- Make sure to let parents know that they have access to all informal and formal assessments of their child.

NOTE: MSDE will provide updated information on Learning Disability (LD) Eligibility Determination and Response to Intervention/Tiered Instruction when available.

Who Decides if Your Child Needs Special Education?

All decisions about special education are made through the IEP team process.

IEP stands for **Individualized Education Program**.

The IEP team includes:

- * The parent(s)
- * Not less than one special education teacher
- * Not less than one general education teacher
- * A representative of the local school or local school system
- * An individual who can interpret evaluation results
- * Other individuals, at the discretion of the parent or local school system, who have knowledge or expertise
- * The student, if appropriate



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SPEAKER NOTES:

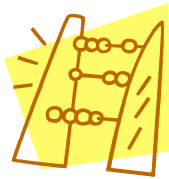
- Emphasize new flexibility options for revising the IEP with the authorization of IDEA 2004
 - Alternate ways of meeting may used such as teleconferencing in order to ensure parent input.
- Stop and facilitate a conversation with this slide that covers the following:
 1. How the meeting feels when you walk into a room filled with professionals. Ask participants how they would feel. Encourage them to express any fears or intimidation.
 2. Now, discuss the concept of a team, and that each and every decision is made by the group, not on an individual basis. Stress consensus.
 3. Talk about who the parent can bring to a meeting, and who is appropriate (friends, people who know the child, advocate).
 4. Discuss that when the purpose of the IEP meeting is to consider transition services, the student needs to be invited to the IEP meeting and encouraged to participate.
 5. Discuss the area of expertise that each person brings to this meeting to make it a rich and interactive meeting. All members have value. A general educator gives the perspective of the whole child and perspective of the curriculum; special education provides the intervention and strategies to access the curriculum; related service personnel based on the individual unique needs of the child (speech/language, OT, PT); parents share insight regarding their child and vision for the long term. **Remember the parent is the only one who knows the child across all settings.**

OPTIONAL HANDOUT – At this point you may want to refer to “Building IEP’s With Maryland Families” – *Who Develops the IEP?* Page 4

Eligibility

A child becomes eligible for special education when the IEP team identifies the child as having a disability **and** in need of specialized instruction. The disability must have educational impact.

Students from age 3 to age 21 are eligible to receive special education, and must be evaluated and determined eligible based upon one of the following categories:



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SPEAKER NOTES:

- Special education services are only delivered if there is an educational impact due to the disability.

Disability Categories

- Autism
- Deaf – Blindness
- Developmental Delay
- Emotional Disturbance
- Hearing Impairment, including Deafness
- Mental Retardation
- Multiple Disabilities
- Orthopedic Impairment
- Other Health Impairment
- Specific Learning Disability
- Speech or Language Impairment
- Traumatic Brain Injury
- Visual Impairment, including Blindness

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SPEAKER NOTES:

- Can refer participants directly to the COMAR regulations – Definition of “student with a disability”.
- The category Developmental Delay **can** be used up to age 9 to ensure proper disability identification. Check your local policy for use of DD as it varies throughout the state.
- Emphasize that OHI can be ADD/ADHD along with other “health” impairments such as asthma, epilepsy, etc.
- Discuss with participants that there is one primary disability on an IEP. Although the student may have more than one, the team must be decide on a primary disability code.

Special Education is...

A **service** not a place, which is designed based upon the unique needs of the student



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SPEAKER NOTES:

Discuss this slide with participants using the follow points:

- The IEP is individualized, it is all about your child and his or her unique needs.
- It is not a room in the school or the bus that you ride.
- It is a service that allows for your child to have access to the learning opportunities that every other student has to the extent appropriate for your child.
- Special Education is specially designed instruction, at no cost to parents, to meet the unique needs of a child with a disability.

Special Education Provides...

All eligible children with disabilities a Free and Appropriate Public Education (FAPE) that is designed to meet their unique needs and to prepare them for post-secondary outcomes and independent living.



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SPEAKER NOTES:

- Reinforce that FAPE is the core of IDEA and the IEP.
- FAPE is an entitlement of a child with a disability and the IEP is the means by which this entitlement is carried out.

Consent

Parents **MUST AGREE IN WRITING** in order for special education services to begin. If a parent or guardian does not consent to the initiation of services, then no services will be provided, and the local school system may not take the parent to a due process hearing. This is the one and only time that a signature on an IEP is required to initiate services.



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SPEAKER NOTES:

- Talk to the participants about signing the IEP. Make sure that they understand that signing the IEP is only required for initial services to begin.
- If a parent does not give consent for special education, then protections of FAPE do not apply. Give examples of what that means (giving up related services, giving up accommodations, protections regarding disciplinary action)
- This is the **FIRST** and **LAST** time you have to sign an IEP. The local school system is mandated to provide services once the initial agreement has been made.

HANDOUTS:

- Parents' Place of Maryland **FACT SHEET** on **INFORMED CONSENT**

The Individualized Education Program (IEP)

- It is the written, individualized plan that supports and directs your child's education through a team driven process
- It is a written document that outlines the "who" "what" "when" "why" "where" and "how" of instruction and related services that are provided for students with disabilities
- Ask for a draft copy of the IEP to prepare for your child's IEP team meeting, if one has been prepared

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SPEAKER NOTES:

- Emphasize flexibility options for revising the IEP which are new with the authorization of IDEA 2004
 - Parents and local school systems may agree to change the IEP without a meeting by developing a written document.
- Emphasize that the IEP is written by parents and school staff **together**.
- Refer participants to the suggested handout for more detailed information on the IEP process "Building IEP's with Maryland Families."
- The rest of this workshop will review the statewide IEP.
- As of 7/1/07 all local school systems are using the statewide IEP for consistency throughout the state.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)		Student Information	
MARYLAND STATE DEPARTMENT OF EDUCATION (MSDE) DIVISION OF SPECIAL EDUCATION/EARLY INTERVENTION SERVICES (Effective July 1, 2007)		<input type="radio"/> Draft <input type="radio"/> Approved <input type="radio"/> Amended	
Name: _____ Agency: _____		IEP Team Meeting Date: / /	
STUDENT AND SCHOOL INFORMATION			
First Name: _____ MI: _____ Last Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Grade: _____ Unique Student Identification Number (State): _____ Student Identification Number (local): _____ Date of Birth: [][]-[][]-[][][][] (MM-DD-YYYY) Age: _____ Gender: <input type="radio"/> MALE <input type="radio"/> FEMALE Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> White (not Hispanic) <input type="checkbox"/> Black or African American (not Hispanic)		PARENT/GUARDIAN 1 First Name: _____ MI: _____ Last Name: _____ Home Phone: () - () - _____ Cell: () - () - _____ Email: _____ Parent native language, if not English: _____ Interpreter needed? <input type="radio"/> YES <input type="radio"/> NO	
Student identified as Limited English Proficient: <input type="radio"/> YES <input type="radio"/> NO Student's native language: _____ Residence County: _____ Residence School: _____ Service County: _____ Service School: _____ Which jurisdiction is financially responsible? Is the student currently under the care and custody of a state agency? <input type="radio"/> YES <input type="radio"/> NO If yes, name of state agency: _____ Does the student require a parent surrogate? <input type="radio"/> YES <input type="radio"/> NO Parent Surrogate Name: _____ Surrogate Phone: _____		PARENT/GUARDIAN 2 First Name: _____ MI: _____ Last Name: _____ Home Phone: () - () - _____ Cell: () - () - _____ Email: _____ Parent native language, if not English: _____ Interpreter needed? <input type="radio"/> YES <input type="radio"/> NO Case Manager: _____ IEP Team Meeting Date(s): _____ IEP Annual Review Date: _____ <input type="radio"/> Parent was provided a copy of the Procedural Safeguards Parental Rights document. Projected Annual Review Date: _____ Most Recent Evaluation Date: _____ Projected Evaluation Date: _____ Primary Disability: _____ Areas affected by disability: _____	
EXIT INFORMATION			
Exit date: [][]-[][]-[][][][] (MM-DD-YYYY) Exit category: <input type="radio"/> A - Returned to general education <input type="radio"/> B - Graduated with a Maryland High School Diploma <input type="radio"/> C - Received Maryland High School Certificate of Program Completion <input type="radio"/> D - Reached 21 years of age <input type="radio"/> E - Deceased <input type="radio"/> F - Moved, known to be continuing <input type="radio"/> H - Dropped Out <input type="radio"/> I - Special Case			
IEP TEAM PARTICIPANTS			
IEP Case Manager: _____	Principal/Designee: _____	School Psychologist: _____	Agency Representative: _____
IEP Chair: _____	General Educator: _____	Social Worker: _____	Others in attendance: _____
Parent/Guardian: _____	Special Educator: _____	Speech/Language Pathologist: _____	Others in attendance: _____
Parent/Guardian: _____	Guidance Counselor: _____	Student: _____	Others in attendance: _____

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SPEAKER NOTES:

- Refer participants to the handout of the statewide IEP. Please note that at this point participants will need to be referring to the PowerPoint presentation handout as well as the Statewide IEP handout.
- Pick what you feel are the highlights regarding “Student and School Information”

INDIVIDUALIZED EDUCATION PROGRAM (IEP) II. PRESENT LEVEL OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE <small>MARYLAND STATE DEPARTMENT OF EDUCATION (MSDE) DIVISION OF SPECIAL EDUCATION/EARLY INTERVENTION SERVICES (Revised July 9, 2005)</small>		
Name: _____	Agency: _____	IEP Team Meeting Date: / /
PRESENT LEVEL OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE		
What is the parental input regarding the student's educational program?		

What are the student's strengths, interest areas, significant personal attributes, and personal accomplishments? (Include preferences and interests for post-school outcomes, if appropriate.)		

How does the student's disability affect his/her involvement in the general education curriculum?		

For preschool age children, how does the disability affect participation in appropriate activities?		

<small>Page 5</small>		

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SPEAKER NOTES:

Let participants know this is **Section II. Present Level of Academic Achievement and Functional Performance** on the Statewide IEP Handout.

What is the Present Level of Academic Achievement and Functional Performance?

- This is the part of the IEP that discusses information found in various types of assessments, and/or information from teachers on academic achievements
- Parents should be prepared to share their input
- Important because it is the snapshot of your child's abilities, skills, accomplishments, and areas of need
- Helps determine goals for the student
- The Present Levels are to be reviewed at least annually and this is an opportunity for the team to determine if the student is making appropriate progress

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SPEAKER NOTES:

- Point out that a good question for parents to ask is “How did the team get a Present Level of Performance?”
- This is an appropriate time to stress good record keeping and data collection. Reinforce that this is very important and this is what drives the IEP.
- This is the time during the IEP meeting when discussions are held about the child's performance and not just about test scores. For example, as a parent, it is important to share what you see at home. Does your child like video games? That could help the team understand that the student is a visual learner.

GROUP ACTIVITY: Have parents “share” an example of what they see their child doing at home. As a large group or in small groups, talk about how this observation can relate to school performance and achievement.

INDIVIDUALIZED EDUCATION PROGRAM (IEP) **III. SPECIAL CONSIDERATIONS AND ACCOMMODATIONS**
MARYLAND STATE DEPARTMENT OF EDUCATION (MSDE) DIVISION OF SPECIAL EDUCATION/EARLY INTERVENTION SERVICES (Effective July 1, 2007)

Name: _____ Agency: _____ IEP Team Meeting Date: / /

SUPPLEMENTARY AIDS, SERVICES, PROGRAM MODIFICATIONS AND SUPPORTS

Service Nature	Service Description	Begin Date	End Date	Provider(s)
<input type="checkbox"/>	Anticipated Frequency: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly <input type="checkbox"/> Only once <input type="checkbox"/> Periodically <input type="checkbox"/> Other _____	MM-DD-YYYY	MM-DD-YYYY	<input type="checkbox"/> Orientation & Mobility Specialist <input type="checkbox"/> Speech-Language Pathologist <input type="checkbox"/> Teacher of the Hearing Impaired <input type="checkbox"/> Teacher of the Visually Impaired <input type="checkbox"/> Occupational Therapist <input type="checkbox"/> Sign Language Interpreter <input type="checkbox"/> Physical Education Tech <input type="checkbox"/> Rehabilitation Services Staff <input type="checkbox"/> General Education Tech <input type="checkbox"/> Career & Technology Ed <input type="checkbox"/> Department of Social Services (DSS) <input type="checkbox"/> Mental Hygiene Administrator (MHA) <input type="checkbox"/> Developmental Disabilities Administration (DDA) <input type="checkbox"/> Division of Rehabilitation Services (DRS) <input type="checkbox"/> Other agency _____ <input type="checkbox"/> Special Education Classroom Teacher <input type="checkbox"/> Other Service Provider _____

Clarify the location and manner in which Supplementary Aids, Services, Program Modifications and Supports to or, on behalf of, the student will be provided: _____

Discussion to support decisions: _____

Supplementary Aids, Services, Program Modifications and Supports were considered and none are required at this time.
 Discussion to support decisions(s): _____

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SPEAKER NOTES:

- Let participants know this is **Section III. Special Considerations and Accommodations** on the Statewide IEP Handout.
- This section of the Statewide IEP includes many different components which include:
 - Special Considerations based on the unique needs of the child (i.e. behavioral interventions, communication needs, assistive technology needs, services for students who are blind or visually impaired, services for students who are deaf or hearing impaired, services to students with limited English proficiency)
 - Instructional and Testing Accommodations (will be discussed further)
 - Supplementary Aids and Services (will be discussed further)
 - Extended School Year (ESY) - The need for ESY services must be considered for each student and is determined by the IEP team based on specific factors.
 - Transition – A coordinated set of activities for a student with a disability that is designed within a results oriented process that is to facilitate the student’s movement from secondary school to postsecondary activities to support the student’s postsecondary goal. The IEP in effect when the student with a disability turns 14 year of age and all the subsequent IEPs, must consider the need and identify transition services/activities to support the student’s postsecondary goal.

Instructional and Testing Accommodations

- Specific and appropriate to meet the needs of the student as defined in the IEP
- Practices and procedures that provide a student with a disability access during instruction and assessments
- Do not reduce learning expectations
- Include changes to instruction (i.e. materials, tasks) that change **how** a student learns



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SPEAKER NOTES:

- Examples of accommodations include frequent breaks, preferential seating, extra response time, assistive technology devices and services, etc.

From Maryland Statewide IEP Process Guide:

- Accommodations for instruction and accommodations for assessment are integrally intertwined. Accommodations do not reduce learning expectations. They provide access.
- The use of accommodations does not begin and end in school. Students who need accommodations for instruction and assessments will generally need them at home, in the community, and as they get older, in postsecondary education and work.
- Accommodations enable students to participate more fully in instruction and assessments and to better demonstrate their knowledge and skills.
- Accommodations must be based upon individual student needs and must be justified and documented in the student's IEP.

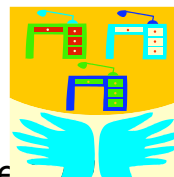
RESOURCE:

Maryland Accommodations Manual

http://marylandpublicschools.org/MSDE/divisions/earlyinterv/Special_Ed_Info

Supplementary Aids and Services

- This section of the IEP outlines what supports the student needs in all areas
- Details “how” instruction will be delivered with the use of accommodations and modifications:
 - Where will the instruction happen?
 - How will it be presented?
 - What staff supports are needed?
 - What environmental supports are needed?
 - What social/behavioral supports are needed?



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SPEAKER NOTES:

- Supplementary aids and services are defined in COMAR as:

“Aids and services and other supports that are provided in regular education classes or other education-related settings, and extracurricular and nonacademic settings to enable a student with a disability to be educated with students without disabilities to the maximum extent appropriate.”

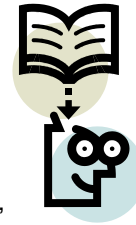
From Maryland Statewide IEP Process Guide:

- Before recommending services for a child outside the general education classroom or other general education setting, the IEP team must first consider supplementary aids, services, program modifications, and supports that can be provided to the student in general education classes or settings.
- Modifications refer to practices that change, lower, or reduce learning expectations. Modifications can increase the gap between the achievement of students with disabilities and expectation change the work and content of the work. Examples include chunked assignments, reduced homework and modified curriculum.
- Note that supplementary aids and services **may** be needed across all settings and classrooms.
- The services for each child should be tailored to address the unique needs that affect the student’s ability to make progress in the general curriculum.

Goals and Objectives

- Annual goals are established based upon the **Individualized** need of the student using multiple sources of data collection and the student's present level of academic achievement and functional performance
- All goals are evaluated and data are collected on progress towards mastery of the goal
- Goals are broken down into objectives
- Progress towards goals is sent to parents at least as frequently as non-disabled peers

Please Note: Annual goals and objectives should align with grade level general education curriculum standards, functional performance requirements, and the Maryland Voluntary State Curriculum (VSC)



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SPEAKER NOTES:

- Discuss using goals to close the achievement gap
- MSA's and HSA's are aligned with the grade level curriculum.
- Discuss the importance of parent involvement here? For example, ensuring that education is on grade level content; reviewing data that talks about present levels of achievement in the classroom (tests, quizzes, homework, progress reports and information from the teachers) in order to establish goals.
- Make participants aware that the Statewide IEP may seem longer due to each goal having its own page.

Additional information on Goals and Objective from Maryland Statewide IEP Process Guide:

- The IEP includes measurable annual goals and short-term objectives or benchmarks that describe each student's expected learning outcomes.
- Annual goals are used to estimate what outcomes you can expect a student to achieve in an academic year based on the student's present level of academic achievement and functional performance (considered in Section II of the IEP).
- Short-term objective and benchmarks describe meaningful intermediate outcomes between the student's current performance level and the annual goal.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

V. SERVICES

MARYLAND STATE DEPARTMENT OF EDUCATION (MSDE) DIVISION OF SPECIAL EDUCATION/EARLY INTERVENTION SERVICES (Effective July 1, 2007)

Name: _____ Agency: _____ IEP Team Meeting Date: / /

SERVICES

SPECIAL EDUCATION SERVICES

Service Nature	Location	Service Description	Begin Date	End Date	Provider(s) (P = Primary, O = Other)	Summary of Service	
<input type="checkbox"/> Classroom Instruction (Identifying the number of sessions for Classroom Instruction is optional) <input type="checkbox"/> Physical Education <input type="checkbox"/> Speech/Language Therapy <input type="checkbox"/> Travel Training	<input type="checkbox"/> In General Education <input type="checkbox"/> Outside General Education	Number of Sessions <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="checkbox"/> Other _____ Length of Time (Select the length of time, in 15 minute increments, that the service is provided during each session) <input type="radio"/> 15 Min. <input type="radio"/> 30 Min. <input type="radio"/> 45 Min. <input type="radio"/> 1 Hr. <input type="radio"/> 1 Hr. 15 Min. <input type="radio"/> 1 Hr. 30 Min. <input type="radio"/> 2 Hrs. <input type="radio"/> 3 Hrs. <input type="checkbox"/> Other _____ Frequency <input type="radio"/> Weekly <input type="radio"/> Monthly <input type="radio"/> Yearly <input type="radio"/> Only once <input type="checkbox"/> Recheck Periodically	MM-DD YYYY	MM-DD YYYY	<input type="checkbox"/> Orientation & Mobility Specialist <input type="checkbox"/> Speech/Language Pathologist <input type="checkbox"/> Teacher of the Hearing Impaired <input type="checkbox"/> Teacher of the Visually Impaired <input type="checkbox"/> Occupational Therapist <input type="checkbox"/> Full Response Worker <input type="checkbox"/> Physical Education Teacher <input type="checkbox"/> Rehabilitation Services Staff <input type="checkbox"/> General Education Teacher <input type="checkbox"/> Career & Technology Teacher <input type="checkbox"/> Department of Social Services (DSS) <input type="checkbox"/> Mental Hygiene Administration (MHA) <input type="checkbox"/> Developmental Disabilities Administration (DDA) <input type="checkbox"/> Division of Rehabilitation Services (DORS) <input type="checkbox"/> Other Agency _____ <input type="checkbox"/> Special Education Classroom Teacher <input type="checkbox"/> Other Service Provider	<input type="checkbox"/> Audiologist <input type="checkbox"/> Psychologist <input type="checkbox"/> IEP Team <input type="checkbox"/> Interpreter <input type="checkbox"/> Instructional Assistant <input type="checkbox"/> Physical Therapist <input type="checkbox"/> Home-Based Teacher <input type="checkbox"/> Guidance Counselor <input type="checkbox"/> School Social Worker <input type="checkbox"/> Recreational Therapist	Total service time: _____ weekly _____ monthly _____ yearly _____ hrs. _____ min. _____
<input type="checkbox"/> Classroom Instruction (Identifying the number of sessions for Classroom Instruction is optional) <input type="checkbox"/> Physical Education <input type="checkbox"/> Speech/Language Therapy <input type="checkbox"/> Travel Training	<input type="checkbox"/> In General Education <input type="checkbox"/> Outside General Education	Number of Sessions <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="checkbox"/> Other _____ Length of Time (Select the length of time, in 15 minute increments, that the service is provided during each session) <input type="radio"/> 15 Min. <input type="radio"/> 30 Min. <input type="radio"/> 45 Min. <input type="radio"/> 1 Hr. <input type="radio"/> 1 Hr. 15 Min. <input type="radio"/> 1 Hr. 30 Min. <input type="radio"/> 2 Hrs. <input type="radio"/> 3 Hrs. <input type="checkbox"/> Other _____ Frequency <input type="radio"/> Weekly <input type="radio"/> Monthly <input type="radio"/> Yearly <input type="radio"/> Only once <input type="checkbox"/> Recheck Periodically	MM-DD YYYY	MM-DD YYYY	<input type="checkbox"/> Orientation & Mobility Specialist <input type="checkbox"/> Speech/Language Pathologist <input type="checkbox"/> Teacher of the Hearing Impaired <input type="checkbox"/> Teacher of the Visually Impaired <input type="checkbox"/> Occupational Therapist <input type="checkbox"/> Full Response Worker <input type="checkbox"/> Physical Education Teacher <input type="checkbox"/> Rehabilitation Services Staff <input type="checkbox"/> General Education Teacher <input type="checkbox"/> Career & Technology Teacher <input type="checkbox"/> Department of Social Services (DSS) <input type="checkbox"/> Mental Hygiene Administration (MHA) <input type="checkbox"/> Developmental Disabilities Administration (DDA) <input type="checkbox"/> Division of Rehabilitation Services (DORS) <input type="checkbox"/> Other Agency _____ <input type="checkbox"/> Special Education Classroom Teacher <input type="checkbox"/> Other Service Provider	<input type="checkbox"/> Audiologist <input type="checkbox"/> Psychologist <input type="checkbox"/> IEP Team <input type="checkbox"/> Interpreter <input type="checkbox"/> Instructional Assistant <input type="checkbox"/> Physical Therapist <input type="checkbox"/> Home-Based Teacher <input type="checkbox"/> Guidance Counselor <input type="checkbox"/> School Social Worker <input type="checkbox"/> Recreational Therapist	Total service time: _____ weekly _____ monthly _____ yearly _____ hrs. _____ min. _____

Discussion of service(s) delivery: _____

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SPEAKER NOTES:

- Let participants know this is **Section V. Services** on the Statewide IEP Handout.
- Services include special education instruction, related services, and career and technology education services.

Special Education Services

- Outlines the nature of the service (i.e. classroom instruction, physical education, speech/language or travel training)
- Description of the service (i.e. number of sessions, length of time and frequency)
- Provider(s) of the service



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SPEAKER NOTES:

- Services can be provided in the general education setting, or other individualized setting.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

V. SERVICES

MARYLAND STATE DEPARTMENT OF EDUCATION (MSDE) DIVISION OF SPECIAL EDUCATION/EARLY INTERVENTION SERVICES (Effective July 1, 2007)

Name: _____ Agency: _____ IEP Team Meeting Date: / /

SERVICES

RELATED SERVICES

Service Nature	Location	Service Description	Begin Date	End Date	Provider(s) ☑ = Primary, ○ = Other	Summary of Service	
<input type="radio"/> Audiological Services <input type="radio"/> Psychological Services <input type="radio"/> Occupational Therapy <input type="radio"/> Physical Therapy <input type="radio"/> Recreation <input type="radio"/> Early Identification/Balanced Assessment <input type="radio"/> Counseling Services <input type="radio"/> School Health Services <input type="radio"/> Social Work Services <input type="radio"/> Parent Counseling & Training <input type="radio"/> Rehabilitation Counseling <input type="radio"/> Orientation & Mobility Training Services <input type="radio"/> Assistive Technology Services <input type="radio"/> Medical Services <input type="radio"/> Diagnostic & Evaluation <input type="radio"/> Other Therapies <input type="radio"/> Interpreting Services <input type="radio"/> Speech/Language Therapy	<input type="radio"/> In General Education <input type="radio"/> Outside General Education	Number of Sessions: <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> Other _____ Length of Time (Select the length of time, in 15 minute increments, that the service is provided during each session): <input type="radio"/> 15 min. <input type="radio"/> 30 min. <input type="radio"/> 45 min. <input type="radio"/> 1 Hr. <input type="radio"/> 1 Hr. 15 Min. <input type="radio"/> 1 Hr. 30 Min. <input type="radio"/> 2 Hrs. <input type="radio"/> 3 Hrs. <input type="radio"/> Other _____ Frequency: <input type="radio"/> Weekly <input type="radio"/> Monthly <input type="radio"/> Yearly <input type="radio"/> Only once <input type="radio"/> Periodically <input type="radio"/> Recheck _____	MM-YY YYYY	MM-YY YYYY	<input type="checkbox"/> Orientation & Mobility Specialist <input type="checkbox"/> Speech/Language Pathologist <input type="checkbox"/> Teacher of the Hearing Impaired <input type="checkbox"/> Teacher of the Visually Impaired <input type="checkbox"/> Occupational Therapist <input type="checkbox"/> Pupil Personnel Worker <input type="checkbox"/> Physical Education Teacher <input type="checkbox"/> Rehabilitation Services Staff <input type="checkbox"/> General Education Teacher <input type="checkbox"/> Career & Technology Teacher <input type="checkbox"/> Department of Social Services (DSS) <input type="checkbox"/> Health/Hygiene Administration (HHA) <input type="checkbox"/> Developmental Disabilities Administration (DDA) <input type="checkbox"/> Division of Rehabilitation Services (DORS) <input type="checkbox"/> Other Agency _____ <input type="checkbox"/> Special Education Classroom Teacher <input type="checkbox"/> Other Service Provider _____	<input type="checkbox"/> Audiologist <input type="checkbox"/> Psychologist <input type="checkbox"/> EP Team <input type="checkbox"/> Interpreter <input type="checkbox"/> Instructional Assistant <input type="checkbox"/> Physical Therapist <input type="checkbox"/> Home-Based Teacher <input type="checkbox"/> Guidance Counselor <input type="checkbox"/> School Social Worker <input type="checkbox"/> Recreational Therapist	Total service time: _____ <input type="radio"/> weekly <input type="radio"/> monthly <input type="radio"/> yearly _____ min.
<input type="radio"/> Audiological Services <input type="radio"/> Psychological Services <input type="radio"/> Occupational Therapy <input type="radio"/> Physical Therapy <input type="radio"/> Recreation <input type="radio"/> Early Identification/Balanced Assessment <input type="radio"/> Counseling Services <input type="radio"/> School Health Services <input type="radio"/> Social Work Services <input type="radio"/> Parent Counseling & Training <input type="radio"/> Rehabilitation Counseling <input type="radio"/> Orientation & Mobility Training Services <input type="radio"/> Assistive Technology Services <input type="radio"/> Medical Services <input type="radio"/> Diagnostic & Evaluation <input type="radio"/> Other Therapies <input type="radio"/> Interpreting Services <input type="radio"/> Speech/Language Therapy	<input type="radio"/> In General Education <input type="radio"/> Outside General Education	Number of Sessions: <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> Other _____ Length of Time (Select the length of time, in 15 minute increments, that the service is provided during each session): <input type="radio"/> 15 min. <input type="radio"/> 30 min. <input type="radio"/> 45 min. <input type="radio"/> 1 Hr. <input type="radio"/> 1 Hr. 15 Min. <input type="radio"/> 1 Hr. 30 Min. <input type="radio"/> 2 Hrs. <input type="radio"/> 3 Hrs. <input type="radio"/> Other _____ Frequency: <input type="radio"/> Weekly <input type="radio"/> Monthly <input type="radio"/> Yearly <input type="radio"/> Only once <input type="radio"/> Periodically <input type="radio"/> Recheck _____	MM-YY YYYY	MM-YY YYYY	<input type="checkbox"/> Orientation & Mobility Specialist <input type="checkbox"/> Speech/Language Pathologist <input type="checkbox"/> Teacher of the Hearing Impaired <input type="checkbox"/> Teacher of the Visually Impaired <input type="checkbox"/> Occupational Therapist <input type="checkbox"/> Pupil Personnel Worker <input type="checkbox"/> Physical Education Teacher <input type="checkbox"/> Rehabilitation Services Staff <input type="checkbox"/> General Education Teacher <input type="checkbox"/> Career & Technology Teacher <input type="checkbox"/> Department of Social Services (DSS) <input type="checkbox"/> Health/Hygiene Administration (HHA) <input type="checkbox"/> Developmental Disabilities Administration (DDA) <input type="checkbox"/> Division of Rehabilitation Services (DORS) <input type="checkbox"/> Other Agency _____ <input type="checkbox"/> Special Education Classroom Teacher <input type="checkbox"/> Other Service Provider _____	<input type="checkbox"/> Audiologist <input type="checkbox"/> Psychologist <input type="checkbox"/> EP Team <input type="checkbox"/> Interpreter <input type="checkbox"/> Instructional Assistant <input type="checkbox"/> Physical Therapist <input type="checkbox"/> Home-Based Teacher <input type="checkbox"/> Guidance Counselor <input type="checkbox"/> School Social Worker <input type="checkbox"/> Recreational Therapist	Total service time: _____ <input type="radio"/> weekly <input type="radio"/> monthly <input type="radio"/> yearly _____ min.

Discussion of service(s) delivery: _____

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SPEAKER NOTES:

Let participants know this is the related services page of the Statewide IEP.

Related Services

- Developmental, corrective and other supportive services that are required to assist a child with a disability in order to benefit from Special Education
- Related services are identified by the IEP team
- Related services cover many disciplines



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SPEAKER NOTES:

- Depending on the participants you can just mention the various types of related services or go into more detail regarding each service
- The IEP will outline where the services occur, the number of sessions, length of time, frequency and who will provide the service

Related Services include:

- **Audiological Services:** identification of students with hearing loss (range, nature, degree of loss). Examples of services include listening training, implementation and evaluation of amplification
- **Psychological Services:** administering and interpreting psychological and educational tests, psychological counseling for students and parents, etc.
- **Occupational Therapy:** services provided by a qualified OT to improve, develop, or restore function and ability to perform tasks for independent functioning
- **Physical Therapy:** services provided by a qualified PT (i.e. exercises to improve large muscle development)
- **Recreation:** assessment of leisure function, therapeutic recreation services, leisure education
- **Early Identification and Assessment:** implementation of a formal plan for identifying the education needs and the disability of a student under the age of five
- **Counseling Services:** support groups, counseling provided by qualified personnel
- **Medical Services:** for diagnostic or evaluation purposes provided by a licensed physician
- **School Health Services:** services provided by a qualified school nurse or other qualified person
- **Social Work Services:** preparing a social or developmental history, group/individual counseling
- **Parent Counseling and Training:** assisting parents in understanding the special needs of their student, helping parents acquire the necessary skills that will allow them to support the implementation of their student's IEP
- **Rehabilitative Counseling:** evaluation for and provision of counseling for adjustment/evaluation for potential jobs
- **Orientation and Mobility:** using a cane/walker to travel safely within their environments in school, home and community
- **Assistive Technology:** any service that directly assists a student with a disability in the selection, acquisition, or use of an assistive technology device (i.e. computers, language systems)
- **Speech/Language Therapy:** instruction in speech and language skills provided by a speech/language therapist as a related service in order for the student of benefit from special education
- **Interpreting Services:** services used with respect to students who are deaf or hard of hearing

INDIVIDUALIZED EDUCATION PROGRAM (IEP)	VI. PLACEMENT DATA
MARYLAND STATE DEPARTMENT OF EDUCATION (MSDE) DIVISION OF SPECIAL EDUCATION/EARLY INTERVENTION SERVICES (Effective July 1, 2007)	
Name: _____	Agency: _____
IEP Team Meeting Date: / /	
LEAST RESTRICTIVE ENVIRONMENT (LRE) DECISION MAKING & PLACEMENT SUMMARY	
A student with a disability is not removed from general education in an age-appropriate instructional setting solely because of needed modifications to the general curriculum.	
What placement option(s) did the IEP team consider? _____	
If removed from the general education environment, explain reasons why services cannot be provided in the general education environment with the use of supplementary aids and services: _____	
Document basis for decision(s): _____	
$\left\{ \begin{array}{l} \text{Total time in} \\ \text{school week: } ___\text{hrs. } ___\text{minutes/week} \end{array} \right\} - \left\{ \begin{array}{l} \text{Total time outside} \\ \text{of General Education: } ___\text{hrs. } ___\text{minutes/week} \end{array} \right\} = \left\{ \begin{array}{l} \text{Total time in} \\ \text{General Education: } ___\text{hrs. } ___\text{minutes/week} \end{array} \right\}$	
<input type="checkbox"/> Special education placement (ages 3-5): Average _____ hr./day <input type="checkbox"/> IN REGULAR EARLY CHILDHOOD SETTING (let. less. 401) <input type="checkbox"/> IN REGULAR EARLY CHILDHOOD SETTING (401 - 796) <input type="checkbox"/> IN REGULAR EARLY CHILDHOOD SETTING (less than 401) <input type="checkbox"/> SEPARATE CLASS	
<input type="checkbox"/> PUBLIC SEPARATE DAY SCHOOL <input type="checkbox"/> PRIVATE SEPARATE DAY SCHOOL <input type="checkbox"/> PUBLIC RESIDENTIAL FACILITY <input type="checkbox"/> PRIVATE RESIDENTIAL FACILITY <input type="checkbox"/> HOME <input type="checkbox"/> SERVICE PROVIDER LOCATION	
<input type="checkbox"/> Special education placement (ages 6-21): Average _____ hr./day <input type="checkbox"/> INSIDE GENERAL EDUCATION (801 or more) <input type="checkbox"/> INSIDE GENERAL EDUCATION (401 - 796) <input type="checkbox"/> INSIDE GENERAL EDUCATION (less than 401)	
<input type="checkbox"/> PUBLIC SEPARATE DAY SCHOOL <input type="checkbox"/> PRIVATE SEPARATE DAY SCHOOL <input type="checkbox"/> PUBLIC RESIDENTIAL FACILITY <input type="checkbox"/> PRIVATE RESIDENTIAL FACILITY <input type="checkbox"/> CORRECTIONAL FACILITIES <input type="checkbox"/> HOME/BOARD-INGESTRAL <input type="checkbox"/> PARENTALLY PLACED IN PRIVATE SCHOOL	
In selecting the LRE, are there any potential harmful effects on the student or quality of services he or she needs? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, document basis for decision(s): _____	
Are the services in the student's home school (the school the student would attend if not disabled)? <input type="checkbox"/> YES <input type="checkbox"/> NO If no, document basis for decision(s): _____	
If no, is placement as close as possible to the student's home? <input type="checkbox"/> YES <input type="checkbox"/> NO If no, document basis for decision(s): _____	
Is special transportation needed? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, list all specialized equipment, if needed: _____	
Are personnel needed to assist the student during transportation? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, explain: _____	
Document basis for decision(s) (including consideration of the amount of time and distance involved in travel): _____	
Provide an explanation to the extent, if any, the student will not participate with non-disabled peers in academic, non-academic, and extracurricular activities? _____	
SSIS Residence County _____	SSIS Residence School _____
SSIS Service County _____	SSIS Service School _____
CHILD COUNT ELIGIBILITY CODES	
<input type="checkbox"/> (1) Eligible student with a disability served in a public school or placed in a nonpublic school by the public agency to receive FAPE. <input type="checkbox"/> (2) Eligible parentally placed private school student with a disability receiving special education and/or related service through a service plan from the public agency. <input type="checkbox"/> (3) Eligible parentally placed private school student with a disability NOT receiving service from the public agency.	
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SPEAKER NOTES:

- Let participants know this is **Section VI. Placement Data** on the Statewide IEP Handout.

Learning in the Least Restrictive Environment (LRE)

- It means that children with disabilities are educated with their typically developing peers to the maximum extent appropriate
- The child's placement is
 - determined at least annually
 - based on the IEP
 - as close as possible to the child's home
- The child is educated ***in the school that he or she would attend if non-disabled unless the IEP requires some other arrangement***
- Placement decisions are based upon the unique needs of the child and made by the IEP team



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SPEAKER NOTES:

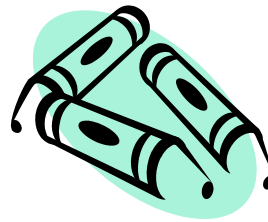
- Explain to participants that LRE is a basic concept regarding special education services along with FAPE.
- LRE will be discussed each time the team is reviewing placement of the student
- Note that the research shows that inclusive settings increase educational outcomes (i.e. academic skills, social skills, communication skills, behavioral skills)
- Explain to participants this is also the section of the IEP where transportation needs are discussed and documented

Additional information on Least Restrictive Environment from Maryland Statewide IEP Process Guide:

- When making a placement decision, the IEP team must consider the least restrictive environment (LRE).
- The placement decision determines where the student's special education instruction will occur. This decision is made by the IEP team and is based on the student's IEP.
- The student must be educated in the school that he or she would attend if not disabled unless the IEP indicates that another school is appropriate.
- The IEP team must consider placement closest to the student's home, if the student is not in the school the student would attend if not disabled.
- Students with disabilities must not be placed in special classes or separate schools unless education in the general education classes with supplementary aids, services, program modifications, and supports cannot be achieved satisfactorily.
- The LRE mandate of the IDEA requires students with disabilities to receive their education in general education settings to the maximum extent appropriate. If such a setting is not appropriate, the student is to receive his or her education in a setting with the least amount of segregation from the students' nondisabled peers, as possible.

Students with special needs participate in many different kinds of settings

- Regular education classroom with modifications and accommodations
- Regular education classroom with pullout to the special education classroom
- Special education classroom
- Public special education day school
- Non-public schools
- Residential schools
- Home and hospital
- Preschool settings



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SPEAKER NOTES:

- Briefly review the different kinds of settings
- Discuss preschool settings further
 - Since regular public preschool programs are not consistently available through local education agencies across the state, nor are 3 and 4 year olds generally included in mandatory school age range, it is necessary to look at other settings where preschool aged children are typically found during the day.
 - These settings include family and center based child care, home, private early childhood settings, regular and special education early childhood settings, and Head Start, as well as service provider locations such as clinician offices, hospital day programs and libraries.
 - The LRE for preschool children is dependent on the amount of time a child spends in settings with typically developing peers.

Resources and Partners

- Family Support Services – Family Support Network, Preschool Partners, Partners for Success Centers 1-800-535-0182

www.marylandpublicschools.org

www.mdecgateway.org

- Parents Place of Maryland
info@ppmd.org 410-768-9100



- Local and Community Resources

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SPEAKER NOTES:

•Here are some statewide resources available to parents. We also have local resources available in our school system (provide information and resources).

•*Consider doing a handout with the information below along with your local contact information and local resources.*

Additional Resources:

Office of Special Education/Building the Legacy IDEA 2004

www.osepideasatwork.org and

www.nichcy.org/training/contents.asp

COMAR – www.dsd.state.md.us