THE EVALUATION PROCESS

- 1. REFERRAL
- 2. EVALUATION
- 3. ELIGIBILITY
- 4. INDIVIDUALIZED EDUCATION PLAN & PLACEMENT
- 5. ANNUAL REVIEW & RE-EVALUATION

The Identification and Placement Process

Referral

A student is generally referred for evaluation by school personnel through the I&RS team or by the child's parent/guardian. Parent referrals must be made in writing with an original signature and should explain the reasons for a suspicion that the child may exhibit an educational disability; an e-mail correspondence is not sufficient to initiate a CST referral. CST referrals should address the specific presenting concerns and the child's current strengths and needs. The referral is presented to the School Psychologist/Case Manager. The assigned case manager has responsibility for managing the referral process. Within 20 days of receipt of a referral an initial planning meeting of the CST will be convened. If an evaluation is agreed upon, once it is completed, parents, teachers, and specialists will reconvene another meeting with 90 days to discuss assessment results and, if necessary, subsequently develop an IEP.

Evaluation

Informed, signed, parental consent must be received in order for the school to proceed with the evaluation. It is important for the parent to understand the components of the evaluation and how the results of the evaluation will be used to determine eligibility for special education services.

An initial evaluation shall consist of a multi-disciplinary assessment in all areas of suspected disability. Such evaluation shall include at least two assessments and shall be conducted by at least two members of the Child Study Team in those areas in which they have appropriate training or are qualified through their professional licensure or educational certification and other specialists in the area of disability as required or as determined necessary. The specific kind of evaluations a child needs is decided on an individual basis and will include professionals trained to assess specific areas. Persons from varying disciplines including a school psychologist, speech-language therapist, and/or occupational therapist may conduct evaluations.

The common elements of a comprehensive assessment generally include the following:

- A psychological evaluation, which includes a standardized aptitude test that measures cognitive functioning, a clinical interview, observation, and as needed social-emotional and adaptive behavior rating scales;
- A social history, which includes developmental, medical, and educational histories, and parent, teacher, and student interviews;
- An educational evaluation, which includes achievement testing, learning style inventory, and a classroom observation:
- A medical evaluation/health appraisal, which includes a physical examination and visual and auditory acuity testing.

At this step of the process, parents should receive Parental Rights in Special Education (PRISE). After parent consent for initial evaluation of a preschool age or school age student has been received, the

evaluation, determination of eligibility for services under this chapter, and, if eligible, development and implementation of the IEP for the student shall be completed within 90 calendar days.

Parents can provide the school with information about the child that that would be helpful in deciding if your child has a disability that requires special education and related services. In the event that a parent does not give permission for the school to evaluate the child and the school personnel believe that the child is in need of special education, the school system may, but is not required to, pursue the initial evaluation of the child by utilizing due process procedures.

Eligibility

After the required evaluations are completed and summary reports are written and shared with parents, the Individualized Education Program team (IEP Team) conference is held to determine if a child has a disability and needs special education and/or related services. The IEP Team includes the child's parents and professionals who are knowledgeable about the child's learning and behavior in the school environment. The team should discuss every area of physical, behavioral and academic functioning that affects the child's educational performance. The team must decide if the student (a) meets the eligibility criteria for a disability area as outlined in the New Jersey Special Education Administrative Code, Chapter 14, Title 6A; (b) if the disability adversely affects educational performance; and (c) is in need of specially-designed instruction and related services. All three criteria must be met in order for the student to be found eligible for special education.

According to IDEA 2004, students may not be deemed eligible for special education services if they do not meet the eligibility criteria of the law or if their eligibility is based on a lack of instruction in reading and math. A student may also be deemed not to be eligible if the disability does not adversely affect the child's educational performance.

The Individualized Education Plan (IEP)

Upon completion of the evaluation, an eligibility conference will be held to discuss whether the student meets the code criteria making them eligible for special education and/or related services. A copy of the collaborative Child Study Team finding report will be given to the parents. Subsequently, but usually immediately following this conference, and Individualized Education Plan (IEP) conference will be held. At this meeting, the student's educational strengths and needs will be considered. Goals and objectives will be developed to address identified needs. The team will then determine the appropriate program for each individual student with consideration of the least restrictive environment as a priority. The evaluations, determination of eligibility for services, and (if eligible), the development and implementation of the IEP shall be completed within 90 calendar days of the district's receipt of parental permission to evaluate.

The implementation of a child's individual education program should occur 15 days after the IEP Team's completion of the plan, unless parents and school personnel mutually agree to an earlier implementation date. Times may vary, for example, if a child is assigned to another school for services and transportation must be arranged; if supplemental aids must be acquired and/or staff must receive specialized training in order to fully implement the IEP. The IEP document should identify the student's primary educational placement, the projected date for the beginning of the services and modifications described in the plan, and the frequency, location and duration for each service.

ID Meetings

An identification meeting shall be scheduled at a mutually agreed upon time and place. If a mutually agreeable time and place cannot be determined, the parent(s) shall be provided the opportunity to participate in the meeting through alternative means, such as video conferencing and conference calls.

Resolving Disagreements

Most disagreements can be resolved by communication with your child's teacher, case manager, the school principal, or other school district personnel. There are also procedures established under state and federal law to address your concerns, such as complaint resolution, medication or a due process hearing.

Accommodations and Modifications in the Classroom and for Testing

The IEP team determines whether accommodations, modifications of curriculum or testing or alternative testing are needed. When the decision is made it must be documented in the student's IEP. The decision regarding the need for special consideration is based on the student's evaluation results, current level of functioning and unique learning characteristics. Essentially, accommodations and modifications are determined based upon the nature and severity of the student's educational disability. The purpose of the accommodations is to level the playing field and to allow the student to exhibit their knowledge without a hindrance from their educational disability. The appropriate application of their accommodations and modification may result in improved school grades; however, accommodations and modifications are not recommended for the sole purpose of maximizing school grades.

The IEP Team will meet once a year, or more if necessary, to review and revise the IEP. The Team will discuss strengths, weaknesses, and progress of the student and plan for the following year accordingly. In addition to annual reviews, the Child Study Team must complete a reevaluation of the student once every three years. The IEP Team determines the scope of the reevaluation by reviewing existing data. Further assessments are not conducted if the IEP Team finds that continued eligibility could be determined from existing data. However, if a reevaluation is warranted, the IEP Team will determine the assessments needed and obtain parental consent. Annual Review and Reevaluation Once testing is complete (within 60 calendar days) the IEP Team meets to discuss findings and plan programming. As with initial evaluations, copies of the re-evaluation reports are provided to parents at least ten days in advance of that IEP Team meeting.

Referral for Speech Services

Among the services available to students at CACS, including students not eligible for special education are those services provided by our speech therapists. Therapists are trained in techniques to identify, support and remediate a student's speech and language needs. There are two ways in which our district identifies which children may be eligible for speech and language services. A child can be referred for evaluation by the child's teacher. A child can also be referred by the child's parent who may send a letter to the Child Study Team. Within 20 days of receipt of a referral a meeting will be convened to discuss with parents, teachers and speech therapist if an evaluation for speech services is warranted. If an evaluation is agreed upon, once it is completed, parents, teachers, and speech therapist will reconvene another meeting with 90 days to discuss assessment results and, if necessary, subsequent therapy.