

1. The first step in the process is to identify the problem or goal. This involves a clear understanding of the current situation and the desired outcome. It is important to define the scope of the project and to establish a timeline for completion.

2. Once the problem is identified, the next step is to gather information. This can be done through research, interviews, and data collection. It is important to gather as much information as possible to ensure that the solution is based on facts and data.

3. After gathering information, the next step is to analyze the data. This involves identifying patterns, trends, and relationships. It is important to look for both strengths and weaknesses in the data to ensure that the solution is based on a comprehensive understanding of the problem.

4. Once the data has been analyzed, the next step is to develop a solution. This involves identifying the most effective and efficient way to address the problem. It is important to consider all possible options and to evaluate the pros and cons of each.

5. After developing a solution, the next step is to implement it. This involves putting the solution into action and monitoring its progress. It is important to communicate the solution to all relevant parties and to ensure that everyone is on the same page.

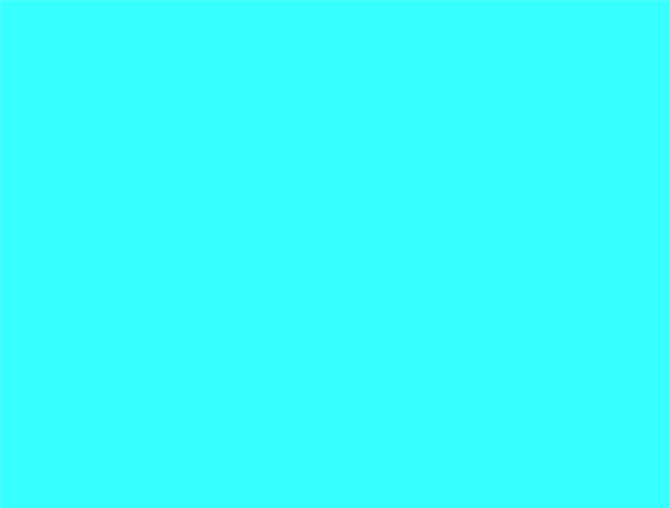
6. Finally, the last step in the process is to evaluate the results. This involves assessing the effectiveness of the solution and identifying any areas for improvement. It is important to gather feedback from all relevant parties and to use this information to refine the solution.

7. The final step in the process is to document the results. This involves creating a report or document that outlines the problem, the solution, and the results. This document can be used as a reference for future projects and to share the results with others.

8. The final step in the process is to review the process. This involves reflecting on the experience and identifying any lessons learned. It is important to take time to think about what worked well and what could be done better next time.

9. The final step in the process is to celebrate the success. This involves acknowledging the hard work and dedication of all those who contributed to the success of the project. It is important to take time to enjoy the fruits of your labor and to share the success with others.

10. The final step in the process is to maintain the results. This involves ensuring that the solution continues to work and that any necessary adjustments are made. It is important to stay on top of the situation and to be prepared to respond to any changes.





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Guidelines for
about IEP Services

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Distributed by the
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Montpelier, Vermont

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PURPOSE

The purpose of this booklet is to offer guidance for making decisions about IEP (Individualized Education Program) services for students with disabilities who are eligible for special education under the federal law called the *Individuals with Disabilities Education Act*, commonly referred to as *IDEA*. Included are special education and related services (e.g., occupational therapy, physical therapy, and psychological services). One of the primary purposes of the IDEA is:

“To ensure that all children with disabilities have available to them a free appropriate public education that emphasizes special education and related services designed to meet their unique needs and prepare them for employment and independent living” (34 CFR 300.1).

These guidelines are based on the *IDEA*, Vermont regulations, and research-based practices. They are designed to help IEP teams make thoughtful, comprehensive decisions supporting the education of students with disabilities, and enable them to consider important factors *before, during, and after*

Table 1
IEP Decision-Making about Special Education and Related Services

<p>Background and Legal Context</p> <ul style="list-style-type: none"> • Definitions and Related Information (e.g., special education, related services, court decisions, parental involvement, the IEP team) <p>Team Practices</p> <ul style="list-style-type: none"> • Learn About Team Members • Acknowledge varying decision-making 	
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This section of the booklet is longer than the “**During**” or “**After**” sections because what comes before decisions are made will have a big impact on whether they will be successful for the student, family, and service providers. When a team operates effectively, its success can often be traced back to good preparation. Similarly, when things do not go well, problems can often be traced back to incomplete or inadequate preparation. If team members are well prepared to make decisions, both the team and the student should reap benefits throughout the school year. The first step is understanding the background and legal context, which may be well known to some team members and less familiar to others.

BACKGROUND AND LEGAL CONTEXT

Definitions and Related Information

It is vital to understand clearly what the IDEA and federal and Vermont regulations say about IEP services decision-making and for all team members to be aware of the same information. The following are some key definitions and related information.

Special Education

IDEA 1997 definition:

“The term ‘special education’ means specially designed instruction, at no cost to parents, to meet the unique needs of a child with a disability” (20 U.S.C. § 1400 [Sec. 602] [25]).

Federal regulations:

Specially designed instruction means “...*adapting... content, methodology, or delivery of instruction*” to meet the unique needs of the child and ensure access to the general curriculum (34 CFR 300.26 (b)(3)).

“... *the term special education means specially designed instruction, at no cost to the parents, to meet the unique needs of a child with a disability, including: Instruction conducted in the classroom, in the home, in hospitals and institutions, and in other settings; and instruction in physical education.*”

The term includes each of the following, if it meets the requirements listed above:

- ◆ Speech-language pathology services, or any other related service, if the service is considered special education rather than a related service under State standards*;
- ◆

Sometimes individualization means providing support for students in the following categories:

1. **CHANGES IN THE CURRICULUM** to account for a student's present level of functioning or special learning needs;
2. **ADAPTATIONS TO THE DELIVERY OF INSTRUCTION** (e.g., sensory,

and mobility services, and medical services, except that such medical services shall be for diagnostic and evaluation purposes only) as may be required to assist a child with a disability to benefit from special education, and includes the early identification and assessment of disabling conditions in children” (20 U.S.C. § 1400 [Sec. 602] [22]).

Each related service is more fully described in the federal regulations (34 CFR 300.24), which also indicate that the listing is not exhaustive. The IDEA does not provide for students to receive related services alone, without special education. In cases where students receive special education and related services, the IEP should document the student’s educational program and services in a coordinated manner.

One of the most important clarifications that teams should understand is that students with disabilities do not attend school to receive related services; they receive services so they can attend and participate in school. In other words,

THE *TATRO* DECISION

Irving Independent School District v. Tatro (1984) concerned an 8-year old, Amber Tatro, who had spina bifida, orthopedic disabilities, and speech impairments. To avoid kidney damage, Amber needed her bladder drained every three-to-four hours using a relatively simple procedure called clean intermittent catheterization, known as CIC.

TEAM PRACTICES

Learn About Team Members

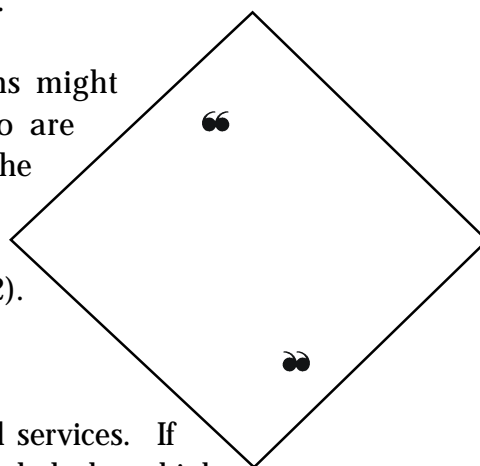
Team members should be aware of each other's specific skills, interests, and experiences, in addition to their professional training. Members without such training (parents or students, for example) are equally valuable team members.

Knowing about each team member's special attributes can assist the team in deciding how to support each other, what skills they need to learn, or to identify areas where they need to seek help from others. All members have something important to contribute. Parents have extensive knowledge of their own child and often acquire a great deal of specialized knowledge over the years. Learning about the skills of team members can be as easy as spending a few minutes at a meeting sharing information with each other.

Acknowledge Varying Decision-Making Values

All decision-making models are based on underlying assumptions and values. Sometimes these are clearly understood and agreed to by team members. When they are unclear or conflicting, it is problematic because they increase the probability that people will be working at cross-purposes (sometimes without realizing why). People often have honest disagreements about the values on which their decisions are based. It's important for members to understand their respective decision-making values. Members should work toward identifying shared values to guide their decision-making. Having shared values can assist members to evaluate proposed decisions and actions as consistent or inconsistent with the team's underlying values.

Here are three common value systems teams might encounter (Giangreco, 1996). The first two are inconsistent with sound educational practices. The third is consistent with sound educational practices and has a legal basis (*Board of Education of the Hendrick Hudson School District v. Rowley*, 1982).



MORE-IS-BETTER

Some team members always want more related services. If one session of a particular therapy is recommended, they think two would be better, and three better still. The more-is-better approach is

the way you are. In order to be OK, you have to be fixed and be more like us (people without disabilities).” Increasingly, self-advocates are asking that their disabilities be viewed as a form of diversity and that others’ efforts be less about “fixing” and more about providing necessary supports (Giangreco, 1995; Kunc & Van der Klift, 1995).

Secondly, the return-on-investment approach tends to discriminate against students with the most severe disabilities. It seeks to justify the differential valuing of students and the services they receive based on the severity of disability characteristics. Anytime schools sanction practices that imply that some students are more worthy of staff time and resources than other students, there is a serious problem. All children are worthy, although they all have differing needs. The IDEA specifically ensures the free appropriate education of *all* students with disabilities, not just those who have a particular prognosis for remediation.

ONLY-

In addition to the above benefits, the only-as-specialized-as-necessary approach has a long history in special education (Reynolds, 1962) and a strong legal foundation (*Board of Education of the Hendrick Hudson School District v. Rowley*, 1982). In summary, it is vital that teams understand the values held by their members and that they work toward a shared value system that is educationally and legally sound.

Develop a Shared Framework

When groups of people are assigned to the same student, they are often referred to as a team. But just because a group of people is assigned to the same student and share common tasks (e.g., assessment, curriculum selection, placement decisions, related services decision-making, instruction, and evaluation), it does not make them a team.

The quality and impact of the group's decisions are based in large part on developing a shared framework. A shared framework consists of a team's common set of beliefs, values, or assumptions about education, children, families, and professionals on which they substantially agree. Identifying these points of agreement inevitably leads to the identification of points of disagreement. It is advisable to share these differing perspectives openly among team members. When these beliefs, values, or assumptions are unknown or hidden, the team process is more likely to be undermined.

Although of real value, it's somewhat unusual for teams to take time from their busy schedules to consider the extent to which members have a shar

Clarify the Process

People come to meetings with potentially differing agendas and have different ideas about how meetings should be run. It is wise to establish ground rules, group expectations, and process steps at the beginning of the first meeting. Having ground rules and group expectations in writing serves as a helpful reminder.

Here are some common ground rules and group expectations:

- ◆ have an agenda for the meeting clearly describing its purpose, items to be discussed, and time frames;
- ◆ make sure all members have an opportunity to contribute to the agenda and know about it prior to the meeting;
- ◆ set an expectation that the meeting will start on time, and that people will come prepared;
- ◆ establish and share roles (e.g., facilitator, recorder, observer to provide feedback, and timekeeper);
- ◆ establish procedures to ensure that all members have opportunities to participate and that no one individual or subgroup dominates the meeting (e.g., round-robin starting with different people each time, and time limits on comments);
- ◆ establish expectations and procedures that help people to feel comfortable expressing divergent opinions (e.g., limit use of jargon, no put-downs; don't criticize the person, critique the idea; restate the opinions of others to make sure they are understood, and build on each other's ideas);
- ◆ have a clear process so everyone knows what to expect; here is an example:
 1. present issue/agenda item
 2. discuss
 3. decide
 4. identify and record what tasks must be completed, by whom, and when.

For more information on this topic see Thousand & Villa (2000).

Seek Consensus

The absence of team processes to help reach consensus about educationally necessary supports is a problem that continues to hinder IEP services decision-making. The problem takes two basic forms. Some groups have no identifiable process, while others have processes designed for use by a single discipline.

In the absence of a commonly accepted process, decisions are made based on intuition, clinical judgment, past practices, or advocacy by parents or professionals. In some cases, people have great intuition or their past practices have worked well, and so, in the absence of a team decision-making process, they have had the good fortune of making appropriate decisions. If a team has experienced effective decision-making with this approach, they might be satisfied, but evidence suggests that most groups are not so lucky (Giangreco, 2000).

While seemingly a better alternative than having no process, having a process based on a specific discipline still has substantial limitations. A process for making IEP services decisions that defines the potential role of a single discipline, without exploring the potential interrelationships among others, will increase the likelihood of service gaps, overlaps, and contradictions. This confusion is unavoidable because various disciplines have overlapping and sometimes conflicting roles and purposes.

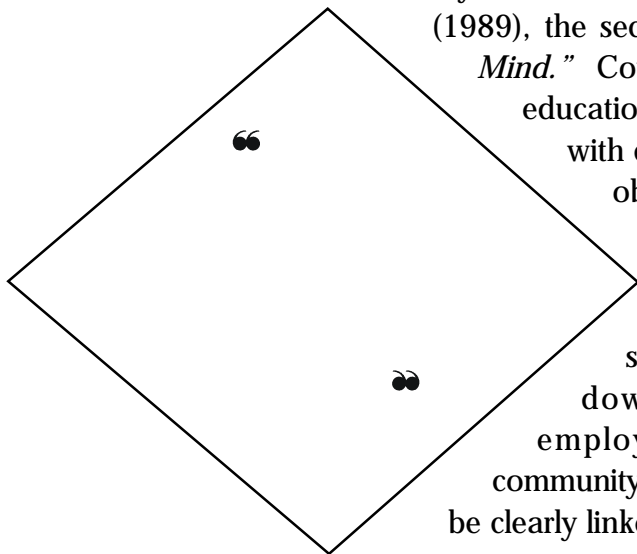
A team process for making decisions by consensus about educationally necessary related services is the *Vermont Interdependent Services Team Approach* (Giangreco, 1996), known as *VISTA*. *VISTA* provides an organized, field-tested method for implementing many of the ideas presented in this booklet and is one of the few tools of its kind designed to explore fully the interrelationships among multiple disciplines (Giangreco, 2000).

If consensus is not reached, it is the responsibility of the LEA (Local Education Agency) to make special education and related services recommendations. If parents disagree, they have access to dispute resolution options including mediation, administrative complaints, and due process hearings. These options can be avoided or minimized by having a sound way to reach consensus. Applying the ideas presented in this booklet will help teams reach consensus.

L17

The educational program components are the foundation on which a student's education will be built. It is vital that they reflect important outcomes. In Steven Covey's book, *The 7 Habits of Highly Effective People*

(1989), the second habit is, "*Begin with the End in Mind.*" Covey's advice is applicable to selecting educational program components for a student with disabilities. Selection of IEP goals and objectives should be linked to meaningful outcomes, now and in the future. IEP teams need to think about what outcomes are appropriate for the student this year, as well as a few years down the road (e.g., transitions to employment, higher education, and community living). IEP goals and objectives should be clearly linked to these outcomes.



One source, *Choosing Outcomes and Accommodations for Children (COACH, 2nd. ed.)* (Giangreco, Cloninger, & Iverson, 1998), describes a process whereby students with disabilities and their families are asked questions about a series of valued life outcomes, including:

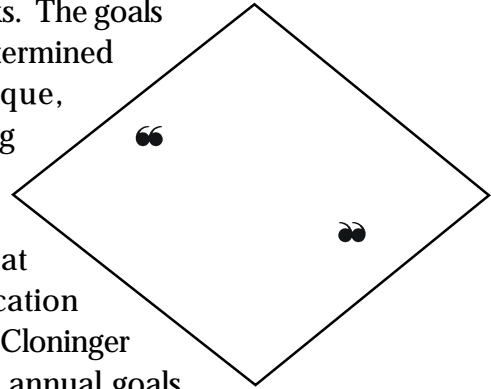
- ◆ being safe and healthy
- ◆ having a home, now and in the future
- ◆ having meaningful relationships
- ◆ having choice and control that match one's age and culture
- ◆ participating in meaningful activities in various places.

Responses to questions about these valued life outcomes help identify meaningful priorities that become IEP goals and objectives. *COACH* also shows that selected IEP goals are linked to the valued life outcomes they are intended to support. Using this approach, "*beginning with the end in mind*" provides opportunities for student and family involvement, helps team members develop a common focus for their work together, and encourages all to remember why they are working on certain IEP goals and objectives.

IEP GOALS AND OBJECTIVES

On the Vermont IEP form: *“How will we know if we are succeeding?”*

Learning outcomes include the student’s IEP annual goals and corresponding short-term objectives or benchmarks. The goals and objectives are meant to reflect individually determined learning priorities based on a student’s unique, disability-related needs and to assist in providing access to the general education curriculum (Bateman & Linden, 1998). They may include individually determined learning outcomes that typically are not included in the general education curriculum, such as functional life skills (Giangreco, Cloninger & Iverson, 1998). The IEP team determines the annual goals and short-term objectives and documents them in the IEP.



GENERAL EDUCATION CURRICULUM

Students with disabilities pursue many other learning outcomes in school that need not be documented as detailed IEP goals and objectives (Bateman & Linden, 1998, p. 12, 45), such as those that are part of the general education curriculum. It’s important for team members to know the level and scope of the general education learning outcomes that are slated for instruction during the school year (Giangreco & Doyle, 2000). Some students with disabilities, given individually determined supports, will pursue most or all of the general education curriculum at their own grade level. Other students may pursue a different or smaller set of general education learning outcomes at grade-level or may be working on general education curriculum at a different grade-level than their classmates.

When team members know what aspects of the general education curriculum a student with disabilities will pursue, they are better able to:

- ◆ clarify the breadth and scope of a student’s overall educational program,
- ◆ determine a classroom teacher’s and special educator’s curricular and instructional responsibilities,
- ◆ identify areas in need of supports and services, and
- ◆ provide parents with a more complete understanding of their child’s educational program.

GENERAL SUPPORTS

General supports refer to what will be provided for a student so that he or she may have access to education, participate in school, and pursue identified learning outcomes. They differ from learning outcomes, which describe an observable change in student performance. On IEP documents, the terms or phrases used to describe general supports vary (e.g., accommodations, modifications, supports, and management needs). General supports consist of supplementary aids and services (34 CFR 300.28) that are generally necessary for a student, regardless of the location of instruction.

Here are six categories of general supports that may be provided for a student (Giangreco, Cloninger & Iverson, 1998).

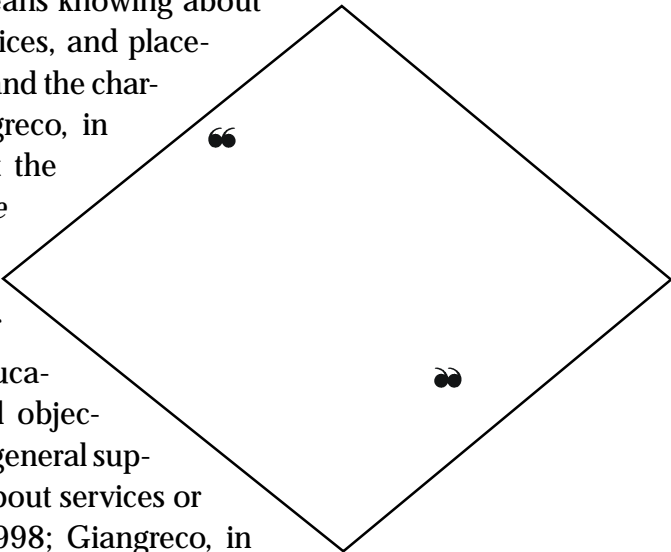
1. Personal Needs (e.g., food, catheterization or medication)
2. Physical Needs (e.g., repositioned at least hourly; leg braces adjusted and checked)
3. Teaching Others About the Student (e.g., teach staff and classmates about the student's augmentative communication system and communicative behaviors; teach staff seizure management procedures, specialized evacuation procedures, and behavioral or health crisis management procedures)
4. Sensory Needs (e.g., FM unit/auditory trainer; tactile materials; or large print materials)
5. Providing Access and Opportunities (e.g., environmental modifications; access to co-curricular activities; access to materials in the student's native language; instructional accommodations to general education activities and materials prepared in advance to facilitate multi-level instruction and curriculum overlapping; or computer access)
6. Other General Supports (e.g., those not clearly addressed in any other category; class notes recorded; extended time to complete tasks; ensure collaborative teamwork among general and special educators; or regular communication with the family)

LEARN ABOUT THE CONTEXT

It's vital to recognize that learning about existing options and the characteristics of their locations is not a decision-point for the IEP team, but rather is a fact-finding activity. Team members should be informed about this contextual information so that they can make informed and appropriate decisions that address student needs.

Learn About Existing Options

Learning about existing options means knowing about existing programs, classrooms, services, and placement options along the continuum, and the characteristics of their locations (Giangreco, in press). The regulations state that the placement decision is “*based on the IEP*” (34 CFR 300.552). The professional literature supports the viewpoint that identification of the components of a student’s educational program (i.e., IEP goals and objectives, other learning outcomes, and general supports) precedes making decisions about services or placement (Bateman & Linden, 1998; Giangreco, in press; Turnbull & Turnbull, 2000).



The IDEA begins with a presumption that the regular class, with supports, is the starting point for the educational placement for all students with disabilities before more restrictive alternatives along the continuum are considered. That’s why it’s vital for team members to have a thorough understanding of contextual information about options available to students with disabilities, including the classrooms students of the same age would attend. Knowing about the classroom will help the team determine what supports are needed by the student. Given the above presumption, the full range of supplementary aids and services that would facilitate the student’s placement in the regular classroom setting must be considered before a child with a disability can be placed outside of the regular educational environment, (Appendix A of the IDEA, Notice of Interpretation, p. 12,472).

Lack of availability of a particular program or service in a school is not an acceptable rationale for denying a student access to that setting if the IEP team has determined that it is the least restrictive environment. For example, if an

Characteristics of classmates

(e.g., class size; the number of other students with disabilities; intensity of other students' needs; or relationships with classmates)

Staff characteristics

(e.g., number of general education staff to serve the classroom; availability of school health services; or training and experience of staff members)

Consider these examples:





DETERMINE SPECIAL EDUCATION AND RELATED SERVICES

After the IEP team has identified the student's present levels of performance

Consider the types of special education supports a student could receive. Here are examples based on three categories first presented on page 5.

1. CHANGES IN THE CURRICULUM to account for a student's present level of functioning or special learning needs. This could include:

- ◆ teaching a smaller number of objectives from the general education curriculum at grade-level
- ◆ teaching general education curriculum outside grade-level
- ◆ teaching functional life skills that typically are not included in the general education curriculum

2. ADAPTATIONS TO THE DELIVERY OF INSTRUCTION (e.g., sensory, physical, behavioral, or environmental) that allow a student to have access to learning opportunities. This could include:

- ◆ equipment or materials to address sensory or orthopedic/F1 1 12 391.327.76 55.44 m4NS40

- ◆ individualized correction or reinforcement strategies
- ◆ computer-assisted learning materials

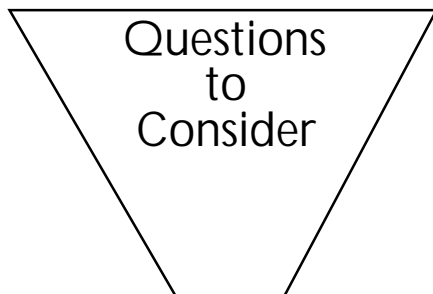
When considering the above three categories of special education supports, IEP teams need to choose those which offer the student opportunities to pursue the general education curriculum and identified IEP goals. Some students with disabilities, given appropriate adaptations to the delivery of instruction and/or different instructional methods, can pursue the general education curriculum.

When an IEP team decides that a student needs different instructional methods, sometimes in combination with adaptations to the delivery of instruction, it requires more intensive planning and implementation. Different instructional methods should be used when the student is not benefitting from typical instructional approaches including other support provided through the Educational Support System. Every effort should be made to provide different instructional methods within the context of typical class activities in ways that respect the student with disabilities.

Sometimes well-intended efforts to provide special instruction to students with disabilities unnecessarily separate them from classmates and typical class routines. In other situations, different instructional methods, particularly those that tend to highlight student differences, are perceived by students with disabilities as stigmatizing.

Students who require changes in curriculum along with adaptations to the delivery of instruction and/or different instructional methods tend to have more intensive needs. Keep in mind that it's inappropriate to suggest that students with particular disability labels always be matched to a particular combination of special education supports. A hallmark of special education is individualization!

The IEP team should seek consensus about the types and extent of services that are necessary for the student to pursue his or her annual goals, but which are "only-as-specialized-as-necessary." Team decisions should be documented in the IEP, to assist staff in implementing the services.



Q

Example that is educationally relevant:

QUESTIONS THAT CAN BE ASKED TO HELP ESTABLISH EDUCATIONAL NECESSITY

If the team answers, “Yes” to the following question, it is an indication that the service under consideration probably **is** educationally necessary:

1. Will the absence of the service interfere with the student’s access to or participation in his or her educational program this year?

If the team answers, “Yes” to any the following questions, the service under consideration probably **is not** educationally necessary:

2. Could the proposed service be addressed appropriately by the special educator or classroom teacher?
3. Could the proposed service be addressed appropriately through core school faculty or staff (e.g., school nurse, guidance counselor, librarian, teachers, administrator, bus drivers, cafeteria staff, or custodians)?
4. Has the student been benefiting from his or her educational program without the service?
5. Could the student continue to benefit from his or her educational program without the service?
6. Could the service be appropriately provided during nonschool hours? (This question is based on the 1984 U.S. Supreme Court *Tatro* decision)
7. Does the proposed service present any undesirable or unnecessary gaps, overlaps, or contradictions with other proposed services?

student's educational program. They are essential for some students with disabilities to receive an appropriate education and to support teachers' efforts to educate them.

For example:

- ◆ Physical and occupational therapists may select or modify equipment that allows students access to learning (e.g., specialized seating, arm/hand supports, or adaptive equipment).
- ◆ Speech-language pathologists may develop augmentative communication systems and corresponding instructional approaches that allow students to communicate more effectively with their teachers and classmates.
- ◆ Vision and hearing specialists may adapt materials or the learning environment, which allows students greater access to the general education curriculum.

These are a few of the many ways that educationally relevant and necessary related services can be vital for some students with disabilities.

At the same time, recognizing the value of skills offered by various service providers, some schools may offer training or consultation to their faculty to extend their knowledge and skills. For example, an inservice might be provided for music teachers by a music therapist focusing on approaches for including and working with students with varying types of disabilities in general education music classes (e.g., assistive technology).

Decide “What” Before “How”

Many teams encounter situations where a member starts a conversation by suggesting exactly what services are needed, how they should be delivered, by whom, and how often. For example, a member might say, “Jimmy needs two half-hour sessions of physical therapy directly from the physical therapist each week.” This suggestion might come from a therapist who has completed an evaluation or maybe a parent who has brought the recommendation from a physician or a clinic.

In either case, it's time to step back and establish the educational relevance, proposed purpose, and necessity before considering whether a related service should be provided and if so, how (e.g., directly, indirectly, or through consultation). When team members prematurely focus on how services will be

provided, they may not fully understand the meaning of related services within the context of the IDEA.

Students can surely benefit from some services that are not educationally necessary, but may be considered necessary or desirable by parents or noneducational service providers. Just because a particular service does not meet the educational relevance and necessity criteria to be considered a related service under the IDEA does not mean that the service is unimportant. Rather, it could mean that it's not the responsibility of the public school.

Parents may chose to have their child receive various services during nonschool hours, even though they are not related services under the IDEA. In such cases, it's not the responsibility of the school to provide or fund those services. For example, if an IEP team determines that therapeutic horseback riding for a student does not meet the criteria of educational relevance and necessity, and thus is not a related service, parents could still choose to involve their child in horseback riding after school or on weekends. This may be a very valuable and meaningful experience for the child.

DECIDE HOW SERVICES ARE PROVIDED

Modes and Frequency of Service

The term “mode” refers to the ways that services are provided. Broadly these include: (a) assessment, (b) direct services, (c) indirect services, and (d) consultation. It is rare for only one to apply. The appropriate combination depends on the needs of the student. The following information is based on *Related Services for Vermont's Students with Disabilities* (Dennis, Edelman, Giangreco, Rubin & Thoms, 1999).

ASSESSMENT

Assessment is the gathering of information for educational planning and includes records review, interviews, observation and administration of formal and informal tools appropriate and valid for the student. Assessment provides information about how the student functions in his/her environment and describes strengths and challenges. Assessment services can be part of student identification and evaluation or program planning in the special education planning process, or program implementation. Assessment can be further described as screening, evaluation for services, or periodic check.

DIRECT SERVICES

Direct services are provided by “qualified personnel” directly to a student. Qualified personnel refer to those who have met state-approved “certification, licensing, registration, or other comparable requirements that apply to the area in which the individuals are providing special education or related services” (34 CFR 300.23).

INDIRECT SERVICES

In contrast to direct service, indirect services are delivered directly to the student by another person (e.g., a paraprofessional) under the direct supervision of a qualified professional.

Vermont Licensing Regulation 5220.4 states:

“... paraprofessionals, student teachers, and volunteers are not required to hold licenses but shall work under the on-site supervision of licensed educators. For the purposes of this rule, “supervision” means on-site managing and responsibility for overseeing the work of the paraprofessional, student teacher, or volunteer.” Teams should clarify who receives supervision, its frequency, and the extent to which it is provided on-site.

CONSULTATION

Consultation is another service delivery mode commonly used to provide IEP services and will differ according to the needs of the student. Consultation refers to the planned communication of information or skills from one person to others. It can include technical assistance and training, monitoring, service coordination, and administrative consultation. Consultation can be direct and administrative consultation can be indirect.

Consultation requires contact between the student and the consultant in order for the latter to communicate information and skills effectively to others. Consultation plans should be in writing and signed by team members and consultants. Plans should identify goals or accommodations documented in the student's IEP and describe the coordinated responsibilities of team members and the consultant in addressing those goals.

MATCH MODE OF SERVICE TO PURPOSE SERVED

Deciding what combination of service modes is appropriate means matching the mode with the purpose to be served. For example, suppose a team agrees that they need a physical therapist to teach staff how to safely position and move a student with physical disabilities. This could be accomplished through a consultation or begin as an indirect service, where the therapist spends some time on-site supervising staff who are positioning the student. It would not match the purpose if the only service mode was direct service.

Once things are going well, the service mode could be changed to a periodic check. The IEP does not require the team to document the modes of service provision, just the type of service (e.g., physical therapy), frequency, duration, and beginning and ending dates of service. But from an educational and teamwork perspective, it's important that all team members understand what modes will be used and work together to ensure that they match the purposes the team has identified.

FREQUENCY OF SERVICES

Once it's clear to the team what services are needed, what purposes are to be served, and modes of service have been identified and matched with the purposes, it's time to decide how much service is needed. There is no formula to make such decisions; rather it's based on the student's needs, past performance, and priorities. If the team has followed the ideas presented in this booklet, they should be in a good position to make a reasonable judgment. The only way to tell whether the judgment was a good one comes with implementation and evaluation (see III, AFTER).

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At this point in the process it's important to consider all of the relevant and necessary services that have been identified. In determining the frequency of the services, the amount chosen for one discipline's involvement may affect the amount for another.

Therefore, consider the interrelationships among the disciplines as your team attempts to put together this puzzle so the pieces fit together as a whole. Frequency and duration of service will have a direct bearing on administrative issues such as scheduling and caseload management.

EXTENDED SCHOOL YEAR SERVICES

A special consideration regarding frequency of services pertains to whether a student with a disability requires extended school year (ESY) services.

Federal Regulations (34 CFR 300.309) state:

The term extended school year services means special education and related services that:

- 1) are provided to a child with a disability:
 - ◆ beyond the normal school year of the public agency;
 - ◆ in accordance with the child's IEP;
 - ◆ at no cost to the parents of the child; and
- 2) meet the standards of the SEA (State Education Agency).

Each public agency shall ensure that extended school year services are available as necessary to provide FAPE (free appropriate public education).

The regulations go on to explain that, *"... extended school year services must be provided only if a child's IEP team determines, on an individual basis, ... that the services are necessary for the provision of FAPE to the child."*

Furthermore, *"In implementing the requirements of this section, a public agency may not limit extended school year services to particular categories of disability or unilaterally limit the type, amount, or duration of those services."*

Vermont's Special Education regulations (2363.8 (g) (1)) explain

that extended school year services (ESY) may be provided if a student's IEP team finds that such services are necessary to provide a free appropriate public education to the student, as follows:

Consider Approaches that Build School and Classroom Capacity

In general, the more knowledge and skills school staff have to address diverse needs of all students, the lower the need for specialized services for students with disabilities. Although a more knowledgeable and skillful faculty does not replace the specialized skills of some service providers, it usually fosters a richer learning environment. What in one school is “special education” becomes “regular education” in another where individualization and differentiation of curriculum and instruction are commonplace among the faculty. Related services providers could be more effectively involved during scheduled inservice days to train school staff in ways that build their capacity; this approach is proactive.

When making decisions to support a student with a disability, schools can give consideration to how their actions can be implemented to benefit other students, many of whom do not have disabilities. For example, improving general and special educators’ skills to individualize and differentiate instruction so that all students can pursue learning outcomes that are meaningful and challenging, holds the potential to benefit students with a wide range of characteristics (Kronberg & York-Barr, 1998; Tomlinson, 1995). Educators who take on this challenge seek an effective balance between protecting the rights and needs of individual students with disabilities and meeting the needs of the entire classroom.

If Paraeducator Support is Proposed, Consider its Use and Impact

The IDEA allows for

“...paraprofessionals and assistants who are appropriately trained rights and dtJ8rained ru

and special educators to paraeducators. This practice often results in assigning the least trained and qualified staff to students who have the most complex learning challenges. Recent research has documented that inappropriately assigning a paraeducator to an individual student can have inadvertent and unintended detrimental effects (Giangreco, Edelman, Broer & Doyle, in press). It can:

- ◆ create unnecessary and unhealthy dependencies on adults;
- ◆ interfere with general education teachers assuming ownership and responsibility for students with disabilities in their classrooms;
- ◆ interfere with peer relationships;
- ◆ limit students' access to competent instruction;
- ◆ limit access to typical class activities;
- ◆ isolate students within the classroom;
- ◆ be perceived as stigmatizing by students with and without disabilities; or
- ◆ limit appropriate personal control and self-determination of students.

Making a decision about whether to provide paraeducator support, therefore, is important. It is essential to recognize that paraeducator services generally fall under one of three categories, only two of which are covered by the IDEA (i.e., special education and related services).

1. General Education

A paraeducator is often part of general education available to all students in a class. For example, some kindergartens or primary grades include paraeducators as part of the general classroom staff. This type of support typically does not appear on an IEP because it is available to all students, but it is a good example of why it's important to know the context when considering IEP services. Knowing that a particular kindergarten has paraeducator support, a relatively small class size, few students with disabilities, and an experienced teacher is critical when deciding whether an additional special education paraeducator is needed.

2. Special Education

Sometimes a paraeducator is assigned to a classroom or individual student specifically to provide support for one or more students with disabilities. This support is documented on the student's IEP.

Even though a paraeducator is present primarily to serve a student with disabilities, the efforts of the paraeducator (or any persons providing, or assisting in the provision of, special education or related services) may benefit students without disabilities — this is commonly referred to as “incidental benefit.” Federal regulations allow flexibility within the classroom and are intended to prevent students with disabilities from being unnecessarily separated within or from the regular classroom.

Federal regulations state that IDEA funds may be used:

“...for the costs of special education and related services and supplementary aids and services provided in a regular class or other education-related setting to a child with a disability in accordance with the IEP of the child, even if one or more nondisabled children benefit from these services” (34 CFR 300.235).

Paraeducators exclusively provide indirect services to students with disabilities. This is the case because under the IDEA paraprofessionals must be trained for their roles and supervised by qualified professionals. They are not to provide services on their own without such training and supervision.

3. Related Services

Sometimes a paraeducator is assigned to assist in the provision of related services for a student with a disability under the supervision of a qualified related services provider. For example, one might be assigned to work under the supervision of speech-language pathologist. This is an example of where the distinction between indirect services and consultation becomes important (see p. 37).

DOES PARAEDUCATOR SUPPORT MATCH THE NEED?

Reaching agreement on the purpose of support has a direct bearing on identifying who should appropriately provide it. There should be a match between the support and the skills of the person designated to provide it (Giangreco, Broer & Edelman, 1999). For example, if a student needs extensive curriculum

modifications or the development of a positive behavior support plan, assigning a paraprofessional is unlikely to meet that need. The paraeducator may appropriately implement aspects of the plans after effective training and with ongoing supervision from a qualified professional. This can lead to the identification of staff development and training needs for team members who may be appropriate providers, but who lack specific skills. This approach builds capacity within the school.

AT WHAT TIMES OR UNDER WHAT CONDITIONS MIGHT PARAEDUCATOR S



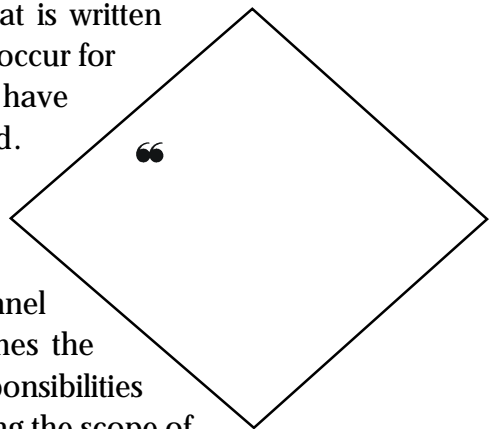


Once IEP services decisions have been made, it's time to put the team's plan into action. Having a clear plan should facilitate a smooth transition into implementation and will allow the team to evaluate how things are working.

IMPLEMENT THE SPECIAL EDUCATION SERVICES AS DOCUMENTED IN THE IEP AND RELATED SERVICES IF IDENTIFIED

When the team starts implementing the IEP, the first order of business is to ensure that the documented services are being provided.

Sometimes there are discrepancies between what is written on the IEP and what actually happens. This can occur for several reasons. Sometimes the student's needs have changed and the IEP needs to be adjusted. Sometimes staffing changes or shortages of qualified professionals have left the school short-handed. In such cases, schools are required to make good faith efforts to find appropriate personnel to provide agreed-upon IEP services. Sometimes the caseloads of special educators include more responsibilities than there are hours in a day. Clearly documenting the scope of school-wide special education services can assist school administrators in determining appropriate caseloads for special educators.



Establish a Schedule

In an effort to ensure that IEP services are provided as intended, the simplest

- ◆ the quality of work the student generates,
- ◆ the amount of time (duration) a student can sustain attention,
- ◆ the number of steps in a series (i.e., from a task analysis) the student can successfully complete, or
- ◆ the level at which the student's quality of life has improved as a result of working on certain learning outcomes.

Ensure Appropriate Training, Supervision, and Support of Team Members

This heading speaks for itself! As part of an initial team meeting consider developing a plan that explicitly explores and addresses training, supervision, and support of team members. Later meetings can be used to review the status of the plan.

Implement the Plan and Collect Data

All of this planning and organizing is leading up to the important, rewarding, and enjoyable part of the work — actually working with students and helping them learn!! When planning for implementation is insufficient, it invariably leads to problems. These may include conflicts between team members, people feeling unsupported, behavior problems exhibited by students (and sometimes by the adults), confusion or general frustration. Most importantly, insufficient planning can interfere with effective student learning. If the team has done a thorough job of planning, implementation will go much more smoothly. Reflect on and use the information the team collects.

students with disabilities, other aspects of the educational program should be considered when determining the impact of a service.

Often when a service is recommended for a student, he or she receives it indefinitely and there is little documentation of its impact. Sometimes this occurs because the team was not clear about the purpose of the service at the outset. If the decision-making was not sound to begin with, under closer review the service may not even meet the criteria of special education or related service.

When considering whether a particular service should be continued at the same level, increased, reduced, or discontinued, the team needs to look at more than grades and tests. First, ask whether the service has addressed the purposes for which it was selected.

Too often, evaluation measures that are specific to a professional discipline are the primary or exclusive methods for evaluating a service. Although they may provide useful information, they are not designed to inform the team about whether a service is having its intended impact. Here are some questions about impact that may be considered based on the team's understanding of the purpose of the service.

? Which aspect or aspects of the student's education was the service supposed to affect?

- √ Access to, and participation in school
- √ Access to extra-curricular activities
- √ Access to the general education curriculum
- √ Progress toward IEPs goals, objectives, or benchmarks
- √ Progress toward general education learning outcomes
- √ Provision of general supports or accommodations
- √ Enhancement of valued life outcomes (e.g., health/safety, friendships/relationships, choice and control commensurate with one's age and culture, participation in a variety of places and activities)

? What observable or reported impact has the service had on the corresponding aspects of the student's education?

When answering these questions, some of the information will be quantifiable and easily represented in numbers such as scores, percentages, and frequencies. Other information will be more qualitative, calling for narrative descriptions.

Use Data to Make Decisions about the Continued Need for the Services or Adjustments to the Type, Mode, and Frequency

The data the team collects can be used in an active way to help the team understand the student's current and future instructional needs.

In order to do this, first think about:

- ◆ the level at which the student is currently performing,
- ◆ the level at which the student needs to perform in order for her or his goals to be accomplished,
- ◆ how much time it might take for the student to meet this goal,
- ◆ how frequently the team will collect information about the student's progress,
- ◆ and when the team should review the data to see if goals have been reached. If data are simply collected - not reviewed and used - they may as well not be collected at all.

Once the team has enough data to look at, what do they reveal? They may indicate that the student:

- ◆ is ready to move to a new goal or a higher level of performance with that goal,
- ◆ needs more time to accomplish the goal,
- ◆ requires more or different teaching strategies, or
- ◆ requires modified or different goals.

After the team has decided what they believe the data mean, it's time to consider possible steps, select a course of action, and take that action. Though it is common and appropriate to consider instructional and curricular changes, in some cases the team may also want to change the data collection method. Existing methods may not provide the information you are seeking or may not be sensitive enough to detect modest levels of progress. Whatever decisions the team makes should be informed by data it has collected.

IN CONCLUSION...

Using effective IEP services decision-making practices ultimately contributes to providing quality education for students with disabilities, resulting in meaningful outcomes. If done well, this can make a difference in the lives of students with disabilities and their families — and that's what good education is all about!



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