

DRAFT

Procedural Manual

**Guidance on Providing Special
Education and Related Services to
Students with Disabilities Pursuant to
the Individuals with Disabilities
Education Act (IDEA)**

Published August 2021



Table of Contents

INTRODUCTION	6
Individuals with Disabilities Education Act (IDEA)	6
Section 504 of the Rehabilitation Act of 1973	6
Article 14 of the Illinois School Code and 23 Illinois Administrative Code Part 226	6
Acronyms/Abbreviations	8
ROLES AND RESPONSIBILITIES	9
Principal	9
ODLSS District Representative	10
Local School District Representative	11
Special Education Teacher and/or Related Service Provider	12
General Education Teacher	14
Paraprofessional (Special Education Classroom Assistant)	15
Parent/Guardian	15
Student	17
ROLE OF MULTI-TIERED SYSTEMS of SUPPORTS	18
CHILD FIND PROCESS	19
Referrals	19
CPS Staff Referrals	19
Non-CPS Personnel Referrals	19
Referrals of Non-Attending Students	20
Determining Need for Full and Individual Evaluation	20
Evaluation Is Not Warranted	20
Evaluation Is Warranted	21
Assessment Planning	21
FULL AND INDIVIDUAL EVALUATION (FIE)	24
Initial Evaluation	24
Reevaluation	24
THE EVALUATION PROCESS	25
Evaluation Components	26
Evaluation Reports	26
Academic Achievement Domain	26
General Intelligence/Cognitive Functioning Domain	27
Communication Domain	27
Social/Emotional Status Domain	27
Health Domain	28
Motor Abilities Domain	28
Hearing/Vision Domain	28
Additional Considerations for Students with an Autism Spectrum Disorder	28
ELIGIBILITY DETERMINATION	30

Participants	30
Making the Eligibility Determination	31
Disability Categories and Eligibility Criteria	31
Step Three: Determine if the student's disability adversely affects educational performance.	33
Step Four: Determine if the student requires special education and related services.	33
Eligibility Criteria for Students Suspected of Having a Specific Learning Disability (SLD)	34
Eligibility Criteria for English Learners (EL) Suspected of Having a Disability	37
Notifying Parents/Guardians of Eligibility Determination Decision	38
Parent/Guardian Consent for Initial Services	39
Observations by Parents/Guardians, Independent Evaluators, or Other Qualified Professionals	39
THE INDIVIDUALIZED EDUCATION PROGRAM (IEP)	41
IEP Meeting	41
Translation of IEP Meeting Documents	42
Participants	42
Agreement To Proceed With the IEP Meeting	43
IEP Development	44
GENERAL CONSIDERATIONS (IEP Section 7)	45
Student Strengths	45
Academic, Developmental and Functional Needs	45
Academic Needs	45
Developmental/Functional Needs	45
Communication Needs	45
Considerations for Students with Autism Spectrum Disorders	45
Relevant Transition Information	46
Medical Concerns	46
Language and Cultural Considerations (English Learners-EL)	46
Parents'/Guardians' Concerns	46
TRANSITION SERVICES (IEP Section 8)	47
Development of Transition Service Plan	47
Transition Assessments	47
Competency Skills	47
Social Skills	47
Self-Determination Skills	47
Post-Secondary Outcomes	48
Planned Course of Study	48
Coordinated Set of Activities	48
Home-Based Support Eligibility	49
AREAS OF NEED (IEP Section 9)	50
ACCOMMODATIONS AND MODIFICATIONS (IEP Section 10)	51
Accommodations and Modifications: Special Factors (IEP Section 10(a))	51

A. Consideration of braille needs	51
B. Consideration of communication needs	52
C. Consideration of English Learner’s language needs	52
D and E. Consideration of need for AT and/or AAC devices or services	52
F. Consideration of student’s need for positive behavioral interventions, strategies, and supports	53
Accommodations and Modifications: General (IEP Section 10(b))	55
Individual Health Care Plan for Diabetes, Asthma, Food/Non-Food Allergies, and Other Health Conditions	55
DIABETES CARE PLAN (DCP)	56
ASTHMA ACTION PLAN	57
INDIVIDUAL HEALTH PLAN FOR FOOD/NON-FOOD ALLERGIES	58
HEALTH CARE PLAN FOR OTHER HEALTH CONDITIONS	58
PRACTITIONER ORDERS FOR LIFE SUSTAINING TREATMENT	59
Accommodations and Modifications: Assessments (IEP Section 10(c))	61
SPECIALIZED INSTRUCTION (IEP Section 11)	62
Measurable Annual Goal and Benchmarks or Short-Term Objectives	63
CONSIDERING A RELATED SERVICE	64
Determining Need for Speech-Language Pathology Services	65
Determining Need for School Audiology Services	67
Determining Need for School Social Work and/or School Psychological Services	67
Determining Need for School Nursing/Health Services	69
Determining Need for Occupational Therapy Services	70
Determining Need for Physical Therapy Services	71
PLACEMENT IN THE LEAST RESTRICTIVE ENVIRONMENT (IEP Section 12)	73
Least Restrictive Environment (LRE) Defined	73
The Placement Continuum	73
Making the Placement/LRE Decision	74
Related Services Delivery and LRE	76
Nonacademic and Extracurricular Activities and LRE	76
Extended School Year and LRE	76
Separate Day School or Residential Placements	76
Home or Hospital Placements	78
Review of Placement/LRE	79
Potential Harmful Effects	79
PARAPROFESSIONAL SUPPORT	80
CURRICULUM, GRADES, PROMOTION AND GRADUATION (IEP Section 13)	84
Significantly Modified Curriculum	84
Grades	84
Promotion and Graduation	85
High School Graduation	86

Notice to Parent/Guardian/Adult Student	86
EXTENDED SCHOOL YEAR (ESY) (IEP Section 14)	88
Eligibility Criteria for Determining Need for ESY Services	88
TRANSPORTATION (IEP Section 15)	91
Guidelines for Determining Need for Transportation as a Related Service	91
ADDITIONAL SECTIONS OF THE IEP	95
IEP Meeting Notes Page	95
IEP Dissenting Opinion	95
IEP Revisions	95
Student Specific Corrective Action	96
DISCIPLINARY REMOVAL OF STUDENT FROM CURRENT SETTING	97
Short-Term Removal (Out-of-School Suspension)	97
In-School Suspension	98
Suspension from the Bus	98
Manifestation Determination Review (MDR) Conference	98
MDR Process Checklist	98
Removal to an Interim Alternative Educational Setting (IAES) (Emergency Assignment)	99
Reporting Crimes to Police	99
Anti-Bullying Requirements	100
PROCEDURAL SAFEGUARDS	101
IDEA Procedural Safeguards	101
Notification of Conference	101
Notification of Non-Implementation of IEP Services	101
Revocation of Consent	101
Parentally-Placed Private School Students with Disabilities	102
Child-Find Obligations	103
Students Attending a Private School in the City of Chicago	103
Students Residing in the City of Chicago but Parentally-Placed in a Private School Outside the City of Chicago	103
Proportionate Share Services	103
Students with Disabilities Transferring from Other School Districts	104
Prohibition Against Requiring Medication	104
Confidentiality of Personally Identifiable Information	105
APPENDIX	108
Guidelines for Special Education Class Size	108
General Education Classrooms	108
Separate Special Education Classrooms	108
Special Education Class Size At-A-Glance	109
IDEA Timelines - Quick Reference	110
Supporting Gender Diversity	110

INTRODUCTION

Individuals with Disabilities Education Act (IDEA)

Under the IDEA and its related federal regulations that govern special education, as well as the Illinois statute and regulations discussed below, students with disabilities have a right to receive a free appropriate public education (FAPE) in the least restrictive environment (LRE). The IDEA defines students with disabilities as students, ages 3 through 21 (day before the 22nd birthday), who have been identified with one of the disabling conditions identified in the statute that adversely affect educational performance and require special education. The IDEA and its implementing regulations provide students with disabilities and their parents/guardians with procedural safeguards regarding the identification, evaluation, educational placement of, and the provision of FAPE to students with disabilities. Meaningful parent/guardian involvement is an essential part of these procedural safeguards.

Section 504 of the Rehabilitation Act of 1973

The purpose of Section 504 of the Rehabilitation Act of 1973 is to (1) eliminate discrimination on the basis of disability in any program or activity provided by school districts and other educational providers that receive federal financial assistance, and (2) ensure that students who are Section 504-eligible have equal educational opportunities equivalent to those of their nondisabled peers. Unlike the IDEA, Section 504 does not limit coverage to certain specific categories of disabilities and no categorical labels are necessary. Instead, a student with a disability under Section 504 is defined as one who (1) has a physical or mental health impairment that substantially limits a major life activity (2) has a record of such an impairment, or (3) is regarded as having such an impairment.

NOTE: *This Procedural Manual is intended to provide guidance specifically related to the IDEA and its implementing State and federal regulations. Please refer to the Section 504 Procedural Manual for more information.*

Article 14 of the Illinois School Code and 23 Illinois Administrative Code Part 226

The Illinois State Board of Education (ISBE) has promulgated rules to implement Article 14 of the Illinois School Code, which applies to the education of students with disabilities. These rules provide further specificity regarding requirements for the identification, evaluation, educational placement, and provision of FAPE to students with disabilities. In addition, rules are provided for the administration of special education, the design of special education programs (including class size), home or hospital programs, State-operated or private programs, special education personnel, transportation, and residential care facilities.

Acronyms/Abbreviations

ABA	Applied Behavior Analysis	IEP	Individualized Education Program
AAC	Alternative/Augmentative Communication	ISBE	Illinois State Board of Education
ADHD	Attention Deficit Hyperactivity Disorder	ISSRA	Illinois School Student Records Act
AT	Assistive Technology	LEI	Learning Environment Interventions
AUT	Autism	LES	Learning Environment Screening
ATRC	Assistive Technology Resource Center	LPN	Licensed Practical Nurse
BIP	Behavior Intervention Plan	LRE	Least Restrictive Environment
CAPD	Central Auditory Processing Disorder	MD	Multiple Disabilities
CATs	Citywide Assessment Teams	MDR	Manifestation Determination Review
CPS	Chicago Public Schools (also referred to as the “District”)	MTSS	Multi-Tiered Systems of Support
CSN	Certified School Nurse	ODLSS	Office of Diverse Learner Supports and Services
D-B	Deaf/Blindness	OHI	Other Health Impaired
DCFS	Department of Child & Family Services	OLCE	Office of Language and Cultural Education
DCA	Diabetes Care Aide	OT	Occupational Therapy and/or Therapist
DCP	Diabetes Care Plan	PAS	Pre-Admission Screening
DD	Developmentally Delayed	PEL	Professional Educator License
DHS	Department of Human Services	PHY	Physically Disabled (also referred to as Orthopedic Impairment)
DRS	Department of Rehabilitative Services	PLAAFP	Present Level of Academic Achievement and Functional Performance
DLM-AA	Dynamic Learning Maps Alternate Assessment	PT	Physical Therapy and/or Therapist
ED	Emotional Disability	RSP	Related Service Provider
EL	English Learner	RTI	Response to Intervention
ESL	English as a Second Language	SBSS	Specialized Behavioral Support & Strategy
ESY	Extended School Year	SCC	Student Code of Conduct
FAPE	Free Appropriate Public Education	SECA	Special Education Classroom Assistant
FBA	Functional Behavioral Assessment	SEL	Social/Emotional Learning
FERPA	Family Educational Rights and Privacy Act	SETT	Student Environment Task Tools
FIE	Full and Individual Evaluation	SLD	Specific Learning Disability
HI	Hearing Impairment	SLP	Speech-Language Pathologist
HSN	Health Service Nurse	SSCA	Student Specific Corrective Action
IAES	Interim Alternative Education Setting	SSM	Student Services Management
ID	Intellectual Disability - Mild); Moderate, Severe, or Profound	SW	Social Worker
IDEA	Individuals with Disabilities Education Act	TBI	Traumatic Brain Injury
IEE	Independent Educational Evaluation	VI	Visual Impairment

ROLES AND RESPONSIBILITIES

The following positions represent the CPS staff responsible for students with disabilities. While individual responsibilities may differ, all are aligned in the mission to help students achieve success in the classroom and in life.

Principal

As the instructional leader of a school, the principal is responsible for ensuring that all applicable federal and state laws are complied with so that students with disabilities receive FAPE in the LRE and have access to the age- and grade-appropriate general education curriculum and all program options available at the school. The principal must oversee and ensure the implementation of all IEPs for each student with disabilities in their school. The principal supervises all related service and special education staff assigned to the school, including the coordination of services between the general education teacher and special education teacher. The principal must also ensure that the local school district representative has the time necessary to carry out job responsibilities.

NOTE: *If the principal delegates administrative duties related to special education procedures and services to the assistant principal, the following list of responsibilities applies to the designee. “School Administrator” refers to either the principal or assistant principal.*

School Administrator responsibilities regarding students with disabilities include, but are not limited to:

- Ensuring that the IEPs for students with disabilities are current;
- Ensuring a District Representative (i.e., local school district representative (which can be the principal, assistant principal, or other appropriately licensed staff person)) or, when authorized by the Office of Diverse Learner Supports and Services (ODLSS), the ODLSS District Representative, is designated on the *Parent/Guardian Notification of Conference* and in attendance at every Individualized Educational Program (IEP) meeting;
- Designating a local school district representative within the principal’s building;
- Designating individual(s) responsible for completing all necessary IDEA notices and paperwork;
- Ensuring general education classrooms meet ISBE class size regulations;
- Ensuring separate special education classrooms meet ISBE class size regulations;
- Ensuring students’ schedules match the students’ IEPs;
- Ensuring IEPs are finalized in Student Services Management (SSM) at the IEP meeting;
- Ensuring students with disabilities participate, with or without specialized instruction in accordance with their IEPs, in all curricular areas available in the school, including non-academic areas during the school day, and ensuring students with disabilities have access to extracurricular activities offered at the school;
- Ensuring general education teachers have access to current IEPs for all students with disabilities they teach;
- Ensuring all separate special education classrooms are located near the same age/grade general education classrooms;
- Ensuring special education teachers have copies of teacher’s editions for all subjects and grade levels they teach;
- Ensuring students with disabilities have age/grade-appropriate general education textbooks and materials;
- Ensuring scheduled common planning time for general education teachers and special education teachers;
- Ensuring special education teachers and related service providers are allowed to use one principal-directed preparation period every two weeks for collaboration;
- Ensuring paraprofessionals’ schedules match students’ IEPs;

- Making the necessary arrangements for staff to attend Eligibility conferences and IEP meetings;
- Ensuring all pre-conference activities are completed in accordance with required timelines, including sending the *Parent/Guardian Notice of Conference* and indicating whether specific data has been collected;
- Ensuring draft IEPs Sections 7 (General Consideration), 9 (Areas of Need), 10 (Accommodations/Modifications), 11 (Specialized Instruction), Section 13 (Grades) and, if applicable, Section 8 (Transition Plan) have been developed and provided to the parents/guardians, along with, if applicable, paraprofessional, extended school year (ESY) and *Learning Environment Intervention (LEI)* forms, copies of all other conducted evaluations and any other collected data that will be considered at least 3 school days prior to the meeting;
- Monitoring the implementation of IEPs and whether students with disabilities are making appropriate progress;
- Ensuring the *Parent/Guardian Notice – IEP Services Not Implemented Within Ten School Days* has been sent to the parent/guardian whenever IEP services have not been implemented within ten school days of the IEP meeting (the Notice must be sent within three school days of the noncompliance);
- Monitoring staff to ensure qualitative and quantitative data is being used to make all IEP decisions;
- Ensuring IEP progress reports are completed for each student on a quarterly basis and provided to parents/guardians at the same time as the general report cards (unless the IEP includes a different timeline), and are maintained in the student's temporary record;
- Sharing with local school district representative comments on student performance, behavior, and attendance;
- Ensuring that parents/guardians have access to school personnel who can answer questions related to their child's IEP and are involved in IEP development;
- Ensuring an interpreter is at all IEP conferences (including initial and reevaluation eligibility determination meetings, and annual reviews) for parents/guardians who are limited English proficient and/or deaf or hard of hearing to enable parents to meaningfully participate in the IEP meeting;
- Ensuring that special education teachers are not used as substitute teachers, unless it is an emergency;
- Ensuring the SECAs are not used for class coverage, unless it is an emergency;
- Allowing SECAs to attend professional development opportunities;
- Providing professional development opportunities for general and special educators, as necessary, including ensuring all relevant staff attend mandatory ODLSS trainings; and
- Providing support and guidance to staff to assist them in adhering to the directives described in this Procedural Manual and the supplemental CPS Procedures and Guidelines for Assistive Technology, ESY Services, Paraprofessionals, Specific Learning Disabilities, Transportation, and Student Specific Corrective Action.

ODLSS District Representative

The ODLSS District Representative is responsible for providing oversight and guidance to networks, schools, and IEP teams to develop IEPs that meet legal requirements.

ODLSS District Representative responsibilities regarding students with disabilities include but are not limited to:

- Serving as the District Representative at IEP meetings for all schools if placement at a separate day school, residential, or homebound (as the LRE) is being considered;
- Serving as the District Representative at IEP meetings for charter, options, and contract schools if transportation is being considered as a related service;
- Monitoring the implementation of procedures and IEP-required services and adherence to best practice standards and protocols;

- Reporting all parent/guardian and staff requested SSCA meetings to the ODLSS Central Office SSCA team via SSCA@cps.edu;
- Assisting in monitoring special education programs and related services to ensure compliance with federal and state regulations and CPS policies and procedures;
- Participating as part of the Network team to review data, engage in strategic discussions and follow-up activities, and participate in school walk-throughs, as needed;
- Following procedures outlined for placing students in ISBE-approved, nonpublic facility placements;
- Providing administrative support and technical assistance to school administrators, special educators, general educators, and school teams in the areas of CPS policy, IDEA, state law and regulations;
- Troubleshooting major special education service issues to ensure all students with disabilities are receiving FAPE in the LRE; and
- Consistently maintaining quality interactions with teachers, students, parents/guardians, and the larger community.

Local School District Representative

Each local school principal must ensure a staff person has been identified to serve as the local school district representative (also known as the “Case Manager”) at IEP meetings when an ODLSS District Representative has not been designated as the District Representative for that particular meeting. In order to serve as the Local School District Representative at the IEP meeting, the staff person must have a valid Professional Educator License (PEL) in one of the following areas: Special Education (PK-Age 21) endorsement with two years’ experience; or School Support Personnel endorsement with a supervisory endorsement with two years’ experience; or an administrative endorsement issued under 23 Ill. Admin. Code. Part 25, Subpart E.

Local school district representatives are responsible for:

- Coordinating all referrals for a Full and Individual Evaluation (FIE) to ensure that all required components are addressed and that the process is completed within 60 school days after receiving signed parent/guardian consents, including but not limited to, referrals for Assistive Technology (AT) and Augmentative and Alternative Communication (AAC) evaluations or functional behavioral assessments (FBAs);
- Ensuring that all parent/guardian notices and consents for FIEs and placements are processed and provided in the primary language where feasible and placed in the student temporary files;
 - Ensuring an interpreter is invited to all IEP conferences (including initial and reevaluation eligibility determination meetings, and annual reviews) for parents/guardians who are limited English proficient;
- Convening and chairing IEP conferences (including initial and reevaluation eligibility determination meetings, and annual reviews) and acting as the District Representative;
- Arranging special education and related services for a student within the school in accordance with the students IEP and contacting ODLSS to arrange assignment in another school if necessary to implement the IEP;
- Consulting with the ODLSS District Representative regarding students who require low-incidence services or regarding problems that develop in the implementation of procedures;
- Finalizing each student’s IEP in the SSM at the IEP meeting and providing the student’s parents/guardians with a copy; and
- Ensuring that all relevant student data is entered into the SSM in a timely manner.

Prior to an FIE/IEP meeting, the local school district representative is responsible for:

- Monitoring to ensure that all pre-conference activities are completed within required timelines;
- Determining the date/time/location of the IEP meeting with participation of parents/guardians and other necessary team members;

- Providing written *Parent/Guardian Notification of Conference* at least ten calendar days prior to the meeting, which includes indicating whether specific data has been collected;
- Determining which IEP team member(s) will review previous evaluation reports and report as the evaluation representative at the annual review meeting;
- Preparing an agenda for the meeting;
- Arranging accommodations for parents/guardians as necessary (e.g., interpreter or translator); and
- Providing parents/guardians copy of draft IEP materials and if applicable paraprofessional, ESY and *Learning Environment Intervention* forms, along with copies of all written material that will be considered by the IEP team at the meeting, including, but not limited to evaluation reports, collected data that will be considered at the meeting, and, for a child who already has an IEP, a copy of the IEP components that will be discussed, components related to the educational and related service minutes proposed for the child's educational placement at least three school days prior to the meeting.

At the FIE/IEP meeting, the local school district representative is the chairperson for the conference and is responsible for:

- Acting as the District Representative to authorize services, unless an ODLSS District Representative is present. This must be specified on the *Parent/Guardian Notification of Conference* form;
- Starting the meeting with introductions of all IEP team members and ensuring that all required participants are present;
- Conducting the meeting by following an agenda and process based on the purpose of the conference;
- Ensuring the eIEP is projected during the meeting to enable meaningful parent/guardian participation, and if the eIEP cannot be projected, ensuring the parents/guardians either have access to a District computer or a paper copy of the draft IEP;
- Facilitating the completion of the IEP document at the meeting;
- When applicable, uploading into SSM any physician orders and emergency action plans used to develop individualized health care plans and attaching it to the student's IEP; and
- Distributing copies of the completed IEP to parents/guardians, teachers and related service providers at the end of the IEP meeting.

Following the IEP meeting, the local school district representative is responsible for:

- Informing all staff involved in the implementation of the IEP of their responsibilities to implement the IEP as written;
- Monitoring to ensure that all services delineated in the IEP are delivered. If services cannot be implemented within ten school days, contact the ODLSS District Representative for assistance;
- Sending the *Parent/Guardian Notice – IEP Services Not Implemented Within Ten School Days* to the parent/guardian whenever IEP services have not been implemented within ten school days of the IEP meeting;
- Ensuring all teachers and related service staff who have a responsibility for the education of the student have access to the IEP;
- Updating data entry in the student information system including the annual review dates, ESY indicators, service provider and related service codes; and
- Coordinating all meetings related to IEP reviews and revisions, when necessary.

Special Education Teacher and/or Related Service Provider

Prior to the IEP meeting, the special education teacher and/or related service provider(s) are responsible for:

- Reviewing the current IEP to determine extent of mastery of annual goals or, if this is a conference to determine eligibility, compiling data and anecdotal records, samples of student

work, and other information relevant to determine the student's potential for learning, rate of learning, and need for specialized instruction, related services, and/or accommodations;

- Assessing current achievement levels and progress toward achieving Illinois Common Core Standards and IEP goals;
- Compiling qualitative and quantitative data and other information about the student's educational needs, in general and in relationship to the general education curriculum;
- Compiling qualitative and quantitative data and other information about special factors that may impede students' learning;
- Identifying students' talents, hobbies and other interests;
- Compiling qualitative and quantitative data on students' attendance and class participation;
- Compiling qualitative and quantitative data on levels of English language proficiency for students from a non-English language background;
- Compiling qualitative and quantitative data on primary language proficiency on students who are English Learners (ELs) who are receiving bilingual services;
- If applicable, compiling qualitative and quantitative data regarding the need for paraprofessional support and/or ESY services;
- Based on the above information, completing and providing to parent/guardian, a draft, at least three school days prior to the IEP meeting of proposed General Considerations (IEP Section 7), and drafting proposed Areas of Need (IEP Section 9), Accommodations/Modifications (IEP Section 10), Specialized Instruction (IEP Section 11), Grades (IEP Section 13) and, as required, the Transition Plan (IEP Section 8) to support parents'/guardians' meaningful participation in IEP development;
- Conferring with general educators, other special education providers and parents/guardians as needed;
- Developing brief written summary reports or notes of the student's needs or performance that will be shared at the meeting; and
- Completing draft evaluation reports at least three school days prior to the FIE meeting.

During the IEP meeting, the special education teacher and/or related service provider(s) are responsible for:

- Sharing information regarding the student's present levels of academic achievement and functional performance in relationship to the general education curriculum, including progress toward IEP goals;
- Describing the student's learning style(s) and strategies that have been utilized with him/her, behavior and attendance as well as other relevant information regarding the student;
- Explaining the recommendations for proposed accommodations and modifications that will allow the student to be educated in the LRE;
- Explaining the recommendations regarding proposed annual goals and benchmarks/short-term objectives;
- After IEP team discussion, finalizing General Considerations (IEP Section 7), Areas of Need (IEP Section 9), Accommodations/Modifications (IEP Section 10), Specialized Instruction (IEP Section 11) and Curriculum, Grades, Promotion, and Graduation (IEP Section 13), and, as appropriate, the Functional Behavioral Assessment/Behavior Intervention Plan (FBA/BIP), and Transition Plan (IEP Section 8);
- After IEP team discussion, ensuring Language (IEP Section 6), Placement in the Least Restrictive Environment (IEP Section 12), Extended School Year (IEP Section 14), Transportation (IEP Section 15) and Procedural Safeguards (IEP Section 5) are completed; and
- Finalizing their evaluation reports by the conclusion of the meeting.

Following the IEP meeting, the special education teacher and/or related service provider(s) are responsible for:

- Implementing the IEP - providing direct instruction and/or consultative services in the appropriate setting for the prescribed minutes as outlined in the IEP;

- Reviewing the IEP and understanding responsibilities for implementation;
- Collecting evidence/data regarding progress toward goals and objectives/benchmarks, as indicated by the evaluation criteria and evaluation procedures of each goal;
- Measuring and documenting on the IEP progress report the student's progress each quarter;
- Communicating with other service providers, including general education teachers, on a regular basis;
- Documenting service delivery;
- Establishing and maintaining effective and positive communication with parents/guardians; and
- Informing the local school district representative if there is a need for an IEP revision.

General Education Teacher

Prior to the IEP meeting, each of the student's general education teachers are responsible for:

- Reviewing the current IEP or, if the purpose of the conference is to determine eligibility, compiling data including progress monitoring data through Multi-Tiered Systems of Support (MTSS) or other response to interventions, samples of student work, and other information relevant to determining the student's potential for learning, rate of learning and need for specialized instruction and/or accommodations;
- Identifying instructional and classroom management strategies that have been successful with the student;
- Observing the student's learning style in the general education classroom;
- Listing or identifying special factors that may impede the student's learning;
- Compiling qualitative and quantitative data and other information about the student's educational needs, in general and in relationship to the general education curriculum;
- Compiling qualitative and quantitative data and other information about special factors that may impede students' learning;
- Identifying students' talents, hobbies and other interests;
- Compiling qualitative and quantitative data on students' attendance and class participation;
- Compiling qualitative and quantitative data on levels of English language proficiency for students from a non-English language background;
- Compiling qualitative and quantitative data on primary language proficiency on students who are English Learners (ELs) who are receiving bilingual services;
- If applicable, compiling qualitative and quantitative data regarding the need for paraprofessional support, ESY services and/or transportation;
- Sharing with the special educator comments on student progress toward achieving IEP goals, including student's participation in classroom activities;
- Collaborating with the special educator, as appropriate, regarding IEP goal implementation and/or data collection;
- Suggesting positive intervention strategies for improving the student's behavior, supplementary aids and services, program accommodations or modifications and supports for school personnel that may be necessary for the student to benefit from specialized instruction;
- Preparing a brief report of the student's current performance in relationship to the general education curriculum and including information regarding behavior and attendance patterns; and
- Collaborating with the special education teacher and/or related service provider(s) in drafting General Considerations (IEP Section 7) in narrative format at least 3 days prior to the IEP meeting.

During the IEP meeting, the general education teacher is responsible for:

- Sharing information regarding the student's present level of academic achievement and functional performance in the general education curriculum and the general education environment;
- Describing student's behavior and interactions with peers in the general education environment;
- Sharing information regarding the effect of accommodations provided for the student in the general education classroom during the previous school year;

- Making recommendations for continuation or discontinuation of those or other accommodations;
- Making recommendations for annual goals that relate to the progress of the student in the general education curriculum; and
- Assisting in the determination of placement (and LRE).

Following the IEP meeting, the general education teacher is responsible for:

- Implementing the IEP - providing accommodations and modifications in accordance with the IEP;
- Collaborating with the special education teacher, related service providers, and other teachers about meeting the student's needs and implementing the IEP;
- Establishing and maintaining communication with the parents/guardians;
- Assessing the student's progress on a regular basis (at least quarterly); and
- Informing the local school district representative if an IEP revision is needed.

Paraprofessional (Special Education Classroom Assistant)

Paraprofessionals (SECA's) are responsible for:

- Working and assisting with the delivery of instructional and/or other direct or indirect services for eligible students with disabilities
- Providing 1-1 instructional supports for students to reinforce learning concepts (reteach, review, drill/ practice, reinforce only)
- Progress monitoring and providing feedback to staff/teacher regarding student academic and for student behavior performance;
- Under the direction of the teacher and/or related service provider, implementing accommodations and modifications and other educational or behavioral strategies used in the classroom;
- Assisting teachers and related service providers in maintaining written student records
- Facilitating communication with linguistically and culturally diverse parents/guardians;
- Supporting students with disabilities in the general education curriculum with activities as directed by the teacher;
- Assisting students with AT, including computers and communication devices;
- Collaborating and communicating with appropriate school personnel about the needs of students with disabilities;
- Working with a variety of students who may have diverse learning needs;
- Providing input to the teacher regarding the student's response to strategies that have been used in instruction or behavior management;
- Obtain, prepare, and organize instructional materials as directed by teacher;
- Maintaining and protecting students' right to confidentiality;
- Assisting with the personal care needs (e.g., toileting) as identified in the student's IEP;
- Lifting and positioning non-ambulatory students as instructed by the physical therapist or teacher and in adherence to written instructions from students' personal physicians;
- Assisting students with orthopedic impairments by arranging and adjusting tools, work aids, and equipment used by students in classrooms, including but not limited to specially equipped worktables, positioning equipment, and wheelchairs; and
- Documenting service delivery.

Parent/Guardian

The IDEA defines "parent" as:

- a biological or adoptive parent
- a foster parent
- a surrogate parent
- a guardian, but not State if the child is a ward of State

- an individual acting in place of a biological or adoptive parent, including grandparents, stepparents or other relative, with whom the child lives or an individual legally responsible for the child's welfare

DCFS (i.e., caseworker or educational liaison) is **NOT** the parent for IDEA purposes, but is a State Agency for referral purposes.

Parents/guardians are equal members of the IEP team and should be encouraged to actively participate in the discussion and decision-making during the IEP meeting.

Prior to the IEP meeting, parents/guardians are encouraged to:

- Participate with school personnel to determine a mutually convenient date and time for the IEP conference;
- Review the current IEP or, if the purpose of the conference is to determine eligibility, review any evaluation or assessment data submitted in advance of the conference;
- Review the most recent progress reports from teachers;
- Request a copy of the draft IEP materials that have been prepared for the IEP team's discussion and notify the local school district representative of any specific IEP items they may wish to discuss (e.g., goals, AT, paraprofessional support, etc.);
- Request that school staff collect data regarding ESY, paraprofessional, and/or transportation services and/or placement in a separate day school, if the data has not already been collected and they believe such services and/or placement may be needed;
- Request that school staff collect the necessary data if they believe their child may have a specific learning disability and school staff have not completed the *Learning Environment Intervention* and *Learning Environment Screening* documents and collected applicable data;
- Provide input regarding the student's strengths, abilities and needs;
- Think about the skills they would like their child to master by the end of the year and formulate a vision of the future;
- Notify the local school district representative if they need additional information (e.g., evaluation reports, previous IEPs or other records or reports, procedural safeguards, etc.), or any special accommodations (e.g., request to record IEP meeting due to parent/guardian disability); and
- Decide whether they would like to invite family members or other individuals having information regarding the student to attend the conference, and notify the local school district representative in advance of their intention to invite these other individuals.

During the IEP meeting, parents/guardians should be encouraged to:

- Share information about their vision for the student's future and expectations for the year;
- Identify the student's strengths and interests, including the types of activities the student enjoys at home and in the community;
- Share information about the student's relationship with siblings and neighborhood friends;
- Discuss the types of rewards and discipline strategies that are effective at home and in the community;
- Share relevant information about the student's medical and personal care needs;
- Provide input regarding annual goals and objectives/benchmarks and all other IEP components for consideration by the other IEP team members;
- Ask other IEP team members to clarify, explain or give examples for any information presented that may be unclear;
- Ask questions to clarify any reports or information regarding the student's present levels of performance in classwork, behavior and community activities, as appropriate; and
- Ask the local school district representative to review or explain parent/guardian procedural safeguards, if necessary.

Following the IEP meeting, parents/guardians should be encouraged to:

- Review the IEP document to assure that all decisions made at the conference are documented;
- Establish and maintain communication with teachers, paraprofessionals and related service providers;
- Assist the child with homework assignments and/or ask the teacher what can be done to help the child with school work; and
- Participate in CPS parent/guardian training programs to enhance knowledge of relevant educational issues.

Student

Students must be invited to attend IEP meetings if transition goals and services are being considered. If the student does not attend, efforts must be made and documented, to assure that the student's post-secondary preferences, interests and plans are considered by the IEP team.

Prior to the IEP meeting, the student should be encouraged to:

- Think about school activities he/she enjoys and activities he/she would like to pursue;
- Think about educational, employment, and independent living goals (e.g., college, career, job placement);
- Share any concerns or questions with their parents/guardians or teachers;
- Identify accommodations which have been helpful and those which were not useful; and
- Decide if he/she would like to share anything else about their educational needs and/or program at the IEP meeting.

During the IEP meeting, the student should be encouraged to:

- Identify the strengths and interests, including the types of activities he/she enjoys at home and in the community;
- Identify the academic and behavioral accommodations post-secondary preferences, and interventions provided in class that are the most helpful and the least helpful;
- Share post-secondary preferences, interests and goals;
- Participate in the discussion of annual goals and objectives/benchmarks and other IEP components;
- Ask other IEP team members to clarify, explain or give examples for any information presented that may be unclear;
- Ask questions to clarify any reports or information regarding their present level of performance in class work, behavior and community activities, as appropriate; and
- Ask the local school district representative to review or explain procedural safeguards, if necessary.

Following the IEP meeting, the student should be encouraged to:

- Cooperate with teachers, paraprofessionals, related service providers, and parents/guardians in order to improve achievement and meet benchmarks and goals;
- Review the criteria for promotion and grading;
- Tell parents/guardians and teachers about problems encountered and request assistance, as necessary; and
- Indicate to parents/guardians and teachers which accommodations or modifications are helpful or not helpful.

ROLE OF MULTI-TIERED SYSTEMS of SUPPORTS

The Multi-Tiered Systems of Support (MTSS) is the overarching framework that encompasses both the academic and social/emotional dimensions of learning. The MTSS framework is a key part of the broader CPS strategy to support ALL learners and ensure equitable access to a robust high quality education. MTSS implementation is the shared responsibility of all CPS educators, staff, families, and communities. It is designed so that educators can make data-based decisions to meet the needs of students from different backgrounds, levels of language proficiency, learning styles, and levels of achievement.

The MTSS framework embraces the importance of engaging families and the community in a collaborative partnership. Effective partnerships include students, parents/guardians, families, community members and educators. A positive and welcoming school environment fosters family engagement, improves student outcomes and is conducive to accelerated learning.

The MTSS framework is designed to provide high quality, differentiated instruction and targeted support for student needs in all school and classroom settings. The MTSS framework includes both direct instruction and other interventions with targeted supports for those students who require additional, explicit and more focused instruction to meet the academic and behavioral standards. This framework is based upon providing increased instructional time and intensity of academic and/or behavioral supports, as identified on the basis of student needs. The specific needs are identified and supported early and effectively.

NOTE: Pursuant to 105 ILCS 5/14-8.02h(c), parents/guardians will be provided with written notice of the use of MTSS. Additionally, parents/guardians will be provided all data collected and reviewed by the school district with regard to the students' multi-tiered system of support process.

A data-based decision-making process, informed by multiple measures of data, guides MTSS implementation and provides the cohesive structure that integrates the various efforts of CPS to ensure that the academic and the social/emotional needs of all students are the highest priority in all schools, for all students, including English Learners (EL), students with disabilities, and gifted students.

Analysis of progress-monitoring data will allow for students to move fluidly between tiers, depending on their progress (rate of improvement). The progress-monitoring tools support teachers' assessments of student development and intervention effectiveness and help teachers make decisions on the frequency, intensity, and duration of a particular intervention.

The length of time a student receives an intervention depends on such factors as: the skill to be learned; the gap between the desired outcome and current level of proficiency and the time needed to close that gap; and/or student age and/or developmental level. Most importantly, the length of time that a student receives an intervention depends on the student's rate of progress and response to that intervention. District, network, and school protocols should define: individuals who may provide interventions; the settings in which the interventions may occur; characteristics that interventions must possess to ensure they are evidenced-based at various levels of intensity; parameters for the minimum length of the intervention sessions, number of interventions per week and duration; and criteria for determining when the intervention is terminated.

NOTE: Whenever there is a reason to suspect a student may have a disability and be in need of special education and related services, the student is not required to complete a specific number of weeks or levels of MTSS or other response to interventions before a referral is made for an FIE. This decision should always be made on an individualized basis.

CHILD FIND PROCESS

The purpose of Child Find is to seek out and identify all children between 3 and 21 years of age who are suspected of having a disability and may require special education services under the IDEA, including students who are not currently enrolled in a CPS education program, in nonpublic schools within Chicago, and highly mobile children such as migrants and homeless students. The Child Find process begins with a referral for an FIE.

Referrals

The following persons can make a referral or request an evaluation:

- CPS school personnel,
- Parent(s)/guardian(s) of the student,
- An employee of the Illinois State Board of Education (ISBE),
- An employee from another State agency, or
- An employee from a community service agency.

All requests for an FIE must be submitted to the principal or the local school district representative in writing and be signed and dated. It is important that the request include an explanation of the educational concerns and any supporting documentation. When a referral is submitted in compliance with all requirements, a response must be provided to the parent/guardian within 14 school days of its receipt. The *Parent/Guardian Notification of Decision Regarding a Request for an Evaluation* form in SSM must be used to communicate this response.

CPS Staff Referrals

CPS staff may refer a student for an evaluation by completing a *Student Referral* form to document the basis for the referral and providing the local school district representative notice that the referral has been completed. Documentation to support the referral must include the following:

- Current information about the student, including grades, attendance, any suspensions, academic performance, behavior, and classroom participation;
- Data regarding any interventions implemented and the student's response to those interventions; and
- Documentation that the student was provided the appropriate core curriculum instruction and scientific, research-based intervention by qualified personnel.

NOTE: *Whenever there is a reason to suspect a student may have a disability and be in need of special education and related services, the student is not required to complete a specific number of weeks or levels of MTSS or other response to interventions before a referral is made for an FIE. This decision should always be made on an individualized basis.*

Non-CPS Personnel Referrals

It is important that referrals from non-CPS personnel, including parents/guardians, provide supporting documentation and explanation of the concern or suspected disability whenever possible. If the referral does not include the basis for concern, the CPS local school district representative should request that the omitted information be provided and if the student is enrolled in the school, must review the student records and gather information from any CPS personnel who have worked with the student, as long as the 14-school-day response time is met. If there is not sufficient information to support the referral prior to the 14-school-day response deadline, the referral for an evaluation can be denied. If the request is made verbally, the local school district representative should instruct the referrer to put their request for evaluation in writing and assist with transcribing if the parents/guardians are unable to write out their request. The principal or local school district representative may ask the parent/guardian to provide any relevant information about the child, including any reports, prior evaluations, health records, school records from other schools, etc., to avoid duplication of information and assist in making appropriate decisions about the FIE, but this request may not delay or extend the 14-school-day response timeline.

NOTE: Parents/Guardians may also submit private evaluations they have obtained for consideration during the FIE or IEP process or at any other time. The IEP team must review and consider the results of the private evaluation and determine whether the student's eligibility and/or IEP require revision in light of the new information. If the parent/guardian presents a private evaluation report outside of the IEP meeting, the local school district representative must send a Parent/Guardian Notification of Conference within 10 calendar days of receipt of the private evaluation, scheduling an IEP meeting (generally within 30 days of receipt of the private evaluation report) for the team to review and consider the report. At this IEP meeting, the team should also consider whether an evaluation or reevaluation of the student by CPS is warranted. The IEP team is not obligated to adopt the evaluator's recommendations or conclusions. Evaluators may accept outside reports in full, in part, or not at all.

Referrals of Non-Attending Students

The referral must be submitted directly to ODLSS by email to privateschoolevals@cps.edu for students who do not attend a CPS school or charter/contract school but attend a private school in the City of Chicago, whether or not the student lives in the city, or for a student who lives in the City and is home schooled. In either case, the parent/guardian must register the child as a non-attending student by completing the form that will be sent by the private school evaluation team.

Determining Need for Full and Individual Evaluation

To determine if a student requires an FIE, the local school district representative along with any other individuals designated by the principal (e.g., Instructional Leadership Team) must review the referral information and screening data and conduct preliminary procedures. Preliminary procedures can include observation(s) of the student; an assessment or screening for instructional purposes; consultation with the teacher or other individual making the referral; and/or a conference with the student. As part of this process, the review must ensure that the student's need for an FIE has been documented and considered fully.

Evaluation Is Not Warranted

If it is determined that the evaluation is not warranted, the local school district representative must ensure that the parent/guardian and any other referral source are provided a written notice of this decision within 14-school days from the date the school received the FIE referral using the *Parent/Guardian Notification of Decision Regarding a Request for an Evaluation and Notice of Procedural Safeguards for Parents/Guardians of Students with Disabilities* forms.

The form must include the following:

- Notice to the parent/guardian/referral source of the referral date, reasons for the referral, and why the school determined that the evaluation was not warranted, and any records, reports or other information that were used as the basis for the decision;
- The mailing date of the notice;
- Any plan to address the student's needs, such as general classroom interventions designed by the Instructional Leadership Team and a time frame for implementation and review; and
- The contact person, which is usually the local school district representative.

Lack of MTSS or other response to intervention data can never be the sole basis for denying an evaluation for students who are suspected of having a disability, including a specific learning disability. If a student is suspected of having a specific learning disability and MTSS data is not available or sufficient, the MTSS data should be gathered during the 60-school-day evaluation time period.

Evaluation Is Warranted

If it is determined that it is appropriate to initiate an FIE after the review of the referral and preliminary procedures, the local school district representative must notify the parent/guardian and requestor (if not the parent/guardian) of this decision within 14-school days of the school's receipt of the request through the forms, *Parent/Guardian Notification of Decision Regarding a Request for an Evaluation and Notice of Procedural Safeguards for Parents/Guardians of Students with Disabilities*. In addition, a team of individuals, which includes the parent/guardian, must convene to design the evaluation and prepare the *Parent/Guardian Consent for Evaluation* form for the parent/guardian's signature within the same 14-school-day period. This process is referred to as the Assessment Planning process. The parent/guardian should receive the *Conference Notification and Notice of Procedural Safeguards* at least 3 school days prior to the Assessment Planning meeting.

NOTE: For students suspected of or identified as having dyslexia, dyscalculia, or dysgraphia, a referral should be initiated and an Assessment Planning meeting should be convened.

Assessment Planning

The local school district representative facilitates the Assessment Planning process by assembling a team, including the parent/guardian, to consider the relevant domain(s) of suspected disability and what, if any, additional evaluation data or other information is necessary. The process begins with a review of existing data and other information about the student, including data from a variety of formal and informal sources. The IEP team may conduct this review without a formal meeting. The local school district representative is responsible for gathering and maintaining all pertinent data from the IEP team members. Participants use the *Parent/Guardian Consent for Evaluation/Assessment Planning* form to document these steps.

NOTE: If a referral is specific to one domain area (e.g., communication domain for a speech evaluation), the team should still consider all data to determine if other domain areas should also be considered for assessment.

Step One: Determine which of the eight domains (i.e., health, vision, hearing, academic performance, social/emotional status, general intelligence/cognitive functioning, communication status and motor abilities) are relevant to the student's suspected disability.

Step Two: For each relevant domain, gather and review available data and other information.

Absent extenuating circumstances, all assessments will be conducted by CPS personnel. Any request for an independent educational evaluation at public expense must follow the procedures described in the Parent/Guardian Request for Independent Educational Evaluation, below.

Assessments may be conducted by those individuals that are identified in the following chart:

Assessor	Domain Areas							
	Health	Vision	Hearing	Social/ Emotional	General Intelligence/ Cognitive Functioning	Academic Achievement	Communication	Motor
Audiologist			X				X	
Teacher of the Visually Impaired		X						
Nurse	X							
Occupational Therapist (OT)								X

Physical Therapist (PT)								X
School Psychologist			X	X	X			
Counselor			X					
Social Worker			X					
General Education Teacher					X			
Special Education Teacher			X		X			
Speech-Language Pathologist (SLP)					X	X		

Step Three: For each relevant domain, decide if there is sufficient information to determine:

- Present levels of academic and functional performance and educational needs (including student’s strength/skills);
- Whether the student has or continues to have a disability;
- Whether measurable data shows the disability is adversely affecting the student’s education; and
- Special education and related services, including supplementary aids and services (e.g., AT, alternative augmentative communication device, etc.), that the student may need to participate and make progress in the general curriculum and to improve educational performance.

If existing information is adequate for each relevant domain area (no additional information needed), no additional assessments must be conducted. However, the parent/guardian must be informed that no additional information is needed and must be in agreement.

If the parent/guardian agrees that no additional evaluation information is needed and returns the signed *Parent/Guardian Consent for Evaluation form*, the 60-school-day FIE time frame begins and the local school district representative should ensure an IEP meeting is scheduled to determine eligibility prior to the expiration of this time frame.

***NOTE:** Any consent obtained from the parent is sufficient for one calendar year. If more than a year has passed and the necessary evaluation information has not been obtained/completed by the team, then the local school district representative will have to receive a new consent form from the parent/guardian in order to begin/continue the evaluation process.*

If the parent/guardian disagrees, the local school district representative, within 10 calendar days after a parent/guardian requests additional assessment(s), must either (1) revise the *Assessment Planning* form and provide the parent/guardian with written notification that additional evaluation information will be obtained or (2) provide the parent/guardian with written notification that the school will not conduct the additional requested assessment(s) and the basis for this decision.

Step Four: If existing information is NOT adequate for each relevant domain area, determine what additional information is needed and the sources from which it will be obtained. This is documented on the *Consent for Evaluation: Additional Information Needed* form which must be provided to the parent/guardian who is asked to provide written consent to the proposed evaluation on the *Parent/Guardian Consent for Evaluation form*.

The consent form should identify general information regarding the type of instruments and/or procedures to be utilized. It should not include names of specific diagnostic instruments. Additionally, the consent form should indicate, at a minimum, the title of the individual who will obtain the additional data.

If the parent/guardian does not consent to the proposed evaluation or reevaluation after the necessary attempts to obtain consent have been made, the school must immediately contact the Law Department at (773) 553-1700 to determine if a due process hearing will be requested by CPS. If the parent/guardian does not return the consent form, after the necessary attempts to obtain consent have been made, to a proposed reevaluation, the IEP team can move forward by conducting a review of records.

NOTE: *For re-evaluations, consent must be obtained OR 3 attempts must be made to obtain consent, including a 3rd attempt via certified mail in order to finalize the CAP document. Prior to making the 3rd attempt, contact the parent/guardian (or student if they are over 18 years old) and inform them that without consent to evaluate, the team will only be able to proceed with a records review. The attempts to send the consent form must be made at least 10 days after the first and second attempt was made.*

FULL AND INDIVIDUAL EVALUATION (FIE)

An FIE is the process used to determine a student's needs and eligibility for special education and related services under the IDEA. In conducting the evaluation, a variety of assessment tools and strategies must be used to determine whether the student meets eligibility criteria. The IEP team must design the FIE to include assessments in all areas related to the suspected disability, in one or more of the following eight (8) domains, if appropriate: health, vision, hearing, social/emotional status, general intelligence/cognitive functioning, academic performance, communicative status, and motor abilities. The evaluation must be sufficiently comprehensive to identify the student's special education needs.

Initial Evaluation

An initial evaluation is one that determines eligibility for the first time for a student. The initial evaluation must be completed and the IEP team must determine eligibility for special education and related services within 60-school-days after the date the parent/guardian provides written consent to conduct the FIE. ***When there are fewer than 60-school days left in the school year, and the parent/guardian has provided written consent, the eligibility determination and the IEP (if the student is eligible) must be completed prior to the first day of student attendance in the next school year.***

The 60-school-day time frame does not apply if:

- The parent/guardian repeatedly fails or refuses to produce their child for the evaluation;
- A student transfers into CPS after the 60-school-day time frame has begun and prior to an eligibility determination by the student's previous district. ***This exception applies only if staff is making sufficient progress to ensure prompt completion of the evaluation, and the parent/guardian and the local school district representative agree to a specific time when the evaluation will be completed;*** and
- For students suspected of having a specific learning disability, the local school district representative and the parent/guardian may agree in writing to extend the 60-school-day time frame if necessary to collect sufficient MTSS or other response to intervention data. This agreed-upon extension cannot be longer than 20-school days and should only be used in extraordinary circumstances.

Reevaluation

There are three types of reevaluations.

1. **Triennial:** a reevaluation must be conducted for each student with a disability who is receiving special education and/or related services at least every three years from the date of the last eligibility determination, to determine if they are still eligible.
2. **Reevaluation prior to triennial:** for this type of evaluation the 60-school-day time frame for initial evaluations applies.
3. **Evaluation to consider a related service:** a request may be made prior to the 3-year reevaluation date to determine if an additional related service is required. For this type of evaluation, the 60-school day time frame for initial evaluations applies. This type of evaluation may be requested to consider the addition or removal of a related service based on a written request by the teacher, related service provider and/or student's parent/guardian because of a significant change in the student's educational needs, including improved academic achievement and functional performance.

A reevaluation is NOT required for a student prior to terminating their eligibility for special education services due to the student's graduation from high school with a regular high school diploma, or for a student who is no longer eligible for a public education based on age (the end of the school year during which the student turns 22). In this case, the local school district representative facilitates the development of a *Summary of Performance* that includes information about the student's desired post-secondary goals; academic achievement and functional performance; and recommendations on how to assist the student in meeting their postsecondary goals.

THE EVALUATION PROCESS

Evaluators must ensure that their assessments are selected and administered in a nondiscriminatory manner. Instruments and procedures used by evaluators and considered by the team must be:

- Selected and administered so as not to be discriminatory on a racial or cultural basis;
- Provided and administered in the child's primary language or other mode of communication and in the form most likely to yield accurate information about what the child knows and can do academically, developmentally, and functionally;
- Used for the purposes for which the assessments or measures are valid and reliable;
- Administered by trained and knowledgeable personnel;
- Administered in accordance with any instructions of the producer of the assessments;
- Tailored to assess specific areas of educational need and not merely those that are designated to provide a single general IQ; and
- Selected and administered so as to best ensure that if an assessment is administered to a child with impaired sensory, manual, or speaking skills, the assessment accurately reflects the child's aptitude or achievement level or whatever other factors the test purports to measure.

Evaluations must be conducted in a manner that is not discriminatory with respect to language, culture, race, and gender as follows:

- The languages used to evaluate are consistent with the primary language or other mode of communication of the student. If the language use pattern involves two or more languages or modes of communication, the student must be evaluated by qualified specialists or, when needed, qualified bilingual specialists using each of the languages or modes of communication used by the student.
- Tests and assessments are written and administered in the primary language or conducted in the mode of communication most familiar to the student, unless it is clearly not feasible to do so.
 - Primary Language: predominant language used in the student's home (i.e., language usually used for communication by the student and parents/guardians, siblings and other family member(s));
 - Clearly Not Feasible: no individual within the greater Chicagoland area can be identified who is capable and willing to communicate effectively with the student and/or parents/guardians for a reasonable fee.
- If documented efforts to locate and secure the services of a qualified bilingual specialist are unsuccessful, a certificated CPS employee or other individual who has demonstrated competencies in the student's language can assist a qualified specialist.
- If documented efforts to locate and secure the services of a qualified bilingual specialist or a qualified specialist assisted by another are unsuccessful, a variety of assessment techniques that limit the impact of language acquisition to the greatest degree possible are employed.
- Tests given to a student whose primary language is other than English are relevant, to the maximum extent possible, to their culture.
- If a student's receptive and/or expressive communication skills are impaired due to hearing and/or language deficits, test instruments and procedures are used that do not stress spoken language. One or more of the following methods are used:
 - Visual communication techniques in addition to auditory techniques.
 - An interpreter to assist the evaluative personnel with language and testing.

All test protocols (consumable test booklets, behavior rating scales, drawings, etc.) must be placed in a sealed envelope and kept in the student's temporary record that is in a secure and locked location. When a parent/guardian requests a student's educational records and a test protocol includes a student's name and/or work, contact the Law Department at (773) 553-1700 for guidance regarding the parent/guardian's right to access the test protocol.

Evaluation Components

- Document the sources and assessment methods used, information and results obtained and the date of the assessment.
- Use language that is problem/issue-focused, educationally relevant, succinct, devoid of as much jargon as possible and written in language that may be readily understood by staff and parents/guardians.
- Finalize the *Learning Environment Interventions (LEI)* document for students suspected of having a specific learning disability, which includes a teacher completing the first section of the LEI and another IEP team member conducting an observation and completing the *Learning Environment Screening (LES)*.
- Analyze data, interpret results, and, where applicable, compare prior assessment results, including strengths and weaknesses. The mere collection of data without analysis or synthesis does not benefit instruction.
- Include recommendations that can be used by school staff to effectively impact instruction and transition planning.
- Include recommendations for incorporating direct specialized instruction, curricular accommodations and/or modifications, supplemental aids and services; and related services, if needed.
- Document whether any evaluation component could not be completed due to lack of parent/guardian involvement, religious convictions of the family or inability of the student to participate; state what components are missing and why they were not completed. This information is needed so that the team of evaluators can assess the effects of these variances on the validity and reliability of the information reported and determine whether additional assessments are needed.
- Indicate whether the assessment was conducted under nonstandard conditions and describe how and the extent to which it varied from standard conditions. (For example, the use of a translator when a qualified bilingual professional is not available creates a nonstandard condition.)

Evaluation Reports

The evaluation report synthesizes each evaluator's individual report based on the relevant domain(s). A draft report must be completed at least three (3) school days prior to the meeting and signed by the individual conducting the assessment. All evaluation reports must be finalized by the conclusion of the Eligibility Determination meeting.

When writing individual reports of evaluative data, staff should consider the following non-exhaustive list of information that pertains to each relevant domain. Each report should summarize assessment results clearly, concisely and with language that is understandable and useful to general/special educators and families. In addition, the reports provide information that will support the student's educational planning.

Academic Achievement Domain

- Provides baseline data of the student's academic achievement in the current general education curriculum;
- Describes current levels of academic performance (including strengths and needs);
- Describes instructional levels based on the assessment results (e.g., mastery, instructional and frustration reading levels);

- Identifies learning styles (e.g., listening, visual, speaking, writing, etc.) and strategies that have been utilized with the student;
- Describes classroom participation, work habits, study habits;
- Describes on-task behavior and independent functioning;
- Describes student's functional performance in the educational setting, including how the student is managing daily activities to participate in the general education setting;
- Identifies useful accommodations and modifications (e.g., AT, alternate text format);
- For students suspected of having a specific learning disability, a LEI and LES MUST be completed as part of the evaluation; and
- For English Learners (ELs), describes relative performance in primary language and recommended language for instruction.

General Intelligence/Cognitive Functioning Domain

- Addresses the assessment results, including tests/ procedures, scores, and dates; and
- Provides a narrative of the student's general cognitive abilities and functioning (e.g., reasoning, problem-solving, memory, attention, concept formation, perceptual skills, cognitive processing and/or executive functioning skills, etc.).

Communication Domain

- Describes the student's current levels of communication functioning: articulation, expressive and receptive language, fluency, voice, oral motor and/or feeding skills;
- Provides a narrative summary of the student's communication needs and how this affects participation and progress in the general education setting;
- For students with no verbal or written language skills, describes the student's mode of communication (e.g., sign language or AT/AAC device, etc.) used to receive and communicate information to others;
- For students who are deaf or hard-of-hearing, describe the student's language and communication needs, mode of communication and suggested opportunities for direct communication with peers and adults. In addition, describes any need for assistive listening devices in the classroom for these students and those with central auditory processing issues; and
- Indicates if the student has limited English proficiency and, if so, indicates the current status in English language acquisition, and how the student's English language proficiency affects communication and instructional implications.

Social/Emotional Status Domain

- Describes the student's social, emotional, and/or behavioral functioning and interpersonal relationships (e.g., development and maintenance, behavior toward others, compliance with rules, etc.) and/or personal adjustment (self-concept, attitudes, coping, etc.);
- Describes relevant behavior, if any, noted during the observation of the student and the relationship of that behavior to the student's academic or functional performance, including:
 - Factors in student's social/emotional functioning and well-being that impact educational performance;
 - Ability to develop and maintain positive interpersonal relationships with peers and adults and to comply with social rules;
 - Self-concept, attitude toward school, coping skills and feelings;
 - Mood (e.g., depression, unhappiness, fears associated with personal or school problems, etc.);
 - Behavior in school (e.g., classroom, hallway, bus, lunchroom, etc.) and its impact on academic performance;
 - Ability to function independently based on developmental norms;
 - Ability to exhibit age-appropriate adaptive skills; and

- o Extent to which student demonstrates an understanding of the impact and consequences of behavior, if behavior impedes student's learning or that of others;
- Describes positive behavioral interventions and reinforcements that can be used to support the student, including implications for instruction and necessary support.

Health Domain

- Provides a narrative summary of the student's existing mental or physical health condition(s), which includes additional evaluation data needed and sources from which data will be obtained;
- Additional evaluation data gathered by completing the appropriate school nurse assessment (initial school nurse assessment, school nurse re-evaluation or school nurse summary). Request current orders from primary care providers;
- Data will be obtained from the following sources: student observation, parent/guardian interview and review of school health records;

Motor Abilities Domain

- Provides a narrative summary of the student's motor abilities in the educational setting, including a statement of how the student's motor skills impact the ability to participate and progress in the general education curriculum;
- Describes any fine and/or gross motor or sensory deficits that adversely impact the student's ability to manipulate objects and/or move bodies effectively and safely in their environment; and
- Summarizes any fine and/or gross motor or sensory deficits that impact the student's overall school participation and occupational performance in the curriculum and across all activities and contexts in the school day.

Hearing/Vision Domain

- Provides a narrative summary of any visual problems that would interfere with testing or educational performance. Summarizes the date and results of the most recent hearing screening and most recent vision screening, including who conducted the hearing/vision screening;
- Describes the near and distant vision acuities and impact on academic and/or functional performance, and any hearing loss based on audiological evaluation and impact on academic and/or functional performance; and
- For students with a visual and/or hearing disability, provide a narrative summary of evaluation results.

When the parent/guardian has provided a private evaluation report conducted since the last FIE or IEP meeting, if any, the appropriate RSP (e.g., school psychologist if the report was from a clinical psychologist) should include in the evaluation report:

- A summary of the private evaluator's findings;
- A statement of agreement or disagreement, in full or in part, with the private evaluator's recommendations; and
- The basis for the RSP's agreement or disagreement with the private evaluator's recommendations or findings.

The private evaluation report must be uploaded into SSM and attached to the student's file.

Additional Considerations for Students with an Autism Spectrum Disorder

Illinois law requires the following information to be considered when developing an IEP for a student with an autism spectrum disorder. When such disabilities are suspected, each evaluation report must address the student's academic, developmental, and functional needs and make recommendations in the following areas, as relevant, to support any subsequent IEP development:

- Verbal and nonverbal communication;
- Social interaction skills and proficiencies;
- Any unusual responses to sensory experiences;
- Any resistance to environmental change or change in daily routines;

- Engagement in repetitive activities and stereotyped movements;
- Need for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from an autism spectrum disorder; and
- Other recommendations to assist the student to progress in the general curriculum, including social and emotional development.

ELIGIBILITY DETERMINATION

The IEP team meets 10-calendar days or more after the parent/guardian receives the *Parent/Guardian Notification of Conference*, and before the 60-school day time frame elapses for initial FIEs or the reevaluation date, to review the information gathered through the evaluation process. The parent/guardian may waive the 10-calendar day notice for the IEP meeting but the waiver must be in writing. The IEP team determines whether or not the student meets the criteria for eligibility, if the disability has an adverse impact on the student's educational performance, and whether special education services are required. The IEP team documents their decision using the *Eligibility Determination* form. Draft copies of the evaluation reports **MUST** be provided to the parent/guardian at least three school days prior to the meeting. At the meeting, the *Eligibility Determination* form and evaluation reports should be projected to support meaningful parent/guardian participation in the FIE discussion. If the documents cannot be projected, the parent/guardian must be given either access to a District computer or paper copies of the evaluation reports.

Participants

The local school district representative convenes an IEP team based on the student's presenting problem(s) and the suspected disability area(s). Pursuant to the IDEA, the following are required IEP team participants:

- One or both of the student's parents/guardians;
- At least one general education teacher, if the student is or may be participating in the general education environment. The general education teacher who serves as a member of a student's IEP team should be a teacher who is, or may be, responsible for implementing a portion of the IEP, so that the teacher can participate in discussions on how best to instruct the student;
- At least one special education teacher. (If the child is receiving only speech and language services, the Speech-Language Pathologist shall fulfill this role.);
- For students who are 3 to 5 years of age, an individual qualified to teach preschool students without disabilities;
- An individual who can interpret the instructional implications of the evaluation result. (A person may assume this role in addition to another role at the conference.);
- A representative of CPS (District Representative) who is qualified to supervise the provision of special education services, is knowledgeable about the general education curriculum and available resources, and is authorized to commit resources on behalf of the District. (If a representative from ODLSS attends the meeting, that person acts as the District Representative and should be identified on the *Parent/Guardian Notification of Conference* as such.);
- Every CPS staff person involved in conducting an assessment; and
- The student, if a purpose of the conference is to plan transition services (usually age 14-1/2 and older), the student is age 18 or older, or if the parent/guardian chooses to have the child participate at any age.

The IEP team must also include:

- At the discretion of the parent/guardian or CPS personnel, other individuals having knowledge or special expertise regarding the child (e.g., child welfare specialist if the student is a ward of the State, etc.);
- A qualified bilingual specialist or bilingual teacher, if the student is EL or the presence of such a person is needed to assist the other participants in understanding the child's language and cultural factors as they relate to instructional needs;
- A person knowledgeable about positive behavior strategies, if the child's behavior impedes their learning or the learning of others; and
- Interpreter for individuals who have limited English proficiency or who are deaf.

A single member of the IEP team, except the general education teacher, may meet two or more of the qualifications specified above, so long as they are identified on the *Parent/Guardian Notification of Conference* as such.

Making the Eligibility Determination

When determining if a child has a disability under the IDEA, the IEP team must:

- Review MTSS or other response to intervention data for students suspected of having a specific learning disability;
- A classroom teacher and another IEP team member must complete the *Learning Environment Interventions (LEI)* and *Learning Environment Screening (LES)* documents for students suspected of having a specific learning disability, which includes a classroom observation;
- Review and consider all assessment data, including results from any independent evaluations;
- Use the results of more than a single assessment or evaluation procedure; and
- Ensure the determinant factor for any disability determination is not the student's lack of appropriate instruction in reading or math, or because of limited English proficiency.

Step One: Summarize on the *Eligibility Determination* form pertinent information about each relevant domain.

The IEP team reviews the evaluation findings with the parent/guardian during the IEP meeting. If additional information and/or changes need to be made, based on what is shared by the parent/guardian and/or another team member at the meeting, it should be included in the summary of that domain on the Summary of Assessment section of the *Eligibility Determination* document.

Step Two: Determine if the student meets eligibility for one or more of the 14 disability categories.

After the IEP team reviews all of the information pertinent to each relevant domain, the IEP Team must decide whether they believe the student has a disability. If the team suspects the student has one of the disabilities discussed below, the team determines whether the **determinant¹ factor** for any suspected disability is one or more of the following:

- Lack of appropriate instruction in reading, including the essential components of reading instruction which include explicit and systematic instruction in phonemic awareness, phonic, vocabulary development, reading fluency including oral reading skills and reading comprehension;
- Lack of appropriate instruction in math; or
- Limited English-language proficiency.

If the answer to any of the above is “Yes,” the student is NOT eligible for services under IDEA for the disability under consideration. If the answers are all “No,” based on the totality of the assessment data, the IEP team must determine whether the student exhibits any of the characteristics of one or more of the following disabilities and if yes, identify the disability on the *Eligibility Determination* form. If it is determined that the student does not have any IDEA-recognized disabilities, “No” should be indicated on the *Eligibility Determination* form, and the student is NOT eligible for services under the IDEA for the disability under consideration. The IEP team should consider whether the assessment data indicates the student might be eligible under Section 504. If yes, a Section 504 meeting should be convened.

Disability Categories and Eligibility Criteria

The 14 IDEA disability categories and eligibility criteria are as follows:

¹ “Determinant” means the primary factor.

Autism: A developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three that adversely affects a child's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. The term includes any autism spectrum disorder that adversely affects educational performance. The term does not apply if a student's educational performance is adversely affected primarily because the child has an emotional disability.

***NOTE:** For students suspected of being on the autism spectrum, a psychological evaluation and/or social work evaluation must be conducted.*

Deaf/Blindness: The student exhibits concomitant hearing and visual disabilities, the combination of which causes severe communication, developmental, and educational needs that cannot be accommodated by special education services designed solely for students with either deafness or blindness.

Deafness: A hearing impairment that is so severe that the student is impaired in processing linguistic information through hearing, with or without amplification that adversely affects a student's educational performance.

Developmental Delay (age 3 through 9 only): Delay in physical development, cognitive development, communication development, social or emotional development, or adaptive development.

***NOTE:** For students suspected of or having a developmental delay, at least one related service provider must conduct an evaluation.*

Emotional Disability: (This includes schizophrenia but does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disability) A condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance:

- An inability to learn that cannot be explained by intellectual, sensory, or health factors;
- An inability to build or maintain satisfactory interpersonal relationships with peer and teachers;
- Inappropriate behavior or feelings under normal circumstances;
- A general pervasive mood of unhappiness or depression; or
- A tendency to develop physical symptoms or fears associated with personal or school problems.

***NOTE:** For students suspected of or having an emotional disorder, a psychological evaluation and/or social work evaluation must be conducted.*

Hearing Impairment: An impairment in hearing, permanent or fluctuating, that adversely affects a child's educational performance but that is not included under the definition of deafness.

Intellectual Disability: (Mild, Moderate, Severe/Profound) Cognitive development significantly below that of their typically developing peers, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, that adversely affects a child's educational performance.

***NOTE:** For students suspected of or having an intellectual disability, a psychological evaluation must be conducted and a recommendation for eligibility must be made by a school psychologist.*

Multiple Disabilities: Concomitant impairments (such as intellectual disability-blindness, intellectual disability-orthopedic impairment, etc.), the combination of which causes severe educational needs that cannot be accommodated in special education programs solely for one of the impairments. (Does not include deaf/blindness.)

Other Health Impairment: Limited strength, vitality, or alertness, including a heightened alertness to environmental stimuli that results in limited alertness with respect to the educational environment, due to chronic or acute health problems such as a heart condition, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, attention deficit hyperactivity disorder (ADHD), leukemia, diabetes, rheumatic fever, or Tourette syndrome, and adversely affect a child's educational performance.

Physical (Orthopedic) Impairment: A severe orthopedic impairment that adversely affects a child's educational performance. The term includes impairments caused by a congenital anomaly, disease or other cause (e.g., cerebral palsy, amputation, fractures, or burns).

Specific Learning Disability (SLD): A disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia.

***NOTE:** For students suspected of having a specific learning disability, before the IEP team can determine whether the student has a specific learning disability, they must complete the steps described below (pages 32-34). Additionally, ODLSS recommends that the school psychologist be part of the IEP team for this discussion given their expertise in data analysis and basic psychological processes.*

Speech or Language Impairment: A communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment that adversely affects a child's educational performance.

Traumatic Brain Injury: An acquired injury to the brain, caused by an external force. This injury results in total or partial functional disability, or psychosocial impairment, or both, that adversely affects the student's educational performance. This term does not apply to brain injuries that are congenital, degenerative or induced by birth trauma.

***NOTE:** For students suspected of or having a traumatic brain injury, a psychological evaluation must be conducted.*

Visual Impairment: An impairment in vision that, even with correction, adversely affects a child's educational performance (includes both partial sight and blindness).

Step Three: Determine if the student's disability adversely affects educational performance.

If the IEP team determines that a student has characteristics of one or more disability areas, the team must next determine whether the student's disability adversely affects educational performance. Educational performance includes academic as well as functional performance (e.g., behavior, social, communication skills, adaptive/independent living skills, etc.) If no, there is no adverse effect, the student is NOT eligible for special education and/or related services. If yes, the IEP team must proceed to Step 4.

Step Four: Determine if the student requires special education and related services.

Next, the IEP team must determine if the student requires special education and related services to address the adverse effect of the disability on educational performance. If yes, the student is eligible and the IEP team should identify the student's specific needs and proceed to drafting the student's IEP that addresses those needs. If the student does not require special education to address the adverse effect of the disability on educational performance (i.e., the student's disability can be accommodated in the general education classroom without the services of a special education teacher/specially designed

instruction **or** the student only requires related services), the student is not eligible for special education and no IEP will be developed. The student may be eligible under Section 504 so consider completing the *Section 504 Eligibility Determination* forms at another meeting for that purpose.

Eligibility determination is reached through consensus by the IEP team. Consensus is defined as a general agreement, not necessarily unanimous agreement. It is a judgment arrived at by most of those involved. If consensus cannot be reached, the school must provide the parents/guardians with a written copy of the school's proposals or refusals or both, regarding the child's educational program, and the parents/guardians have the right to seek resolution of any disagreements as outlined in the procedural safeguards.

If a team member feels that the eligibility determination does not reflect their conclusion, that team member **must** submit a separate statement presenting their conclusion. This written statement should be completed on the *Dissenting Opinion* form.

The *Eligibility Determination* form must be provided to the parents/guardians. Parents/Guardians who disagree with the IEP team's conclusions may seek resolution as outlined in the procedural safeguards.

Eligibility Criteria for Students Suspected of Having a Specific Learning Disability (SLD)

As part of an initial or reevaluation to determine SLD eligibility, a *Learning Environment Interventions* (LEI) document must be completed by a teacher and another school-based IEP team member must conduct an observation and complete the *Learning Environment Screening* (LES).

When determining SLD eligibility, documentation must show that the student's low achievement is NOT due to the lack of high quality Tier 1 instruction, or a lack of targeted and appropriate Tier 2 and Tier 3 interventions that were provided and progress-monitored with fidelity, consistent with the MTSS/Response to Intervention (RTI) framework. When reevaluating students already identified as having a specific learning disability, progress monitoring data should also be included in the reevaluation process. These data may be obtained via progress toward IEP goals or via MTSS progress monitoring data.

If appropriate interventions were not implemented with fidelity for the student and/or sufficient qualitative and quantitative data² was not collected to consider the student's response to the interventions, the local school district representative and the parent/guardian may agree to an extension of the evaluation time frame. An extension of no more than 20 school days should only be agreed upon in extraordinary circumstances. If the parent/guardian does not consent to an extension, the District must complete as many evaluation activities as possible and convene an FIE/IEP meeting within the existing time frame.

An IEP team may decide that a student has a specific learning disability only if documentation and a required classroom observation, either before or after a referral for special education evaluation, shows that **ALL** of the following criteria are met:

CRITERIA 1: LACK OF ADEQUATE ACHIEVEMENT

² Qualitative and quantitative data in this context means data that describes the types of scientifically or evidence-based interventions utilized with the student which are directly linked to the area of deficit; the interventions were delivered with integrity; the expected outcome of those interventions; the student's actual responses to the interventions and rate of progress; how often the student's progress was monitored; and the amount of time the intervention was provided to demonstrate sufficient time was allowed for change to occur in the student's skill level (e.g., two different interventions for a minimum of five-weeks each).

The student falls significantly below age or State-approved grade level standards in one of the following areas: (i) oral expression; (ii) listening comprehension; (iii) written expression; (iv) basic reading skills; (v) reading fluency skills; (vi) reading comprehension; (vii) mathematics comprehension; and/or (viii) mathematics problem solving. This criteria is supported when **ALL** of the following exist:

- A. **Qualitative and quantitative data from a variety of sources show the gap** between the student's current performance and age- or grade-level standards in reading, math, written expression, oral expression and/or listening comprehension, as applicable. The selected and administered assessment tools are linguistically and culturally appropriate;
- B. **For an EL, the student's limited English language proficiency (if applicable) has been ruled out as the primary cause** for the student's lack of adequate achievement (as further described in Criteria 3 and 4 below);³
- C. **Appropriate curriculum-based assessment measures** document the student's performance in reading, math and/or written expression, as applicable. The measures are aligned with learning expectations at the student's age and grade level and use content-controlled materials. There must be evidence that scores were reliable, valid estimates of the student's performance and predict future success at that grade level;
- D. **Data based on standard administration procedures**, and the validity of the administration and scores was verified;
- E. **Data aligned with the student's learning expectations** for the relevant point in the school year; and
- F. **Consideration of differences in the student's culture or language** when interpreting their assessment data.

Based on all of the above considerations, is the student performing significantly below grade level peers in one or more of the above-listed areas on (1) State assessments and (2) District grade level norms from universal screening after receiving scientific, research-based intervention? Typically, the "average range" on a norm-referenced assessment is considered to be between the 25th and 75th percentile. Students who perform at or below the 10th percentile are typically considered to be significantly below their grade level peers.

CRITERIA 2: LACK OF SUFFICIENT PROGRESS

The student demonstrates a lack of sufficient progress, to meet age or State-approved grade level standards in one or more of the above areas, after receiving scientific, research-based interventions. This criterion can be met through the provision of MTSS or other response to intervention and documenting the implementation of the MTSS/Response to Intervention framework. This criterion is supported when either: (i) evidence that prior interventions have not sufficiently improved the student's progress; or (ii) evidence shows that prior interventions have sufficiently improved the student's progress, but are so intensive that they cannot be implemented long-term except through the special education process.

If appropriate interventions were not implemented with fidelity for the student and/or sufficient qualitative and quantitative data was not collected to consider the student's response to the interventions, the local school district representative meets with relevant IEP team members to consider the need to ask the parent/guardian to agree to an extension of the evaluation time frame.

³ For ELs, the IEP team must include at least one person who is knowledgeable about: (i) the development of English language skills; (ii) related achievement skills for the student's age and language/cultural background; and (iii) analyzing data relevant to EL students suspected of having an SLD.

NOTE: In determining whether a student has a specific learning disability, CPS does not use the “pattern of strengths and weaknesses” and/or “severe discrepancy” (i.e., IQ vs. achievement) models.

CRITERIA 3: LACK OF ACHIEVEMENT AND PROGRESS NOT PRIMARILY DUE TO OTHER FACTORS

As relevant to the student, the IEP team must review the qualitative and quantitative data and conclude that the student’s lack of adequate achievement and lack of sufficient progress is NOT primarily⁴ the result of:

A. A visual, hearing or motor disability;

B. An intellectual disability;

C. An emotional disability;

D. Environmental or economic disadvantage or cultural factors (e.g., communication patterns, behavioral expectations and/or prescribed cultural factors). To consider these factors, the IEP team considers information such as the following:

- Socio-economic status;
- Family mobility;
- Number of schools attended;
- School attendance;
- Family change such as divorce or death;
- Substandard housing;
- Inadequate nutrition and food insecurity;
- Severe physical/psychological trauma; or
- Exposure to violence in the community.

E. A student’s limited English language proficiency. As noted above, the IEP team must include at least one person knowledgeable about: (i) the development of English language skills; (ii) related achievement skills for the student’s age and language/cultural background; and (iii) analyzing data relevant to students suspected of having an SLD. Further, all assessments conducted must be linguistically and culturally appropriate in order to ensure an appropriate determination that a student’s limited English language proficiency is not the primary cause of his or her lack of adequate achievement/sufficient progress.

CRITERIA 4: LACK OF APPROPRIATE INSTRUCTION IN READING OR MATH

The student’s lack of adequate achievement and lack of sufficient progress is not due to the lack of appropriate instruction from qualified personnel in reading or math. In order to demonstrate that appropriate instruction from qualified personnel in reading and math has been provided, the IEP team must provide the following qualitative and quantitative data:

A. Data demonstrating the provision of appropriate instruction from qualified personnel.

Qualitative and quantitative data documenting satisfaction of the following requirements: (i) use of a scientifically-based curriculum; (ii) implementation with integrity; and (iii) assessment for impact on outcomes for all students.

⁴ “Primarily” means the predominant basis.

NOTE: When the student is an EL, the team must also document: (i) provision of appropriate language acquisition programming; (ii) delivery by teacher(s) knowledgeable regarding language acquisition and competence; and (iii) effectiveness of core curriculum for EL students.

B. Data documenting repeated assessments.

Qualitative and quantitative data documenting repeated assessments of achievement at reasonable intervals as follows: (i) local universal screening/benchmarking collected on all students at multiple times throughout the school year; and (ii) repeated progress monitoring to determine the effectiveness of interventions.

NOTE: When the student is an EL, the team must also document appropriateness of assessments in light of any limitations in the student's English language proficiency, including assessment of the student's English language proficiency, assessment in the student's primary language to degree appropriate and measurement based on State standards for EL students.

C. Evidence that both universal screening/benchmarking data and progress monitoring data have been provided to the student's parent/guardian.

Eligibility Criteria for English Learners (EL) Suspected of Having a Disability

The following criteria govern an IEP team's decision that an EL student needs special education/related services⁵. This decision is based on evaluation results showing the student's disability is not primarily due to limited English proficiency or lack of linguistically/culturally appropriate instruction. To demonstrate that, **EACH** of the following must be met:

CRITERIA 1: STUDENT RECEIVED APPROPRIATE LANGUAGE INSTRUCTION/SUPPORTS

The student received appropriate language instruction/supports, as determined by considering **ALL** the following:

- A. Years of EL Instruction.** Appropriate and consistent Transitional Bilingual Education (TBE)/Traditional Program Instruction (TPI) placement, according to relevant program requirements:
- TBE applies to schools enrolling 20 or more ELs of the same language classification. This bilingual program model provides primary language instruction in core academic areas and English as a Second Language (ESL) instruction; and
 - TPI applies to schools enrolling 19 or fewer ELs of the same language classification. This program model provides ESL and ESL accommodations and primary language support, where possible, in core academic areas.
- B. Meaningful access to content and language development** as demonstrated by the following:
- TBE provided primary language instruction in core academic areas (language arts, math, science, and social studies); and English as a Second Language (ESL) instruction; or
 - TPI provided ESL and ESL accommodations and primary language support, where possible, in core academic areas; and
 - When transferring to a CPS school, TBE/TPI instruction was provided in a timely manner, providing the student with consistent access to EL services/programming;
 - When latest EL Monitoring Report for the school reflected a partial or minimal rating, evidence shows the student's instruction was not negatively impacted by school practices that produced this rating; and

⁵ These criteria do not apply to students with assessment data and disability eligibility criteria that do not rely on language acquisition to determine the presence of a disability and need for special education, e.g., ELs with a medically-determined physical disability, traumatic brain injury, blindness, deafness, or visual disability.

- Tiered interventions were provided and progress monitored with fidelity, consistent with the MTSS framework.
- C. **Receipt of instruction by qualified teachers**, as demonstrated by each of the following:
- Properly licensed bilingual/ESL teachers with endorsement(s) in the language, grade level(s), and subject area(s) taught, and having a bilingual endorsement(s).
- D. **Classroom environment and materials** reflected:
- Curricular information was linguistically accessible, grade level appropriate, and culturally relevant in collaboration with the Office of Language and Cultural Education (OLCE).
 - Instruction was conducive to the EL's learning⁶.

CRITERIA 2: FAILURE TO DEVELOP AGE-APPROPRIATE PRIMARY LANGUAGE SKILLS

Despite receiving appropriate primary language instruction and/or supports as referenced in Criteria 1, the student failed to develop age-appropriate primary language skills.

The student has:

- English language proficiency scale scores (based on the ACCESS language domains) that have remained at the same level for more than one year; and
- Persistent learning difficulties in both the primary language and English.

CRITERIA 3: LOW ACHIEVEMENT/BEHAVIOR

The student's low achievement/behavior is **NOT** primarily due to the student's:

- English acquisition; and/or
- Additional special factors, such as:
 - Refugee or immigrant status;
 - Acculturation;
 - Interrupted schooling; and/or
 - Racial or ethnic bias.

CRITERIA 4: CRITERIA RELEVANT TO ONE OR MORE DISABILITY CATEGORIES

The student meets criteria relevant to one or more disability categories, e.g., specific learning disability⁷, and needs special education/related services to benefit from an education.

Notifying Parents/Guardians of Eligibility Determination Decision

The *Parent/Guardian Notification Conference Recommendations* form notifies parents/guardians of the eligibility determination results. If the student is eligible for special education, the form is completed and provided to parents/guardians along with the *Eligibility Determination* form **and** the IEP. If a decision has been reached that the student is not eligible for special education, the local school district representative gives parents/guardians the *Parent/Guardian Notification Conference Recommendation* form, along with the *Eligibility Determination* form. In either case, the parent/guardian receives the *Explanation of Procedural Safeguards for Parents/Guardians of Students with Disabilities*.

⁶ Conducive learning environments include but are not limited to: extensive use of visuals; explicit oral language instruction; teaching of vocabulary and background knowledge; multiple response opportunities; interaction with non-EL peers; incorporation of language/ content objectives and comprehensible input; and frequent opportunities for practice.

⁷ In addition, the SLD criteria are used to determine the presence of this disability, and the related services guidelines are used when discussing the need for services from a RSP.

Parent/Guardian Consent for Initial Services

The IDEA requires schools to obtain informed written parent/guardian consent before the initial provision of special education and related services may be provided to a student. Therefore, the IEP team should not proceed to develop the student's initial IEP if the parent/guardian has not consented to the provision of special education and related services. The parent/guardian consents by signing and dating the *Parent/Guardian Consent for Initial Provision of Special Education and Related Services*.

If the parent/guardian refuses to consent to the initial provision of special education and related services, the IEP team does not have to develop an initial IEP; however, developing an initial IEP may assist the parent/guardian in making the decision to consent to the initial provision of special education and related services.

If the parent/guardian consents to the initial provision of special education and related services, the school must develop an IEP. The provision of services cannot begin until 10 calendar days have passed from the receipt of the signed consent unless the parent/guardian waives the 10-day requirement. The school should use the *Conference Recommendation* form to indicate the waiver of the 10 days for provision of services.

Observations by Parents/Guardians, Independent Evaluators, or Other Qualified Professionals

To ensure that a parent/guardian can participate fully and effectively with school personnel in the development of appropriate educational and related services for their child, the parent/guardian, independent educational evaluator, or a qualified professional retained by or on behalf of the parent/guardian must be afforded reasonable access to educational facilities, personnel, classrooms, and buildings and to the student. This requirement pertains to any CPS facility, building, or program, including nonpublic facilities in which CPS has placed a student receiving special education services.

Prior to an observation, the parent/guardian must inform the principal in writing of the proposed visit, its purpose, and the requested duration using the [ODLSS Request for Observation](#) form. The parent/guardian and the principal/designee must arrange the visit(s) at times that are mutually agreeable. The principal must afford the parent/guardian, independent educational evaluator, or qualified professional access of sufficient duration and scope for the purpose of conducting an evaluation of the student, the student's performance, current/proposed educational program, placement, services, or environment. Such access may include interviews of educational personnel, student observations, assessments, and tests/assessments. If one or more interviews of school personnel are part of the evaluation, the interviews must be conducted at a mutually agreed upon time, date, and place that do not interfere with the school employee's school duties. CPS may limit interviews to personnel having information relevant to the student's current/proposed educational services, program, or placement.

The parents/guardians, independent educational evaluator, or other qualified professional must comply with school safety, security, and visitation policies at all times and not disrupt the educational process. They must also comply with the requirements of applicable privacy laws, including those laws protecting the confidentiality of education records, such as the federal Family Educational Rights and Privacy Act (FERPA) and the Illinois School Student Records Act.



The local school district representative may contact the ODLSS District Representative for assistance when a parent/guardian asks to observe, or asks to have an independent educational evaluator or other qualified professional observe.

THE INDIVIDUALIZED EDUCATION PROGRAM (IEP)

The IEP is a written document required for each student who is eligible to receive special education services under the IDEA. It is provided to a student who has been determined to have a disability and to need special education services because of the adverse effect of that disability. An IEP identifies a student's unique needs and how a school will strategically address those needs, and it reflects the discussion and decisions of the IEP team. The IEP establishes goals and identifies the supplementary aids, supports and services to allow the student to meet those goals. It also commits Board of Education of the City of Chicago (Board) resources that are necessary to meet the student's individualized education needs.

Most importantly, the IEP sits at the heart of a student's educational journey and should be a document that sets both realistic and ambitious outcomes for academic, functional (including, but not limited to, social/emotional and behavioral) and developmental growth. It also allows for meaningful access to the general education curriculum and serves to advance the goal of increased academic achievement and functional performance for students with disabilities.

IEP Meeting

The local school district representative must ensure the parents/guardians are provided with written notice of an IEP meeting at least 10 calendar days prior to the IEP meeting. The parent/guardian may agree, in writing, to waive the right to this 10-calendar day notice. A copy of written material that will be considered by the IEP team at the meeting, including, but not limited to evaluation reports, collected data that will be considered at the meeting, and, for a child who already has an IEP, a copy of the IEP components that will be discussed, components related to the educational and related service minutes proposed for the child's educational placement and, if applicable, copies of paraprofessional, ESY, and *Learning Environment Intervention* forms, **MUST** be provided to the parents/guardians at least three school days prior to the meeting. At the IEP meeting, the IEP should be projected to support meaningful parent/guardian participation in the IEP discussion. If the IEP cannot be projected, the parent/guardian must be given either access to a District computer or a paper copy of the draft IEP sections that have been completed. If the parent/guardian is limited English proficient, an interpreter **MUST** be present at the IEP meeting to enable the parent/guardian to meaningfully participate in the meeting. Please see information regarding the translation of IEP meeting documents, below.

NOTE: *If a parent/guardian requests a written translation of the final IEP into a language other than English, school staff should contact the ODLSS Department of Procedures and Standards to request guidance on providing a written summary of the IEP for the parents/guardian in the primary language.*

If the parent/guardian does not show up to the scheduled meeting, the meeting must be rescheduled at least once. The second *Parent/Guardian Notification of Conference* form must be sent in three different formats, one of which is US mail. Other types of transmission of the notice could be email, facsimile, or certified mail, phone call/voicemail, etc. If the parent/guardian does not show up for the second meeting, the IEP team can proceed without them unless the parent/guardian has requested another meeting date. The third meeting notice should be sent via US mail. The team may proceed on the third meeting date even if the parent/guardian does not show up or requests a fourth meeting date.

NOTE: *Ten calendar day notice in the primary language where feasible must be given for each continued meeting date unless the parent/guardian waives in writing the 10-calendar day notification period.*

At the conclusion of the IEP Meeting, the IEP must be finalized and a copy provided to the parent/guardian. If the IEP Meeting concludes prior to all areas being addressed, then the team must reconvene at a later date. The meeting must be scheduled at a mutually agreed upon date, time, and location and proper notification provided to the parent/guardian. Both meeting dates should be memorialized on the cover sheet of the IEP.

IEP team members may participate in the conference by telephone or other alternative means if they are unable to attend physically. In this case, the mode of participation is documented on the IEP.

IEP meetings may not be recorded unless all IEP team members agree. If any IEP team member, including a parent/guardian, requests an accommodation for an IEP meeting in order to have meaningful participation, they must seek and obtain a reasonable accommodation based on a disability, as determined by the CPS Talent Office, Americans with Disabilities Act and Compliance Department (“ADA Department”), at ADA@cps.edu. If an IEP meeting is recorded, the local school district representative should ensure that a copy of the recording is saved in the student’s temporary file and maintained by CPS. The local school district representative must ensure that any recording is made using only a CPS-issued device.

IDEA allows certain IEP team members to be excused from attending an IEP meeting in whole or in part. The person who serves as the District Representative may NEVER be excused from an IEP meeting. A team member may only be excused if:

1. The parent/guardian and District Representative agree in writing to the excusal. The *Parent/Guardian Excusal of an Individualized Education Program Team Member* form must be used whenever an IEP team member is excused, in whole or in part, from an IEP meeting.
2. The excused team member must submit input and any recommendations for the student in writing to the parent/guardian and the rest of the IEP team prior to the meeting. This “written input” could include, but is not limited to, draft goals, suggested accommodations and modifications, evaluations, screenings or assessments conducted, record review summary or summary of classroom observations.

Translation of IEP Meeting Documents

Written translation of vital IEP documents is available upon request by a parent/guardian. Vital IEP documents include IEPs, Eligibility Determinations, IEP progress reports, conference recommendations, evaluation reports, and manifestation determination review documents. Requests for document translation should be directed to the school’s case manager. If a case manager requires assistance, they should contact their ODLSS District Representative.

If a parent/guardian requests translation of a document that is not a “vital IEP document,” that request should also be made to the school’s case manager. If case managers require assistance, they should contact their ODLSS District Representative.

Translation of all documents will be done in a confidential manner that complies with FERPA and ISSRA.

Documents may be translated by a web-based automated translation program or application or by an individual, as solely determined by CPS. Documents that are translated by a web-based automated translation program or application will be identified as such, and parents will be notified that they may contact their child’s case manager if they do not understand the translation.

Participants

Pursuant to the IDEA, the following are required IEP team participants:

- One or both of the student's parents/guardians;
- At least one general education teacher, if the student is or may be participating in the general education environment. The general education teacher who serves as a member of a student's IEP team should be a teacher who is, or may be, responsible for implementing a portion of the IEP, so that the teacher can participate in discussions on how best to instruct the student;
- At least one special education teacher. (If the child is receiving only speech and language services, the Speech-Language Pathologist shall fulfill this role.);
- For students who are 3 to 5 years of age, an individual qualified to teach preschool students without disabilities;
- An individual who can interpret the instructional implications of any evaluation results. (A person may assume this role in addition to another role at the conference.);
- A representative of CPS (District Representative) who is qualified to supervise the provision of special education services, is knowledgeable about the general education curriculum and available resources, and is authorized to commit resources on behalf of the District. (If a representative from ODLSS attends the meeting, such as when the IEP team may be discussing placement in a separate day school, that person acts as the District Representative and should be identified on the *Parent/Guardian Notification of Conference* as such.); and
- The student, if a purpose of the conference is to plan transition services (usually age 14-1/2 and older), the student is age 18 or older, or if the parent/guardian chooses to have the child participate at any age.

The IEP team must also include:

- At the discretion of the parent/guardian or CPS personnel, other individuals having knowledge or special expertise regarding the child (e.g., child welfare specialist if the student is a ward of the State, etc.);
- A qualified bilingual specialist or bilingual teacher, if the student is EL or the presence of such a person is needed to assist the other participants in understanding the child's language and cultural factors as they relate to instructional needs;
- A person knowledgeable about positive behavior strategies, if the child's behavior impedes their learning or the learning of others; and
- Interpreter for individuals who have limited English proficiency or who are deaf.

A single member of the IEP team, except the general education teacher, may meet two or more of the qualifications specified above, so long as they are identified on the *Parent/Guardian Notification of Conference* as such.

NOTE: *SECA*s may be invited to attend IEP meetings at the request of the parent/guardian, Principal, and/or local school district representative. However, the *SECA* may not be used as the interpreter for the parent/guardian at the IEP meeting.

Agreement To Proceed With the IEP Meeting

If all areas of the IEP have been discussed at the meeting but additional time is needed for the school team to finish the documentation ensuring it incorporates the discussions that occurred at the IEP meeting, then the school team and parent/guardian can complete an Agreement to Proceed with the IEP Meeting document. If an Agreement to Proceed with the IEP Meeting document is completed, then the IEP must be finalized by the end of the next school day. The discussion regarding the agreement to proceed with the IEP meeting should be memorialized in the IEP Notes section. The parent has the right

to request that the IEP meeting be reconvened if there are questions/concerns regarding the finalized IEP document.

If the school team or parent/guardian is not in agreement to proceed with the IEP Meeting, then the team must reconvene at a later date. The meeting must be scheduled at a mutually agreed upon date, time, and location and proper notification provided to the parent/guardian. Both meeting dates should be memorialized on the cover sheet of the IEP.

IEP Development

The IEP must be reviewed and updated at least annually to determine a student's progress toward attainment of their goals and to set new goals, etc. It must include:

- A statement of the student's Present Levels of Academic Achievement and Functional Performance (PLAAFP) including how the disability affects involvement and progress in the general education curriculum. For preschoolers, as appropriate, how the disability affects the student's participation in early childhood-appropriate activities and outcomes.
- A statement of measurable annual goals and short-term objectives or benchmarks, including academic and functional goals, designed to meet the student's needs and enable them to be involved and make progress in the general education curriculum and meet other needs resulting from the disability.
- A description of how the student's progress toward meeting the goals and short-term objectives or benchmarks will be measured and when periodic reports will be provided to parents/guardians on the progress toward meeting goals and benchmarks.
- A statement of the special education and related services and supplementary aids and services, based on peer-reviewed research to the extent practicable, and program modifications or support for school personnel that will be provided to enable the student (1) to meet annual goals; (2) to participate and make progress in the general education curriculum, nonacademic parts of the school day and extracurricular activities; and (3) to be educated and integrated with age/grade appropriate nondisabled peers.
- An explanation of the extent, if any, the student will not participate with nondisabled peers in the general education classroom.
- A statement of any individual appropriate accommodations necessary to measure the academic achievement and functional performance of the student on State and District assessments. If the IEP team determines that the student will take the DLM (Dynamic Learning Maps Assessment), the IEP must include a statement why the student cannot participate in the standard district and state assessments.

GENERAL CONSIDERATIONS (IEP Section 7)

All needs stemming directly or indirectly from the student's disability that impact the student's academic or functional performance should be addressed in the IEP.

Student Strengths

The IEP team should describe what the student can do in positive terms. A summative narrative describes the student's strengths in academic, developmental, functional, and transition areas.

Academic, Developmental and Functional Needs

Academic Needs

Contains a narrative summation of the student's academic needs in each subject or content area. It includes a general summary of the student's academic needs, current levels of academic performance, and areas of need in each core curricular subject. More detail for each subject or content area is discussed in Specialized Instruction.

The IEP team also reviews and documents the effectiveness of past interventions and/or strategies used with the student, including the success or failure of the accommodations/modifications outlined in the prior IEP.

The student's preferred learning style (e.g. visual, auditory, or tactile/ kinesthetic) and strategies utilized are identified. Not all learning styles must be listed, but at least the learning style which is most effective with the student should be indicated. The chosen learning style is reflected in the accommodations, modifications and goals. For example, if the student is an auditory learner, books-on-tape, repeating directions and other auditory cueing would be appropriate; whereas if the student is a visual learner, these types of accommodations may be less effective and visual cueing and guides noted instead. This section also includes a summary of the student's curriculum-based assessment results along with the results of District-wide assessments and State assessments. The date of the testing and progress monitoring data is included, but assessments over 12 months are not generally relevant to the IEP development.

Developmental/Functional Needs

Describes the student's social/emotional, behavioral, independent functioning, communication, and vocational deficits and needs. Explicit information about the student's strengths and weaknesses in each area are described along with the effectiveness of past interventions and/or strategies.

Communication Needs

Describes how the student communicates with others; this section should be completed for all students and is not limited to those with a speech or language impairment or currently receiving speech/language services. Verbal and nonverbal communication is considered, as well as pragmatic language skills. If a student utilizes an AAC device, the effectiveness of the device in allowing the student to communicate independently is noted as well as if any changes need to be made.

Considerations for Students with Autism Spectrum Disorders

The IEP team must consider each listed factor and provide a narrative of the student's needs, if any, and effectiveness of interventions and strategies already used with the student. All relevant items are addressed in the body of the IEP through goals, services, and accommodations and/or modifications.

- Verbal and nonverbal communication needs;

- Social interaction skills and proficiencies;
- Any unusual responses to sensory experiences;
- Any resistance to environmental change or change in daily routines;
- Engagement in repetitive activities and stereotyped movements;
- Need for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from an autism spectrum disorder; and
- Other recommendations to assist the student to be involved and progress in the general curriculum.

Relevant Transition Information

Relevant transition information in this section of the IEP does not refer to post-secondary transition but should address consideration of the student's ability to transition within the school setting, between classes, within subjects, elementary to high school and post-high school. The team describes any supports necessary to assist the student in these transitions. Any supports described in this section must be included in Accommodations and Modifications and/or Specialized Instruction.

Medical Concerns

The certified school nurse must be a part of the IEP team, if there are identified medical conditions. The nurse will provide a narrative summary of any past and current medical conditions that require accommodations or modifications. For students with a chronic medical condition, the nurse will identify areas of concern in alignment with the primary care physician orders.

Language and Cultural Considerations (English Learners-EL)

The IEP team describes the bilingual service delivery model that has been used with the EL student and whether any changes need to be made. The information summarized in this section drives the supports outlined in Accommodations and Modifications: Special Factors, English Learners.

For students who are not EL, describe how the language of the student's parents/guardians impacts learning and whether any cultural considerations exist and should be addressed through accommodations or other supports.

Parents'/Guardians' Concerns

As a member of the IEP team, parents/guardians are encouraged to participate actively during the IEP meeting and provide input in the development of their child's IEP, including any concerns they have for enhancing the student's education. Parents/guardians are asked to describe how they perceive the child to be functioning at school and how their child functions at home; the success of any interventions (rewards, chores, routine, etc.) used in the home; the child's view of school; and the parents'/guardians' vision of the child in the immediate future and post-high school. To facilitate the parent/guardians' input in the IEP, prior to the meeting, the local school district representative should ask them to identify their child's strengths, areas of need and any concerns they may have in order to share them at the IEP meeting. At the meeting, the local school district representative is responsible for ensuring the parents'/guardians' concerns are discussed and accurately documented in the IEP.

TRANSITION SERVICES (IEP Section 8)

A transition plan must be developed for all students who are entering high school and who are or will be 14½ during the life of the IEP, whichever occurs first, and annually thereafter. Transition services are a coordinated set of activities for students with disabilities:

- Designed to be within a results-oriented process, focused on improving the academic and functional achievement of the student with disabilities to facilitate the student's movement from school to post-school activities, including postsecondary education, vocational education, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation; and
- Based on the individual student's needs, taking into account the student's strengths, preferences, and interests; includes instruction, related services, community experiences, the development of employment and other post-school adult living objectives, and acquisition of daily living skills.

Development of Transition Service Plan

Transition Assessments

Each student **MUST** have the following:

- At least one formal or informal assessment pertaining to post-secondary employment;
- At least one formal or informal assessment pertaining to post-secondary education and/or post-secondary training; and
- At least one formal or informal assessment pertaining to post-secondary independent living
 - If an assessment was conducted and referenced in this section, check 'Yes' and electronically attach the document and file it with the student's temporary records.
 - Assessment results must always be available if referenced in the IEP.

NOTE: CPS staff should visit the [KNOWLEDGE CENTER \(Transition Services\)](#) for more information.

Competency Skills

Describe how a student's current skills will impact them after high school when in higher education or training, employment, or independent living settings. Include student strengths in one or more of the following areas as they pertain to the students' identified post-secondary outcomes:

- Academic skills
- Communication skills
- Ability to use technology
- Vocational skills
- Independent living and adaptive functioning skills
- Self-determination/self-advocacy skills
- Independent travel skills (within and out of community)

Social Skills

Include a brief synopsis of the student's social skills with peers, authority figures, and other individuals in the community. The synopsis describes characteristics that may be an asset to the student in particular professions or community settings (e.g., highly verbal, friendly and outgoing, likes to interact with people) and indicate if the student has limitations in social skills (e.g., difficulty with eye contact, sensitivity to crowds or particular environments, inappropriate responses to authority, doesn't recognize personal space).

Self-Determination Skills

Discuss the student's self-determination skills and if they are likely to support or impact their ability to obtain the intended post-secondary outcomes. Include information such as attendance patterns, participation in extracurricular activities, and other relevant information, along with details on whether the

student is intrinsically motivated or motivated by external stimuli (e.g., reward-based behavior plans). The emphasis should be on how this might affect the student's success in higher education, employment, or independent living settings.

Post-Secondary Outcomes

Indicate realistic, appropriate, and **measurable** post-secondary outcomes that take into account the student's preferences, strengths and interests. Post-secondary outcomes should be based upon age-appropriate transition assessments related to employment, education and/or training, and independent living skills. The post-secondary outcomes are statements that indicate what a student **"will" do** rather than "plans" or "hopes" after leaving high school and should be individualized to the student's preferences, strengths and interests.

Planned Course of Study

Discuss courses the student will take while in high school (following the CPS graduation requirements and course sequences). Six courses per year must be listed in this section. The final section "Extended Age 18-21" should not be completed until the student's fourth year in high school. For students who are sophomores or in higher grades, the Planned Course of Study should reflect both the courses the student has already taken and those which the student anticipates taking in the coming high school years. If a student has failed courses and has credit recovery needs, this information should be included in General Considerations and addressed in the IEP.

Coordinated Set of Activities

The coordination of activities is focused on improving academic and functional achievement to facilitate the student's movement from high school to post-high school. The services can be implemented by multiple IEP team members, and are intended to ensure transition planning is actively taking place throughout the year and that multiple individuals (e.g., parent/guardian, student, general education teacher, special education teacher, social worker) are involved.

- **Instruction** - Identify any specialized instruction, school-based tutoring, skills training, college preparatory instruction, and/or self-determination instruction being provided and the provider(s) of those services. If applicable, identify what may need to occur in the future.
- **Related Services** - Identify if the student is receiving any related services (e.g., transportation, social work, health services, guidance counseling, etc.) and write a brief statement on how the related services pertain to transition needs. If a student utilizes AT or an AAC device to communicate, this should also be included. The IEP team then discusses alternate post-secondary funding sources for the AT devices with the parent/guardian and student. If a student does not require related services, indicate "No related services are needed at this time."
- **Work Experience** - Describe any work opportunities the student has had or will have during the course of the IEP year and the acquisition of service learning hours. If the student is too young to have competitive employment experience, consider whether the student volunteers, babysits, does household chores, or has classroom or school-based jobs. Other considerations to include can be setting up job shadow opportunities or paid/unpaid work experiences in or out of school.
- **Development of Employment and Other Post-School Adult Living Objectives** - Describe how the IEP team will engage the student in learning about career planning, workplace skills, job try-outs, registering to vote, adult benefits planning and any other post-school adult living objectives. If relevant, discuss the need to link the student to an outside agency for supports and the status of the linkage (e.g. The linkage will occur during the current IEP year; family has started the process but it is not yet complete; [Student] is currently linked and receiving XYZ services). If a student has medical needs which will require ongoing supports post-high school, plans for addressing these needs with the student and family should be discussed.
- **Acquisition of Daily Living Skills** - For all students, describe how the IEP team will engage the student in developing skills in areas such as personal hygiene/grooming, self-care, mealtime

skills, budgeting, care of clothing, fitness, wellness, nutrition, community travel, and any other necessary skills needed for independent living post-high school.

- **Functional Vocational Evaluation** - Discuss how assessment data will be gathered to determine a student's vocational aptitudes and skills (e.g., career interest inventories, situational work assessments, work condition inventories, or work experience inventories, if relevant). If the IEP team agrees that there is adequate assessment information available, the team can make a statement such as, "A functional vocational evaluation is not required at this time, as there is sufficient data with which to make vocational decisions." If the IEP team determines a functional vocational evaluation is necessary, the local school representative should ensure the ODLSS Transition Services is contacted.

Home-Based Support Eligibility

For all students (1) with developmental disabilities, as defined by the Illinois Department of Human Services, Division of Developmental Disabilities and (2) seeking home-based, day, and/or residential programs, a Pre-Admission Screening assessment by an Independent Service Coordination (ISC) agency is required. The ISC assessment leads to subsequent placement on the Prioritization of Urgency of Need for Services (PUNS) list, the state's database of unmet service needs. The ISC assessment must be completed before any adult services can be offered to students with a developmental disability. This planning process should begin no later than when the student is 14 ½ due to the complexity of the State's funding situation. Families are encouraged to start planning early, and CPS will provide students/parents/guardians with a referral to the ISC for assistance with the intake process for PUNS, if needed.

Home-based support services programs are intended to permit adults with mental illness or developmental disabilities to remain in their own home by providing payment for services or equipment needed to enable the adult to become more independent. Through linkage with local agencies, service plans are designed to allow individuals to live independently, learn living skills, or obtain vocational skills.

AREAS OF NEED (IEP Section 9)

The IEP team identifies the needs stemming directly or indirectly from the student's disability and the area(s) in which the student requires special education, related service(s), supplementary aids and services and/or accommodations/modifications in order to address the identified needs and be involved and make progress in the general education curriculum. The Areas of Need should correspond with the information provided in *General Considerations*, (e.g., if an English/Language Arts goal is identified, *General Considerations* should include a description of the student's reading issues and the need for specialized instruction). It is important to identify all areas in which the student's disability is adversely affecting their educational performance. For example, a student with a reading deficit might be adversely impacted in multiple academic areas beyond English/Language Arts, so appropriate accommodations/modifications and/or goals, if necessary, should cover all areas impacted by the reading deficit.

Each school must ensure that students with disabilities have an equal opportunity to participate in academic, non-academic and extracurricular activities with non-disabled peers. The IEP team must determine and document the required supplementary aids and services necessary to enable the student to participate in all these programs.

Non-academic and extracurricular activities in which the student will or may participate should be discussed by the IEP team, including any supports or accommodations needed in order to participate in the activities. Extracurricular support should not be limited to students who are currently participating in extracurricular activities; it should also be discussed for all students who may participate.

If the student is in a grade which has a standard field trip (e.g., 8th grade trip to Washington D.C.), there should be a discussion regarding what supports, if any, are needed to allow the student to participate in this field trip. Students with disabilities are to be included in all age/grade appropriate field trips. A school may never refuse to integrate students with disabilities in lunch, field trips, assemblies and recess, based on administrative convenience and scheduling; any decisions to exclude a student from participating in such activities should be made on an individualized basis with a focus on the student's needs and safety.

ACCOMMODATIONS AND MODIFICATIONS (IEP Section 10)

Accommodations and modifications, including supplementary aids and services, are provided to students based on individual needs. Supplementary aids and services may include, but are not limited to:

- Accommodations that change how a student accesses information and demonstrates learning, such as books-on-tape, large print books, highlighted reading materials, main idea summations, organizational aids, pre-written notes, study guides, rephrasing a question, additional time, calculators or word processor (accommodations do not substantially change the instructional level, content or performance criteria);
- Modifications that change what a student is expected to learn and how the student will demonstrate achievement in the general education curriculum (modifications may change the instructional level, the content and/or the performance criteria; however, even with a modified program, the student may work on the same subject area as the rest of the class);
- Consultative services where the special education teacher and/or related service provider consult with each other and/or the general education teacher on strategies to assist the student to progress in the general education curriculum;
- AT devices or services;
- Behavior intervention services, supports and strategies; and
- Paraprofessional support to provide assistance in specific areas of need.

Accommodations and Modifications: Special Factors (IEP Section 10(a))

The IEP identifies six special factors which are discussed to further identify each student's individualized needs and determine whether the student requires this type of support in order to make progress in the age/grade appropriate general education curriculum. A student may or may not have needs in some or all of these areas. The six special factors include:

- For a student who is blind or visually impaired, whether instruction should be provided in braille and/or the use of braille;
- For a student who is deaf, the student's language needs and opportunities for direct communication with peers and staff;
- For a student who is an EL, their language needs as they relate to the student's disability;
- The communication needs of a student and the possibility of trialing an AAC device;
- Student's need for AT devices or services to access the educational curriculum; and
- For a student whose behavior impedes their or other's learning, the need for positive behavioral interventions, supports and strategies.

A. Consideration of braille needs

The IEP team will only be able to choose "yes" or "no" if the student's most recent evaluation identified him/her as blind or visually impaired. If the answer is yes, the team must state whether instruction provided in braille and the use of braille are needed. For a student who is functionally blind, it is presumed that proficiency in braille reading and writing is essential for their educational progress. Students (i) whose vision loss is so severe that they are unable to read and write at a level comparable to their peers solely through the use of vision; and (ii) who show evidence of progressive vision loss that may result in functional blindness, are also entitled to braille instruction. Braille instruction may be used in combination with other special education services to meet the student's educational needs.

NOTE: *The team is required to notify the parents/guardians that their student might be eligible to receive services from the Illinois School for the Visually Impaired and the services they provide. This notification is given to the parents/guardians at the IEP meeting.*

B. Consideration of communication needs

The IEP team must consider the student's communication needs. In the case of student who is deaf or hard of hearing, the IEP team must also consider the student's language needs, opportunities for direct communication with peers and staff in the student's language and communication mode (e.g., visuals, oral/aural, sign language, total communication), academic level, and full range of needs, including opportunities for direct instruction in the student's language and communication mode.

NOTE: For students who are deaf or hard of hearing, the team is required to notify the parents/guardians that their student might be eligible to receive services from the Illinois School for the Deaf and the services they provide. This must be given to the parents/guardians at the IEP meeting.

C. Consideration of English Learner's language needs

For EL students, the team must determine the language needs of the student as they relate to the student's IEP.

D and E. Consideration of need for AT and/or AAC devices or services⁸

AT provides compensatory benefit to improve or maintain functional performance (e.g., reading, communicating, or mobility). An AT tool is not tied to a specific disability type but rather to an area of functional performance and can help students show what they know and compensate for a barrier posed by their disability. Everyday technologies can be identified as AT for a student with a disability if they are used as a compensatory intervention and an IEP team determines that a student needs them to receive FAPE.

The consideration of AT is an ongoing process in which AT is considered, selected, provided, supported and periodically evaluated to determine its effectiveness for a student. AT is also documented in a student's IEP.

AT/AAC device: Any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve functional capabilities.

AT/AAC service: Any service that directly assists in the selection, acquisition, or use of an AT/AAC device, including evaluation of the needs of a student with disabilities; purchasing, leasing, or otherwise providing for the acquisition of AT/AAC devices; selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing AT/AAC devices; coordinating and using other therapies, interventions, or services with AT/AAC devices; and AT/AAC training or technical assistance.

AAC system: A tool ranging from picture and symbol communication boards to a speech-generated communication device that may increase social interaction and school performance.

ATRC: Assistive Technology Resource Center.

The IEP team should identify assistive technology required for the student to interact with staff and peers, to access any portion of the curriculum, or to meet the social and/or communication needs of the student.

An IEP team may decide that a student with disabilities needs AT/AAC devices and/or services based on documentation that shows that the following Guideline has been discussed and is supported by qualitative and quantitative data:⁹

⁸ For additional information regarding criteria to determine whether a student requires AT support, see the [The Illinois Assistive Technology Guidance Manual, Second Edition 2020](#).

⁹ Qualitative and quantitative data in this context includes data regarding (1) how the student's access to the curriculum, ability to communicate or other functional capabilities is adversely affected by their disability, and the specific nature of the adverse effect; and/or (2) how and to what extent the IEP-specified instruction or accommodations, modifications, and/or other supports used during instruction were insufficient to support the student's performance and/or participation in activities.

GUIDELINE:

The student's access to the curriculum, ability to communicate, or other functional capabilities are adversely affected by the student's disability. Examples include, but are not limited to, a student who:

- A. Has communication skills that are impacted due to a medical or physical condition;
- B. Has speech that is highly unintelligible;
- C. Is nonverbal or minimally verbal;
- D. Requires adapted materials complete typical classroom tasks;
- E. Requires supports to focus, transition, or interact with others throughout the day through use of visual or tactile supports, such as a visual picture schedule, visual timer, tactile schedule;
- F. Has a motoric deficit that impacts access to the school curriculum or environment.

If the IEP team is unable to determine assistive technology needed for a student, they should request an AT and/or AAC evaluation by ATRC staff. School staff can complete the *AT Referral* form found in SSM. Parent/guardian requests for AT and/or AAC evaluation should be made in writing to the local school district representative. If the request is made verbally, the local school district representative should instruct the referrer to put the request for evaluation in writing and assist with transcribing if the parents/guardians are unable to write out their request.

F. Consideration of student's need for positive behavioral interventions, strategies, and supports

Positive behavioral interventions, strategies, and supports, or a formal functional behavioral assessment (FBA) should be initiated and a behavior intervention plan (BIP) developed, when a student's behavior impedes their learning and/or peers' learning. The initiation or revision of an FBA and BIP is required when disciplinary sanctions result in out-of-school removal beyond 10 school days in a school year; or when a manifestation determination review (MDR) is conducted. Prior to conducting the FBA, **parent/guardian consent must be obtained** either through the Consent/Assessment Planning process if the student is undergoing an FIE; or via the standalone Consent for Functional Behavior Assessment document in SSM.

An FBA is a problem-solving process for analyzing student problem behavior(s). It is designed to help teams select positive and appropriate interventions that directly address problem behavior; its focus is on identifying significant, student-specific, social, affective, cognitive, and/or environmental factors associated with the occurrence and nonoccurrence of specific behaviors. The broad perspective offers a better understanding of the purpose behind the student's behavior and an effective plan for addressing it.

An FBA:

1. Involves a systematic process for identifying target behavior(s) and gathering information about when, where, and why a behavior is occurring, which leads to the development of the BIP;
2. Is designed to help determine the antecedents and consequences of target behavior(s), as well as the communicative and functional intent of such behaviors;
3. Leads to more specific and effective behavioral interventions; and
4. Summarizes prior interventions implemented and indicates which prior interventions were successful and which were not.

A BIP must:

- Summarize the findings of the FBA;
- Describe the behavioral interventions to be used, including those aimed at developing or strengthening alternative or more appropriate behaviors;
- Identify the measurable behavioral changes expected and methods of evaluation;
- Include a schedule for a review of the interventions' effectiveness; and

- Include provisions for communicating with the parents/guardians about their child's behavior and coordinating school-based and home-based interventions.

NOTE: CPS staff should visit the [KNOWLEDGE CENTER \(SBSS\)](#) and [FBA/BIP Guidance Document](#) for more information.

Accommodations and Modifications: General (IEP Section 10(b))

The IEP team determines what accommodations are needed to address the student's individualized needs and if any would support the student in being involved and progressing in the general education curriculum. Every Area of Need in IEP Section 9 with a check under "Accommodations and/or Modifications" will automatically pre-populate in this section. For each area identified, the IEP team should determine what accommodations are needed to address the student's individualized needs which were highlighted in IEP Section 7, *General Considerations*. The IEP team should discuss if any of the list of accommodations which automatically appear in the IEP would support the student in being involved and progressing in the general education curriculum. If a needed accommodation is not included in the pre-populated list, the IEP team should describe the needed accommodation in the "Other Accommodations" box. Accommodations are likely to vary between curriculum areas to assist the student in being involved and progressing in a particular curriculum area, depending on a student's needs.

NOTE: *If a student with disabilities will be participating in aquatic activities during the life of the IEP (e.g. swimming class for P.E), the team should discuss what, if any, accommodations will be needed for the student to safely participate. Any necessary accommodations should be documented under the P.E. area of need. The IEP team should also consider the need, if any, for safety-related accommodations during the school day and at other school-related activities.*

The IEP team should decide whether collaboration/consultation between service providers is needed to enable the student to be involved and make progress in the general curriculum or to achieve IEP goals. If the team decides consultative services are needed, the IEP must indicate who will be consulting with whom, for how long and the nature of the consultation. For example, consultation might be considered to monitor student progress, student attendance, student behavior, effectiveness of interventions used, and/or implementation and effectiveness of accommodations/modifications.

Individual Health Care Plan for Diabetes, Asthma, Food/Non-Food Allergies, and Other Health Conditions

A health care plan must be created as part of an IEP for IDEA-eligible students who have diabetes, asthma, and food/non-food allergies. Other conditions such as seizures, are episodic and may also require an Individual Health Care Plan that is part of the student's IEP. The health care plan must be updated at least annually when the IEP is annually reviewed or as soon as practicable when the school receives updated medical information. When a health care plan is developed, a copy must be provided to the student's parents/guardians, and all staff members that interact with the student on a regular basis. These staff members may include, but are not limited to: teachers, substitute teachers, paraprofessionals, regular volunteers, administration, lunchroom aides, coaches, recess coordinators, and bus aides. Training for school staff on the health care plan in the student's IEP on how to keep the student safe at school and during school activities might also be necessary and should be included in the health care plan.

All health care plans should include a description of the child's symptoms, accommodations and/or supports needed in the school setting to address the symptoms, what medications the student takes, and a plan for emergencies. The prevention of symptoms should include steps to keep the child healthy in the long term, and to prevent the child from exposure to triggers that could lead to emergencies. The emergency plan should contain emergency contacts, information on how to immediately treat symptoms when the child has been exposed to triggers, and descriptions of situations that require calling 911 and hospitalization.

NOTE: *When in doubt of how to respond to a medical emergency, always call 911.*

The health care plan in the student's IEP should also include procedures to be followed during and in preparation for field trips, school parties, and all emergency drills and actual emergencies (including loss of power, fire and tornado drills, active shooter drills, lock-down situations, etc.). For example, it may be necessary to have non-perishable food on hand in case of a drill that would interrupt a student's usual eating schedule.

Additionally, the health care plan must indicate the name of the student's medication, the dosage, route and frequency, expiration date, parent consent, doctor authorization, and any special instructions necessary for taking the medication. It must also state whether the student self-administers the medication or staff will have to administer the medication. The health care plan should also indicate where the medication (including emergency medication) is located. This information should be taken verbatim from the completed physician's order forms and/or emergency action plan. Finally, the plan should describe any side effects that the student may experience when taking the medication and how to respond if they occur.

NOTE: All physician orders and emergency action plans must be uploaded and attached to the Section 504 Plan.

DIABETES CARE PLAN (DCP)

Medications

The DCP should note what kind of device is used to deliver insulin to the student — a syringe, insulin pen, insulin pump, or something else; note what kind of insulin therapy is used at school, and how it is implemented. If the student uses a Continuous Glucose Monitor (CGM), what kind of care does it need? The DCP should also explain where the student's insulin and equipment should be stored. If the student uses syringes or lancets, make sure the plan includes how to properly dispose of them.

Accommodations

The DCP should also describe what accommodations and/or other supports a student will receive on a typical school day, during extracurricular activities, during field trips, and on the bus. For example, what kind of snacks, drinks, or equipment should be kept on hand in the event of hypoglycemia or hyperglycemia? What are the student's personal food-sharing rules? When and how often do glucose levels need to be checked, and where does the student prefer to be tested? (The side of the fingertip, or somewhere else?) The school should also take into consideration the extent to which the student is independent and can check his or her own glucose levels. It is important to recognize the student's self-management strengths and weaknesses.

The DCP should also note whether the student's diabetes is impairing or interfering with his or her school performance. If so, which activities are impaired? What other accommodations may be necessary?

When developing all DCPs, the IEP Team is required to identify and train a Delegated Care Aide (DCA) for each student with diabetes to help that student manage his or her diabetes when the school nurse is not in the building or unavailable. "Delegated Care Aide" means a school employee who has agreed to receive training in diabetes care and assist students in implementing their DCP. The parent/guardian must authorize the use of a DCA for their child, and the parent/guardian and CPS must agree to the staff member who volunteered to act as the student's DCA. The IEP Team must complete the *Diabetes Delegated Care Aide Form*, on which the parent/guardian indicates agreement to the DCA. For more information about training Delegated Care Aides, see the District's [Chronic Conditions Management Policy, Section 704.12](#).

Safety Procedures

Finally, the DCP should outline what steps to follow in case of an emergency. The plan should describe the student's symptoms of hypoglycemia and hyperglycemia and how to prevent them from occurring. Some symptoms may include, but are not limited to, dry mouth, extreme thirst, nausea or vomiting, severe abdominal pain, heavy breathing or shortness of breath, chest pain, increasing sleepiness or lethargy, and a depressed level of consciousness, or unconsciousness, among other symptoms. The plan should indicate the student's target blood sugar range, as well as what is considered low, high, and extremely high. What foods or drinks should the student have on hand to treat hypoglycemia? What other steps should be taken in the event of an emergency? The DCP should also include emergency contacts in addition to 911. After handling an emergency, always contact a student's parent/guardian to inform them of its occurrence and complete an incident report.

NOTE: *Again, when in doubt how to respond to a medical emergency, always call 911.*

For more information about managing diabetes, see the District's [Chronic Conditions Management Policy, Section 704.12](#).

ASTHMA ACTION PLAN

Medication

The Asthma Action Plan should indicate when the student should use an inhaler, how often, where the inhaler should be kept (e.g. in their pocket, backpack, desk), and whether the teacher or another adult should have an extra inhaler kept in a safe locked place.

Accommodations

The Asthma Action Plan should describe what kind of accommodations a student should receive on a regular school day, during extracurricular activities, field trips, and bus rides. Accommodations should consider how best to prevent acute episodes as well as long term care and prevention. Prevention measures might include good ventilation, dust control, and humidity control.

Note whether the student's asthma is in any way impairing or interfering with his or her school performance. If so, which activities are impaired? In particular, do adjustments need to be made to the student's physical education classes?

Safety Procedures

Finally, the Asthma Action Plan should outline what steps to take in an emergency. The Plan should include emergency contacts in addition to 911. The Plan should describe what might trigger a student's asthma attack. Common asthma triggers include allergens (like pollen, animal dander, mold, etc.), physical exercise (particularly in cold weather), respiratory infections, and other irritants (like cold air, perfume, chalk dust, etc.). The Plan should also describe the student's symptoms in an asthma attack. Common symptoms include, but are not limited to, excessive coughing, shortness of breath, wheezing, chest tightness, nostrils flaring, hunched-over shoulders, and abnormal anxiety or fear.

In addition to the administration of medication and contacting emergency contacts, the Asthma Action Plan should outline any other necessary steps to take in the case of an emergency. After handling an emergency, always contact a student's parent/guardian to inform them of its occurrence.

NOTE: *Again, when in doubt how to respond to a medical emergency, always call 911.*

See the District's [Chronic Conditions Management Policy, Section 704.12](#).

INDIVIDUAL HEALTH PLAN FOR FOOD/NON-FOOD ALLERGIES

Medication

The Individual Health Plan For Food/Non Food Allergies should indicate whether the student requires an EpiPen or any other medications. If the student has an EpiPen, the plan should indicate where the student keeps the EpiPen (e.g., in their pocket, backpack, desk, etc.).

Accommodations

The Individual Health Plan for Food/Non-Food Allergies should include a list of all the student's allergies and how to prevent the student from having an allergic reaction. Some of the most common food allergies are peanuts, tree nuts (walnuts, cashews, pecans, hazelnuts, almonds, etc.), milk, eggs, fish, shellfish, soy, and wheat, among others. Put in place personal food sharing rules for the student to ensure that the student does not eat anything that would cause a reaction. Carefully consider what measures can be put in place to prevent reactions from occurring, including keeping the student's eating, work and play areas clean.

NOTE: Lesson plans or art projects should not include food to which the student is allergic. Class rewards should also not include food.

Safety Procedures

The Individual Health Plan for Food/Non-Food Allergies should include what to do in an emergency. The Individual Health Plan for Food/Non-Food Allergies should detail the symptoms of a student's anaphylactic shock. The Individual Health Plan for Food/Non-Food Allergies should describe what to do if the student goes into anaphylactic shock, where the District-issued EpiPens are kept, and how to use an EpiPen if necessary (as well as how to dispose of a used EpiPen).

In addition to the administration of medication and contacting emergency contacts, the Individual Health Plan for Food/Non-Food Allergies should outline any other necessary steps to take in the case of an emergency. After handling an emergency, always contact a student's parent/guardian to inform them of its occurrence.

NOTE: Again, when in doubt how to respond to a medical emergency, always call 911.

See the District's [Chronic Conditions Management Policy, Section 704.12](#).

HEALTH CARE PLAN FOR OTHER HEALTH CONDITIONS

Health conditions that may require a Health Care Plan can include, but are not limited to:

- Multiple sclerosis
- HIV/AIDS
- Chronic fatigue syndrome
- Migraines
- Chronic pain
- Seizures (including, all required components for a Seizure Action Plan under the new Seizure Smart School Act).

The Health/Medical section of the IEP allows the team to create a Health Care Plan for conditions other than asthma, diabetes and allergies. If a student has an episodic condition that requires medication

during the school day, the team may want to develop a Health Care Plan. The Health Care Plan should describe what types of medication are required during the school day, whether the student can self-administer, where the medication is stored, and any side effects from the medication. The Health Care Plan should also detail any accommodations needed during the school day, school activities, field trips and on the bus. Finally, the Health Care Plan should outline what steps should be taken in an emergency. After responding to an emergency, always contact a student's parent/guardian to inform them of its occurrence.

NOTE: *And again, when in doubt how to respond to a medical emergency, always call 911.*
See the District's [Chronic Conditions Management Policy, Section 704.12](#).

PRACTITIONER ORDERS FOR LIFE SUSTAINING TREATMENT

In the state of Illinois Practitioner Orders for Life Sustaining Treatment (POLST) forms have evolved from previous versions of a do not resuscitate (DNR) form. The POLST enables a patient to take control of their medical care while establishing a plan of care that aligns with their treatment wishes.

If a student has a POLST on file with the school, the following guidelines must be followed in order to ensure the POLST is carried out as it is a legally binding document for the student. Upon receipt and after review of the POLST form, the registered nurse shall initiate the following steps:

1. Notify the principal and case manager that the POLST was received.
2. Arrange an in-person conference with the parent, appropriate school staff, and RSPs. The school nurse should meet the parent/guardian initially then allow time for appropriate school staff to meet with the parent/guardian.
3. Prior to the conference, the school nurse will review the student's IEP or 504 Plan. If the student does not have a 504 plan, the nurse will prepare a plan. A revision to the IEP or 504 Plan should be made at the meeting noting the POLST.
4. The purpose of this conference is to outline expectations, procedures, and goals of care per parent/guardian wishes. Specific team members and their roles will be identified at the meeting. The student's IEP or 504 Plan should be reviewed with emphasis on the POLST. The registered nurse (CSN or HSN) is responsible for communicating with the parent every month for any updates or changes to the student's plan of care. All contact information must be confirmed with the parent/guardian at this time. The parent/guardian must sign off on a Release of Information consent to initiate communication with the provider.
 - a. Please follow the standard 504 Plan renewal process.
5. The signed POLST form should be uploaded under the designated title in SSM. Any additional medical forms should also be uploaded with current contact information. An additional flag will be noted is ASPEN.
6. Student confidentiality must be maintained at all times. Only staff with a legitimate need to know will be informed of the student's POLST status. These staff members will be trained to follow the expected procedures regarding the student's POLST.

Implementing the POLST:

If a student with a POLST form experiences a respiratory or cardiac arrest or is in distress the designated team member should take these steps:

1. Call RN and student's parent/guardian.
2. Call the main office to activate 911 immediately.

3. Isolate the student by moving to a private area or screen off the area.
4. Provide access to emergency medical services upon their arrival.
5. Provide emergency medical services with a copy of the student's POLST.

Copy of POLST:

1. Copy of POLST must be kept in the main office.
2. Copy of POLST must be kept by the RN.
3. Copy of the POLST must be kept with their homeroom teacher.

Please include this information in instruction provided to any substitute nurse or teachers working with the student.

Revocation of a POLST:

1. A POLST may be revoked at any time with the written consent of the parent/guardian who signed the initial form.
2. If the parent/guardian revokes, such revocation must be put in writing and uploaded to SSM. The revocation will be noted in the student's record and appropriate members of the student's team will be notified.

Accommodations and Modifications: Assessments (IEP Section 10(c))

Three criteria are essential when considering any classroom assessment accommodations:

- The accommodation provides the student the same opportunities in the testing situation as those students who receive no accommodation;
- The purpose of the test is not compromised by the accommodation (example: reading a decoding test to a student would compromise the purpose of the decoding assessment); and
- Test security is not compromised by the accommodation.

Accommodations can be organized into six categories – i.e., setting, presentation, timing, response, scheduling and other. They must accurately reflect a student’s knowledge and skills and not their disability when taking assessments. A description of the necessary accommodation is noted in the “Other Accommodation” box.

All students with disabilities must participate in the District and State assessments or in an alternate assessment if non-disabled students at the same age or grade are tested. It is anticipated that almost all students with disabilities will be able to participate in the standard District/State assessments.

If a student does not require classroom assessment accommodations in a subject area which is part of a District or State assessment, the student will take the assessment without accommodations in that subject area.

If it has been determined a student cannot participate in the standard District/State assessments even with accommodations, the student will take the Dynamic Learning Maps Alternate Assessment (DLM-AA). Under federal law, the DLM-AA is limited to only 1% of the student with disabilities population. The purpose of the DLM-AA is to measure progress of students with significant intellectual disabilities who cannot participate in State assessments even with accommodations and to ensure that educational progress of these students is included in the statewide accountability system at the individual school, District and State levels.

SPECIALIZED INSTRUCTION (IEP Section 11)

The IEP team must develop goal(s) to address a student's individualized needs,

All goals developed should be SMART goals:

- S**pecific
- M**easurable
- A**ction words
- R**ealistic/Results-Oriented
- T**ime-limited

Duration of IEP: Decide if the goal being developed will be worked on for the life of the IEP (i.e., one year) or this school year or the next school year. The answer to this question will generate the necessary LRE grids. If the IEP team opts for the life of the IEP, the start date should be the date of the IEP meeting and the end date one year from that date. If the answer is this school year, the start date is again the date of the IEP meeting but the end date is the last day of student attendance of the appropriate year. If the answer to the question is next school year, the begin date is the first day of student attendance of the appropriate year and the end date is one year from the date of the IEP meeting.

Goal Area: Indicate the applicable area (i.e., academic, functional, or transition).

Provider: The special education teacher or related service provider (RSP) is the primary provider, responsible for implementing the goal and providing the minutes of service reflected in Justification of Placement in the Least Restrictive Environment (LRE Grid) (IEP Section 12). The "Other Provider" can be any other staff member (e.g., general education teacher, paraprofessional) who will be assisting in implementing the goal. For all goals implemented in the general education classroom, the general education teacher must be selected as the "Other Provider." If the paraprofessional is identified--Accommodations and Modifications: Special Factors -- Paraprofessional Support--as providing support in the subject area for which a goal is being developed, he/she should be identified as an "Other Provider."

Frequency of Service Delivery: This question should be completed AFTER the goal and short-term objectives/benchmarks are completed and reviewed again as part of the IEP team's discussion of IEP services and placement. The Placement/LRE Grid (IEP Section 12) calculates minutes per week; however, the answer to this question (e.g., weekly, monthly) is based on the student's need and controls the actual frequency of service delivery.

Areas of Need: Goals are based on the identified *Areas of Need*.

Present Level of Academic Achievement and Functional Performance (PLAAFP): The information in this section cannot be a "cut and paste" of the information from *General Considerations*. The focus must be on the student's skill deficit(s) in the particular area of need being addressed by the goal. For example, for a reading comprehension goal, the information does not discuss math issues but rather focuses on the specific reading comprehension deficits addressed by the goal. The content of the PLAAFP should be specific and tailored to the specific goal/deficit area. As such, the student's current ability level should be clearly outlined in narrative format with corresponding data available. When combined, these two elements provide the specific present level of performance and provide justification for why the goal/benchmarks are being targeted at the exact level indicated. The PLAAFP should also explain how the student's disability affects their involvement and progress in the general education curriculum. For preschool students, as appropriate, the PLAAFP should explain how the disability affects the student's participation in appropriate activities.

Academic Achievement: Focus on the student’s strengths and needs that specifically relate to the subject area. Include what the student can and cannot do in that specific subject area and delineate how the student is performing at the time the IEP is being developed. The student’s most recent grade in the subject being addressed may be included but should never be the sole basis for a “present level” statement.

Functional Performance: Discuss how the student functions by describing motor, communication, social/emotional, adaptive/independent functioning skills, and, where applicable, vocational skills that relate to the subject area; this may include how the student performs with assistive technologies or augmentative communication systems.

Standardized Test Results: Identify any standardized test scores that relate to the subject area. Evaluation results from the most recent FIE may be included.

Measurable Annual Goal and Benchmarks or Short-Term Objectives

The goal is a statement of the level of performance the student is expected to achieve at the end of the IEP year, must align to the Common Core/Illinois Learning Standards, and must be measurable (e.g., contain evaluation criteria such as “in four out of five trials”). The goal must directly link to the PLAAFP just written and include instructional supports. (For example: Given guided practice, K-W-L, QAR, anchor charts, and scaffolding, student will demonstrate comprehension of grade-level literary and informational text by achieving 80% accuracy on curriculum-based assessments.) It is the final benchmark or short-term objective, so it reflects where the student should be within one year’s time or by the end date identified for the goal if shorter than one year.

The benchmarks or short-term objectives are the stepping stones to goal attainment, and as such must: be directly aligned to the present level statement and the goal; measurable and progress monitored at least quarterly; and include instructional strategies, such as assistive technology or augmentative communication solutions. Expectations should be set high for students with disabilities and, reflected in the evaluation criteria delineated in the benchmarks or short-term objectives. The evaluation guidelines identified to measure progress are implemented by the special education teacher/related service provider and shared at the next annual IEP meeting (e.g., charting, observation, oral/written test, etc.). The special education teacher/related service provider adheres to a schedule determining progress (e.g., daily, weekly, monthly, quarterly, or annually). When considering evaluation criteria and procedures for IEP goals and benchmarks or short-term objectives, align the frequency of progress monitoring to the Tiered Level of Support the student is receiving.

A student’s progress on benchmarks or short-term objectives, as measured by the evaluation procedure identified, must be reported quarterly in the IEP Report Card. It should be printed out and included with the student’s standard CPS Report Card and given to parents/guardians in the same manner as the standard Report Card. In addition, if a student’s IEP team determines that more frequent progress reporting is needed, the teacher will provide parents/guardians with the required information.

CONSIDERING A RELATED SERVICE

Related services refers to developmental, corrective, and other supportive services required to assist a student with a disability to benefit from special education. It includes speech-language pathology and audiology services, interpreting services, psychological services, social work services, physical and occupational therapy, recreation, (including therapeutic recreation), early identification and assessment of disabilities in children, counseling services (including rehabilitation counseling), orientation and mobility services, medical services for diagnostic or evaluation purposes, and transportation. Related services also include school health services, school nursing services, social work services in schools, and parent/guardian counseling and training.

Typically, related services include (but are not limited to):

- School nursing services, which work to minimize and/or remove physical and mental health barriers to learning and promote student health, thereby increasing instructional time and improving academic and functional performance
- Audiology services, which provide care in the prevention, identification, diagnosis and evidence-based treatment of hearing, and other auditory disorders. Audiologists provide services and supports in order to minimize the negative impact of these disorders, assist students in benefitting from their special education and ensure student access to the educational program;
- Social work and/or psychological services, which promote academic and social/emotional development by providing services to support the social, emotional, and behavioral needs of students;
- School social work services actively supporting the social and emotional, as well as educational outcomes of all students through the MTSS framework; implementation of evidence-based interventions, crisis intervention, and postvention; planning, development, and facilitation of positive behavior interventions, and supports; and coordination of relevant community resources to address specific needs of students within the home and school contexts;
- Speech-language pathology services, which address communication, language and related literacy needs. Speech-language pathologists (SLPs) work with a variety of communication disorders which adversely impact the academic performance of students;
- Occupational therapy services, which deliver diagnostic and therapeutic services to students by supporting academic and functional outcomes; and
- Physical therapy services, which evaluate and facilitate the development of functional gross motor movement skills in order for students to access and participate in the educational environment and benefit from their special education.

Related Service Providers (RSPs) are specialists who work directly with students and school personnel to improve educational outcomes by assisting students in benefitting from their special education and increasing student access to the curriculum and learning environment. RSPs provide a variety of prevention and intervention services; collaborate and consult with teachers, school staff, and families to provide instructional strategies along with behavioral interventions and classroom management skills; create a continuum of support services for all students; and provide direct services and supports.

NOTE: *The Illinois School Code now requires that the related services logs of students who receive related services must be made available to the parents/guardians at the annual IEP meeting, and a copy of the related services logs must be provided at any time upon the parent/guardian request.*

When an RSP supports an EL student's continued academic development, the RSP needs to use appropriate resources to communicate with the student in their primary language.

- To the maximum extent, monolingual RSPs provide services to ELs in a classroom with a bilingual/ESL-endorsed teacher; or
- In limited circumstances when providing services in a separate environment, the monolingual RSP may be assisted by a:
 - Bilingual/ESL teaching assistant; or
 - Bilingual/ESL-endorsed teacher providing consultation.

An IEP team may decide that a student with disabilities needs related services only if documentation shows that the student has an identified disability **AND** the student needs related services to benefit from their special education in **AT LEAST ONE** of the following areas:

- A. Academic**
- B. Functional**
- C. Vocational/Transition**

If the IEP team determines that a student needs direct related services, the team should next consider whether there is also a need for a RSP to consult with the classroom teacher(s), paraprofessional(s), and/or others in order to enhance development and generalization of the skill being addressed through direct service delivery.

Required Documentation within an RSP Report: Various sources of data can be used to help determine need for related services but not all data sources are required for all students.

Review – record review including but not limited to MTSS or other response to interventions data, any private sector reports and diagnoses

Interview – parent/guardian, teacher and/or student

Observe – formal or informal observation of student in multiple settings

Test – formal and informal assessment measures

Determining Need for Speech-Language Pathology Services

The development of communication skills is integral for the success of all students. The SLP works with a variety of communication disorders such as articulation (speech sounds), language comprehension (following directions, understanding texts), language expression (putting words together, using correct grammar, word meaning), voice (use of voice to produce sound), pragmatic language (social language) and fluency (rhythm of speech) which adversely impact the academic performance of students. SLPs in the schools work with students directly and/or with classroom teachers, families and administrators to address communication, language and related literacy needs. SLPs assist with the prevention of communication disorders through implementation of MTSS, identification of at risk students for academic problems, assessment of students' communication skills, implementation and development of IEPs and evidence-based interventions. The SLP works collaboratively with school staff, parents/guardians and the community to support the academic, social and vocational needs of all students.

An IEP team may decide that a student with disabilities needs school speech-language services only if **BOTH** of the following guidelines are discussed and documented:

GUIDELINE 1: SPEECH-LANGUAGE DEFICIT

The student has a speech-language deficit in **ONE OR MORE** communication areas below:

A. Language

The student:

- Has difficulty understanding and applying oral directions according to developmental norm;
- Has difficulty understanding conversations when compared to same-aged peers;
- Relates stories or events in an illogical, poorly organized manner;

- Has difficulty expressing their needs and ideas at an age-appropriate level;
- Has difficulty adapting language for a variety of social contexts; or
- Other (must be specified).

B. Speech or Sound Production

The student:

- Produces speech or sounds that affect intelligibility;
- Has one or more disordered phonological processes;
- Has consistent speech sound errors compared to typically developing students; or
- Has a feeding disorder due to oral motor dysfunction. If the oral motor dysfunction improves, feeding skills may improve.

C. Voice

The student:

- Based on medical documentation, has a vocal impairment without short-term physical, respiratory virus or infection; or
- Has a vocal disorder due to an impairment in one or more of the five voice characteristics: vocal quality, pitch, range, volume, and/or intensity.

D. Fluency

The student:

- Has atypical dysfluencies, such as:
 - Hesitations,
 - Repetitions (e.g., sound, syllable repetitions, whole word),
 - Prolongations, and/or
 - Blocks; or
- Has secondary behaviors related to dysfluencies, such as:
 - Eye blinking,
 - Facial tension,
 - Facial tics,
 - Poor eye contact,
 - Avoidance,
 - Tremors,
 - Pitch and loudness variability,
 - Facial grimaces, and/or
 - Lip, limb or torso movements.

GUIDELINE 2: SPEECH-LANGUAGE SERVICES ARE NECESSARY FOR THE STUDENT TO BENEFIT FROM SPECIAL EDUCATION

The student's speech issue adversely affects their academic and/or social performance, and/or postsecondary transition activities; or speech-language services are required to assist the student to benefit from special education.

ALL of the following guidelines must be discussed and documented. The speech-language services:

- Are required beyond that which is normally available to all students (e.g., tiered supports);
- Will support functional change in speech-language skill;
- Address skills that are significant, constant and developmentally appropriate;
- Are present regardless of the student's dialectical and/or characteristic of an EL;
- Are related to issues other than selective mutism¹⁰ or school phobia;

¹⁰ According to the DSM-V, selective mutism is a psychiatric disorder that impacts communication. Therefore, the school SLP can be a part of the IEP team that develops a treatment plan for a student who is selectively mute, but

- Are not contraindicated by medical/physical, dental, or other circumstances that warrant discontinuation of services temporarily or permanently;
- Are needed to meet continuing targeted speech-language goals/benchmarks, if any; and
- Are necessary for the student's educational performance or specially designed instruction and cannot be directly provided by any other school personnel.

Determining Need for School Audiology Services

An audiologist helps students with audiological deficits communicate and connect more effectively with others at school and school-related settings. A school audiologist conducts audiological evaluations for students with known or suspected hearing loss/disorders and/or central auditory processing disorders (CAPD). The audiologist also makes recommendations for goals, service delivery, and/or accommodations for students with hearing loss/disorders and/or CAPD to support them in school and school-related settings.

An IEP team may decide that a student with disabilities needs school audiology services only if **BOTH** of the following guidelines discussed are documented:

GUIDELINE 1: HEARING LOSS/DISORDER AND/OR CAPD HAS BEEN IDENTIFIED THROUGH AN EVALUATION

GUIDELINE 2: AUDIOLOGY SERVICES ARE NECESSARY FOR THE STUDENT TO BENEFIT FROM SPECIAL EDUCATION

ALL of the following must be discussed and documented. The student's audiology services:

- Are required and are beyond that which is normally available to all students;
- Will support:
 - Further functional change in hearing function, and/or
 - Hearing amplification and/or auditory processing in order to access education and to participate successfully throughout the day;
- Are not contraindicated due to medical/physical, psychological, or other circumstances that warrant discontinuation of services temporarily or permanently;
- Are needed to meet all targeted hearing supports, goals/benchmarks, if any; and
- Are necessary for the student's educational performance or specially designed instruction and cannot be directly provided by any other school personnel.

Determining Need for School Social Work and/or School Psychological Services

School Social Worker Roles and Responsibilities:

School social workers promote academic and social/emotional development by providing a wide array of services to support the social, emotional and behavioral needs of all students. They provide services to students both in general and special education programs, using individual, group and classroom settings. School social workers support educational outcomes through implementation of MTSS utilizing evidenced-based interventions; development and implementation of intervention and prevention programs that assist in the reduction of at-risk students; and participation on problem-solving teams in the school environment to support student success. They foster a positive and safe learning environment by facilitating the development of students' prosocial, decision-making and self-management skills.

not the sole provider. Given the nature of this disorder, other relevant RSPs include but are not limited to the school social worker and school psychologist.

School social workers act as a liaison between home, school and the community through collaboration with teachers, parents/guardians and community agencies.

School Psychologist Roles and Responsibilities

School psychologists are qualified members of school teams that support students' ability to learn and teachers' ability to teach. School psychologists provide direct support and interventions to students, consult with teachers as well as collaborate with families, and other school based mental health professionals (e.g, school counselors, school social workers). Such collaboration enhances evidence based support strategies. School psychologists may also work closely with school administrators to improve school-wide practices and policies, and collaborate with community providers to coordinate needed services. They help schools successfully:

- Improve Academic Achievement
- Promote Positive Behavior and Mental Health,
- Support Diverse Learners,
- Create Safe, Positive School Climates,
- Strengthen Family-School Partnerships,
- Improve School-Wide Assessment and Accountability Monitor Individual Student Progress in Academics and Behavior.

School psychologists serve as members of interdisciplinary teams to address the needs of all students, including involvement in MTSS. They are an integral part of the MTSS, from system-wide program design, consultation, data collection and analysis, to specific assessment and intervention efforts with individual students. School psychologists support a students' ability to learn and teachers' ability to teach. They apply expertise in mental health, learning, and behaviors to help children and youth succeed academically, socially, behaviorally, and emotionally. School psychologists partner with families, teachers, school administrators, and other professionals to create safe, healthy, and supportive learning environments. School psychologists are instrumental in FIEs and the eligibility determination of an educational disability.

An IEP team may decide that a student with disabilities needs school social work and/or psychological services only if documentation shows that **BOTH** of the following criteria are met:

GUIDELINE 1: STUDENT DEMONSTRATES SOCIAL, EMOTIONAL, OR ADAPTIVE SKILL DEFICITS AND/OR BEHAVIOR THAT IMPEDES THE STUDENT'S LEARNING OR THAT OF OTHERS

School social work or psychological services should be considered if a student has an ongoing or recurring need, such as, but not limited to:

- Exhibits difficulty developing and/or sustaining appropriate social relationships with peers and/or authority figures;
- Requires support to identify, manage, and regulate feelings/emotions;
- Needs assistance resolving conflicts effectively with peers and/or adults;
- Struggles with responsible decision making and anticipating the consequences of their behavioral choices;
- Displays difficulty with knowledge and awareness of their own personality/character;
- Struggles with self-management and taking responsibility for their own actions, behaviors, and well-being;
- Requires assistance with organization, time management, and planning skills; and
- Employs ineffective problem solving and coping strategies in response to stressful situations.

GUIDELINE 2: SOCIAL WORK AND/OR PSYCHOLOGICAL SERVICES ARE NECESSARY FOR THE STUDENT TO BENEFIT FROM SPECIAL EDUCATION

ALL of the following guidelines must be discussed and documented. The social work and/or psychological services:

- Are required and are beyond that which is normally available to all students (e.g., tiered supports);
- Will support development or improvement of a student's social/emotional skills in order to access education and participate successfully throughout the day;
- Are needed to meet continuing targeted social-emotional IEP goals/benchmarks, if any; and
- Are necessary for the student's educational and/or functional performance or specially designed instruction and cannot be directly provided by any other school personnel.

Determining Need for School Nursing/Health Services

The essential role of the School Nurse is to work to promote the health of the whole child. This is achieved through collaborating relationships with teachers, counselors, and administrative staff to minimize and/or remove physical and mental health barriers to learning. School Nurses work to promote student health, thereby increasing instructional time and improving academic outcomes and functional performance. School nurses also provide first aid, emergency care and chronic condition case management to students.

There are three nursing classifications within CPS:

- **Licensed Practical Nurse (LPN)**
 - Performs certain direct and indirect clinical care as well as additional nursing duties under the direction and supervision of a registered nurse, as guided by the scope and standards of their professional licensure. LPN's may not write IEP or 504 plans.
- **Health Services Nurse (HSN)**
 - Registered Nurse
 - Delegation of Tasks to LPN and unlicensed assistive personnel, follow-up and implementation of IEP/504 plans and Family meetings
 - HSN's may not write IEP Plans
- **Certified School Nurse (CSN)**
 - Registered Nurse with School Nurse Certification
 - Delegation of tasks, writing of IEP/504 Plans, oversight of HSN and LPN Personnel

An IEP team may decide that a student with disabilities needs school nursing services only if **BOTH** of the following guidelines are discussed and documented:

GUIDELINE 1: HEALTH CONDITION/IMPAIRMENT

The student has a health condition/impairment in **ONE OR MORE** of the following areas:

A. Chronic Health Condition

The student has an ongoing or recurring health issue, such as, but not limited to:

- Asthma;
- Allergies;
- Diabetes-Type 1 or 2;
- Seizure Disorder;
- Sickle Cell Disease;
- Cardiomyopathy;
- Hemophilia;
- Cerebral Palsy; or
- Spina Bifida; or

- B. The healthcare provider has prescribed medication and/or a treatment procedure to control a condition, maintain a condition, prevent illness, or restore health; or
- C. The student has impaired mobility, chronic or temporary, which requires planning and accommodations in the school environment to assure the student's safety and comfort.

GUIDELINE 2: NURSING SERVICES ARE NECESSARY FOR THE STUDENT TO BENEFIT FROM SPECIAL EDUCATION

ALL of the following guidelines must be discussed and documented. The nursing services:

- Will be provided to support the health and well-being of students with chronic health conditions as documented by physician or healthcare provider.
- Assist with medication per physician or healthcare provider documentation;
- Are needed to meet all targeted nursing goals/benchmarks.

Determining Need for Occupational Therapy Services

The role of the occupational therapist includes providing diagnostic and therapeutic services to students, and collaborating with and supporting parents/guardians and school support staff. Occupational therapists work with members of the school-based team to break down barriers to students' learning environment in order to access their education. They support academic and functional outcomes, including social skills, math, reading and writing, behavior management, recess, participation in sports, self-help skills, pre vocational/vocational participation, and more. Occupational therapists are particularly skilled in facilitating student access to curricular and extracurricular activities through supports, designing and planning, and other methods. Additionally, they play a critical role in training parents/guardians, other staff members, and caregivers on educating students with diverse learning needs.

An IEP team may decide that a student with disabilities needs school occupational therapy (OT) services only if documentation shows that **BOTH** of the following guidelines are discussed and documented:

GUIDELINE 1: MOTOR OR SENSORY IMPAIRMENT/DEFICIT

The student has a motor or sensory impairment/deficit in **ONE OR MORE** of the following areas:

A. Motor Impairment/Deficit

The student:

- Needs assistance planning and producing voluntary movement;
- Does not reach for objects with intention;
- Has difficulty grading force and timing movement;
- Needs assistance demonstrating age-appropriate grasp and release;
- Has difficulty carrying objects; or
- Has difficulty initiating and completing activities of daily living, such as:
 - Arrival/departure;
 - Hygiene management or other self-care activities;
 - Feeding/eating; or
 - Other (must be specified).

B. Sensory Impairment/Deficit

The student:

- Has poor organized behavioral responses/unsafe behavior;
- Is unable to self-manage or self-monitor own behavior;
- Is inattentive or distractible resulting in off-task behavior the majority of the school day;
- Has extensive difficulty interpreting and integrating sensory input; or
- Has delays in developing an integrated perception of the world and/or delayed motor exploration of surroundings and objects.

GUIDELINE 2: OT SERVICES ARE NECESSARY FOR THE STUDENT TO BENEFIT FROM SPECIAL EDUCATION

ALL of the following must be discussed and documented. The occupational therapy services:

- Are required are beyond that which is normally available to all students (e.g., tiered supports);
- Will support:
 - Functional change in motor or sensorimotor skill function;
 - Self-regulatory behavior (e.g., develop strategies to manage incoming sensory information, choose appropriate responses, and maintain levels of arousal) to actively and effectively participate in learning; and/or
 - Effective use of adaptive devices /assistive technology to access education;
- Are needed to meet targeted motor or sensorimotor IEP goals/benchmarks; and
- Are necessary for the student's educational performance or specially designed instruction and cannot be directly provided by any other school personnel.

Based on Illinois licensure requirements, occupational therapists may evaluate and add services for students without physician's prescription document (PPD). Current PPDs (within one year) are required by Medicaid when OT services are included on a student's IEP.

Determining Need for Physical Therapy Services

School-based physical therapists evaluate and facilitate the development of functional gross motor coordination and movement skills in order for students to access and participate in the educational environment and to benefit from their special education. The physical therapist is responsible for evaluations and intervention, including participation in team decisions about eligibility and post-secondary transition planning. Physical therapy (PT) interventions are designed to enable the student to move throughout the educational environment; participate in academic and non-academic educational activities; and maintain and change positions across all educational environments.

An IEP team may decide that a student with disabilities needs school PT services only if documentation shows that **BOTH** of the following guidelines are discussed and documented:

GUIDELINE 1: PHYSICAL CONDITION/ORTHOPEDIC IMPAIRMENT

The student has physical condition/orthopedic impairment in **ONE OR MORE** of the following areas:

A. Posture and Positioning

The student:

- Needs assistance to participate in activities and routines due to poor postural control; or
- Needs assistance to sustain proper positioning.

B. Safe Transfers and Functional Mobility/Movement

The student:

- Needs assistance to keep up with peers due to poor speed and endurance;
- Has limited wheelchair skills;
- Needs assistance to safely transfer; or
- Needs assistance walking safely within educational environments.

C. Gross Motor Activities and Routines

The student:

- Needs assistance participating in age-appropriate motor activities and routines, such as:
 - Motor groups,
 - Physical education,
 - Recreation with peers.

D. Self-Care from a Gross Motor Perspective

The student:

- Needs assistance participating safely and/or independently in mealtime, e.g. navigating the lunchroom, carrying a lunch tray;
- Needs assistance participating safely and/or independently in entrance/exit routine due to mobility, transfers and/or balance concerns;
- Needs assistance participating safely and/or independently in toileting routine due to mobility, transfers and/or balance concerns; or
- Needs assistance to safely and/or independently manage classroom materials and personal belongings due to mobility, transfers and/or balance concerns.

GUIDELINE 2: PT SERVICES ARE NECESSARY FOR THE STUDENT TO BENEFIT FROM SPECIAL EDUCATION

ALL of the following must be discussed and documented. The physical therapy services:

- Are required are beyond that which is normally available to all students (e.g., tiered supports);
- Will support:
 - Effective use of adaptive devices/assistive technology to access education; and/or
 - Functional change in motor skill function;
- Address student's ability to independently transfer and take care of personal care needs throughout the school day;
- Are needed to meet targeted motor-related IEP goals/benchmarks, if any; and
- Are necessary for the student's educational performance or specially designed instruction and cannot be directly provided by any other school personnel.

Physical therapists may evaluate and provide services without a physician's prescription document (PPD) conditioned upon ability to communicate with the student's health care provider.¹¹ Current PPDs (within one year) are required by Medicaid when PT services are included on a student's IEP.

¹¹ Refer to the [Illinois Physical Therapy Practice Act](#).

PLACEMENT IN THE LEAST RESTRICTIVE ENVIRONMENT (IEP Section 12)

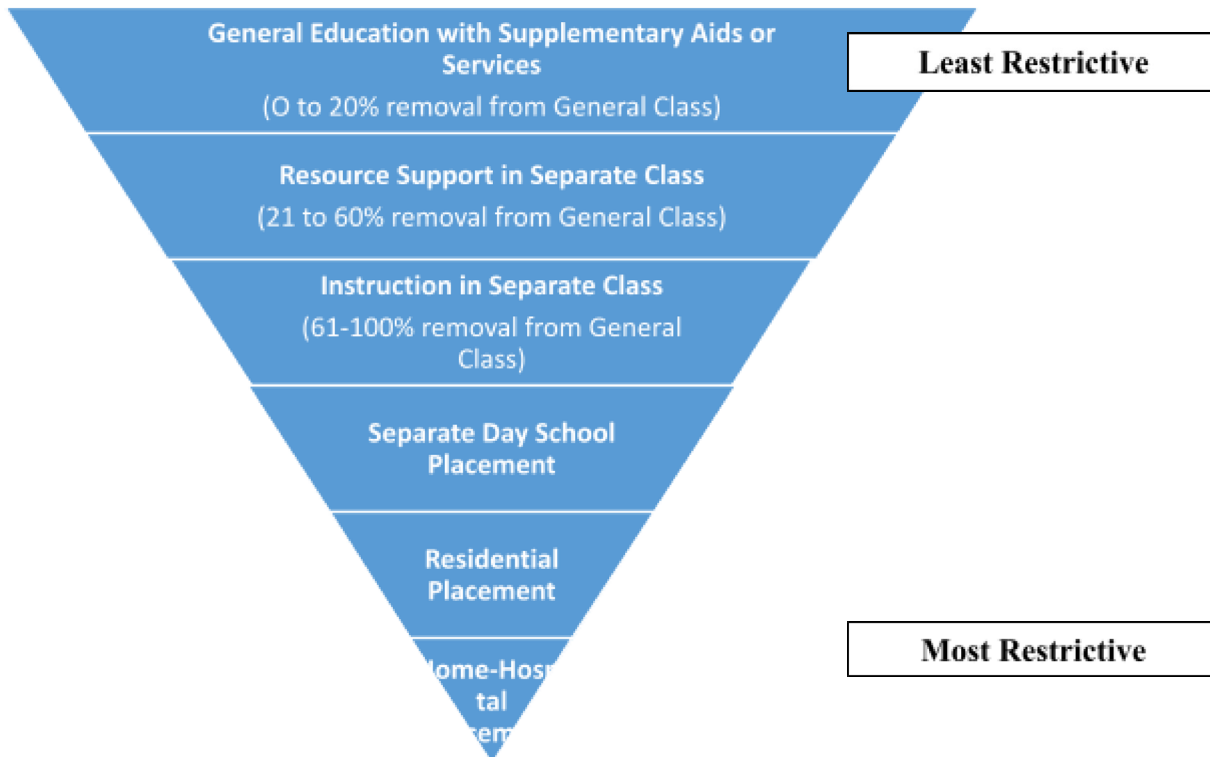
The IDEA requires that every eligible student who has a disability and is ages 3 through 21, must receive FAPE in the LRE that is appropriate for the student.

Placement/LRE is not the school/program location or services themselves. Rather, it is the spot on the District’s required continuum of placement options in which the student’s IEP can be implemented. The placement/LRE decision is made only after all of the goals, modifications and accommodations, and, when applicable, the BIP and/or transition plan have been developed in the IEP. The placement/LRE decision is based on the student’s unique needs and not on the student’s disabilities.

Least Restrictive Environment (LRE) Defined

The LRE mandate requires that, to the maximum extent appropriate, students with disabilities, including students in public or private institutions or other care facilities, are educated with students who are not disabled. Special classes, separate schools or other removal of students with disabilities from the general education classroom occurs only when the nature or severity of the student’s disability is such that education in the general education classroom with the use of supplementary aids and services cannot be achieved satisfactorily.

The Placement Continuum



The LRE may be very different for each student, but the determining factor is always the student’s individual needs. Depending on a student’s needs, the LRE could be:

- General education classroom full time with supplementary aids and services, including special education teacher support through consultation or co-teaching;

- Removal from the general education classroom up to 20% of the student's day (student spends the remainder of their day in the general education classroom with supplementary aids and services, as appropriate);
- Removal from the general education classroom between 21% to 60% of the student's day (student spends the remainder of their day in the general education classroom with supplementary aids and services, as appropriate);
- Removal from the general education classroom from 61% to 100% of the day (student has integrated activities whenever appropriate, including homeroom, art, gym, music, computers, lunch, field trips, assemblies);
- Placement in a separate special education facility (this can be a CPS separate school or State-approved nonpublic day school and integrated activities, including community-based programs, should be provided when appropriate);
- Placement in a residential facility; or
- Placement full-time in a home/hospital program.

Making the Placement/LRE Decision

Each year when the IEP is developed, the placement/LRE discussion for every student with a disability, including preschool students, begins with the general education classroom as the first placement option, including a discussion of special education, related services, and necessary supplementary aids and services being provided in the general education classroom. The IEP team should identify the student's strengths, and build upon those strengths while determining whether the student can benefit educationally from receiving their special education services and supports in the general education classroom. Non Academic considerations, such as the social/emotional benefits of interaction with non-disabled peers, communication development and self-care skills, are also important when discussing general education classroom placement. The deficit areas that have been identified in the IEP should be carefully reviewed annually to determine if services can be delivered in the general education classroom through consultation, co-teaching or other supplementary aids.

When determining the LRE for a student with disabilities and before the IEP team recommends educational services outside of the general education classroom, the team should address several questions to ensure that the student will be educated with non-disabled peers to the maximum extent appropriate.

- Would the student benefit from receiving special education and related services in a general education classroom for all or some of the school day?
- Can supplementary aids and services support the student's needs in the general education class?
- Can the student achieve their IEP goals within the general education classroom with the use of special education, related services, and/or supplementary aids and services?
- Does the IEP provide for a full range of supplementary aids and services that would facilitate the student's progress in the general education class?
- What are the nonacademic benefits to the student from interacting with non-disabled peers?
- Is the student so disruptive in the general education classroom that the student's education or that of other students is impeded, even with appropriate supports in place? and/or
- Does the student require the curriculum to be modified so significantly that it bears little or no relation to the general education curriculum and instruction in the classroom?

Begin the decision-making process by examining the general classroom placement as the first option. Have a serious and thoughtful discussion about the following three factors:

1. Consider whether the student can be educated satisfactorily in the general classroom with one or more of the following (not an exhaustive list):

- supplementary aids and supports program and/or curriculum modifications;
 - special education teacher co-teaching the class;
 - special education teacher and/or related service provider works with the student(s) individually or in small group within the classroom;
 - training or other supports for the general education teacher;
 - the use of AT; and/or
 - the implementation of a BIP designed to identify and meet the behavioral challenges presented by the student in the general education classroom.
2. Compare the academic and non-academic benefits to the student provided in the general education classroom and those provided in a special education classroom or separate setting including consideration of (not an exhaustive list):
- Social, communication, and self-help skills, as well as academic benefits; and
 - The general education classroom placement is not contingent on the student's ability to learn the same things in the same way.
3. Consider the potentially beneficial or harmful effects that a general education class placement may have on the student with a disability or the other students in the class including (not an exhaustive list):
- Positive benefits such as social interaction with non-disabled peers, peer modeling, high expectations, and acceptance of others; and
 - Harmful effects such as unduly disruptive behavior that impairs the student's learning or that of others, even with the implementation of a BIP and other supports.

Keep in mind that the placement decision cannot be solely based on:

- Category of disability;
- Severity of disability;
- Language and communication needs;
- Needed modifications to curriculum;
- Configuration of the District's service delivery system; or
- Availability of space or educational and related services.

No one factor outweighs the others. The IEP team should look at a student's individual needs and determine the most appropriate and least restrictive setting in which they would benefit educationally. Remember – even if the team determines that a student with disabilities should be placed in a separate class for particular curricular area(s), they still must be integrated with non-disabled peers to the maximum extent appropriate and have access to the age/grade-appropriate general education curriculum even in the separate setting.

If the IEP team determines that a student with disabilities must be removed from the general education classroom because they will not benefit educationally--even with the provision of special education, related services, and supplementary aids and services--the IEP team must document the basis for this decision. A decision to remove a student with disabilities from the general education setting must always be based on individual needs and not on the nature of the student's disability. Additionally, separate classes, separate schooling or other removal of students with disabilities from the general education classroom must only occur if the nature or severity of the disability is such that education in general education classes with the use of supplementary aids and services cannot be achieved satisfactorily.

If the student will be removed from the general education classroom for any part of the day, the IEP team will continue its discussion of the continuum of options to determine an appropriate placement. The IEP must support both the chosen LRE placement and the basis for rejecting each of the less restrictive settings. A student with disabilities does not have to fail in a less restrictive setting before the team reconvenes and discusses moving the student to a more restrictive setting.

In determining placement, including for preschoolers, the IEP team begins the discussion with the school that a student would attend if not disabled. If the student will not attend that particular school, the team then must support this decision and provide the closest appropriate school location that can implement the IEP.

Related Services Delivery and LRE

When a student with disabilities needs related services, the IEP team determines whether the related service will be provided in the general education classroom; in a separate location but with non-disabled peers; in a separate class with no non-disabled peers; or in a combination of these locations. The first option considered should be a general education environment. Services provided in a general education setting meet the needs of students by providing access for all learners to the general education curriculum, promoting their relationships with general education peers, and eliminating additional transitions during the school day whenever practicable. Location of the services is based on the student's individual needs and on the most appropriate environment for skill acquisition. The location for related services may change over time in response to student performance and the educational program. If the team determines that the general education classroom or an integrated setting with non-disabled peers is not the appropriate location for delivery of the related services, the basis for this decision must be included on the IEP.

Nonacademic and Extracurricular Activities and LRE

In providing or arranging for the provision of nonacademic and extracurricular activities, the IEP team must ensure that each student with a disability participates in these activities with non-disabled students to the maximum extent appropriate. The socialization opportunities available to students with disabilities when participating in these activities are very important. The IEP reflects the special education, related services, or supplementary aids and services that are necessary to enable the student to participate in the nonacademic and extracurricular services offered at the school.

Extended School Year and LRE

LRE must also be discussed by the IEP team in the context of an ESY program for a student who is eligible for ESY services; however, the IDEA does not require that a school establish summer programs for non-disabled students for the sole purpose of providing integrated activities for students with disabilities in ESY programs. Because the primary purpose of ESY services is to prevent severe regression and recoupment problems, a student's placement for ESY services may differ from the placement during the regular school year. The LRE decision for ESY is made on a case-by-case basis.

Separate Day School or Residential Placements

If placement in a separate day school or residential setting may be discussed at the IEP meeting, the ODLSS District Representative **MUST** be invited to the meeting and will participate as the District Representative.

Placement in a nonpublic separate day or residential school is appropriate only if the IEP team determines, based on data and other relevant information, that the nature or severity of a student's academic or functional (e.g., social/emotional, behavior, or transition) needs due to their disability (i.e., regardless of disability classification) is such that education within the CPS system, with the use of special education, related services, and supplementary aids and services, cannot be satisfactorily achieved. As with all IEP decisions, placement (including, but not limited, to separate day school or

residential placements) may not be determined prior to an IEP meeting and without parent/guardian input.

The separate day or residential school must provide all special education and related services and all educational accommodations and supports in accordance with the IEP and at no cost to the parents/guardians. CPS retains responsibility for the continued development, review and revision of the student's IEP. The duration of a student's placement in a separate day or residential school will depend upon the student's individual needs, as determined by the IEP team.

A student placed by CPS in a separate day or residential school retains all of their substantive and procedural rights under IDEA.

If an IEP team is considering whether a student with disabilities requires a separate day school or residential placement due to behavioral needs, **ALL** of the following guidelines must be discussed and documented:

GUIDELINE 1: HIGHLY INTENSIVE BEHAVIOR

The student's behavior is considered to be **highly intensive** compared to peers, and includes but is not limited to:

- Physical aggression that causes serious bodily injury, including but not limited to:
 - Hitting/kicking,
 - Biting, or
 - Fighting.
- Self-injurious behavior;
- Property destruction that causes or may cause injury to self/others (e.g., throwing furniture, materials); and/or
- Sexual behaviors (e.g., harassment, aggression).

GUIDELINE 2: FREQUENT BEHAVIOR

The student's behavior occurs at a frequency and/or duration that **significantly differs** from that of peers in the student's class.

GUIDELINE 3: TIERED SUPPORTS AND INTERVENTIONS IMPLEMENTED WITHOUT SUCCESS

As documented by the student's teacher pursuant to the MTSS/Response to Intervention framework or IEP progress monitoring, the school team should have done the following with fidelity and consistency without improved student behavior:

- Requested parent/guardian consent to conduct/update an FBA and followed the procedure outlined above.
- Convened an IEP meeting to develop or update the BIP.
- Implemented function-based interventions and progress monitoring, including data collection (e.g., behavior interventions for a minimum of five weeks, where practicable).

With regards to behavior, the IEP team should also consider information, if any, regarding student hospitalization, SASS assessments, recommendations from private service providers who work with the student, as well as parent/guardian input.

If an IEP team is considering whether a student with disabilities requires a separate day school or residential placement due to needs other than behavioral needs, **ALL** of the following guidelines must be discussed and documented:

GUIDELINE 1: HIGHLY INTENSIVE ACADEMIC OR FUNCTIONAL NEEDS

The student's academic or functional (including, but not limited to, emotional, adaptive, or transition-related) needs are considered to be **highly intensive**. This may include, but is not limited to, a need for:

- Unique specialized instruction due to significant academic delays and failure to make progress;
- Educational setting with therapeutic milieu and/or access to specially-trained staff throughout the school day;
- One-on-one or small group (less than three students) specialized instruction or services continuously throughout the school day; or
- Unique vocational programming that is not otherwise available in a District program.

With regard to functional needs, such as emotional or adaptive, the IEP team should also consider information, if any, regarding student hospitalization, SASS assessments, recommendations from private service providers who work with the student, as well as parent/guardian input.

GUIDELINE 2: DISTRICT PROGRAMMING, INCLUDING SUPPLEMENTARY AIDS AND SERVICES, CANNOT SATISFACTORILY ADDRESS THE ADVERSE EFFECTS OF THE STUDENT'S DISABILITIES AND IS INSUFFICIENT TO MEET THE STUDENT'S IDENTIFIED NEEDS

Home or Hospital Placements

The continuum of placement options includes instruction in the home or hospital setting when a student is unable to attend a school elsewhere due to a medical condition. A certified school nurse and the ODLSS Home/Hospital Manager must be members of the IEP team that makes this placement decision.

In addition, when a student has a medical or psychiatric condition that will cause an absence of two or more weeks of school or on an ongoing intermittent basis, the student's IEP team must consider the need for home or hospital instruction and related services. In such cases, home or hospital instruction and related services must be based on a written statement from a physician licensed to practice medicine in all of its branches, licensed physician's assistant, or licensed advanced practice nurse that specifies: (1) the student's medical or psychiatric condition; (2) the impact of the condition and treatment or therapy on the student's ability to participate in education (the student's physical and mental tolerance for receiving educational services); and (3) the anticipated duration or nature of the student's absence from school. Home or hospital services required by the IEP must be implemented no later than 5 school days after CPS receives the physician's written statement.

NOTE: *"Ongoing intermittent basis" means that the student's medical or psychiatric condition is of such a nature or severity that it is anticipated that the student for periods of at least two days at a time multiple times during the school year totaling at least ten days or more of absences. Also, there is no requirement that a student be absent from school a minimum number of days before the student qualifies for home or hospital instruction.*

The main goal of home/hospital services is to provide the student access to instruction while the student is away from school managing an illness. This program strives to keep the student current with classroom instruction and facilitate the seamless return to the classroom setting. The amount of instructional and related service time will not be less than five hours per week, unless a physician in writing states otherwise, and will only occur on regularly scheduled CPS school days. Homebound support generally begins after regular school hours and ends by 7:00 p.m., but this must always be determined by a student's IEP team based on their individual special educational needs and medical advice from the licensed physician, licensed physician's assistant, or licensed advanced practice nurse.

NOTE: *CPS staff should visit the [KNOWLEDGE CENTER \(Homebound Services\)](#) for additional information.*

Review of Placement/LRE

The IEP must be reviewed and revised as appropriate, but at a minimum of once a year. At each IEP meeting, the LRE placement of the student is discussed, beginning with placement in the general education classroom. The IEP team may recommend placement in a more restrictive setting only if the student's needs can no longer be met in a less restrictive placement, based on data provided in the IEP. The IEP must educationally justify the new placement.

Potential Harmful Effects

In selecting the placement, the IEP team must consider the potential harmful effects, if any, on the individual student or the efficiency of services that the student needs in the identified placement. Whether or not any harmful effects exist is noted on the IEP. Some potential harmful effects to consider include, but are not limited to:

- Decreased access to the instructional opportunities available in integrated settings;
- Lack of opportunity for social interaction with non-disabled peers;
- Decreased self-esteem;
- Lack of opportunities for appropriate social, behavioral, or communication role models;
- Stigmatization; and/or
- Travel time to and from school location.

PARAPROFESSIONAL SUPPORT¹²

In addition to the classroom teacher or Related Service Providers, paraprofessionals (Special Education Classroom Aide) may be needed to provide a student with support for the need for personal care, or for medical, academic, behavior, social, communication or other issues at school, and/or at school-sponsored activities or events. Any member of the IEP team, including the parents/guardians, may initiate a request for paraprofessional support to be discussed at the IEP meeting and for qualitative and quantitative¹³ data to be gathered to support this discussion. When the IEP team determines that paraprofessional support is required, the team will also determine if it is appropriate to include in the student's IEP a relevant measurable goal designed for the student to achieve greater independence within the targeted area(s) of need and decrease reliance on paraprofessional support.

If a student with disabilities is in an ODLSS assigned program, the IEP team should determine whether the student's needs can be met in the separate cluster classroom with a teacher and the programmatic paraprofessional(s) already assigned to the classroom. If so, indicate this on the IEP and specify the specific support(s) the student will need from the programmatic paraprofessional. If the student needs no other adult assistance, none of the below guidelines apply. If the student also requires personal care (including medical) assistance, the IEP team should also follow Guideline 1 below. If the student needs support with academic and behavioral issues beyond the teacher and the programmatic paraprofessional(s) assigned to the classroom, the IEP team should follow Guidelines 2 and 3 below.

If the qualitative and quantitative data, other relevant information collected, and IEP team discussion support a need for paraprofessional support, the team must then specify on the IEP (i) when, where, and for what tasks or activities paraprofessional support is needed; (ii) if the paraprofessional will be shared or dedicated per task/activity; and (iii) any training or other supports that the paraprofessional should be provided. The IEP team must also develop a *Student Independence Paraprofessional Plan* in which the team identifies strategies to promote independence as well as to fade the student's need for paraprofessional support across all relevant settings.

For all other students with disabilities, an IEP team may decide that the student needs paraprofessional support only if documentation shows that **ONE OR MORE** of the following Guidelines have been discussed, based on qualitative and quantitative data and other relevant information, and support the team's decision.

GUIDELINE 1: PERSONAL CARE OR MEDICAL CONDITION

The student's teacher and Related Service Provider provide documentation of the student's potential or continuing need for assistance, extending beyond that which is expected for same age peers, in **ONE OR MORE** of the following specific area(s) of support:

A. Toileting/Hygiene

The student requires direct services from an adult for moving, transferring, positioning, initiating or completing toileting/diapering/hygiene activities, such as:

¹² For additional information regarding criteria to determine if a student requires paraprofessional support, see the [Chicago Public Schools Procedures and Guidelines – Paraprofessional \(IEP and Section 504\) 2019-20 School Year Support](#).

¹³ Qualitative and quantitative data needed to determine whether a student requires paraprofessional support will vary, depending on the need(s) for which the IEP team is contemplating paraprofessional support. For support with personal care, the team may consider reports from OTs, PTs, doctors, etc., or staff or parent/guardian input as to why the student needs assistance. For support related to behavior, the data should describe the target behavior(s) (e.g., elopement) along with frequency and/or duration of the target behavior(s). For support related to academics, the data should describe how the area of concern is currently being addressed, the frequency and duration of needed support(s) (e.g., student requests directions be repeated every 5 minutes), and why the needed support(s) exceeds what a teacher alone can provide in a classroom setting. Data should include, for both behavior and academic, current and past intervention(s) and their effectiveness or lack thereof.

- Cueing and supervising the completion of toileting;
- Diapering or toileting when, for example, the student is:
 - Not toilet trained;
 - Trained, but requires lifting onto toilet; and/or
- Not independent with tasks related to personal hygiene.

B. Mobility

The student requires direct services from an adult to be mobile or maintain mobility in activities, such as:

- Moving from sitting to a standing position and/or standing position to sitting;
- Walking;
- Range of motion; and/or
- Mobility and/or mobility training as needed when, for example, the student:
 - Is in a wheelchair and unable to navigate independently;
 - Uses a walker or wears orthotics but is unable to navigate independently; and/or
 - Is blind or visually impaired and unable to navigate independently.

C. Lifting/positioning

The student requires direct services from an adult for lifting/positioning in activities, such as:

- Cueing the student to adjust positioning to prevent stiff muscles/sores;
- Assisting the student to adjust positioning to prevent stiff muscles/sores; and/or
- Moving the student from one position to another.

D. Feeding

The student requires direct services from an adult for feeding activities, such as:

- Cueing and supervision of eating; or
- Feeding when, for example, the student:
 - Is unable to feed self;
 - Requires prompting to feed self; and/or
 - Requires assistance with food preparation.

E. Monitoring and Documenting Medical Conditions

The student requires direct services from an adult for monitoring or documenting medical or health conditions, such as:

- Asthma;
- Diabetes;
- Seizure disorder; or
- Other medical conditions.

F. Dressing

The student requires direct services from an adult for dressing activities, such as:

- Dressing when, for example, the student is unable to:
 - Put on or take off own clothing, coat, shoes or boots, etc.;
 - Put on or take off orthotics; and/or
 - Button or secure buttons, snaps, or zippers.

G. Other Daily Living Skills

The student requires direct services from an adult for other activities of daily living not listed above.

GUIDELINE 2: ACADEMIC SUPPORT

Prior to considering a student's need for paraprofessional support based on Guideline 2, the student's teacher and/or Related Service Provider should collect qualitative and quantitative data for:

- Each subject area (e.g., English/Language Arts, Math, Science, etc.) in which a paraprofessional may be required **and** in each setting (i.e., general education class, separate class, and community, where applicable) for each subject area; and/or
- Exploratory classes, regardless of setting.

The student's teacher or Related Service Provider, including bilingual-endorsed personnel for an EL student, should provide qualitative and quantitative data of the student's potential or continuing need for assistance in **ONE OR MORE** of the following specific area(s) of support:

A. Reinforce instruction that teacher has already provided

The student requires direct support during instruction, such as:

- Frequent additional explanations concerning assigned work;
- Hand-over-hand assistance, organizational assistance, or other assistance during school activities; and/or
- Practice and repetition of skills.

B. Review of directions

The student requires direct assistance in understanding or following directions, such as:

- Repeating directions using their own words;
- Breaking directions down into manageable pieces; and/or
- Providing directions in more than one format (verbal, visual, written, gestures).

C. Completion of Tasks

The student requires direct support to complete tasks, such as:

- Identifying assignments or tasks to be completed with due date/time due identified;
- Breaking down each task/assignment into smaller tasks;
- Developing a rubric or simple checklist; and/or
- Setting up and/or using AT.

D. Remaining engaged/on task

The student requires direct delivery of prompts, which increases the likelihood that the student will emit a correct response and reduces the possibility of errors being made, in forms such as:

- **Proximity prompting**, which involves positioning self or item in a particular location near the student to encourage desired behavior;
- **Gestural prompting**, which involves using a direct or indirect physical gesture to encourage desired behavior, such as, pointing, nodding, or motioning;
- **Verbal prompting**, which is a direct or indirect cue or instruction that is given orally before or during the student's action or response. This can include full verbal prompts and partial verbal prompts (e.g., verbally models only part of the desired behavior);
- **Visual prompting**, which is the use of direct or indirect visuals such as pictures, symbols and text that can assist a student to respond correctly; and/or
- **Physical prompting**, which may include full physical assistance (e.g., hand over hand when teaching the child to pick up a cup, the teacher takes the child's hand and guides him to pick it up) partial physical assistance (e.g., when teaching the child to pick up the cup, the teacher guides the child's hand to the cup by tapping his elbow).

E. Communication

The student requires direct communication support, such as:

- Visual support, which involves the provision of picture supports for students to answer questions, provide information, and engage in social interactions;
- Total communication support for students to use various modes of communication, (e.g., sign language, oral, auditory, written and visual aids, etc.); and/or

- Augmentative communication device support, which is the support of students as they use a device or communication system. This would be done in conjunction with supervising personnel such as or occupational therapist (OT), speech-language pathologist (SLP) and/or teacher.

GUIDELINE 3: BEHAVIOR, INCLUDING SAFETY AND SOCIAL SUPPORTS

If paraprofessional support may be required for **both** academic and behavior reasons within the classroom setting, the qualitative and quantitative data described in Guideline 2 should also include behavior data.

If paraprofessional support is only being considered for behavior reasons, and not academic reasons, the student's teacher and/or Related Service Provider should collect qualitative and quantitative data documenting the student's potential or continuing need for assistance in **ONE OR MORE** of the following specific area(s) of support:

A. Physical aggression

The student, as outlined in the student's BIP:

- Is a safety threat to self;
- Is a safety threat to others; and/or
- Is a threat to school property or personal property in the school.

B. Safety/supervision

The student, as outlined in the student's BIP, requires direct supervision to address the student's potential harm to self or others during activities such as:

- Offsite travel, in unstructured settings, etc.;
- Transition within the classroom;
- Transition across school environments; and/or
- The student:
 - Leaves assigned area without permission;
 - Leaves school building without permission (elopement); and/or
 - Attempts to ingest inedible objects.

C. Social support to model and/or facilitate appropriate social interactions

The student requires direct support to engage in social interactions appropriately, such as:

- Reinforce behavioral, interpersonal, and social communication skills;
- Modeling skills necessary to appropriately join, leave, comment, and participate appropriately in a social conversation and encouraging imitation of that behavior; or
- Reinforcing use of new skills (e.g., self-awareness, conflict resolution, social interactions, etc.).

CURRICULUM, GRADES, PROMOTION AND GRADUATION (IEP Section 13)

Significantly Modified Curriculum

Significantly modified curriculum changes what is being taught (not how the material is taught), which requires the standards to be significantly altered to meet the individual student's needs. Modifications to the curriculum may involve combinations of altered content knowledge, conceptual difficulty, educational goals, and instructional method. The IEP team must specifically describe how the standard curriculum has been modified to meet the student's needs.

Grades

With the identified services and supports in the IEP, most students with disabilities will have the school's standard grading criteria applied. All students with disabilities must receive a grade for all subject areas reported for all other students in their grade. Students with disabilities should receive grades both on class assignments and their report card based on the level of achievement and progress toward curriculum standards and mastery of IEP goals/benchmarks.

If a modified grading criterion is necessary, the IEP team determines whether the grading scale (e.g. 92% = A; 82% = B) used by the school needs to be modified for the student and/or whether a new grading rubric needs to be developed that includes items other than numeric grades (e.g. attendance, class participation). A weighted grading system that arbitrarily assigns lower grade weights due to a student with an IEP cannot be used. Depending on the general education course syllabus and grading criteria by subject, an alternate system can be adopted to grade the individual student in each course or subject based on the student's needs. For example, if all students are graded using the following weighted system: 30% classroom assignments/projects, 40% classroom assessments, and 30% homework, the IEP team can modify the general education grading system for a student with a disability by indicating the student will not be graded on homework and class participation will be substituted for that 30% of the grade.

If a student with a disability exceeds or fails to meet general or IEP-modified standards, the grade should reflect that achievement. There is no categorical rule that prohibits a student with disabilities from receiving a high ("A") or low ("F") grade. When a student has chronic poor achievement, school staff should use the evaluation and IEP process to ensure that all appropriate curricular supports are identified and being provided.

Students with disabilities receive a standard Report Card in addition to the IEP Report Card. On the IEP Report Card, the special education teacher and/or related service provider describes the student's progress toward meeting the annual goals. The standard Report Card gives letter grades for specific academic areas. The general education teacher assigns the grade to a student with a disability placed in their class for that subject area; the special education teacher assigns the grade to a student with a disability placed in their separate class and the student does not receive instruction in the general education class for that particular subject. The general and special education teachers collaborate to ensure that the letter grade and IEP Report Card accurately reflect the student's performance. On the IEP Report Card, related service providers are expected to describe the student's progress toward meeting any annual goal in their discipline.

The local school district representative is responsible for maintaining documentation that the IEP Report Cards were provided to parents/guardians of students with disabilities.

Promotion and Graduation

All students with disabilities are expected to meet the CPS promotion policy criteria, and each student's IEP must reflect whether the student is expected to meet the standard promotion criteria or a modified one. Based on the student's individual needs, the IEP team determines whether the student requires a modification to the promotion criteria; if so, the team should identify which criteria will be modified, along with a description and explanation of the basis for the modification.

The IEP team should have high expectations for all students with disabilities. The need for special education and related services does not automatically indicate that a student is unable to meet promotion or graduation criteria. Since IEPs provide supports and services, accommodations and modifications in the classroom, on standardized testing, and/or grading, students with disabilities are expected to meet the same promotion criteria as their non-disabled peers. Modification to the promotion criteria should be the exception, rather than the norm.

Students with disabilities are not required to meet additional promotion criteria compared to their same grade, non-disabled peers. For example, the standard promotion policy for students in 3rd grade is meeting a certain score on a District assessment and grades. For a 3rd grade student with disabilities, the modified promotion criteria should only address the required score on the District assessment and needed grades but never add another criteria (e.g. adding an attendance requirement) or increase an existing criterion (e.g. increasing the NWEA promotion score).

The Board promotion policy does not include specific criteria for students, including students with disabilities, who are not in benchmark grades (K, 1, 2, 4, 5, and 7). The [policy](#) indicates that students can be retained at the "discretion of the school." For students with disabilities in these grades, the IEP team determines whether the school has its own promotion criteria and if it needs to be modified based on individual needs. If the school does not have its own promotion criteria for that grade, the team indicates standard criteria on the IEP. Board policy indicates Kindergarten students may not be retained.

Chicago Public Schools requires high school students to successfully complete a minimum number of credits before they can be promoted to the next grade level and graduate.

If at the end of a report card quarter, or near the end of a school year, the student is not on track for meeting the promotion criteria outlined in the IEP, the IEP team must reconvene to consider the following questions:

- Were the appropriate promotion criteria established for the student?
- Were the services identified in the IEP appropriate to meet the student's needs to enable the student to meet the identified promotion criteria?
- Was the IEP method of assessing the student's performance on meeting IEP goals/benchmarks or short-term objectives, classroom and district/state assessments appropriate?
- Was the IEP implemented?

If all the above questions were answered "yes," the student will not be promoted to the next grade and CPS summer school policies should be followed unless the IEP team has determined that the student requires ESY services.

If any answers to the questions are "no," the IEP team revises the IEP as necessary. The team may decide to change the promotion criteria and make any necessary revisions to goals, accommodations, modifications and/or grading criteria to enable the student to be involved and make progress in the general education curriculum.

To comply with the Illinois School Code and the Chicago Board's enrollment procedures, all students, including students with disabilities who turn 15 on or before September 1st must be enrolled in a high school program.

High School Graduation

All students with disabilities are expected to meet the CPS graduation requirements and the student's IEP must reflect whether the student is expected to meet the standard graduation criteria or a modified one. For a student with a disability, graduation with a regular high school diploma is a significant change in placement and terminates a student's right to FAPE. Based on the student's individual needs, the IEP team determines whether he/she requires a modification to the graduation criteria; if so, the team should identify which criteria will be modified along with a description and explanation for the basis of the modification.

On an annual basis, the IEP team decides if the student will graduate high school in the traditional four-year time span or requires special education, transition planning or services, or related services beyond that point. The projected year of graduation is discussed in the context of every IEP team's transition planning and is reflected on the IEP to ensure appropriate credit acquisition and transitional-related services. In deciding when a student is ready to graduate, the IEP team reviews the accumulation of required credits and other high school graduation criteria, as well as the student's transition readiness.

Pursuant to Board policy, all students with disabilities receive a standard diploma when they meet standard or IEP modified graduation requirements. At the time of graduation with a regular high school diploma or reaching the the end of the school year during which the student turns 22, the school must complete the *Summary of Performance* form to provide the student with a summary of the student's academic achievement and functional performance, including recommendations on how to assist the student in meeting their post-secondary goals.

Notice to Parent/Guardian/Adult Student

When a student with a disability reaches the age of majority (18 years of age) or becomes an emancipated minor pursuant to the Emancipation of Minors Act, special education rights transfer from the parent/guardian to the student. Both the parent/guardian and the student shall receive written notification of the transfer of rights at the student's IEP meeting convened during the school year in which the student turns 17 years of age. Upon reaching 18 years of age, both the parent/guardian and the student shall receive written notification that the rights have transferred.

NOTE: *If a student has been adjudged as a person with a disability or has executed a Delegation of Rights form that is still in effect, the special education rights are retained by the parent/guardian or the adult designated in the Delegation of Rights form.*

At least one year prior to a student's anticipated graduation, if the student is to receive a regular high school diploma, both the parent/guardian and the student shall receive written notification that eligibility for CPS special education services ends following the granting of the diploma. The parent/guardian or student may request an IEP meeting to review the recommendation that the student receive a high school diploma and graduate.

NOTE: *"Brittany's Law" – Illinois law allows a student with disabilities to participate in the graduation ceremony with their non-disabled peers, if they have completed at least 4 years of high school, but will continue to require special education, related services, and/or transition services, as determined by the student's IEP team. Students and their parents/guardians may request this option through the principal or local school district representative. The school must*

allow the student to participate in the ceremony if they have completed at least 4 years of high school and requests to participate in the graduation ceremony. At the ceremony, the student will not receive a high school diploma, and will be expected to return to school the next year to continue their special education program.

EXTENDED SCHOOL YEAR (ESY) (IEP Section 14)¹⁴

ESY services provide special education and related services beyond the CPS normal school year to students with disabilities who need such services to receive FAPE. The primary purpose of ESY is to prevent significant skill loss caused by an interruption of special education and/or related services during extended periods when school is not in session.

All students with disabilities must be considered for ESY services on an annual basis. ESY may be necessary when a student is likely to experience regression in areas of learning crucial to their attainment of self-sufficiency and independence during scheduled breaks in instruction.

Eligibility Criteria for Determining Need for ESY Services

An IEP team may decide that a student with disabilities needs ESY services to receive FAPE only if qualitative and quantitative data¹⁵ shows that **ONE OR MORE** of the following criteria are met:

CRITERIA 1: REGRESSION/RECOUPMENT¹⁶

The student compared to students without disabilities:

- Loses knowledge/skills related to specific IEP goals following summer, winter and/or spring break or other breaks in instruction; AND
- Requires more time to recoup the knowledge/skills relevant to the measured IEP goals.

***Note:** All students typically spend time at the beginning of each school year for review and re-teaching of previously learned skills. Longstanding ISBE guidance suggests that review and re-teaching should not extend beyond the first 30 school days of a school year.*

CRITERIA 2: SKILLS IN CRITICAL STAGE OF DEVELOPMENT

When a student is in a critical stage of developing a skill that will increase their academic or functional performance or self-sufficiency, and the skill is not completely acquired and mastered at the end of the school year, it is likely that the emerging skill will be lost due to the interruption of instructional services, particularly during the summer break.

The special education teacher(s) and related service provider(s) collect qualitative and quantitative¹⁷ data for each specific skill/goal that is relevant to the student's potential need for ESY. The data must show that **EACH** of the following are met:

- A. The specific skill/goal will enable the student to increase their academic or functional performance or self-sufficiency. Examples of such skills include but are not limited to:
 - Acquiring the ability to communicate, e.g., functional sign, communication device, braille;

¹⁴ For additional information regarding eligibility for ESY, see the [Chicago Public Schools Procedures and Guidelines – Extended School 2019-20 School Year \(ESY\)](#).

¹⁵ Qualitative and quantitative data in the context of regression/recoupment means data demonstrating the student's level of mastery of a specific skill/goal being contemplated for ESY right before the summer, winter, and/or spring break; the student's level of mastery when he/she returns from break; and progress monitoring levels in that specific skill/goal over a period of time, such as the first 30 school days of the new school year, to demonstrate recoupment.

¹⁶ "Regression" is defined as the amount of loss during a scheduled break in instruction of learned skill or acquired knowledge which has been specified in a student's IEP goals. "Recoupment" is the amount of time required to recoup those lost skills when school instruction resumes.

¹⁷ Qualitative and quantitative data for skills at a critical stage of development means data identifying the specific skill/goal being contemplated for ESY, the level of mastery at the time of the IEP meeting, and data demonstrating why the summer break will cause a substantial disruption to the student's mastery of the specific skill/goal.

- Independent use of the toilet;
 - Independence in feeding;
 - Independence in mobility;
 - Academic,
 - Behavior, or
 - Other;
- B. The specific skill/goal is at a critical stage of development as documented by progress monitoring data; and
- C. A break in services will result in a loss of the window of opportunity for the specific skill/goal mastery as documented by progress monitoring data.

NOTE: *The IEP provides notice that if the student has mastered a goal to be addressed during ESY related to the acquisition of a skill that was in a critical stage of development prior to the end of the school year, ESY is no longer required for that goal. If the student has met all goals related to a skill(s) at the critical stage of development, the local school district representative should schedule an IEP meeting to determine whether the student still requires ESY services.*

CRITERIA 3: SPECIAL CIRCUMSTANCES

Special circumstances are unique situations involving or affecting a student that resulted in a substantial disruption in the delivery of special education and related services and are considered by the IEP team on a case-by-case basis. Special circumstances include, but are not limited to, the student experienced extended absences from school due to a mental or physical condition and was not able to participate in home/hospital educational services or transitions due to homelessness or guardianship changes that impact the student's education.

The special education teacher(s) and related service provider(s) collect qualitative and quantitative data¹⁸ showing the existence of a special circumstance when **ONE** of the following are met:

- A. During the school year, the student's mental or physical condition resulted in extended absences from school without home/hospital services;
- B. The student experienced a substantial disruption to the delivery of special education and/or related services, e.g., due to transitions because of homelessness or guardianship changes; or
- C. A due process hearing decision, or resolution session, mediation, or other settlement agreement, calls for the student to receive ESY services.

When **ALL** qualitative and quantitative data collection is not completed because of the student's absence, teacher absence, etc., the IEP team must document the reasons why all the required data was not collected and review other relevant information (e.g., progress monitoring data, staff or parent/guardian input) to make the ESY determination.

Determining ESY Services

Once the student has been determined to be eligible for ESY services, the IEP team should determine which goals need to be addressed during the ESY period and the frequency, duration, and location of the ESY services. If a goal identified to be addressed during the ESY period is met by the end of the school year, that goal will no longer be addressed during ESY. If the student has met goals to be worked on during ESY, the local school district representative should schedule an IEP meeting to determine whether the student still requires ESY services.

¹⁸ Qualitative and quantitative data for special circumstances describes the amount of school time missed, such as 10 or more school days, the cause of the absences, and why special education and/or related services could not be provided during the absences.

When a student is determined eligible for ESY services, the parent/guardian must decide whether to accept or decline the services. The parent/guardian's decision of whether to accept or decline ESY services must be reflected on both the IEP and the *Parent Non-Acceptance of IEP Services Letter*. If the parent/guardian declines ESY services and later provides notice that they have changed their mind, the IEP should be revised to reflect the parent/guardian's new decision to accept ESY services following the procedural safeguards for IEP revision meetings.

All students whose IEPs indicate they are eligible for ESY services and their parents accepted the service at the IEP meeting will receive an *ESY Parental Acceptance Letter* identifying the student's ESY school site. If a parent declines ESY services after receiving the *ESY Parental Acceptance Letter*, the parent's signed letter must be uploaded into SSM and attached to the student's SSM documents.

TRANSPORTATION (IEP Section 15)¹⁹

The IDEA includes transportation within its definition of “related services.” Transportation includes travel to and from and between schools, travel in and around school buildings, and specialized equipment if required to provide transportation to a student with a disability. The IEP team is responsible for determining if transportation is required to assist a student with a disability to benefit from special education, and how the transportation services should be implemented. The IEP should describe the transportation services to be provided, including transportation to enable a student with disabilities to participate in nonacademic and extracurricular activities in the manner necessary to afford the student an equal opportunity for participation in those services and activities to the maximum extent appropriate to the needs of that student.

NOTE: *Special education services can include travel training. Travel training is instruction that enables students with significant disabilities, and any other students with disabilities who require this instruction, to develop an awareness of the environment in which they live, and to learn the skills necessary to move effectively and safely from place to place within that environment.*

Specialized transportation services can be a fundamental component of the provision of FAPE that will assist students in preparing for employment and independent living in their communities. Therefore, IEP teams should consider the need for both transportation and travel training services when planning for a student’s postsecondary transition needs.

When a student is determined to need transportation services, the parent/guardian must decide whether to accept or decline the services. The parent/guardian’s decision of whether to accept or decline transportation services must be reflected on both the IEP and the *Parent Non-Acceptance of IEP Services Letter*. If the parent/guardian provides notice (oral or written) to the local school district representative after the IEP meeting that they have changed their mind regarding accepting or declining transportation services, the IEP must be revised to reflect the parent/guardian’s new decision following the procedural safeguards for IEP revision meetings.

If the parent/guardian accepts transportation services, the IEP team then determines whether the student needs any accommodations (e.g., bus aide, nurse on the bus, air conditioning, pick-up/drop-off other than home, presence of adult at drop-off location not required, car seat, harness, wheelchair lift or other specialized equipment, or other accommodations or supports) while traveling on the bus. The IEP team must also decide whether the student needs transportation as a related service for the life of the IEP, only this school year, only the next school year, or on a temporary basis with specific start and end dates and a justification.

Once the student has been found eligible for transportation services, the local school district representative or principal designee must submit a request for transportation in the Student Information System within 24 hours (not including weekends). In the event there are extenuating circumstances, such as system or power outages, or a sudden closure of the school/system due to public health emergency, the request for transportation must be submitted no later than 48 hours (not including weekends) after the IEP has been finalized. If you need additional support, please contact Student Transportation Services (STS) at stutran@cps.edu or 773.553.2860.

Transportation Process for Non-Public School Referrals

¹⁹ For additional information regarding criteria to determine whether a student requires transportation as a related service, see the [Chicago Public Schools Procedures and Guidelines – Transportation \(IEP and 504\) 2019-20 School Year](#).

In the development of the student's IEP, the IEP team, including the parent/guardian, decides if the student qualifies for special education transportation as a related service. Once the IEP is finalized by the case manager and reflects 100% removal from the general education setting, the district representative assigned to the school completes the Separate Day Referral form. The Separate Day Referral form notifies the ODLSS Non-Public department that a student referral for separate day placement has been received. Upon receipt of the Separate Day Referral form, the non-public manager reviews the student's IEP to determine if special education transportation is needed. When transportation is reflected on the student's IEP, the ODLSS non-public department facilitates the request for transportation and enters the transportation request into the Student Information System.

Guidelines for Determining Need for Transportation as a Related Service

An IEP team may decide that a student with disabilities needs transportation services only if documentation shows that **ONE OR MORE** of the following guiding principles is met:

GUIDELINE 1: STUDENT IN NEIGHBORHOOD (ZONED) SCHOOL OR SCHOOL OF CHOICE

Parents/guardians may apply to schools of choice as an alternative to having their children attend the neighborhood school (i.e., zoned school). When the parent/guardian of a student with a disability chooses to send their child to a school of choice (e.g., magnet school, selective enrollment school, charter school, another school that is not the student's neighborhood school, etc.), it is presumed that the student will not receive transportation as a related service. Distance between the home and school of choice, on its own, is not the basis for FAPE-based transportation unless one of the four guidelines or other special circumstances exist (and are documented) supporting the need of an individual student with a disability, as determined by the IEP team. The student may qualify for non-FAPE-based transportation if provided for in a Board policy for all students who attend the school of choice.

If a student is attending a charter, contract or options school, the ODLSS District Representative **MUST** be part of the IEP team and act as the District representative at the meeting unless they delegate the role to the local school district representative.

A student who attends their neighborhood school or school of choice and who has a disability that prevents them travelling to school in a manner comparable to same-aged peers without disabilities is eligible for CPS-provided transportation when **AT LEAST ONE** of the following guiding principles are discussed and documented:

- A. **The student has a physical or orthopedic condition** and, as documented on the IEP:
- Uses a wheelchair to ambulate;
 - Uses a walker to ambulate;
 - Wears orthotics and is unable to walk the distance from home to school; or
 - Has displayed significant limitations with endurance due to the physical or orthopedic condition when transitioning, when moving throughout the school building, or when participating in P.E. or recess.
- B. **The student has a chronic or persistent medical condition** and, as documented on the IEP:
- Requires monitoring by a nurse;
 - Requires monitoring by a delegated care aide or other adult other than a nurse;
 - Relies on specialized medical equipment (e.g., oxygen tank, tracheostomy tube, catheter, etc.) that is not readily transportable in a non-adapted or standard vehicle;
 - Requires limited exposure to environmental elements (e.g., extreme temperatures, extreme pollen levels, extended exposure to sun); or
 - Is otherwise unable to walk the distance from home to school.

- C. The student demonstrates a pattern of behavior that is dangerous to the student or others while traveling to and from school and requires constant adult supervision, as documented on the IEP.
- D. The student has an intellectual, sensory, communication, hearing, vision, or other condition and, as documented on the IEP:
- Is unable to assess risk or advocate for their personal safety;
 - Lacks the ability to navigate an established route to and from school;
 - Reacts to unwanted stimuli or attention from others in a manner that is dangerous; or
 - Lacks the ability to travel to school without getting lost or avoiding dangerous traffic situations.

GUIDELINE 2: ODLSS-ASSIGNED SCHOOL

A student who attends an ODLSS-assigned school is presumed to qualify for transportation services when the following are met:

ODLSS personnel assign a student to a school that the student would not otherwise have attended based on one or more of the following specialized programs and/or reasons:

- Significantly modified curriculum with intensive supports;
- Oral/aural program or total communication program for students who are deaf/hard of hearing;
- Program for students with visual impairments;
- Preschool Inclusive Program (known as Blended);
- Preschool Program with Intensive Support (known as Early Childhood Special Education);
- Multi-sensory program;
- Separate day school; and/or
- Accessible school.

NOTE: *If the assigned school is located closer to the student's home than their zoned school, the IEP team should revisit the student's need for transportation under Guidelines 1 or 4.*

GUIDELINE 3: STUDENTS SIX YEARS OF AGE OR YOUNGER

The nature of the student's disability prevents the student from traveling to and from school in a manner comparable to similarly aged students without disabilities. Students age six or younger generally do not have the developmental capacity to travel to school safely without a parent/guardian or caregiver. It is expected that students with disabilities in this age group will travel to and from school with their parents/guardians or caregivers unless the IEP team determines otherwise based on Guidelines 1, 2, or 4.

NOTE: *If a preschool student with disabilities requires transportation as a related service and the parent/guardian requests pick-up/drop-off at or to a location other than the student's home, such as to a community-based Head Start program or child care, CPS – Student Transportation Services Department has a form to request a change in pick-up/drop-off location and to facilitate the route. The form is titled “Bus Stop Change Request Form for Eligible Preschool Students with Disabilities” (“Purple Form”). The pick-up address must be the same as the drop-off address and it must be located within the City of Chicago. The pick-up/drop-off location must be the same throughout the school week and will continue as the permanent location for the school year unless a new “Purple Form” is completed or the parent requests the student's home address to be reinstated as the pick-up/drop-off location.*

The form can be used for preschool students with disabilities that attend a full-day preschool program in CPS or if the student attends a CPS half-day preschool program. This accommodation must be documented in the IEP as a special accommodation, the location must be identified in the IEP and a separate form titled “Bus Stop Change Request Form for Eligible Preschool Students with Disabilities” (“Purple Form”) must be completed. After this

accommodation is incorporated in the IEP, the “Purple Form” should then be completed and submitted to the CPS – Student Transportation Services Department.

For students with disabilities in grades kindergarten and above that require transportation as a related service and would like a pick-up/drop-off location other than the student’s home, the parent/guardian can complete the CPS Child Day Care Bus Stop Change Request for Student with Disabilities form (“Blue Form”) or the CPS Park Kids Program Request form (“Green Form”). The criteria for “Blue Form” and “Green Form” eligibility are found within the respective forms. The “Blue Form” and “Green Form” should be completed outside of the IEP team meeting process.

GUIDELINE 4: SPECIAL CIRCUMSTANCES

The student has a special circumstance that is documented and requires transportation services.

The following requirements apply to the IEP team’s determination that one or more of the below services, accommodations or specialized equipment is required for the student to travel safely to and from school.

Identified Need	Personnel Required at the IEP Meeting	Action to be Taken
Bus Aide	IEP Team	Document the information supporting need for bus aide, such as the student: <ul style="list-style-type: none"> ● Uses a wheelchair or walker to ambulate; ● Has a documented medical condition that requires constant monitoring by a delegated care aide or another adult other than a nurse; ● Has demonstrated a pattern of behavior that is considered dangerous to self or others while traveling to and from school and/or requires adult supervision; ● Requires a car seat, harness, use of a wheelchair lift; or ● Travels with oxygen as required by a doctor’s order.
Nurse on the Bus	CPS CSN	Participate and review documentation of the student’s medical needs.
Air Conditioning	CPS CSN	Participate and review documentation of the student’s medical needs.
Preschool Student Pick-Up/Drop-Of f Location Other than Home	IEP Team	Document the location and provide the parent the Bus Stop Change Request for Eligible Preschool Students with Disabilities form (“Purple Form”) so that it can be completed and sent to the CPS – Student Transportation Services Department.
Presence of Adult at Drop-Off Location Not Required ²⁰	Parent/guardian	Document in writing the preference for a student who is in the 6th grade or higher.
	IEP Team	Approve documentation showing that, in light of factors such as the student’s age and disability, the student has demonstrated the necessary maturity and ability to be dropped off without a receiving adult.

²⁰ When a student receives IEP-required transportation services, the student’s parents/guardians are expected to meet the bus at the curb for pick-up/drop-off.

Other (Medical)	CPS certified school nurse	Review the documented basis of student need and note agreement with recommendation of other team members.
-----------------	----------------------------	---

ADDITIONAL SECTIONS OF THE IEP

IEP Meeting Notes Page

IEP meeting notes are to be used to record relevant discussions which occurred during the IEP meeting that were NOT memorialized in the IEP, such as any parental requests that were discussed but not accepted by the rest of the IEP team. In this example, the IEP notes should include an explanation as to why the team decided the requested service was not appropriate and/or not needed to provide the student FAPE. IEP meeting notes are not mandatory but highly recommended in order to fully capture the team's discussion and decision-making process.

Well-drafted IEP notes will help to establish procedural compliance, show meaningful parental participation, and document when several options were discussed and considered.

IEP Dissenting Opinion

Any IEP team member, including parents/guardians, may record when they disagree with the ultimate decision of the IEP team regarding identification, evaluation, educational placement and/or the services identified to ensure the student receives FAPE. The parents/guardians and any other IEP team member can record their dissenting opinion in any written format, including the IEP dissenting opinion form. If the dissenting opinion is recorded in an alternate format, the local school district representative must ensure the document is scanned and uploaded to the student's SSM documents.

IEP Revisions

If revisions to sections of the IEP are needed during the school year after an annual IEP meeting, the parent/guardian and school may agree to revise the IEP without convening an IEP meeting, but the parent/guardian must agree in writing; the school must use the *Waiver of IEP Revision Meeting* form. After the school receives the signed form, the school may amend or modify the student's current IEP by indicating "Revision to the IEP" as the purpose of the conference. If the parent/guardian does not agree to waive the IEP Revision meeting, the local school district representative must ensure that an IEP meeting is scheduled and the parent/guardian is sent the *Conference Notification* form with at least 10-calendar-day notice, unless the parent/guardian has waived the 10-calendar day notice in writing. The IEP participants at a revision meeting are dependent on which sections of the IEP are being revised. If the parent/guardian waives the IEP revision meeting, the local school district representative must ensure the parent/guardian is sent a copy of the revised IEP.

NOTE: *A change in the student's eligibility for special education, placement/LRE, or a substantial change in the student's special education services may only be done through a revision at an IEP meeting, not through the Waiver of IEP Revision Meeting process.*

With a parent's/guardian's written agreement, the Waiver of IEP Revision Meeting process may be used for IEP changes such as but not limited to:

- Revising annual goal due to lack of expected progress;
- Revising grading, promotion and/or graduation criteria;
- Revising transportation services;
- Revising transition plan or services;
- Revising curriculum accommodations or modifications;
- Increasing or decreasing the amount of time for delivery of a related service;
- Adding or removing a related service following an evaluation;
- Adding or revising a behavior intervention plan; or
- Reviewing need for ESY services.

Student Specific Corrective Action

The purpose of Student Specific Corrective Action (SSCA) is to identify and provide a remedy for students with disabilities who may have been adversely impacted during the 2016-17 and 2017-18 school years by special education procedural changes in one or more of the five areas identified by the ISBE Public Inquiry. The five areas identified during the ISBE Public Inquiry are:

- Extended school year (ESY);
- Paraprofessional;
- Transportation;
- Identification as a student with a specific learning disability; and
- Placement in a therapeutic setting.

For information regarding SSCA, see the [Chicago Public Schools Student Specific Corrective Action Procedures](#).

NOTE: Any questions about SSCA should be emailed to SSCA@cps.edu.

DISCIPLINARY REMOVAL OF STUDENT FROM CURRENT SETTING

Discipline-related procedural safeguards for students with disabilities may also apply to students who are not yet eligible for special education and related services. Students who have not been determined eligible for special education and related services, and who engage in conduct that violates a Student Code of Conduct (SCC), may assert procedural safeguards of the IDEA if the District is deemed to have had knowledge that the student had a disability, before the behavior occurred that precipitated the disciplinary action. School officials are deemed to have prior knowledge that the student has a disability if:

- The parent/guardian expressed a concern in writing to supervisory or administrative personnel or to the student's teacher, that the student is in need of special education and related services;
- The parent/guardian requested an evaluation of the student; or
- The student's teacher or other school personnel expressed specific concerns about a pattern of behavior demonstrated by the student directly to supervisory personnel.

If any of these circumstances exist, school staff must follow the disciplinary procedures applicable to students with disabilities. If none of these circumstances exist, the student may be subjected to the same disciplinary measures applied to non-disabled students.

If a request is made for an evaluation during the time the student is subject to disciplinary removal, the evaluation must be conducted in an expedited manner. However, if the District is not deemed to have had knowledge that the student had a disability before the behavior that led to the disciplinary action, until the evaluation is completed the student remains in the educational placement determined by school personnel, which can include suspension or expulsion.

Suspension days that were issued during the current school year prior to the school officials having knowledge that the student has a disability must be counted when considering whether the 10-day limit per school year has been reached.

Short-Term Removal (Out-of-School Suspension)

School officials may suspend students with disabilities for a total of up to 10 consecutive or cumulative school days in one school year in the same manner as their nondisabled peers. For a single offense, administrators are permitted to suspend students with disabilities for fewer days than the periods set forth in the SCC.

Federal regulations provide some flexibility to suspend students with disabilities in excess of 10 school days in the school year under certain circumstances. In order to determine whether the circumstances permit a suspension in excess of 10 days in the school year, the school must consult with ODLSS. Without such consultation, the 10 school day limit on out-of-school suspensions will remain in effect.

If a suspension is issued that results in more than 10 cumulative suspension days in the school year, the school must perform the following:

- Provide the parent/guardian with written notice that: their child is being suspended; the number of days of the suspension; the fact that it was determined that this suspension would not constitute a "change of placement;" and an explanation of the basis for this determination. In that notice, the parent/guardian is informed of their right to request an IEP meeting to discuss this determination, if they disagree.
- Provide the student with all required special education services during the time of the suspension. Required services are determined in consultation with at least one teacher so the student can

continue participating in the general education curriculum and progress toward the goals contained in their current IEP.

- Schedule an IEP meeting within ten school days of the date that the school notifies the parent/guardian of the suspension. The purpose of the meeting is to review the student's current FBA and BIP, or to initiate an FBA and develop a BIP if none exists.

NOTE: *Notifying parents/guardians of a student's behavior during the school day and requiring the parent to pick-up the student from school due to the misbehavior and/or crisis behavior will count toward the 10-day maximum. If a parent voluntarily picks-up their child due to behaviors this does not count toward the 10-day maximum.*

In-School Suspension

In-school suspensions are not included in the 10-day limit on disciplinary removals if the student continues to:

- Participate in the general education curriculum;
- Receive IEP services from a certified provider; and
- Have access to non-disabled peers during the in-school suspension to the same extent as specified in their IEP.

Suspension from the Bus

Suspensions from the bus will count toward the 10-day maximum if the student's IEP includes transportation as a related service.

Manifestation Determination Review (MDR) Conference

A manifestation determination review (MDR) must be conducted by the IEP team when:

- A student with a disability has been suspended in excess of 10 days during the school year and there has been a pattern of removals, as determined by ODLSS in consultation with school personnel; or
- School officials initiate a referral for expulsion, including referrals requesting emergency assignment to an Interim Alternative Education Setting (IAES) pursuant to the SCC.

MDR Process Checklist

- Provide written notice to the parent/guardian of the disciplinary action.
- Schedule the MDR conference, which must be held within 10 school days of the date of the decision to refer for expulsion hearing or to request an emergency assignment to an interim alternative educational setting. If the MDR is being held to determine if the student can be issued a short-term suspension in excess of 10 school days, he/she must be allowed to attend class until a determination is made.
- Provide the parent/guardian written notice at least 3 school days prior to the MDR being held, using the *Parent/Guardian Notification of Conference* in SSM. Indicate the purpose of this conference as:
 - Consider relatedness of disability to disciplinary code violation(s);
 - Consider the need for an FBA for the student; and
 - Review a need to create or revise a BIP for the student.
- Provide parent/guardian/surrogate with a written copy of the *Notice of Procedural Safeguards for Parents/Guardians of Students with Disabilities*.
- Conduct the MDR conference.
- The parent/guardian, local school district representative, special education teacher, evaluation representative and any other relevant members of the IEP team must be present for and

participate in the MDR. The “relevant members of the team” are determined by the parent/guardian and District Representative. At the MDR conference, the IEP team must:

- o Determine whether the misconduct is related to the student’s disability by reviewing all current and relevant information, including evaluation and diagnostic results, information from the parent/guardian, observations of the student, and the student’s IEP. The behavior is a manifestation of the student’s disability if:
 - the conduct in question is caused by the student’s disability or has a direct and substantial relationship to the student’s disability; and/or
 - the conduct in question is the direct result of the school’s failure to implement the student’s IEP.
- The IEP team reviews, and revises if necessary, the student’s existing BIP or initiates an FBA/BIP to address the misconduct. The FBA/BIP must address the behavior(s) which led to the disciplinary action.

NOTE: *If the parent/guardian does not attend the MDR meeting, the school may proceed with the meeting if the parent/guardian was provided proper notification of the meeting.*

The IEP team must provide a written narrative substantiating its determination.

If the student’s behavior is not a manifestation of the disability, school officials may implement the SCC, taking into consideration the student’s special education and disciplinary records. In no event, however, may the student be suspended for more than 10 consecutive or cumulative school days in a school year without providing IEP services.

If the student’s behavior is a manifestation of the disability, a disciplinary change in placement (e.g. expulsion) cannot occur. The IEP team should also consider if there is a need for a reevaluation and/or revision of the IEP. Students with disabilities, even if expelled, must be provided with FAPE in an alternative educational setting.

All MDRs are subject to review by the expulsion committee before an expulsion hearing is conducted.

Removal to an Interim Alternative Educational Setting (IAES) (Emergency Assignment)

Students can be removed to an IAES pursuant to the SCC for up to 45 school days under the three special circumstances below, without regard to the MDR outcome:

- The student carries to school or possesses a weapon at school, on school grounds or at a school function;
- The student knowingly possesses, uses or sells illegal drugs at school, on school grounds or at a school function; or
- The student inflicts serious bodily injury on another person at school, on school grounds or at a school function.

A student who poses a substantial risk of danger to self or others may also be removed for up to 45 school days, but only by an order from an ISBE hearing officer after a due process hearing or by a federal or State court judge.

The student must receive services which enable the student to continue to participate in the general education curriculum, although in another setting, and to progress toward meeting their IEP goals.

Reporting Crimes to Police

When a CPS employee reports a crime committed by a student with a disability to appropriate law enforcement authorities, the employee must ensure that copies of the special education and disciplinary records of the student are transmitted to the police for consideration.

Whenever the Chicago Police Department or any other law enforcement agency is called because school officials believe that a student with a disability has committed a crime, the following steps must be taken:

- Give the police officer copies of the Misconduct Report and the Cover Sheet and Determinant Factors – For All Disabilities portion of the student’s most recent *Eligibility Determination* document. Upon request, the officer must be given any additional information from disciplinary and special education records, with the exception of mental health records in the student’s file.
- Give the [Police Notification of Record Release for Student with Disability](#) form to the police officer to explain the basis for providing him/her with information about the student.
- Provide notice of action to the parent/guardian by giving them the [Police Notification of Record Release for Student with Disability Referred to Police](#) form and a copy of the *Misconduct Report*. A copy of this document should be scanned and uploaded to the student’s IMPACT SSM record.

Anti-Bullying Requirements

According to the U.S. Department of Education, Office of Special Education and Rehabilitative Services, bullying of a student with a disability may result in denial of FAPE if as a result the student is not receiving meaningful educational benefit from the special education and related services provided by the school.

If a student with disabilities is the victim of bullying, an IEP meeting should be scheduled to determine if the student’s needs have changed as a result of the bullying. For example, if the student’s disability affects social skill development or makes the student vulnerable to bullying, the IEP team should consider whether the IEP needs to be revised to include goals and/or accommodations to develop the student’s skills and proficiencies to avoid and respond to bullying or whether a reevaluation is needed to make these determinations. The IEP team should only consider an LRE or location change if the student cannot receive FAPE in the current setting.

If the student who engaged in bullying behavior is a student with a disability, the school must convene the IEP team to determine if a reevaluation is warranted or additional supports and services are needed to address the inappropriate behavior. The team should also consider examining the environment in which the bullying occurred to determine if changes to the environment are warranted. For example, the IEP team should consider an FBA/BIP for the student or review a current BIP and revise if necessary.

PROCEDURAL SAFEGUARDS

IDEA Procedural Safeguards

IDEA requires that parents/guardians receive a copy of their procedural safeguards at least once a year, except that a copy must also be provided:

- When there has been an initial referral or parent/guardian request for an evaluation;
- When CPS has received a due process complaint or State complaint; or
- Upon a disciplinary removal that constitutes a change in placement (e.g. placement in an interim alternative educational setting or recommendation for expulsion).

Parents/guardians must be provided a copy of the procedural safeguards upon request even if the school has already provided them a copy within the year.

Notification of Conference

The *Parent/Guardian Notification of Conference* must be sent at least 10 calendar days prior to any meeting of the IEP team, including initial FIEs, 3-year reevaluations, and initial, annual and other IEP meetings. The parent/guardian may waive the 10-calendar day notice of the IEP meeting but the waiver must be in writing.

NOTE: *When SSCA is indicated as a purpose of the conference, the Parent/Guardian Notification of Conference will include a check list of documents/data which will be considered for the SSCA discussion.*

Illinois law now requires that the *Parent/Guardian Notification of Conference* must indicate whether specific data has been collected regarding services to be discussed at the IEP meeting, including but not limited to, paraprofessional support, ESY, and services for students with specific learning disabilities.

Notification of Non-Implementation of IEP Services

Illinois law now also requires each CPS school, including charter schools, to notify parents/guardians if IEP services are not administered within 10 school days after a date or frequency set forth within the IEP. If any part of a student's IEP has not been implemented within ten school days of the IEP services' expected implementation period (typically 10 school days following development of the IEP, unless the frequency of the services is not set as a daily or weekly service), the school must send the parent the *Parent/Guardian Notification – IEP Non-Implementation within Ten School Day* form. This form must be sent within 3 school days of the non-compliance. On the form, the school must specifically identify each service not being implemented, what actions the school is taking to ensure the student is receiving FAPE, and inform the parent/guardian of the ability to request compensatory services.

NOTE: *“School days” for purposes of determining non-implementation of IEP services do not include days where a student is absent from school for reasons unrelated to a lack of IEP services, nor does it include days when services are available but the student is unavailable.*

Revocation of Consent

Parents/guardians may revoke consent for evaluations (initial and reevaluations) and for provision of special education services at any time. According to Illinois state regulations, parents/guardians may revoke this consent either in writing or orally.

Any time a parent/guardian orally revokes consent, the school must put the parent/guardian's revocation in writing within 5 calendar days and provide the parent/guardian with a copy of the written summary of the oral revocation. The written summary indicates that the school understands that the parent/guardian is revoking consent for an evaluation (initial or reevaluation) and/or special education services. The written summary includes a statement that the parent/guardian should contact the school immediately if the parent/guardian disagrees with the school's summary.

When a parent/guardian revokes consent, the following procedures are followed:

Special Education and Related Services - The school must provide prior written notice to the parent/guardian within 10 calendar days of either the receipt of written revocation of consent for services or of the written summary of the parent/guardian's oral revocation of consent for services before ceasing the student's special education and related services. A student whose rights have transferred at age 18 may revoke services, unless the adult student delegated educational rights to the parent/guardian or a legal guardian for the student has been appointed by a court. In these instances, prior written notice is given to both the student and the parent/guardian. The prior written notice must be provided using the appropriate form - *Consent Revoked for Services*. The notice includes a statement that all special education and related services will cease because of the revocation of consent. The school ceases services no later than 10 calendar days after the revocation of consent.

The IDEA does not allow the school district to request mediation or a due process hearing when a parent/guardian has revoked consent for special education and related services.

Evaluations - If the parent/guardian revokes consent for an initial evaluation or reevaluation, the evaluation process must stop immediately. The revocation should be acknowledged on either the *Revoked Consent for Initial Evaluation* or *Revoked Consent for Reevaluation* form. The school will have the option of requesting a due process hearing to obtain an order from a hearing officer to proceed with the evaluation process. Neither IDEA nor State regulations set a time limit for this due process request; however, three-year reevaluations are mandated by IDEA and have a time frame associated with them. If a parent/guardian revokes consent for a three-year reevaluation, the school must contact the Law Department at (773) 553-1700 at least 30 days prior to the due date for completion of the three-year reevaluation, so a due process request can be considered.

If a parent/guardian revokes consent for special education and related services and later requests to resume special education services, the request must be treated as a request for an initial evaluation.

The school is not required to amend the student's educational records to remove any reference to the student's receipt of special education and related services because of the revocation. Parental requests to amend/expunge a student record must be made in compliance with the CPS Board Policy on "*Parent and Student Rights of Access to and Confidentiality of Student Records*."

Parent/Guardian Request for Independent Educational Evaluation (IEE)

Parents/guardians have the right to request an independent educational evaluation (IEE) at public expense if they disagree with an evaluation conducted by CPS. The parent/guardian must make a written request for an IEE at public expense to the Chief Executive Officer (CEO) of the Chicago Public Schools, 42 W. Madison, Chicago, IL 60602. If a school receives the request, the school must inform the parents/guardians to submit the request to the CEO's office and the school should notify the Law Department immediately at 773-553-1700. CPS will decide whether to grant the IEE request or request a due process hearing to show the appropriateness of the CPS evaluation.

Parentally-Placed Private School Students with Disabilities

IDEA, along with federal and State regulations, contains specific provisions governing the Chicago Public Schools' obligations under Child Find and provision of services to students with disabilities who are placed by their parents/guardians in a private not-for-profit elementary or secondary school. These provisions have been extended to include non-resident students with disabilities who attend a private school located within the City of Chicago.

Child-Find Obligations

Under IDEA, public schools are required to identify, locate, and evaluate all children residing in their attendance area who may have a disability and be in need of special education services. This legal mandate also extends to children who attend private schools if they attend a private school located within the city, regardless of whether the student lives in Chicago.

When a parentally placed private school student is referred for an evaluation, the procedures to follow include:

Students Attending a Private School in the City of Chicago

For students who attend a private school located in the City of Chicago, whether or not the student lives in the city, or for a student who lives in the city and is home schooled, the referral for an evaluation is submitted directly to ODLSS by email to privateschoolevals@cps.edu. In either case, the parent/guardian must register/enroll the child as a non-attending student and ODLSS staff will complete the registration/enrollment process. ODLSS will follow the same evaluation process as described in the [Full and Individual Evaluation](#) section of this document.

For students who live in the City of Chicago and are found eligible to receive special education and related services, an IEP is developed as if the student would be attending a CPS public school. If the parents/guardians inform ODLSS that their child will not attend a CPS public school and the parent/guardian signs the *Parent Waiver of IEP Development* form, an IEP does not have to be developed and ODLSS, in collaboration with the student's private school, may develop an Individual Service Plan.

For students who do not live in the City of Chicago and are found eligible to receive special education and related services, the resident school district is responsible for the development of a full IEP. If the parent/guardian chooses to continue at the private school located in the City of Chicago, ODLSS, in collaboration with the student's private school, may develop an Individual Service Plan.

Students Residing in the City of Chicago but Parentally-Placed in a Private School Outside the City of Chicago

If the parent/guardian requests an initial evaluation or reevaluation, the parent/guardian should be referred to the school district in which the private school is located for the evaluation.

If a parent/guardian or other school district presents a special education eligibility finding from the school district in which the private school is located, the student should be enrolled at the student's attendance area school as a "non-attending" student and an IEP must be developed. If the school has any questions about the outside school district's evaluations and/or eligibility determination, contact your ODLSS District Representative for assistance.

Proportionate Share Services

IDEA requires that CPS spend a proportionate share of its IDEA funds to provide special education and related services to students with disabilities placed in private schools by their parents/guardians, including home schooled students. Unlike the Child Find obligation, the proportionate share obligation only extends to students with disabilities who attend a private, not-for-profit, elementary or secondary school located within the City of Chicago, whether or not the student is a resident of the City.

The proportionate share services are determined each year by ODLSS, pursuant to the procedures outlined in IDEA.

ODLSS will develop an Individual Service Plan for students eligible to receive proportionate share services. These students do not have due process rights to challenge the content of the service plan, only those related to Child Find.

Students with Disabilities Transferring from Other School Districts

If a student with a disability transfers from another CPS school, including CPS charter schools, the IEP must be implemented as written. If the school disagrees with something in the IEP, the parents/guardians should be notified and an IEP meeting held to discuss the concerns. If the prior CPS school began the FIE process, the new school must continue the FIE process wherever the prior school left off.

For students with disabilities who transfer to CPS from another school district, whether an Illinois district or out-of-State district, CPS school staff must immediately, but no later than the next business day after enrollment, request from the sending school district the student's school records, including the IEP, evaluation data and any other records relating to the student's disability and the provision of special education and related services. If the records are not received within one week of the request, the CPS school calls the transferring school to expedite the receipt of the records. All requests for student records and follow-up contacts with the transferring school should be noted in the student's temporary file (IMPACT SSM Event Log).

CPS must ensure that these transfer students with disabilities immediately receive FAPE. The receiving school determines if it will adopt the IEP as written from the transferring school district or, whether "comparable" services to those described in the other school district's IEP will be implemented until the CPS school develops a new IEP. The school must consult with the parent/guardian to determine what "comparable" services will be provided.

In order for the CPS school to adopt the transferring district's IEP, the following three conditions must exist:

- The school must have a full copy of the student's current IEP;
- The parents/guardians must agree with the current IEP; and
- The school determines the current IEP is appropriate and all services can be implemented as written.

If the transferring district's IEP is not adopted, the CPS school must develop a new IEP and provide comparable services in the interim. While the "comparable" services are being implemented, the school must decide whether an FIE is necessary before the new IEP can be developed. If the IEP team determines an FIE is necessary, it should be conducted in an expedited manner. A *Notice of Conference* must be sent within 10 calendar days of enrollment indicating a date and purpose for the IEP meeting.

Prohibition Against Requiring Medication

IDEA prohibits educators from requiring a student to obtain a prescription for medication as a condition of attending school, receiving an FIE, or receiving special education and related services. Teachers and other school personnel are not prohibited from consulting or sharing classroom-based observations with parents/guardians regarding a student's academic and functional performance; behavior in the classroom or school; or the need for evaluations for special education or related services.

Confidentiality of Personally Identifiable Information

The records of students with disabilities shall be maintained confidentially in accordance with the requirements of the IDEA, the Family Educational Rights and Privacy Act (FERPA), the Illinois School Student Records Act, the Illinois School Code, the Illinois Mental Health and Developmental Disabilities Confidentiality Act and, where applicable, their implementing regulations.

CPS has adopted a Policy on *Parent and Student Rights of Access to and Confidentiality of Student Records* and a Policy on *Student Records Retention*. Records of students with disabilities are covered by these policies.

Each local school principal ensures that the privacy rights of students with disabilities are enforced. Under no circumstances may a student be identified publicly as having a disability. Care must be taken so that no list identifying students as having a disability or containing other personally identifiable information about students is posted on whiteboards, bulletin boards or on paper in public places. For example, this would include a schedule of evaluations or IEP meetings that contains student names, student ID numbers, or other personally identifiable information about students.

Each principal designates one or more employees to serve as records custodian. Consistent with State law, each records custodian assumes responsibility for ensuring the confidentiality of any personally identifiable information and shall:

- Respond within 10 business days to any request for inspection and review of an education record, including a request for a copy of an education record, subject to certain statutory extensions;
- Respond to any request for an interpretation of an education record;
- Respond to any request to amend an education record;
- Respond to any request to disclose or release personally identifiable information;
- Respond to any request to destroy an education record;
- Keep a record of parties obtaining access to education records, including the name of the party, the date access took place, and the purpose of the authorized use;
- Maintain, for public inspection, a current listing of names and positions of the employees who may have access to personally identifiable information;
- Provide a parent/guardian, upon request, a list of the types and locations of education records collected, maintained, or used by the school district;
- Ensure that confidentiality of personally identifiable information at collection, storage, disclosure, and destruction stages is protected; and
- Ensure that each person collecting or using personally identifiable information shall receive training or instruction regarding the policies and procedures governing confidentiality of personally identifiable information.

The records custodian makes certain that all student records, including records for students with disabilities, are maintained in a central and secure location. No original records may be removed from the property of CPS.

Each school will maintain a record of requests to review and disclosure of student records. The record of requests to review and disclosure of student records must contain: the name of the student; the name of the person making the request; the purpose of the request; the date of the request; the date of the review; and the name of the school official with whom the review was made. A notation indicating a student's record has been reviewed must be filed in the student's cumulative folder.

Service Animals

If a student with a disability requests the use of a service animal at school, school activities, and/or on the bus to/from school, the parent/guardian must complete the *Service Animal Request* form found in SSM outside of the IEP process.

A service animal is a dog or miniature horse that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual or other mental disability.

NOTE: *Emotional support animals, comfort animals, and therapy dogs are NOT service animals under the ADA and are not allowed in any CPS school, on Board property or at Board events. Other species of animals, whether wild or domestic, trained or untrained, are also not considered service animals.*

A parent/guardian of a student with disabilities (or the student if 18 years or older) who wishes for a child with a disability to have the use of a service animal provided by the family during school hours and/or at school activities must contact the Principal. The request must be memorialized on the *Service Animal Request* form found in SSM.

Prior to the service animal entering the school building or attending a school activity, the local school district representative must meet with the parents/guardians and complete the *Service Animal Accommodation* form found in SSM.

As part of the *Service Animal Request* form and *Service Animal Accommodation* form, the parent/guardian must identify the work or task the service animal will be performing for the student during school and/or at school activities. The work or tasks performed by a service animal must be directly related to the student's disability. Examples of work or tasks include, but are not limited to:

- assisting students who are blind or have low vision with navigation and other tasks;
- alerting students who are deaf or hard of hearing to the presence of people or sounds;
- pulling a wheelchair;
- assisting a student during a seizure;
- alerting a student to low blood sugar level;
- alerting students to the presence of allergens;
- alerting staff when a student with disabilities is in distress;
- retrieving items, such as books, school supplies or medicine;
- providing physical support and assistance with balance and stability to students with mobility disabilities; or
- preventing or interrupting impulsive or destructive behaviors, including retrieving students who elope.

Work or task does **NOT** include providing therapeutic benefits to the student through support and companionship.

If any accommodations are needed to assist the student in handling the service animal during school hours and at school activities, these accommodations must be listed on the *Service Animal Accommodation* form. Such accommodations may include, but are not limited to, allowing the student certain time during the school day to take the service animal outside to allow the animal to relieve itself, identifying how/where/when the student will feed the service animal, etc. If the student's age and/or disability makes it impossible for the student to act as the dog's handler, this should be noted as an accommodation and identify the person who will act as handler. The adult handler will be expected to comply with the Board's Volunteer Policy, including successfully completing a background check.

NOTE: A Board employee should **NEVER** be identified as the dog's handler.

The Principal must ensure that all necessary school personnel have access to and/or copies of the *Service Animal Accommodation* form. The Principal, as appropriate, should also ensure that other members of the school community are made aware of the presence of the service animal.

NOTE: *Service animals do not have to be hypoallergenic. If another student is allergic to dogs and the presence of the service animal is affecting a student in school, the allergic student may require additional evaluations or accommodations. If the allergic student is already on an IEP or Section 504 Plan, that student's plan should be revised to address any accommodations needed because of the presence of the service animal. If the allergic student is not on an IEP or Section 504 Plan, a Section 504 evaluation should be considered to determine if the student qualifies under Section 504 for accommodations during school because of the presence of the service animal.*

See the Board's *Guidelines Regarding Service Animals in the Chicago Public Schools (CPS)* for more information about service animals.

APPENDIX

Guidelines for Special Education Class Size

ISBE has established special education rules regarding class size (23 Illinois Administrative Code 226.730). The focus remains on the number of students with disabilities, which means those students on IEPs, per classroom per class period – not the number of students assigned to any particular teacher on their caseload; however, the definition of “students with disabilities,” solely for the purposes of class size, excludes any student who only receives speech services outside of the general education classroom and who does not require modifications to the content of the general education curriculum.

General Education Classrooms

When a student’s IEP calls for services in a general education classroom, the student must be served in a class that has no more than 30% students with disabilities, excluding speech-only students who receive their speech/language services outside of the general education classroom. Additionally, the general education curriculum must be utilized, and the class cannot be deemed a “remedial” class.

Separate Special Education Classrooms

In determining the number of students with disabilities in a separate special education class, the amount of required special education services (ARS) is the determinant factor in class size, not the student’s LRE. The ARS appears in the first line under the top chart in IEP Section 12 and refers to the total number of instructional minutes the student receives.

- Students receiving special education and related services for up to 20% of the school day – The separate special education class can have no more than fifteen (15) students with disabilities per class period. Two additional students, for a total of seventeen (17) students per class period, can be added if a paraprofessional is present at all times that the class enrollment exceeds fifteen (15) students.
- Students receiving special education and related services for 21% to 60% of the school day – The separate special education class can have no more than ten (10) students with disabilities per class period. Five additional students, for a total of fifteen (15) students per class period, can be added if a paraprofessional is present at all times that the class enrollment exceeds ten (10).
- Students receiving special education and related services for more than 60% of the school day - The separate special education class can have no more than eight (8) students with disabilities per class period. Five additional students, for a total of thirteen (13) students per class period, can be added if a paraprofessional is present at all times that the class enrollment exceeds eight (8).
- Students ages three through five – The separate special education class for students ages three through five can have no more than five (5) students with disabilities per class period. Five (5) additional students, for a total of ten (10) students per class period, can be added if a paraprofessional is present at all times that the class enrollment exceeds five (10).

The age, nature and severity of the students’ disabilities and their academic and functional needs are considered when grouping students with disabilities in the separate special education classrooms. They should be grouped in relation to their common educational needs and the types of services they require to meet those needs. If such grouping is not possible, administration must ensure that the special education services can be individualized to meet the various students’ needs and the assigned teacher is qualified to plan and provide appropriate instruction for each student in the classroom.

If students with various ARS are grouped in the same class period, CPS practice is that the number of students with disabilities in the classroom is controlled by the student with the highest ARS. For example, if a school wanted to schedule eleven students with disabilities who receive 250 minutes per week of special education and related services and one student who receives 1200 minutes per week of special education and related services into the same separate special education classroom for the same class

period, the classroom can have no more than eight students. Because the classroom is scheduled to have twelve students, a paraprofessional must be in the room the entire time the class exceeds eight students or four of the students must be scheduled for another class period.

Finally, the age range for a separate special education classroom in elementary schools may not exceed four years. For high schools, the age range may not exceed six years.

Special Education Class Size At-A-Glance

Classroom Type	Number of Students with Disabilities	Number of Special Education Teachers	Number of Paraprofessionals
General Education	No more than 30% per class period, excluding speech-only students who receive their speech/language services outside of the classroom		
Separate Special Education Classroom – ARS 20% or less	15	1	0
	16 or 17	1	1
Separate Special Education Classroom – ARS 21% to 60%	10	1	0
	11 to 15	1	1
Separate Special Education Classroom – ARS 61% and over	8	1	0
	9 to 13	1	1
Separate Special Education Classroom – 3 through 5-year-olds	5	1	0
	6 to 10	1	1

IDEA Timelines - Quick Reference

- **Referral Decision** – Within 14 school days of receipt of a referral, the local school district representative with other school personnel must determine whether an evaluation is warranted and provide the parent/guardian with a written response. If warranted, the Consent for Evaluation/Assessment Planning form must be completed and sent to parents/guardians within the same 14-school-day time period.
- **Initial Evaluation** – Completed within 60 school days after the date parent/guardian signed written consent.
- **Reevaluation** – Within 60 school days after the date parent/guardian signed written consent but no later than 3 years from prior IEP meeting at which eligibility was discussed.
- **Conference Notice** – At least 10 calendar days prior to meeting.
- **Parents/Guardians Disagree Regarding No Additional Information Needed for Evaluation** – Within 10 calendar days school must respond in writing to parent/guardian's request for additional evaluation.
- **Additional Assessments Agreed to by Parents/Guardians** – Wait 10 calendar days after date parent/guardian signed consent for evaluation unless parent/guardian waived the 10-day waiting period.
- **Evaluation Reports Completed** – 3 school days prior to the FIE meeting.
- **IEP Development** – Initial within 60 school days after receipt of written parental consent for initial evaluation; within 1 year of prior IEP.
- **Initial Placement or Change in Placement** – 10 school days from date IEP developed unless parent/guardian waives waiting period.
- **Consideration of Private Evaluations** – If received from parent/guardian outside of an IEP meeting, within 10 calendar days after receipt, Conference Notification scheduling IEP meeting must be sent to parent/guardian. Best practice is to schedule a meeting within 30 calendar days of receiving such a report on a mutually agreeable date and time. Receipt of a private evaluation may also require consideration of additional evaluations.
- **Parent/Guardian Requests IEP Prior to Annual Date** – Within 10 calendar days after receipt of request, must send either Conference Notification scheduling IEP meeting or written explanation as to why no IEP meeting is necessary for the student to receive FAPE. If a meeting will be scheduled, best practice is to schedule such meeting within 30 calendar days of receiving the meeting request on a mutually agreeable date and time.
- **Draft Evaluation Reports** - 3 school days prior to an eligibility determination meeting, provide parents draft copies of evaluation reports.
- **Draft IEPs** – Illinois law mandates CPS schools provide parents draft copies of the IEP, along with any data forms created, to be discussed at the IEP meeting, at least 3 school days prior to the IEP meeting.
- **Notification of IEP Non-Implementation** – Illinois law mandates CPS schools notify parents if any IEP services have not been implemented within 10 school days after the IEP meeting. The notification must be provided to the Parent/Guardian **within 3 school days** of the school's non-compliance with the child's IEP.

Supporting Gender Diversity

Students have the right to be addressed by a name and pronouns that correspond to the gender identity they consistently assert at school. Students are not required to obtain a court ordered name change and/or submit medical or psychological documentation as a prerequisite to being addressed by the name and pronouns that correspond to their gender identity. Parent(s)/guardian(s) consent is not required to address a student by their affirmed name and pronouns. School staff shall comply with the Student Administrative Support Team's recommendations in communicating with parents. Please see the [Supporting Gender Diversity Toolkit](#) for more information on how to change names in student information systems.

The District maintains a permanent student record which includes the legal name of the student, as well as the student's legal gender marker. That information will auto-populate into the header of the student's SSM documents, but the team should use the student's "Goes by Name" and stated gender throughout the student's documents.

Other Resources

- USDE publishes a website that includes useful information about these provisions and other topics at <http://www.ed.gov/about/offices/list/osers/osep>.
- IDEA regulations are at https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title34/34cfr300_main_02.tpl.
- Illinois School Code is at <http://www.ilga.gov/legislation/ilcs/ilcs4.asp?DocName=010500050HArt%2E+14&ActID=1005&ChapterID=17&SeqStart=110500000&SeqEnd=116100000>
- ISBE regulations are at <https://www.isbe.net/documents/226ark.pdf>.