

Parent Handbook For Special Education



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**Community Advisory Committee for Special Education
West Contra Costa Unified School District
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INTRODUCTION

We wrote this handbook to help parents understand more about the processes of special education and your important role as a partner in education. We hope it will help you to become fully involved in the team effort of obtaining the most appropriate educational program for your child.

Consider the handbook an important reference on your bookshelf. Keep it available and consult it. Familiarize yourself with its various sections so you will know where to turn whenever a question arises regarding your child's education. There are sections on special education laws, parents' rights, Individualized Education Program (IEP) planning, class placement, and resources for parents.

As you get better acquainted with your handbook we hope it will help you become a confident partner in the process of your child's education.

The contents of this handbook are based on the most recent federal and state laws. However, laws and regulations change constantly. The content of the handbook will be revised as needed to reflect those changes.

SPECIAL EDUCATION LAWS

The Individuals with Disabilities Education Act (IDEA)

Public Law 94-142, the Education for Handicapped Children Act of 1975, was the first federal law which guaranteed every child with a disability the right to a free and appropriate public education in the least restrictive environment.

This law also provided that each child:



- Is guaranteed a culturally unbiased, valid assessment in all areas of the suspected disability;
- Is to have an Individualized Education Program (IEP) designed to meet his/her unique needs;
- Is guaranteed specific procedures to insure his/her rights and those of their parents (due process procedures).

Public Law 94-142 stated that all individuals with disabilities have the right to a public education. The intent of the law was to assure that special needs students become as self-sufficient and productive as possible in adult society. The goal was that students with disabilities should be educated to the maximum extent possible with their non-disabled peers. This is what's known as the Least Restrictive Environment or LRE.

In 1990 the law was re-authorized as Public Law 101-476 and was re-named the Individuals with Disabilities Education Act (IDEA). In 1997, it was again reauthorized with some changes and modifications, and in December 2004 the law was re-authorized with additional changes which include some of the provisions of No Child Left Behind (NCLB).

PARENTS' ROLES

Parents as Partners

Parents are valued partners. Parent participation is one of the outstanding features of current legislation concerning exceptional children. One example of this participation is this handbook. It was designed and prepared by parents of children with disabilities.



As a parent you are entitled to an active role in the special education process. From the referral for eligibility for special education services, to the provision of services, you play an important part. As you play this key role in your child's education, it is important you understand fully all the ways you can participate as a partner.

Your rights and responsibilities as a parent in the identification, assessment, educational planning, placement, and appeals processes are specifically outlined in this handbook. Read them carefully and use them.

Participate

Be active in all the processes of your child's special education. As a parent you will find yourself one of a team of people all working together to plan and provide the most appropriate educational program for your child. Be prepared. Ask questions about anything you do not understand. Your participation is needed in a variety of ways. Here are some examples.



- Consent – By law your consent is required before your child can be tested or receive any special education services.
- Information – As part of the assessment process and the IEP planning you will be asked to provide needed information concerning your child. Your cooperation will help in planning the best program for your child.
- Review – Your child's IEP will be reviewed once a year. Be involved in this process every year. Your input is needed. Remember the IEP is the heart of your child's education and your participation in the process is vital.
- Attendance – Attend all IEP meetings and parent conferences concerning your child. Also, you may have the opportunity to attend parent education programs to learn more about special education activities.
- Communication – Good communication between home and school is an important key to the success of a child's program. Once the decisions have been reached and the IEP written, keep in close touch with what is going on at school.

Community Advisory Committee (CAC)

An important organization to become aware of and be involved in is the Community Advisory Committee for Special Education (CAC). The law requires that a majority of its members be parents and a majority of those be parents of special education children. Representatives of public and private agencies, community groups, special and regular education teachers, disabled students, school personnel, and other concerned citizens make up the rest of the committee. This organization plays an important role in special education in the West Contra Costa Unified School District. The CAC's responsibilities and activities include:

- Advising the WCCUSD administration and Board of Education regarding the development and review of special education programs.
- Making recommendations on priorities to be addressed under the local special education plan;
- Acting in support of children with disabilities;
- Assisting in the evaluation of how well the Local Plan for Special Education is meeting the needs of our children;
- Assisting in parent education and the development of public information materials such as this handbook;
- Hosting the *You Make a Difference* annual award ceremony to recognize the contributions of individuals, both adults and youth, who enhance the lives of students with disabilities.
- Promoting and participating in the district's disability awareness efforts.

You are encouraged to attend the monthly CAC meetings. Childcare is provided. Call the Special Education Department at (510) 741-2840 for more information.

Other active parent organizations exist in the area that can also provide support, information, advocacy, and other assistance. They will welcome your involvement. See Section 8, Resources, at the end of the handbook, for information.

FREQUENTLY ASKED QUESTIONS

Are special education infant and preschool programs available?

Yes. Infants and toddlers aged birth through 36 months with diagnosed disabilities, or at risk for disability, are served at Cameron School in El Cerrito. Preschool children ages 3-5 are also eligible for services. You can obtain further information about infant and preschool programs by calling (510) 233-1955.

If I think my child has a learning problem, what should I do?

First discuss your concerns with your child's classroom teacher. If your child has a demonstrated

problem which prevents him from functioning in a regular school program without special help, then your child may be eligible for special education services. As a first step you may request that your child's teacher make a referral to the Student Study Team, or you may send a request for an assessment to the Special Education Department.

What is a Student Study Team (SST)?

The SST is a regular education function. It is comprised of teachers and other school personnel based at your local school site. This team reviews a student's problem(s) and plans alternative strategies to be used in the regular program.

If my child is eligible for special education, who decides what services my child will receive and what program he/she will be in?

The appropriate services and programs will be based upon your child's individual special education needs, which are based on an assessment of all areas of the suspected disability. The planning of your child's program and services is done by the Individualized Education Program (IEP) team. The parent is an important member of this team.

What is the Resource Specialist program?

This program provides special instruction and other service to students with special needs who remain in the regular class. Students receive most of their instruction in the regular classroom with some special small group instruction from the Resource Specialist.

What is an Individualized Education Program (IEP)?

The IEP is a written document developed for each student eligible for special education, which is based on the educational needs of the student as specified by the IEP team (professionals and parents).

What are Related Services?

Related Services, formerly called Designated Instruction and Services (DIS), are provided in addition to class placement, when needed. They include Speech, Physical and Occupational Therapy; Vision, Orientation & Mobility, Hearing and Audiological Services, Counseling, Assistive Technology, and Transportation.

What is Due Process?

Due Process refers to procedures established to ensure that the rights of students and parents are protected.

When are transportation services provided?

If age, disabling condition, or distance would prevent a child from benefiting from the IEP determined educational program, transportation services will be provided to ensure the student has access to their program.

Will my child be able to participate in an extended year program?

Yes, if the IEP team has determined a need for an extended year program. Generally extended year is available to those students who require a continuation of services in order to benefit from FAPE.

What should I do if I don't agree with everything in the IEP?

You may give consent to those parts of the IEP with which you agree and they will be implemented, thus preventing a delay in services. You will be asked to write a dissenting statement that will then be attached to the IEP. The parts with which you don't agree may become the basis for additional IEP meetings. If an agreement cannot be reached, the disagreement may become the basis for a Solutions Panel, Mediation, or Fair Hearing.

If I have a problem with my child's IEP or services, what should I do?

First, discuss the problem with your child's teacher and any other school personnel who are familiar with your child's special needs and who may be able to help resolve the problem for you. You may contact your child's Program Specialist/ Administrator and/or request that the IEP team meet to review and/or develop a new IEP.

May I observe special education programs that are available in the district?

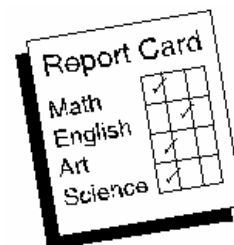
Yes, contact a Program Specialist/Administrator in the Special Education Department (741-2840 middle & high school or 741-2843 for elementary) to schedule an appointment.

May I see my child's school records?

Yes, you are entitled to see all of your child's school records. Make your request (either verbally or in writing) to the Special Education Department.

May I obtain an independent assessment of my child, and must that assessment be considered by the school district in educational planning?

Yes. Parents may have an independent assessment done, at their own expense, at any time, and the results may be considered by the school to support the need for appropriate educational services. Under certain conditions the school district may pay for an independent assessment.



For how long will my child receive special education services?

As long as the IEP team, including the parents, agree that special education services are needed. This will be based on on-going evaluation of your child's eligibility needs.

How will my child's IEP be affected if we move out of this school district?

Your child's IEP will still be valid and he/she will be placed in a comparable program for a period of 30 days if you should move. During that time an IEP review should take place in your new school district.

May I volunteer at my child's school?

Parent involvement is strongly encouraged. Speak to your child's teacher about volunteering at school. There are many ways in which you can become involved.

EARLY START

The West Contra Costa Unified School District offers special programs to families who have infants or toddlers under the age of three years with health, learning, behavioral or developmental concerns. Families may have received a diagnosis for their child, or they may have questions or concerns about their child's development. In these cases, there are professionals and other parents who can help by answering questions and providing the necessary services to assist the child and family.

If you are concerned about your child's development, the first step is to refer the child for evaluation and assessment. You may call Cameron School directly at (510) 233-1955 and request an assessment. With your permission, the staff will assign a service coordinator to your family and will work with you to plan an assessment, whereby all areas of the child's development will be evaluated.

Within 45 days after you make your referral to Cameron School, the assessment process should be completed and, if the child is eligible, an Individual Family Service Plan (IFSP) will be developed. The IFSP is a document that addresses both the unique needs of the child as well as the needs of the family to enhance their child's development. It includes a statement of the infant's current developmental level; the family's concerns, priorities, and resources; the expected outcomes; and specific services including frequency, intensity and duration. A family assessment is voluntary.

The IFSP is reviewed every six months (or more often if requested). Development of the IFSP must be coordinated with all other agencies providing services to the child and family (such as California Children Services, Regional Center of the East Bay, etc).



The IFSP is a joint effort among your family, professionals who will be working with the child, and the community supports needed to meet the special needs of the child. Research has shown that family-centered interventions during the first three years of a child's life can make a profound difference in the child's future. These services can improve the developmental progress of a child, can reduce feelings of isolation, stress, and frustration in families, and help children with disabilities to grow up and be productive and independent.

Services identified in the IFSP can be delivered in the home, at child care, or at Cameron School. It is your service coordinator's job to assist you to access the services you need for your child. Services are designed to meet the developmental needs of the child and are to be provided at no cost to you. They include:

Assistive technology, psychological services, audiology (hearing) services, family training, counseling, home visits, respite, service coordination (case management), some health services, social work services, medical services for diagnostic or evaluative purposes only, nursing, nutrition counseling, occupational therapy, physical therapy, special instruction, speech and language services, transportation services, vision services, and others as needed.

When the child is 2 ½, a transition IFSP must be developed which describes the steps to be taken to continue special school services, if needed. You will begin to think about a special education preschool for your child, and your service coordinator will help you to think about making this change, or

“transition”. There should be no interruption of services for your child when he/she leaves early intervention services and transitions to a preschool.

For more information about California’s Early Start Program for infants and toddlers with disabilities contact:

Kathy Shores, Program Administrator
Cameron School
(510) 233-1955

CARE Parent Network (Family Resource Center)
(800) 281-3023

THE STEPS OF SPECIAL EDUCATION

Identification

Under current law, the school district (as well as other public agencies) is responsible for conducting a continuing search in the community to identify infants, preschool, and school-aged children who may require special education services.

Parents who are concerned about their child's health, development, or learning may want to consult with a health care provider, child care provider, teacher, or other person knowledgeable about child health or development. A conference with your child's teacher or school principal, and possible referral to the Student Study Team is a first step, to determine if the resources of the regular education program can meet the child's needs. If parents or school personnel feel that assessment by trained specialists is indicated, they may make a referral to the Special Education department at 741-2800. Although not legally required, it is advisable to make your referral in writing.

Eligibility Criteria for Preschool Students between the ages of three to five

The pre-school child must have needs that cannot be met with modification of a regular environment in the home, or in school, or both without ongoing monitoring or support as determined by an Individualized Education Program Team. The student must also qualify under the disabling conditions and an established medical disability.

Eligibility Criteria for Students (K-12)

The presence of a handicapping condition, by itself, does not make a child eligible for the provision of special education services. The handicapping condition must adversely affect educational performance to the extent that the student's educational needs cannot be met without modifications, physical or instructional, in the regular classroom or through the provision of other remedial instruction. It is the IEP team's decision, based on assessment, to identify a student as a handicapped child with one or more handicapping conditions.

Assessment

The assessment process has two major purposes:

- To determine if a student is eligible for special education services, and
- To assess the needs or gather all of the information possible about the student in order to determine which are the most appropriate special education and related services for the student.

The parent's written consent is necessary before an assessment can be conducted (as well as before any special education services can be delivered to the child). The **written assessment plan must be prepared within 15 days after receiving the referral**, and must include:

- The reason the referral was made;
- An explanation of the assessment process and the tests which will be used, and who will be responsible for doing the testing and interpreting the results;
- A notification of the rights of the parents regarding the assessment process;
- A statement informing the parent that no diagnostic testing will be done before parental consent is given, and that the parent has up to 15 days to consent.
- A request that the parent provide written permission (if the student is under age 18) for the assessment to be conducted.

A developmental and educational history for the child will be obtained by a specialist. Results of the assessment will be stated in a written report, and parents must be provided a copy of the findings. The report should describe how the child's disability affects involvement and progress in the general curriculum.

Individualized Education Program (IEP)

An IEP meeting must be held *within 60 calendar days after the date of written consent* to an assessment (excluding days in July and August, spring and winter break), for eligible children. The IEP is developed by a team including the parents, an administrator, the teacher, the person who conducted the assessment, at least one regular education teacher if your child is or may be participating in the general education classroom, and other individuals as needed and appropriate. Parents should consider whether to have their child attend the IEP team meeting. Parents may also bring a relative, friend, or neighbor to the meeting as a support. The parent is always a welcome and equal member at meetings to plan special education placement and services.

This initial meeting will be to determine eligibility for Special Education under one of the thirteen federally defined disabling conditions:

- Hard of Hearing
- Deaf
- Visual Impairment
- Specific Learning Disability
- Mentally Retarded
- Deaf-Blind
- Autism
- Orthopedically Impaired
- Traumatic Brain Injury
- Emotionally Disturbed
- Speech Impaired
- Other Health Impaired
- Multiple Disabilities
- Established Medical Disability

For detailed information on the above disabling conditions contact the Special Education Department.

The parent will be notified of the time and place of the IEP meeting, which should be at a time convenient to them. Parent input will be solicited, and written approval must be given to the IEP written during the meeting. Written consent is required before special education services or placement can be initiated.

If your child is eligible for Special Education the IEP must include:

- 1) IEP team membership includes at least one regular education teacher if your child is, or may be, participating in the general education classroom.
- 2) A statement of your child's strengths in each listed area and results of the most recent assessments.
- 3) A statement of how your child's disability affects involvement and progress in the in the general curriculum; or if your child is a preschooler, how the disability affects participation in appropriate activities.
- 4) A reason for placement if it is other than the school regularly designated for attendance.
- 5) A statement indicating the extent to which the child will not participate in a general education classroom. There must be an explanation if the student is not participating in general education activities.
- 6) A statement of your concerns regarding increasing and enhancing your child's educational progress.
- 7) A statement of measurable annual goals that include benchmarks or short term objectives. These must be related to: (a) meeting your child's disability-related needs; (b) allowing your child to be involved and to progress in the general education curriculum; (c) how each of your child's educational needs are being met.
- 8) A statement of special education and related services and supplementary aids and services to be provided.
- 9) A statement of how you will be regularly informed of your child's progress at least as often as parents of non-disabled general education students, including the extent to which progress is sufficient to enable the child to reach his/her goals by the end of the year.
- 10) Program modifications or supports for school personnel that will be provided for your child to: (a) advance toward annual goals; (b) be involved and progress in the general curriculum and participate in extracurricular activities; and (c) be educated and participate with disabled and nondisabled peers.
- 11) A statement of projected date for beginning services and modifications and their anticipated frequency, location, and duration.
- 12) A statement regarding your child's participation in district-wide standardized assessments, including accommodations, if any, and if your child is to be exempt from participation, the reason for that exemption. (This is currently the STAR/SAT 9 test in California.)

- 13) A statement regarding your child's behavior and whether or not it impedes his/her learning or that of others. If so, then a behavioral support plan must be developed which addresses the identified behavioral concerns.
- 14) A statement addressing your child's transition service needs starting at age 16, focusing on courses of study, and interagency responsibilities and linkages.
- 15) For blind or visually impaired children, a statement regarding instruction in and the use of Braille. If not provided, a statement or rationale is required.
- 16) A statement that your child's communication needs have been considered. If your child is deaf or hard of hearing, opportunities for communication with peers and professional personnel in your child's communication mode must be included in the IEP.
- 17) A statement regarding the need for assistive technology devices and/or services for your child.



At the conclusion of the IEP meeting, all participants will be asked to sign the IEP. Never sign a blank form. Don't hesitate to ask the professional present to repeat, or give explanations to you in everyday language. If you are satisfied with the IEP and give your written consent, placement in the appropriate special education and all related services should occur immediately after the IEP has been signed. If you disagree with all or part(s) of the IEP, you will be asked to write a dissenting statement. This statement becomes a part of the IEP. Your signature indicates presence and participation in the IEP meeting. Checking the statements above your signature indicates also indicate your agreement/disagreement with the IEP.

You may, however, refuse to give your consent to all or part of the IEP. In this case, there will be no change to the current or existing program your child is in. You may request that the portion of the IEP with which you do not agree be reconsidered, and another meeting may be scheduled to discuss and resolve any issues. If necessary, you can request a fair hearing.

The IEP is reviewed on an annual basis, or more frequently if either the parent or school personnel request it. **NO changes may occur to the IEP without the parent's written consent.**

Program Specialists/Administrators

Program Specialists/Administrators oversee the Special Education programs at their assigned sites. Some of their roles include the facilitation of IEP meetings, meeting with parents and school staff members, and placement of Severely Handicapped and Non-Severely Handicapped students. In general, Program Specialists/Administrators provide support to school sites including the instructional program and curriculum.

Parents may address their school concerns first at the school site level, beginning with the classroom teacher. If concerns are not resolved with the teacher, then the school principal is to be contacted. Program Specialists/Administrators are to be contacted whenever concerns cannot be resolved at the site level.

Placement and Services

When eligibility has been established by the IEP team, it must determine how to meet the student's individual needs in the least restrictive environment as close to home as possible. Assignments to special day classes, special schools, or any other removal from the regular classroom setting should only occur when the nature and severity of the disability is such that education in regular classes with additional, supportive aids and services cannot be satisfactorily achieved. Remember, under the law each child is entitled to placement in the least restrictive environment, which is that placement which gives the student the greatest amount of contact with their non-disabled peers. Moreover, **as a student achieves goals and succeeds in the present placement, a less restrictive environment should be considered.** Each school district must provide a continuum of services, including:

Regular Class with Related Services (Designated Instructional Services)

Related Services and instruction are provided by specialists in a wide variety of settings. These services support the student's total education program and may include Speech, Physical, or Occupational Therapy, Audiological Services, Orientation and Mobility Instruction, Vision or Hearing Services, Home or Hospital Instruction, Designated Psychological Services, Career or Occupational Training, Assistive Technology, and Counseling. Related Services may include consultation to parents and staff as specified in the IEP.

Special Day Classes

Special Day classes for both severely and non-severely handicapped are available for students who have more intensive needs than can be met by regular school programs and the Resource Specialist Program. Students are enrolled for a majority of the school day and grouped according to similar instructional needs. Students should be integrated in regular education activities as appropriate.

Severely Handicapped (SH) Program

Severely handicapped students may be educated in small classroom environments of no more than 13 students. SH students are provided the necessary supports to access Core or Functional Life Skills curriculum. SH curriculum includes task analysis and instruction in Language Arts, Mathematics, Science, History, Health, Physical Education, and Visual and Performing Arts, and follows California Standards. Students in the SH program are assessed using the California Alternate Performance Assessment, (CAPA), in place of the STAR test.

Severely handicapped students include those who are hard of hearing, deaf, have visual impairment, orthopedic impairment, emotional disturbance, autism, below average intellectual functioning, (mental retardation) or multiple disabilities.

Non-Severely Handicapped (NSH) Program

The Non-Severely Handicapped Program may include students with any disability to a lesser or more moderate degree. This includes students diagnosed as having “Specific Learning Disabilities.” The term “Specific Learning Disability” means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which may manifest itself in an impaired ability to listen, think, speak, read, write, spell, or to do mathematical calculations. The term includes such conditions as perceptual handicaps, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia.

Non-severely handicapped students with specific learning disabilities may be educated in small classroom environments of no more than 17 students, the Resource Specialist Program, or in the general education classroom. The NSH Program follows California Standards core curriculum and includes instruction in Language Arts, Mathematics, Science, History, Health, Physical Education, and Visual and Performing Arts. NSH students are assessed using the STAR test with necessary accommodations as stated in their IEPs.

Regular Class and Resource Specialist Program

Students who receive special education services through a school site Resource Specialist, are assigned to a classroom teacher for a majority of the school day and are pulled out to receive small group instruction from a credentialed resource specialist teacher in the core curriculum areas specified in their Individual Education Plan, (IEP). These students are assessed using the STAR test and may receive accommodations as stated in their IEPs.

Full Inclusion

Full Inclusion is the inclusion of Special Day Class students (usually severely handicapped) full time in the general education class with the appropriate modifications, accommodations, and classroom support. For a more detailed description and questions and answers see the section on Full Inclusion in this handbook.

Adaptive Physical Education (APE)

Adaptive Physical Education specialists provide direct physical education services to students who

have needs that cannot be adequately met by other physical education programs. APE eligibility is determined by assessment and evaluation of motor skill performance and other areas of need. It may include individually designed developmental activities, games, sports and rhythms, for strength development and fitness, suited to the capabilities, limitations, and interests of individual students who may not safely, successfully or meaningfully engage in a general or modified physical education program. APE teachers also provide support, consultation, and equipment to staff and special education students enrolled in general education classes.

Assistive Technology

IDEA, requires that Assistive Technology services be considered for all special education or 504 students. Referrals for Assistive Technology assessments are made by IEP teams, parents, teachers, and Related Services personnel. Assistive Technology (AT) can be equipment and/or services that allow the student access to the curriculum. AT equipment can be anything from a pencil grip, specially lined paper, and low-tech communication boards to portable word processors and specialized software for students with special needs.

Autism Program

Students identified with Autism Spectrum Disorders are served in learning environments specifically designed to meet their unique needs. The learning environments include the students' homes, mainstream settings, or specialized classes such as the Autistic core Classroom, a self contained class where students receive services from a team of specially trained and credentialed teachers. Specialized teaching methods such as TEACCH, (Treatment and Education of Autistic and Communicatively Handicapped Children), and PECS, (Picture Exchange Communication system), are provided according to each student's IEP. Parents provide input into the development of the IEP and are encouraged to participate in district sponsored in-service trainings specific to autism disorders.

Cochlear Implant Program

The Cochlear Implant Program provides services to deaf/hard of hearing students with cochlear implants. The IEP team determines specific services to be provided and methods designed for the deaf/hard of hearing. Services are provided in the Least Restrictive setting by a specially credentialed/certificated team in age/peer appropriate settings including a resource room, special classroom, and general education environment

Deaf and Hard of Hearing

Deaf and Hard of Hearing services include consultation with the classroom teacher, student, parents, speech therapist, audiologist, hearing aide dealer, etc. This also includes class presentations, hearing aide checks, and maintaining FM systems. Services are provided in Auditory Skills Development, and/or vocabulary development, especially as related to academic subjects, and may also include the use of FM equipment.

Learning Centers

Learning Centers are a seamless approach of integrating resources to serve at-risk special and general education students. It is a model designed to meet the individual needs of each student and may include small group or one on one instruction based on diagnostic and prescriptive teaching.

Services are delivered in the general education classroom or the learning center by special education, general education, SIP, Title 1, Bilingual, Gate, or Speech and Language staff.

North Campus/Gompers Continuation High Schools

North Campus and Gompers Continuation High Schools are alternative four-year public high schools in the West Contra Costa Unified School District. Students referred to continuation high schools are those who did not succeed at the high school, necessary small school or other alternative high schools. They have a small student population, which include but are not limited to, students with learning disabilities. In addition to core curriculum, they use School-To-Career practices to enable students to develop awareness of workplace skills and abilities, and gain academic, social and ethical information for a more productive future.

Occupational Therapy

Students who are identified through assessment as eligible for occupational therapy, receive services as designated by their Individual Education Plan, and may be delivered as both direct and/or indirect, (consultation) services in the classroom, or other educational setting, or home. OT includes services to improve a student's educational performance, self-help abilities, sensory processing, motor planning, visual perception, and gross and fine motor abilities.

Physical Therapy

Students who show through assessment, a discrepancy between gross motor ability and other educational skills, may receive physical therapy services from a registered physical therapist, or a physical therapist assistant. Physical therapy includes, but is not limited to, motor coordination, posture and balance, self-help and functional mobility, accessibility and use of assistive devices.

Psychology Department

Credential school psychologists and interns staff the school district psychology department. In addition, many of the psychologists have clinical licenses. Psychological services may include but are not limited to; special education assessment and reassessment, participation on Student Study Teams, conducting manifestation determinations, assistance in the development of behavior support plans, conducting functional analyses, participation in I.E.P. meetings, providing counseling, crisis intervention services for all schools, providing in-service trainings for school staffs and parents, and

working collaboratively with teachers on early intervention strategies. Psychologists are assigned to schools according to a formula, determined by the total number of students enrolled, as well as the number of students in special education.

Skill Mastery through Intensive Learning Experiences Program (SMILE)

SMILE is an intensive one-to-one extended day program for students with autism. This program is provided for students between the ages of three and five years old who are currently enrolled in district preschool special day classes. Students are placed in the program through the IEP process and attend afternoon classes twelve hours weekly. Program paraprofessionals participate in weekly training one day per week in autism best practices as well as district wide in-services.

Speech Therapy

Students who are identified through the referral process, as having a speech/language impairment that adversely affects academic performance, are served by Speech/Language Pathologists (SLPs) through a variety of options. This may include direct services on an individual or group basis within the classroom or on a pull-out basis, or consultation with staff and parents to address student needs. Students in schools where the Learning Center model exists, may be identified through state-wide standardized assessments in Language Arts. These students may receive individual or group therapy for a limited time to address specifically targeted needs.

Transition Learning Center

Transition Learning Center serves eligible special education students diagnosed as Learning Handicapped and/or Emotionally Disturbed and occasionally severely handicapped students who also demonstrate severe behavior problems to the extent that they cannot be served in the traditional special day classrooms. Students in grade K-12, are served by a team of specially trained and credentialed teachers, counselors, school psychologists, speech and language specialists, behavior consultants and mental health specialists.

Transitional Educational Placement (TEP)

(TEP) classes are self contained special day classes located on public school campuses. TEP classes serve special education students whose behavioral and emotional needs interfere with their ability to learn and interfere with the learning of others. Educational services are provided by a team of specially credentialed teachers, school psychologists, aides, and Related Services support staff as determined by each student's IEP. Student/ teacher ratios are kept at a low level. Instruction includes an emphasis on behavior and social skills.

Visually Impaired Program

Students who are determined, through assessment, to be functionally visually impaired may receive Services for Students with Visual Impairment (VI) and Blindness, within the least restrictive environment, through the VI program. Possible placements may include:

Preschool and Elementary SH/VI Special Day Class, Middle and High School VI Resource Room, and/or Orientation and Mobility (O&M).

The VI program offers two kinds of services. The Teachers of the Visually Impaired (TVI) instruction focuses on the unique educational needs of visually impaired students, and may include Braille, modification of curriculum and materials, specialized computer technology, and other skills. O&M specialists help students learn skills which contribute to their ability to travel safely and independently in the community.

Non-Public School

These services are offered when it has been determined that the most appropriate educational program is not available through the public school system. Non-public, non-sectarian school programs and services may be provided for an individual with a rare or unusual disabling condition for whom the maintenance of a public school program is not feasible; or when a student's disability is compounded by other conditions so that the student requires services and facilities that are not a part of the educational program, or when a student's previous placement in the public school special education program has been determined to be unsuccessful and further modification of the program is not possible.

State Special Schools

Residential schools which are operated by the State of California for the deaf, blind and neurologically disabled are available for complete diagnostic workups and may be considered for placement of certain individuals with extraordinary needs. Placement in these programs will be arranged by the school district upon the recommendation of the IEP team.

Student Records

All students' records are confidential. Parents/guardians (or the student if age 16) may examine them. To do so, a written request should be made to the Special Education Department and a time will be set up to review the records. The parent may also set a time for a conference to have information (test results) regarding the child explained by a qualified representative of the school.

Records will *only* be sent to other agencies/persons outside the school district with written request and permission by the parent. Students of legal age may be sent their records upon request.

School district employees who have a legitimate educational interest in the information regarding the student may examine the records if such information helps school staff understand the student better, and will help them plan for his needs. A list of persons who have seen the confidential records will be kept. Parents have the right to be informed when confidential information is no longer needed and is to be destroyed.

If parents believe that any information about their child is inaccurate, misleading, or violates the privacy of the child they have the right to request that the records be corrected. If the request is denied they may ask for a district level hearing. If the hearing decision finds the information inaccurate, the

district will correct the record and inform the parent in writing. If the hearing decision finds the data accurate, the parent will be notified that they have the right to place a statement in the records stating their reasons for their disagreement. All such statements will be kept as a part of the records.

Keeping Records

Keeping records of your child's medical, developmental, and school histories is a necessity. Parents so often need to give a history of a child's development or information pertaining to his disability. As each year passes, these histories become longer and sometimes more complex. Keeping these records in an organized notebook or file will prove to be a most practical and useful project, and as a parent you will find this notebook/file very helpful in contacts with school, medical and agency persons.

Your notebook/file could be organized in this way:

- **Medical History**

This section should include developmental history starting with pregnancy and birth information. Include the name and addresses of any doctors or clinics you have consulted. All medical reports (pediatrician, allergist, etc.), therapy reports (speech, physical therapy, etc.) and agency reports (Regional Center, mental health, etc.) should be included.

- **School**

This section should include copies of IEPs; assessment reports (academic, speech, psychological, physical, vocational); periodic examples of schoolwork (dated), and report cards. It is also recommended you keep a record of letters and phone calls you have made regarding special education, and letters you have received from school staff.

- **Personal/Social History**

Include a record of your child's interest and activities, organization, camps, awards, social involvement, and some photographs.

- **Current Information**

Include a copy of your child's school rules and regulations, the school calendar, a copy of Parents' Rights and Responsibilities in Special Education, and information on community resources.

Parents' Rights and Responsibilities

Individuals with disabilities and their parents have certain protections provided by the IDEA. These protections include rights related to the assessment process and the development of the IEP. In addition, you may appeal a decision if you disagree with the school district, or you may file a complaint if you feel that the proper procedures have not been followed.

“Due process” is now a part of our everyday vocabulary. It is a legal way of saying that certain principals and practices exist and must be respected to insure that each child is treated in a manner that guarantees his right to equal educational opportunities. Due process ensures there are specific procedures and timelines that must be followed when and if significant changes are made (or even proposed) in a child's educational program. Due process is guaranteed to us by the Constitution of the

United States. It is there as a safeguard so that every individual has the means of protecting and asserting his own rights.

Parents have the right to be informed of all procedural safeguards and rights of appeal in language easily understood by the general public and in the parent's primary language. Notice should include:

- A description of the action the school proposes to take;
- An explanation of why the school proposes to take the action;
- A description of any options the school considered but did not recommend;
- The reasons why those options were rejected;
- A description of each evaluation procedure, test, record, or report used as a basis for the action.

If a problem arises:



First, try to get it resolved at your local school level. Contact your child's teacher and discuss the problems. Other school staff members who are aware of your child's needs such as the principal, nurse, speech therapist, or psychologist may be able to help. If necessary you may contact your child's Special Education Program Specialist/Administrator for further

assistance.

If the situation is not solved satisfactorily and the problem has to do with your child's program placement, special education, or related services, then request an IEP review meeting. If your problem cannot be solved through this meeting, there are still other avenues available.

You may contact the Director of Special Education Services for the WCCUSD at (510) 741-2801, or write the Special Education Department, 2465 Dolan Way, San Pablo, California 94806.

You may want to request a Solutions Panel through Alternative Dispute Resolution, (see section) or request a fair hearing by writing the State Superintendent of Public Instruction, 721 Capitol Mall, Sacramento, California 95814. Fair hearings are held to resolve differences of opinion between you and the school regarding your child's special education program. You may initiate a Complaint Procedure by filing a written complaint with the State Superintendent of Public Instruction as above. Complaints are filed if the school is not complying with the law.

Other help available for solving problems:

Area Board 5 for Developmental Disabilities, (510) 286-0439

Community Alliance for Special Education (CASE), (415) 431-2285

Disability Rights Education and Defense Fund (DREDF), (510) 644-2555

Office for Civil Rights, US Department of Education, San Francisco, California

(415) 556-4275

Protection and Advocacy, Inc., (510) 430-8033

Transition

Transition Program (WCCUSD)

Transition refers to the movement from school to the adult world of work and community life. It is defined as an outcome-oriented process that involves a coordinated set of activities that promote this movement. The purpose is to prepare students with disabilities for employment and independent living. Ideally, transition should represent a balance of teaching everyday living skills, personal and social skills, and vocational skills. Thoughtful planning is known to improve the employment rates of students with disabilities.

The California Department of Education has identified five Core Messages for Transition. These are:

- Student focused planning based on the student's interests and preferences;
- Student development activities which develop the student's academic, social, and employability competencies;
- Interagency collaboration which involves all stakeholders;
- Family involvement which recognizes parents as equal partners on the IEP team; and
- Program structures that include a range of options that support meaningful connections to the workplace and community.

Under the IDEA, each eligible student is required to have an Individual Transition Plan (ITP) beginning at age 16. This plan is developed by a team which includes the student, parents, school staff, Regional Center case manager, vocational specialist, and anyone else who can contribute to the process. This planning process must begin by identifying the student's post-school goals. Students and families should be supported in thinking about their long-range goals. The ITP team then moves on to develop a statement of needed transition services in the areas of instruction, vocational training, integrated employment, independent living, and community participation. A functional vocational evaluation should be completed as needed.

The ITP serves as a "blueprint" for guiding delivery of services to the student. Within each area, functional and measurable goals and objectives should be explicitly stated. These goals and objectives should be designed to ensure that students will gain the skills needed to achieve their desired post-school goals. Thinking about these questions may help you in thinking about your child's transition plan.

- What courses does the student need to complete to gain the skills s/he needs?
- Does the student need related services to benefit from special education? If so, are the necessary linkages in place to ensure that these services will continue when the student leaves the public school system?
- Has the student been exposed to a broad range of experiences in the community, such as shopping, transportation, recreation or leisure activities, or using community facilities such as a library?
- Are there opportunities for career exploration and experiencing a variety of on-site job training activities?

- Does the student need instruction in daily living skills such as preparing meals, home maintenance, shopping and caring for clothes, grooming, and money management?
- Has the student had a functional vocational assessment?

Remember, transition is a plan, not a program. Your child's transition plan should demonstrate that it is outcome-oriented; focused on meeting the student's needs, interests, and preferences; identify the instruction and services needed to achieve the student's goals' and should clearly state the linkages after exit from the school system to ensure that post-school supports are in place.

In the West Contra Costa Unified School District, most students with severe disabilities attend the Transition Program based at Contra Costa College after high school, and remain in that program until age 22. At that time, they are awarded a Certificate of Completion.

More information about transition planning can be obtained by asking for a copy of the Transition Handbook from:

Ken Talken, Principal, Transition Program (510) 307-5339
Norma Ramos, Specialist, Transition Program (510) 307-5309

Transition Task Force, Developmental Disabilities Council of Contra Costa County
(510) 374-3665

Your case manager, Regional Center of the East Bay
(925) 798-3001

Transition Resource Center
(800) 281-3023

Other resources include:

Transition Services in the IEP
www.nichcy.org

Full Inclusion

Definition of inclusion

Inclusion is a popular educational term which refers to the placement of special education students (usually severely handicapped special day class students) full time into the general education classroom. Full Inclusion may be considered when parents request general education classroom placement for their children, with appropriate aids and supports, so that they can learn and grow both academically and socially with their non-disabled peers.

What does an inclusion program look like?

Typically, one or several children with disabilities attend class for most of each day in the general education classroom. They belong to that classroom and are counted in the maximum number of students allowed. They are expected to participate in class discussions and team projects with the encouragement of the general education teacher. They do the academic work assigned to the class as appropriate and adapted to their level by the special education teacher responsible for each child. The special education teacher can be on-site at the school or itinerant, i.e., responsible for included students at several schools.

Do I have a right to ask for inclusion for my child?

Yes, the IDEA, Individuals with Disabilities Education Act, is federal legislation that requires school districts to place students with disabilities in the Least Restrictive Environment (LRE). This means that the IEP team must first consider placement in the general education classroom, with supplementary aids and services, in the school the child would attend if not disabled, unless the child's IEP requires some other arrangement.

What are supplementary aids and services?

Although the support system for each child is uniquely described in his or her IEP, supplementary services could include a behavior program, adapted curriculum, physical accommodations to access learning, technology such as computers to enhance learning, and any other services specified by the IEP to address the child's special needs in the general education setting.

What kind of inclusion programs are available in the WCCUSD?

As more and more parents have requested inclusive settings for their children, the District has responded by accommodating children at various schools, preferably the school a child would attend were he or she not disabled. There are also several inclusion schools, where larger numbers of children severely handicapped attend general education classrooms.



How do I inquire about inclusion for my child?

Talk to your child's teacher about setting up an IEP meeting. A special education administrator will need to attend in order to change your child's placement. On the signature page of the IEP, the team's response to the "Extent of Time in General Education" question will determine how much time your child will spend in an inclusion setting. You might need an evaluation from an educational consultant or psychologist to determine what setting is appropriate for your child and what accommodations are needed for his or her success.

What are the benefits of inclusion?

Studies of both academic and social performance of students with disabilities learning in inclusive classrooms show that some students may do equally well or better than in segregated classes. Full Inclusion students with disabilities are encouraged to learn attending skills and study habits. They socialize, learn with, and model appropriate behavior with their non-disabled peers. In turn, their non-disabled peers also learn acceptance, and experience team building with their special needs peers.

What if I don't think my child would succeed in the general education classroom?

Inclusion isn't the best or most appropriate answer for every child. Placement is an individual decision based on the goals and needs of your child. The Least Restrictive Environment is not the same for every child. To accommodate these different LRE needs, the District is required by IDEA to offer a continuum of service, a variety of placements that offer parents a choice that is appropriate for their child. These placements should include everything from inclusion to special day class, to pull-out time in a resource setting, to a non-public school.

Section 504

Section 504 of the Rehabilitation Act of 1973 was the first civil rights act for people with disabilities. Regulations became effective in 1977 and prohibited discrimination on the basis of disability in all programs which receive federal financial assistance. Each federal department, including the U.S. Department of Education, developed its own set of implementing regulations. Section 504 guarantees the civil right of equal access to educational services for students with disabilities, even if they do not qualify for special education under IDEA (see Section 3). Discrimination or a failure to provide a free, appropriate education to students with disabilities is regarded as a violation of basic civil rights.

Here is a summary of some of the major rights under Section 504:

Eligibility

The definition of a disability is much broader under Section 504 than under IDEA, and covers many students not eligible for services under IDEA. A disability is defined as a physical or mental impairment that substantially limits one or more major life activities. This may include ADD, ADHD, specific learning disabilities, physical disabilities, sensory impairments, medical conditions, and AIDS.

Evaluation

Under Section 504, students *must* be evaluated to determine whether they need any type of special services to enable them to benefit from their education, or to insure against inappropriate placements. Parents, of course, may request an evaluation for their child; however, school districts are also supposed to seek evaluations for children so that those who need services are able to access them. Evaluations must cover all areas of the suspected disability.

Least Restrictive Environment/Maximum Appropriate Integration

Children covered under Section 504 should be educated in the regular education setting and be with their non-disabled peers to the maximum extent possible. Within this setting they should receive all aids and services which they need to meet their educational needs.

Procedural Safeguards

This means that parents must receive notice about any actions regarding their child's educational placement. Parents/guardians must have the ability to influence or contest any decisions regarding their child.

Related Services

Students with disabilities are eligible for related services or program modifications. Remember that the intent of Section 504 is to guarantee *access* to regular education for students with special needs, and the related services provided to a child should meet that child's individual educational needs as adequately as the needs of non-disabled children are met.

The District has developed a process for students who have been referred under Section 504. You should request your school provide you with written information so that you will understand the referral and assessment process. If the referral is appropriate, a 504 Committee meeting will be held to develop a written plan. Prior to that meeting, you should request written information from the 504 Coordinator regarding the types of accommodations or modifications, which could be implemented to benefit your child. Refer to Section 8, Resources, for other places you can go for help.

For additional assistance in planning for your child's needs under Section 504, contact the 504 Coordinator, at (510) 741-2820.

Hughes Bill (AB 2586)

The Hughes Bill was passed by the California Legislature in 1990 and its purpose is to ensure that special education students have the right to positive behavioral intervention plans. Briefly, the Hughes Bill mandates that attempts to change serious and pervasive behavior problems must meet the following criteria:

- Interventions result in lasting and positive behavioral changes;
- Interventions promote greater access to community social events;
- Interventions do not cause pain or trauma; and
- Interventions respect the dignity and privacy of the individual.

The Hughes Bill provides guidelines for developing a behavioral intervention plan, based on behavioral principles, with the goal of maximizing the individual's full potential. Hughes Bill guidelines apply only to students in special education.

WCCUSD procedures for making a referral and developing a positive behavioral plan:

Students who exhibit serious behavior problems that interfere with the implementation of their IEP may need a Positive Behavioral Intervention Plan. If the student has not responded to documented behavioral intervention attempts, s/he may be referred for evaluation. The following sequence of events is recommended:

- Teacher, principal *or parent* identifies student as having a serious behavioral problem. Student is:
 - * Exhibiting behavior which meets the criteria for serious behavior problems; or
 - * Engaging in a behavior that results in a Behavioral Emergency Report being completed.
- Program Administrator/Specialist convenes the student's IEP Team, including the parent/resident care-provider and the case manager.
- The teacher, principal or parent completes the Positive Behavioral Referral form, presents it at the IEP meeting, and determines, (with the case manager) timelines for the following: functional analysis assessment, written report, and follow-up IEP meetings.
- IEP team re-convenes, the case manager presents the functional analysis assessment report, and the IEP team, including the case manager, teacher, parent(s), and other school personnel develop and approve the Behavioral Intervention Plan (BIP), which will, most often, include the following:

- * Case file review;
 - * Direct observation of the student in a variety of settings and activities;
 - * Interview of student's teacher and other staff regarding student's school program; and
 - * Interview with parent/resident care-provider.
- Scheduled IEP reviews occur, and BIP revisions are agreed upon and implemented.
NOTE: Review timelines are determined at the initial IEP meeting.

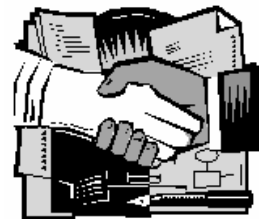
The IEP team, including the case manager, facilitates and supervises all intervention and evaluation activities.

- Emphasis is on developing more adaptive skills for a student; therefore, the goal is to replace maladaptive behavior with more acceptable behavior.
- The elimination of maladaptive behavior does not require the use of intrusive behavioral interventions that cause pain or trauma. Rather, the IEP team shall consider the motivating variables, which cause maladaptive behavior, and endeavor to alter these variables to produce positive behavioral results.

The functional analysis assessment is conducted by the case manager. The assessment report, written by the case manager and presented to the IEP team contains:

- A description of the nature and severity of the targeted behavior (in objective and measurable terms);
- An analysis of the antecedents and consequences that maintain the targeted behavior, including an analysis of the function of the behavior across the settings in which it occurs (environmental variables).

In an IEP meeting the BIP is developed and becomes a part of the student's IEP. The plan must be approved by all members of the IEP team, including the student's parent(s) or legal guardian.



Positive Programming

“Positive programming”, meaning the use of positive response options, is the mandate of the Hughes Bill. All behavioral intervention plans written in the WCCUSD will provide for positive responses to misbehavior, and will include alternative appropriate behaviors. Punishment or other negative interventions (e.g., over-correction, contingent exercises, confined time-out) are *not* to be used. Approved responses to misbehavior may include, but are not limited to:

- The behavior targeted for reduction is ignored, while the student is carefully observed.

- The student is provided verbal/physical redirection, either to the assigned task or to another activity that is likely to interrupt the target behavior.
- The student is given verbal feedback when her/his behavior is inappropriate.
- The student is told that the message s/he is attempting to communicate is understood and acknowledged.
- The student is given a brief physical prompt to stop the target behavior(s) or to perform a more appropriate behavior.
- The student is given a response cost (e.g., fines, loss of privileges, brief time away from the group.)
- The student's behavior is dealt with in the manner prescribed by the school site.
- Temporary removal from the work area, but not from the classroom. As soon as the inappropriate behavior has stopped, the student should be returned to the work area. Students can monitor their own readiness to return to work.
- Teach alternative behavior(s) that produce the same consequence(s) as the inappropriate behavior.

Restrictive procedures are to be used *only* in the case of a behavioral emergency; to control unpredictable, spontaneous behaviors which pose a clear and present danger of serious physical harm to the individual, others, or property, and which cannot be immediately prevented by a response less restrictive than the temporary application of a technique to contain the behavior.

- Emergency intervention techniques approved for use by the WCCUSD are Professional Assault Crisis Training (PRO-ACT) or Crisis Prevention Institute (CPI). These techniques are to be carried out *only* by trained personnel and *only* if there are no other options.
- No emergency intervention shall be employed for longer than is necessary to contain the behavior.
- For nonseverely handicapped students, the normal disciplinary procedures, such as suspension and expulsion, may be utilized for serious behavioral problems. For severely handicapped, emotionally disturbed, or severely behavior disordered students, emergency interventions are to be used only when a student is so physically uncontrollable that he/she is incapable of responding to other measures.

Source: WCCUSD *Implementing Guidelines for the Hughes Bill Regulations: A Handbook for Educators*, July 1, 1996

Alternative Dispute Resolution

Do You Have a Dispute? We Have the Alternative.

The **West Contra Costa Unified School District** wants to help provide a secure and neutral environment that encourages free exchange of ideas.

If you have a problem, see what the Conflict Resolution Panel can do for you!

ALTERNATIVE DISPUTE RESOLUTION PANEL

- To provide a secure environment that encourages free exchange of ideas, the West Contra Costa Unified School District (WCCUSD) Special Education Local Plan Area (SELPA), has developed an alternative process for settling disputes between the district and parents.
- This process is a conciliatory one in which all parties in conflict take control to shape their own mutually satisfying agreement.
- A panel consisting of volunteers trained in communications and Alternative Dispute Resolution skills are brought together.

HOW THE CONCILIATION PROCESS WORKS

- A panel, composed of parents, a district representative, and a county representative conducts the hearing.
- All parties have a “say” and listen to the other party’s point of view.
- Interpreters are provided, if needed.
- The panel does not take sides, but acts as a neutral third party to ease the way to a solution.
- Parties work through the panel to create a written agreement.
- Parties voluntarily sign an agreement that signifies commitment to uphold the resolution.

WHAT IT CAN DO FOR YOU

- Panels are free and conciliation services are provided at no charge.
- Panels are arranged at convenient locations and are usually held within 2 to 3 weeks.
- No one but yourself and other disputants need to know about your dispute.

CASE DEVELOPER AND THE PROCESS

- A Case Developer listens to your problems, asks for details, including information about the other party.
- With your permission, the Case Developer contacts the other party and encourages participation in a panel hearing.
- The panel hearing is scheduled at a time convenient to all.
- The panel will not decide who is right or wrong, but will assist the parties in reaching a mutually satisfactory agreement.
- When agreement is reached, the specifics are noted by a panelist and signed by all parties.
- The Case Developer will follow up on all agreements and further assist as needed.

For more information on how the Alternative Dispute Resolution Panel can help you to resolve problems related to your child's education, contact:

Special Education Department
Pupil Services Center
2465 Dolan Way
San Pablo, CA 94806

Call (510) 741-2840

Special Education Dept.

Pupil Services Center Front office.....741-2800

SELPA Director

Steve Collins.....741-2801

Special Education Director

Darlene Jones.....741-2840

Special Education Administrators

Ora Anderson (Secondary)741-2840

Susan Keeffe (Non Public Schools).....741-2843

Kathie Shores (Early Intervention).....233-1955

Ken Talken (Transition).....307-5339

Program Specialists

Nick Berger (Elementary)741-2843

Edwyna Elzie (High School).....741-2840

Susan Medsker (Middle School).....741-2840

Andrea Trexler (Elementary).....741-2843

Jan Valtr (Elementary)741-2840

Transition Specialist

Norma Ramos (Transition).....307-5309

Assistive Technology..... 234-1818

Hearing Impaired..... 741-2874

Occupational Therapy.....235-4926

Psychology..... 741-2813

Speech.....741-2805

Transportation

Rosa Moreno.....741-2807

Visually Impaired741-2896

504 Coordinator

Ken Talken.....741-2820

Resources

Listed below are resources which provide services, support, or cash benefits to families with a child with a disability. They are divided into sections for ease of reference.

Mandated Programs

- **California Children Services (CCS)** (925) 313-6100
Provides specialized medical care, therapy and treatment, and equipment for families eligible through residency, medical condition, and financial situation.
www.cchealth.org/services/ca_childrens_services/
- **Child Health & Disability Prevention Program (CHDP)** (800) 696-9644
..... or (925) 313-6150
Provides preventive health care for children of low-income families or in foster care.
<http://www.dhs.ca.gov/pcfh/cms/chdp>
- **Contra Costa County Children’s Mental Health Services Program** (888) 678-7277
Counseling for children and families. Parent support groups available.
Call Family Involvement Coordinator at 925-646-5122.
- **Contra Costa County Department of Employment & Human Services**....(510) 262-7700-
Hercules, (510) 412-3000-Richmond
Financial assistance, food stamps, Medi-Cal, IHSS, for low income families.
- **Contra Costa Regional Medical Center** (925) 370-5000
County hospital required to provide medical care to any resident regardless of ability to pay. www.cchealth.org/medical_center/
- **Regional Center of the East Bay Concord Office**.....(925) 798-3001
Oakland Office (new intakes)..... (510) 383-1200
Evaluation, case management, and purchase of services for clients with developmental disabilities. www.rceb.org
- **Social Security Administration** (800) 772-1213
Cash benefits (through Supplemental Security Income [SSI] program) for children with diagnosed disabilities. If you receive cash benefits through the County Department of Employment & Human Services you will probably be eligible. www.ssa.gov
- **Women, Infants, and Children (WIC)**..... (800) 414-4942
Vouchers for food supplements for low-income women who are pregnant, breast-feeding, or have children from birth to age three. <http://www.cchealth.org/services/wic/>

Special Programs

- **California SIDS Program (Sudden Infant Death Syndrome)** (800) 369-7437
Support groups for families who have lost babies to SIDS.

- **Blind Babies Foundation**..... (510) 446-2229
 Consultation & home visits. www.blindbabies.org
- **California Chapter of the National Autism Association**.....(510) 237-9454
 Resources and support for families of children with autism spectrum disorders.
www.freewebs.com/calnaa
- **CARE Parent Network** (800) 281-3023
 Information, resources, training, and parent-to-parent support.
www.contracostarc.com/html/care
- **Center for Accessible Technology**..... (510) 841-3224
 Technology resources, hardware and software loans, newsletter, workshops.
<http://www.cforat.org>
- **Crisis Center Hotline**..... (800) 833-2900
- **Deaf Counseling, Advocacy and Referral (DCARA)** (877) 322-7299
 Resources, counseling, advocacy and referral for individuals with hearing impairments.
www.dcara.org
- **Disability Rights Education and Defense Fund (DREDF)**..... (510) 644-2555
 Law and policy center dedicated to advocacy, technical assistance, education and
 training to protect the civil rights of people with disabilities.
www.dredf.org
- **Down Syndrome Connection**..... (925) 362-8660
 Information, referral and support for parents; services for children.
www.downsyndromeconnection.org
- **East Bay Learning Disabilities Association**
 Monthly meetings, workshops and newsletter. www.eastbayLDA.org
- **Easter Seals** (510) 835-2131
 Early intervention services. www.bayarea.easterseals.com
- **Epilepsy League of the East Bay** (800) 632-3532
 Information, referral and support groups.
- **Fragile X Support Group**..... (510) 864-4268
 Quarterly support group meetings.
- **Support After Neonatal Death (SAND)**..... (888) 908-4263 (HAND)
 Monthly support group meeting.
- **Hydrocephalus Foundation** (800) 598-3789
 Information and referral.

- **Prader-Willi Support Group**..... (800) 400-9994
Quarterly support group.
- **Second Time Around**..... (925) 685-4343
Support group for grandparents raising their grandchildren.
- **Through the Looking Glass** (510) 848-1112
Parent training, counseling and support groups; adaptive equipment for parents with disabilities. www.lookingglass.org
- **Twin By the Bay** (510) 655-4139
Health education, counseling, information and referral.
- **United Cerebral Palsy (UCP)** (925) 939-8000
Programs for individuals with cerebral palsy. www.upc.org
- **West Contra Costa Unified School District Resource Parents** (510) 741-2812
Trained parent volunteers available to provide information, support and confidential consultation to parents of students with special needs.
- **WCCUSD Parent Library at Cameron School**.....(510)233-1955
A lending library for parents, donated by the CAC and members of the community, containing books and tapes on a variety of disabilities, teaching strategies, and parenting techniques.
- **WCCUSD Special Education Parent Resource Center**.....(510)526-8631
Providing families with school district and community resources, parent exchange boards, disability information and support.

Counseling

- **Catholic Charities of the East Bay -Counseling Services**
Richmond (510) 234-5110
Support groups; individual and family counseling. All religions. www.cceb.org
- **Contra Costa Referral Service** (925) 946-4500
Information and referral service.
- **Family Stress Center** (925) 827-0212
Therapy for families and individuals; respite nursery. <http://www.familystresscenter.org>
- **John F. Kennedy University Community Counseling Center**..... (800) 696-5358
Counseling by advanced graduate students under the supervision of licensed therapists.
- **Low-Fee Referral Network**..... (925) 295-2192
Referrals to private therapists offering sliding fee scale.

- **PediatricARE**..... (510) 531-7551
Support groups for children living with a family member with chronic illness or disability, or who have experienced a death in the family. www.ebac.org
- **Touchstone Counseling Services, Inc.**..... (925) 932-0150
Support groups, workshops and therapy.
- **West Coast Children’s Center**..... (510) 527-7249
Out patient mental health services for children and their families. Sliding scale, accepts Medi-Cal, and some insurances. www.westcoastcc.org

Child Care/Respite

- **Child Care Council of Contra Costa County, West County** (510) 758-5439
Provides referral to licensed public and private preschools, childcare centers, family child care homes, play groups, baby-sitting exchanges and cooperatives. <http://www.co.contra-costa.ca.us/depart/service>
- **Family Stress Center** (925) 827-0212 x 106
Provides short-term on-site respite for families who need relief – four hours per week for up to 2 months; can care for medically fragile infants. <http://www.familystresscenter.org>
- **Bay Area Crisis Nursery** (925) 685-8052
Residential care for children in time of family crisis. Can leave children from 24 hours to 3 weeks. <http://www.bacn.jkmas.com>

Recreation

- **Aquatics**..... (510) 527-0446x3
Special Needs Aquatic Program, (SNAP); individual and small group sessions ranging from 30 to 60 minutes. Contact Dori Maxon. <http://home.earthlink.net/~snapkids>
- **Xenophon Therapeutic Riding Center** (510) 339-6047
Children learn how to ride horses and also learn other skills. Lessons are approximately 30 minutes in length and are given in 4-6 week sessions. The cost is \$15.00 per lesson. For more information, call Judy Lazarus. <http://members.aol.com/Xenride>
- **Baseball**..... (510) 758-4715
Challenger Little League, for children 6-12 years. Call Pinole-Hercules Little League.

- **Special Olympics Northern California** (925) 944-8801
For children 6 and over with mental retardation, with or without physical disabilities.
Activities include swimming, soccer, track and field, bowling, snowshoe & cross country.
www.sonc.org
- **Bay Area Outreach and Recreation Program (BORP)** (510) 849-4663
For children 5 and over with physical disabilities. Activities include basketball, tennis,
track and field, power soccer, skiing, and other outdoor activities. There is no charge
except for special events and trips. Call Tim Orr or Kathryn Black. www.borp.org
- **Richmond Specialized Recreation Program** (510) 620-6814
Disabled Peoples' Recreation Center (DPRC)
<http://www.ci.richmond.ca.us/%7Erecweb/dprc>
- **Theme Parks**
The following theme parks do not offer discounts on ticket price but do have passes which
allow you to go to the head of the line and bypass long waiting lines. Great America and
Disneyland require a letter from your doctor verifying the disability. Special passes are issued
through the Guest Relations offices at the parks.

Disneyland..... (714) 999-4565
Universal Studio (818) 622-3735
Great America (408) 988-1800
Bonfante Gardens..... (408) 840-7100
Marine World (707) 644-4000
Deaf Awareness Day TDD (707) 643-6769
Call for information on dates and availability.
- **Oakland Ice Center/Special Skater Program** (510) 268-9000
For all ages, this program was developed especially for athletes with special physical and
mental challenges. With assistance of volunteers emphasizing fun and safety, skating helps to
improve balance and coordination as well as develop skills, make new friends and experience a
newfound freedom and sense of accomplishment. \$6.00 drop in fee includes skates.
<http://www.oaklandice.com/learntoskate.html>
- **Berkeley Iceland/ St. Moritz Special Skater Program**..... (510) 647-1607
Ice skating lessons for children with special needs. Tuesdays from 4-5 p.m.
Cost: \$30 annual membership in U.S Figure Skating Organization.

Financial Assistance

One of the ways in which families can be supported is with financial assistance which makes it possible for them to meet the needs of their children. We have listed some of the organizations we have found which may help you.

- **Native Daughters of the Golden West** (800) 994-6349
Serves children from infancy to age 18 who are not eligible for any other existing aid. Can meet either physical or material needs, such as braces, wheelchairs, operations, hearing aids, camps, etc. Contact the Native Daughters of the Golden West for an application; may

also require a statement from a physician or hospital. Parents will be required to furnish a financial statement. <http://www.cagenweb.com/cpl/ndgw.htm>

- **Avery Fuller Children’s Center** (415) 986-1687
Provides grants to children for the purpose of increasing their self-sufficiency. Application must be made by the professional with primary care responsibility.
- **NORD’s Medication Assistance Programs**(800) 999-NORD (6673)
www.rarediseases.org
People who cannot afford medication may be helped if they need one of the following prescription drugs:
 - Sandoz: sandimmune (Cyclosporine), sandoglobulin (immune intervenous-human), venous (human), Sandostatin (ocreotide acetate), Parlodel (bromocriptine mesylate), Eldepryl (selegiline hydrochloride), Clozaril (clozapine)
 - Sigma Rau: Camirot (L-carnitine)
 - Allergan: Botox (botulinum A toxin)
 - Teve/Gate: Copolymer-1 (cop-1)

Utilities

- **Pacific Gas and Electric** (800) 743-5000
PG&E has a program called “Medical Baseline Rate” for individuals who require a life-support device, or special heating or air-conditioning needs. Call number above to obtain application. Must be certified by physician. Also, “Balanced payment Plan” for individually metered customers. Contact the number shown on your bill for further information.
- **Pacific Bell**
Universal Lifeline telephone service is a basic service at half price, for customers with low income. There are two types of Lifeline service available in most areas: Flat Rate offers unlimited local calling, this is usually better if you make more than 2 local calls per day or Measured Rate -offers 60 untimed local calls. If you have questions about Lifeline service, call the toll-free Pacific Bell number on page 1 of your bill under “adding, changing, or disconnecting service.”

Acronyms & Glossary

Acronyms

ADD.....	Attention Deficit Disorder
ADHD.....	Attention Deficit Hyperactivity Disorder
ADR.....	Alternative Dispute Resolution
APE.....	Adapted Physical Education
BIP.....	Behavior Intervention Plan
CAC.....	Community Advisory Committee
CAPD.....	Central Auditory Processing Disorder
CCS.....	California Children’s Services
CDC.....	Career Development Center
CH.....	Communicatively Handicapped
CP.....	Cerebral Palsy
DIS.....	Designated Instruction and Service (or related services)
Ed. Code.....	California Education Code
FAPE.....	Free and Appropriate Public Education
HI.....	Hearing Impaired
IDEA.....	Individuals With Disabilities Education Act
IEP.....	Individualized Education Program
IPP.....	Individualized Program Plan (Provided by Regional Center)
ITP.....	Individualized Transition Plan
LD.....	Learning Disability
LEA.....	Local Education Agency
LH.....	Learning Handicapped
LRE.....	Least Restrictive Environment
MH.....	Multi-handicapped
NSH.....	Non-Severely Handicapped, Includes LH and CH
OH.....	Orthopedically Handicapped
OHI.....	Other Health Impaired
OT.....	Occupational Therapy
PDD.....	Pervasive Developmental Delay
PDD-NOS.....	Pervasive Developmental Delay – Not Otherwise Specified
PH.....	Physically Handicapped. Includes HI, OH, and VI.
PT.....	Physical Therapy
RCEB.....	Regional Center of the East Bay
ROP.....	Regional Occupational Program
RSP.....	Resource Specialist Program
S & H Code.....	Safety and Health Code
SDC.....	Special Day Class
SED.....	Seriously Emotionally Disturbed
SELPA.....	Special Education Local Plan Area – (3 in Contra Costa County)
SH.....	Severely Handicapped. Includes MH and SED
SIB.....	Self Injurious Behavior
SLP.....	Speech-Language Pathologist
SST.....	Student Study Team
TBI.....	Traumatic Brain Injury
TTY.....	TeleTypeWriter (phone system for individuals who are deaf)
VI.....	Visually impaired

Glossary

Advocate	Someone who takes action to help someone; also, to take action to help someone.
Allergist	Doctor specializing in diseases of the immune system, including allergies.
Alternative Dispute Resolution	A free impartial panel that aides in settling disagreements between parents and district personnel.
Apgar	A method of evaluating the overall well-being of the newborn infant, done at 1 minute and 5 minutes after birth.
Appeal	To make a request for a change of a decision.
Assessment	Collecting information about a child's social, psychological, and educational needs by observing, testing, collecting, and analyzing data.
At Risk	A term used to describe children who have, or could have, developmental problems that may affect learning.
Audiology	The study of hearing problems.
Autism	A developmental disability appearing in children, usually by the age of 3, characterized by disturbances in communication, unusual social behavior, and abnormal responses to sensations.
Behavior Disorder	Aggressive, unmanaged behavior of a child that interferes with daily activities, development, or learning skills.
Community Advisory Committee (CAC)	A group of parents and special education administrators mandated by law which advises school boards and administrators about special education programs.
Cerebral Palsy (CP)	A group of conditions characterized by nerve & muscle problems (awkward gait, motor problems, speech difficulties) caused by damage to the brain.
Case Management	The coordination of services, usually performed by a professional working with the family.
Cochlear Implant	A device implanted in the inner ear that stimulates the hearing nerve.
Cognition	Thinking skills.
Communication Handicap	A difficulty with receptive (understanding) language or expressive (speaking) language.
Confidentiality	A guarantee that personally identifiable information about a child or family remains private and may only be shared among agencies with written permission of the parent.

Developmental Delay	A general term used to describe children who cannot perform the same skills that other children of the same age can usually do.
Developmental History	Recording the age at which a child has reached developmental milestones (crawling, walking, etc.)
Disability	The result of any physical or mental condition that affects or prevents one's ability to develop, achieve, and/or function at a normal rate.
Due Process	Procedures established to protect a child's right to entitled services.
Early Intervention	Services and programs for infants and young children who have special needs.
Eligibility	Determination of whether a child qualifies for services based on meeting established criteria.
Entitlement	The legal right to certain services and benefits.
Evaluation	The collection of information about a child's learning needs, strengths, and interest.
Fine Motor Skills	Use of the hand or small muscle group.
Free and Appropriate Public Education (FAPE)	A guarantee, through IDEA, that students with disabilities will be educated free of charge.
Geneticist	Specialist in the study of heredity.
Gross Motor Skills	Use of large muscle groups.
Heredity	The transmission of genetic characteristics from parents to children.
Hydrocephalus	An abnormal accumulation of fluid in the brain that leads to enlargement of the head.
Hypertonic	Increased muscle tone; greater than normal tension.
Hypotonic	Decreased muscle tone; lesser than normal tension.
Inclusion	Total integration of a child with disabilities into all activities of a general education program.

Individualized Education Program (IEP)	A written document that states a child's current level of educational performance, specific annual goals and short-term instructional objectives, and appropriate services needed to meet the goals.
Individualized Family Service Plan (IFSP)	A written plan for an infant or toddler and the family documenting the level of development, strengths and needs, major goals or outcomes expected, services needed, date of the next evaluation, and the starting date.
Individualized Program Plan (IPP)	Service plan originated by a regional center.
Informed Consent	A parent's written permission to assess their child, to provide services for the child, or to place the child in special education.
Intake	The process through which a determination is made by an agency for eligibility for services.
Integration	Joining of two groups previously separated, as in disabled and non-disabled children in a school or community setting.
Language Delay	Lag in the development of a child's ability to use or understand language.
Learning Disability	Problems using language, memory, concentrating, following instructions, reading, calculating, or learning through listening or looking.
Least Restrictive Environment (LRE)	An education setting that provides a child with disabilities the chance to work and learn to the best of his or her ability and which provides as much contact as possible with children without disabilities.
Mainstreaming	Placing children with disabilities in regular education classroom for specified period of time.
Mediation	Formal intervention between parents and agencies to achieve reconciliation, settlement, or compromise.
Mental Retardation	Delay in a child's ability to learn and function independently; can be mild, moderate, severe, or profound.
Mobility	Movement.
Multi-Handicapped	A child with two or more disabilities.
Neonatologist	Doctor specializing in care of newborns.
Occupational Therapy	Treatment of children to help improve fine motor skills and every day tasks.

Ophthalmologist	Doctor specializing in diseases or injuries of the eye.
Optician	Specialist in fitting glasses or contact lenses.
Optometrist	Specialist in examining the eye and related structures to determine the presence of visual problems or disease.
Orientation and Mobility	Training children with visual impairments to know their position in space and be able to move safely from place to place.
Orthopedic Handicap	A physical disability.
Orthopedist	Doctor specializing in diseases and injuries to muscles, joints and bones.
Pediatrician	Doctor specializing in the treatment and management of childhood diseases and problems.
Physical Therapy	Treatment of children to help improve gross motor activities.
Psychiatrist	Medical doctor specializing in the diagnosis and treatment of psychological, emotional, behavioral, and developmental problems.
Psychologist	A specialist who administers psycho-educational tests; may also diagnose and treat social, emotional, psychological, or behavioral problems.
Referral	A recommendation for assessment to determine if a specialized service is required and at what level.
Related Services	Also known as Designated Instruction and Services (DIS). Refers to all services required by a child with a disability to benefit from public education (speech therapy, audiology, physical therapy, occupational therapy, etc.)
Reverse Mainstreaming	Placing non-disabled children in special education classrooms to play and learn with children who have disabilities.
Self-Help Skills	Skills needed for feeding, dressing, and toileting.
Social Skills	Skills needed by children to get along with adults and other children at home, in school, and in community settings.
Social Worker	A specialist in providing and/or coordinating services for individuals and families experiencing social or emotional problems; may also provide treatment for social or emotional problems.
Special Education	Specially designed instruction and services.

Speech and

Language Therapy A program to improve and correct speech and/or language problems.

Time Line

The time within which entitled and mandated services must be provided; also prohibits being put on waiting list for any service to which you have a right.

Transition

A change from one program or situation to another (as hospital to home or from an infant program to preschool). Also refers to planning for students leaving school in preparation for adult life.