Parent Handbook
For
Special Education

Steve Collins, SELPA Director

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

This handbook was written 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 ensure 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) 307-4630 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) 231-1445.

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/her 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 Success Team, or you may send a request for an assessment to the Special Education Department.

What is a Student Success 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.

What is Response to Intervention (RtI)?

RtI is a three-tiered intervention model available to all students in general education. It is not a special education function. Students identified for additional interventions are identified through a wide variety of measures including STAR testing, teacher assessments, observation and consultations with parents. RtI is designed to work with the SST for students who may need more intensive supports for a longer period of time. At the first level, interventions are typically those implemented in the general education classroom by the classroom teacher. These interventions are for specific, targeted periods of time and may include accommodations and modifications to the general education program. Students who demonstrated a continued need for more interventions are placed at Level Three. At that point, the SST may discuss a possible referral for assessment for Special Education. However, even at Level three, school-site interventions may preclude a special education referral.

What is a Learning Center?

Learning Centers are areas designated by elementary schools where a team of teachers, usually comprised of at least one Special Education Teacher, Special Education Aides, and Related Service Providers, diagnose and assess students recommended through the SST and also through Response to Intervention. The assessments determine what additional tutoring and supports students may need in specific skill areas. Students placed in Learning Centers may be general education students and/or Special Education students. The amount of time a student spends in the Learning Center varies with each individual student. The goal of a Learning Center
is to target and remediate areas of weakness and thereby support the student at an earlier stage in their education and also reduce the number of referrals for placement in special education.

**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 services 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 Audio-logical 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 a special education program that is offered in the district?

Yes, contact a Program Specialist/Administrator in the Special Education Department (307-4641 middle & high school or 307-4640 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 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 an 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 PROGRAM

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) 231-1445 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
- 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:

Darlene Almeida, Program Administrator
Cameron School
(510) 231-1445

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 Success 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 307-4630. 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 disabling condition, by itself, does not make a child eligible for the provision of special education services. The disabling 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
- Intellectual Disability
- 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 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 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.

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 also indicates 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**

Program Specialists 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 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 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. Severely handicapped students include those who are hard of hearing, deaf, have visual impairment, orthopedic impairment, emotional disturbance, autism, below average intellectual functioning, 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 statewide assessments 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 statewide assessments with necessary accommodations as stated in their IEPs.

For middle and high school students in the RSP program the special education department is implementing a collaborative model for the core subject areas. Special education students who are on a diploma track will be enrolled in general education and core subject areas classes with support such as tutorial or study skills class. This is also referred to as “push-in” model. Several high schools have fully implemented the model for specific subject areas.
Full Inclusion

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.

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 aid dealer, etc. This also includes class presentations, hearing aid 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.

Home Instruction

Home instruction is provided to students who are temporarily unable to attend a regular or more intensive school program. Special Education services are provided by qualified teachers and service providers according to the students individualized needs determined in the IEP. The goal of this program is to allow students to continue to access instruction, services and supports in order to help transition the student back into a regular school program. Parents must oversee all instruction and are a very important part of the success of this program.

Continuation High Schools

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 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.

Educationally Related Mental Health Services (ERMHS)

Educationally related mental-health services are counseling/consultation services that are needed in order for a student to benefit from his/her IEP. They are to be tied to specific social/emotional/behavioral goals in the IEP. These services are designed in a tiered approach similar to Response to Instruction and Intervention (RtI2) and Positive Behavior Interventions and Supports (PBIS). School staff use progress monitoring data to determine if interventions are producing the desired results. A variety of reasons exist for including educationally related mental health services in an IEP. Each decision must be based on sound clinical judgment and the student’s level of functioning. A successful IEP intervention is measured by the student’s progress toward the mental health IEP goal, which should directly relate to the educational impairment brought on by the identified disability. In some cases, students may not be willing to participate in these services, have difficulty with transitions or have special needs that interfere with their ability to benefit. In many of these cases; push-in supports and behavioral consultation are more appropriate than pull-out 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 exist, 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.
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/her 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. These 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 people who work for agencies.

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 principles 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 WCCUSD at (510) 307-4630, or write the Special Education Department:

Pupil Services Center  
2465 Dolan Way  
San Pablo, California 94806.

You may want to request a Solutions Panel through Alternative Dispute Resolution, (see section on page 33) or request a fair hearing by writing the State Superintendent of Public Instruction:

California 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) 486-5555  
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 links 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 links 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 Vista Hills 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) 231-1432

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

RCEB Transition Task Force
2151 Salvio St. #365
Concord, CA 94520
(925) 691-2425
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) 307-4651.
Graduation Requirements for Students Enrolled in Special Education

High School Diploma

In order to receive a high school diploma, all students must fulfill course requirements determined by the West Contra Costa Unified School District. In addition to those requirements, students must take the California High School Exit Exam.

Students with Individual Education Plans who are on graduation track are required to take the exam once during tenth grade. An exemption is currently in place allowing special education students, who do not pass the CAHSEE but do complete the required coursework, to receive a high school diploma.

Students who do not pass are strongly encouraged to continue to take the CAHSEE to achieve a passing score.

You are encouraged to contact your child’s program specialist if you have questions.

Certificate of Completion

Students who are enrolled in special day classes which focus on functional academics and life skills, will receive a Certificate of Completion instead of a high school diploma. Students on a certificate track are not required to take the California High School Exit Exam.

These students are eligible to receive educational services until age 22. For more information see the Transition section of this handbook.
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.
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.

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) 307-4641
Special Education Department

Pupil Services Center front office .................................................. 307-4630
Special Education Local Plan Area (SELPA) Director ................. 307-4630
Special Education Director ............................................................ 307-4641

Special Education Administrators
Secondary .......................................................................................... 307-4641
Non-Public Schools ......................................................................... 307-4640
TEP/Mental Health .......................................................................... 307-4640
Early Intervention ........................................................................... 231-1445
Transition ......................................................................................... 231-1431

Program Specialists
Middle/High School ........................................................................ 307-4641
Elementary ......................................................................................... 307-4640

Transition Specialist ........................................................................ 307-5309
Adaptive Physical Education ............................................................ 307-4660
Assistive Technology ....................................................................... 307-4524
Hearing Impaired .............................................................................. 307-4630
ext. 26718
Occupational Therapy ....................................................................... 307-4648
Psychology ........................................................................................ 307-4643
Speech ................................................................................................ 307-4646
Transportation ................................................................................... 307-4645
Visually Impaired ............................................................................... 307-4642
504 Coordinator ............................................................................... 307-4651
Parent Liaison ................................................................................... 307-4669
Resource Parents .............................................................................. 307-4634
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.dhcs.ca.gov/services/ccs/pages/default.asp/

× Child Health & Disability Prevention Program (CHDP)……………… (800) 696-9644 or
  Provides preventive health care for children of low-income families or in foster care.
  www.cchealth.org/services/childhealth
  or (925) 313-6150

× Contra Costa County Department of Employment & Human Services…………………………………………………………….. Hercules – (510) 262-7700
  Financial assistance, food stamps, Medi-Cal, IHSS, for low income families.
  Richmond- (510) 412-3000

× 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.

× Regional Center of the East Bay Concord Office Oakland Office (new intakes)…………………………………………………. (925) 798-3001
  Evaluation, case management, and purchase of services for clients with developmental disabilities. www.rcrb.org
  (510) 383-1200

× 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.
Resources

Special Programs

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

- **Blind Babies Foundation** ................................................................. (510) 446-2229
  Consultation & home visits. www.blindbabies.org

- **CARE Parent Network** ................................................................. (800) 281-3023
  Information, resources, training, and parent-to-parent support.
  www.careparentnetwork.org

- **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)** ............... (510) 343-6670
  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, and services for children.
  www.dsconnection.org

- **East Bay Learning Disabilities Association**
  Monthly meetings, workshops and newsletter. www.ncebLDA.org

- **Easter Seals** .................................................................................. (925) 849-8999
  Early intervention services. www.bayarea.easterseals.com

- **Epilepsy Foundation Northern California** ................................. (800) 632-3532
  Information, referral and support groups.
  www.epilepsynorcal.org

- **George Mark Children’s House** ..................................................... (510) 346-4624
  Provides palliative care to children and support to their families.
  info@georgemark.org
• 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.

• Support for Families of Children With Disabilities ............................... (415) 282-7494
  A non-profit for families with children with disabilities or special healthcare needs. Events and services provided.

• Through the Looking Glass ................................................................. (510) 848-1112
  Parent training, counseling and support groups; adaptive equipment for parents with disabilities. www.lookingglass.org

• United Cerebral Palsy (UCP) ................................................................. (510) 832-7430
  Programs for individuals with cerebral palsy. www.ucp.org

• West Contra Costa Unified School District Resource Parents ............... (510) 307-4634
  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) 231-1445
  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) 307-4669
  Providing families with school district and community resources, parent exchange boards, lending library, disability information and support.

• Parents Helping Parents ................................................................. (408) 727-5775
  Provide information, training, resources, technical assistance and advocacy for parents of children with disabilities.
  www.php.com

After School Programs
  Each of the following afterschool programs are vendored through the Regional Center of the East Bay.

• City of Richmond Disabled Persons Recreation Center ............... (510) 620-6814
• George Miller Center After School Program ........................... (510) 374-3981
• NY Learning Center ................................................................. (510) 236-2146
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 County Children’s Mental Health Services……………..(888) 678-7277**
  Counseling for children and families. Parent support groups available.
  Call Family Involvement Coordinator @ 925-646-5122.

- **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.

- **East Bay Agency for Children …………………………………………. (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 Clinic……………………………………………(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.
  www.cocokids.org

- **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.
  www.bacn.info
Recreation

- **Aquatics (SNAP)**.................................................................(510) 527-0446x3
  Special Needs Aquatic Program, (SNAP); individual and small group sessions ranging from 30 to 60 minutes. or (510)495-4102
  Contact Dori Maxon.  snapkids.net

- **Albany USD Aquatics Center**.............................................(510)559-6640
  Individual and group adaptive swim lessons

- **Baseball**.............................................................................(510) 758-4715
  Challenger Little League, for boys and girls 6-17 years.  Call Pinole-Hercules Little League.

- **Special Olympics Northern California**..............................(925) 944-8801
  For children 6 and over. Activities include swimming, soccer, track and field, bowling, basketball.
  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

- **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 Studios...........................................................(818) 622-3735
  Great America............................................................(408) 988-1800
  Gilroy Gardens..............................................................(408) 840-7100
  Six Flags Discovery Kingdom............................................(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.  Fridays, 5:00 p.m. – 5:45 p.m.  $6.00 drop in fee includes skates.
  http://www.oaklandice.com
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, camperships, 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.
  www.ndgw.org

- **Avery Fuller Children’s Center** .................................................(415) 561-6540
  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)
  People who cannot afford medication may be helped if they need one of the qualifying prescription drugs: www.rarediseases.org

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.
ACRONYMS

SPECIAL EDUCATION ACRONYMS

AE  Age Equivalency
APE  Adaptive Physical Education
AB  Assembly Bill (state legislation), Adaptive Behavior
ADD  Attention Deficit Disorder/Auditory Discrimination in Depth Program
ADHD  Attention Deficit Hyperactive Disorder
ADE  Average Daily Attendance
AU  Administrative Unit of the SELPA
AUT  Autism
BD  Behavior Disorder
BIP  Behavior Intervention Plan
CA  Chronological or Calculated Age
CAC  Community Advisory Committee/California Administrative Code
CAPA  California Alternate Performance Assessment
CBA  Curriculum-Based Assessment
CBE  Children with Behavioral and Emotional Difficulty
CBI  Community-Base Instruction
CBM  Curriculum-Based Measurement
CCR  Coordinated Compliance Review/California Code of Regulations
CCS  California Children Services
CDE  California Department of Education
CFR  Code of Federal Regulations
CH  Communicatively/Communication Handicapped
COE  County Office of Education
DB  Deaf/Blind
DC  Developmental Center
DHH  Deaf and Hard of Hearing
DIS  Designated Instruction and Services
EC  Education Code (state)
EHA  Education of the Handicapped Act (PL 94-142)
ESL  English as a Second Language
ESY  Extended School Year
FAPE  Free and Appropriate Public Education
FES  Fluent English Speaker
FFH  Foster Family Home
FI  Full Inclusion
FTE  Full Time Equivalent
FY  Fiscal year
HI  Hearing Impaired
HOH  Hard of Hearing
HH  Hard of Hearing
ICF  Intermediate Care Facility
IDEA  Individuals with Disabilities Education Act (PL 94-142)
IEP  Individualized Education Program
IEPT  Individualized Education Program Team
IFSP  Individualized Family Service Plan
IHE  Institute of Higher Education (or institution)
IHP  Individualized Habilitation Plan
IIP  Individualized Implementation Plan
IPI  Individually Present Instruction
IPP  Individual Program Plan (used in other agencies)
IPSU  Instructional Personnel Unit (fiscal term)
ID  Intellectual Disability
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>ISP</td>
<td>Individual Service Plan</td>
</tr>
<tr>
<td>ITP</td>
<td>Individual Transition Plan</td>
</tr>
<tr>
<td>IWEN</td>
<td>Individual with Exceptional Needs</td>
</tr>
<tr>
<td>IWRP</td>
<td>Individual Written Rehabilitation Plan</td>
</tr>
<tr>
<td>LCI</td>
<td>Licensed Children Institution</td>
</tr>
<tr>
<td>LD</td>
<td>Learning Disabled; Learning Disability</td>
</tr>
<tr>
<td>LEA</td>
<td>Local Educational Agency</td>
</tr>
<tr>
<td>LEP</td>
<td>Limited English Proficient</td>
</tr>
<tr>
<td>LES</td>
<td>Limited English Speaking</td>
</tr>
<tr>
<td>LH</td>
<td>Learning Handicapped</td>
</tr>
<tr>
<td>LPA</td>
<td>Local Plan Area (same as SELPA)</td>
</tr>
<tr>
<td>LRE</td>
<td>Least Restrictive Environment (usually meaning educational environment)</td>
</tr>
<tr>
<td>LSH</td>
<td>Language, Speech and Hearing</td>
</tr>
<tr>
<td>LSS</td>
<td>Language and Speech Services</td>
</tr>
<tr>
<td>MA</td>
<td>Mental Age</td>
</tr>
<tr>
<td>MGM</td>
<td>Mentally Gifted Minor</td>
</tr>
<tr>
<td>MH</td>
<td>Multiply Handicapped</td>
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<tr>
<td>MS</td>
<td>Multiple Sclerosis</td>
</tr>
<tr>
<td>MTU</td>
<td>Medical Therapy Unit</td>
</tr>
<tr>
<td>NCLB</td>
<td>No Child Left Behind</td>
</tr>
<tr>
<td>NEP</td>
<td>Non-English Proficient</td>
</tr>
<tr>
<td>NPS</td>
<td>Non-Public School</td>
</tr>
<tr>
<td>NSH</td>
<td>Non-Severely Handicapped</td>
</tr>
<tr>
<td>OCR</td>
<td>Office of Civil Rights</td>
</tr>
<tr>
<td>OH</td>
<td>Orthopedically Handicapped</td>
</tr>
<tr>
<td>OHI</td>
<td>Other Health Impaired</td>
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<tr>
<td>OI</td>
<td>Orthopedically Impaired</td>
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<tr>
<td>OMH</td>
<td>Other Multiple Handicapped</td>
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<tr>
<td>OSEP</td>
<td>Office of Special Education Programs (US)</td>
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<tr>
<td>OSERS</td>
<td>Office of Special Education and Rehabilitative Service</td>
</tr>
<tr>
<td>OT/PT</td>
<td>Occupational Therapy/Physical Therapy</td>
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<tr>
<td>PE</td>
<td>Physical Education</td>
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<tr>
<td>PH</td>
<td>Physically Handicapped</td>
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<tr>
<td>PKU</td>
<td>Phenylketonuria</td>
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<tr>
<td>PL</td>
<td>Public Law</td>
</tr>
<tr>
<td>PT</td>
<td>Physical Therapy/Precision Teaching</td>
</tr>
<tr>
<td>PTA</td>
<td>Parent Teacher Association</td>
</tr>
<tr>
<td>RIS</td>
<td>Requires Intensive Services (used to distinguish preschool students)</td>
</tr>
<tr>
<td>RLA</td>
<td>Responsible Local Agency</td>
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<tr>
<td>ROC</td>
<td>Regional Occupational Center</td>
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<tr>
<td>ROP</td>
<td>Regional Occupational Program</td>
</tr>
<tr>
<td>RS</td>
<td>Resource Specialist</td>
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<tr>
<td>RSP</td>
<td>Resource Specialist Program</td>
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<tr>
<td>RT</td>
<td>Recreational Therapist/Recreational Therapy</td>
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<tr>
<td>SB</td>
<td>Senate Bill (state legislator)</td>
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<tr>
<td>SD</td>
<td>Standard Deviation</td>
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<tr>
<td>SDC</td>
<td>Special Day Class</td>
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<tr>
<td>SDE</td>
<td>State Department of Education</td>
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<tr>
<td>SDL</td>
<td>Severe Disorder of Language</td>
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<tr>
<td>SE</td>
<td>Standard Error</td>
</tr>
<tr>
<td>SEA</td>
<td>State Educational Agency</td>
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<tr>
<td>SEACO</td>
<td>Special Education Administrators of County Office</td>
</tr>
<tr>
<td>SED</td>
<td>Seriously Emotionally Disturbed; Special Education Division</td>
</tr>
<tr>
<td>SELPA</td>
<td>Special Education Local Plan Area</td>
</tr>
<tr>
<td>SEM</td>
<td>Standard Error of Measurement</td>
</tr>
<tr>
<td>SH</td>
<td>Severely Handicapped</td>
</tr>
<tr>
<td>SIP</td>
<td>School Improvement Plan</td>
</tr>
<tr>
<td>SLD</td>
<td>Severe Learning Disability</td>
</tr>
<tr>
<td>SLH</td>
<td>Speech, Language, Hearing</td>
</tr>
<tr>
<td>SM</td>
<td>Socially Maladjusted</td>
</tr>
<tr>
<td>Acronym</td>
<td>Description</td>
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<tr>
<td>SPI</td>
<td>Superintendent of Public Instruction</td>
</tr>
<tr>
<td>S-R</td>
<td>Stimulus Response</td>
</tr>
<tr>
<td>SSC</td>
<td>School Site Council</td>
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<tr>
<td>SSI</td>
<td>Supplemental Security Income</td>
</tr>
<tr>
<td>SSPI</td>
<td>State Superintendent of Public Instruction</td>
</tr>
<tr>
<td>SSR</td>
<td>Support Service Ratio</td>
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<tr>
<td>SSS</td>
<td>State Special School</td>
</tr>
<tr>
<td>SST</td>
<td>Student Study Team</td>
</tr>
<tr>
<td>TB</td>
<td>Tuberculosis</td>
</tr>
<tr>
<td>TEP</td>
<td>Transitional Educational Placement</td>
</tr>
<tr>
<td>TDD</td>
<td>Telecommunication Device for the Deaf</td>
</tr>
<tr>
<td>TTY</td>
<td>Teletypewriter (connected to a telephone)</td>
</tr>
<tr>
<td>USC</td>
<td>United States Code</td>
</tr>
<tr>
<td>VE</td>
<td>Vocational Education</td>
</tr>
<tr>
<td>VH</td>
<td>Visually Handicapped</td>
</tr>
<tr>
<td>VI</td>
<td>Visual Impairment, Visually Impaired</td>
</tr>
<tr>
<td>UR</td>
<td>Unit Rate</td>
</tr>
</tbody>
</table>
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, development 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 and 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.
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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</thead>
<tbody>
<tr>
<td>Cochlear Implant</td>
<td>A device implanted in the inner ear that stimulates the hearing nerve.</td>
</tr>
<tr>
<td>Cognition</td>
<td>Thinking skills.</td>
</tr>
<tr>
<td>Communication Handicap</td>
<td>A difficulty with receptive (understanding) language or expressive (speaking) language.</td>
</tr>
<tr>
<td>Confidentiality</td>
<td>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.</td>
</tr>
<tr>
<td>Developmental Delay</td>
<td>A general term used to describe children who cannot perform the same skills that other children of the same age can usually do.</td>
</tr>
<tr>
<td>Developmental History</td>
<td>Recording the age at which a child has reached developmental milestones (crawling, walking, etc.).</td>
</tr>
<tr>
<td>Disability</td>
<td>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.</td>
</tr>
<tr>
<td>Due Process</td>
<td>Procedures established to protect a child’s right to entitled services.</td>
</tr>
<tr>
<td>Early Intervention</td>
<td>Services and programs for infants and young children who have special needs.</td>
</tr>
<tr>
<td>Eligibility</td>
<td>Determination of whether a child qualifies for services based on meeting established criteria.</td>
</tr>
<tr>
<td>Entitlement</td>
<td>The legal right to certain services and benefits.</td>
</tr>
<tr>
<td>Evaluation</td>
<td>The collection of information about a child’s learning needs, strengths, and interest.</td>
</tr>
<tr>
<td>Fine Motor Skills</td>
<td>Use of the hand or small muscle group.</td>
</tr>
<tr>
<td>Free &amp; Appropriate Public Education (FAPE)</td>
<td>A guarantee, through IDEA, that students with disabilities will be educated free of charge.</td>
</tr>
<tr>
<td>Geneticist</td>
<td>Specialist in the study of heredity.</td>
</tr>
<tr>
<td>Gross Motor Skills</td>
<td>Use of large muscle groups.</td>
</tr>
<tr>
<td><strong>Heredity</strong></td>
<td>The transmission of genetic characteristics from parents to children.</td>
</tr>
<tr>
<td><strong>Hydrocephalus</strong></td>
<td>An abnormal accumulation of fluid in the brain that leads to enlargement of the head.</td>
</tr>
<tr>
<td><strong>Hypertonic</strong></td>
<td>Increased muscle tone; greater than normal tension.</td>
</tr>
<tr>
<td><strong>Hypotonic</strong></td>
<td>Decreased muscle tone; lesser than normal tension.</td>
</tr>
<tr>
<td><strong>Inclusion</strong></td>
<td>Total integration of a child with disabilities into all activities of a general education program.</td>
</tr>
<tr>
<td><strong>Individualized Education Program (IEP)</strong></td>
<td>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.</td>
</tr>
<tr>
<td><strong>Individualized Family Service Plan (IFSP)</strong></td>
<td>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.</td>
</tr>
<tr>
<td><strong>Individualized Program Plan (IPP)</strong></td>
<td>Service plan originated by a Regional Center.</td>
</tr>
<tr>
<td><strong>Informed Consent</strong></td>
<td>A parent’s written permission to assess their child, to provide services for the child, or to place the child in special education.</td>
</tr>
<tr>
<td><strong>Intake</strong></td>
<td>The process through which a determination is made by an agency for eligibility for services.</td>
</tr>
<tr>
<td><strong>Intellectual Disability</strong></td>
<td>Delay in a child’s ability to learn and function independently; can be mild, moderate, severe, or profound.</td>
</tr>
<tr>
<td><strong>Integration</strong></td>
<td>Joining of two groups previously separated, as in disabled and non-disabled children in a school or community setting.</td>
</tr>
<tr>
<td><strong>Language Delay</strong></td>
<td>Lag in the development of a child’s ability to use or understand language.</td>
</tr>
<tr>
<td><strong>Learning Disability</strong></td>
<td>Problems using language, memory, concentrating, following instructions, reading, calculating, or learning through listening or looking.</td>
</tr>
<tr>
<td><strong>Least Restrictive Environment (LRE)</strong></td>
<td>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.</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
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</tr>
<tr>
<td>Mainstreaming</td>
<td>Placing children with disabilities in regular education classroom for specified period of time.</td>
</tr>
<tr>
<td>Mediation</td>
<td>Formal intervention between parents and agencies to achieve reconciliation, settlement, or compromise.</td>
</tr>
<tr>
<td>Mobility</td>
<td>Movement</td>
</tr>
<tr>
<td>Multi-Handicapped</td>
<td>A child with two or more disabilities.</td>
</tr>
<tr>
<td>Neonatologist</td>
<td>Doctor specializing in care of newborns.</td>
</tr>
<tr>
<td>Occupational Therapy</td>
<td>Treatment of children to help improve fine motor skills and everyday tasks.</td>
</tr>
<tr>
<td>Ophthalmologist</td>
<td>Doctor specializing in diseases or injuries of the eye.</td>
</tr>
<tr>
<td>Optometrist</td>
<td>Specialist in examining the eye and related structures to determine the presence of visual problems or disease.</td>
</tr>
<tr>
<td>Orientation and Mobility</td>
<td>Training children with visual impairments to know their position in space and be able to move safely from place to place.</td>
</tr>
<tr>
<td>Orthopedic Handicap</td>
<td>A physical disability.</td>
</tr>
<tr>
<td>Orthopedist</td>
<td>Doctor specializing in diseases and injuries to muscles, joints and bones.</td>
</tr>
<tr>
<td>Pediatrician</td>
<td>Doctor specializing in the treatment and management of childhood diseases and problems.</td>
</tr>
<tr>
<td>Physical Therapy</td>
<td>Treatment of children to help improve gross motor activities.</td>
</tr>
<tr>
<td>Psychiatrist</td>
<td>Medical doctor specializing in the diagnosis and treatment of psychological, emotional, behavioral, and developmental problems.</td>
</tr>
<tr>
<td>Psychologist</td>
<td>A specialist who administers psycho-educational tests; may also diagnose and treat social, emotional, psychological, or behavioral problems.</td>
</tr>
<tr>
<td>Referral</td>
<td>A recommendation for assessment to determine if a specialized service is required and at what level.</td>
</tr>
<tr>
<td>Related Services</td>
<td>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.)</td>
</tr>
<tr>
<td>Reverse Mainstreaming</td>
<td>Placing non-disabled children in special education classrooms to play and learn with children who have disabilities.</td>
</tr>
<tr>
<td><strong>Self-Help Skills</strong></td>
<td>Skills needed for feeding, dressing, and toileting.</td>
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</tr>
<tr>
<td><strong>Social Skills</strong></td>
<td>Skills needed by children to get along with adults and other children at home, in school, and in community settings.</td>
</tr>
<tr>
<td><strong>Social Worker</strong></td>
<td>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.</td>
</tr>
<tr>
<td><strong>Special Education</strong></td>
<td>Specially designed instruction and services.</td>
</tr>
<tr>
<td><strong>Speech &amp; Language Therapy</strong></td>
<td>A program to improve and correct speech and/or language problems.</td>
</tr>
<tr>
<td><strong>Time Line</strong></td>
<td>The time within which entitled and mandated services must be provided; also prohibits being put on a waiting list for any service to which you have a right.</td>
</tr>
<tr>
<td><strong>Transition</strong></td>
<td>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.</td>
</tr>
</tbody>
</table>
Handy Hints for Parents

Preparing for the IEP Meeting

1. Setting Expectations
   a. Set high, but realistic expectations for your child
   b. Focus on your child’s strengths
   c. Keep an open mind and make a commitment to collaboration
   d. Listen to feedback
   e. Have a positive mindset and willingness to try new things
   f. Gather information about and with your child that you want to share with the team
   g. Examine the long-range goals you have set for your child and rethink those if necessary
   h. Consider annual goals that will have value for your child and your family, and which will help your child to accomplish his long range plans

2. Keep a notebook of your child’s records
   a. Evaluations
   b. Medical/Outside Reports
   c. IEPs
   d. Progress Reports
   e. Samples of Work

3. Review information on your child
   a. Progress reports
   b. Samples of work
   c. List your specific concerns or insights

4. Talk with your child
   a. What things are easy?
   b. Favorite Activities?
   c. What things are hard?

5. Is your child involved in general education?
   a. How are your child’s special needs addressed in the class?
   b. What type of support do you think is needed?
   c. What accommodations or modifications if any are needed?

6. Determine if your child should attend the IEP
   a. Prepare child for meeting
   b. Help child know how they might share their feelings about what is proposed
7. **Do a positive profile**
   Answer the following questions about your child as a way to prepare for the IEP meeting.
   a. Who is _______? (Describe your child, including such information as place in the family, personality, likes and dislikes.)
   b. What are _______’s strengths? (Highlight all areas where your child does well, including school, home, community, and social settings.)
   c. What are _______’s successes? (List all successes, no matter how small.)
   d. What are _______’s greatest challenges? (List the areas where your child has the greatest difficulties.)
   e. What are _______’s needs? (List the skills your child needs to work on and the supports he or she needs.)
   f. What are our dreams for _______? (Describe your vision for your child’s future, including short-term and long-term goals).
   g. Other helpful information. (List all relevant information, including health-care needs that have not already been described above.)

8. **Write down things you feel must be included in the IEP.**

9. **Ask teachers to share their ideas about your child’s program ahead of time.**

**The IEP Document**

The IEP lays out the school’s commitment of special education and related services to be provided by the school district.

1. **Consideration factors**
   a. The strengths of your child
   b. Your concerns for improving your child’s education
   c. The results of your child’s initial evaluation or most recent evaluation
   d. The academic, developmental and functional needs of your child

2. **Special factors such as:**
   a. Positive behavioral interventions
   b. Limited English proficiency
   c. Braille
   d. Language communication needs
   e. Assistive technology needs

3. **Present levels of performance**
   a. Establishes the starting point, or baseline, that will be used to develop the IEP’s measurable annual goals

4. **Measurable Annual Goals**
   a. Designed to meet your child’s needs that result from his or her disability
   b. Written only for areas of need that arise from your child’s disability
   c. Must be measurable and must relate directly to the information in the present level of performance
5. **Short-term objectives**  
   a. For students who participate in alternate assessments  
   b. Measurable intermediate step between the baseline and the annual goal

6. **Progress Reporting**  
   a. You will receive regular progress reports  
   b. The reports will give progress toward annual goals and involve objective measures

7. **Services/Programs**  
   a. Date services will begin and end  
   b. How often the services will be provided  
   c. The location  
   d. The duration - period of time

8. **Participation in General Education**  
   a. The IEP team will describe how much time your child will spend outside of the regular education classroom and away from students who do not have disabilities

9. **Accommodations and Assessment Participation**  
   a. Ask about the test that your child will take and how the results will be used  
   b. If accommodations are to be recommended will they be used during instruction

10. **Transition**  
    a. If your child is between the ages of three and five, discuss with the team how your child will be transitioned to kindergarten, what type of support is needed  
    b. If your child will turn 16 years of age during this IEP period what transition plans are recommended  
    c. Take an active role by working with the school to plan the supports and services that will lead to success after leaving high school  
    d. Help your child to define goals and aspirations for life after high school

**At the meeting**

1. **Ask questions**  
   a. If you don’t understand ask for an explanation  
   b. If you disagree with a comment or have a question ask for backup information that supports the person’s statement  
   c. If you have different information be sure to share it  
   d. Ask for clarification if you don’t understand the present level of educational performance statement, ask for the date that supports the statement  
   e. Ask for where your child is in meeting standards and how his/her goals support learning in this area  
   f. Stay with one area until you feel the goal and objectives address your child’s needs  
   g. If more data needs to be collected to write a functional level or goal ask to reconvene when that information is available
2. What can I do if we don’t agree?
   a. If the team cannot agree on a particular item add it to your list and suggest coming back to it later
   b. Avoid getting stuck or into debating
   c. Communicate with the team in a reasonable and calm way
   d. Keep emotions under control
   e. Be respectful of each other even when you don’t agree

*Implementing the IEP*

1. Families and schools working together
   a. Build a Dialogue with the School
   b. Work together as part of a team
   c. Focus on the strengths and gifts of your child
   d. Build relationships with each other
   e. Adapt the curriculum to meet your child’s individual needs
   f. Vary teaching methods
   g. Be flexible and be willing to take occasional risks

*If I have a problem that I can’t resolve, what do I do?*

1. Check and organize your facts carefully
   a. Determine the solution
   b. Determine who can remedy the problem
   c. Determine the process or procedure
   d. Follow the process
   e. Focus on the solution

2. District Remedies at the School Site Level
   a. Start with the teacher
   b. Schedule a time to meet
   c. Be specific about your concerns
   d. Focus on student/program needs
   e. Know what response you’re seeking
   f. Be flexible and open to creative solutions
   g. Set a timeline for response
   h. Give feedback

3. Next Steps
   a. Site Administrator
      • Safety
      • Communication/Personnel
   b. Psychologist
      • Behavior
      • Program
      • Placement
c. Program Specialist
   - Briefly outline concerns
   - Focus on program/not responsibilities
   - State the remedies desired

d. Director of Special Education
   - Outline chain command followed
   - Outline concerns
   - State desired remedy

e. SELPA Director
   - Be prepared to provide facts:
     - Students name and date of birth
     - School of attendance and placement
     - IEP (for reference)
     - Specific concern
     - Efforts to resolve concern
     - Solution sought

Determine appropriate resolution process

*Remember: Be sure to respond to the IEP notification sent to you! You are invited and encouraged to attend as a member of the team to develop, review, and/or revise your child’s IEP. You may reschedule the meeting. If you need to do so, notify the school as soon as possible. Have a couple of alternative dates ready when you call.*