

### Section 3

## Special Education Programs and Services

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## Special Education Programs

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## Continuum of Services and Placements

The Howard County Public School System provides a continuum of special education services and alternative placements for all students with disabilities.

Decisions regarding the appropriate service and placement for a student with disabilities are made by the IEP team in compliance with the requirement for the least restrictive environment. That is, to the maximum extent appropriate, students with disabilities are educated with students who are not disabled. Special classes, separate schooling, or other removal of students with disabilities from the regular educational environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary services cannot be achieved satisfactorily. Unless the IEP of a student requires some other arrangement, students are educated in the school or typical early childhood setting that the student would attend if not disabled.

The continuum of services and placements available to students with disabilities ranges from indirect services in a student's home school to intensive services in non-public schools and institutions.

**Consultation** or indirect service can accomplish the following:

- ◆ Provide the general educator with guidance from the special education teacher on student IEP goals and accommodations, appropriate strategies for instruction, behavior management, data collection, and observation and feedback in the general education setting
- ◆ Facilitate service delivery through ongoing communication between general and special educators and related service providers
- ◆ Provide assistance in completing a functional behavioral assessment (FBA) and developing a behavioral intervention plan (BIP) to address areas of concern.

Some students may need more supports and services in order to access the general curriculum but are still able to learn in the general education setting. The **direct service delivery model within the general education classroom** can provide the following:

- ◆ Direct special education instruction within the least restrictive environment of the general education classroom through team teaching, co-teaching, and collaborative instructional models
- ◆ Direct support for individual students by the special education teacher or paraeducator by modifying achievement standards or providing modifications to the general education curriculum and assessments based on the IEP of each student
- ◆ Individualized or small group instruction to meet the academic and behavior needs of the student, either within the general education classroom or with pull-aside resource services for specific skill development.

If the student's academic or emotional needs have a significant impact on his or her ability to learn in the general education environment, the individualized education program (IEP) team may determine that the student requires a more restrictive learning environment. **Direct service outside the general education classroom** in the student's home school can provide the student with the following:

- ◆ Direct intensive or multi-sensory instruction utilizing specialized strategies and techniques in a small group, self-contained environment
- ◆ More specific skill training through interventions for academic skill deficits or services in social, emotional, and behavioral areas
- ◆ Direct instruction and support to address behavioral difficulties that interfere with the student's learning or the learning of other students.

Students may receive **direct service in both the general education and special education classrooms**.

A limited number of students may need a **regional program** within a comprehensive school or a **separate day facility**. Based on the unique needs and the IEP of the student, the local school or central office IEP team determines the appropriate placement.

The nature and severity of the student's disability may necessitate more intensive resources and services if there is a significant impact on student achievement. The student may require a more therapeutic, segregated setting in order for a student to receive an appropriate educational program. For those students whose educational needs require services beyond those of the county's regional or separate day facilities, the HCPSS utilizes Maryland State Department of Education approved **nonpublic schools**.

➡ Additional information regarding the continuum of services may be obtained from Special Education Teachers at the local schools or Resource Teachers (410-313-6837) and Instructional Facilitators (410-313-5354) for the Department of Special Education.

## **Early Intervention Services**

### **Early Beginnings Program**

The Early Beginnings Program serves children, birth to three years of age, who have a developmental delay or are at risk for developmental delay. The program is part of the Howard County Infants and Toddlers Program (HCITP), a coordinated, multidisciplinary, interagency system of services for infants, toddlers, and their families. Other agencies participating in the HCITP are the Howard County Health Department and the Howard County Department of Social Services.

Early Beginnings Program staff members use a routines-based and activities-based intervention model to help parents learn and use techniques that will facilitate their children's development. Parents are active participants in developing *Individualized Family Service Plans* (IFSPs) and implementing the intervention programs.

Early intervention services provided through the Early Beginnings Program or the Howard County Infants and Toddlers Program include assistive technology devices and services; audiology; family training, counseling, and home visits; health services; medical services only for diagnostic or evaluation purposes; nursing services; nutrition services; occupational therapy; physical therapy; psychological services; service coordination; social work services; special instruction; speech-language pathology; transportation and related costs; and vision services. These services are provided in the child's home, at school, in child-care settings, or in community environments.

### **Preschool-Kindergarten Program**

The Preschool-Kindergarten Program serves children, three through five years of age, who have a disability or developmental delay. Three and four year old children receive special education and related services in four or five-day preschool classes with typically developing peers. These preschool classes are included in Regional Early Childhood Centers located at elementary schools throughout the county. Kindergarten age children generally receive services in team taught general education kindergarten classes.

Team members provide instruction and therapy services using techniques that combine sound principles of early childhood special education, developmentally appropriate practices, and applied behavioral analysis. Active learning, child choice, highly motivating materials, and positive behavioral supports are key to facilitating children's growth in developmental areas. Personalized programs are developed by school team members and parents to accelerate the development of each child's language, literacy, mathematics, social interaction, and motor skills.

### **Multiple Intense Needs Classes**

Toddlers, preschoolers, and kindergarten children who have moderate to severe delays in cognition, social interaction, communication, and behavior may receive services through Multiple Intense Needs Classes (MINC). These classes are located in Regional Early Childhood Centers throughout Howard County. Approximately five to six children with

disabilities and four to five typically developing children are included in each class. Toddlers typically attend the classes for 12.5-20 hours per week. Preschool age children typically attend school for an average of 28.5 hours per week. Children of kindergarten age typically attend a full day schedule.

The staff members in MINC classrooms use specialized methodologies including applied behavioral analysis and verbal behavioral analysis to help children develop skills. Instruction is embedded in identified routines and activities to provide multiple opportunities for the children to practice skills. Intensive structured teaching opportunities are provided for each child. Other instructional strategies may be selected based on the developmental level of the child; the child's learning style, strengths, and needs; and the skill or task to be learned.

Family members actively participate in the children's intervention programs. The focus of parent training is on using incidental teaching and family guided routines-based intervention. Family Intervention Specialists provide intensive training to families in implementing instructional and behavioral support plans.

### **Family Support Network**

Family Support Network Coordinators are available to provide information, support, and linkages to community resources for families of children from birth through five years of age. In addition, they coordinate a parent training program as well as a parent mentor program which links "experienced" parents of children with disabilities with those parents of children who are new to the programs.



Additional information regarding early intervention programs is available from the Instructional Facilitator for Early Intervention Services (410-313-7017).

## **Academic Life Skills Programs**

### **Elementary School**

Academic Life Skills (ALS) programs are located at most county elementary schools to enable students with disabilities to remain in their local school. In addition, regional programs for students with more intensive needs are located at:

- ◆ Gorman Crossing Elementary
- ◆ Pointers Run Elementary
- ◆ Thunder Hill Elementary
- ◆ Waverly Elementary
- ◆ West Friendship Elementary

The program is designed for students assessed with the Alternate Maryland State Assessment (Alt-MSA) and provides instruction and related services in a variety of settings to meet the needs of each student. Based on student needs outlined in the Individual Education Program (IEP), students receive their instruction in self-contained and/or general education classes with access to general education curriculum and extracurricular school activities as appropriate. Students participate in a typical elementary school experience with support and interventions as needed. Students are referred to the Academic Life Skills Programs through the school IEP team process, which includes the parents and representatives from the Department of Special Education and possible receiving schools.

### **Middle School**

Academic Life Skills programs are located at most county middle schools to enable students with disabilities to remain in their local school. In addition, regional programs for students with more intensive needs are located at:

- ◆ Lime Kiln Middle

The program is designed for students assessed with the Alternate Maryland State Assessment (Alt-MSA) and provides instruction and related services in a variety of settings to meet the needs of each student. Based on student needs outlined in the Individual Education Program (IEP), students receive their instruction in self-contained and/or general education classes with access to general education curriculum and extracurricular school activities as appropriate. Students participate in a typical middle school experience with support and interventions as needed. Students are referred to the Academic Life Skills Programs through the school IEP team process, which includes the parents and representatives from the Department of Special Education and possible receiving schools.

## High School

Academic Life Skills programs are located in each of the county high schools. In addition, regional programs for students with more intensive needs are located at Atholton High and Oakland Mills High. The ALS programs are designed for students assessed with the Alternate Maryland State Assessment (Alt-MSA) and provide instruction and related services in a variety of settings to meet the needs of each student. Based on student needs outlined in the Individual Education Program (IEP), students receive their instruction in self-contained and/or general education classes with access to general education curriculum and extracurricular school activities as appropriate. Preparation for transition for post high school is an integral part of each program. A transition plan is developed to meet the unique needs of each student as they prepare to exit high school and may include in-school work experience, work enclave, and work study as appropriate. Students participate in a combination of a typical high school experience along with transition services.

➤ Additional information regarding the Academic Life Skills Programs may be obtained from Instructional Facilitators (410-313-5354) for the Department of Special Education.

## Community Connection Program

The Community Connection Program is a community based post high school program located on the campus of Howard Community College. It is designed to assist students who will exit the school system with a certificate in their transition from high school to the world of work. Students in this program have typically completed at least four years of high school and at least one year of work experience. Students receive continued support in developing work related skills, self-advocacy, as well as seeking and maintaining a job. This program provides a safe environment in which to learn and practice the skills necessary for adult life.

Teaching and learning takes place in a natural environment and includes:

- ◆ C.A.S.T. (Community Access Skills Training)
- ◆ Personal Management
- ◆ Consumer Economics (money, banking, budgeting, and shopping)
- ◆ Self Determination and Social Awareness
- ◆ Recreation and Leisure
- ◆ Career/Vocational Skills
- ◆ Integrating students into the least restrictive environment- the community

➤ For more information or a copy of the brochure about the Community Connections Program, call 443-518-4479.



## **Programs for Students with Emotional Disabilities and Other Behaviorally Related Disabilities**

### **Regional Programs**

The Special Education Regional Programs for Students with Emotional Disabilities and Other Behaviorally Related Disabilities are located within comprehensive schools. This setting affords students the opportunity to demonstrate the generalization of academic and behavioral skills in a less restrictive setting while receiving direct instruction and positive behavioral supports in a more restrictive environment. The Regional Program assists each student with developing and systematically employing new behavioral strategies and social/emotional coping techniques to enable the student to return to a less restrictive educational setting. This setting allows students to access the general education curriculum while receiving specialized instruction as specified in each student's Individualized Education Program (IEP). The nature and severity of the student's disability, reflected in the IEP, requires a setting where direct specialized instruction to promote student learning behavior is necessary for academic performance.

### **Homewood Center**

The Homewood Center houses two distinct programs, each designed to meet the specific needs of individual students who have difficulty functioning in traditional classroom settings. The building is a state-of-the-art educational facility with a full complement of resources, technology, and teaching supports.

The **Bridges Program** is available for students who have been diagnosed with serious emotional disabilities or other disorders that require an academically stimulating program in small structured therapeutic setting. Students who are enrolled through the Central Education Placement Team (CEPT) are still considered part of their home school, while at the same time, receiving learning and therapeutic support as directed by the students' Individualized Education Programs (IEPs).

The mission of the Bridges Program is to provide a safe, therapeutic environment that can support students and enable them to return to a less restrictive setting. The program is for middle and high school students and is provide in a separate day center. Each student enrolled receives an individually planned course of study, and each student has an IEP that supports the placement in a separate day program.

Presently the staff of the Bridges Program consists of two full time psychologists, two social workers, four mental health technicians, six teachers and six instructional assistants. Maximum enrollment for the program is sixty students.

The **Gateway Program** is available for students with or without Individual Education Programs (IEPs). The program provides for an alternative education setting for students who have not been successful in the comprehensive middle or high school. Placement is made through the Central Admissions Committee (CAC). Students are considered part

of their home school. They receive learning and behavior support based on their individual needs. For many students with special needs (those that have Individual Education Programs), placement in the Gateway Program is considered a change of location for IEP services rather than a change in placement based on a student's IEP.

The Gateway Program is a nurturing, flexible program which is responsive to individual needs and meets the school system's academic guidelines. The classes are small, providing adult supervision and guidance throughout the school day with a high degree of integration of special education with non-disabled students. The instruction focuses on developing academic skills through the use of a variety of instructional techniques. Social, problem solving, and decision-making skills as well as anger management are also addressed. Students are monitored by the use of a behavior management system.

Regular communication is maintained with the parents or guardians and other professionals providing support to the student. When specified by the IEP, individual and small group counseling is available through the school psychologist and guidance counselor. In addition to classroom teachers and Instructional assistants, the Gateway Program has a full time psychologist, two social workers, and behavior support personnel.

➡ Additional information regarding the Programs for Students with Emotional Disabilities may be obtained from Instructional Facilitators (410-313-5354) for the Department of Special Education.

## **Cedar Lane School**

The Cedar Lane School is a separate public day school. The staff and facility at Cedar Lane School provides services to students experiencing significant and low incidence disabilities that the child's education team have determined interfere with instruction in a general education setting. As participants on their child's educational team, parents are seen as an integral part of the program and a resource for assisting with the educational process.

Students enrolled in Cedar Lane School participate in classroom groups based on chronological age that corresponds to general education students. The school is comprised of four levels: preschool, elementary, middle and high school. The Cedar Lane School has the advantage of sharing a campus with comprehensive elementary, middle, and high schools. Given this setting, the students are afforded the structure and educational support provided by a separate facility, while being offered the opportunity for interaction and education with age-appropriate, non-disabled children.

Cedar Lane School uses the Howard County Public Schools' Essential Curriculum, which is adapted to meet the specific needs of the students. Students attending Cedar Lane participate in statewide assessments through the Alternate Maryland State Assessment (Alt-MSA). Curriculum is also taught through a variety of practical means, including activities in school as well as in community settings. In addition to the county's approved curriculum for related arts, children at Cedar Lane participate in horticulture classes and office skills classes. While the student's individual goals might include development of daily living skills, independence, vocational skills, and social interaction skills, the curriculum is used to drive classroom instruction. Appropriate comprehensive related and support services are offered to children including physical therapy, occupational therapy, vision services, hearing services, speech-language therapy, and assistive technology.



Additional information may be obtained from the Principal of Cedar Lane School (410-888-8800) or on the school website, [www.hcpss.org/cedarlane/](http://www.hcpss.org/cedarlane/).

## Home and Hospital Teaching Program

The school system makes the Home and Hospital Teaching Program available, as part of the continuum of services, to provide instructional continuity for students who are unable to attend their regular school program of enrollment during times of:

- ◆ Convalescence;
- ◆ Treatment in medical institutions;
- ◆ Treatment in therapeutic treatment centers; as well as,
- ◆ Emotional crisis in which services are provided in the student's place of residence.

The services are available for medically ill students or for students whose emotional condition prevents them from participating in their current school program.

Students who are awaiting placement at an alternative school or in a special education program may not be placed on Home and Hospital as a placement. *This program is a short-term, instructional service mandated by state law with specific guidelines for program implementation and delivery.* During the period that students are unable to attend school, the education services enable students to continue their academic work and remain current with their peers.

For students with Individualized Education Programs (IEPs) who have an emotional condition, program services may not exceed 60 consecutive school days after the initial determination of eligibility by a licensed physician, psychiatrist, licensed psychologist, or certified school psychologist who must verify that the student's emotional condition prevents the student from attending school. This verification of the student's emotional condition must be considered by the IEP team.

For students who have been determined eligible to receive home and hospital instruction, the school-based IEP team develops an *Interim Alternative Education Setting (IAES) IEP*, using the student's current IEP. The IAES IEP contains appropriate goals and objectives for the student based on the student's current emotional or physical condition. The school-based IEP team will periodically review the student's progress (at least every 20 school days) while on Home and Hospital instruction to determine IEP progress as well as the student's ability to return to a less restrictive setting.

➡ Additional information may be found in this handbook in section 2 - .10 and in Appendix D. Questions may be referred to the Home and Hospital Coordinator (410-313-6653) in the Office of Student Services.

## **Vocational-Technical Education**

In the Howard County Public School System all students with disabilities are provided with the opportunity to explore or participate in vocational/technical programs. These programs are offered within the home school, the Career Academies or at the Community Connection Program at Howard Community College.

Vocational education enables students to develop the necessary knowledge, skills, and attitudes needed for immediate or future employment in an occupational field or cluster of closely related occupations. In elementary and middle schools, students will become aware of and explore different kinds of careers and work settings through age-appropriate activities. By graduation or exit from high school, students will have had numerous opportunities to learn first-hand about the world of work, ranging from job shadowing to school-based enterprises to structured career preparation activities that may include paid work experience.

### **Vocational Evaluation**

In the Howard County Public School System, the formal career and vocational evaluation process begins in the sixth grade with the development of a career folder by the guidance department. Portfolio development is encouraged. Interest inventories are available to all students via the guidance office and should be completed prior to high school course registration. Students entering high school who have IEPs that reflect a need for hands-on training or community-based placement may receive an ecological or situational assessment while enrolled in the Enclave, Work Study/Career Research and Development, or Community Connection Programs. In the year prior to exit or graduation, students may be referred to the Division for Rehabilitation Services (DORS). Those students who meet the criteria established by DORS may obtain a vocational assessment and career services. Some students, based on need, may also obtain formal vocational assessments from adult services agencies.

### **Work Study Program**

The Work Study Program is a structured, supervised, hands-on work experience, paid or unpaid, in a community-based setting that is directly related to the student's needs, vocational interests, and abilities as reflected in the IEP. Students may be either on a certificate or diploma track as described below:

- ◆ *Certificate-bound students* are typically introduced to a variety of half-day training sites beginning in the third year of high school with competitive employment prior to graduation or exit being the primary goal.
- ◆ *Diploma-bound students* may either receive Work Study services as an elective or while enrolled in the Career Research and Development Program. Diploma-bound students receiving Work Study services may be candidates for postsecondary education or enter directly into the work world.

*The purpose of the program* is to provide an opportunity for students to engage in activities related to IEP needs for transition services in the areas of employment, training, independent living, and community access. The following are performance goals that all Work Study students strive to accomplish:

- ◆ Develop self-confidence that will allow them to take advantage of employment opportunities
- ◆ Develop job finding and job keeping attitudes and skills
- ◆ Learn to accept supervisor feedback, both positive and negative
- ◆ Develop social skills necessary for competitive, supported, or sheltered employment
- ◆ Establish career goals
- ◆ Establish cooperative relationships with co-workers and employers
- ◆ Maintain attendance
- ◆ Follow school and employer rules and regulations
- ◆ Develop appropriate communication skills.

### **Work Enclave Program**

Work enclaves have been established to enable certificate-bound students, who may require a higher degree of supervision than is available in Work Study, to experience community-based vocational programming. Work enclave experiences recognize that a transition step is needed to bridge school and independent work experiences. Enclaves are group work sites supervised by special education personnel. Rather than teaching a specific skill, the attitudes and skills necessary to work independently are stressed. The attitudes and skills include the following:

- ◆ Taking directions from a variety of individuals
- ◆ Staying on task
- ◆ Increasing the amount of time on task while decreasing the amount of supervision
- ◆ Taking pride in one's work
- ◆ Getting along with individuals in the work place
- ◆ Seeking assistance when needed
- ◆ Using effective and socially appropriate communication skills.

*The intent of the program* is to give students an opportunity to sample several work enclave experiences, demonstrating their ability to transfer skills learned to different settings and, ultimately, to use the skills learned in an independent work experience. The decisions regarding the sampling of work enclave sites are determined based on the needs and interests of the individual students.

➡ Questions regarding the Work Enclave, Work Study, and Community Connection Programs may be referred to the Program Head for Work Study/Transition (410-313-5640).

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## **Adapted Physical Education Procedures**

Adapted physical education services are provided in the Howard County Public School System for students receiving special education services who qualify for specialized instruction in gross motor development.

### **Philosophy**

The philosophy of the Howard County Public School System is to provide all students, including those students with disabilities, an appropriate physical education program. All Howard County Public Schools must ensure that students with disabilities have access to a program that enables them to achieve the same goals in physical education as their non-disabled peers. If special services are required to assist students with disabilities, the settings, materials, and time should be modified to create an appropriate educational environment comparable to that provided for students without disabilities.

### **Rationale and Purpose**

This document was developed to provide guidelines and procedures for students who do not meet grade level outcomes in physical education that have been developed by each local school system. The document will provide help for teachers in assessing, planning, and implementing their instructional programs which are based on the Maryland State Curriculum and the National Standards for Physical Education developed by the National Association for Sport and Physical Education (NASPE) and also to meet the guidelines of IDEA and section 504 of the Rehabilitation Act of 1973, as amended.

### **Definition of Adapted Physical Education**

The Individuals with Disabilities Education Improvement Act (IDEA 2004) continues to include the curriculum content area of physical education. All students with disabilities are required to participate in physical education instruction. A specially designed physical education service for a student with a disability is typically referred to as *Adapted Physical Education*.

The general physical education program is adapted to meet the unique needs of a student with a disability through modifications and accommodations. Adapted Physical Education is a service, not a setting. If a student with a disability requires specialized instruction in physical education to meet the student's unique needs, it is the responsibility of the student's Individualized Education Program (IEP) team to determine if the student requires specialized instruction in physical education.

It is important to note that many students with disabilities do not require or need Adapted Physical Education services. These students should participate in General Physical Education and in the required curriculum when appropriate. These students may not need physical education goals and objectives listed on their IEP.



There are some students with disabling conditions who are not identified as students with disabilities under IDEA, yet are not meeting grade level outcomes set by each local school system. These students may have a Section 504 Plan. This Section 504 Plan should identify the services, supports, accommodations, and/or modifications. These students should be provided additional support to meet grade level outcomes.

### **Goal of Physical Education**

Physical education is a planned instructional program with specific content and objectives. An essential part of the total curriculum, physical education programs increase the physical competence, health-related fitness, self-responsibility, and enjoyment of physical activity for all students so they can establish physical activity as a natural part of their life and to enable them to become life long movers. According to the National Association of Sport and Physical Education (NASPE):

*Physical education can serve as a vehicle for helping students to develop the knowledge, attitudes, motor skills, behavioral skills, and confidence needed to adopt and maintain physically active lifestyles. The outcomes of a quality physical education program include the development of students' physical competence, health-related fitness, self-esteem, and overall enjoyment of physical activity.*

Maryland Bylaw provides the following definition:

**Physical Education** – Within IDEA, the term *physical education* includes special physical education, adapted physical education, movement education, and motor development. The IDEA definition of physical education includes the development of:

- Physical and motor fitness;
- Fundamental motor skills and patterns; and
- Skills in aquatics, dance, individual and group games, and sport (including intramural and lifetime sports).

In accordance with 34 C.F.R. §300.108(a), *physical education services, specially designed if necessary, must be made available to every child with a disability receiving FAPE, unless the public agency enrolls children without disabilities and does not provide physical education services to children without disabilities in the same grades.* This statement is important when addressing students with disabilities in schools offering Pre-K programs and what services should be provided in those schools.

## **Least Restrictive Environment**

The essence of provisions of services in the least restrictive environment (LRE) is to provide students with disabilities the best opportunity to succeed in physical education. To the maximum extent appropriate, students with disabilities will receive instruction in physical education with students without disabilities. Separate physical education and specially designed instructional programs must be available when the nature or severity of the disability is such that the student cannot benefit from integrated physical education. To ensure students receive instruction in the least restrictive environment possible, school personnel need to ensure the provision of supplementary aids, services, supports, and program modifications.

## **Strands of Adapted Physical Education**

An effective adapted physical education program is achieved through an individualized education program based on identified students' unique needs related to the psychomotor, cognitive, affective areas of development. Adapted physical education is a continuum of services, which allows students to move in and out of the strands of the physical education program based on their current level of performance. All physical education teachers should understand and be able to implement all program strands of the physical education program listed below.

The strands of the physical education program are defined as the following:

### **◆ Students who meet grade level outcomes**

Physical education programs should be aligned with the national and state standards with grade level outcomes. It is also important to note that many students receiving special education services do not require or need Adapted Physical Education services. These students should participate in General Physical Education and participate in the required curriculum when appropriate. These students may not need physical education goals and objectives listed on their IEP.

### **◆ Students who are not meeting grade level outcomes and in need additional support**

Students without IEPs who are not meeting grade level outcomes set by each local school system should be provided additional remediation to meet grade level outcomes. Instruction should be provided utilizing multiple instructional strategies and a variety of equipment to assist with the acquisition of skills. Multiple opportunities for a student to achieve a grade level outcome should be provided. Students who ultimately meet grade level outcomes do not need additional physical education services.

◆ **Students who need accommodations and remediation due to health related issues under Section 504 of the Rehabilitation Act of 1973**

Section 504 of the Rehabilitation Act of 1973 defines a disability as any physical or mental impairment that substantially limits that person in some major life activity (such as walking, talking, breathing, or working). Students who fall within the guidelines of Section 504 of the Rehabilitation Act of 1973 may receive consultative adapted physical education services. An example may be the modifications necessary for a student with extreme asthma to participate in physical education i.e. medication procedures, no classes outside under particular conditions, etc.

◆ **Students identified as students with disabilities under IDEA and the IEP team has determined the student requires the provision of adapted physical education as a special education service in order to meet the student's unique needs as a result of his or her disability**

Adapted physical education is a direct service provided under the guidelines for special education. Students who qualify for this service will receive adapted physical education in the least restrictive environment to implement the goals and objectives on their IEP.

### **Observation and Review of Current Data**

A psychomotor assessment should be provided to students with gross motor concerns so as to identify individual strengths and areas of need. A variety of assessment techniques, both formal and informal, should be utilized with individualizing physical education goals and objectives for students with disabilities. There are four different purposes that provide a basis for psychomotor assessment:

1. Observation and data collection
2. Diagnosis and placement
3. Instruction
4. Student progress

Students enrolled in the Howard County Public School System are usually **observed** for difficulties in motor development by a physical education teacher assigned to the school. Before referring a student to the IEP team, the physical education teacher is responsible for completing the *Adapted Physical Education Checklist (Appendix K)*. An itinerant teacher of adapted physical education may assist in **collecting data** to support decisions made by the IEP team.

## **Referral for Assessment**

Itinerant teachers of adapted physical education are not qualified examiners for establishing the existence of an educational disability under IDEA. In order to be eligible for a referral for adapted physical education assessment, a student must meet one of the following criteria:

- ◆ The IEP team has identified the student as having a disability and being in need of special education service;
- ◆ The IEP team has recommended that an educational assessment and an assessment by qualified personnel be completed in order to identify a disability;
- ◆ An IEP team meeting has been scheduled to review the results of available data and to determine if assessments are needed in order to identify a disability; or
- ◆ Assessment has been recommended as a part of the 504 process.

A member of the local school staff should contact the County Diagnostic Center (CDC) (410-313-7046) to request an adapted physical education teacher attend an IEP team meeting at the school. The CDC representative will send or bring to the school a copy of the *Adapted Physical Education Checklist*. *This checklist shall be completed by a general or special education teacher and the physical education teacher at the school.* A written referral, the checklist, and pertinent records are submitted later to the CDC office.

## **Assessment**

Informed parental consent for the recommended assessment is obtained by a representative of the CDC. The adapted physical education assessment shall be conducted according to the following timelines:

- ◆ All assessments for an **initial evaluation** must be recommended and completed concurrently within the mandated timelines of 60-calendar days from receipt of parental consent for the evaluation or 90-calendar days from the receipt of the referral, whichever comes first, to the completion of *Section I: Meeting and Identifying Information - Eligibility* in the Howard County IEP at the IEP team meeting.
- ◆ NOTE: All assessments recommended **after the student has an IEP**, including those for a reevaluation or as consideration of adding a service (such as adapted physical education), must be completed and reviewed at an IEP team meeting within 90-calendar days of receipt of the written referral.

Adapted physical education personnel will conduct the gross motor assessment using informal and standardized measures.

## **Individualized Education Program (IEP) Team Meeting to Review Assessment**

Within the same timeline, the IEP team meets to review the assessment results and determine eligibility for special education services. *It is the responsibility of the referring school to schedule this IEP team meeting and to notify the parent. Prior to scheduling*

*the IEP team meeting, a school staff member should discuss possible dates and times with the itinerant teacher of adapted physical education. If possible, the teacher will attend the meeting.*

### **IEP Team Meeting**

*If adaptations to the regular physical education program or a specially designed, separate adapted physical education program are required, an initial IEP or an addendum to the IEP shall be written to include the service. The itinerant teacher of adapted physical education, working in cooperation with the regular physical education teacher, develops an IEP with the parent and other IEP team members. The referring school is responsible for scheduling the meeting to develop the IEP with the parent as well as sending the Notice of IEP Team Meeting form (in the Howard County IEP program). Prior to scheduling the IEP team meeting, a school staff member should discuss possible dates and times with the itinerant teacher of adapted physical education who will attend the meeting.*

*A school staff member is also responsible for scheduling the annual review of the IEP by the IEP team.*

### **Delivery of Adapted Physical Education Services**

#### **Direct Service**

Direct adapted physical education service is provided by the physical education teacher assigned to the local school and an adapted physical education teacher. Students with IEPs shall receive the same amount of physical education as their nondisabled peers.

#### **Periodic Recheck**

Periodic recheck or consultation is provided by the itinerant teacher of adapted physical education to regular physical education teachers, special education teachers, and parents. Periodic recheck provides the general educator with guidance from the adapted physical education teacher on appropriate strategies for instruction, behavior management, data collection, observation, and feedback in the general education setting.

The following information will be used to determine the most appropriate least restrictive environment for the delivery of the physical education program:

- ◆ Results of assessments;
- ◆ Psychomotor, cognitive, and affective factors that would impact the student's ability to successfully and safely participate in regular physical education; and
- ◆ The effect of the behavior of the student with a disability on the other students.

Decisions related to the most appropriate physical education environment must be based on each student's individual abilities. Evaluation procedures must be comprehensive and a team (IEP/504) must make decisions about the environment. These decisions must be

reviewed at least once a year to determine if the student is appropriately placed or if the student is ready for a less restrictive environment and to update goals and objectives.

The following is the continuum of environment options in the Howard County Public School System.

### **CONTINUUM OF ADAPATED PHYSICAL EDUCATION SERVICES**

<b>CONTINUUM OF SERVICE</b>	<b>GROSS MOTOR GOALS ON IEP</b>	<b>GENERAL PHYS ED. TEACHER</b>	<b>ADAPTED PHYS ED TEACHER</b>	<b>SETTING</b>	<b>SUPPORT PERSONNEL</b>
General physical education class	No goals	<ul style="list-style-type: none"> <li>Differentiates instruction as appropriate</li> </ul>	<ul style="list-style-type: none"> <li>Not involved</li> </ul>	General physical education class	None
General physical education class	No goals <ul style="list-style-type: none"> <li>Health plan</li> <li>504 plan</li> <li>Action plan</li> </ul>	<ul style="list-style-type: none"> <li>Differentiates instruction as appropriate</li> </ul>	<ul style="list-style-type: none"> <li>Consultation</li> </ul>	General physical education class	<ul style="list-style-type: none"> <li>School nurse</li> <li>Guidance</li> <li>Instructional Assistants</li> <li>peer helpers</li> </ul>
General physical education class with supplemental aides	No goals but supplemental aides listed	<ul style="list-style-type: none"> <li>Provides instruction</li> <li>Follows IEP supplemental aides</li> </ul>	<ul style="list-style-type: none"> <li>Consultation</li> </ul>	General physical education class	<ul style="list-style-type: none"> <li>Instructional Assistants</li> <li>Temporary Employees</li> <li>Student Assistants</li> <li>peer helpers</li> </ul>
General physical education class with APE service	Gross motor goals listed with supplemental aides	<ul style="list-style-type: none"> <li>Provides instruction</li> <li>Follows IEP with APE teacher</li> </ul>	<ul style="list-style-type: none"> <li>Direct service</li> </ul>	General physical education class or pullout as needed	<ul style="list-style-type: none"> <li>Instructional Assistants</li> <li>Temporary Employees</li> <li>Student Assistants</li> <li>peer helpers</li> </ul>
General physical education class and team taught APE Class	Gross motor goals listed with supplemental aides	<ul style="list-style-type: none"> <li>Provides instruction,</li> <li>Follows IEP with APE teacher</li> </ul>	<ul style="list-style-type: none"> <li>Direct service in general class</li> <li>Team teaches in small group</li> </ul>	General physical education class and small group	<ul style="list-style-type: none"> <li>Instructional Assistants</li> <li>Temporary Employees</li> <li>Student Assistants</li> <li>peer helpers</li> </ul>
General physical education staff team teaches in APE small group class	Gross motor goals listed with supplemental aides	<ul style="list-style-type: none"> <li>Team teaches with APE teacher</li> <li>Follows IEP</li> </ul>	<ul style="list-style-type: none"> <li>Direct service</li> <li>Team teaches with general physical education teacher</li> </ul>	Small group or pullout	<ul style="list-style-type: none"> <li>Instructional Assistants</li> <li>Temporary Employees</li> <li>Student Assistants</li> <li>peer helpers</li> </ul>
Separate Physical Education Class	Gross motor goals listed with supplemental aides	<ul style="list-style-type: none"> <li>Not involved</li> </ul>	<ul style="list-style-type: none"> <li>Direct service</li> </ul>	Small group	<ul style="list-style-type: none"> <li>Instructional Assistants</li> <li>Temporary Employees</li> <li>Student Assistants</li> <li>peer helpers</li> </ul>

## State Laws, Regulations, and Policies

### Impact of Education Articles

Consistent with Education Article, §4-111, Annotated Code of Maryland, each local school system shall provide physical education curriculum guides for the elementary and secondary schools under its jurisdiction.

Consistent with Education Article §8-401(a)(4), Annotated Code of Maryland, each local school system and State operated program is required to provide special education to each student identified as a student with a disability under IDEA. Special education is specially designed instruction, at no cost to parents, to meet the unique needs of a child with a disability, including instruction in the classroom, home, hospitals and institutions, and other settings; and instruction in physical education.

The Fitness and Athletic Equity Act (2008) requires each local school system to ensure that students with disabilities have equal opportunities to participate in physical education programs and try out for and, if selected, to participate in mainstream athletic programs. Local school systems are required to:

- ◆ Provide specified accommodations;
- ◆ Develop specified policies and procedures; and
- ◆ Provide opportunities for students with disabilities to participate in athletic competition.

### Impact of Code of Maryland Regulations (COMAR)

#### Physical Education Instruction

COMAR 13A.04.13, Program in Physical Education, specifies the requirement for physical education instruction of children and youth, in grades K – 12. National and State Standards for physical education and the Maryland State Curriculum for physical education provide the guidelines for the development of physical education programs in Maryland.

State regulations concerning the provision of a free appropriate public education and physical education in COMAR 13A.05.01 align with federal IDEA regulations in 34 C.F. R. §300. Maryland does not allow a local school system to waive a student's required participation in physical education. *All students* includes students with disabilities.

In accordance with COMAR 13A.03.02, Graduation Requirements for Public High Schools in Maryland, each student is required to obtain one half credit in Physical Education. Lifetime Fitness is the HCPSS required course.

COMAR 13A.05.01, Provision of a Free Appropriate Public Education, for students with disabilities, is aligned with IDEA and includes information relative to identification, assessment, evaluation, parent participation, consent, IEP content, services in the least restrictive environment, and procedural safeguards. The IEP team for a student with a disability determines whether or not the student requires specialized physical education to meet the student's unique needs, as a result of the student's disability. In accordance with COMAR 13A.05.01.03B(56), physical education means the development of:

- ◆ Physical and motor fitness;
- ◆ Fundamental motor skills and patterns; and
- ◆ Skills in aquatics, dance, and individual and group games and sports, including intramural and lifetime sports.

Physical education includes:

- ◆ Special physical education;
- ◆ Adaptive physical education;
- ◆ Movement education; and
- ◆ Motor development.

A teacher with a certification to teach physical education in the state of Maryland is qualified to teach adapted physical education. Teacher responsibilities for the completion of the appropriate paperwork is provided by the individual districts and based on the service provided.

### **The Role of the Adapted Physical Education Teacher**

Adapted physical education, as defined by the four possible strands of service, will include a variety of services and assistance to physical education teachers and programs of instruction. The adapted physical educator should be considered the content expert and resource for this area. Listed below are a variety of items that may be included within the job responsibilities of an adapted physical educator:

- ◆ IEP development
- ◆ Teaching strategies
- ◆ Alternative equipment or adaptations
- ◆ Accommodations
- ◆ Curriculum adaptations
- ◆ Professional development
- ◆ Teacher coaching
- ◆ Parent conferences
- ◆ Peer mentors
- ◆ Para-professionals



- ◆ Documentation
- ◆ Communication with Medical Professionals
- ◆ Interdisciplinary Collaboration
- ◆ Evaluation of facilities

### **The Role of the Physical Education Teacher**

The physical education teacher is responsible for providing instruction to all students. Instruction should be provided utilizing multiple instructional strategies and a variety of equipment to assist with the acquisition of skills. Multiple opportunities for a student to achieve a grade level outcome should be provided. Listed below are the unique responsibilities of the physical education teacher within an adapted physical education program based on the service delivery model in each of the local school systems:

- ◆ Assessment
- ◆ IEP development
- ◆ Teaching strategies
- ◆ Alternative equipment or adaptations
- ◆ Scheduling
- ◆ Medical documentation
- ◆ Referrals
- ◆ Accommodations
- ◆ Curriculum adaptations
- ◆ Professional development
- ◆ Parent conferences
- ◆ Peer mentors
- ◆ Paraprofessionals
- ◆ Documentation
- ◆ Grading
- ◆ Quarterly IEP Progress Reports
- ◆ Communication with medical professionals
- ◆ Interdisciplinary collaboration
- ◆ Evaluate facilities

➔	Questions regarding the provision of adapted physical education may be referred to the Program Head for Adapted Physical Education at the County Diagnostic Center (410-313-7046).
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## **Instructional Access Team**

The Instructional Access Team (IAT) includes speech-language pathologists, special educators, and special education technical assistants. The team may observe, assess, and provide consultation services for children who need augmentative communication systems or instructional adaptations involving technology. The team maintains instructional devices, materials, and information. The team provides training to parents and staff.

IDEA 2004 requires IEP teams to consider and make decisions about a student's possible need for assistive technology (AT) devices and services. During the development of the IEP, team members examine and discuss a student's needs and abilities, the educational environment in which the student must function, the tasks and skills required for active participation in those environments, the student's educational goals and objectives, and finally, the supports and services, including AT, that are needed to meet those goals.

### **Assistive Technology Device –**

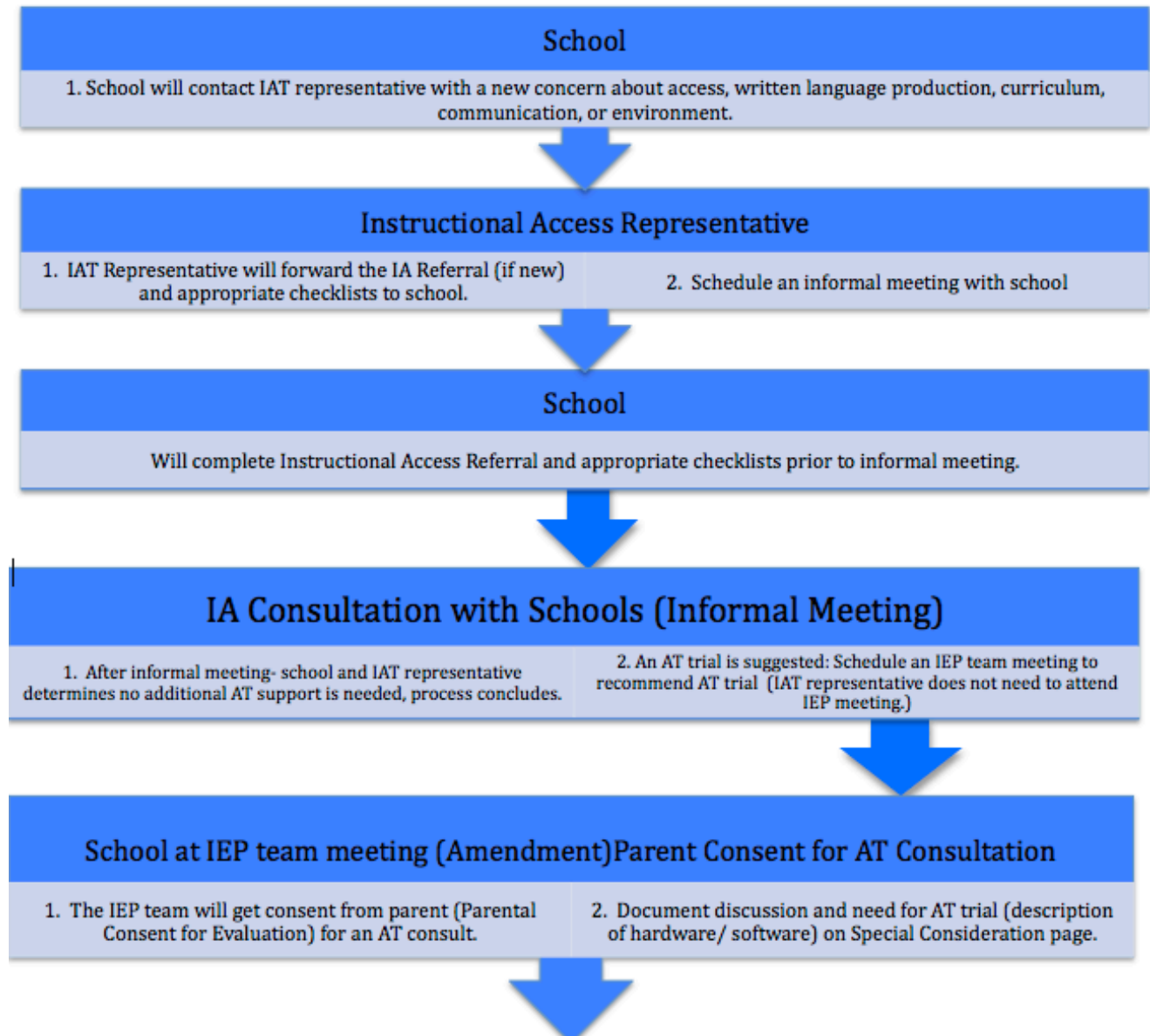
- (1) "Assistive technology device" means an item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve the functional capabilities of a student with a disability, in accordance with 34 C.F.R. §300.5.
- (2) "Assistive technology device" does not include a medical device that is surgically implanted, or replacement of the device.

### **Assistive Technology Service –**

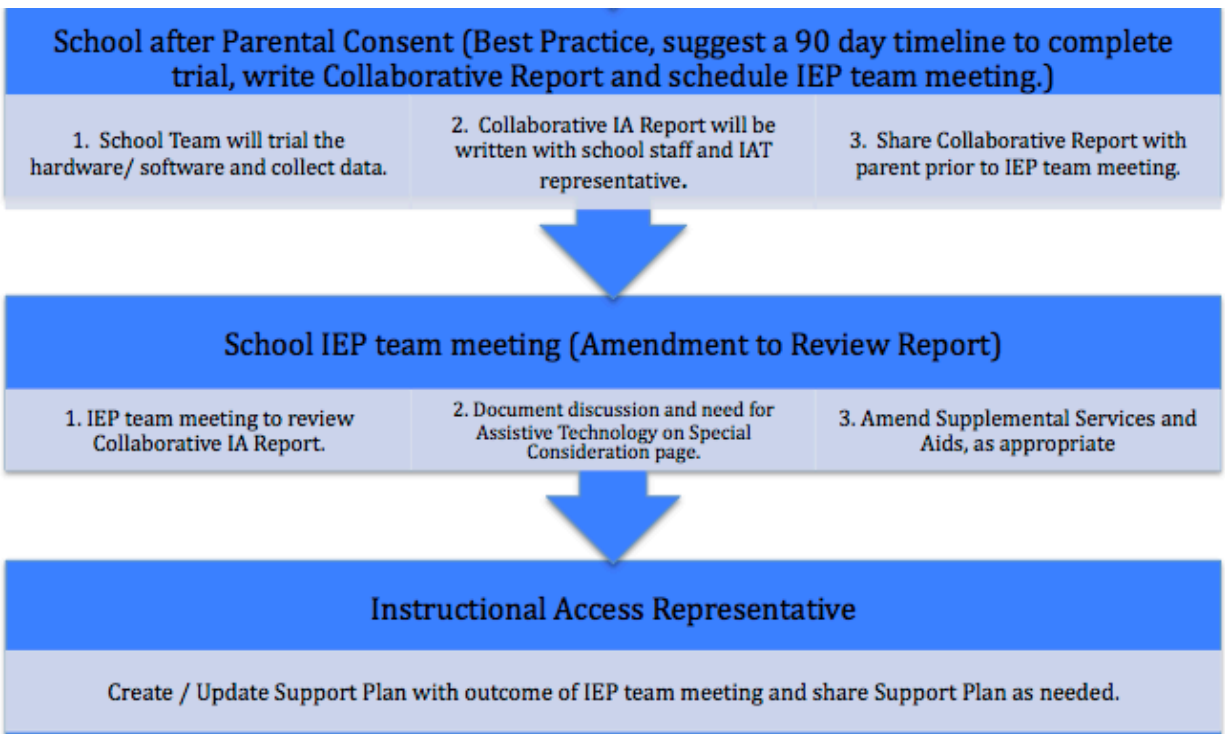
- (1) "Assistive technology service" means a service that directly assists a student with a disability in the selection, acquisition, or use of an assistive technology device,
- (2) "Assistive technology service" includes:
  - a) The evaluation of the needs of a student with a disability, including a functional evaluation of the student in the student's customary environment;
  - b) Purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices by students with disabilities;
  - c) Selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing assistive technology devices;
  - d) Coordinating and using other therapies, interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs;
  - e) Training or technical assistance for a student with a disability or, if appropriate, the student's family; and
  - f) Training or technical assistance for professionals (including individuals providing education or rehabilitation services), employers, or other individuals who provide services, employ, or are otherwise substantially involved in the major life functions of a student with a disability, in accordance with 34 C.F.R. §300.6.

The Instructional Access Team uses a consultation model to work collaboratively with school-based teams through the AT consideration and decision-making process. Although information from formal assessments is considered to determine AT, the process of evaluating for AT is informal and collaborative. The consideration begins when schools work with their school based professionals.

*When consult is needed from the IAT, the following process is followed:*



(Continued on next page)



### Instructional Access Forms

***Instructional Access Referral Form:***

School-based staff completes this form electronically, after the school team has contacted their Instructional Access Representative. The form documents a student’s concern about access, written language production, instructional curriculum, communication, or environment.

***Student Support Plan:*** Informal document that captures the collaborative support between the school based team and the Instructional Access Team Representative for an individual student. The plan is shared with both school-based staff and parents. The student support plan should be filed annually in the student’s special education file.

***Equipment/Software Loan Form:***

This form is completed when the Instructional Access Team loans equipment or software to a school for a specific student. Loans of equipment of software are provided for a training period. Some equipment and software are available for loan for the duration of a school year.

***Instructional Access Collaborative Report:***

This form is utilized once a trial of a device and/or software had been completed. The school-based team will complete the report in collaboration with the Instructional Access Team. The collaborative report is review at an IEP team meeting.

## **Audiology Services**

Audiology services are provided within the Howard County Public School System (HCPSS) through the following service delivery model.

### **Screening**

- ◆ Hearing screenings for students enrolled in the HCPSS are conducted by Howard County Health Department technicians, school speech-language pathologists, and County Diagnostic Center audiologists. Hearing screenings are also completed for infants, preschoolers, and students enrolled in private schools.
- ◆ The Howard County Health Department performs hearing screenings for registered pre-kindergarten students who are least four years of age, as well as students enrolled in kindergarten, first, fifth, and eighth grades. In addition, the Howard County Health Department may screen a student referred by a teacher or parent.
- ◆ Hearing screenings for students referred by a school-based committee or IEP team may be conducted by the speech-language pathologist assigned to each school.
- ◆ The audiologist provides hearing screenings for children who are referred to the Infants and Toddlers Program, the ChildFind Program and HCPSS students, as appropriate.

### **Assessment**

Audiological assessments are performed by the audiologist for preschoolers who are referred through the Infants and Toddlers and Child Find Programs and school age students enrolled in the HCPSS or in a private school.

Reasons for referral:

- ◆ Failure of a hearing screening and rescreening by the Howard County Health Department or school speech-language pathologist. The speech-language pathologist may complete a hearing rescreening for those students who were unable to condition to the listening task or were absent for the rescreening conducted by the Howard County Health Department.
- ◆ Presence of a known hearing loss. This student may be referred for updated audiological assessment and/or appropriate follow-up services such as a hearing aid check.
- ◆ Suspected hearing loss in a student who could not be tested because of behavioral or developmental problems.
- ◆ Presence of medical condition or anomaly associated with hearing loss, such as Down Syndrome or atretic ear canal.

#### Procedures for Referral:

After the IEP team recommends an audiological assessment, the following information shall be submitted by the school principal or IEP Team Chairperson to the County Diagnostic Center:

- ◆ A completed *Referral for Audiological Assessment* (SE 17) form
- ◆ A copy of the *IEP Team Report* or *Reevaluation Report* recommending the audiological assessment
- ◆ A copy of the hearing screening data from the Howard County Health Department or speech-language pathologist
- ◆ A copy of previous audiograms from other facilities, if available
- ◆ A copy of pertinent medical records or other information related to student's hearing loss

#### Assessment Procedures:

The audiological assessment may include:

- ◆ Pure tone air and bone conduction threshold testing utilizing developmentally appropriate behavioral techniques
- ◆ Speech Awareness/Reception Thresholds
- ◆ Word recognition testing
- ◆ Impedance measurements (tympanometry and acoustic reflex thresholds, if appropriate)
- ◆ Otoacoustic emissions measures, when appropriate

For students exhibiting significant hearing loss, annual audiological assessments (or more frequent periodic evaluations as needed) are recommended. In cases where hearing test results cannot be reliably obtained, auditory evoked potentials (AEP, ABR, BAER, BSER) may be recommended.

A copy of the audiological assessment report will be provided to the parent/guardian, as well as to the referring school or program.

#### **Hearing Aid Check:**

For students who wear hearing aids, the following services are provided:

- ◆ Functional gain measures
- ◆ Aided Speech Awareness/Reception Thresholds
- ◆ Aided word recognition abilities
- ◆ Informal listening check and visual inspection of hearing aids
- ◆ Electroacoustic analysis of hearing aids
- ◆ Earmold impressions

### **FM Listening Systems:**

Students are eligible for provision of an FM listening system within their HCPSS placement when need has been demonstrated on the basis of:

- ◆ Classroom observation by audiologist
- ◆ Teacher questionnaire and input
- ◆ IEP team input and observation
- ◆ Information gathered from outside agencies, if appropriate
- ◆ Audiological evaluation
- ◆ Medical clearance

### **Consultation and Inservice Training**

The audiologist is available for consultation with school staff and parents regarding appropriate educational intervention, classroom accommodations and modifications, and use of FM systems or hearing aids. Inservice training is provided for teachers and related service providers involved with the education of students who are deaf or hard of hearing.



Questions regarding the provision of audiology services may be referred to one of the Audiologists at the County Diagnostic Center (410-313-7046).

## **Program for Students Who are Deaf or Hard of Hearing**

The **Hearing Services Team** consists of Audiologists, Teachers of the Deaf and Hard of Hearing, and Educational Interpreters.

The **Educational Audiologist** provides a wide variety of services including:

- Comprehensive assessment to determine the nature and degree of hearing loss; results are provided to parents, teachers, and school staff
- Recommendations for maximum benefit in the educational environment related to hearing aids, cochlear implants, and assistive listening technology
- Collaboration with school-based educational team members, family, private audiologists, and the medical community
- Monitoring hearing loss and the use of amplification.

**Teachers of the Deaf and Hard of Hearing** provide educational support services including:

- Direct services such as assessment, academic instruction, development, and implementation of the IEP, facilitation of communications needs, and assistance with the use of amplification devices
- Consultation and support to teachers, school staff, parents, and students to understand the impact of hearing loss.

The **Educational Interpreter**:

- Facilitates communication between deaf students and teachers, staff, and peers within the educational environments
- Adheres to the Code of Professional Conduct according to the Registry of Interpreters for the Deaf

Note: See additional information about interpreter services provided by the school system in compliance with the American with Disabilities Act (ADA) in the section titled “Sign Language Interpreter Services.”

### **Reasons for Referring a Child to Hearing Services**

- Failed newborn hearing screening
- Not responding to auditory stimuli
- Changes in hearing/auditory behaviors
- Concerns with speech/language development
- Communication and academic concerns.

### **Hearing Services Available to Students (Birth to 21 Years of Age)**

- Individualized assessment to determine functional abilities and needs within the educational setting
- Instructional support in the least restrictive environment



- Specialized instruction from a teacher of the deaf and hard of hearing
- Audiological assessment and consultation
- Educational Interpreter services

### **Hearing Services Available to the School-Based Educational Team**

- Information regarding student's functional hearing and language abilities
- Consultation in the development of an Individualized Education Program (IEP) or Individual Family Support Plan (IFSP)
- Professional development, consultation, and monitoring on the use of amplification and listening equipment

### **Facts About Hearing Loss**

- Hearing loss is also referred to as hearing impairment, hard of hearing, or deafness
- An average of 13% of school-age children have some degree of hearing loss
- Hearing loss can be caused by illness, heredity, noise, or injury
- Hearing loss can occur in one or both ears and its degree of severity can be mild to profound
- Hearing loss can reduce a child's ability to communicate, learn, and socialize with others.



Questions regarding services for students who are deaf or hard-of-hearing may be referred to the Hearing Services Team (410-313-7046) at the County Diagnostic Center, 5451 Beaverkill Road, Columbia, Maryland 21044.

## Occupational Therapy

Occupational therapy services are provided in the Howard County Public School System to ensure that a student with an educational disability has access to and benefits from the special education program. These services are to be distinguished from those that are primarily medical in nature and, therefore, are not available through the school system. Although some disabilities cause sensory processing and motor dysfunction, the student may receive occupational therapy in the schools only if the disability interferes with functioning in the school environment. The impact of the student's disability on participation in the educational program, not the medical diagnosis itself, is the primary criterion for eligibility for school therapy services.

Services include direct intervention to the student, environmental or equipment adaptations to ensure accessibility within the school environment, and consultation to staff members and parents. Services are directed toward the development and maintenance of the student's physical potential for independence in educationally related activities.

**“Occupational therapy”** means services which include:

- (1) Improving, developing, or restoring functions impaired or lost through illness, injury, or deprivation;
- (2) Improving ability to perform tasks for independent functioning when functions are impaired or lost; and
- (3) Preventing, through early intervention, initial or further impairment or loss of function.

**Occupational therapy** services include strategies and adaptations that focus on functional ability to participate in classroom activities, perform self-care tasks that are necessary in the educational environment, and exercise self-regulation to enable learning to occur.

### Delivery of Service for Occupational Therapy

#### Assessments

*Occupational therapy assessments* are completed as part of the IFSP, IEP, or 504 process and are typically completed by the occupational therapist assigned to the school. They address the sensory or motor concerns that impair the child's ability to participate in the educational program. Occupational therapy assessments may include the following:

- ◆ A review of records, including the Individualized Education Program, if one has been completed, the referral information, and other academic, medical, and therapeutic information;
- ◆ Interviews with the student's teachers to identify the areas of educational concern and to determine the most appropriate setting for observations;
- ◆ Observations in the classroom and other appropriate settings to identify skills, needs, behaviors, and other factors that are affecting the student's performance;

- ◆ Approved formal and clinical assessment procedures to identify weaknesses that may be affecting educational functioning and strengths that could be used to remediate or develop compensatory functioning in the educational setting.

The *Occupational Therapist (OT)* will gather and interpret this information and will write a report. The report will be shared with the IEP team as part of the IEP process and any follow-up actions will be decided.

#### Individualized Education Program

As a part of the IEP development team, the *Occupational Therapist* addresses the motor skills that are needed in order for the child, aged 3-21, to be able to participate in the educational program and to reach his/her academic goals. IEP goals that relate to Occupational Therapy are embedded in the child's academic goals.

*Occupational Therapists who work with children under the age of three* address developmental motor skills by working directly with the child and by providing training to caregivers. These services are provided through the Individualized Family Support Plan (IFSP) process.

*Direct Occupational Therapy services* may address the development of underlying neuromotor, sensorimotor, visual-motor, fine motor, or oral motor skills as well as processing of sensory information as they impact on a child's ability to function within the educational environment.

*Consultation* is an integral part of all Occupational Therapy services for purposes such as promoting daily practice of developing skills, identifying alternative methods of learning or of demonstrating competency, and training of team members to increase a child's independence in self-care skills needed during the school day.

#### Colleague-to-Colleague Consultation

Students, from 3 to 21 years of age, who are having difficulty with educational performance that may be related to sensory processing or motor problems, but are not suspected of having a disability, may benefit from colleague-to-colleague consultation with the occupational therapist upon teacher request. The therapist may consult with staff, observe the child, and provide general recommendations for strategies or modifications that can be implemented in the general education setting.

Questions regarding the provision of occupational therapy may be referred to the Program Head for Occupational Therapy at the County Diagnostic Center (410-313-7046).

## Physical Therapy

Physical therapy services are provided in the Howard County Public School System to facilitate skill development in children, ages birth to 3, with a developmental delay and to assist students with an educational disability (ages 3-21) to access and benefit from the special education program. These services are to be distinguished from those that are primarily medical in nature and, therefore, are not available through the school system. The school age student may receive physical therapy in the schools only if the disability interferes with functioning in the school environment. The impact of the student's disability on participation in the educational program is the primary criterion for eligibility for school age therapy services. Early intervention services are provided in accord with part C eligibility guidelines.

Services may include: direct intervention to the student: environmental or equipment adaptations for mobility and accessibility; consultation/training for staff members and parents; and consultation with outside providers.

## Physical Therapy

**"Physical therapy"** means services provided by a qualified physical therapist or physical therapy assistant, in accordance with Health Occupation Article, §13-101(h), Annotated Code of Maryland, and COMAR 10.38.01B(2) and 10.38.01.02L.

**Physical therapy** services include direct and consultative services that focus on functional mobility and safe movement of physically challenged students through the school day.

### Delivery of Service for Physical Therapy

#### Assessments

*Physical therapy assessments* are completed as part of the IFSP, IEP or 504 processes. Assessments address concerns identified by the IEP team and may include:

- ◆ A review of records including the current plans, and other academic, medical, and therapeutic information
- ◆ Interviews with the student's teachers to identify the areas of educational concern and to determine the most appropriate setting for observations
- ◆ Observations in the classroom and other appropriate settings to identify skills, needs, and behaviors that are affecting the student's performance
- ◆ Approved formal and clinical assessment procedures to identify needs that may be affecting educational functioning and strengths that could be used to remediate or develop compensatory functioning in the educational setting.

Once adequate information is available a written report is shared with the referring team.  
*Note: IEP meetings to review an assessment should be scheduled in collaboration with the therapist to assure availability.*

#### Individualized Educational Program

The *physical therapist (PT)* collaborates with families and teacher(s) to develop goals and objectives to improve the student's ability to move through the school day and to access their educational program (school-age children) or to improve developmental progress (ITP). Service delivery models include:

- ◆ *Direct service* involves hands on treatment to promote new skill development or refine existing skills.
- ◆ *Consultative services* involve staff training, collaboration on appropriate modifications adaptations and equipment with parents, team members and private providers. PT's may also provide information about specific diagnoses or interpret outside reports.
- ◆ *Consultation* is always a component of direct service. When the student has no goals requiring the skills and knowledge of a physical therapist consultation stands alone.

#### Colleague to Colleague Consultation

Students do not need to have an IEP to receive consultative services. Assistance is available any time a problem arises which affects the education or safety of a physically challenged student. These include students with 504 plans and students returning to school with an acute motor issue.

#### Other Services:

*Physical therapists* also provide input for:

- ◆ Environmental design and modifications for accessibility
- ◆ Program and curriculum modifications to accommodate physical challenges
- ◆ Equipment and technology needs; participation at ordering parties
- ◆ Graduation planning
- ◆ Playground design



Questions regarding the provision of physical therapy may be referred to the Program Head for Physical Therapy at the County Diagnostic Center (410-313-7046).

## **Parent Counseling and Training**

Parent counseling and training services are offered to assist parents in understanding the special needs of their child. In addition, parents are given information about child development, intervention techniques to use in home and community environments, services within the community, support groups, and educational programs. Parent counseling and training services may be provided in individual or group sessions.

**“Parent counseling and training”** means:

- (1) Assisting parents in understanding the special needs of the child; and
- (2) Providing parents with information about child development.

## **Psychological Services**

According to the *Psychological Services Handbook, 2008*, psychological services are provided through an integrated service delivery model which is solution-centered (rather than learner-centered) and focuses on the variables that can be modified to help increase the probability of a student's success within general education. The focus is on the characteristics of educational settings, instruction and tasks that can be changed and that lead to successful interventions. Intervention strategies are developed based on the nature of the defined problem, collaborative problem solving regarding interventions, and data collected to monitor the effectiveness of interventions.

Psychological services are provided to facilitate development of effective academic, personal, and interpersonal skills that will enable students to benefit from their educational programs. The goal is to promote the academic, social, and emotional development of students through consultation, observation, direct intervention, parent education, and staff development activities that apply psychological principles. Psychological services are provided by appropriately certified school psychologists and contractual consultants under the direction of the Coordinator of School Psychology and Instructional Intervention. School psychologists are assigned to individual schools and to specific programs such as Child Find, County Diagnostic Center, Regional Early Childhood Centers, and to Regional Programs for Students with Emotional Disabilities and other Behaviorally Related Disorders.

School psychologists provide services to students, teachers, and parents through general and special education.

- ♦ *General education supports* are provided in response to a direct request by parents and/or teachers or through the school-based problem solving team.
- ♦ *Special education supports include:* Using the problem-solving team process to explore general education interventions that may help rule out or determine the need for specialized instruction; participating in the assessment process to determine the need for special education; and providing services through an IEP for students identified as having a disability.

The range of services provided by school psychologists is described below.

### **Informal Consultation with Parents or Teachers or Both**

When a concern is expressed about a student's performance (academic, behavioral, and/or social/emotional), the concern will be addressed initially through communication and collaboration with parents and teachers. The purpose of this communication is to clarify the concern, identify the factors that may be impacting the student's performance, and determine a course of action directed toward resolving the present problem. The problem solving and intervention development can be modified and refined as necessary in order to address the concern.

### **Indirect Services and School-Based Problem-Solving Team**

If the student does not attain the performance goals set by the parent and teacher, additional consultative assistance may be requested through the school-based problem-solving team, [i.e., Instructional Intervention Team (IIT), Student Support Team (SST),

or Kid Talk]. The *school-based team* is composed of teachers and other school-based professionals who have been trained in a problem-solving process, as well as having different areas of expertise, that can be helpful in resolving school learning problems. In the problem-identification process, data collection regarding the student's present level of performance is gathered. The student's strengths and needs are clarified and general education interventions are reviewed. Information reviewed at this time includes:

- ◆ Teacher reports
- ◆ Work samples
- ◆ Curriculum based assessments
- ◆ Review of current educational program
- ◆ Observational information (when appropriate)
- ◆ Functional behavioral assessments (when appropriate)
- ◆ Educational history (for evidence of gaps in instruction or a pattern of learning difficulties)
- ◆ Medical and environmental history (for evidence of health or environmental variables that might be contributing factors to learning problems).

This information is organized with the intent of defining the problem in observable and measurable terms so that possible hypotheses and solutions may be generated, appropriate interventions identified, and an intervention plan developed, monitored and evaluated. It is best practice to involve the parents and, when appropriate, the student in the problem-solving process. Interventions can be modified and refined, as appropriate.

### **Direct Services and Extended Interventions**

If the interventions implemented through indirect intervention or the school-based problem-solving team do not result in sufficient progress, the school psychologist may become involved in providing direct services. *Direct psychological services* are often considered when the lack of progress with an intervention is thought to be the result of cognitive, social/emotional, or behavioral issues. Additional information may be needed to design, implement, and monitor interventions. *Data collection* may include reviews of student work samples; informal assessment; curriculum based assessment; observation data; and results of parent, teacher and student interviews. *Review of existing student information*, including existing standardized tests or rating scales, may offer information regarding ability, achievement, and the social/emotional/behavioral strengths and needs of the student. Prior interventions are reviewed, the concern is further defined, and the magnitude, pervasiveness and effects of the problem are examined. *If direct services are needed*, the school psychologist meets directly with the student individually or in a group to address specific goals from an IEP or goals developed for an extended intervention. The school psychologist assists in monitoring the student's progress in reaching the IEP goals.

### **Full and Individual Evaluation**

A student's eligibility for special education under IDEA or accommodations under Section 504 may be considered if there is little or no improvement in the student's performance following interventions and an educational disability is suspected. The



school psychologist works with the IEP team to collect the necessary data for an initial IEP team meeting. If the psychologist and IEP team recommends assessments, specific reasons for referral are identified, including what disability is suspected and requests for information to assist in instructional planning. Written parental consent is obtained through the *Informed Consent for Psychological Evaluation* form.

*Assessment procedures* to evaluate cognitive, developmental, learning, social, emotional, behavioral, and instructional functioning are determined by the school psychologist. Previous assessment and intervention outcomes are reviewed and analyzed as part of the assessment. *The procedures may include:* Administration of psychological and educational tests and procedures; observations and interviews; and review of records and other assessment data. School psychologists serve as qualified personnel in the identification of the following disabilities:

- ◆ Autism
- ◆ Intellectual disability
- ◆ Emotional disability
- ◆ Other Health Impaired (due to ADHD)
- ◆ Specific learning disability (member of the team)
- ◆ Traumatic brain injury.

When psychological services are required to address the social, emotional, behavioral, or instructional needs of children suspected of having other disabilities, the school psychologist should be included in the assessment process.

The school psychologist is responsible for explaining the assessment procedures and interpreting psychological assessment results, as well as reviewing and interpreting the psychological reports submitted by outside examiners or agencies. Assessments are completed in accordance with federal and State guidelines and professional standards (American Psychological Association and National Association of School Psychologists). Assessments include those for initial evaluation and reevaluation, as well as interim assessments, as appropriate. Results and recommendations are utilized by the IEP team in determining if the student is eligible for special education and related services and in determining the content of the IEP.

### **Individualized Education Program (IEP)**

When designated by the IEP team, the school psychologist participates in the development of the IEP. The school psychologist assists in planning an educational program to meet a student's special needs as indicated by psychological tests, interviews and evaluations of behavior. If social, emotional, or behavioral goals are included in the IEP, and if psychological related services are required to assist the student in benefiting from special education, the school psychologist will participate in continued monitoring, evaluation and revision of the IEP.

### **Other Services Provided**

The school psychologist is responsible for planning and managing programs to provide psychological services, which may include:

Direct services such as:

- ◆ Social skills training
- ◆ Counseling for students and parents
- ◆ Family counseling
- ◆ Group and individual counseling
- ◆ Functional behavioral assessments
- ◆ Coordinate behavioral intervention plans
- ◆ Cognitive-behavioral and problem solving training
- ◆ Behavioral self-management training (e.g., anger control).

Indirect services such as:

- ◆ Instructional, behavioral, developmental, and mental health consultation
- ◆ Development of classroom-based behavior management and modification plans for children with atypical functioning
- ◆ Staff development activities and site-based support for implementation of specific intervention strategies
- ◆ Parent consultation and training to support intervention strategies as appropriate to achieve educational benefit
- ◆ Enhancement of collaborative strategies and structures that support inclusion and least restrictive options for students with special needs, such as coordination among psychological service providers and educational providers.

*Both direct and indirect psychological services are coordinated with other service providers through IEP development and consultation. Referrals to outside agencies for treatment may be coordinated through the school psychologist, when appropriate.*



Questions regarding provision of psychological services should be referred to the *Resource Psychologist, Office of Student Services (410-313-7343)*.

## School Health Services

School Health Services are services provided by professional *registered* nurses and *certified* school health assistants. Most direct care services can be provided *for* students by the school health assistant with training and direct supervision from the licensed professional nurse. The health assistant works *in a team relationship with* the nurse, and the nurse retains the legal accountability for the provision of the care. By Maryland regulation, only the licensed nurse may assign nursing care tasks to an unlicensed person.

Services include direct care for students such as the following:

- ◆ Medication administration
- ◆ Medical treatments such as catheterization, tube feeding, suctioning, and nebulizer treatment
- ◆ Management of chronic health problems such as asthma, diabetes, and seizure disorder
- ◆ Management of emergency health problems such as severe food allergy, bee sting allergy, injury, and acute illness
- ◆ Development of individual health care plans as required in regulation (registered nurse only)
- ◆ Health counseling of students individually and in small groups (registered nurse only)
- ◆ Health screening

Indirect services include provision of the following:

- ◆ Consultation with parents, staff, and administrators
- ◆ Consultation with community health care providers
- ◆ Staff training
- ◆ Referral for services in the community
- ◆ Case management
- ◆ Identification and control of communicable disease in the school setting
- ◆ Health information resources for the school community.

In addition, a nurse serves as part of the diagnostic teams at the County Diagnostic Center, including the Preschool Child Find Team and the Indepth Interdisciplinary Team. The nurse provides consultation and completes developmental, social, and medical histories for students referred by school IEP teams and the Central Educational Placement Team (CEPT). The County Diagnostic Center nurse also serves as a liaison to school staff, parents, and medical personnel in the community.

➡ Additional information regarding the provision of school health services may be obtained from the Health Services Office (410-313-6812).

## **Social Work Services in Schools**

The Howard County Public School System provides school social work services to students with a disability who have been identified as needing those services through pupil personnel workers, school health service providers, behavior specialists, crisis intervention teachers, nurses, and school psychologists.

School social work services include:

- ◆ Preparation of a social or developmental history for a student with a disability
- ◆ Group and individual counseling with the student
- ◆ Family counseling
- ◆ Behavioral counseling
- ◆ Social Skills Development
- ◆ Crisis Intervention
- ◆ Coordination of school and community resources to support a student's educational program
- ◆ Counseling to address adjustment issues in the student's life that could affect the student's adjustment in school
- ◆ Consultation and coordination with family, school staff, and community agencies.



Additional information may be obtained from the Office of Student Services (410-313-6662).

## **Speech-Language Pathology**

Speech-language pathologists assess and treat articulation, language, fluency, voice, and related disorders in children from birth to 21 years of age. Speech-language pathology services are provided in all county schools to help children become effective communicators in academic, social, community, and work settings. Speech-language pathologists combine children's communication goals with academic and social goals by integrating classroom objectives into speech and language activities. Speech-language pathologists help children understand and use basic language concepts related to classroom learning to become good readers and writers and to understand classroom lessons and texts. Speech-language pathologists are committed to the following responsibilities:

- ◆ Using an educational model of assessment and service delivery
- ◆ Identifying the variables such as language of the curriculum, student's own speech and language, and instructional language which affect the student's success in the school setting
- ◆ Using research-based language assessment and intervention techniques as well as curriculum materials
- ◆ Teaching students strategies and problem solving skills that can be generalized across content and tasks
- ◆ Teaching students effective speech production skills in the areas of articulation, voice, and fluency
- ◆ Forming a partnership with other staff members and parents to help students develop effective communication skills.

Speech-language pathologists use various service delivery models. These include:

- ◆ Coaching/modeling
- ◆ Consultation with educators and parents
- ◆ Co-teaching with a special educator or general educator
- ◆ Therapy in the general education setting
- ◆ Therapy in the special education setting
- ◆ Push in/Pull out services

### **Referral**

School staff or parents who have questions regarding instructional techniques or expectations for a student's communication development may contact the speech-language pathologist for information and suggestions. The Instructional Intervention Team (IIT) provides a problem solving process for concerns related to a student's communication development. As a member of the IIT, the speech-language pathologist may use a collaborative/consultative model to share information and generate appropriate classroom or instructional modifications or accommodations related to communication. Procedures may include a review of records, observation of instructional techniques or student communication in the classroom setting, and discussion or demonstration of modifications and accommodations. Very often a student is able to achieve satisfactorily

in the general education with classroom-based interventions. If a student's classroom performance has not improved with these interventions or the IIT suspects that the student may have an educational disability and be in need of special education, a referral is made to the IEP team.

When a student is referred to the IEP team with concerns in the areas of articulation, voice, or fluency, the team should review all referral information to determine whether an educational disability is suspected. The referral information should include:

- ◆ Review of the student's record
- ◆ Information from the classroom teacher (teacher survey) and/or parents (parent survey)
- ◆ Classroom observation and review of work samples

An educational disability of speech-language impaired must include the speech disorder **and** impact to the academic achievement and functional performance of a student. Students should only be referred for evaluation if an educational disability is suspected.

When a student is referred to the IEP team with concerns in the areas of language and pragmatics, the entire IEP team should review referral information. While developing the diagnostic questions, it is important for the IEP team to determine all suspected educational disabilities. There are many similar characteristics to the educational disabilities of speech/language impaired, intellectual disability, specific learning disability, and ADHD. By carefully reviewing referral information, teams can be sure the correct assessments are recommended.

### **Assessment and Evaluation**

Speech-language pathologists provide assessment services for students referred through the IEP team. The primary purpose of the assessment is to determine the present levels of educational performance in the areas of communication. Standardized tests included on the *Howard County List of Approved Tests* are used along with informal procedures. Informal procedures include curriculum-based language assessment, performance assessment, portfolio assessment, and outcome-based assessment procedures.

To fully understand a student's educational performance, an educational assessment is required along with the speech-language assessment. The *Educational Assessment Report for Students with Speech Difficulties Only* is used to report a student's academic achievement and functional performance within the educational setting. This report is only for students referred with communication concerns in the areas of articulation, voice, and fluency. For students referred with communication concerns in the area of language, a special educator completes a full educational assessment in the areas of reading, math, and written language.

## **Intervention**

Speech-language pathologists provide intervention services to students who have been identified as having a primary or secondary educational disability of speech-language impairment. Students requiring speech only services for articulation, voice or fluency will receive all their IEP services from a speech-language pathologist. In this situation, the speech goals and objectives are considered instructional services and the IEP goal areas may include articulation, voice, or fluency.

Students requiring services in the area of language or pragmatics must also receive academic instructional services from a special educator. There are also occasions where students require speech (articulation, voice, and fluency) services in addition to academic instructional services. In both of these situations, the speech-language services are considered a related service and the speech-language objectives are embedded into the academic goal areas.

Goals and objectives are developed to address the deficits identified during the assessment process. The speech-language pathologist should focus on providing support for the student to meet the standards of the general curriculum. Depending upon the identified needs of the individual student, developing effective communication skills needed for success in academic, social, community, and work settings may address the following:

- ◆ Producing speech sounds correctly in isolation, syllables, words, phrases, sentences, and conversational speech
- ◆ Using appropriate pitch, loudness, quality or other vocal characteristics which are appropriate to the age and sex of the speaker
- ◆ Promoting fluent speech with appropriate rate and rhythm
- ◆ Understanding and using vocabulary, language concepts, language relationships, and grammatical rules
- ◆ Developing a repertoire of strategies to use in various settings for successful communication
- ◆ Using language to participate in interpersonal communication
- ◆ Understanding and using appropriate facial expression, body movement and position, gestures, and other nonverbal communication behaviors
- ◆ Enhancing the functional use of residual hearing
- ◆ Providing training in the use of an augmentative communication system.

Once the IEP team approves the objectives, the services required to address the objectives are determined. The full spectrum of service delivery options must be considered as a possibility for the student. These may include pull-out, classroom-based, consultation, collaboration, individual, small group, or any combination of these service delivery options. These options should be reviewed and changed over time, as the student's needs change. The team should select the option that will most likely provide the student with success in the curriculum. The amount of time selected for the delivery of speech-

language services should be directly related to the objectives on the IEP requiring the expertise of a speech-language pathologist. Time should be individualized for the student with consideration for the student's entire academic program.

→ Questions regarding the provision of speech-language pathology services may be referred to the Communications Facilitator (410-313-7046). Additional information and speech-language forms can be found in the "Handbook for Speech-Language Pathologists."



## Transition Services

Transition services are intended to prepare students to make the transition from the world of school to the world of adulthood. As established in the Individuals with Disability Education Act (IDEA), each IEP team within the Howard County Public School System must consider, beginning at the age of 14, which transition services should be included in the IEP for each special education student. Middle and high school IEP teams consider areas such as employment, postsecondary education/training, independent living, and community participation. The transition services are a set of coordinated activities that are based on the student's needs and that take into account his or her preferences and interests. Documentation of student participation is required. The student and his or her family are expected to take an active role in preparing the student to take responsibility for his or her own life once school is finished.

The following forms should be used to assist in transition planning and IEP development for students 14 years of age and older:

- ◆ ***Future Planning Inventory-Parent/Guardian Questionnaire*** should be sent home yearly to be completed and returned prior to the development of the IEP.
- ◆ ***Student Preference/Interest Sheet*** should be completed at school, with assistance if needed.
- ◆ ***Transition Folder Checklist*** should be used by IEP planning team to ensure that all the components are documented and stored as a separate file within the IEP folder system.

Information is available from Special Education teachers and Work Study/Transition coordinators in the local schools. Additional questions regarding transition services may be referred to the Program Head for Work Study and Transition at 410-313-5640.

## Transportation

"Transportation" means services which include travel to and from school and between schools, travel in and around school buildings, and specialized equipment, such as special or adapted buses, lifts, and ramps, if required to provide special transportation for a student with a disability. Transportation services are provided by the Howard County Public School System in accordance with both federal and State regulations.

Transportation may be considered a related service if it is required to assist a student with a disability to benefit from special education. **If transportation is a related service, it must be documented in the IEP and on the *on the LRE page*.** Removal of transportation as a related service must follow the same IEP procedures as other related services. A parent request for removal or denial of transportation must be considered by the IEP team.

Appropriate facilities to which students may be transported are:

- ◆ Public schools
- ◆ Maryland State Department of Education approved nonpublic schools (Travel time must be considered when determining an appropriate nonpublic school placement.)
- ◆ State schools.

A bus assistant may be employed based upon the needs of the students. In addition, when required, equipment is provided to assure the safety of students during transportation.

Parents of students who attend a residential nonpublic school receive reimbursement for four round trips between the assigned school and home each calendar year in accordance with their child's approved IEP. Parents of infants, toddlers, and preschoolers may be reimbursed if they transport their child to school.

➡ Additional information regarding procedures and forms may be found in the "Special Education Transportation Parent Handbook, 1998-99." Questions regarding transportation may be referred to the Pupil Transportation Office (410-313-6732).

## **Programs for Students with Visual Impairments**

The Vision Program of the Howard County Public School System provides itinerant services to children, from birth to 21 years of age, who are identified as having a visual impairment, including blindness, which adversely affects their educational performance. Eligibility is based on ophthalmological and educational evaluations and is determined by the Individualized Education Plan (IEP) team or Individualized Family Service Plan (IFSP) team. A referral to the IEP or IFSP team may be made by a parent, teacher, doctor, or any service provider who suspects that a child may have a visual impairment. Vision services may include assessment, consultation, and specialized instruction in techniques for children who are blind or visually impaired. Instructional areas may include braille, keyboarding, self-advocacy, use of adapted technology, and use of low vision devices.

Children who receive services from the Vision Program may also be eligible to receive Orientation and Mobility (O&M) services. This specialized instruction helps blind and visually impaired children learn spatial concepts and safe travel skills (including cane travel when appropriate) within their home, school, and community settings. Eligibility for Orientation and Mobility (O&M) services is determined by the Individualized Education Program (IEP) team or Individualized Family Service Plan (IFSP) team. In conjunction with families and staff members, the Orientation and Mobility (O&M) instructor works with students of all age levels to monitor development of appropriate movement and concepts through the developmental stages. As the child grows, an O&M instructor monitors the development of age-appropriate travel skills and provides instruction and consultation, as needed. Adapted methods of locating and using community resources and public transportation, as well as learning about pedestrian safety and disability-specific consumer skills, are integral parts of the program to facilitate transition into adult life.

Additional information is available from the Program Head for Vision Services (410-313-7022).

### **Service Providers**

Itinerant Teacher of Students with Visual Impairments (TVI) -- Provides assessment, consultation, and specialized instruction in techniques for children who are blind or visually impaired. Instructional areas may include braille, keyboarding, self-advocacy, use of adapted technology, and use of low vision devices. In addition to instruction of students, TVIs provide consultation with classroom teachers, special educators, and related service providers as well as communication with parents and eye medical professionals.

Orientation and Mobility (O&M) Instructor -- Works with students of all age levels to monitor development of appropriate movement and concepts through the developmental

stages. As the child grows, an O&M instructor monitors the development of age-appropriate travel skills and provides instruction and consultation, as needed. Adapted methods of locating and using community resources and public transportation, as well as learning about pedestrian safety and disability-specific consumer skills, are integral parts of the program to facilitate transition into adult life.

Questions regarding the provision of orientation and mobility services may be referred to the Program Head for Vision Services (410-313-7022).

## **Additional Services Available Through the Department of Special Education**

This section of the handbook includes descriptions of the following additional services provided by the Howard County Public School System.

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## Child Find Program

The Department of Special Education of the Howard County Public School System maintains an active Child Find Program to locate children from birth through 20 years old who may be in need of special education and related services. Activities to inform the general public and personnel at private schools about the Child Find Program are conducted annually by the Instructional Facilitator for Countywide Services and the Instructional Facilitator for Early Intervention Services. Information regarding referral, screening, and other services, as well as the title of the contact person and phone number, is included in:

- ◆ Media announcements in local newspapers and on television
- ◆ Brochures sent to physicians, personnel in private schools, and child care providers
- ◆ Activities designed to reach individuals within the county who are non-English proficient
- ◆ The Howard County Public School System website for special educations, [www.hcpss.org/academics/specialeducation](http://www.hcpss.org/academics/specialeducation)
- ◆ Annual meeting with representatives from private or religiously-affiliated schools to share information and gather input on the following questions:
  - ✓ Which children will receive services?
  - ✓ What services will be provided?
  - ✓ How and where the services will be provided?
  - ✓ How will the services provided be evaluated?
  - ✓ How will the annual count of the number of children with disabilities in private and religiously affiliated schools be conducted?

### Early Identification (Birth to 3)

☞ Children, from **birth to three years of age**, may be referred to the single point of entry at the Howard County Infants and Toddlers Program, Office of Early Intervention Services (410-313-7017).

### Children Ages 3 through 5

☞ Children, from **three through five years of age**, may be referred to the Preschool Child Find Team at the County Diagnostic Center (410-313-7046).

Children ages three through five are eligible to receive services in Howard County if they meet any of the following criteria:

- ◆ Children who reside in Howard County and do not attend any preschool program
- ◆ Children who reside in Howard County and attend a tax-exempt or approved preschool program in Howard County (as determined by the Maryland State Department of Education)
- ◆ Children who reside in Howard County and attend a preschool program in Howard

County that is not tax exempt or approved by the Maryland State Department of Education

- ♦ Children who do not reside in Howard County but attend a tax-exempt or approved preschool program located in Howard County (as determined by the Maryland State Department of Education)

The Preschool Child Find Team is an interdisciplinary team that provides identification services to children from three to five years of age who are suspected of having a disability, including developmental delay. The team includes an educational diagnostician, a speech-language pathologist, a psychologist, an occupational therapist, a physical therapist, an audiologist, a pediatrician, and a nurse. Parents are important members of the team and are included in each IEP team meeting. The Preschool Child Find Team provides all services at no cost to the parent.

### **Referral**

Persons interested in making a referral (a parent or guardian, medical personnel, or other concerned individuals) may call the County Diagnostic Center (410-313-7046) to begin the referral process for a young child who may be in need of special education and related services. Written referrals must include the name of the child, the suspected disability, the date of the referral, and the name, address, and telephone number of the person making the referral

Information is obtained from the parents using the *Referral for a Preschool or Kindergarten Age Child Suspected of Having a Disability*, *Parent Questionnaire for a Preschool or Kindergarten Age Child*, and *Ages and Stages Questionnaire*. A meeting is scheduled to review the written referral and the questionnaires that have been completed by the parent. When appropriate, a *Preschool-Kindergarten Educational Report*, observations by private preschool teachers, and assessments provided by the parent are obtained and reviewed. Upon review of the existing information, the IEP team may recommend gathering additional information regarding developmental areas, vision, or hearing. If the IEP team suspects that the child has a disability and may need special education, assessments in all areas related to the suspected disability are recommended.

### **Assessment**

For each child needing further assessment, school-based teams use a referral question model for collaborative multidimensional assessment. Information from a variety of sources is obtained and reviewed. Areas of concern and questions that need to be addressed and answered are identified by the Preschool Child Find Team, and include parent input. A variety of assessment procedures are used to gather the needed information. The assessment measures are selected and administered so as not to be racially or culturally discriminatory. A collaborative assessment report that includes information from the parent is written.

## Evaluation

The IEP team completes the evaluation of the child within 60 days of receiving the signed permission to test or 90 days from the date of the receipt of the signed written referral, whichever comes first. The collaborative assessment report is reviewed at an IEP team meeting and a written evaluation report is completed to determine whether the child is a child with a disability. The evaluation report includes a summary of the child's performance in each area of suspected disability; relevant functional, cognitive, developmental, behavioral, and physical information; and instructional implications for the preschool child's participation in appropriate activities or the kindergarten age child's participation in the general curriculum.

When appropriate, a representative from the elementary school in the child's neighborhood or a representative from the Preschool-Kindergarten Program is invited to the IEP team meeting. The parent is given a copy of the collaborative assessment report and the record of discussion at the meeting.

## Individualized Education Program (IEP)

If the child is determined to be a child with a disability, an IEP is developed by the school staff members who will provide special education services to the child with input from the parent. This meeting takes place within 30 days of the meeting that was held to review assessment results. The IEP team reviews the IEP, identifies services needed to implement the IEP, and considers options for the provision of services in the least restrictive environment.

## School Age Students



School-age children who attend a private or religiously affiliated school in Howard County, whether residing in Howard County or another jurisdiction, may be referred by a parent or guardian, medical personnel, or other concerned individuals by calling the Child Find Program at the County Diagnostic Center (410-313-7046). Home-schooled students who reside in Howard County may also begin the referral process at this single point of entry.

When a student in a private or religiously affiliated school or a home-schooled student begins the referral process, the parents are asked to complete a ***Parent Referral*** form, ***Parent/Guardian Questionnaire***, and ***Educational Report*** form. Written permission is obtained for Howard County Public School System staff to review the student's records, reports from any specialists who have worked with the student, and educational reports completed by the student's current teachers. Parents are asked to send the requested information to:

- ◆ The principal of the student's neighborhood school for Howard County residents; or
- ◆ A school near the private or religiously-affiliated school residents (designated by the County Diagnostic Center) for non Howard County residents.



## Identification

The Individualized Education Program (IEP) team at the designated school meets to review the referral, existing data, information from the parent, previously implemented instructional interventions and strategies, current classroom-based assessments, and observations by teachers and related service providers. Based on this information the IEP team determines the need for assessment.

## Assessment

If assessments are recommended because a disability is suspected, the school staff obtains written permission from the parent and completes an educational assessment and other assessments as needed.

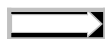
Evaluation procedures include the following steps:

1. The *Evaluation Report* and determination of eligibility for special education is completed within 60 calendar days from the date of the signed permission to test or 90 days from the receipt of the signed written referral, whichever comes first.
2. After the assessments are completed, the IEP team reviews the student's records and results of the assessments to determine eligibility for special education and related services.
3. If appropriate, the IEP team verifies the existence of an educational disability and identifies staff members who shall participate in the development of the Individualized Education Program (IEP).
4. Copies of the assessment reports and the record of the discussion and decisions made by the IEP team are provided to the parent.

Individualized Education Program (IEP) /Services Plan procedures include these steps:

1. If the child is determined to be a child with a disability, an IEP is developed for Howard County residents by the school staff with input from the parents within 30 days of the meeting that was held to review assessment results.
2. The IEP team reviews the IEP, identifies services needed to implement the IEP, and considers options for the provision of services.
3. For non-Howard County residents, a services plan is developed.

Students who attend private or religiously-affiliated schools or who are home-schooled receive limited services as determined on a yearly basis.



Questions regarding the Child Find Program may be referred to the Facilitator for Countywide Services at the County Diagnostic Center (410-313-7046).

## **In-depth Diagnostic Team at the County Diagnostic Center Practices and Procedures**

### **Purpose of the In-depth Diagnostic Team**

The County Diagnostic Center In-depth Diagnostic Team (IDT) assesses students in order to assist IEP teams to:

- ◆ Identify an educational disability and/or
- ◆ Utilize assessment information in program planning for initial IEP development or for students currently receiving special education services.

In most cases, students are referred to the IDT to address questions that include specific medical concerns that **impact learning**. The IDT generally assumes responsibility for all interdisciplinary assessments for students referred and seldom conducts psychological, educational, speech language, psychiatric, or occupational therapy assessments in isolation. Referrals for single assessments occur most often in the following areas: adapted physical education, physical therapy, audiological assessment, and ENT examination.

Medical assessments are conducted to assist in identifying an educational disability only and not for treatment purposes. The IDT medical assessment is not a substitute for ongoing medical care or for urgent/emergency situations. If the IDT pediatrician diagnoses a medical condition, parents will be advised to seek private follow-up. The IDT does not provide ongoing medical care.

### **Referrals to the In-depth Diagnostic Team**

School IEP teams can consider assessments through the CDC IDT when a disability with educational impact is suspected or has been identified that may be complicated by the following:

- ◆ Physical illness or chronic medical conditions
- ◆ Traumatic Brain Injury
- ◆ Effects from radiation and/or chemotherapy
- ◆ Seizure disorder or Tourette Syndrome
- ◆ Suspected additional disability related to medical issues
- ◆ Dramatic decline in functioning and a physiological basis for the deterioration is suspected

When referring Howard County Public School students to the IDT, the following should be in place:

- ◆ Involvement of school-based resource staff including, as appropriate, the school psychologist, cluster nurse, speech/language pathologist, guidance counselor, pupil personnel worker, etc.

- ◆ The Department of Special Education Resource Teacher should be aware of the student and involved in pre-referral intervention through the school problem solving team. It should be verified that the student is being instructed at the appropriate level. Screening data should be reviewed and the student should be observed.
- ◆ *The school team should generate diagnostic questions to be addressed by In-depth Diagnostic Team.*

IDT staff should be contacted when an educational disability requiring an IDT assessment is suspected. The school should call the CDC to discuss the school's particular case and the appropriateness of the referral as soon as possible and to request that a representative attend the IEP team meeting. CDC will send the appropriate forms to be completed before the meeting.

### **Types of Assessments**

The following assessments are available through the CDC In-depth Diagnostic Team:

- ◆ Adapted Physical Education Assessment
- ◆ Audiological Assessment
- ◆ Developmental, Social, Medical History
- ◆ Developmental Pediatric Assessment
- ◆ Medical Observation
- ◆ Educational Assessment
- ◆ Occupational Therapy Assessment
- ◆ EEG, as ordered by the developmental pediatrician
- ◆ Physical Therapy Assessment
- ◆ Psychiatric Assessment
- ◆ Psychological Assessment
- ◆ Speech/Language Assessment
- ◆ Vision screening
- ◆ Functional vision consultation and assessment, if warranted

### **Presentation of Assessment Results**

After IDT assessments are completed by the examiners, a collaborative "Interdisciplinary Summary" is generated which includes a review of diagnostic questions created at the referral IEP meeting, answers to diagnostic questions as determined by test findings, recommendations for consideration by the school's IEP team, a description of the student's learning profile including strengths, needs and additional recommendations for consideration by the parent(s).

Assessment results are reviewed with school staff and parents at an IEP team meeting. All appropriate disciplines from the school team should be present at the IEP team meeting to consider the recommendations generated by IDT assessment findings. The school IEP team makes final decisions regarding the determination of an educational disability. If requested, IDT staff is available for assistance with the development of the IEP.

### **Administrative Referrals**

Administrative referrals may be made by the Department of Special Education Instructional Facilitators, Coordinator, or Director under special circumstances on a case-by-case basis. Consultation with the Instructional Facilitator for Countywide Services is requested prior to making the referral.

### **School-Age Child Find Referrals**

When a student who attends a private or religiously affiliated school within Howard County or who is home schooled is referred because of a suspected educational disability, the referral process begins with a contact by the parent to the County Diagnostic Center. The recommended assessments are completed by the IDT **only** if a medical assessment is needed. If the IDT needs to be involved, IEP 1 should be scheduled as soon as possible with an IDT representative in attendance.



Questions regarding the County Diagnostic Center services may be referred to the Facilitator for Countywide Services at the County Diagnostic Center (410-313-7046).