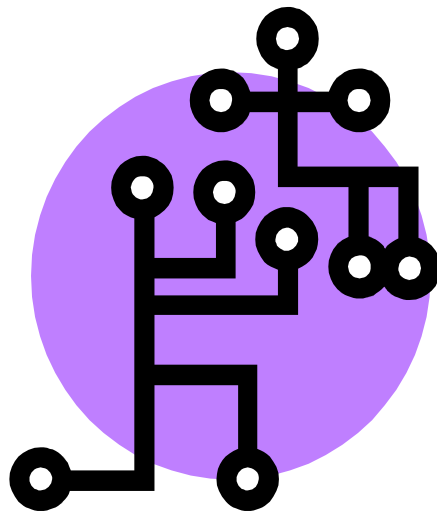


A

Special Education

Handbook



SEPTA

*Special Education
Parent Teacher Association
Plainview - Old Bethpage*

2012-2013

Have You Joined SEPTA Yet?

Please join soon so you can begin to enjoy all of the benefits of SEPTA membership:

Monthly Meetings
Round Table

Parent Training
Discussions

Guest Speakers
Networking Social Events

A membership form has been included at the end of this handbook for your convenience.

For the most current information, POB SEPTA maintains a web site at:

<http://pobsepta.org>

A Special Education Handbook

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1. Introduction

The Plainview-Old Bethpage SEPTA (Special Education Parent Teacher Association) presents this Handbook in hopes that it will help guide you through the sometimes confusing world of special education. Our intention is to provide a variety of resources, referrals, procedures and definitions in one easy to use format.

Who is this handbook for? If you have a child with special needs, or know of a child with special needs, or would just like to learn more about Special Education, then this book is for you.

We hope that you find this Handbook a useful resource.

Mission Statement for POB Central School District

The mission of the POB Central School District is to provide an academically challenging and stimulating environment for all students, and to enable them to realize their full potential to be happy, ethical and analytical citizens of the world.

We do this by:

- Making tolerance, acceptance, respect, honesty and kindness expectations for all students, and for members of the POB school community;
- Identifying each student's academic, social-emotional, aesthetic and physical needs, and striving to meet those needs; and
- Encouraging communication between and among students, teachers, parents, administrators and community members.

POB Pupil Personnel Services Contacts:

Ms. Ellie Becker	- Director of Pupil Personnel Services 937-6330
Ms. Kim Christ	- Asst. Director of PPS (K-4) 937-6325
Ms. Dolores Binstock	- Asst. Director of PPS (5-8) 937-6325
Ms. Sandy Steinberg	- Asst. Director of PPS (9-12) 937-6325

2. What is SEPTA and what can it do for you?

What is SEPTA?

SEPTA is the Special Education Parent Teacher Association. SEPTA is a separate PTA unit from all of the other PTA's in our district. It is different because SEPTA does not have its own building. Parents and staff members from the entire POB school district come together to discuss the concerns of children with special needs much more intensely than is possible at the PTA meetings which take place at the individual building level.

What is Special Education?

"Special Education means specially designed individualized or group instruction or special services or programs to meet the unique needs of students with disabilities." (VESID, NY State Parent's Guide, August 2000)

What SEPTA can do for you:

SEPTA provides education (through guest speakers), training and support to enable parents to be more effective advocates for their children and to be more effective participants in the CSE Special Education Process. Parents with experience in the Special Education system can provide support for parents who are new to the system. SEPTA is also a liaison between parents, teachers and administration. We work collaboratively to achieve the best outcomes for our children.

SEPTA Contacts:

We at SEPTA want you to know that we share your feelings and concerns and are available to offer assistance and support. Below are the names and phone numbers of the 2012/13 SEPTA Executive Committee.

President	Kathy Rea	822-1993
Executive VP	Eileen Chasan	938-7826
VP Fundraising	Linda Gould	938-0344
VP Membership	Janene Gronich	433-0839
VP Programming	Chris D'Alessandro	938-9259
VP Scholarship	Susan Cohen	692-6449
VP Communications	Lydia Wieselthier	681-0439
Treasurer	Evelyn Waltzer	433-7781
Assistant Treasurer	Christine Vitti	935-2949
Recording Secretary	Cindy Mertz	935-0322
Asst. Recording Sec.	Jan Mintz	622-0438
Corresponding Sec.	Patrice Finkelstein	681-7894
Asst. Corresp Sec.	Elizabeth Zeno-Musick	681-5617
Parliamentarian	Marylee Norton	433-7740

Please be assured that anyone you contact on the above list will maintain confidentiality of all matters that you discuss with them.

3. Resources

On the following pages you will find website links and in most cases phone numbers that you can use as a "jumping off" point to find information on your specific needs.

"Top 4" Informational Websites:

New York State Education Department
<http://www.vesid.nysed.gov/> (VESID 516-483-6510)

The National Information Center for Children and Youth with Disabilities
www.nichcy.org (800) 695-0285

FAPE (Families and Advocates Partnership for Education)
www.fapeonline.org (952) 838-9000

Internet Resources for Special Children
http://orsaminore.dreamhosters.com/handy/links/uk_various.html

Government/Legal Regulations:

IDEA Partnerships (877) CEC-IDEA
<http://www.ideapartnership.org>

Wrights Law www.wrightslaw.com

Long Island Advocacy Center (516) 248-2222
<http://www.theliac.org/>

Long Island Advocates Inc. (516) 735-5466

NYS Office of Advocates for the Disabled (800) 522-4369

Advocacy Site www.dssc.org

Youth Advocacy Site www.fvkasa.org

Support Groups:

LIDDSO- Long Island Developmental Disabilities Service Office (631) 493-1700
http://www.omr.state.ny.us/ws/ws_longisland_resources.jsp#office

Regional Special Education-Technical Assistance Support Center (RSE-TASC)
(516) 396-2989
<http://www.nassauboces.org/page/662>

Special Education Resources on the Internet (SERI)
www.seriweb.com

Asperger Syndrome Education Network www.aspennj.org

Assoc. for the Help of Retarded Children (AHRC), Nassau County Chapter
<http://www.ahrc.org/> (516) 626-1000

CHADD- Children and Adults with Attention Deficit/Hyperactivity Disorder
<http://www.chadd.org/> (800) 233-4050

Child & Adolescent Bipolar Foundation
www.bpkids.org (847) 256-8525

National Alliance for the Mentally Ill www.nami.org

The Advocates for Individ. With High functioning Autism, Asperger's, & Other Pervasive
Developmental Disorders, Corp. (516)-484-8404
www.aha-as-pdd.org/

The Autism Society of America www.autism-society.org

Epilepsy Foundation of America
www.efa.org (516) 739-7733 ext. 140

American Academy of Child & Adolescent Psychiatry
www.aacap.org (202) 966-7300

Conduct Disorders www.conductdisorders.com

Sensory Integration Resource Center www.sinetwork.org

Educating Parents of Extra Special Children
www.icdri.org/Education/educating_parents_of_extra.htm

The Council for Exceptional Children
www.cec.sped.org (888) 232-7733

ERIC (Educational Resources Information Center)
www.eric.ed.gov (800) 538-3742

Learning Disabilities on Line www.ldonline.org

Council for Learning Disabilities
www.cldinternational.org (913) 492-8755

NCLD (National Center for Learning Disabilities)
www.nclid.org (212) 545-7510

American Academy of Pediatricians School Health Resources
www.schoolhealth.org

International Dyslexia Association
www.interdys.org (410) 296-0232 local (631) 423-7834

Recording for the Blind and Dyslexic
www.rfbd.org (609) 452-0606

Parent to Parent of NY 1-800-559-1729 (631) 434-6196
<http://www.parenttoparentnys.org/>

TRAIID Project (516) 378-5089
<http://www.enablecny.org/>

Nassau Early Direction Center (516) 364-8580 (Birth to 5 years)

Commission for the Blind & Visually Handicapped (516) 564-4311
<http://www.ocfs.state.ny.us/main/cbvh/>

Big Brother/Big Sister (516) 731-7880
<http://www.bbbs.org/site/c.9iIlI3NGKhK6F/b.5962335/k.BE16/Home.htm>

North Shore Child & Family Guidance Center (516) 484-3174 ext. 234
<http://www.northshorechildguidance.org/>

Developmental Disabilities Institute (DDI) (Respite 24 hours/7 days) (631) 696-3378
<http://ddiny.org/>

Genesis School (Plainview) (Respite) (516) 937-1397

Long Island Family Support Consumer Council (631) 434-6104
<http://www.lifssac.com/>

Camps/Recreation:

Town of Oyster Bay
(516) 797-7900 GAP (Group Activities Program) Camp
http://www.oysterbaytown.com/index.asp?Type=B_BASIC&SEC={11668C1C-ED2F-40D5-A2D8-6C8867D63946}

Nassau/Suffolk Services for Autism (516) 579-5087
<http://nssainfo.org/>

ACDS (Down Syndrome & DD) (516) 933-4700
<http://www.acds.org/>

Just Kids (631) 924-0008
<http://www.justkidsschool.com/>

United Cerebral Palsy of Nassau (516) 378-2000
<http://www.ucpn.org/>

Empire State Games (631) 462-2007
<http://www.empirestategames.org/>

Special Olympics (631) 254-1465
<http://nyso.org/>

Little League Challenger (516) 349-0032
<http://www.plainviewbaseball.org/?q=node/11>

Nassau PAL (Police Activity League) Special Needs Unit (516) 333-9600
<http://www.ncpalsnu.org/>

Horse Ability (Horse Therapy) (631) 367-1646
<http://www.horseability.org>

Pal-O-Mine (Horse therapy) (631) 348-1389
<http://www.pal-o-mine.org/>

Canine Companions (631) 561-0200
www.caninecompanions.org

Sid Jacobsen JCC (Camp Kehilla) (516) 484-1545
<http://sjcccamps.org/>

Dance Techniques (516) 935-3435
<http://dancetechniques.org/services>

Playorena Music & More (516) 883-7529 (ages 3 months to 4 years)
<http://www.playorena.com/>

Camp Helen Keller (516) 485-1234, ext 607
<http://www.hknc.org/>

Camp Loyaltown, AHRC (516) 293-1111
<http://www.ahrc.org/>

Camp Pa-Qua-Tuck (631) 878-1070
<http://www.camppaquatuck.com/>

Summitt Camp (800-323-9908)
<http://www.summitcamp.com/>

Books/Magazines/ Special Needs Catalogs:

Exceptional Parents www.eparent.com

Abilitations www.abilitations.com

Sammons Preston www.sammonspreston.com

Flag House www.flaghouse.com

Ablenet www.ablenetinc.com

4. Glossary of Terms

Acronyms:

ABA- Applied Behavior Analysis
ADA- American's with Disabilities Act
ADHD- Attention Deficit Hyper Disorder
AIS- Academic Intervention Services
APD- Auditory Processing Disorder
ASD- Autism Spectrum Disorder
BIP- Behavior Intervention Plan
BOCES- Board of Cooperative Educational Services
CP- Cerebral Palsy
CPSE- Committee on Preschool Education
CSC- Child Study Committee
CSE- Committee on Special Education
EDGAR- Education Department General Administrative Regulations
EI- Early Intervention
ESY- Extended School Year
FAPE- Free Appropriate Public Education
FBA- Functional Behavioral Assessment
FERPA- Family Education Rights and Privacy Act
IDEA- Individual with Disabilities Education Act
IEP- Individualized Education Plan
IST- Instruction Support Team
LD- Learning Disability
LRE- Least Restrictive Environment
OCR- Office of Civil Rights (Dept. of Education)
ODD- Oppositional Defiant Disorder
OSEP- Office of Special Education Programs (US Dept. of Education)
OSERS- Office of Special Education and Rehabilitative Services
OT- Occupational Therapy
PDD- Pervasive Developmental Disorder
PPS- Pupil Personnel Services
PT- Physical Therapy
RtI – Response to Intervention
SEA- State Education Agency
SEPTA- Special Education Parent Teacher Association
SETRC- Special Education Training Resource Center
TOVA- Test of Variable Attention
VESID- Vocational and Educational Services for Individuals with Disabilities
WASI- Weschler Abbreviated Scale of Intelligence
WIAT-III- Weschler Individual Achievement Test, Third Addition
WISC-IV- Weschler Intelligence Scale for Children - IV

Terminology:

Accommodations– allows a student to complete the same assignment or test as other students, but with a change in the timing, formatting, setting, scheduling, response and/or presentation.

Achievement Tests – a test that measures the extent to which a person has acquired certain information or mastered certain skills, usually as a result of planned instruction or training.

Adaptive Physical Education – a special physical education program developed to fit the limits and disabilities of persons with handicaps.

Advocate (Advocacy)- an individual who is not an attorney, but who assists parents and children in the dealings with school districts regarding the child's special education program.

Annual Review- an evaluation, conducted annually which may or may not include formal testing, by the Committee of Special Education to review the past school year and plan for the next one. The purpose is to recommend continuation, modification, or termination of the special education services and programs.

Aphasia- inability to acquire meaningful spoken language by the age of three usually resulting from damage or disease to the brain.

Apraxia- difficulty sequencing the motor movements necessary for volitional speech.

Applied Behavior Analysis (ABA)- scientific approach to behavior. It is a specific highly-structured technique for analyzing the causes and effects of behavior with the goal of teaching and learning socially and academically appropriate behavior.

Aptitude Tests - tests designed to measure a person's ability to learn and the likelihood of success in future school/work or in a specific career.

Articulation – refers to the production of speech sounds resulting from the movements of the lips, jaw and tongue as they modify the flow of air.

Assistive Technology – equipment that enhances the ability of students and employees to be more efficient and successful. (i.e. Tape recorder/Laptop)

Behavior Intervention Plan (BIP)- This is developed based on the results of the Functional Behavioral Assessment and includes a description of the problem behavior and intervention strategies to address the behavior.

Behavior Modification – a technique intended to change behavior by rewarding desirable actions and ignoring or "negatively rewarding" undesirable actions.

Binocular Fusion – the blending of separate images from each eye into a single meaningful image.

Central Auditory Processing Disorder- a person with this disorder typically has normal hearing sensitivity, but experiences difficulty analyzing or making sense of what they hear.

Central Nervous System – the brain and spinal cord.

Classification- a disability category that most appropriately describes your child.

Cognitive Ability – intellectual ability, thinking and reasoning skills.

Confidential File – file maintained by the school. Contains evaluations conducted to determine whether a child is handicapped, as well as any other information related to special education placement. This is a limited access file. Parents do have a right to inspect the file and have copies of any information contained in it.

Conceptual Disorder – disturbances in thinking, reasoning, generalizing and memorizing.

CPSE- Committee on Preschool Special Education; responsible for children ages 3-5 with disabilities.

CSE- Committee on Special Education; responsible for children 5-21 with disabilities. A multidisciplinary team convening to evaluate the needs of a student and to determine eligibility of special education programs and/or services.

Declassification- process in which a disabled child is no longer in need of special education services.

Decoding – the process of getting meaning from written or spoken symbols.

Development Aphasia- a severe language disorder that is presumed to be due to brain injury rather than because of a developmental delay in the normal acquisition of language.

Developmentally Delayed – a delay in some aspect of physical or mental development.

Disability- a physical, sensory, cognitive or affective impairment that substantially limits one or more of the major life activities.

Discrepancy – significant difference.

Distractibility – the shifting of attention from the task at hand to sounds, sights and other stimuli that normally occur in the environment.

Due Process – the application of law to ensure that an individual's rights are protected. When applied to children with learning disabilities, due process means that parents have the right to request a full review of any educational program developed for their child.

Dysarthria – a disorder of the speech muscles that affects the ability to pronounce words.

Dyscalculia- a severe difficulty in understanding and using symbols or functions needed for success in mathematics.

Dysgraphia- a severe difficulty in producing handwriting that is legible and written at an age-appropriate speed.

Dyslexia- a severe difficulty in understanding or using one or more areas of language, including listening, speaking, reading, writing and spelling.

Dysnomia- a marked difficulty in remembering names or recalling words needed for oral or written language.

Dyspraxia- a severe difficulty in performing drawing, writing, buttoning and other tasks requiring fine motor skill, or in sequencing the necessary movements.

Early Intervention Program – a program specifically designed to assist developmentally delayed infants and preschool children. The purpose of this type of program is to help prevent problems as the child matures.

Educational Evaluation – One of the components necessary to determine whether a child is handicapped. The evaluation generally consists of a battery of tests and/or classroom observation and analysis of class work designed to determine the current levels of achievement in areas such as reading, math, spelling, etc. Perceptual abilities and learning style may also be evaluated.

Encoding – the process of expressing language.

Expressive Language – communication through writing, speaking, and/or gestures.

Extended School Year Services- 12 month program

Eye-Hand Coordination – the ability of the eyes and hands to work together to complete a task.

Fast ForWord- A technology based program that rapidly builds oral and written language comprehension skills.

Fine Motor Skills – the use of small muscles for precision tasks such as writing, tying bows, zipping a zipper, typing, doing puzzles.

Functional Behavioral Assessment- process of determining why a child engages in behaviors that impede learning. It identifies the problem behavior, facts that contribute to the behavior and under which conditions the behavior occurs.

General Education – all education not included under Special Education.

Gross Motor Skills – the use of large muscles or activities requiring strength and balance. Examples are walking, running and jumping.

Hyperactivity – disorganized and disruptive behavior characterized by constant and excessive movement.

Hyperkinesis – another term for hyperactivity.

Hypoactivity – underactivity; a child may appear to be in a daze, lacking energy.

IDEA- The Individuals with Disabilities Education Act is a law that states that children with disabilities have the right to a free appropriate public education, including procedural protections and the right to an education that is standards based.

IEP (Individualized Education Plan) – a written educational program that outlines a disabled child's current levels of performance, related services, education goals, and modifications. This plan is developed by a team including the child's parents, teachers, and support staff.

Impulsivity – reacting to a situation without considering the consequences.

Inclusion- a philosophy whereby disabled individuals are included socially and educationally with the general population of their peers as much as possible.

Instructional Support Team- team comprised of a teacher, psychologist, guidance counselor, social worker, and/or special education teacher to assist teachers and parents in helping students who are having difficulty in school by devising strategies to alleviate the problem.

Integrated Co-Teaching – a program model in which the special education teacher demonstrates for, or team teaches with the general classroom teacher to help a LD student be successful in a regular classroom.

Itinerant Services- support provided by an outside group or agency who comes to the school to provide technology based services, adaptive access support for the visually impaired, support for the hearing impaired, etc.

Learning Disabilities – disorders of the basic psychological processes that affect the way a child learns. Many children with learning disabilities have average or above average intelligence. Learning disabilities may cause difficulties in listening, thinking, talking, reading, writing, spelling, or arithmetic.

Least Restrictive Environment- the least restrictive setting in which the disabled child can function. This placement is determined by the CSE.

Mainstream – the practice of educating classified special education children in the regular classroom for at least part of the child's school programs.

Modifications- changes in procedure or format which provide a child with an equal opportunity to participate and demonstrate his/her knowledge and abilities. They can include changes in presentation, method of child's response and/or process child uses to drive responses.

Multidisciplinary Team – in education, a group made up of a child's classroom teacher and several educational specialists that evaluates the child's disability and prepares an Individualized Education Plan for the child.

Multi-Sensory Learning/Instruction - an instructional approach that combines auditory, visual and tactile elements into a learning task.

Neuropsychological Examination – a series of tasks that allow observation of performance that is presumed to be related to the intactness of brain function.

Orton-Gillingham – an approach to teaching individuals with learning disabilities. The technique stresses a multi-sensory, phonetic, structured, sequential approach to learning.

Parent Member- a voluntary member of the Committee of Special Education who also has a child with a disability.

Part 200 Regulations- Laws that govern Special Education

Perceptual Handicap – difficulty in ability to process and organize as well as interpret information through the senses.

Perseveration – the repeating of words, motions, or tasks.

Pupil Personnel Services- office in charge of special education services, home tutoring, CSE placement, 504 services, student attendance, and building support teams.

Reading Recovery- A highly effective short term intervention of one-on-one tutoring for low achieving first graders.

Receptive Language – language that is spoken or written by others and received by the individual.

Reevaluations – The school is not required to reevaluate a child more often than once a year, unless the parent and school agree to more frequent evaluations. The school shall evaluate at least every three years, unless the parent and school agree that a reevaluation is unnecessary. The school must reevaluate if changing educational needs warrant a reevaluation or if the child's parent or teacher requests a reevaluation.

Rehabilitation Act of 1973 – the Civil Rights Act for the Handicapped. The act prohibits discrimination on the basis of physical or mental handicap in all federally-assisted programs. (Section 504 is part of this.)

Related Services- support services provided to disabled children to assist in their ability to learn and function in the least restrictive environment. Such services may include in-school counseling, speech and language services, occupational therapy, etc.

Resource Program (Supplementary Instruction) – a program model in which a student with LD is in a regular classroom for most of each day, but also receives regularly scheduled individual services in a specialized LD resource classroom.

School Based Support Team- A group of people (administrator, regular education teacher, special education teacher, psychologist, therapists, etc.) who gather to review information about the children receiving special education services.

School Health Services- services provided by a qualified school nurse or other qualified person.

Section 504- A civil rights statute designed to eliminate discrimination on the basis of disability in any program or activity receiving federal financial assistance. Some individuals who do not qualify for services under IDEA may receive supportive services and/or classroom modifications under Section 504.

Self-Contained – special class for specific types of disabled students who spend all or the largest portion of the school day in this setting.

Social History- a report of information gathered and prepared by qualified school district personnel pertaining to the interpersonal, familial and environmental variables which influence a student's general adaptation to school.

Special Education – specially designed individualized or group instruction or special services or programs, and special transportation , provided at no cost to the parent, to meet the unique needs of students with disabilities.

Standardized Testing – a test that compares a child's performance with the performance of a large group of similar children.

Tactile – having to do with the sense of touch.

Transition – commonly used to refer to the change from secondary to postsecondary programs, work and independent living typical of young adults. Also used to describe other periods of major change such as from more specialized to mainstreamed settings.

Visual Perception – ability to correctly interpret what is seen.

Specialists/Special Education Providers

Many specialists or professionals may assist you in meeting the needs of your son/daughter with learning differences or learning disabilities. Below is a brief list of some of those specialists along with a simple explanation of the services they provide.

Audiologist: assesses hearing acuity and provides services for auditory training; advises on devices for hearing amplification.

Co-Integrated Classroom Teacher: a special education teacher who works hand-in-hand (collaboratively) with a regular education teacher to teach a class comprised of regular education and special education students.

Consultant Teacher: a teacher who provides direct and/or indirect services to a student with a disability who attends regular education classes and/or to the students regular education teachers.

Educational Consultant: individual who may conduct educational evaluations; familiar with school curriculum but may or may not have a background in special education issues.

Educational Psychologist: administers and interprets psychological and educational tests, interprets behavior, and consults with parents around educational issues.

Educational Therapist: assesses, develops and implements appropriate remedial programs for learning and behavior problems.

Neurologist: medical doctor who assesses for potential damage to the brain and may provide medication to assist in enhancing brain function.

Neuro-psychologist: psychologist who assesses for possible impaired areas of the brain that might be affecting verbal and non-verbal functions in learning and social skills on the behavioral level. Provides interventions to help maximize cognitive strengths and minimize weaknesses.

Occupational Therapist: treats for restoration or improvement of impaired motor or sensory functions in order to improve ability to perform tasks for independent living.

Ophthalmologists: physicians who specialize in the diagnosis of the eye and structures related to it.

Optometrists: trained and licensed to examine the test eyes and to treat defects by prescribing lenses and by developing programs of eye exercise.

Orthopedists: surgeons who specialize in preserving and restoring the function of the skeletal system, as well as muscles, joints, tendons, ligaments, nerves and blood vessels.

Pediatrician: provides medical services to infants, children and adolescents; trained in overall growth and development of these individuals and their motor, sensory and behavioral development.

Physical Therapist: skilled in the techniques of treatment to rehabilitate and restore fundamental body movements after illness or injury. PT's work under the supervision of a physician. Their focus is on large muscle and gross motor activities.

Program Specialist: specialist with expertise in at least one of the disabling conditions who provides services of consultation, staff development and program evaluation and innovation.

Psychiatrist: medical doctor who specializes in the behavior and emotional aspects of infants, children and adolescents and may prescribe medication as necessary.

Psychologist: provides psychological and intellectual assessment and addresses issues relating to an individual's mental and emotional health.

Reading Specialist: specialist who provides expert instruction to learners who differ in language, learning styles, culture, and ability. This person can adapt instruction for diverse learners and provide effective learning strategies and practices for school, staff, and parents.

Resource Room Teacher: a teacher who provides specialized supplementary instruction in an individual or small group setting.

Speech and Language Specialist: identifies and provides services for children with articulation problems, as well as expressive and/or reception language problems.

Eligibility Criteria For Disability Categories

Listed below are the criteria for the 13 disability categories that must be used to determine whether a child demonstrates a disability and is in need of special education and related services. The presence of a disability is not sufficient to establish eligibility for special education. The disability must result in an educational deficit that requires specially designed instruction (i.e. special education).

1. Autism *To be eligible for special education and related services as a child with autism, a child must:*

- Exhibit a developmental disability significantly affecting verbal and non-verbal communication and social interaction, generally evident before age 3, that adversely affects educational performance; and
 - Require special facilities, equipment, or methods to make the child's educational program effective; and
 - Be diagnosed as autistic by a psychiatrist, physician, or psychologist; and
 - Be certified by a group consisting of qualified professionals and a parent of the child as qualifying for and needing special education services.
- Characteristics of autism include:
- Irregularities and impairments in communication.
 - Engagement in repetitive activities and stereotyped movements.
 - Resistance to environmental change or change in daily routines.
 - Unusual responses to sensory experiences.
 - A child who manifests the above characteristics after age 3 may be diagnosed as having autism.

2. Deafness *To be eligible for special education and related services as a child with deafness, a child must:*

- Exhibit a hearing impairment that hinders the child's ability to process linguistic information through hearing, with or without amplification and that adversely affects educational performance; and
- Require special facilities, equipment, or methods to make his or her educational program effective; and
- Be diagnosed by a physician or audiologist as deaf; and
- Be certified by a group consisting of qualified professionals and a parent of the child as qualifying for and needing special education services.

3. Deaf-Blindness *To be eligible for special education and related services as a child with deaf-blindness, a child must:*

- Exhibit concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational problems that the child cannot be accommodated in a special education program solely for deaf or blind children; and
- Require special facilities, equipment, or methods to make his or her educational program effective; and
- Be diagnosed by an optometrist or ophthalmologist and by a physician or audiologist, as appropriate, as deaf-blind; and
- Be certified by a group consisting of qualified professionals and a parent of the child as qualifying for and needing special education services.

4. Emotional Disturbance *To be eligible for special education and related services as a child with emotional disturbance, a child must:*

- Have a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects educational performance:
 - An inability to learn that cannot be explained by intellectual, sensory, or health factors;
 - An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
 - Inappropriate types of behavior or feelings under normal circumstances;
 - A generally pervasive mood of unhappiness or depression; or
 - A tendency to develop physical symptoms of fears associated with personal or school problems.
- Require special facilities, equipment or methods to make his or her educational program effective; and
- Be diagnosed as emotionally disturbed by a psychiatrist or psychologist; and

- Be certified by a group consisting of qualified professionals and a parent of the child as qualifying for and needing special education services.
Note: The term includes children who are schizophrenic but does not include children who are socially maladjusted unless it is determined that they have an emotional disturbance. It is important to distinguish children demonstrating an emotional disturbance from children with other behavior problems.

5. **Hearing Impairment** *To be eligible for special education and related services as a child with a hearing impairment, a child must:*

- Exhibit a hearing impairment, whether permanent or fluctuating, that adversely affects educational performance but is not within the meaning of deaf; and
- Require special facilities, equipment, or methods to make his or her educational program effective; and
- Be diagnosed by a physician or audiologist as hard of hearing; and
- Be certified by a group consisting of qualified professionals and a parent of the child as qualifying for and needing special education services.

6. **Learning Disability** *To be eligible for special education and related services as a child with a learning disability, all of the following six components must be addressed:*

- The child must exhibit a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations.

The term specific learning disability:

- Includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia.
- Does not include children who have learning problems that are primarily the result of a visual disability; motor disability; hearing disability; mental retardation; emotional disturbance; environmental, cultural or economic disadvantage.
- The group of qualified professionals and a parent of the child must show that:
- The child demonstrates limited academic achievement for his or her age and ability levels in one or more of the following areas when provided with learning experiences appropriate for the child's age and ability levels: oral expression; listening comprehension; written expression; basic reading skills; reading comprehension; reading fluency; mathematics calculation; mathematical problem solving. As evidenced by:
- The child does not make sufficient progress to meet age or State approved grade level standards in one or more areas identified above when using a process based on the child's response to scientific research-based intervention.
- The child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, State approved grade level standards or intellectual development that is determined by the group using approved assessments.

Note: LEAs are not required to consider whether a child has a severe discrepancy between achievement and intellectual ability when determining whether a child has a learning disability and permitting LEAs to use a response to research-based intervention as part of an evaluation process and may permit the use of the other alternative research-based procedures for determining whether a child has a specific learning disability.

- The team must also ensure the following:
- At least one team member, other than the child's regular teacher, must observe the child's academic performance in the regular classroom setting;
- In the case of a child who is of less than school age or is out of school, a team member must observe the student in an environment appropriate for a child that age; and,
- The observation report must document the name and title of the observer, as well as the date and place of the observation. This report must also be attached to the Evaluation Summary and Eligibility Report (Appendix C).
- The group of qualified professionals and a parent of the child must prepare a written report of the evaluation results that includes statements of:
- Whether the child has a specific learning disability;
- The basis for making the determination;
- The relevant behavior(s) noted during the observation of the child;

- The relationship of the behavior(s) to the child's academic functioning;
- Medical information, if any, related to the child's educational functioning,
- The nature of the severe discrepancy between intellectual ability and academic achievement or lack of response to intervention which is not correctable without special education and related services; and,
- The determination of the team regarding the effects of environmental, cultural, or economic factors on the child's academic performance. The report must be dated and team members must indicate their agreement or disagreement with the report's conclusions, and then sign the report. A team member who disagrees with the conclusions of this report must submit a separate statement of his or her own conclusions.
- The student must require special facilities, equipment, or methods to make his or her education program effective.
- The student must be certified by a group consisting of qualified professionals and a parent of the student as qualifying for and needing special education services.

7. **Mental Retardation** *To be eligible for special education and related services as a child with mental retardation, a child must:*

- Score two or more standard deviations below on an individual standardized test of intelligence; and
- Exhibit deficits in adaptive behavior manifested during the developmental period that adversely affect the child's educational performance; and
- Require special facilities, equipment or methods to make his or her educational program effective; and
- Be diagnosed as mentally retarded by a psychiatrist or psychologist; and
- Be certified by a group of qualified professionals and a parent of the child as qualifying for and needing special education services.

8. **Multiple Disabilities** *To be eligible for special education and related services as a child with multiple disabilities, a child must:*

- Exhibit two or more of the impairments described in this section, the combination of which causes such severe education problems that he or she cannot be accommodated in a special education program for solely one of the conditions; and
- Require special facilities, equipment, or methods to make his or her educational program effective; and
- Be diagnosed as described in this section for each condition; and
- Be certified by a group consisting of qualified professionals and a parent of the child as qualifying for and needing special education services that cannot be provided in a program for a single condition set out in this section.

Note: The term multiple disabilities does not include deaf-blindness. Children with multiple disabilities exhibit two or more severe disabilities that are likely to be life-long, significantly interfere with independent functioning, and necessitate environmental modifications to enable the individual to participate in school and society. A learning disability and speech or language impairment does not constitute a multiple disability. Likewise, a child with mental retardation who receives speech therapy as a related service would not be found eligible under this category.

9. **Orthopedic Impairment** *To be eligible for special education and related services as a child with an orthopedic impairment, a child must:*

- Exhibit a severe orthopedic impairment, including impairments caused by a congenital anomaly, disease or other causes, that adversely affects educational performance; and
- Require special facilities, equipment, or methods to make his or her educational program effective; and
- Be diagnosed by a physician; and
- Be certified by a group consisting of qualified professionals and a parent of the child as qualifying for and needing special education services.

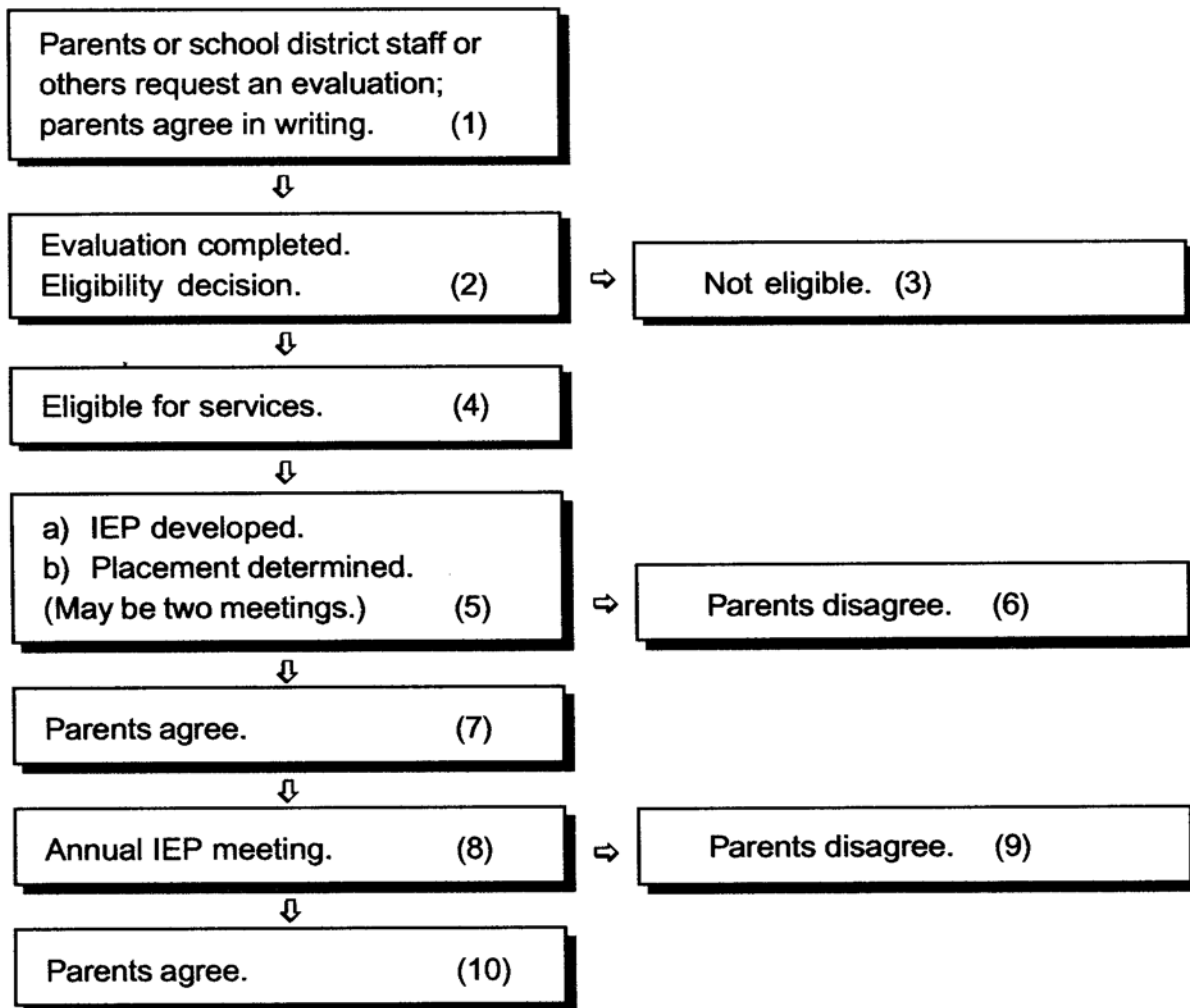
10. **Other Health Impairment** *To be eligible for special education and related services as a child with a health impairment, a child must:*
- Exhibit limited strength, vitality, or alertness, due to chronic or acute health problems, such as a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, Tourette Syndrome, hemophilia, epilepsy, lead poisoning, leukemia, or diabetes; or a heightened alertness to environmental stimuli due to Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD) that adversely affects educational performance;
11. **Speech or Language Impairment** *To be eligible for special education and related services as a child with a speech or language impairment, a child must:*
- Exhibit a communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment, that adversely affects educational performance; and
 - Require special facilities, equipment, or methods to make his or her educational program effective; and
 - Be diagnosed by a physician, speech-language pathologist, or a speech-language therapist as speech or language impaired; and
 - Be certified by a group consisting of qualified professionals and a parent of the child as qualifying for and needing special education services.
12. **Traumatic Brain Injury** *To be eligible for special education and related services as a child with a traumatic brain injury, a child must:*
- Exhibit an acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial maladjustment, or both, that adversely affects educational performance. The term includes open or closed head injuries resulting in mild, moderate, or severe impairments in one or more areas, including cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual and motor abilities; psychosocial behavior; physical functions; information processing; and speech. The term does not include brain injuries that are congenital or degenerative, or brain injuries induced by birth trauma; and
 - Require special facilities, equipment, or methods to make his or her educational program effective; and
 - Be diagnosed by a physician as having a traumatic brain injury; and
 - Be certified by a group consisting of qualified professionals and a parent of the child as qualifying for and needing special education services.
13. **Visual Impairment** *To be eligible for special education and related services as a child with a visual impairment, a child must:*
- Exhibit a visual impairment, not primarily perceptual in nature, resulting in measured acuity of 20/70 or poorer in the better eye with correction, or a visual field restriction of 20 degrees as determined by an optometrist or ophthalmologist, that even with correction, adversely affects educational performance; or
 - Exhibit a physical eye condition that affects visual functioning to the extent that specially designed instruction is needed; and
 - Require special facilities, equipment, materials, or methods to make his or her educational program effective as determined by a teacher of students with visual impairments; and
 - Be certified by a group consisting of qualified professionals, which includes a certified teacher of students with visual impairments, and a parent of the child as qualifying for and needing special education services.

5. Understanding The Special Education Process

An Overview for Parents

The chart below offers an overview of the special education process. It is not designed to show all steps or the specific details. It shows what happens from the time a child is referred for evaluation and is identified as having a disability, through the development of an individualized education program (IEP).

The process begins when someone (school staff, parents, etc.) makes a referral for an initial evaluation. An explanation of each numbered area follows the chart.



Families and Advocates Partnership for Education (FAPE)

FAPE Coordinating Office: PACER Center, Inc. 8161 Normandale Blvd., Minneapolis, MN 55437

952-838-9000 voice ~ 952-838-0190 TTY ~ 952-838-0199 fax ~ 1-888-248-0822 toll-free

Web site: www.fape.org ~ E-mail: fape@pacer.org

Readers are encouraged to copy and share this information, but please credit PACER Center.

How the process works

1. Parents, school personnel, students, or others may make a request for evaluation. If you request an evaluation to determine whether your child has a disability and needs special education, the school district must complete a full and individual evaluation. If it refuses to conduct the evaluation, it must give you appropriate notice and let you know your rights.

You must give permission in writing for an initial (first-time) evaluation and for any tests that are completed as part of a reevaluation.

2. A team of qualified professionals and you will review the results of the evaluation, and determine if your child is eligible for special education services.

3. If your child is not eligible, you will be appropriately notified and the process stops. However, you have a right to disagree with the results of the evaluation or the eligibility decision.

If you disagree with the results of an evaluation, you have a right to an *Independent Educational Evaluation (IEE)*. Someone who does not work for the school district completes the IEE. The school district must pay for the IEE or show at an impartial due process hearing (*see box on next page*) that its evaluation is appropriate.

4. If you and the school district agree that your child is eligible for services, you and the school staff will plan your child's *Individualized Education Program (IEP)*, at an IEP team meeting. You are an equal member of this team. Some states may have a different name for the IEP team meeting.

5. The IEP lists any special services your child needs, including goals your child is expected to achieve in one year, and objectives or benchmarks to note progress. The team determines what services are in the IEP, as well as the location where those services and modifications. At times, the IEP and placement decisions will take place at one meeting. At other times, placement may be made at a separate meeting (usually called a *placement meeting*.)

Placement for your child must be in the *Least Restrictive Environment (LRE)* appropriate to your child's needs. He or she will be placed in the regular classroom to receive services unless the IEP team determines that, even with special additional aids and services, the child cannot be successful there. You are part of any group that decides what services your child will receive and where they will be provided.

6. **If you disagree** with the IEP and/or the proposed placement, you should first try to work out an agreement with your child's IEP team. If you still disagree, you can use your due process rights. (*See box on last page.*)

7. **If you agree** with the IEP and placement, your child will receive the services that are written into the IEP. You will receive reports on your child's progress at least as often as parents are given reports on their children who do not have disabilities. You can request that the IEP team meet if reports show that changes need to be made in the IEP.

8. The IEP team meets at least once per year to discuss progress and write any new goals or services into the IEP. As a parent, you can agree or disagree with the proposed changes. If you disagree, you should do so in writing.
9. If you disagree with any changes in the IEP, your child will continue to receive the services listed in the previous IEP until you and school staff reach agreement. You should discuss your concerns with the other members of the IEP team. If you continue to disagree with the IEP, you have several options, including asking for additional testing or an Independent Educational Evaluation (IEE), or resolving the disagreement using due process. (*See last page.*)
10. Your child will continue to receive special education services if the team agrees that the services are needed. A reevaluation is completed at least once every three years to see if your child continues to be eligible for special education services and to decide what services he or she needs.

Due process protects the right of parents to have input into their child's educational program and to take steps to resolve disagreements. When parents and school districts disagree with one another, they may ask for an impartial hearing to resolve issues. Mediation must also be available.

Mediation is a meeting between parents and the school district with an impartial person, called a mediator, who helps both sides come to an agreement that each finds acceptable.

An impartial due process hearing is a meeting between parents and the school district. Each side presents its position, and a hearing officer decides what the appropriate educational program is, based on requirements in law.

School districts must give parents a written copy of special education procedural safeguards. This document outlines the steps for due process hearings and mediation. Parents must be given a copy when their child is first referred for an evaluation and each time they are notified of an IEP meeting for their child.

If you would like more information about special education or about your rights, call your state Parent Training and Information Center. If you do not know the number, call PACER Center at our national toll-free number: 1-888-248-0822. We will be happy to connect you with someone who can help you.

Funding for the FAPE Project comes from the U.S. Department of Education, Office of Special Education Programs (Cooperative Agreement No. H326A980004). This document was reviewed by the U. S. Office of Special Education Programs (OSEP), the OSEP Project Office, and the FAPE Project Director for consistency with the Individuals with Disabilities Education Act Amendments of 1997. The contents of this document do not necessarily reflect the views or policies of the U.S. Department of Education, nor does mention of other organizations imply endorsement by those organizations or the U.S. Government.

SEPTA

Special Education
Parent Teacher Association
Plainview - Old Bethpage

Welcome to the 2012/13 school year! SEPTA would like you to join our organization and become an active member. SEPTA is an acronym for Special Education Parent Teacher Association and we are a district-wide PTA with members from all of the schools and representatives on all of the district's committees.

SEPTA brings together parents, teachers, administrators, service providers, relatives, and friends in an effort to promote understanding of children with special needs and provide appropriate support. We have many programs and activities including our yearly Night Out, Family Fun Day and Track & Field Day run in conjunction with the Booster Club. Our monthly meetings offer opportunities to hear guest speakers, meet with others with similar experiences and share tips and ideas. Please check the district calendar for more information and our meeting dates.

SEPTA looks forward to the return of past members and meeting new ones too. We hope you'll join us in both membership and attendance!

Kathy Rea
SEPTA President

Janene Gronich
VP - Membership

SEPTA Membership Form 2012-2013

Membership: **\$10.00** per person –**please make check payable to POB SEPTA**. We encourage spouses to join!

Name(s): _____

Address: _____

Phone #: _____ Email: _____

I am: Parent Teacher Administration Other _____

School I am affiliated with: _____

Please return this form with your check to: **Janene Gronich/SEPTA, 76 Jamaica Avenue, Plainview, NY 11803**

Scholarship Donation Form 2012-2013

Every June, SEPTA presents outstanding graduating seniors with Scholar Awards. We appreciate the generous donations from parents, our school community, and local businesses that allow for this recognition. This school year we hope to again acknowledge motivated young adults who have received special education services, and we are asking for your support of this worthy endeavor.

Name(s): _____

Address: _____

Phone #: _____ Total Scholarship \$ _____

Please make check payable to POB SEPTA and write Scholarship on the bottom.

You may return this form with your check to: **Susan Cohen/SEPTA, 120 Harvard Drive, Plainview, NY 11803**