Additional Material

Leading Special Education at the School Site: A Comprehensive Workshop for Principals

1. IEP organizing checklist
2. Section 504 Accommodations
3. People First Language
4. Placement Checklist
5. Transition Skills
6. Additional Websites
WHAT DOES A PRINCIPAL NEED TO KNOW ABOUT ORGANIZING AND LEADING AN IEP MEETING?

Adapted from the Principal’s Guide to Special Education
Written by Dr. David Bateman
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As a principal you may be asked to set-up and lead an IEP or Evaluation meeting. The following is a list of steps to do before and during a meeting. Not all of the steps will apply each time, but the below resource will help you think about the process and assist in ensuring the student receives FAPE.

**Before the Meeting**

1. The parent receives a copy of the drafted IEP for review prior to the meeting.

2. When requested, the parent is allowed to review the student’s special education file, which includes previous IEP’s and Evaluations.

3. There has been clear and frequent communication with the parent or guardian regarding the student's educational progress in the classroom.

**Meeting**

4. The IEP meeting is held and the IEP developed within 30 days of the initial determination the student needs special education and related services.

5. The IEP is reviewed at least every 365 days (or more often when necessary.)

6. The meeting is scheduled with the parent(s) in an agreed upon time and place.

7. The written notice of the meeting included:
   - ___ purpose of the meeting.
   - ___ time of the meeting.
   - ___ location of the meeting.
   - ___ participants in the meeting.
   - ___ parents can bring other people who have knowledge or expertise regarding the student.

8. Required participants included:
   - ___ An administrator or designee who: is qualified to provide or supervise special education, is knowledgeable about the general education curriculum; and is knowledgeable about the availability of resources of the public agency.
   - ___ not less than one regular education teacher (unless the student does not have any regular education teachers).
   - ___ Not less than one special education teacher
   - ___ one or both parents (parents, guardians, or surrogate parents).
   - ___ the student, where appropriate (district is required to invite the student at age 16 or if transition is discussed).
   - ___ a person who can interpret the instructional implication of evaluation results (this may be one of the participants described above).
   - ___ others at the parents' or schools' discretion.

9. Interpreter services, if necessary.
10. A current IEP must be in effect at the beginning of the school year. Therefore the team will need to discuss to ensure this is the case.

Contents

11. IEP is developed at the meeting by the IEP team participants (a draft may be developed ahead of time).

12. IEP is developed before any placement decisions are made.

13. The IEP covers all areas where the student needs specially designed instruction and accommodations or modifications.

14. IEP lists the student's present level of educational performance in each area where the student has needs.

15. Annual goals, based on the current level of educational performance, state what the student will learn and how progress will be measured.

16. Short-term instructional objectives, which are measurable steps developed for each goal, which will lead to the achievement of the goal. Not all annual goals will include short term objectives.

17. Each annual goal and short-term objective states what the student will do, under what conditions, and to what criteria and consistency.

18. All related services the student needs to benefit from special education (including transportation) are listed in the IEP.

19. The IEP lists the beginning date, duration, frequency, and amount of time spent on specially-designed instruction and related services.

20. The IEP lists the extent of participation in education or school activities with non-disabled students.

21. The IEP lists the location of services for each area.

Placement

22. The student's placement is based on the requirements in the IEP.

23. The student's placement is as close to home as possible, preferably in the school the student would be attending if not eligible for special education.

After the meeting

24. The parent receives a copy of the evaluation and IEP.

25. The IEP is implemented as soon as possible following the IEP meeting.

26. The IEP is reviewed and revised as often as needed, but must be rewritten at least once a year.

27. The parent is informed of the option to request a due process hearing if unsatisfied with the appropriateness of the educational program specified in the IEP.

28. If the parent disagrees with the school district evaluation, notify them that they have the right to request an independent educational evaluation (Please discuss this with your special education administrator).
Section 504
Sample Accommodations and Modifications

This Appendix contains examples of 504 accommodations and modifications. An accommodation is any technique that alters the academic setting or environment in some way, but does not change the content of required work. A modification is any technique that alters the work required in such a way that it differs in substance from the work required of other students in the same class. Teams must assess when modifications are implemented in a plan whether or not student grading must also be adjusted. Some intervention tools might be seen as either an accommodation or a modification, depending on the situation or on the implementation.

This is intended to be a staff document. The following examples are not offered as check lists and should not be considered as all-inclusive or mandatory listings. The examples are intended to serve as “starters” for 504 teams designing accommodation plans that meet a student’s specific need(s). The best 504 plans incorporate teacher expertise and available regular education resources. The Team process involves schools in identifying the resources they (and outside agencies) have to support various student needs. Obviously, the kinds of accommodations schools can provide will vary based on school configuration age of student, etc. The 504 evaluation team decides the accommodations that will best support a particular student. The following examples are organized into two groups. The first group includes general environmental, organizational, behavioral, presentation, and assessment strategies. The second group includes possible examples of accommodations that might be valuable when dealing with specific disability profiles.

Examples of General Accommodations
- Environmental Strategies
- Organizational Strategies
- Behavioral Strategies
- Presentation Strategies
- Evaluation Methods

Examples of Accommodations for Specific Disabilities

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| Cerebral Palsy  | Hearing impairment    | Weight (obesity, anorexia,)
| AIDS            | Learning Disability   | Bulimia                 |
|                 | Leukemia              |                         |

Examples of General Accommodations

General program accommodations/adjustments or services are always made on a case-by-case basis and individualized. Accommodations are to be reasonable and are intended to provide persons with disabilities compensation for their functional limitation(s) due to a mental or physical impairment. Where Section 504 is concerned, accommodations are made to bring a student with a disability to the same starting point as a non-disabled student. Consequently, the accommodations defined in a Section 504 plan are those interventions that are not typically available to all students.

Environmental Strategies
- Provide a structured learning environment
- Make separate "space" for different types of tasks
- Possible adapting of non-academic times such as lunch, recess, and physical education
- Change student seating
- Utilize a study carrel
- Alter location or personal or classroom supplies for easier access or to minimize distraction
- Provide sensory breaks
- Provide a written or picture schedule

**Organizational Strategies**
- Model and reinforce organizational systems (i.e. color-coding)
- Write out homework assignments, check student's recording of assignments
- Tailor homework assignments toward student strengths
- Set time expectations for assignments
- Provide clues such as clock faces indicating beginning and ending times
- Teach study/organizational skills
- Schedule before or after school tutoring/homework assistance

**Behavioral Strategies**
- Use behavioral management techniques consistently within a classroom and across classes
- Implement behavioral/academic contracts
- Utilize positive verbal and/or nonverbal reinforcements
- Utilize logical consequences
- Confer with the student's parents (and student as appropriate)
- Establish a home/school communication system for behavior monitoring
- Post rules and consequences for classroom behavior
- Put student on daily/weekly progress report/contract
- Reinforce self-monitoring and self-recording of behaviors

**Presentation Strategies**
- Tape lessons so the student can listen to them again; allow students to tape lessons
- Use computer-aided instruction and other audiovisual equipment
- Select alternative textbooks, workbooks, or provide books on tape
- Highlight main ideas and supporting details in the book
- Provide copied material for extra practice (i.e. outlines, study guides)
- Prioritize drill and practice activities for relevance
- Vary the method of lesson presentation using multi-sensory techniques:
  a) Lecture plus overhead/board demonstration support
  b) Small groups required to produce a written product
  c) Large groups required to demonstrate a process
  d) Computer-assisted instruction
  e) Peer tutors or cross-age tutors
  f) Demonstrations, simulations
  g) Experiments
  h) Games
- Ask student to repeat/paraphrase context to check understanding
- Arrange for a mentor to work with student in his or her interest area or area of greatest strength
• Provide peer tutoring
• Simplify and repeat instructions about in-class and homework assignments
• Vary instructional pace
• Reinforce the use of compensatory strategies, i.e. pencil grip, mnemonic devices, “spell check”
• Vary kind of instructional materials used
• Assess whether student has the necessary prerequisite skills. Determine whether materials are appropriate to the student's current functioning levels
• Reinforce study skill strategies (survey, read, recite, review)
• Introduce definition of new terms/vocabulary and review to check for understanding
• Be aware of student's preferred learning style and provide matching instruction materials
• Pre-teach and/or re-teach important concepts
• Prepare advanced organizers/study guides for new material

Assignments
• Modify the amount of homework
• Use written directions to supplement oral directions
• Reduce paper and pencil tasks
• Allow for assignments to be word processed
• Lower reading level of assignments
• Break assignments into a series of smaller assignments
• Use highlighted texts

Evaluation Methods
• Limit amount of material presented on a single page
• Provide a sample or practice test
• Provide for oral testing
• Provide tests in segments so that student hands in one segment before receiving the next part
• Provide personal copy of test tools and allow for color-coding/highlighting
• Adjust time for completion
• Modify weights of tests when grading

Examples of Accommodations for Specific Disabilities
What follows are some examples of accommodations and services that might be considered for specific disability profiles. Please keep in mind that these examples are not intended to be all-inclusive or mandatory. Do not use these examples as a “checklist” as accommodations are to be made on a case-by-case basis specific to individual need. Also remember that the mere presence of these conditions does not automatically qualify a student for a Section 504 plan. The disability must significantly limit one or more life functions before a 504 plan is to be considered. Additionally, this disability must impact the student so that he or she is not afforded access and benefit of programs and services equal to that of non-disabled students.

Allergies
EXAMPLE: The student has severe allergic reactions to certain pollens and foods. For purposes of this example the condition substantially limits the major life activity of breathing and may interfere with the student's ability to get to school or participate once there.

Possible Accommodations and Services:
• Avoid allergy-causing substances: soap, weeds, pollen, food
• In-service necessary persons: dietary people, peers, coaches, laundry service people, etc.
• Allow time for shots/clinic appointments
• Use air purifiers
• Adapt physical education curriculum during high pollen time
• Improve room ventilation (i.e. when remodeling has occurred and materials may cause an allergy)
• Develop health care and/or emergency plans
• Address pets/animals in the classroom
• Involve school health consultant in school related health issues
• Train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects

Arthritis
EXAMPLE: A student with severe arthritis may have persistent pain, tenderness or swelling in one or more joints. A student experiencing arthritic pain may require a modified physical education program. For purposes of this example, the condition substantially limits the major life activity of performing manual tasks.

Possible Accommodations and Services:
• Provide a rest period during the day
• Accommodate for absences for doctors' appointments
• Provide assistive devices for writing (e.g. pencil grips, non-skid surface, typewriter/computer, etc.)
• Adapt physical education curriculum
• Administer medication following medication administration protocols
• Train student for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects
• Arrange for assistance with carrying books, lunch tray, etc.
• Provide book caddie
• Implement movement plan to avoid stiffness
• Provide seating accommodations
• Allow extra time between classes
• Provide locker assistance
• Provide modified eating utensils
• Develop health care plan and emergency plan
• Provide for accommodations for writing tasks; a note taker, a computer or tape recorder for note-taking
• Make available access to wheelchair/ramps and school van for transportation
• Provide more time for massage or exercises
• Adjust recess time
• Provide peer support groups
• Arrange for instructional aide support
• Install handle style door knobs (openers)
• Record lectures/presentations
• Have teachers provide outlines of presentations
• Issue Velcro fasteners for bags
• Obtain padded chairs
• Provide a more comfortable style of desk
• Adjust attendance policy, if needed
• Provide a shorter school day
• Furnish a warmer room and sit student close to the heat
• Adapt curriculum for lab classes
• Supply an extra set of books for home use and keep a set at school
• Let student give reports orally rather than in writing
- Provide an awareness program for staff and students
- Monitor any special dietary considerations
- Involve school health consultants in school health related issues
- Provide post-secondary or vocational transition planning

**Asthma**

EXAMPLE: A student has been diagnosed as having severe asthma. The doctor has advised the student not to participate in physical activity outdoors. For purposes of this example, the disability limits the major life activity of breathing.

**Possible Accommodations and Services:**
- Adapt activity level for recess, physical education, etc.
- Provide inhalant therapy assistance
- Train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects
- Remove allergens (e.g. hair spray, lotions, perfumes, paint, latex)
- Make field trips that might aggravate the condition non-mandatory and supplement with videos, audiotapes, movies, etc.
- Accommodate medical absence by providing makeup work, etc.
- Adjust for administration of medications
- Provide access to water, gum, etc.
- Adapt curriculum expectations when needed (i.e. science class, physical education, etc.)
- Develop health care and emergency plans
- Have peers available to carry materials to and from classes (e.g. lunch tray, books)
- Provide rest periods
- Make health care needs known to appropriate staff
- Provide indoor space for before and after school activities
- Have a locker location which is centralized and free of atmosphere changes
- Adapt attendance policies or school day length if needed
- Place student in most easily controlled environment

**Attention Deficit Disorder (ADD) and Attention Deficit Hyperactive Disorder (ADHD)**

EXAMPLE: The student does not meet eligibility requirements under IDEA as emotionally disturbed, learning disabled or other health impaired. A doctor regards the student as having ADD, and for purposes of this example, the disability limits the major life activity of learning. The student, because of his disability, is unable to participate in the school's programs to the same degree as students without disabilities and therefore is substantially limited by the disability.

**Possible Accommodations and Services:**
- Seat the student away from distractions and in close proximity to the teacher
- State classroom rules, post in an obvious location and enforce consistently
- Use simple, concise instructions with concrete steps
- Provide seating options
- Tolerate (understand the need) excessive movement
- Provide a peer tutor/helper
- Teach compensatory strategies
- Train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects
- Monitor for stress and fatigue; adjust activities
- Adjust assignments to match attention span, etc.
• Provide supervision during transitions, disruptions, field trips
• Model the use of study guides, organizing tools
• Accommodate testing procedures; lengthy tests might be broken down into several shorter administrations
• Provide prompt feedback on both successes and areas needing improvement
• Initiate frequent parent communication
• Establish a school/home behavior management program
• Provide training for staff
• Have the student use an organizer; train in organizational skills
• Establish a nonverbal cue between teacher and student for behavior monitoring
• Assign chores/duties around room/school
• Adapt environment to avoid distractions
• Reinforce appropriate behavior
• Have child work alone or in a study carrel during high stress times
• Highlight required or important information/directions
• Provide a checklist for student, parents, and/or teacher to record assignments of completed tasks
• Use a timer to assist student to focus on given task or number of problems in time allotted. Stress that problems need to be correctly done
• Have student restate or write directions/instructions
• Allow student to respond in variety of different modes (i.e. may place answers for tests on tape instead of paper)
• Give student opportunity to stand/move while working
• Provide additional supervision to and from school
• Adapt student's work area to help screen out distracting stimuli
• Grade for content integrity, and not just neatness/presentation
• Schedule subjects which require greater concentration early in the day
• Supply small rewards to promote behavior change
• Avoid withholding physical activity as a negative reinforcer
• Allow for periodic, frequent physical activity, exercise, etc.
• Determine trigger points and prevent action leading to trigger points
• Provide for socialization opportunities, such as circle of friends

**Bipolar Disorder**

**EXAMPLE:** The student was diagnosed as having a bipolar disorder. The severity (frequency, intensity, duration considerations) of the condition/behaviors did not qualify the student for IDEA. A properly convened 504 committee determined that the condition did significantly impair the major life activity of learning and developed a 504 plan for the student. Here are some possible accommodations for this scenario.

**Possible Accommodations and Services:**
• Break down assignments into manageable parts with clear and simple directions, given one at a time.
• Plan advanced preparation for transitions.
• Monitor clarity of understanding and alertness.
• Allow most difficult subjects at times when student is most alert.
• Provide extra time on tests, class work, and homework if needed.
• Strategies in place for unpredictable mood swings.
• Provide appropriate staff with training on bipolar disorder.
• Create awareness by staff of potential victimization from other students.
• Implement a crisis intervention plan for extreme cases where student gets out of control and may do something impulsive or dangerous.
• Provide positive praise and redirection.
• Report any suicidal comments to counselor/psychologist immediately.
• Consider home instruction for times when the student’s mood disorder makes it impossible for him to attend school for an extended period.

Cancer
EXAMPLE: A student with a long-term medical problem may require special accommodations. Such a condition as cancer may substantially limit the major life activities of learning and caring for oneself. For example, a student with cancer may need a class schedule that allows for rest and recuperation following chemotherapy.

Possible Accommodations and Services:
• Adjust attendance policies
• Limit numbers of classes taken; accommodate scheduling needs (breaks, etc.)
• Send teacher/tutor to hospital, as appropriate
• Take whatever steps are necessary to accommodate student’s involvement in extra-curricular activities if they are otherwise qualified
• Adjust activity level and expectations in classes based on physical limitations; don't require activities that are too physically taxing
• Train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects
• Provide appropriate assistive technology
• Provide dietary accommodations
• Provide a private area in which to rest
• Shorten school day
• Arrange for home tutoring following treatment
• Send additional set of texts and assignments to hospital schools
• Tape lessons. Accept the fact that the lessons and content-area tests may not be appropriate; the student is learning many life lessons through this experience.
• Adjust schedule to include rest breaks
• Provide counseling; establish peer group support
• Adapt physical education
• Provide access to school health services
• Provide awareness training to appropriate staff and students
• Develop health care emergency plan to deal with getting sick at school
• Furnish a peer tutor
• Provide student with a student buddy for participation in sports
• Initiate a free pass system from the classroom
• Provide lessons using mastery learning techniques
• Provide individual school counseling
• Begin friendship groups for the student
• Provide teachers with counseling, emphasizing positive attitudes
• Plan ongoing communication about school events
• Notify parents of communicable diseases in school
• Designate a person in school to function as liaison with parents as a means of updating changing health status
Cerebral Palsy
EXAMPLE: The student has serious difficulties with fine and gross motor skills. A wheelchair is used for mobility. For purposes of this example, the condition substantially limits the major life activity of walking. Cognitive skills are intact.

Possible Accommodations and Services:
- Provide assistive technology devices
- Arrange for use of ramps and elevators
- Allow for extra time between classes
- Assist with carrying books, lunch trays, etc.
- Adapt physical education curriculum
- Provide for physical therapy as appropriate. Such therapy needs to relate directly to "life skills."
- Train for proper dispensing of medications; monitor and/or distributed medications; monitor for side effects
- Adapt eating utensils
- Initiate a health care plan that also addresses emergency situations
- Train paraprofessionals in the case of this student (i.e. feeding, diapering, transporting to and from the wheelchair)
- Adapt assignments
- Educate peers/staff with parent/student permission
- Ensure that programs conducted in the basement or on second or third floor levels are accessible
- Ensure that bathroom facilities, sinks and water fountains are readily accessible.
- Provide post-secondary or vocational transition planning

Chronic Infectious Diseases: Acquired Immune Deficiency Syndrome (AIDS)
EXAMPLE: The student frequently misses school and does not have the strength to attend a full day. For purposes of this example, the student has a record of a disability, which substantially limits the major life activities of thinking, learning and working. Please review applicable District policies.

Possible Accommodations and Services:
- In-service staff and students about the disease, how it is transmitted and how it is treated (Consult appropriate District policies)
- Apply universal precautions
- Administer medications following medication administration protocols, train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects
- Adjust attendance policies
- Adjust schedule or shorten day
- Provide rest periods
- Adapt physical education curriculum
- Establish routine communication with health professionals, area nurse, and home
- Develop health-care and emergency plan
- Consult with doctor, parents, teachers, area nurse and administrators
- Train appropriate teachers on medical/emergency procedures
- Provide link between home and classroom via computer, etc.
- Arrange for an adult tutor at school or home
- Adapt assignments and tests
- Provide an extra set of textbooks for home
- Provide staff training on confidentiality
- Provide education and support for peers regarding issues of death and dying
• Provide transportation to and from school if needed as a related service
• Tape books or provide a personal reader
• Arrange to communicate with a home computer with e-mail
• Notify parents of communicable disease in the classroom
• Arrange for participation in a support group
• Provide for post-secondary employment transitions for secondary students
• Develop and promote a nondiscriminatory classroom climate and supportive student attitudes
• Promote the most supportive, least restrictive educational program
• Videotape classroom teaching
• Provide a peer support group to encourage communication
• Involve school health consultant in school-related health issues

Cystic Fibrosis
EXAMPLE: This student is a new enrollee at your school and has an extensive medical history. He has significant difficulty breathing and will often be absent due to respiratory infection. While medical needs can be easily documented on a health plan, his educational needs also need to be accommodated. For purposes of this example, learning is the major life activity that is substantially impaired.

Possible Accommodations and Services:
• Train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects
• Create a health care plan for management of acute and chronic phases
• Promote good communication between parents, hospital, home and school on school assignments
• Shorten the school day
• Adapt physical education activities
• Apply universal precautions, correct disposal of fluids
• Recognize need for privacy for “good coughing”
• Educate staff and peers

Diabetes
EXAMPLE: A sixth grader with juvenile diabetes requires accommodation to maintain optimal blood sugar. His mom provides the crackers and juice to be used at "break" time and before physical education class. She asks that teachers remind him to eat at a certain time of the morning if he does not pay attention to the beeper on his watch. The youngster is very self-sufficient; while he is able to monitor his own blood sugar now, he prefers to do this privately. Therefore, mom asks that the equipment and a notebook/log be stored in a nearby file cabinet and the youngster be allowed to go into the hall with the equipment to check his blood sugar twice a day. She also asks that his teacher allow him to use the bathroom as needed.

Possible Accommodations and Services:
• Health care plan for management of condition in the school setting and in emergencies
• Educate staff to signs/symptoms of insulin reaction/hypoglycemia: hunger, shakiness, sweating, change in face color, disorientation, drowsiness
• Never leave the child alone if he/she is feeling poorly; walk to the office or clinic with the student.
• Train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects; communicate systematically and frequently with parents
• Adapt physical education activities
• Store equipment and documentation in a readily accessible location for student, parent and area nurse or clinic aid
• Accommodate food access/meal schedules
• Allow access to bathroom facilities
Drugs and Alcohol
EXAMPLE: The student has used drugs and alcohol for many years. This problem has affected the major life activities of learning, concentrating and caring for oneself. The student is presently not using drugs or alcohol and is in a rehabilitation program. If the student is not using drugs or alcohol, he or she may qualify for accommodations or services under Section 504.

Possible Accommodations and Services:
- Provide copies of texts and assignments to treatment facility
- Arrange for periodic home-school contacts
- Establish daily/weekly assignments monitoring system
- Communicate with treatment facility; pursue transition services available through the treatment facility
- Establish peer support group
- Dismiss from school for treatment
- Ensure strong link with school counselor
- Integrate a student assistance program into the classroom
- In-service faculty/staff with parent/student permission
- Provide post-secondary or vocational transition planning
- Provide ongoing support around chemical dependency in conjunction with other agencies
- Train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects

Emotionally Disturbed
EXAMPLE: An emotionally disturbed student may need an adjusted class schedule to allow time for regular counseling or therapy. For purposes of this example, the condition substantially limits the individual's major life activity of learning.

Possible Accommodations and Services:
- Train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects
- Maintain weekly/daily journals for self-recording of behavior
- Establish home-school communication system
- Schedule periodic meetings with home and treatment specialists
- Provide carry-over of treatment plans into school environment
- Assist with inter-agency referrals
- Utilize behavior management programs
- Develop contracts for student behavior
- Post rules for classroom behaviors; teach expectations
- Provide counseling, social skills instruction
- Reinforce replacement behaviors
- Educate other students/staff/school personnel
- Foster carryover of treatment plans to home environment
- Reinforce positive behavior
- Schedule shorter study/work periods according to attention span capabilities
- Be consistent in setting expectations and following up on reinforcements/consequences
- Provide post-secondary or vocational transition planning

Encopresis/Enuresis
EXAMPLE: A student who will urinate or defecate in clothes. Not to be confused with physical incontinence, but only to a needed behavior change (i.e. toilet training, bowel/bladder)
retraining).
Possible Accommodations:
- Maintain low key responses
- Have a change of clothes available at school in the clinic or alternative location
- Plan a consistent response to events; send student to clinic or alternative location for clean-up and change of clothes; while wearing latex/rubber gloves, place soiled clothes in a plastic bag; call parent and make arrangements for soiled items to be returned home
- Observe for consistent trigger events
- Support bowel/bladder retraining program that is recommended by the physician

Epilepsy
EXAMPLE: The student is on medication for seizure activity, but experiences several petit mal seizures each month. This condition substantially limits the major life activity of learning.
Possible Accommodations and Services:
- Call parent and document the characteristics of each seizure
- Assess breathing after seizure
- Train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects
- Train staff and students and prepare an emergency plan
- Anticipate recovery process should a seizure occur. Move seating/clear space during seizure. Do not insert objects into the student's mouth during seizure; administer no fluids if student is unconscious. Turn the unconscious student on his or her side to avoid aspiration of vomit. Provide rest time and return to academic considerations following seizure. Arrange a buddy system, especially for field trips
- Avoid portable chalk boards or furniture that would topple over easily
- Provide an alternative recess, adapt activities such as climbing and/or swimming
- Plan for academic make-up work
- Alter door openings to allow access from the outside (i.e. bathroom stall doors that swing both ways)
- Observe for consistent triggers (e.g. smells, bright light, perfume, hair spray)
- Provide post-secondary or vocational transition planning

Hearing Impairment
EXAMPLE: A parent is hearing impaired and requests, access to school sponsored activities. The District makes accommodations by providing interpreter services for the parent to participate effectively in school-sponsored events or meetings about the student.
Possible Accommodations and Services:
- Provide an interpreter for those school events where accommodations may be necessary/are requested
- Make alternative arrangements for home-school contacts/communication
- Assist with locating peer or support groups
- Use written notes for communication
- Arrange with Phone Company for assistive devices on public phones
- Provide information on assistive technology; acquire assistive equipment for school use
- Provide in-house TDD or relay services to receive/communicate efficiently
- Provide post-secondary or vocational transition planning
Learning Disabilities
Individual profiles of learning strengths and weaknesses will vary. THE EXAMPLE: The student has a learning disability that impacts her ability to read. She has more difficulty with word decoding and spelling than reading comprehension. Thus, completing reading tasks is difficult and slow. She is currently not eligible to receive special education under IDEA.

Possible Accommodations and Services:
- Provide lower-readability materials covering course context
- Provide extended time on tests
- Allow access to spell checkers and/or word processing
- Provide information on accommodations for college-entrance/qualifying exams (i.e. PSAT)
- Clearly sequenced instruction
- Provide lecture notes/overheads
- Visual graphs/charts/diagrams to support instruction
- Provision of computer access
- Seating toward the instructor
- Support/suggestions relative to post-secondary/career options
- Support in the use of organizational/time-management strategies
- Support in the use of strategies to assist memory and problem-solving
- Provide post-secondary or vocational transition planning
- Provide training in self-advocacy

Leukemia
EXAMPLE: The student has recently been diagnosed with leukemia and requires frequent hospitalization. The condition substantially limits the major life activity of learning and caring for oneself.

Possible Accommodations and Services:
- Involve school nurse in assessing current limitations and development of health plan
- Provide homebound instruction if needed
- Provide the student with an adjusted school day
- Make needed accommodations during physical education/recess
- Provide rest periods
- Have medical services and medication available at school. Train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects
- Support the proper diet as per physical recommendation
- With parent/student permission, have area nurse to educate teachers/staff/peers
- Notify parents of existing communicable diseases at school (i.e. chicken pox, flu, strep throat, etc.)
- Consult with medical staff about individual needs and/or concomitant factors

Orthopedically Impaired
EXAMPLE: The student has limited mobility and uses a wheelchair. This condition substantially limits the major life activity of walking.

Possible Accommodations and Services:
- Develop a health care and emergency plan
- Implement an adaptive physical education program
- Provide physical therapy at school
- Correct problems with physical accessibility of facilities/pathways between buildings
- Provide extra time to get to class
- Adaptations to the physical environment (i.e. consistent room arrangement, removal of obstacles to path of entry)
Copies of text/reading materials for adaptation
Modified writing tools (i.e. dark felt tip pens)
Dark lined writing paper
Lighting aids
Low vision devices including magnifiers, monocular glass, closed-circuit TV
Desktop slant board
Enlarged print materials; textbooks, workbooks, worksheets
Books on tape
Audiotape recorder, tapes and organizational location (headphones if needed)
Oral instead of written tests
Standardized tests (i.e. CAT, SAT) in large print or Braille
Tactile maps
Computer with enlarged print screen/adaptations

Weight: Diagnosis of Obesity, Anorexia, and Bulimia
EXAMPLE: A student has an extreme eating disorder that may require special accommodations. Obesity may be considered a disability under Section 504 where it substantially impairs a major life activity such as walking.

Possible Accommodations and Services:
- Provide special seating modifications or furniture
- Make dietary modifications per physician recommendation
- Adapt physical education program per physician recommendation
- Allow extra time to get to classes
- Educate peers
- Adapt rest rooms
- Provide opportunities for socialization and peer counseling/interaction
- Ensure privacy for self-care
- Provide counseling involving the area nurse
- Provide for elevator privileges per physician's recommendation
- Arrange for counselor/area nurse to supervise peer counseling to deal with esteem issues, peer attitudes, teasing, etc.
- Address busing concerns to ensure room on buses for seating
- Arrange to provide opportunities for the individual to participate in intramural and extra-curricular events
- Make any class location changes that may be needed
You are in a unique position to shape the public image of people with disabilities. By putting the person first and using these suggested words, you can convey a positive, objective view of an individual instead of a negative, insensitive image.

<table>
<thead>
<tr>
<th>Do say</th>
<th>Don’t say</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disability</td>
<td>Differently abled, challenged</td>
</tr>
<tr>
<td>People with disabilities</td>
<td>The disabled, handicapped</td>
</tr>
<tr>
<td>Person with spinal cord injury</td>
<td>Cripple</td>
</tr>
<tr>
<td>Person with autism, on the autism spectrum</td>
<td>Autistic</td>
</tr>
<tr>
<td>Person with Down syndrome</td>
<td>Mongoloid</td>
</tr>
<tr>
<td>Person of short stature</td>
<td>Midget, dwarf</td>
</tr>
<tr>
<td>Uses a wheelchair, wheelchair user</td>
<td>Confined to a wheelchair, wheelchair-bound</td>
</tr>
<tr>
<td>Has a learning disability</td>
<td>Slow learner</td>
</tr>
<tr>
<td>Has chemical or environmental sensitivities</td>
<td>Chemophobic</td>
</tr>
<tr>
<td>Has a brain injury</td>
<td>Brain damaged</td>
</tr>
<tr>
<td>Blind, low vision</td>
<td>Visually handicapped, blind as a bat</td>
</tr>
<tr>
<td>Deaf, hard of hearing</td>
<td>Deaf-mute, deaf and dumb</td>
</tr>
<tr>
<td>Intellectual disability</td>
<td>Retarded, mental retardation</td>
</tr>
<tr>
<td>Amputee, has limb loss</td>
<td>Gimp, lame</td>
</tr>
<tr>
<td>Congenital disability</td>
<td>Birth defect</td>
</tr>
<tr>
<td>Burn survivor</td>
<td>Burn victim</td>
</tr>
<tr>
<td>Post-polio syndrome</td>
<td>Suffers from polio</td>
</tr>
<tr>
<td>Service animal or dog</td>
<td>Seeing eye dog</td>
</tr>
<tr>
<td>Psychiatric disability, mental illness</td>
<td>Crazy, psycho, schizo</td>
</tr>
</tbody>
</table>
How should I describe you or your disability?  
Accessible parking or restroom

What happened to you?  
Handicapped parking, disabled restroom
Placement Checklist

___Did we develop the IEP based on general education standards?
___Did we start by considering the general education classroom with supports and services as the primary option?
___Did we encourage the full participation of the student in all aspects of school life, including extracurricular?
___Are the non-academic skills the student needs taught in "natural" settings, that is, in situations where he or she would normally need them?
___Is the student in the least restrictive educational alternative, i.e., in classes with peers without disabilities as much as possible?
___Is the instructional day for the student the same length as that of students without disabilities.
___Is the building and classroom physically accessible?
___Is the student provided opportunities to participate in extracurricular activities on the same basis as students without disabilities?
___Is the placement decision made at the meeting and not before?
___Are teachers and paraprofessionals trained in current inclusive practices?
___Are staff members willing to collaborate in order to make inclusion work?
___Are all staff members willing to take ownership of students with disabilities?
___Do current practices support inclusive outcomes?
___Have we defined what "success" is for the students with a disability?
___Do teachers understand their role in modifications and the IEP?
___Is our inclusive philosophy aligned with district goals?
___Do we provide all students with a sense of community and do we help parents belong to our school community?
• TRANSITION SKILLS

• Follow directions
• Routines
• Communication
• Social skills
• Tasks in order
• Time management
• Reading signs
• Hygiene
• Left and right
• Use appropriate behavior
• Wearing season-appropriate clothes
• Following rules
• Healthy lifestyle
• Recognize dangerous situations
• Nutrition
• Telling time
• How to deal with peer pressure/bullying
• Cleaning up
• Good friend versus bad
• Coping skills
• Indoor/outdoor voice
• Peace and conflict
• Personal space
• Work with people you don’t like
• Reading
• Dreams
• Goal setting
• How to use a pencil sharpener
• Solve problems (I don’t have a pencil)
• Decide what “home/school behavior”
• Self-rewards
• Priorities
• Preparing food
• Sign name (cursive)
• Ask questions
• Respect authority
• Safety
• Organization skills
• Conflict resolution
- Interact with peers
- Crossing road

- Manners/courtesy
- What to do in free time
- Use technology
- How to lock and unlock doors
- Managing money
- Technology safety
- Shopping
- Respect property
- Chores
- Dealing with Siblings
- Dealing with Animals
- Doing tasks independently
- Confidence
- How to use the phone
- How to do dishes
- Sweep things
- When to call for help and who
- Microwave
- Pay bills
- Use of social media
- Paying attention
- Medicine do and don'ts
- Social skills- not to interrupt
- Tie shoes
- Dress-up/career day
- Hat day
- Follow directions
- Handle money
- Music
- How to count
- Safety during a fire
- Tell time
- Safety scissors
- Read- phonetically
- Safety with hot things
- Make changes
- Body parts
- Calendar
- Food groups
- Schedule
• Sorting
• Use hand sanitizer
• Step-by-step directions
• Dressing for the weather
• Button/tie things
• Playtime with clothes
• Identify emotions of others
• Greet each other
• Manners
• Collaboration
• Peer mediation
• Literature using books
• Trips to the community
• Read a newspapers
• Good/bad touch
• Boundaries
• Sharing
• Library visits
• Sarcasm
• Personal space
• Holidays
• Customs
• Understand non-gender roles
• Transportation
• Play house
• Healthy food options
• Safety getting on the bus
• Cultural expectations
• Reading a food label
• Monitoring blood sugar
• Cultural norms
• Potty training
• Speaking clearly
• Budget making
• How different jobs work
• Citizenship
• Healthy community
• Patriotism
• How to vote
• What laws are
• Brush your hair
• How to know if someone is offensive
• How to properly answer phones
• How to give gifts
More Information About Special Education Law

Info on IDEA 2004
http://idea.ed.gov/

Blog about the Supreme Court
http://www.scotusblog.com/

Wrights Law
http://www.wrightslaw.com/

Supreme Court Tracking Chart
http://www.nsba.org/abbreviated-us-supreme-chart

LD Online
http://www.ldonline.org/

CEC
http://www.cec.sped.org/

NCLD
http://www.ncld.org/

Legal Clips NSBA
http://legalclips.nsba.org/

ED Week
http://www.edweek.org/topics/specialeducation/