

# Task 1 (601.3.2-05)

Health & Medicine, Disability



Task 1 (601. 3. 2-05) A) Summarize the six key components of the original 1975 IDEA (Individuals with Disabilities Education Act). History The original 1975 Individuals with Disabilities Education Act (IDEA), was passed to make certain that students with disabilities receive a publicly funded special education that is fair and appropriate in the least restrictive environment. Since its inception, it has been modified several times to make it more effective. In 1986, the law was amended to now include infants and toddlers. For high school students, transitional planning was mandated in 1990 to set goals and prepare students for the post high school years. Over the years, schools would wait until a student would fall considerably behind their peers for intervention. It wasn't until 2006 a process called Response to Intervention (RTI) allowed early intervention to determine other ways to prevent academic failure. New concepts have been added to the law such as, the Individualized Educational Plan (IEP) that is individually tailored for each student with exceptionalities. Purpose The main purpose of IDEA, which is now renamed 2004 IDEA, is to offer all children with disabilities: - a free appropriate public education (FAPE) geared to meet the distinct learning needs of the individual child. The quality of educational services provided to students with disabilities must be equal to those provided to non-disabled students. - to ensure safeguards by defending the rights of parents and their child with a disability. - to aid states with early intervention for infants and toddlers along with their families. - to provide the necessary tools and support system that raises educational results for these exceptional children. - to evaluate and monitor that objectives are met and aligned with state content standards. IDEA Components There are six key components: 1)

Eligibility - Locate, identify, & provide services to all eligible students with disabilities. Must determine that a child has a specific learning disability in one or more of the central nervous system processes involved in understanding or using concepts through verbal or non verbal means. A child must be evaluated by a multidisciplinary committee and testing must be free from bias (racially, culturally, linguistically). Various types of assessments must be administered. Evaluations should be geared to enable the child to be involved in the general curriculum. 2) FAPE — Federal government provides assistance to states to provide a free public education for eligible children with disabilities (regardless of the severity). Any related services such as occupational therapy must also be provided if deemed necessary in order for the child to benefit from special education. Tutoring programs where put into action for those disabled students needing extra help passing required classes. 3) Individualized education program (IEP) — an individualized tailored education plan for each student with disabilities. This plan addresses the current level of academic functioning, objectives and goals, special education and related services to support the child, levels of participation in general education programs such as, state and district-wide tests and extracurricular activities, transition services, goals to be achieved, and evaluations to monitor progress. 4) Least restrictive environment (LRE) — allows children with disabilities the opportunity to learn their education in regular classes with the use of supplementary aids and services to the maximum extent appropriate. The general classroom is the first option that must be considered. If the severity of the disability prevents satisfactory achievement in the general classroom, special classes and schooling is

provided. 5) Procedural safeguards (Due Process) — includes confidentiality of records, written notice to parent(s)/guardian(s) of procedural changes to child's education, allows parent(s)/guardian(s) to an impartial hearing disputing educational plans, access to child's education records, right to legal counsel. 6) Parent/Student participation in decision making — requires that parents participate in the decision-making process that affects their child's education. " The Congress finds the following: ... Over 20 years of research and experience has demonstrated that the education of children with disabilities can be made more effective by... strengthening the role of parents and ensuring that families of such children have meaningful opportunities to participate in the education of their children at school and at home." (IDEA 97) The Law IDEA 2004 ensures services to children with disabilities nationwide. It provides early intervention, special education and related services to millions of eligible infants, toddlers, children and youth with disabilities. IDEA Part B lays out the educational guidelines for children and youths (3-21) with disabilities for special education and related services. IDEA Part C are the guidelines for infants and toddlers (birth-2) with disabilities for early intervention services. IDEA Part D deals with state education departments providing an education of improvement and reform for children with disabilities. IDEA Part A lays out the basic foundation in carrying out the terms of IDEA. B) Summarize the key components of the following IDEA reauthorizations: - PL 99-457 (1986) — known as the pre-school law, the Education of the Handicapped Act amended its law to recognize the needs and capabilities of infants and toddlers by establishing an early intervention program under Title 1 of PL 99-457 called the

Handicapped Infant and Toddlers Program. It mandated a pre-school program to serve children ages 3-5 years old and gave states financial incentives to provide an education for this age group. - PL 101-476 (1990) — known as the “ Person First” law, a change of attitude was taking place and congress amended the law to be renamed Individuals with Disability Education Act (IDEA). Children was replaced with the term individuals and handicapped became with disabilities. Autism and Traumatic Brain Injury was identified as a distinct disability. An individualized transitional plan (ITP) is now required for high school students no later than age 16, to help them prepare for the post high school years. - PL105-17 (1997) - The main key component under this law is to protect the rights of disabled children and their parents as well as their education nationwide. This gave parents the right to participate in the decision making of their child’s education such as; receiving educational notifications, consent ing to educational programs and plans , and participating in mediation on a volunteer basis should it be deemed necessary. - IDEA 2004: PL 108-446 — significant change was made on the evaluation procedure section of the law to determine whether a child has a specific learning disability. Research based interventions was introduced in the screening process as an alternative method in determining eligibility for special education. Other changes address the increase accountability for students with disabilities and ensuring highly qualified teachers in the classroom which is in compliance with the No Child Left Behind Act. Highly qualified teachers are those special education teachers that teach the core subjects. The requirements for these teachers under this law: 1) Must hold at least a Bachelors of Art degree. 2) Must obtain a full

state special education certificate or the equivalent. 3) Can not hold a provisional, emergency or temporary certificate. 4) Veterans and new teachers may demonstrate “ subject matter knowledge” appropriate to level of instruction and may demonstrate academic subject competence through the high objective uniform state standard of evaluation (HOUSSE process). For those special education teachers that do not teach the core subjects they are considered highly qualified based on their licensure. C) Summarize, in sequential order, the mandated IDEA guidelines and processes for referring a student with a suspected disability for evaluation for special education services and, D) Incorporate at least four of the following intervention concepts as an extension of what you addressed in Part C above: The first step in the evaluation process for a student with a suspected disability begins when a concern arises regarding a child’s academic achievement or displays a social/behavioral problem. The educator should begin pre-referral interventions through reasonable accommodations and modifications to identify and resolve the needs of the student. Sometime a change in the classroom or extra help in a subject matter can turn performance around. It is equally important to be sure that a special education referral is necessary. Once these pre-referral interventions have been implemented and the strategies are still ineffective, an assessment can be given. A written request for permission to evaluate is sent to parent(s)/guardian(s). This step for parental consent is mandated by the law as one of the procedural safeguards for parents and guardians. Referrals are not limited to the educator. It can be requested in writing by the student’s parents, physician, or any professional staff member of the school district. Initial evaluation

must be completed in 60 days after parental consent. Next, a complete profile of the student's abilities and needs are assessed by a multi-disciplinary committee made up of a group of professionals from diverse disciplines (school psychologist, social worker, learning specialist, etc). The law requires that evaluation be presented in the native language of the student when deemed necessary. A different number of assessments determined by the multi-disciplinary committee will be given for evaluation. The assessments will determine the services the child will need and in what type of environment will be most beneficial. For example, can the child learn in a normal classroom with his or her peers or a separate special education classroom? If the multi-disciplinary committee determines that the student is eligible for a special education, the committee will sit down with the parent(s)/guardian(s) and review the outcome. An IEP team begins to prepare a strategy designed to meet the sole needs of the child. If the child is eligible for services under IDEA, the child's parents are contacted and an IEP team prepares an exclusive plan. The IEP team includes the parents, general education teacher, special education teacher, members from the school and district, and sometimes the student. The IEP plan usually consists of recent performance, nature of the needs, special education and related services to support the child, involvement in state and district-wide tests, goals to be achieved, and measured growth. Goals are written to reflect what a student needs to make progress in a general education curriculum. IEPs are reviewed annually and a complete evaluation must occur every three years. Finally, placements under the cascade model of special education services offers a range of placement options for the student that starts in the

least restrictive placement environment, the regular classroom, to the most restrictive placement such as an institutionalized setting (hospital for example). The theory behind this is create a fluid educational setting conducive in meeting the individualize needs of each student. The education environment changes as the needs of the student changes. References Kauchak, D. & Eggen, P. (2008). Introduction to teaching. Becoming a professional. (3rd ed.). Upper Saddle River, NJ: Pearson Turnbull, H. (2005). Individuals with disabilities education act reauthorization: Accountability and personal responsibility. Remedial and Special Education, 26, 320-326. U. S. Department of Education. (2010). Thirty-five years of progress in educating children with disabilities through IDEA. Retrieved on October 7, 2012, from <http://www2.ed.gov/about/offices/list/osers/idea35/history/idea-35-history.pdf>