

Athlos Academy St Cloud, ISD #4250 Total Special Education System (TSES)

This document serves as the Total Special Education System Plan for Athlos Academy St. Cloud, ISD #4250, (AASC) in accordance with Minnesota Rule 3525.1100. This plan also includes an assurance for compliance with the federal requirements pertaining to districts' special education responsibilities found in United States Code, title 20, chapter 33, and Code of Federal Regulations, title 34, part 300. This document is a companion to the Application for Special Education Funds – Statement of Assurances (ED-01350-29).

AASC has contracted with Bruce Seal, Special Education Director through Designs for Learning. He will be responsible for program development, coordination, and evaluation; in-service training; and general special education supervision and administration. Bruce Seal may be reached at bseal@designlearn.net and/or 651.255.8840

I. Child Study Procedures

The District's identification system is developed according to the requirement of nondiscrimination as AASC does not discriminate in education on the basis of race, color, creed, religion, national origin, sex, age, marital status, status with regard to public assistance, sexual orientation, or disability.

A. Identification

AASC has developed systems designed to identify pupils with disabilities beginning at birth, pupils with disabilities attending public and nonpublic schools, and pupils with disabilities who are of school age and are not attending any school.

Infant and toddler intervention services under United States Code, title 20, chapter 33, section 1431 et seq., and Code of Federal Regulations, title 34, part 303, are available in the St. Cloud area to children from birth through two years of age who meet the outlined criteria. AASC will be partnering with Head Start to identify children.

The team determines that a child from birth through the age of two years is eligible for infant and toddler intervention services if:

- A. The child meets the criteria of one of the disability categories in United States Code, title 20, chapter 33, as defined in Minnesota Rules; or
- B. The child meets one of the criteria for developmental delay in sub-item (1), (2), or (3):
 - (1) The child has a diagnosed physical or mental condition or disorder that has a high probability of resulting in developmental delay regardless of whether the child has a demonstrated need or delay; or
 - (2) The child is experiencing a developmental delay that is demonstrated by a score of 1.5 standard deviations or more below the mean, as measured by the appropriate diagnostic measures and procedures, in one or more of the following areas:
 - (a) Cognitive development;
 - (b) Physical development, including vision and hearing;

- (c) Communication development;
- (d) Social or emotional development; and
- (e) Adaptive development.

(3) The child's eligibility is established through the application of informed clinical opinion. Informed clinical opinion may be used as an independent basis to establish a child's eligibility under this part even when other instruments do not establish eligibility; however, in no event may informed clinical opinion be used to negate the results of evaluation instruments to establish eligibility.

The team shall determine that a child from the age of three years through the age of six years is eligible for special education when:

- A. The child meets the criteria of one of the categorical disabilities in United States Code, title 20, chapter 33, as defined in Minnesota Rules; or
- B. The child meets one of the criteria for developmental delay in sub-item (1) and the criteria in sub-item (2). At this time, AASC has not elected the option of implementing these criteria for developmental delay.

AASC will utilize a Response to Intervention approach to the identification of students with Specific Learning Disabilities (SLD) utilizing the following procedures:

- A. The Response to Intervention (Rtl) approach consists of consulting and problem solving; and focuses on the needs of an individual student(s).
- B. An Rtl team will consist of staff that is knowledgeable about the curriculum and behavior expectations used at the institution. Other staff members with expertise in a particular subject or behavioral issues may be invited to attend a specific Rtl meeting (i.e., special education staff, counselor, administrator, parent).
- C. Characteristics of Rtl team members include:
 - (1) Rtl members accept responsibility to ensure high levels of learning for every child and must believe it is possible to effectively teach all students with support and collaboration.
 - (2) Rtl instructors should teach the curriculum with fidelity and should be comfortable using assessment data to inform instructional decisions and problem-solving, ensuring quality instruction for all students.
 - (3) The teachers on this team must have creditability; they should be individuals with good reputations so their recommendations and decisions will be taken seriously.
 - (4) Rtl teachers must be leaders able to support the change process.
- D. The Rtl process is as follows:
 - (1) The process begins when the referring teacher contacts a member of the Rtl team to schedule an appointment and prepares to attend the meeting with specific and relevant data to define the problem.
 - (2) Collaboratively, the referring teacher and the Rtl team examine all possible contributions to the noted issue; such contributors may include quality of previous instruction, attendance, and/or absence, or limitation of basic skills.

- (3) The referring teacher and team then attempt to accurately identify the needed skills. They brainstorm to determine possible research-based interventions.
- (4) Once an intervention is determined, the referring teacher implements and keeps data.
- (5) After data collection, the Rtl team meets again with the referring teacher to evaluate the effectiveness of the intervention plan.
- (6) If the intervention(s) was not successful, the team re-evaluates the situation. If the plan continues to be ineffective and cultural, linguistic, educational, and similar factors are ruled out, the student is referred for evaluation for special education services.
- (7) If the intervention(s) was successful, the team then periodically examines trends and patterns in referrals which may be addressed universally.

E. Responsibilities of the Rtl team are as follows:

- (1) Rtl members participate in Rtl intervention training.
- (2) Rtl meetings should be held at least twice a month, and a meeting should be held with the Head of Teachers at least once a month.
- (3) The team should follow the Rtl process to support teachers with students who are struggling, log all communication with teachers (to be shared with Head of Teachers), and log all interventions used with students.
- (4) Follow-up with recommendations should be made within 30 days.

B. Evaluation

Evaluation of the child and assessment of the child and family will be conducted in a manner consistent with Code of Federal Regulations, title 34, section 303.321.

- A. *General.* (1) The lead agency must ensure that, subject to obtaining parental consent in accordance with §303.420(a)(2), each child under the age of three who is referred for evaluation or early intervention services under this part and suspected of having a disability, receives—
- (i) A timely, comprehensive, multidisciplinary evaluation of the child in accordance with paragraph (b) of this section unless eligibility is established under paragraph (a)(3)(i) of this section; and
 - (ii) If the child is determined eligible as an infant or toddler with a disability as defined in §303.21;
 - (A) A multidisciplinary assessment of the unique strengths and needs of that infant or toddler and the identification of services appropriate to meet those needs;
 - (B) A family-directed assessment of the resources, priorities, and concerns of the family and the identification of the supports and services necessary to enhance the family's capacity to meet the developmental needs of that infant or toddler. The assessments of the child and family are described in paragraph (c) of this section and these assessments may occur simultaneously with the evaluation, provided that the requirements of paragraph (b) of this section are met.

(2) As used in this part—

- (i) *Evaluation* means the procedures used by qualified personnel to determine a child's initial and continuing eligibility under this part, consistent with the definition of *infant or toddler with a disability* in §303.21. An *initial evaluation* refers to the child's evaluation to determine his or her initial eligibility under this part;
- (ii) *Assessment* means the ongoing procedures used by qualified personnel to identify the child's unique strengths and needs and the early intervention services appropriate to meet those needs throughout the period of the child's eligibility under this part and includes the assessment of the child, consistent with paragraph (c)(1) of this section and the assessment of the child's family, consistent with paragraph (c)(2) of this section; and
- (iii) Initial *assessment* refers to the assessment of the child and the family assessment conducted prior to the child's first IFSP meeting.

(3)(i) A child's medical and other records may be used to establish eligibility (without conducting an evaluation of the child) under this part if those records indicate that the child's level of functioning in one or more of the developmental areas identified in §303.21(a)(1) constitutes a developmental delay or that the child otherwise meets the criteria for an infant or toddler with a disability under §303.21. If the child's part C eligibility is established under this paragraph, the lead agency or EIS provider must conduct assessments of the child and family in accordance with paragraph (c) of this section.

(ii) Qualified personnel must use informed clinical opinion when conducting an evaluation and assessment of the child. In addition, the lead agency must ensure that informed clinical opinion may be used as an independent basis to establish a child's eligibility under this part even when other instruments do not establish eligibility; however, in no event may informed clinical opinion be used to negate the results of evaluation instruments used to establish eligibility under paragraph (b) of this section.

(4) All evaluations and assessments of the child and family must be conducted by qualified personnel, in a nondiscriminatory manner, and selected and administered so as not to be racially or culturally discriminatory.

(5) Unless clearly not feasible to do so, all evaluations and assessments of a child must be conducted in the native language of the child, in accordance with the definition of *native language* in §303.25.

(6) Unless clearly not feasible to do so, family assessments must be conducted in the native language of the family members being assessed, in accordance with the definition of *native language* in §303.25.

B. Procedures for evaluation of the child. In conducting an evaluation, no single procedure may be used as the sole criterion for determining a child's eligibility under this part. Procedures must include –

(1) Administering an evaluation instrument;

- (2) Taking the child's history (including interviewing the parent);
- (3) Identifying the child's level of functioning in each of the developmental areas in § 303.21(a)(1);
- (4) Gathering information from other sources such as family members, other care-givers, medical providers, social workers, and educators, if necessary, to understand the full scope of the child's unique strengths and needs; and
- (5) Reviewing medical, educational, or other records.

C. Procedures for assessment of the child and family.

- (1) An assessment of each infant or toddler with a disability must be conducted by qualified personnel in order to identify the child's unique strengths and needs and the early intervention services appropriate to meet those needs. The assessment of the child must include the following:
 - (i) A review of the results of the evaluation conducted by paragraph (b) of this section;
 - (ii) Personal observations of the child; and
 - (iii) The identification of the child's needs in each of the developmental areas in § 303.21(a)(1).
- (2) A family-directed assessment must be conducted by qualified personnel in order to identify the family's resources, priorities, and concerns and the supports and services necessary to enhance the family's capacity to meet the developmental needs of the family's infant or toddler with a disability. The family-directed assessment must –
 - (i) Be voluntary on the part of each family member participating in the assessment;
 - (ii) Be based on information obtained through an assessment tool and also through an interview with those family members who elect to participate in the assessment; and
 - (iii) Include the family's description of its resources, priorities, and concerns related to enhancing the child's development.

The team conducts an evaluation for special education purposes within a reasonable time not to exceed 30 school days from the date the district receives parental permission to conduct the evaluation or the expiration of the 14-calendar day parental response time in cases other than initial evaluation, unless a conciliation conference or hearing is requested.

AASC will conduct full and individual initial evaluations before the initial provision of special education and related services to a pupil. The initial evaluation consists of procedures to determine whether a child is a pupil with a disability that adversely affects the child's educational performance as defined in Minnesota Statutes, section 125A.02, who by reason thereof needs special education and related services, and to determine the educational needs of the pupil. The district proposing to conduct an initial evaluation to determine if the child qualifies as a pupil with a disability obtains informed consent from the parent of the child before the evaluation is conducted. Parental consent for evaluation is not construed

as consent for placement for receipt of special education and related services. The District will not override the written refusal of a parent to consent to an initial evaluation or re-evaluation.

Evaluation Procedures

Evaluations and reevaluations are conducted according to the following procedures:

- A. AASC shall provide notice to the parents of the pupil, according to Code of Federal Regulations, title 34, sections 300.500 to 300.505, that describes any evaluation procedures the district proposes to conduct.
- B. In conducting the evaluation, AASC:
 - (1) Uses a variety of evaluation tools and strategies to gather relevant functional and developmental information, including information provided by the parent, that are designed to assist in determining whether the child is a pupil with a disability and the content of the pupil's individualized education program, including information related to enabling the pupil to be involved in and progress in the general curriculum, or for preschool pupils, to participate in appropriate activities;
 - (2) Does not use any single procedure as the sole criterion for determining whether a child is a pupil with a disability or determining an appropriate education program for the pupil; and
 - (3) Uses technically sound instruments that are designed to assess the relative contribution of cognitive and behavioral factors, in addition to physical or developmental factors.
- C. AASC ensures that:
 - (1) Tests and other evaluation materials used to evaluate a child under this part are selected and administered so as not be discriminatory on a racial or cultural basis, and are provided and administered in the pupil's native language or other mode of communication, unless it is clearly not feasible to do so;
 - (2) Materials and procedures used to evaluate a child with limited English proficiency are selected and administered to ensure that they measure the extent to which the child has a disability and needs special education and related services, rather than measure the child's English language skills;
 - (3) Any standardized tests that are given to the child have been validated for the specific purpose for which they are used, are administered by trained and knowledgeable personnel, and are administered in accordance with any instructions provided by the producer of such tests;
 - (4) The child is evaluated in all areas of suspected disability, including, if appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities;
 - (5) Evaluation tools and strategies that provide relevant information that directly assists persons in determining the educational needs of the pupil are provided;
 - (6) If an evaluation is not conducted under standard conditions, a description of the extent to which it varied from standard conditions must be included in the evaluation report;
 - (7) Tests and other evaluation materials include those tailored to evaluate specific areas of educational need and not merely those that are designed to provide a single general intelligence quotient;

- (8) Tests are selected and administered so as best to ensure that if a test is administered to a child with impaired sensory, manual, or speaking skills, the test results accurately reflect the child's aptitude or achievement level or whatever other factors the test purports to measure, rather than reflecting the child's impaired sensory, manual, or speaking skills, unless those skills are the factors that the test purports to measure; and
 - (9) In evaluating each pupil with a disability, the evaluation is sufficiently comprehensive to identify all of the pupil's special education and related service needs, whether or not commonly linked to the disability category in which the pupil has been classified.
- D. Upon completion of administration of tests and other evaluation materials, the determination of whether the child is a pupil with a disability as defined in Minnesota Statutes, section 125A.02, shall be made by a team of qualified professionals and the parent of the pupil in accordance with item E, and a copy of the evaluation report and the documentation of determination of eligibility will be given to the parent.
 - E. In making a determination of eligibility under item D, a child shall not be determined to be a pupil with a disability if the determinant factor for such determination is lack of instruction in reading or math or limited English proficiency, and the child does not otherwise meet eligibility criteria under parts 3525.1325 to 3525.1351.

Additional requirements for evaluations and reevaluations

- A. As part of an initial evaluation, if appropriate, and as part of any reevaluation under this part, or a reinstatement under part 3525.3100, the IEP team and other qualified professionals, as appropriate, shall:
 - (1) Review existing evaluation data on the pupil, including evaluations and information provided by the parents of the pupil, current classroom-based assessments and observations, and teacher and related services providers observation; and
 - (2) On the basis of the review, and input from the pupil's parents, identify what additional data, if any, are needed to determine whether the pupil has a particular category of disability, as described in Minnesota Statutes, section 125A.02, or, in case of a reevaluation of a pupil, whether the pupil continues to have such a disability, the present levels of performance and educational needs of the pupil, whether the pupil needs special education and related services, or in the case of a reevaluation of a pupil, whether the pupil continues to need special education and related services, and whether any additions or modifications to the special education and related services are needed to enable the pupil to meet the measurable annual goals set out in the individualized education program of the pupil and to participate, as appropriate, in the general curriculum.
- B. The district administers such tests and other evaluation materials as may be needed to produce the data identified by the IEP team under item A, sub-item (2).
- C. The district obtains informed parental consent, in accordance with subpart 1, prior to conducting any reevaluation of a pupil, except that such informed parental consent need not be obtained if the district can demonstrate that it had taken reasonable measures to obtain such consent and the pupil's parent has failed to respond.
- D. If the IEP team and other qualified professionals, as appropriate, determine that no additional data are needed to determine whether the pupil continues to be a pupil with a disability, the district shall notify the pupil's parents of that determination and the reasons for it, and the right of such parents to request an evaluation to determine whether the pupil continues to be a pupil with a disability, and shall not be required to conduct such an evaluation unless requested to by the pupil's parents.

E. A district evaluates a pupil in accordance with federal regulation before determining that the pupil is no longer a pupil with a disability.

The district intends to use restrictive procedures. See the attached Restrictive Procedure Plan.

The district follows the restrictive procedure statute, Minnesota Statute 125A.094-125A.0942.

The district **does not** intend to use restrictive procedures.

Procedures for determining eligibility and placement

A. In interpreting the evaluation data for the purpose of determining if a child is a pupil with a disability under parts 3525.1325 to 3525.1351 and the educational needs of the child, the school district:

(1) Draws upon information from a variety of sources, including aptitude and achievement tests, parent input, teacher recommendations, physical condition, social or cultural background, and adaptive behavior; and

(2) Ensures that the information obtained from all of the sources is documented and carefully considered.

B. If a determination is made that a child is a pupil with a disability who needs special education and related services, an IEP is developed for the pupil according to Minnesota Rule 3525.2810.

Evaluation report

An evaluation report is completed and delivered to the pupil's parents within the specified evaluation timeline. At a minimum, the evaluation report includes:

A. A summary of all evaluation results;

B. Documentation of whether the pupil has a particular category of disability or, in the case of a reevaluation, whether the pupil continues to have such a disability;

C. The pupil's present levels of performance and educational needs that derive from the disability;

D. Whether the child needs special education and related services or, in the case of a reevaluation, whether the pupil continues to need special education and related services; and

E. Whether any additions or modifications to the special education and related services are needed to enable the pupil to meet the measurable annual goals set out in the pupil's IEP and to participate, as appropriate, in the general curriculum.

C. Plan for Receiving Referrals

AASC's plan for receiving referrals from parents, physicians, private and public programs, and health and human services agencies is consistent with best practices.

II. Method of Providing the Special Education Services for the Identified Pupils

AASC provides a full range of educational service alternatives. All students with disabilities are provided the special instruction and services which are appropriate to their needs. The following is representative of AASC'S method of providing the special education services for the identified pupils, sites available at which service may occur, and instruction and related services are available.

Appropriate program alternatives to meet the special education needs, goals, and objectives of a pupil are determined on an individual basis. Choice of specific program alternatives are based on the pupil's

current levels of performance, pupil special education needs, goals, and objectives, and must be written in the IEP. Program alternatives are comprised of the type of services provided, the setting in which services occur, and the amount of time and frequency in which special education services occur. A pupil may receive special education services in more than one alternative based on the IEP or IFSP.

A. Method of providing the special education services for the identified pupils:

Examples: one-on-one services, small group, direct, indirect, co-teaching, etc.

- (1) One-on-one services
- (2) Small group services
- (3) Direct services
- (4) Indirect services
- (5) Co-teaching

B. Sites available at which services may occur:

- (1) Athlos Academy St. Cloud regular education classrooms
- (2) Athlos Academy St. Cloud special education classrooms
- (3) Athlos Academy St. Cloud common areas
- (4) Athlos Academy small group spaces

C. Available instruction and related services:

- (1) Physical therapy
- (2) Occupational therapy
- (3) Speech therapy
- (4) Counseling services
- (5) Community services
- (6) Social work services
- (7) Psychological services

III. Administration and Management Plan.

AASC utilizes the following administration and management plan to assure effective and efficient results of child study procedures and method of providing special education services for the identified pupils:

A. The following table illustrates the organization of administration and management to assure effective and efficient results of child study procedures and method of providing special education services for the identified pupils:

| Staff Name and Title | Contact Information (phone/email/ mailing address/office location) | Brief Description of Staff Responsibilities Relating to Child Study Procedures and Method of Providing Special Education Services | Additional Information |
|--|---|---|---|
| <p>Mr. Bruce Seal, Special Education Director</p> <p>Dr. Kathleen Mortensen, Executive Director, AASC</p> <p>Ms. Carrie Cremers, LSSW, AASC</p> <p>Ms. Megan Carmack, Special Education Teacher</p> <p>Ms. Kelsey Kihle, Special Education Teacher</p> | <p>bseal@designlearn.net</p> <p>kmortensen@athlosstcloud.org</p> <p>ccremers@athlosstcloud.org</p> <p>mcarmack@athlosstcloud.org</p> <p>kkihle@athlosstcloud.org</p> | <p>Provide leadership for staff members in all areas.</p> <p>Assist with leadership and the provision of quality services for students and families.</p> <p>Serve as the full-time social worker for Athlos Academy St. Cloud.</p> <p>Serve as a full time special education teacher for Athlos Academy St Cloud.</p> <p>Serve as a full time special education teacher for Athlos Academy in St. Cloud</p> | <p>Designs for Learning will provide and sub-contract with professionals in all areas that Athlos Academy St; Cloud does not have on staff.</p> |

- B. Due Process assurances available to parents: AASC has appropriate and proper due process procedures in place to assure effective and efficient results of child study procedures and method of providing special education services for the identified pupils, including alternative dispute resolution and due process hearings. *A description of these processes are as follows:*
- (1) Prior written notice to a) inform the parent that except for the initial placement of a child in special education, the school district will proceed with its proposal for the child's placement or for providing special education services unless the child's parent notifies the district of an objection within 14 days of when the district sends the prior written notice to the parent; and b) state that a parent who objects to a proposal or refusal in the prior written notice may request a conciliation conference or another alternative dispute resolution procedure.
 - (2) AASC will not proceed with the initial evaluation of a child, the initial placement of a child in a special education program, or the initial provision of special education services for a child without the prior written consent of the child's parent. A district may not override the written refusal of a parent to consent to an initial evaluation or reevaluation.
 - (3) A parent, after consulting with health care, education, or other professional providers, may agree or disagree to provide the parent's child with sympathomimetic medications unless medical, dental, mental and other health services are necessary, in the professional's judgment, that the

risk to the minor's life or health is of such a nature that treatment should be given without delay and the requirement of consent would result in delay or denial of treatment.

- (4) Parties are encouraged to resolve disputes over the identification, evaluation, educational placement, manifestation determination, interim alternative educational placement, or the provision of a free appropriate public education to a child with a disability through conciliation, mediation, facilitated team meetings, or other alternative process. All dispute resolution options are voluntary on the part of the parent and must not be used to deny or delay the right to a due process hearing. All dispute resolution processes are provided at no cost to the parent.
- (5) Conciliation Conference: a parent has the opportunity to meet with appropriate district staff in at least one conciliation conference if the parent objects to any proposal of which the parent receives prior written notice. AASC will hold a conciliation conference within ten calendar days from the date the district receives a parent's objection to a proposal or refusal in the prior written notice. All discussions held during a conciliation conference are confidential and are not admissible in a due process hearing. Within five school days after the final conciliation conference, the district must prepare and provide to the parent a conciliation conference memorandum that describes the District's final proposed offer of service. This memorandum is admissible in evidence in any subsequent proceeding.
- (6) In addition to offering at least one conciliation conference, AASC will inform parents of other dispute resolution processes, including at least mediation and facilitated team meetings. The fact that an alternative dispute resolution process was used is admissible in evidence at any subsequent proceeding. State-provided mediators and team meeting facilitators shall not be subpoenaed to testify at a due process hearing or civil action under special education law nor are any records of mediators or state-provided team meeting facilitators accessible to the parties.
- (7) Descriptions of the mediation process, facilitated team meetings, state complaint, and impartial due process hearings may be found in the AASC Procedure Safeguard Notice, attached as Appendix [I].

IV. Interagency Agreements the District has Entered

AASC has entered in the following interagency agreements or joint powers board agreements for eligible children, ages 3 to 21, to establish agency responsibility that assures that interagency services are coordinated, provided, and paid for, and that payment is facilitated from public and private sources:

| Name of Agency | Terms of Agreement | Agreement Termination/ Renewal Date | Comments |
|---------------------|--------------------|--|------------|
| [None at this time] | [Terms] | [Date] | [Comments] |

V. Special Education Advisory Council

In order to increase the involvement of parents of children with disabilities in district policy making and decision making, AASC has a special education advisory council.

- A. AASC's Special Education Advisory Council is individually established.
- B. AASC's Special Education Advisory Council *is not* a subgroup of an existing board/council/committee.
- C. At least half of AASC's parent advisory councils' members are parents of students with a disability.

[N/A] The district does not have a nonpublic school located in its boundaries.

[N/A] The district has a nonpublic school located in its boundaries and the parent advisory council includes at least one member who is a parent of a nonpublic school student with a disability, or an employee of a nonpublic school if no parent of a nonpublic school student with a disability is available to serve.

Each local council meets no less than once each year.

D. AASC's Special Education Advisory Council meets quarterly.

E. The operational procedures of AASC's Special Education Advisory Council are attached as Appendix [II].

VI. Assurances

Code of Federal Regulations, section 300.201: Consistency with State policies. AASC, in providing for the education of children with disabilities within its jurisdiction, has in effect policies, procedures, and programs that are consistent with the State policies and procedures established under sections 300.101 through 300.163, and sections 300.165 through 300.174. (Authority: 20 U.S.C. § 1413(a)(1)).

Yes: Assurance given.