

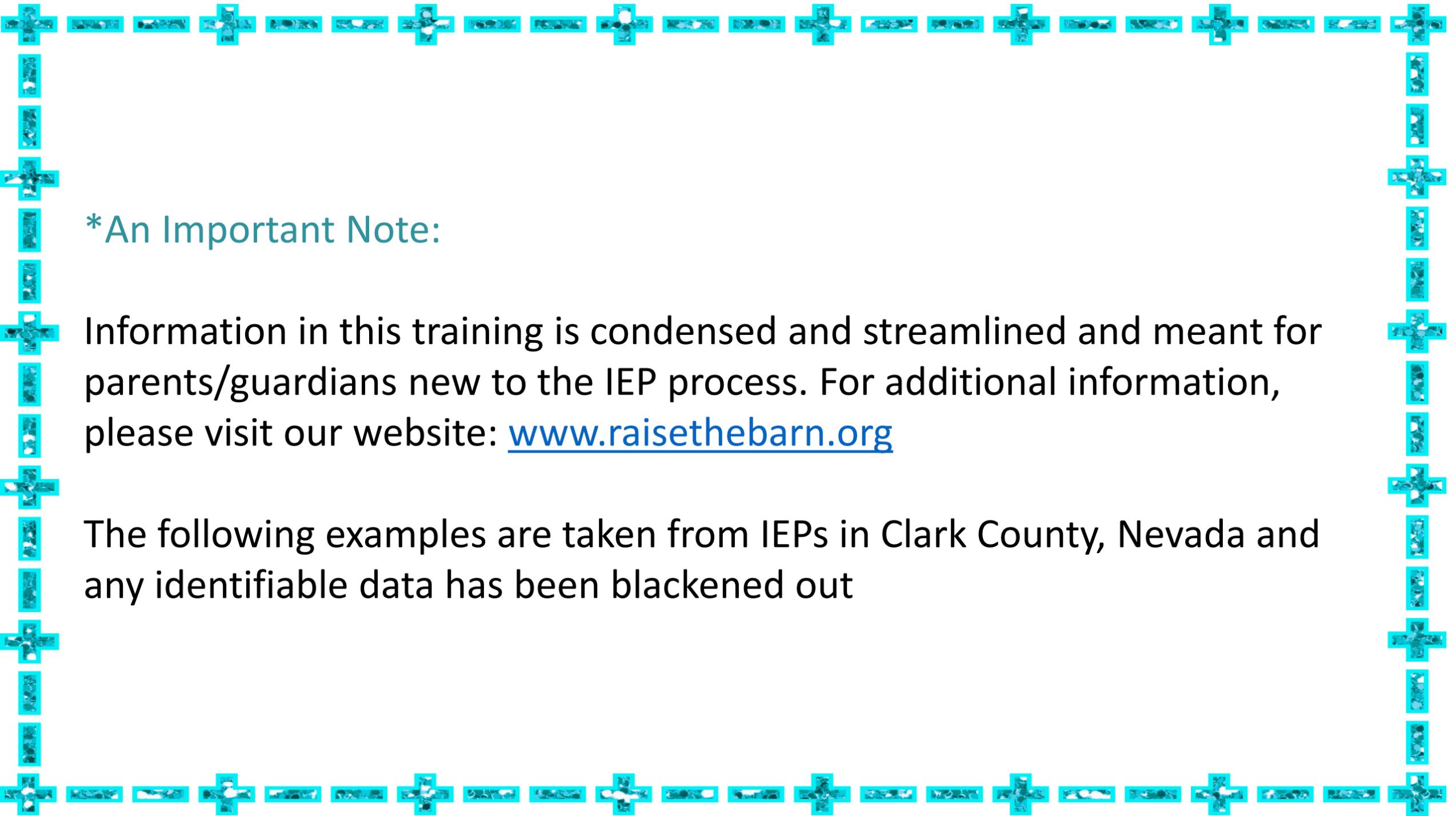
Reading a CCSD IEP:

Easy as 1, 2, 3

Understanding Your Child's Individual Education Program

By: Kerry Quinney, Ph.D.

www.raisethebarn.org



*An Important Note:

Information in this training is condensed and streamlined and meant for parents/guardians new to the IEP process. For additional information, please visit our website: www.raisethebarn.org

The following examples are taken from IEPs in Clark County, Nevada and any identifiable data has been blackened out

What is an IEP?



Individualized Education Program (IEP): Legal document defining the specialized instruction, services, and support a child whose disability impacts their learning needs to succeed in school

An IEP meeting: Held at least annually (more frequently if changes needed)

An IEP meeting will include the following team members:

- Parent/Guardian
- Special Education Teacher
- General Education Teacher
- Local Education Agency (LEA)
- Others, as appropriate (speech, therapists, advocate, student, etc.)

Meetings



IEP Meetings occur **at least once a year**

Revisions to IEP to make changes may occur throughout the year

A Three-Year-Evaluation occurs **every 3 years** or at parent/guardian's request

Goal: Determine if a student's needs have changed + determine if special education services are still warranted

Upcoming Meeting Information

STATE OF NEVADA INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)

INFORMATION

STUDENT/PARENT INFORMATION	ELIGIBILITY CATEGORY	MEETING INFORMATION
Student _____ Sex _____	<input type="checkbox"/> Autism Spectrum Disorder	DATE OF MEETING _____
Birthday _____	<input type="checkbox"/> Deaf/Blind	DATE OF LAST IEP MEETING _____
Student Primary Language _____	<input type="checkbox"/> Developmental Delay	PURPOSE OF MEETING
Student English Proficiency Code (optional) _____	<input type="checkbox"/> Emotional Disturbance	<input type="checkbox"/> Interim IEP
Address _____	<input type="checkbox"/> Health Impairment	<input type="checkbox"/> Initial IEP
Student Phone _____	<input type="checkbox"/> Hearing Impairment/Deaf	<input checked="" type="checkbox"/> Annual IEP
LEP Status: _____	<input type="checkbox"/> Intellectual Disability	<input type="checkbox"/> IEP Following 3-Yr Reevaluation
Federal Placement Code: _____	<input type="checkbox"/> Multiple Impairments	<input type="checkbox"/> Revision To IEP Dated: _____
Federal Student Ethnicity Code: _____	<input type="checkbox"/> Orthopedic Impairment	<input type="checkbox"/> Exit/Graduation
Parent/Guardian/Surrogate _____	<input type="checkbox"/> Specific Learning Disability	<input type="checkbox"/> IEP Revision Without A Meeting:
Parent Phone (Home) _____ (Work) _____	<input type="checkbox"/> Speech/Language Impairment	At the request of: <input type="checkbox"/> Parent or <input type="checkbox"/> School District
Optional: Cell _____ Email _____	<input type="checkbox"/> Traumatic Brain Injury	<input type="checkbox"/> Other: _____
Primary Language Spoken at Home _____ eng -English	<input type="checkbox"/> Visual Impairment/Blind	IEP SERVICES WILL BEGIN _____
Interpreter or Other Accommodations Needed _____	ELIGIBILITY DATE 06/17/2019	ANTICIPATED _____
Emergency Contact/Phone Number _____	ANTICIPATED 06/16/2022	DURATION OF SERVICES _____
Current School _____	3-YR REEVALUATION	IEP REVIEW DATE 05/10/2021
Zoned School _____		COMMENTS
		Annual Review/Kinder Placement; Addition of 3 Instructional Models. Meeting held via Google Meet.

Page 2: Meeting Participants

This page includes all who attend the meeting

Date: [REDACTED] Student Name: [REDACTED] Local ID#: 1 [REDACTED] State ID#: [REDACTED] Grade: PK DOB: [REDACTED] Page 2 of 2

STATE OF NEVADA INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)

IEP PARTICIPATION

Parent/Guardian/Surrogate* _____	Speech/Language Therapist/Pathologist/Specialist _____
Student** _____	School Nurse _____
LEA Representative* _____	Interpreter _____
Special Education Teacher* _____	Other (name and role) _____
Regular Education Teacher*** _____	Other (name and role) _____
School Psychologist _____	Other (name and role) _____

* Required Participant.

** Student must be invited when transition is discussed (beginning at age 14 or younger if appropriate).

*** The IEP team must include at least one regular education teacher of the student (if the student is, or may be, participating in the regular education environment).

Page 3: Procedural Safeguards

- This information helps ensure that parents/guardians/students understand their special education rights
- This is a separate document you will receive during your annual IEP
- You will be asked to sign this page during your annual IEP meeting
- [Procedural Safeguard Info](#)

Date: [REDACTED] Student Name: [REDACTED] Local ID#: [REDACTED] State ID#: [REDACTED] Grade: PK DOB: [REDACTED] Page 3 of 22

STATE OF NEVADA INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)

PROCEDURAL SAFEGUARDS

☐ I have received a statement of procedural safeguards under the Individuals with Disabilities Education Act (IDEA) and these rights have been explained to me in my primary language.

Parent Signature _____

AT LEAST ONE YEAR PRIOR TO REACHING AGE 18, STUDENTS MUST BE INFORMED OF THEIR RIGHTS UNDER IDEA AND ADVISED THAT THESE RIGHTS WILL TRANSFER TO THEM AT AGE 18.

- ☐ Not applicable. Student will not be 18 within one year, and the student's next annual IEP meeting will occur no later than the student's 17th birthday.
- ☐ The student has been informed of his/her rights under IDEA and advised of the transfer of these rights at age 18.

Assessments, Present Levels, Effect Statement

Let's break this document down into three sections

Pre-K Example

Date: [REDACTED] Student Name: [REDACTED] Local ID#: [REDACTED] ID#: [REDACTED] Grade: [REDACTED] DOB: [REDACTED] Page 4 of 22

STATE OF NEVADA

INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Consider results of the initial evaluation or most recent reevaluation, and the academic, developmental, and functional needs of the student, which may include the following areas: academic achievement, language/communication skills, social/emotional/behavior skills, cognitive abilities, health, motor skills, adaptive skills, pre-vocational skills, vocational skills, and other skills as appropriate. For students who are 16 or older, or will turn 16 when this IEP is in effect, also consider the results of age appropriate transition assessments related to training/education, employment, and independent living skills (as appropriate).

ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES
Multidisciplinary Team Report (MDT): June [REDACTED] Cognitive: Teaching Strategies Gold (TSG) Data: Aug. 2020-May 2021; Brigance Early Childhood Inventory III: March-May 2021; Teacher Observations/Documentation and Student Work Samples: Aug 2020-May 2021	According to the Multidisciplinary Team Report (MDT) dated [REDACTED] demonstrated deficits in the following areas: cognition, language/communication, social emotional/behavior, self-help, and fine motor skills. COGNITIVE: Review of current Teaching Strategies Gold data indicates that [REDACTED] is meeting widely held expectations for children in a Pre-K 4 class in most areas of cognitive abilities, with the exception of dramatic play (14b). He demonstrates advanced early literacy and mathematics skills. [REDACTED] is very smart and has some exceptional skills, such as identifying and locating countries, provinces, cities, and capitals around the world. [REDACTED] is beginning to sustain work on age-appropriate, interesting tasks and he can ignore most distractions and interruptions, when engaged in preferred activities. He may require prompting when engaged in activities that are not preferred. He plans and pursues a variety of appropriately challenging tasks. Is beginning to think problems through. He is beginning to use a variety of resources to find answers to questions. He is beginning to change plans if a better idea is thought of or proposed. He is beginning to talk about experiences in order, provide a few details, and evaluate the experience. He draws on everyday experiences and applies this knowledge to a similar situation. RECALL: [REDACTED] recalls 3 or 4 items removed from view. He recalls where items were put in the past and he recalls information that was previously taught. [REDACTED] was asked to repeat 4- and 5-digit numbers (Brigance E-9 assessment) after the teacher modeled. He correctly repeated "7, 2, 5, 4" and "9, 6, 5, 7" (5-0 yrs.) and then "6, 1, 8, 3, 9" and "5, 9, 3, 1, 8" (7.0 yrs.) [REDACTED] recalls what to do in certain situations. He was given the Brigance F-8 assessment. [REDACTED] was asked (what to do in different situations) of [REDACTED] specifically, "what do you do when you [REDACTED]?" He responded as follows: "So I have a bellyache" (are sick); "so I cough" (when sick) and then the teacher asked if he goes to the doctor and he responded "yeah"; so, I got a wash them" (see your hands are dirty); "so it gets light" (want to go into a room that is dark; "drink" (are thirsty); "I can't go outside" (want to go outside and it is raining); "go to see the fire" (see a house on fire). FUNCTION OF OBJECTS: On 3/22/2021, [REDACTED] was asked to identify the use of objects (Brigance F-9) He said "go to sleep" (beds); "to go home" ("houses"); "to work" (pencils); "to cook" ("dishes"); "to go outside" (coats); "to cook" (stoves); "to go to bookstore" (books); "to call our friend" (telephones); "to cut" (scissors); "to go" (keys); "to cook" (refrigerators) (4.0); "to go fly" (airplanes); and "to wake up" (clocks-) (6.0).	No effect statement is required. Students in a Pre-K-4 class involve others in pretend play (4.6 yrs.) [REDACTED] deficits in his cognitive skills make it difficult for him to engage in dramatic play with his peers at school.

1st Column:
Assessments used

2nd Column:
Assessment Results

3rd Column:
Effect Statement

This example lists the assessments used to determine cognitive functioning in Pre-K (i.e. early literacy, math, and dramatic play)

Assessments, Present Levels, Effect Statement

2nd Grade Example

This example shows assessments used for Language/Communication



<p>Language/Communication: Brigance Childhood Inventory III: Sep. Teacher Observations and Documentation: Aug. Review of Speech Therapy data 8/2022 -</p>	<p>LANGUAGE/COMMUNICATION: considered "nonverbal" however, he does use speech (very softly) to communicate when he needs to use the restroom, to say "YES/NO," and to respond to some "WH" questions. He will respond "No" daily when he does not want something offered to him, such as food items. He also uses his speech generating device (SGD) with the Proloquo2Go app to request something he wants/needs or to request ending something undesirable (manding). For example, he has used his SGD at school to independently request the following: "I want sleep," "I want all done," "I want [redacted] pom," "I want water bottle," "I want candy," and "I want ABC puzzle," using his SGD (see details below.) Ian demonstrates immediate echolalia, at times, to repeat staff.</p>	<p>Second grade students communicate appropriately with staff and peers, using at least 5-word sentences. They initiate greetings and can maintain a conversation for multiple exchanges. They use plurals, the past tense, and the present progressive -ing. They follow three-step directions without cues (5 yrs. old) They ask for the meaning of words (6 yrs.), ask questions for information, and announce topic shifts</p>
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July 2018 - Infinite Campus Format 2020

IEP Page 7

Column 1 includes any assessment used to gather data for Column 2

This can include assessments pertaining to:
 Academics (Reading, Writing, Math, etc.)
 Communication and Language
 Social Emotional, Behavior, Social Skills, Study Skills
 Functional/Adaptive Skills (Self-Help, etc.)
 Fine/Gross Motor Skills
 Etc.

Date	Student Name	Local ID#	State ID#	Grade: 02	DOB	Page 8 of 23
STATE OF NEVADA						
INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)						
PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE						
<p>Staff uses a multimodal approach when assessing [redacted] such as, speech, SGD, and pictures presented in various fields to get [redacted] receptively identify/respond.</p> <p>FOLLOWING DIRECTIONS (Receptive): [redacted] seems to understand what others are saying to him, provided he is attending. He follows many one-step directions; however, staff must gain [redacted] attention first before giving instruction. He does well, once staff models a skill. For example, he used the correct order (numbered letters) to write capital letters, once the teacher modeled it for him. During morning group instruction, he clapped at the appropriate time during the Days of the Week song and he imitated the teacher as she touched various body parts during a different song. He required no prompting to imitate.</p> <p>[redacted] was given the Brigance E-7 (Verbal Directions) assessment on [redacted] he was able to follow some one-step directions (2 yrs. old). He was able to sit down, stand up, come here, and throw away the trash. He was not able to do the following: show me your ears (he touched nose); give it to me; put the block in the box; put it on the chair; put it under the chair, and bring it to me. He does not yet follow 2-Step directions (3 yrs.)</p> <p>CONVENTIONAL GRAMMAR/SYNTAX: Vocally, [redacted] uses one- to two-word phrases to communicate and three- to four- word phrases using his speech generating device to communicate (see communicative intent below.) He does not yet use articles (a, an, the) in sentences or simple pronouns (I, you, he/she). He does not use "ing" at the end of words. He uses some multisyllabic words when responding to questions. He does not use "s" and "es" at the end of words to indicate possession. [redacted] can correctly identify some action words, when shown pictures.</p> <p>DESCRIPTIVE LANGUAGE: [redacted] knows his colors and can identify the color of pictures/objects. He does not use other adjectives to communicate thoughts/ideas or to describe things (6 yrs.), using speech or his SGD. He does not yet demonstrate time concepts (5 yrs.) or positional concepts (first, middle, last.) He does not demonstrate an expressive vocabulary of at least 3,000 words.</p> <p>FUNCTION OF OBJECTS: [redacted] can identify the function of familiar objects receptively. From a field of 4 pictures (B, [redacted] cards), Ian was asked to identify objects after being given their function. For example, he receptively identified (touched) the following after being asked as series of "Which one [redacted] questions: Pencil (write), crayon (color), and toothbrush (brush teeth.) On 8/12/2022 and 8/25/2022, [redacted] was shown pictures on the Smartboard and asked which body part is used for [redacted] he correctly chose the picture of an ear (field of 5 pictures) when shown a radio.</p> <p>VOCABULARY: [redacted] can identify [redacted] ms, with at least 80% accuracy. He will quietly state what the item is when [redacted] listen closely to hear him. Ian identified the following vocabulary on 8/12/2022 and 8/25/2022: Shoes, socks, shirt, pants, scissors, lamp, fish, car, duck, umbrella, dog, boy, sun (vocally). When shown a picture of a toilet he said, "Go pee pee." When initially shown the pictures, he stated the correct colors of the pictures, rather than identifying the objects, for example: "green" (dinosaur), "blue" (airplane), "yellow" (duck), "yellow" (moon), "red" (car), "red" (umbrella). Once the teacher modeled how to identify the pictures, he began to state the</p>		<p>(6 yrs.) They use words to invite others to play and coordinate simple sentences. They can demonstrate an expressive vocabulary of more than 3,000 words. They answer more complex questions, such as "WHEN," "WHO," "WHY," "WHERE," and "HOW" (4yrs.) questions. They ask questions [redacted] deficits in language/communication make it difficult for him to participate in the general education environment.</p>				

Column 1

Column 2

Assessments, Present Levels, Effect Statement (cont.)

Date: 05/20/2021 Student Name: [REDACTED] Local ID#: [REDACTED] State ID#: [REDACTED] Grade: PK DOB: [REDACTED] Page 4 of 22

STATE OF NEVADA INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

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ASSESSMENTS CONDUCTED	ASSESSMENT RESULTS	EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES
<p>Multidisciplinary Team Report (MDT): June [REDACTED]</p> <p>Cognitive: Teaching Strategies Gold (TSG) Data: Aug. 2020-May 2021; Brigance Early Childhood Inventory III: March-May 2021; Teacher Observations/Documentation and Student Work Samples: Aug 2020-May 2021</p>	<p>According to the Multidisciplinary Team Report (MDT) dated [REDACTED] demonstrated deficits in the following areas: cognition, language/communication, social emotional/behavior, self-help, and fine motor skills.</p> <p>COGNITIVE: Review of current Teaching Strategies Gold data indicates that [REDACTED] is meeting widely held expectations for children in a Pre-K 4 class in most areas of cognitive abilities, with the exception of dramatic play (14b). He demonstrates advanced early literacy and mathematics skills. [REDACTED] is very smart and has some exceptional skills, such as identifying and locating countries, provinces, cities, and capitals around [REDACTED].</p> <p>[REDACTED] is beginning to sustain work on age-appropriate, interesting tasks and he can ignore most distractions and interruptions, when engaged in preferred activities. He may require prompting when engaged in activities that are not preferred. He plans and pursues a variety of appropriately challenging tasks. Is beginning to think problems through. He is beginning to use a variety of resources to find answers to questions. He is beginning to change plans if a better idea is thought of or proposed. He is beginning to talk about experiences in order, provide a few details, and evaluate the experience. He draws on everyday experiences and applies this knowledge to a similar situation.</p> <p>RECALL: [REDACTED] recalls 3 or 4 items removed from view. He recalls where items were put in the past and he recalls information that was previously taught. [REDACTED] was asked to repeat 4- and 5-digit numbers (Brigance E-9 assessment) after the teacher modeled. He correctly repeated "7, 2, 5, 4" and "9, 6, 5, 7" (5-0 yrs.) and then "6, 1, 8, 3, 9" and "5, 9, 3, 1, 8" (7.0 yrs.).</p> <p>[REDACTED] recalls what to do in certain situations. He was given the Brigance E-8 assessment. [REDACTED] was asked (what to do in different situations) of [REDACTED] specifically, "what do you do when you [REDACTED]?" He responded as follows: "So I have a bellyache" (are sick); "so I cough" (when sick) and then the teacher asked if he goes to the doctor and he responded "yeah"; so, I got a wash them" (see your hands are dirty); "so it gets light" (want to go into a room that is dark; "drink" (are thirsty); "I can't go outside" (want to go outside and it is raining); "go to see the fire" (see a house on fire).</p> <p>FUNCTION OF OBJECTS: On 3/22/2021, [REDACTED] was asked to identify the use of objects (Brigance F-9) He said "go to sleep" (beds); "to go home" ("houses"); "to work" (pencils); "to cook" ("dishes"); "to go outside" (coats); "to cook" (stoves); "to go to bookstore" (books); "to call our friend" (telephones); "to cut" (scissors); "to go" (keys); "to cook" (refrigerators) (4.0); "to go fly" (airplanes); and "to wake up" (clocks-) (6.0).</p>	<p>No effect statement is required.</p> <p>Students in a Pre-K-4 class involve others in pretend play (4.6 yrs. [REDACTED]) deficits in his cognitive skills make it difficult for him to engage in dramatic play with his peers at school.</p>

Column 2 = The results from assessments used in Column 1

Column 2:
Assessment Results/Present Levels

Assessments, Present Levels, Effect Statement (cont.)

Date: 05/16/2021 Student Name: [REDACTED] Local ID#: [REDACTED] State ID#: [REDACTED] Grade: PK DOB: [REDACTED] Page 4 of 22

STATE OF NEVADA

INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

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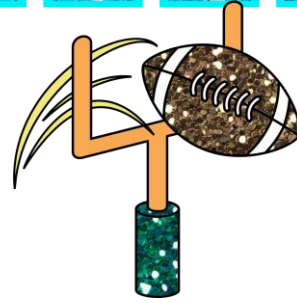
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Column 3:
Effect Statement

Column 3 = Explains how disability affects learning and participation in general education curriculum

Also gives an idea of how students function relative to their same-aged peers without an IEP (what kids should be doing at this age)

Also known as "impact statement"



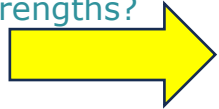
Note:

The number of pages of "Present Levels" will vary according to the amount of information necessary to paint a good picture of the student. My IEPs tended to be very lengthy because I take a ton of data.

The next section that follows will be the "Strengths, Concerns, Interests and Preferences" section

Strengths, Concerns, Interests and Preferences

What are the student strengths?



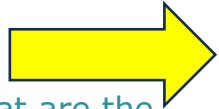
STATEMENT OF STUDENT STRENGTHS

██████ has advanced literacy and math skills for her age. She is very social and gets along well with others. She is an independent worker and will remain on task for an extended period. She is a classroom leader and helps with other students and classroom tasks. She follows all classroom and school procedures.

STATEMENT OF PARENT EDUCATIONAL CONCERNS

Parents concerned with language deficits..

What are the parent concerns?



STATEMENT OF STUDENT'S PREFERENCES AND INTERESTS (required if transition services will be discussed, beginning at age 14 or younger if appropriate)

██████ enjoys literacy activities. She loves reading calendar. She likes to use blocks to build detailed structures. She likes to ride the tricycle.



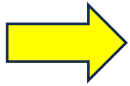
What does the student like?

***Parents, this part is really important for school and at home. We need to know what the student LIKES and LOVES. I give my students frequent "reinforcer assessments" to determine what they enjoy. You can really help teachers by providing a thorough list. Make sure to include the one item that they love the most, for example, they may cry/become upset when you remove the item.

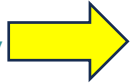
Strengths, Concerns, Interests and Preferences

Seven questions that must be answered during IEP Meeting

1- If this is checked
"Yes", a Behavior
Intervention Plan (BIP)
is needed



2- Is assistive technology
needed?



3-6 Does child have
visual or hearing deficits
or limited English

CONSIDERATION OF SPECIAL FACTORS

1. Does the student's **behavior** impede the student's learning or the learning of others? ☐ No. ☒ Yes.
If YES, IEP committee **must provide** positive behavioral strategies, supports and interventions, or other strategies, supports and interventions to address that behavior.
☒ Addressed in IEP.
2. Does the student require **assistive technology** devices and services? ☐ No. ☒ Yes.
If YES, IEP committee **must determine** nature and extent of devices and services.
☒ Addressed in IEP.
3. Does the student have **limited English proficiency**? ☒ No. ☐ Yes.
If YES, IEP committee **must consider** the following (check box if IEP committee considered the item):
☐ Language needs of the student as those needs relate to the student's IEP.
4. Is the student **blind or visually impaired**? ☒ No. ☐ Yes.
If YES, IEP committee must evaluate reading and writing skills, needs, and appropriate reading and writing media (including an evaluation of the child's future needs for instruction in Braille or use of Braille) and **must provide** for instruction in Braille and use of Braille **unless determined not appropriate** for the student.
☐ Braille instruction and use of Braille is not appropriate for student. ☐ Braille instruction and use of Braille is addressed in IEP.
5. Does the student have communication needs that require IEP services? ☒ No. ☐ Yes.
If YES, IEP committee **must determine** nature and extent of services.
☐ Addressed in IEP.
6. Is the student **deaf or hard of hearing**? ☒ No. ☐ Yes.
If YES, IEP committee **must consider** the student's language and communication needs and consider the following (check box if IEP committee considered the item):
☐ The related services and program options that provide the student with an appropriate and equal opportunity for communication access.
☐ The student's primary communication mode.
☐ The availability to the student of a sufficient number of age, cognitive, academic and language peers of similar abilities.
☐ The availability to the student of adult models who are deaf or hearing impaired and who use the student's primary communication mode.
☐ The availability of special education teachers, interpreters and other special education personnel who are proficient in the student's primary communication mode.
☐ The provision of academic instruction, school services and direct access to all components of the educational process, including, without limitation, advanced placement courses, career and technical education courses, recess, lunch, extracurricular activities and athletic activities.
☐ The preferences of the parent or guardian of the student concerning the best feasible services, placement and content of the student's IEP.
☐ The appropriate assistive technology necessary to provide the student with an appropriate and equal opportunity for communication access.

Strengths, Concerns, Interests and Preferences (cont)

Seven questions that must be answered during IEP

7.

Does the student have a Specific Learning Disability and Dyslexia?

☒ No.

☐ Yes.

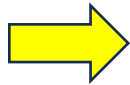
If YES, IEP committee **must consider the following** instructional approaches (check box if IEP committee considered the item):

- ☐ Explicit, direct instruction that is systematic, sequential and cumulative and follows a logical plan of presenting the alphabetic principle that targets the specific needs of the student.
- ☐ Individualized instruction to meet the specific needs of the student in an appropriate setting that uses intensive, highly-concentrated instruction methods and materials that maximize student engagement.
- ☐ Meaning-based instruction directed at purposeful reading and writing, with an emphasis on comprehension and composition.
- ☐ Multisensory instruction that incorporates the simultaneous use of two or more sensory pathways during teacher presentations and student practice.

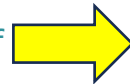
Goals Pages

If there are deficits in a particular area, goals will be written to address those deficits

Annual Goal (to be obtained by next year's annual IEP meeting)
This student has cognitive and language deficits.



Box will be checked if goal needs to be worked on during ESY (summer)



IEP GOALS, INCLUDING ACADEMIC AND FUNCTIONAL GOALS, AND BENCHMARKS OR SHORT-TERM OBJECTIVES

MEASURABLE ANNUAL GOAL (including how progress toward the annual goal will be measured)		PROGRESS REPORT			
<p><u>Cognitive/Language:</u> By the <u>annual review date</u>, in a classroom setting, [redacted] will demonstrate nonverbal imitation to improve attending and identify body parts, with adults/peers achieving criteria of 80% as measured by observation and documentation as implemented by Special Education Teacher and Special Education Staff.</p> <p><input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates: <input type="checkbox"/> Training/Education <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Skills <input type="checkbox"/> Other</p> <p><input checked="" type="checkbox"/> Check here if this goal will be addressed during Extended School Year Services (ESY)</p>		1. Satisfactory Progress Being Made (continue)			
		2. Unsatisfactory Progress Being Made (need to review/revise)			
		3. Goal Met (note date)			
		Date	Date	Date	Date
BENCHMARK OR SHORT-TERM OBJECTIVE					
# 1 [redacted] will imitate at least 5 simple gross motor actions after an adult models and says "do this" (i.e. clap hands, touch legs, touch head, touch hands, feet, etc.)					
# 2 [redacted] will imitate at least 5 actions that involve touching various body parts he cannot see					
after an adult models and says "do this" (i.e. "touch head," "touch eyes"...ears, hands, feet, etc.)					
# 3 [redacted] will imitate a peer after an adult says "Do that" (peer will do things such as clap hands, turn off/on light, color on paper, throw ball, throw item in trash)					
# 4 [redacted] will imitate peers and adults					

Who will work on goals



Benchmarks/Objectives: annual goal is broken down into sections



There should be a goal to address each deficit area

Method for Reporting Progress

Sent home to parents/guardians 4x per school year

METHOD FOR REPORTING PROGRESS

METHOD FOR REPORTING THE STUDENT'S PROGRESS TOWARD MEETING ANNUAL GOALS

(check all methods that will be used)

- | | |
|---|---|
| <input type="checkbox"/> IEP Goals Pages | <input type="checkbox"/> District Report Card |
| <input checked="" type="checkbox"/> Specialized Progress Report | <input type="checkbox"/> Parent Conferences |
| <input type="checkbox"/> Other _____ | |

PROJECTED FREQUENCY OF REPORTS

- | | |
|---|--------------------------------------|
| <input checked="" type="checkbox"/> Quarterly | <input type="checkbox"/> Semester |
| <input type="checkbox"/> Trimester | <input type="checkbox"/> Other _____ |

Parent will receive an IEP Progress Report four times during the school year

4x

Special Education Services

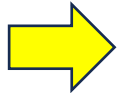


How much time spent
working on deficit area

SPECIAL EDUCATION SERVICES

SPECIALLY DESIGNED INSTRUCTION	BEGINNING AND ENDING DATES	FREQUENCY OF SERVICES	LOCATION OF SERVICES
Social/Emotional/Behavior	07/28/2023 - 06/20/2024	320 minutes per week	Self Contained
Cognitive	07/28/2023 - 06/20/2024	500 minutes per week	Self Contained
Self Help	07/28/2023 - 06/20/2024	210 minutes per week	Self Contained
Fine Motor	07/28/2023 - 06/20/2024	200 minutes per week	Self Contained
Social/Emotional/Behavior/Lunch Recess	07/28/2023 - 06/20/2024	150 minutes per week	General Education
Communication	07/28/2023 - 06/20/2024	460 minutes per week	Self Contained

Deficit areas



Where will student
be provided services

Supplementary Aids and Services

What accommodations or modifications does the student require to be successful?

SUPPLEMENTARY AIDS AND SERVICES

Includes aids, services, and other supports provided in regular education classes, other education-related settings (including special education settings), and in extracurricular and nonacademic settings to enable students with disabilities to be educated with nondisabled students to the maximum extent appropriate.

MODIFICATION, ACCOMMODATION, OR SUPPORT FOR STUDENT OR PERSONNEL Provide specific description(s) below:	BEGINNING AND ENDING DATES	FREQUENCY OF SERVICES	LOCATION OF SERVICES
Praise [REDACTED] when he is calm.	05/11/2021 - 05/10/2022	Throughout School Day	School Campus
Remind [REDACTED] (not high pitched or too soft) and model what [REDACTED] Praise him when he corrects.	05/11/2021 - 05/10/2022	Throughout School Day	School Campus
Seat next to a peer who demonstrates age-appropriate social emotional skills.	05/11/2021 - 05/10/2022	Throughout School Day	School Campus
Explain WHY he should not engage in maladaptive behavior(when it occurs) and model and incorporate role-play scenarios to teach/reinforce appropriate behavior.	05/11/2021 - 05/10/2022	Throughout School Day	School Campus
When inflexibility results in tantrum behavior, teach/remind [REDACTED] about alternative ways to use materials or complete activities (improve flexibility).	05/11/2021 - 05/10/2022	Throughout School Day	School Campus

Related Services

Other services like speech, occupational/physical therapy, transportation

RELATED SERVICES

RELATED SERVICE	SERVICE TYPE AND/OR DESCRIPTION <i>A - Assessment C - Consultative D - Direct</i>	BEGINNING AND ENDING DATES	FREQUENCY OF SERVICES	LOCATION OF SERVICES
<input checked="" type="checkbox"/> <u>Speech/Language</u>	D	07/28/2023 - 06/20/2024	60 minutes per month	Speech/Sped room
	D - ESY	07/28/2023 - 06/20/2024	60 minutes per month	Speech/Sped room
<input checked="" type="checkbox"/> <u>Transportation</u>	D	07/28/2023 - 06/20/2024	10 minutes per week	Curb to Curb

Participation in Statewide and/or District-wide Assessments

Begins in 3rd Grade

PARTICIPATION IN STATEWIDE AND/OR DISTRICT-WIDE ASSESSMENTS

Indicate how the student will participate in statewide or district - wide assessments.	If the student will participate in an alternate assessment, explain why the student cannot participate in the regular assessment, and why the particular alternate assessment selected is appropriate.	If the student will participate in a regular assessment, does the student require accommodations?
State Criterion-Referenced Test (CRT) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
College and Career Readiness Assessment <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, list on "Accommodation(s) for the Nevada Proficiency Examination Program" (attach form).
Other (List): <u>NAA</u> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Alternate		<input type="checkbox"/> No <input type="checkbox"/> Yes List Accommodations:

More on this in another training

Extended School Year Services (ESY)

Summer School

EXTENDED SCHOOL YEAR SERVICES

Does the student require extended school year services?

☐

No

☒

Yes

If YES, IEP goals and benchmarks/short-term objectives and/or related services to be implemented in ESY must be identified.

If need for ESY is to be determined at a later date, indicate date by which IEP decision will be made:

- The IEP team determines if ESY is warranted
- Students who have difficulty retaining skills over the summer months would benefit

Placement

*Students with disabilities should be included in the general education program to the maximum extent possible. Removing a student from the general education only occurs if the nature or severity of the disability is such that education in general education classes using supplementary aids and services cannot be achieved adequately. This is the **Least Restrictive Environment (LRE)** and is determined by the IEP team.

Least Restrictive



Most Restrictive

There are "continuum of placement" options. Examples:

- General Education Class (no removal)
- Combination of General Education & Special Education Class (eg. Resource Room)
- Self-Contained Program
- Special School
- Residential
- Hospital
- Home

Placement Page (cont.)

How much time spent in general ed



PLACEMENT

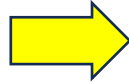
Start Date: [REDACTED] End Date: [REDACTED]

PLACEMENT CONSIDERATIONS

PERCENTAGE OF TIME IN REGULAR EDUCATION ENVIRONMENT

What placement is chosen

For this example, self-contained



<input type="checkbox"/>	<i>Selected</i>	<input checked="" type="checkbox"/>	<i>Rejected</i>	Regular class with supplementary aids and services (no removal)
<input type="checkbox"/>	<i>Selected</i>	<input checked="" type="checkbox"/>	<i>Rejected</i>	Regular class and special education class (e.g., resource) combination
<input checked="" type="checkbox"/>	<i>Selected</i>	<input type="checkbox"/>	<i>Rejected</i>	Self-contained program
<input type="checkbox"/>	<i>Selected</i>	<input type="checkbox"/>	<i>Rejected</i>	Special school
<input type="checkbox"/>	<i>Selected</i>	<input type="checkbox"/>	<i>Rejected</i>	Residential
<input type="checkbox"/>	<i>Selected</i>	<input type="checkbox"/>	<i>Rejected</i>	Hospital
<input type="checkbox"/>	<i>Selected</i>	<input type="checkbox"/>	<i>Rejected</i>	Home
<input type="checkbox"/>	<i>Selected</i>	<input type="checkbox"/>	<i>Rejected</i>	Other

The student will spend 36 % of his or her school day in the regular education environment.

JUSTIFICATION FOR PLACEMENT INVOLVING REMOVAL FROM REGULAR EDUCATION ENVIRONMENTS*

Explain why the IEP goals and objectives cannot be implemented in regular education environments, including the reasons why the team rejected a less restrictive placement.

Include an explanation of any harmful effects on the learning of this or other students which affected the placement selection.

*More info about this in
Another training*

The IEP team will justify the placement here by answering 6 questions

*Regular education environments include academic classes (which might include field trips linked to the curriculum), nonacademic settings (such as recess), and extracurricular activities (for example, sports, after-school clubs, band, etc.).

IEP Implementation Page

This is where you will agree or disagree with the IEP and sign
This is the last page of IEP

IEP IMPLEMENTATION

- ☐ Parent/Guardian attended via telephone conference.
- ☒ As the parent, I agree with the components of this IEP. I understand that its provisions will be implemented as soon as possible after the IEP goes into effect.
- ☐ As the parent, I disagree with all or part of this IEP. I understand that the school district must provide me with written notice of any intent to implement this IEP. If I wish to prevent the implementation of this IEP, I must submit a written request for a due process hearing to the local school district superintendent.

Parent Signature _____

- ☒ A copy of this IEP was provided to the student's parent on: 02/19/2019 [REDACTED] _____
(Date) (Print Name) (Print Title)



The End

I tried to condense and simplify this information. There is more to know.

Please visit: www.raisethebarn.org for upcoming trainings

Contact drquinney@raisethebarn.org for more info

Thank you for taking the time to learn about reading IEPs.
This is crucial for all parents.

Clip Art

Thank you to the following clip art designer:

