

SPECIAL LEARNING NEEDS

Early identification of students with learning difficulties *is necessary* in order to provide greater opportunities for successful remediation. Many times children with special learning needs are not identified until the intermediate grades when the academic demands are heightened. Inconsistencies in performance, frustration, possible behaviors problems, or withdrawal from class work are signals of possible problems.

For more information:

www.fdlrs.org

Attention Deficit Disorder

ADHD is a neurodevelopmental disorder affecting both children and adults. It is described as a “persistent” or on-going pattern of inattention and/or hyperactivity-impulsivity that gets in the way of daily life or typical development. Individuals with ADHD may also have difficulties with maintaining attention, executive function (or the brain’s ability to begin an activity, organize itself and manage tasks) and working memory.

(For the purposes of educational programming and the development of a Student Support Plan in the Catholic schools and Centers in the Diocese of St. Petersburg, a medical diagnosis is required)

There are three presentations of ADHD:

- Inattentive
- Hyperactive-impulsive
- Combined inattentive & hyperactive-impulsive

Diagnosis:

When diagnosing ADHD, clinicians now need to specify whether a person has mild, moderate or severe ADHD. This is based on how many symptoms a person has and how difficult those symptoms make daily life. Several symptoms of ADHD now need to be present in more than one setting rather than just some symptoms in more than one setting.

In making the diagnosis, children still should have six or more symptoms of the disorder. In people 17 and older the DSM-5 states they should have at least five symptoms.

Inattentive presentation:

- Fails to give close attention to details or makes careless mistakes.
- Has difficulty sustaining attention.
- Does not appear to listen.
- Struggles to follow through on instructions.
- Has difficulty with organization.
- Avoids or dislikes tasks requiring a lot of thinking.
- Loses things.
- Is easily distracted.
- Is forgetful in daily activities.

Hyperactive-impulsive presentation:

- Fidgets with hands or feet or squirms in chair.
- Has difficulty remaining seated.
- Runs about or climbs excessively in children; extreme restlessness in adults. Difficulty engaging in activities quietly. Acts as if driven by a motor; adults will often feel inside like they were driven by a motor. Talks excessively. Blurts out answers before questions have been completed. Difficulty waiting or taking turns.

(Reference; American Academy for Child and Adolescent Psychiatry, DSMV Scale, 2014)

(The difference between DSMIV and DSMV is that all symptoms are followed by examples of different ways they may show up, including ways they would be exhibited in older adolescents and adults. Please refer to DSMV for additional information)

For additional information please access the following website:

<http://www.help4adhd.org/documents/ADHD%20and%20the%20DSM%205%20Fact%20Sheet%202.0.pdf>

<http://www.chadd.org/portals/0/am/images/understading/iceberg.pdf>

Sensory Processing Disorder

SPD, formerly known as “sensory integration dysfunction”) is a condition that exists when sensory signals *don't* get organized into appropriate responses. Pioneering occupational therapist and neuroscientist A. Jean Ayres, PhD, likened SPD to a neurological “traffic jam” that prevents certain parts of the brain from receiving the information needed to interpret sensory information correctly. A person with SPD finds it difficult to process and act upon information received through the senses, which creates challenges in performing countless everyday tasks. Motor clumsiness, behavioral problems, anxiety, depression, school failure, and other impacts may result if the disorder is not treated effectively.

Sensory processing (sometimes called “sensory integration” or SI) is a term that refers to the way the nervous system receives messages from the senses and turns them into appropriate motor and behavioral responses. Whether you are biting into a hamburger, riding a bicycle, or reading a book, your successful completion of the activity requires processing sensation or “sensory integration.”

The exact cause of Sensory Processing Disorder- like the causes of ADHD and so many other neurodevelopmental disorders- has not been identified. However, preliminary studies and research suggest some leading contenders.

-from *Sensational Kids: Hope and Help for Children with Sensory Processing Disorder* by Lucy Jane Miller, PhD, (2006)

Additional information may be found at the following website(s)

<http://spdfoundation.net/about-sensory-processing-disorder.html>

<http://out-of-sync-child.com/>

Specific Learning Disability

A Specific Learning Disability is a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations.

Students, identified as having a learning disability, have average to above average intellectual ability (as measured by standardized intelligence tests). However, they perform below what would be expected on measures of academic achievement. Students with learning disabilities are a heterogeneous group who may experience the following problems; attention deficits, memory problems, and a lack of coordination, perceptual disorders, listening problems, orientation difficulties, below average academic performance, inefficient learning strategies, motor skill difficulties, and poor social skills.

The National Center for Learning Disabilities is a good location to find a multitude of information.

<http://www.nclld.org/>

<http://www.nclld.org/types-learning-disabilities/what-is-ld/what-are-learning-disabilities>

Communication Disorders

The DSM-5 communication disorders include language disorder (which combines DSM-IV expressive and mixed receptive-expressive language disorders), speech sound disorder (a new name for phonological disorder), and childhood-onset fluency disorder (a new name for stuttering). Also included is social (pragmatic) communication disorder, a new condition for persistent difficulties in the social uses of verbal and nonverbal communication. Because social communication deficits are one component of autism spectrum disorder (ASD), it is important to note that social (pragmatic) communication disorder cannot be diagnosed in the presence of restricted repetitive behaviors, interests, and activities (the other component of ASD). The symptoms of some patients diagnosed with DSM-IV pervasive developmental disorder not otherwise specified may meet the DSM-5 criteria for social communication disorder.

For more information and quick links for A-Z topics please reference this link from the American Speech & Hearing Association;

<http://www.asha.org/topicindex/>

Common Communication Disorders:

Language Disorder:

The diagnostic criteria for language disorder include “persistent difficulties in the acquisition and use of language across modalities (i.e., spoken, written, sign language, or other) due to deficits in comprehension or production,” language abilities that are “substantially and quantifiably” below age expectations.

Social (pragmatic) Communication Disorder:

Individuals, who have significant problems using verbal and nonverbal communication for social purposes, leading to impairments in their ability to effectively communicate, participate socially, maintain social relationships, or otherwise perform academically or occupationally. SCD is characterized by a persistent difficulty with verbal and nonverbal communication that cannot be explained by low cognitive ability. Symptoms include difficulty in the acquisition and use of spoken and written language as well as problems with inappropriate responses in conversation.

The disorder limits effective communication, social relationships, academic achievement, or occupational performance. Symptoms must be present in early childhood even if they are not recognized until later when speech, language, or communication demands exceed abilities.

Childhood-Onset Fluency Disorder (Stuttering):

The diagnostic criteria for childhood-onset fluency disorder (stuttering) are “disturbances in the normal fluency and time patterning of speech...” and the disturbance causes “anxiety about speaking....”

Gifted

...exceptional ability or potential in such areas as intellectual or academic ability, visual or performance arts, or leadership. According to Joseph Renzulli, the gifted student has (1) above average intelligence, (2)...self motivated and committed to task, (3) they are creative. (Judith Cochran, 1992) Giftedness does not fall within the scope of special education federal law. For placement purposes, a student must have a 130 IQ level for identification of giftedness. As of this writing, within the schools of the Diocese of St. Petersburg, enrichment programs for students formally identified as Gifted may vary from school to school.

Access the following web link for additional information of gifted qualifications and strategies;
<http://www.fldoe.org/academics/exceptional-student-edu/gifted-edu.stml>

Emotional/ Behavioral Disorder

Students with an emotional/behavioral disability (E/BD). A student with an emotional/behavioral disability has persistent (is not sufficiently responsive to implemented evidence based interventions) and consistent emotional or behavioral responses that adversely affect performance in the educational environment that cannot be attributed to age, culture, gender, or ethnicity.

Criteria for eligibility:

A student with an emotional/behavioral disability must demonstrate an inability to maintain adequate performance in the educational environment that cannot be explained by physical, sensory, socio-cultural, developmental, medical, or health (with the exception of mental health) factors; and must demonstrate one or more of the following characteristics described in paragraph (a) or (b) of this rule and meet the requirements of paragraphs (c) and (d) of this rule:

(a) Internal factors characterized by:

1. Feelings of sadness, or frequent crying, or restlessness, or loss of interest in friends and/or school work, or mood swings, or erratic behavior; or
2. The presence of symptoms such as fears, phobias, or excessive worrying and anxiety regarding personal or school problems; or
3. Behaviors that result from thoughts and feelings that are inconsistent with actual events or circumstances, or difficulty maintaining normal thought processes, or excessive levels of withdrawal from persons or events; or

(b) External factors characterized by:

1. An inability to build or maintain satisfactory interpersonal relationships with peers, teachers, and other adults in the school setting; or

2. Behaviors that are chronic and disruptive such as noncompliance, verbal and/or physical aggression, and/or poorly developed social skills that are manifestations of feelings, symptoms, or behaviors as specified in subparagraphs (4)(a)1.-3. of this rule.

(c) The characteristics described in paragraph (a) or (b) of this rule must be present for a minimum of six (6) months duration and in two (2) or more settings, including but not limited to, school, educational environment, transition to and/or from school, or home/community settings. At least one (1) setting must include school.

(Cited <https://www.flrules.org/gateway/ruleNo.asp?id=6A-6.03016>)

Reference:

<http://www.fldoe.org/academics/exceptional-student-edu/ese-eligibility/emotional-behavioral-disability-e-bd.stml>

Intellectual Disability

An intellectual disability is defined as significantly below average general intellectual and adaptive functioning manifested during the developmental period, with significant delays in academic skills. Developmental period refers to birth to eighteen (18) years of age.

The DSM5 states that Intellectual disability involves impairments of general mental abilities that impact adaptive functioning in three domains, or areas. These domains determine how well an individual copes with everyday tasks:

- The conceptual domain includes skills in language, reading, writing, math, reasoning, knowledge, and memory.
- The social domain refers to empathy, social judgment, interpersonal communication skills, the ability to make and retain friendships, and similar capacities.
- The practical domain centers on self-management in areas such as personal care, job responsibilities, money management, recreation, and organizing school and work tasks.

While intellectual disability does not have a specific age requirement, an individual's symptoms must begin during the developmental period and are diagnosed based on the severity of deficits in adaptive functioning. The disorder is considered chronic and often co-occurs with other mental conditions like depression, attention-deficit/hyperactivity disorder, and autism spectrum disorder.

Cited from:

<http://www.fldoe.org/academics/exceptional-student-edu/ese-eligibility/intellectual-disabilities-ind.stml>

<http://www.dsm5.org/documents/intellectual%20disability%20fact%20sheet.pdf>

The Special Purpose Schools—Morning Star School in Tampa and Morning Star School in Pinellas Park provide services exclusively for students with special learning needs including those who are formally identified with intellectual disabilities. Morning Star School in Pinellas Park now offers High School Programs.

Autism Spectrum Disorders (ASDs)

Autism Spectrum Disorder is a condition that reflects a wide range of symptoms and levels of impairment, which vary in severity from one individual to another. Autism Spectrum Disorder is characterized by an atypical developmental profile with a pattern of qualitative impairments in social interaction and social communication, and the presence of restricted or repetitive, patterns of behavior, interests, or activities, which occur across settings.

Criteria for eligibility:

A student with Autism Spectrum Disorder is eligible for exceptional student education if all of the following criteria are met:

(a) Evidence of all of the following:

1. Impairment in social interaction as evidenced by delayed, absent, or atypical ability to relate to individuals or the environment;
2. Impairment in verbal or nonverbal language skills used for social communication; and
3. Restricted or repetitive, patterns of behavior, interests, or activities.

(Cited <https://www.flrules.org/gateway/ruleNo.asp?id=6A-6.03023>)

References

<http://www.fldoe.org/academics/exceptional-student-edu/ese-eligibility/autism-spectrum-disorder-asd.shtml>
<http://www.autismspeaks.org/>, and <http://card-usf.fmhi.usf.edu/>

LEGAL RIGHTS AND RESPONSIBILITIES

Individuals with Disabilities Education Act (IDEA)

The Federal law which addresses the needs of students, Public Law 101-476 currently entitled IDEA or Individual with Disabilities Act, ensures that children with learning disabilities receive a “free, appropriate public education (FAPE) in the least restrictive environment.” Originally ratified in 1975, it was reauthorized in 1990 and again in June of 1997. The most recent re-authorization was in 2004. The primary changes which impact services to eligible students in

Catholic schools are:

- From date of referral/ evaluations must be completed within 60 calendar days
- Participation at *Staffing is* required
- On site services
- Consultation about the way proportionate share of IDEA funds will be used
- Complaint procedure for non- public schools that do not agree with consultation process
- IDEA supports K-12 Child Find for Pre K
- Child Find is required for parentally placed non- public school students
- 3rd year reevaluations –the parent AND LEA determine if re-eval is appropriate

Students who receive services under IDEA must be identified with one or more of the disabilities which are legitimately characterized by the federal government. Those categories include: Specific Learning Disabilities, Intellectual Disability, Dual Sensory Impaired, Other Health Impaired, Hearing Impairments, including deafness, multiple disabilities, Speech or Language Impairments, Visual Impairments, Emotional Disturbance, Orthopedic Impairments, and Traumatic Brain Injury.

Rehabilitation Act of 1973, Section 504

The 504 section of the civil rights law was designed to eliminate discrimination against the disabled. It stipulates that children with disabilities must receive equal educational services and opportunities as those without disabilities. It prohibits a school district from excluding a student from a school or program within the school because of his/her disability, as long as the school is otherwise physically accessible to the child. (National Center for Learning Disabilities)

In order to meet the requirements of Section 504, schools are required to make reasonable accommodations for the disabled students, so that they can participate in the same educational programs provided to regular education students.

The protections provided by Section 504 are broad. Students who meet eligibility criteria for placement on a public school district 504 Plan (in Catholic schools, a Student Support Plan) may receive assistance in the form of accommodations, if it is shown that some major life activity is being adversely impacted by some handicapping conditions (a student’s ability to learn).

What is a 504 Accommodation Plan?

The Rehabilitation Act of 1973 defines a person with disabilities as any person who has a physical or mental impairment that substantially limits one or more major life activities, has a record of such impairment, or is regarded as having impairment. A parent, teacher, or other member of the school staff may raise a concern about a student's unique need for special help and request a meeting to consider whether the student has such a disability. If the team determines that the student does have such a disability, they will then identify what types of support, or accommodations, are appropriate to meet the student's needs and write a 504 Plan (in Catholic schools, a Student Support Plan).

Legal Ramifications for Catholic Schools

The Catholic school obligation to provide for the needs of those identified students who have been knowingly and willingly accepted into the school community. Furthermore, because Catholic schools accept Federal funding, the school has a responsibility to determine if it can indeed provide the necessary reasonable accommodations. The school would then pursue referral for evaluation, and provision for implementing a Student Support Plan, as required, to the best of the school's ability, within reason, without jeopardizing the school's academic standards of facility requirements, or placing unreasonable financial burden upon the school. If a school is in doubt as to its legal responsibility, Diocesan Legal Counsel should be consulted.

State of Florida McKay Scholarship

(Please see your administrator, if applicable to your school)

The McKay Scholarships for Students with Disabilities Program, originally created in 1999, provides scholarships for eligible students with disabilities to attend an eligible public or private school of their choice. Students with disabilities include K-12 students who are documented as having an intellectual disability; a speech or language impairment; a hearing impairment, including deafness; a visual impairment, including blindness; a dual sensory impairment; an emotional or behavioral disability; a specific learning disability, including, but not limited to, dyslexia, dyscalculia, or developmental aphasia; a traumatic brain injury; a developmental delay; or autism spectrum disorder.

Are all private schools required to participate in the McKay Scholarship Program?

No. Private schools are not required to participate in the McKay Scholarship Program. However, participation is open to all private schools that wish to take part in the program, as long as the school meets the eligibility criteria set forth by law.

Please refer to: <https://www.floridaschoolchoice.org/Information/McKay/>

Guidelines for Responsible Involvement

Ethical and responsible decision making requires that the Catholic School make every reasonable effort to provide a fair education for all children. A fair approach to teaching doesn't mean that all children are educated in the same way; rather, it does mean that all children receive what they need to succeed. Educational provisions include the consideration of learning modality, methodology and assessments.

It is within the purview of the school administration to determine if the school setting is the most appropriate environment for the success of the child. If a child has a need greater than what the

school can reasonable provide, the administration is not required to accept that child. In justice to the parents and children who attend the Catholic School, it is incumbent on the school to provide the necessary procedures for identifying and assessing the child who is suspected to have special learning needs. If it is determined by authentic evaluation methods that a child requires specific accommodations to his/ her program, the school must determine if these accommodations are reasonable.

Schools must epitomize and maintain the Christian mission, philosophy and procedural guidelines as outlined in the Florida Catholic Conference Accreditation manual, the Diocese of St. Petersburg School Policy Manual, AdvancEd, the Diocesan National Catholic Education Association and State of Florida documents on professional ethics.

MODELS FOR SUPPORTING ACADEMIC AND BEHAVIORAL SUCCESS

Strategic Intervention Team (SIT) Model (or alternative models)

The Catholic Church has long articulated its desire to provide an education for all children. Beginning in 1978 with the *Pastoral Statement of the United States Catholic Bishops on People with Disabilities*, the bishops focused on “the unique gifts individuals with disabilities have to offer” and urged addressing “the need for this integration into the Christian community and their fuller participation in its life.” In addition, this statement by the bishops provided for a formula so as to effect this integration. The United States Catholic Conference of Bishops urged the dioceses to collaborate with Catholic schools in “adapting their curricula to the needs of learners with disabilities,” and to assist Catholic elementary and high school teachers’ with “in-service training in how best to integrate students with disabilities into programs of regular education.”

As stated earlier in this document, students who attend our Catholic schools exhibit a variety of learning styles, abilities and needs. Should a child exhibit difficulty academically or behaviorally, it is incumbent on the classroom teacher to assess the child’s need to determine if there might be interim accommodations which will assist the child. In order to assist students who may be experiencing difficulty, the *Strategic Intervention Team Model*, has been introduced to the schools of the Diocese of St. Petersburg. The model was developed in collaboration with Kansas University and Notre Dame University. The *Strategic Intervention Team Model* (SIT) affords teachers the opportunity for teachers to assist teachers. The classroom teacher is able to utilize the resources of his/her colleagues. This will result in an intervention plan for a student which has been developed in a collaborative/ consultative model.

The SIT model may look different at different schools and levels, but generally includes but not limited to the parents, resource teacher (if applicable), school counselor, and teachers involved with the student. We have found much merit in alternatives/ adjustments to the model.

1. The teacher should discuss concerns and the potential for interim accommodations with the parent and, as appropriate, the student.
2. The teacher attempts and documents interim interventions.
3. The teacher seeks support from the Strategic Intervention Team for additional recommendations for interventions.
4. An Intervention Plan is developed for the student and monitored and updated by the SIT as needed over the period of the school year.
5. As appropriate, a transition meeting with teachers, parent(s) and student should be held to develop the *Intervention Plan* for the following school year.
6. If the interim accommodations do not provide for success academically or behaviorally, it is incumbent on the SIT to refer the child to the Student Support Team for consideration for further evaluation.

Additional information and training in the SIT Model may be secured through the Office of Catholic Schools and Centers and on the Administrator and School Counselors’ websites.

Student Support Team Model

The Student Support Team

It is recommended that each school center organize a Student Support Team to develop and implement a reasonable and appropriate plan for students with special learning needs. The work of the team should include coordination of formal transition meetings to provide planning for the next grade/ academic level. (A sample transition form is included in the Appendix of this document.) Members of the Student Support Team may include but is not limited to the administrator, the classroom teacher, a special education (or resource) teacher and/or a remedial education specialist, a school counselor and/or the parent. As is developmentally appropriate, the student may also be included in team meetings. Other participants may be included also as deemed appropriate, such as; a nurse, LEA personnel, family physician, psychologist, speech therapist, occupational therapist, behavioral specialist, physical therapist and/or tutor.

It is incumbent on the Student Support Team to secure a written *Consent to Release Confidential Information* from the parent in order to share information with any outside agency regarding the student.

Parents, as members of their child's Student Support Team,

- Should be invited to actively participate to ensure their child's academic and behavioral success
- Assist in the implementation of the team's recommendations as outlined in the Student Support Plan
- Parents and teachers will maintain on-going communication on the effectiveness of the plan.

The student, as developmentally appropriate,

- Will contribute to the formulation of the Student Support Plan
- Will follow the guidelines recommended by the Student Support Team
- Will be assisted in acquiring the skills to assume responsibility for his/her educational needs.

The teacher is responsible for;

- The day to day classroom instruction
- Implementation of the necessary accommodations to afford a reasonable and appropriate learning environment for each child's prescribed needs.

Role and Responsibilities of the Student Support Team

The Student Support Team within the Catholic School functions to provide structure to the decision-making process. In addition, the model offers formalization of a process which allows for consistency and accuracy in communication, decision making and documentation. This structure and formalization also provides a relational and legal safety net to schools as all discussion, communication, information and decisions are recorded. In addition, the model offers a team approach with an emphasis on collaboration and consultation. All teachers and support staff involved with a child are part of the discovery and decision making process. This

team approach offers consistent and thorough offering information to parents and maintains open lines of communication.

Once this child has been accepted into the school community and a Student Support plan has been developed, it is the responsibility of the principal, teachers and staff to implement this plan with active communication with and involvement of the parent for a reasonable designated probationary period.

It is the obligation of the Student Support Team to review, at regular intervals, the Student Support Plan with the parent and student (as appropriate), and determine its success in meeting the needs of the child.

Should it become apparent that the school is unable to reasonably meet the needs of the child, it is the obligation of the school's administrator to share this information with the parent and inform them that an alternate environment would be more appropriate for the child. Include documentation in the form of face to face meetings, phone conversations, and e-mail communication to document that adequate communication has taken place and the school has tried unsuccessfully to meet the needs of the student. In the event that the school receives Federal funds (McKay) for the child, the school has an obligation to meet the child's educational needs for the school year.

It is recommended that schools follow the personnel and classroom guidelines, as outlined in their Accreditation Manual when providing for this population of students. The accrediting agencies for the schools in the Diocese of St. Petersburg include, but are not limited to, the following; the Florida Catholic Conference (FCC), AdvancEd, National Council of Private School Accreditation, Middle State Regional Accreditation, Association for the Education of the Young Child (NAEYC), and National Association of Child Care Professionals (NACCP/ NAC).

Student Support Team serves in a consultative model to the administration.

- The team forwards documentation of need to the LEA or other licensed professionals for diagnosis
- The team works in a collaborative model with all participating parties
- Individual members of the school's Student Support Team have distinct roles and responsibilities as the nature and needs of the child are reviewed.

Administrator/ Assistant Principal:

The school administrator/ pastor/ governing board is ultimately responsible for the student's program at the school; communication with the parent, involvement with the child, and in turn, the development and implementation of the Student Support Plan.

With respect to the ultimate level of responsibility of the school administration, the organization's structure may warrant an administrative designee to provide oversight to the day to day functioning of the Student Support Team model. The administrator, assistant principal or the designee attends all Student Support Team meetings

- Chairs Student Support Team meetings
- Receives and signs referrals to Student Support Team
- Establishes agenda of Student Support Team meetings

- Monitors staffs conformity with Student Support Team recommendations
- Meets the parent, other than at Student Support Team meetings, as appropriate

Teachers:

When the school administration accepts a child into the school program knowing that the child requires accommodations to his or her learning environment and a Student Support Plan is developed for that child, the teachers who work with the child are contractually obligated to provide those designated accommodations in their classrooms as agents of the school.

Referring Teacher:

- Refers students to the school administrator and/or Student Support Team chair after attempting intermediary accommodations
- Completes the Teacher Request for Student Support Team referral
- Reviews past academic/ behavioral history of the child
- Contacts the parent and notify of a Student Support Team referral
- Meets with the special education teacher and/or school counselor to discuss the referral
- Participates on the Student Support Team throughout the child’s intervention and referral process
- Implements the recommendations of the Student Support Team

Special Education Teacher and/or School Counselor (Chair of Student Support Team):

- Attends all Student Support Team meetings
- Receives referrals from administrator
- Reviews case histories and pre-referral interventions with referring teacher
- Administers academic or behavioral screening or rating scales, if needed, to determine the type of (county) referral to be requested
- Presents all pertinent data to the Student Support Team
- May request parental initiation of referral/ RTI packets according to county procedures
- Invites parent(s) to all Student Support Team meetings involving their child
- Manages documentation/ conference summaries of all Student Support Team meetings
- Manages referral RTI process and reports status to Student Support Team
- Maintains records
- Monitors and documents effectiveness of recommendations/ student progress

Response to Intervention (RTI)

- Multiple tiers of evidence-based instruction service delivery
- A problem-solving method designed to inform the development of interventions
- An integrated data collection/assessment system to inform decisions at each tier of service delivery
- Designated approach under IDEA via the state education agency.

Additional information may be obtained by visiting the Florida Department of Education website. (FLDOE) www.fldoe.org or the Florida Multi-tiered Problem Solving web site www.florida-rti.org/floridaMTSS/psp.htm

Parents:

As the primary educators of their children and in justice, parents must be included as members of the Student Support Team making the decisions for support planning or other support services for their children. In addition, it is incumbent on the parent to **initiate**, authorize, participate and share with the Catholic School all decisions/ scheduled meetings made in collaboration with the public school district (LEA)

- Attends all Student Support Team meetings related to the child
- Offers input in determining the nature of the child's needs, past history
- Reinforces any prior interventions and their effectiveness
- Shares responsibility for the implementation of accommodations
- Initiates and supports the RTI process
- Acts as liaison with the child's medical, counseling and other supportive agencies.

Student Support Team:

- Provides timely scheduled meetings with formal invitations to parents, staff and guests (as appropriate)
- Includes the parent(s) (who has the legal right) in this **SST** process
- Informs the parents regarding child's progress
- Formalizes a Student Support Plan, which is reviewed and updated on a regularly determined basis
- Provides signed copies of meeting notes shared with all participants and parent(s)
- Reevaluates the necessary revisions or additions to the SSP as appropriate to ensure success
- Provides formal transition meetings in anticipation of the next school year/ grade level program
- Provides direct oversight of the RTI process and completes the referral for evaluation to the LEA

The ***Student Support Team*** in collaboration with the parent must follow the guidelines established by each LEA for the referral process for evaluation.

- **The State of Florida and Federal offices which oversee IDEA compliance require that the non-public school must provide “substantive data to prove need for evaluation”. Furthermore, the ESE Directors of each LEA must be willing and able to assist any school that has difficulty navigating through the RTI process.**

The Student Support Team must maintain effective communication with the LEA and the parent/guardian throughout the ***RTI*** process.

In the consultative process, invited resource personnel may include but not limited to the child's tutor, physician, counselor or other professionals. If the parent requests legal representation at the SST meeting, notify the Office of Catholic Schools and Centers District Superintendent to ensure that the Diocese is represented legally. **Do not** hold a meeting with parental legal representation present unless Diocesan representation is present.

Addressing the Individual Education Plan (IEP) and the 504 Plan

Schools and Centers in the Diocese of St. Petersburg **do not** write either IEP's or 504 Plans for any child with special learning needs, but are permitted to write a Student Support Plan. IEP's and 504 Plans are the responsibility of Federal government or public school entities. The Catholic School is a non-public educational venue. Should a parent bring a current IEP or 504 Plan to the school at the time of enrollment, the school or center should thoroughly and carefully review the document. It would then be necessary for the school's Student Support Team, along with the administration, to determine which, if any, reasonable accommodations should be made for the student and record this information to assist in determining whether or not the school can accept the student.

The Student Support Plan

A Student Support Plan is designed to help assist those students that are experiencing academic or behavioral difficulties, which have been documented by a doctor, psychologist, etc. Their condition must impact their learning. The Student Support Team will determine which accommodations would be most appropriate to ensure the success of the child based on the specific needs of that child. This plan should be reviewed regularly to evaluate the effectiveness of the accommodations and the progress of the child. The Student Support Team will also make recommendations for further evaluation and/or assessments, as deemed advisable.

Post-referral procedures:

When an evaluation is complete, a written report is provided to the parents. It is the parent's responsibility to share the results with the school. The SST in collaboration with the administration will make recommendations on whether or not the school can meet the needs of the student. If applicable, determination of service options may vary from county to county public school district. Support services may be provided at the child's Catholic school or in the public school location. To ensure the success of the student, the school must determine if it is able to provide reasonable accommodations or suggest an alternative educational environment which may include a special purpose school.

A Special Purpose School in the Diocese of St. Petersburg and the Province of Florida operates as a stand-alone entity exclusively serving a population of students with varying exceptionalities in a non-chronological academic program. The special purpose school designs and implements programs based on the cognitive and developmental levels and needs of its students. Within the Diocese of St. Petersburg, there are two Special Purpose Schools; Morning Star School in Hillsborough County and Morning Star School in Pinellas County. These schools offer curriculum for eligible elementary and High School (Morning Star Pinellas) students.

Service Models and Strategies

Resource Intervention

The purpose of *resource* intervention is to provide for the specific individual needs of students. For those on a Student Support Plan, accommodations are to be provided within the regular classroom or on a “pull-out” basis, that is, students may have additional support or tutorials outside of the classroom environment during the school day.

Inclusion Intervention

The *inclusion* model is a means of providing support for the student who requires extra assistance while remaining in the regular education classroom in meeting the goals of the regular education curriculum. The classroom teacher should monitor and document the child’s strengths and weakness as these impact learning and then formalize any recommendations for accommodations for that child. The Resource teacher assists the classroom teacher in a variety of ways. The Inclusion model should be strongly considered as equally effective as the Resource model.

More information is available at the following website:
The Maryland Coalition for Inclusive Education or www.mcie.org.

Accommodations

Accommodations are detailed at the Student Support Team Meeting and documented in the Student Support Plan.

Modifications

Modifications are provided for students who meet legal eligibility criteria for special education services in the public school venue. ***Under extraordinary circumstances, modifications may be required for successful completion of academic programs with our Catholic schools. These modifications take place in the Diocesan Special Purpose Schools.*** They must be documented in the student’s Support Plan.

The following charts identify the purpose and differentiation of accommodations and modifications.

<p>ACCOMMODATIONS Changes to HOW students are instructed and assessed</p>	<p>MODIFICATIONS Changes to WHAT students are expected to learn and demonstrate</p>
<p><u>Accommodations may be made to:</u></p> <ul style="list-style-type: none"> • Instructional methods and materials • The learning environment • Assignments and assessments • Scheduling and time demands • Special communication systems 	<p><u>Modifications may be made to:</u></p> <ul style="list-style-type: none"> • Standards • Learning outcomes • Assessment criteria • Course requirements and objectives