



IEP Procedural Guide

“Everyone, in every position within Mid-State Special Education, is focused upon student achievement and well-being.”

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Monthly Reporting of Class Lists Procedures:

You will receive your Class List at the beginning of the school year and each month thereafter. Class Lists generally are sent out to teachers on the 1st of each month and are expected back in the Mid-State Office by the 10th of each month. This Class List should show only the students currently on your case management list. Please check the information in each column to make sure it is accurate. You can print your students' IEP Summaries from EmbraceIEP and compare them to your class list for accuracy. After you have corrected any inaccuracies, please keep a copy for yourself (it will make checking this sheet easier next time) and scan to email your Class List along with any change sheets to your Mid-State Secretary. Our Secretaries take the information you provide on your list and enter that data into I-Star which is submitted to the Illinois State Board of Education (ISBE). ISBE then uses this information to rate/measure your school districts performance with the IL State Performance Plan which is monitored by the Federal Government.

Steps to Reviewing your Class List:

1. Check spelling of the child's name and the grade placement.
 - Be sure to use the student's legal name; please do not use nicknames.
 - Be sure to include the middle name of each student on your case management list.
2. Check to ensure the disability code(s) is correct. You will find this information in the student's initial evaluation or re-evaluation paperwork.

Disability Code	Disability	Disability Code	Disability
A	Intellectual Disability	E	Visual Impairment
C	Orthopedic Impairment	F	Hearing Impairment
D	Specific Learning Disability	G	Deafness
H	Deaf-Blindness	I	Speech or Language Impairment
K	Emotional Disability	L	Other Health Impairment
M	Multiple Disabilities	N	Developmental Delay
O	Autism	P	Traumatic Brain Injury

3. Check to ensure the student's Date of Birth (DOB) is correct. This information will be contained in the student's permanent file held in the school office.
4. Check to ensure the related services are listed correctly and services such as special transportation and BIP have not been left off.

Commonly Used Related Service Codes

Code	Related Service	Code	Related Service
01	Adapted PE	23	Speech/Language Services
02	Aide-Class	24	Social Work Services
03	Aide-Individual Student	25	Special Transportation
07	Counseling Services	26	Career and Technical Education
10	Interpreter Services	27	Transition/STEP (DRS)
11	Assistive Device	28	Behavior Intervention Plan
13	Occupational Therapy		
15	Orientation and Mobility		
17	Parent Counseling		
18	Psychological Services		
19	Physical Therapy		
22	School health Services		

5. Ensure the Educational Environment (EE) code is correct. If a Pre-K student turns 5 in the middle of the year maintain the current EC EE code until they enter kindergarten.
6. If a pre-k student turns 6 in the middle of the year, then the student must go to Kindergarten. It is important to ensure any Pre-K students turning 6 during the school year either starts in Kindergarten, or transitions there upon their 6th birthday.

Special Education Students Ages 3-4

EE	Definition	EE	Definition
23	Special Education Program - Special Education Class: The student receives all special education instructional and/or related services in a program with less than 50 percent nondisabled students. (Do not include students who also attended a Regular Early Childhood Program. These students should be reported under Codes 30, 31, 32, or 33.)	24	Special Education Program - Separate School: The student receives all special education instructional and/or related services in a public or private day school designed specifically for students with disabilities. This facility is a separate building completely apart from the regular school building. It is not located within a regular school building.
26	Home: The student receives all special education and related services in the principal residence of the student's family or caregivers (including babysitters) and does not attend either a Regular Early Childhood Program or a Special Education Program provided in a separate class, separate school, or residential facility. Include students who receive special education both at home and in a service provider location or some other location that is not in any other category.	27	Service Provider Location or Some Other Location that is Not in Any Other Category: The student receives all special education and related services from a service provider or some other location that is not in any other category and does not attend either a Regular Early Childhood Program or a Special Education Program provided in a separate class, separate school, or residential facility. For example, speech instruction provided in private clinicians' offices, clinicians' offices located in school buildings, hospital facilities on an outpatient basis, and libraries and other public locations.
30	Regular Early Childhood Program: The student receives the majority of hours of special education and related services in the Regular Early Childhood Program (and the student attends a Regular Early Childhood Program at least 10 hours/600 minutes or more per week).	31	Regular Early Childhood Program: The student receives the majority of hours of special education and related services in some other location (and the student attends a Regular Early Childhood Program at least 10 hours/600 minutes or more per week).
32	Regular Early Childhood Program: The student receives the majority of hours of special education and related services in Regular Early Childhood Program (and the student attends a Regular Early Childhood Program less than 10 hours/599 minutes or less per week).	33	Regular Early Childhood Program: The student receives the majority of hours of special education and related services in some other location (and the student attends a Regular Early Childhood Program less than 10 hours/599 minutes or less per week).

Special Education Students Ages 5-22

01	A student that is inside the general education classroom for 80% or more of the school day. *ChrisMont and Safe School Placements are considered regular education environment and coded 01.	02	A student that is inside the general education classroom no more than 79% of the school day and no less than 40% of the school day.
03	A student that is inside the general education classroom less than 40% of the school day.	04	Full-time special education class in a separate public day school that does not house programs for students without disabilities. This facility is a separate building completely apart from the regular school building. It is not located within a regular school building.
07	Students who are receiving special education services in a county detention center, state correctional facility, or jail.	08	Private day school program
09	Private residential facility, in state	11	Homebound Instructional program
12	Hospital Instructional Program	13	IL School for the Deaf
14	IL School for the Blind	28	Parentally Placed in Nonpublic Schools or Home-Schooled -- Students who have been enrolled by their parents/guardian in a nonpublic (e.g., parochial) school for general education and are not enrolled in the public school district but are receiving special education and/or related services specified on an ISP that are provided by the public school district. Also, include students whose parents chose to home-school for general education. These students are not enrolled in the public school district but are receiving special education and/or related services specified on an ISP that are provided by the public school district.

7. Check to ensure the Annual IEP Review date is correct. Annual reviews must be held once a year (prior to the Duration date). The Duration of Service date should reflect ending services in one year’s time (minus a day). Example; Annual IEP Review date is 08/29/2026, the Initiation of Services Date is 08/29/2026, and the Duration of Services date is 08/28/2027 **If any student’s annual review is past due, contact your Program Coordinator immediately as an annual review meeting must be scheduled as soon as possible.*

8. Check to ensure the Re-evaluation Due date is correct. You can print IEP Summaries from EmbraceIEP and compare it to your class list. Compare the I-STAR class list to the Embrace IEP Summaries.

- Check the student’s records from the last 3 year eligibility review held for the student.
- The Re-evaluation due date is 3 years from the student’s initial eligibility meeting or last 3 year re-evaluation meeting. Example: Initial Eligibility Date: 08/29/2026, Re-evaluation Due date: 08/29/2029 or Last Re-eval date: 09/15/2024, Re-evaluation Due date: 09/15/2027.

9. Check to ensure resident district and serving district information is correct.

- The resident district is the home district in which the student lives and enrolls.
- The serving district is the district that provides the services for the student.
- The home school is the school a student would typically attend with non-disabled peers.
- The serving school is the school that provides the services for the student.

Example 1: 4th grade student resides in Hillsboro within Hillsboro School District and registers at Beckemeyer Elementary School. All special education services are provided at Beckemeyer Elementary School.

Resident District	Hillsboro School District
Serving District	Hillsboro School District
Home School	Beckemeyer Elementary School

Serving School	<i>Beckemeyer Elementary School</i>
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Example 2: 10th grade student who resides in Edinburg within Edinburg School District and registers at Edinburg High School. IEP team decides the student will benefit most from services within ChrisMont (Regional Safe School).

Resident District	<i>Edinburg School District</i>
Serving District	<i>ROE</i>
Home School	<i>Edinburg High School</i>
Serving School	<i>ChrisMont</i>

Example 3: Kindergarten student who lives in Raymond within the Panhandle School District and registers at grade level center at Farmersville Grade School. All special education services are provided at Farmersville Grade School.

Resident District	<i>Panhandle School District</i>
Serving District	<i>Panhandle School District</i>
Home School	<i>Farmersville Grade School</i>
Serving School	<i>Farmersville Grade School</i>

Example 4: 2nd grade student who lives in Carlinville within Carlinville School District and registers at Carlinville Primary School. The IEP team decides the student will most benefit from services provided at Carlinville Intermediate School.

Resident District	<i>Carlinville School District</i>
Serving District	<i>Carlinville School District</i>
Home School	<i>Carlinville Primary School</i>
Serving School	<i>Carlinville Intermediate School</i>

Change Sheet

The Change Sheet is one of the most important forms you will be completing. The information from this form is entered into I-Star and submitted to ISBE. The information is utilized to measure accountability through the IL State Performance Plan and is used for funding (grants & reimbursement). Additionally, the change sheet form is the first step in entering a student into EmbraceIEP. Always complete a change sheet each time a student enters or exits a program/school, significant changes are made to special education and/or related services, or when an address or contact information changes.

A Change Sheet must be submitted when:

1. Student's phone number or address changes
2. Parent/Guardian Information changes
3. New student enrolls (move-in) in district
4. Student moves out of the district (drops, expelled, etc.)
5. Student is in need of a TCT (teacher consultation team) meeting and/or initial evaluation
6. Student needs a 504 plan
7. Student graduates (**ensure the team has completed a Summary of Performance (SOP) before sending in the change sheet**)

A Change Sheet must be completed immediately upon finding out new information regarding the student. Students will not be entered into EmbraceIEP without the appropriate submission of paperwork (Change Sheet).

Change Sheets must:

1. Be complete
2. Scan to email (NO Faxes) to your Mid-State Office Secretary

Where do I find the Change Sheet?

EmbraceIEP: Login and pull up any student. Click on the blue "District Documents". In the pop-up window scroll down to "Other". You will find the Change sheet form.

How do I fill out the Change Sheet?

The change sheet is divided into three sections. The first/top section contains student demographic information. The second/middle section is for Exiting Students. The third/bottom section is for Entering Students. You will always fill out the first/top section and then you will fill out the rest of the form as needed.

Reimbursement and Accurate data transmissions are dependent upon the Change Sheet being completed accurately and in a timely manner.

ALL Transfer (Move-In) Students with IEPs:

Transfer Students (Entering):

EmbraceIEP allows the transfer of IEPs and all other special education documents from one district to another electronically, as long as, the sending districts utilizes EmbraceIEP.

Complete the following steps:

1. After the student has enrolled and completed the district enrollment packet, which includes a signed release of records (maintained within the district), the Special Education Teacher will scan to email a fully completed *Change Sheet* to the Mid-State Secretary.
2. If the student last attended a district using the EmbraceIEP program, then all the student's temporary IEP files will be available in the MSSE EmbraceIEP system.
3. If the student did not attend a district that used EmbraceIEP;
 - a. the MSSE Secretary will create and add the student in EmbraceIEP.
 - b. the Special Education Teacher will need to complete the top section (student info) and the bottom section (entering information) to the change sheet and email it to the MSSE Secretary.
4. The Special Education Teacher will notify the Program Coordinator, School Psychologist, and Related Service Providers of the new student by:
 - a) emailing a copy of the student's IEP and eligibility information (if information was unable to be transferred from EmbraceIEP)
OR
 - b) emailing a statement letting the team know a new student has moved in and files are within EmbraceIEP (first and last name must be provided in the email).
5. The School Psychologist will review the student's eligibility information and recommend if additional testing/information is or is not needed. The School Psychologist will email their recommendation to the Special Education Teacher, Related Service Providers, and the Program Coordinator. If no additional testing/information is needed then the School Psychologist will not need to attend the move-in IEP meeting.
6. The Related Service Providers will also determine eligibility for the services they provide and determine if additional testing/information is needed. The Related Service Providers will email their recommendations to the Special Education Teacher, the School Psychologist, and Program Coordinator.
7. The Program Coordinator will work with the team to determine the appropriate placement and services.
8. The Special Education Teacher will calendar match dates/times with the Program Coordinator (for all new and transfer students), Related Service Providers (if required), School Psychologist (if required), and parent in order to schedule the move-in IEP meeting. You must send out the Notification of Conference form scheduling the IEP meeting within 10 school days from the date the student enrolled in the school district (this is required in the event the team is making any placement changes). The meeting itself should be held within 30 calendar days (of prior to any due dates in accordance to the students IEP).
9. The student's move-in **IEP must be legally compliant and reflective of the services the student is receiving**. Simply transferring information from the previous district that is non-compliant onto the IEP forms and holding an IEP meeting is not appropriate
 - a. If the student's IEP was transferrable from another district using Embrace IEP, you may "duplicate" the students IEP within EmbraceIEP. Once the meeting is duplicated, you may then begin working to update and ensure the IEP is reflective of the students' needs and current programming. If the student's IEP was not transferrable, begin the process of manually inputting information from the students current IEP into Embrace IEP.
 - a) IEP goals and objectives must be written in measurable terms and be able to be implemented in a variety of settings (remotely).
 - All Related Service Providers are responsible for entering/modifying their own goals/objectives and service minutes.
 - b) "Present Levels of Academic, Developmental, and Functional Performance" must include strengths and be written specific to the identified areas of eligibility.
 - All Related Service Providers are responsible for filling out each area of this form as it relates to their area of expertise.

- c) Enter the Initiation Date (date of move-in IEP meeting) and Duration Date (one year from the date the student's annual review was held). Do not change the Duration Date unless you are holding an Annual IEP Review meeting and updating the entire IEP including goals and objectives.
 - d) Review the contents of the entire IEP against the "IEP Review Checklist." The IEP is a legal document and **every IEP meeting is an opportunity to check for compliance and fix necessary errors**. The end result, regardless of the type of IEP meeting, is to leave with a child-centered IEP that is compliant.
 - e) Discuss the e-Learning plan that will be used if the student must learn remotely at some point in the school year due to a district using e-learning days in lieu of emergency days. Attach the e-Learning to the back of the IEP at the end of the meeting.
9. After the IEP has been written and thoroughly reviewed, submit the draft IEP for review to the Program Coordinator (all students) and the Transition Specialist (students ages 14.5 or older) using the EmbraceIEP system. When they receive a message stating the IEP is ready for review, the Program Coordinator will review the IEP and provide feedback. The Notification of Conference (NOC) and draft IEP must be sent for review 10 school days prior to the IEP meeting date to ensure timely reviews before the draft is sent to parents. Parents are required to receive the draft with "all written materials" at least 3 full school days before the meeting (for example: if the meeting is scheduled for Tuesday at 9:00AM, the draft IEP would need to be in the parent's hands no later than Thursday of the week prior at 9:00AM).

Parent-Requested IEP meetings:

You must respond to a parent request to convene an IEP meeting within 10 calendar days, which means you must send out the NOC within 10 school days from the date the meeting was first requested.

Complete the following steps:

1. Calendar Matching: When a parent requests an IEP meeting, the Special Education Teacher will calendar match with all IEP team members including the Program Coordinator.
2. Duplicate the students most current IEP with the EmbraceIEP system. (Directions and video instruction on how to use the duplication feature can be found in the EmbraceIEP system.)
3. Notification of Conference (NOC):
 - a) On the Notification of Conference, "IEP Review and Revision", should *always* be checked. Also, check "Other" and type in "Parent requested IEP meeting". Ask the parent(s) what concerns they would like to discuss at the IEP meeting and make sure to check any additional topics (boxes). The topics of discussion must be listed (boxes checked) on the NOC form to allow those discussions to take place (if the boxes are not marked, the topic can't be discussed).
 - b) The Notification of Conference must be completely filled out (leave nothing blank) and make sure to include: the meeting date, starting and ending time, and location (building, room, school address, not is meeting will be held virtually).
 - c) The NOC must be sent home providing the parents with a 10 calendar day notice of an upcoming IEP meeting unless they have agreed to waive the ten day notice. Often parents want to discuss their concerns immediately.
 - d) Any materials/data that will be discussed at the IEP meeting must be sent home and in the hands of the parents at least 3 school days before the meeting.
 - e) If an IEP meeting is held without providing a 10 calendar day notice, the Special Education Teacher must mark, "Parent waived the 10 calendar day notice" and type in the box under "comments" the reason the parent agreed to waive their right to a 10 calendar day notice. The parent must initial and date this section of the NOC at the beginning of the meeting (prior to signing in).
3. Conference Summary Report Form:
 - a) Purpose of Conference: Check the "IEP Review and Revision" box and "Other". Type in "Parent requested IEP meeting". The topics of discussion must be listed (boxes checked) on the NOC form and under "Purpose of Conference" on the Conference Summary Form. (The purpose of the meeting information should be marked the same of the NOC and the Conference Summary Form).

- b) Thoroughly review the “Student Identification Information”. If student demographics (address, phone number, etc.) needs updated, complete a *change sheet* and email it to the Mid-State Secretary. To update all other information, click on the blue “update student info” button and then make all the necessary updates. When finished make sure to click on the “refresh student info” button to show all the updates on the Conference Summary Report form.
- c) Ensure all information on the Conference Summary Form is completed.
- 4. Additional Notes form:
 - a. Take notes at every meeting documenting the discussion and why decision were made during the IEP meeting. Include input from all IEP team members, particularly the parent(s). Be sure to record how concerns were addressed.
- 5. Review the contents of the entire IEP against the IEP review checklist. The IEP is a legal document and **every IEP meeting is an opportunity to check for compliance and make necessary changes**. The end result, regardless of the type of IEP meeting, is to leave with a child centered IEP that is compliant.
- 6. Conference Recommendations form must be completed.
- 7. After the IEP Meeting:
 - a. Review the IEP thoroughly
 - b. Ensure notes are completed
 - c. Ensure changes discussed during the meeting are reflected in EmbraceIEP
 - d. Make a copy for the parent (they must leave with a copy of the IEP unless they agreed and it is documented in the IEP)
 - e. Submit the finalized IEP to the appropriate Mid-State Secretary
 - f. Ensure all changes to the IEP is communicated to all staff working with the student

Manifestation Determination Review (MDR) IEP Meeting:

The purpose of a manifestation IEP meeting is to determine if the student’s behavior, in question, is directly and substantially related to the student’s areas of disability. A manifestation IEP meeting is held when a student:

- 1. Is suspended from school for more than ten school days for the school year.
- 2. Is being considered for an immediate change of placement following a behavior incident (not based on an IEP team decision given data trends).

The following IEP team members must be in attendance for the manifestation IEP meeting so be sure to calendar match with them all.

- 1. Parent(s)/guardian(s)
- 2. Student
- 3. Building Principal
- 4. Regular Education Teacher
- 5. Special Education Teacher
- 6. School Psychologist
- 7. School Social Worker
- 8. Program Coordinator

Other members as needed:

- 1. Related Service Providers
- 2. BCBA
- 3. Guidance Counselor
- 4. Transition Specialist

Preparing for the manifestation IEP meeting:

- 1. Psychologist will review recent eligibility information and complete the manifestation pages within EmbraceIEP along with the Consent for an FBA (if consent isn’t already on file).
- 2. School Social Worker will gather attendance and behavior referrals from the school Principal (or designee) and share the information with the Psychologist
- 3. All written materials being considered during the MDR will be sent home to the parents at least 3 school days prior to the meeting.
- 4. Special Education Teacher will:
 - a) Duplicate the students most current IEP.

- b) Prepare and send out a Notice of Conference (10 calendar days prior to meeting or have parents waive their notice) with the following boxes marked for meeting purposes:
 - 1) “IEP Review and Revision”
 - 2) “Secondary Transition” (14.5 and older)
 - 3) “Functional Behavioral Assessment/Behavioral Intervention Plan”
 - 4) “Manifestation Determination Review”
 - 5) “Other” and write “Discuss and determine placement options” (if relevant)
- c) Prepare the following forms:
 - 1) Conference Summary Report, make sure the purpose of the meeting matches the NOC purpose of meeting.
 - 2) Manifestation Determination- completed by school psychologist
 - 3) FBA/BIP, if needed
 - 4) Review the contents of the entire IEP against the IEP review checklist. The IEP is a legal document and **every IEP meeting is an opportunity to check for compliance and make necessary changes**. The end result, regardless of the type of IEP meeting, is to leave with a child centered IEP that is compliant.
 - 5) Notice of Conference Recommendations
 - 6) Excusal form
- d) Make sure to bring copies of the Required Parent Packet to the meeting. Provide these copies to the parent BEFORE the meeting begins and the Program Coordinator will document this on the Additional Notes page. Also have parents initial under Procedural Safeguards on the bottom of the Conference Summary Report.
- e) If the student currently has an FBA and BIP the School Social Worker and the Special Education Teacher will review the FBA and BIP documents. It is very important to have visual data (graph) demonstrating the student’s progress toward BIP goals. Be prepared to discuss and explain the current FBA and BIP. If needed and appropriate, the School Social Worker and the Special Education Teacher should be prepared with a new behavioral plan to present at the IEP meeting.
- f) If the student does not have a current BIP, discuss the need for a FBA and have the parent sign the FBA consent form found in EmbraceIEP under District Documents/Behavior.
- g) After the IEP Meeting: Review the IEP thoroughly, Ensure notes are completed. Ensure changes discussed during the meeting are reflected in EmbraceIEP, Make a copy for the parent (they must leave with a copy of the IEP unless they agreed and it is documented in the IEP), Submit the finalized IEP to the appropriate Mid-State Secretary, Ensure all changes to the IEP is communicated to all staff working with the student.

45-Day Interim Alternate Education Settings

School administration may decide a child must be removed from their current educational placement for disciplinary reasons if any of the following occurs:

- 1. Commits serious bodily harm to others
- 2. Brings a weapon to school (knife blade longer than 2.5 inches)
- 3. Brings drugs to school (marijuana included)

A student’s IEP team will decide on placement and will ensure IEP services and FAPE is provided.

**An MDR does not need to be held unless the event resulted in a total of more than 10 school days being served in an out-of-school suspension.

Amendments to an Annual IEP:

The Reauthorization of IDEA 2007 (Section 614 (d) (3) allows minor changes (add an accommodation, update the criteria on a BIP, make changes to the transportation plan, etc.) to be made in an IEP without convening an IEP meeting, if the school district and parent are in agreement. The amendment or modification must be made in writing and the parent provided a revised copy of the IEP.

Complete the following Steps:

1. **Prior to making any changes, contact the appropriate Program Coordinator to discuss the minor changes to be made to the IEP.**
2. **Discuss the program amendment with the building Principal.**
3. Use the directions within the EmbraceIEP system to create an IEP amendment on the students **active IEP** file. When amending the IEP you must always complete the “Program Amendment Form”, the form that is being updated, if the EE code is changing the Conference Summary Report/Student Information, and if the placement is changing complete the Conference Recommendations and have the parent sign there agreement and noting the changes.
4. Contact the parent and discuss the proposed changes to the IEP in person, over the phone, or email. Be very specific about the change(s) being recommended for the IEP. Take very good notes and record them on the “Program Amendment” page.
5. After the discussion has been held, the Special Education Teacher will;
 - a. Review the IEP thoroughly
 - b. Ensure notes are completed
 - c. Ensure changes discussed are reflected in EmbraceIEP
 - d. Make a copy for the parent that includes the *Program Amendment* form along with any other IEP pages that were changed and send home to the parent. Emailing is best. Request the parents respond in writing of their agreement to the amendment. If you do not get written agreement to the plan via email. Have the parent sign directly on Program Amendment page or use the Conference Recommendation page.
 - e. Provide amendment information to the student’s regular education teacher(s) and related service providers. Ensure all changes to the IEP is communicated to all staff working with the student.
 - f. Submit the finalized IEP to the appropriate Mid-State Secretary. In the notes type “amendment”.
 - g. File the amendment by paper clipping all original amendment documents on the top of the student’s current Annual IEP and place in their temporary file (usually located in the school office).

Annual IEP Review:

Make sure you are signed up for IEPQ. <https://iepq.education.illinois.edu/public/about>

The Annual IEP Review is the ultimate guide which lays out the exact plan a student with special needs requires to access and benefit from the general education curriculum. This legally binding contract between the district and the student/parents ensures the student will be provided with a Free Appropriate Public Education (FAPE). As Special Educators, we will ensure all IEPs are student-centered, meet the academic and functional educational needs of the student, and focus on what the student must learn to be college and career ready. It is highly recommended that you also develop an individualized remote learning plan (RLP) for every student when completing their annual review (for those districts that provide remote services on emergency days or for any other reason).

An annual IEP can last up to 364 days and must be revisited at least annually.

As a Special Education Teacher, along with other team members, you are developing an IEP that commits services provided by the school district. Communication with the Building Principal (LEA) and Program Coordinator is a must prior to the commitment of services.

The key to successful IEP preparation INCLUDES the **5 P’s: Prior Planning Prevents Poor Performance!** You will find in order to meet the timelines for sending a NOC, Draft Annual IEP and to write a quality Annual IEP

you will need to start working on the IEP at least one month prior to the due date. Do *not* wait until ten days or less before the Annual Review is due to start working on the student's Annual IEP.

Preparing for the Annual IEP Review:

1. Required IEP team members:
 - a) Parents
 - b) Students (14.5 years or older)
 - c) Regular Education Teacher
 - d) Special Education Teacher
 - e) Building Principal (LEA)
 - f) If needed:
 - 1) School Psychologist
 - 2) School Social Worker
 - 3) Speech and Language Pathologist
 - 4) Occupational Therapist
 - 5) Physical Therapist
 - 6) Vision Teacher, O&M Specialist
 - 7) Hearing Teacher
 - 8) BCBA
 - 9) Transition Specialist
 - 10) Program Coordinator
2. Calendar Match with all required and "as needed" IEP team members **prior** to sending out the Notice of Conference (NOC).
 - a) At the beginning of the school year an email was sent detailing the days of the week related service providers and the Program Coordinator would be in your district. Those days must be prioritized for IEP meetings. The Program Coordinator has notified some Special Education Teachers/SLPs regarding the need to calendar match for all IEP meetings. If you received this email (this is not optional), you must calendar match for every IEP meeting with your Program Coordinator.
 - 1) Calendar matching is often a tedious and time-consuming process. It is very important to start this process early. Many program coordinators are now using a Google calendar to allow teachers to sign up for IEP meeting dates at the beginning of the year.
3. Gather all data related to the student's disability needed to write the annual IEP review (behavioral charts, progress monitoring data, intervention data, grades, attendance, transcripts, transition information, behavioral referrals, copy of current annual IEP review, copy of last re-evaluation, call parents to find out any concerns or areas they feel their child needs to work on, gather information from the students regular education teachers and ask their input regarding supplementary aides, etc.).
4. Prepare a **DRAFT IEP more than 10 days prior to the meeting date**. This allows time for the Program Coordinator to preview.
 - a. In the EmbraceIEP program go to print options and mark the box "Draft IEP".
 - b. The DRAFT IEP must legally be sent with, "all written materials" that will be discussed in the meeting must be sent to parents and be in their hands at least 3 school days prior to the meeting. The written materials include paper copies of data used to write the DRAFT IEP. For example, behavior reports, work samples, assessments, IEP goal tracking charts, etc. Parents need to be given ample time to read and digest the draft IEP before walking into a meeting.

Writing a Child Centered and Defensible Annual IEP Review:

A. Notification of Conference (NOC) (Under Notice and Consent)

A NOC must precede every IEP meeting. When holding an Annual IEP Review, the NOC must be provided to the parent/guardian at least 10 calendar days prior to the Annual IEP Review. The DRAFT IEP is a requirement for *all* IEP meetings to ensure the legal requirement of ensuring the parent(s)/guardian(s) are informed team members to ensure full parent/guardian participation.

Draft IEPs:

In the EmbraceIEP program, remember you mark “Draft” under the print options tab within a student’s file prior to printing.

Filling out the NOC:

1. Review Student Name, Date of Birth (DOB), and Parent/Guardian Names for accuracy
2. For an Annual Review, waiving the ten day notice should happen rarely. If waiving the ten day notice is needed, check the box “Parent waived ten day notice” and type the reason for the ten day notice being waived.
3. Today’s Date: Is the date you are mailing the NOC home.
4. Under “In order to discuss the educational needs of your child...”, fill out the date, day, time (beginning and ending, 9:00am-9:45am), and location (building, room, school address).
5. Write your program coordinator’s name and contact information in the visitor, interpreter, school records boxes.
6. Mark boxes indicating the purpose of the conference (if the boxes are not marked, they cannot be discussed because a ten day notice was not provided to the parent):
 - a) Always mark box “IEP Review and Revision”
 - b) If the student is 14.5 years or older, always mark “Secondary Transition”
 - c) If the student is in High School always mark “Graduation”
 - d) If the student is eligible under emotional disability, always mark “Functional Behavioral Assessment/Behavioral Intervention Plan”
 - e) If the meeting is being held for another purpose or is requested by the parent mark “Other” and explain
7. Invite Required IEP Team Members
 - a) A LEA must be present at every IEP meeting. The LEA is the only one who has the authority to commit district funds to provide services for a student.
 - 1) Principal/ Assistant Principal
 - 2) The only other IEP team member who can act as an LEA is the Program Coordinator or a Special Education Teacher. If a Special Education Teacher is acting as the LEA, they may not commit funds for services/equipment unless appropriate approval has been given by the District Administration prior to the IEP meeting.
8. Under the Explanation of Procedural Safeguards, list your Program Coordinator along with their contact information (phone number and email)
9. Use your Name and Title to sign at the bottom of the Notification of Conference Page

B. Conference Summary Report (Under Annual Forms)

1. Review Conference Date
2. Purpose of Conference- The purposes for the meeting should align with the selected purpose on the NOC.
 - a) Mark “IEP Annual Review/Revision”
 - b) Mark “Transition” for students 14 ½ years or older
 - c) Mark “Graduation” for students in high school
 - d) Mark “FBA/BIP” for students with an emotional disability or if they require an FBA/BIP.
3. Student Identification Information
 - a) Review this information very carefully and ensure it is accurate
 - b) If changes are needed, make sure to follow the *Change Sheet* procedures
 - c) Once you make changes, click on the “Refresh student information” button so you can see the changes.
4. In the parent/guardian section, mark “yes” or “no” next to educational surrogate parent.
5. Mark “yes” or “no” in both sets of boxes under Interpreter Services
6. Mark “yes” or “no” regarding if the meeting was at a mutually agreed upon time and place.
7. Document 3 attempts made to arrange the Annual IEP Review – be specific
8. Record the date the Procedural Safeguards were provided to the parent (parents will initial) and the language in which they were provided

9. Check appropriate Transfer of Rights box
10. Parent(s) were given a copy of the: – mark the appropriate boxes for the documents that were provided to the parent and record the dates. The Parent must always leave with a copy of the IEP regardless of the circumstances.
11. Always mark box “IEP” and include in what language it was provided to the parent. Also, always mark “district’s behavioral intervention policy”, “understanding PUNS” and “ABLE brochure”. Check “evaluation report and eligibility determination” if needed. Mark “three day draft” and document how and when the parent was provided the draft documents. Drafts must be provided to parents/guardians at least 3 school days prior to IEP meetings.
12. Updated IEP documentation directions for seniors who will graduate at the end of this school year.
 - a) Write the IEP for one school year (same as you would for any other student).
 - b) From the conference summary report page, click on “*update student info*”. Then complete the following;
 - 1) Share missing data that belongs in the red box with your MSSE secretary
 - 2) Add necessary dates to the IEP Evaluation Data and Special Education Eligibility sections.
 - 3) Update the Student Placement Information making sure all blanks are filled in.
 - 4) Current Year; Grade “12” School Year “26/27”, Case Manager
 - 5) Next Year Info; Grade “graduate” School Year “27/28”, Case Manager
 - 6) Update the Student and Parent Information sections making sure all blanks are filled in for both parents if they live apart
 - 7) When you return to the conference summary report page make sure you click on the “refresh student info” tab.
 - 8) This will ensure that students will roll up to the next grade on July 1st for the following school year.

C. Present Levels of Academic, Developmental, and Functional Performance (Under Annual Forms)

Complete this page for all initial IEPs and Annual Reviews. When completing this page, include all areas that are impacted by the student's disability(ies). The present levels of academic achievement and functional performance should be descriptive statements with hard data addressing both areas and showing a relationship to the New Illinois Learning Standards (NILS). Include the most recent evaluation/IQ scores along with any available standardized test scores, and grades. There must be a direct correlation between the:

- 1) academic achievement and functional performance,
- 2) development of the goals and objectives benchmarks,
- 3) transitional services (when 14.5 years and older), and
- 4) provision of specific special education and related services.

1. Student Strengths

- a) Describe the student’s academic and functional strengths in relationship to each area of identified disability(ies) from the most recent IEP (number of goals/objectives met). This is filled out by both the Special Education Teacher and Related Service Providers.
 - 1) Example: “(student’s name) can independently write 4-5 word sentences using correct capitalization and punctuation.”
 - 2) Example: “(student’s name) can snap and button clothing using doll clothing”
 - 3) Example: “(student’s name) can add and subtract up to 3-digit numbers with 90% accuracy on homework.”
 - 4) Example: “When (student’s name) is taken to the toilet every 30 minutes, (student’s name) stayed dry 4 out of 5 days in a two-month period.”
 - 5) Example: “(Student’s name) arrives on time to work study as evidenced by his time card sheet 5 out of 5 days during 1st, 2nd, and 3rd quarter.”

2. Parental Educational Concerns

- a) Document any parental concerns/input regarding their child's education expressed prior to or during the meeting. This may also include positive statements the parents make about the services being provided to their child.
 - 1) Example: "After discussion regarding their child's progress and educational needs, (parent's name) expressed no concerns regarding the presented IEP."
 - 2) Example: "The parent was concerned about (student's name) reading ability and wants to know how (student's name) reading level compares to same age peers."
 - 3) Example: "The parent provided the following list of parental concerns prior to the meeting" or "See attached list of parental concerns provided by the parent". Be sure to address all concerns during the discussion and document in the Additional Meeting Notes

3. Health Information/Concerns

- a) After discussing with School Nurse, Parents, and reviewing the students file
 - 1) List health diagnosis, Other Health Impairment information
 - 2) Document medications the student is currently taking along with times of day and dosage
 - 3) If there is a Health Care or Seizure Plan write, "See attached Health Care Plan" and type in Health Care Plan Action Steps
 - 4) Medication Administration Statement, "Medication(s) will be administered to (student's name) as prescribed by the doctor's script. School Nurse will administer medications 5 minutes per day in accordance with the school calendar and when parents have provided the medications in accordance with the district's medication policies and procedures"
 - 5) Select "School Health Services", minutes and duration dates under the Related Service section of the Educational Services and Placement page. We are required to have minutes listed on this page in order to bill Medicaid.

4. Student's Present Level of Academic Achievement

Present levels of academic achievement refers to how the student performs in all academic areas.

- 1) Describe how the student is performing within the general education curriculum (e.g., completes assignments on time; adds and subtracts two-digit numbers; able to complete general curriculum requirements in the general education English, History, and Social Studies classes using books on tape and oral tests). For preschoolers, performance levels may include pre-academic readiness skills and developmentally appropriate cognitive skills. Documentation should include the results of the most recent evaluation (scores), but should not be a repeat of the evaluation results documented in the eligibility report nor the scores found in the results box on this page.
- 2) Address each eligibility area for which the student has an identified deficit. Document district assessments, classroom assessments, goal progress, etc. in these areas.
- 3) Example: The student achieved a reading level of mid first grade on the Brigance Inventory of Basic Skills. The student can identify 18 letters and 10 sounds. He has a very limited sight word vocabulary. This impedes his progress in the general education setting and the general education curriculum.

5. Student's Present Levels of Functional/Developmental Performance

- a) Functional performance is related to activities associated with daily living (e.g. social/emotional, behavioral deficits, independent functioning, vocational, motor skills). This information should be stated in clear, concrete terms understandable to all IEP team participants. Documentation should reflect the results of the most recent evaluation (scores), but should not be a repeat of the evaluation results documented in the eligibility report. For students 14.5 and older, describe student strengths and weaknesses within the context of his/her post-school goals.
 - 1) Example: According to the Manual Muscle test and therapist observation, the student has difficulties with motor planning. The student exhibits difficulty using his left hand as an assist. This impedes his ability to write without a model, cut or draw in the general education setting.
 - 2) Example: The Quality of Movement checklist indicated below average functioning in the following areas: The student has difficulty following verbal instructions for motor

commands, difficulty with spatial orientation and difficulty with bilateral coordination. This adversely affects his participation in the general education setting.

- 3) Example: (student's name) is essentially non-verbal and uses many ways to communicate including: gestures, facial expression, eye gaze, vocalizations, word approximations, head nods for yes, head shakes for no, and use of a Dynavox 3100 augmentative communication device which she accesses with a head switch.
- 4) Example: (student's name) has difficulty remaining on task for more than 5 minutes, completing assigned tasks within the allotted amount of time, and following two step directions. Services from the BCBA and/or RBT are provided on a bi-weekly basis. See attached FAB & BIP

6. The Results of the Initial or Most Recent Evaluation of the Student

- a.) In this box, enter evaluation results from the initial or most recent evaluation. Copy and paste results/scores from the "Documentation of Evaluation Results" page. Include all results from every area for which assessments were conducted (academic achievement, cognitive assessment, speech and language assessment, fine/gross motor assessment, rating scales, etc.).

7. Adverse Effects

- a) Document how the child's disability affects their involvement and progress in the general education curriculum. This directly corresponds with the provision that requires the IEP to include measurable annual goals designed to meet the child's needs that result from the child's disability. The Adverse Effect should be copied and pasted from the Eligibility Determination paperwork and include specific deficits. You will also use this same information on the Educational Services and Placement page. **It is very important to not pre-determine eligibility decisions. One way we can avoid that is by not completing the Adverse Effects section until the team decides during the meeting (for initial eligibility). In the event of a re-evaluation, the evaluation team can choose to delete the prior information from the last eligibility, or leave the previous information and then make adjustments (if decided) in the meeting with the whole team.**
 - 1) Example: (Student's name) is eligible for special education services under specific learning disabilities in the areas of reading comprehension and written expression. These identified areas adversely affect (student's name) involvement and progress in the general education setting without specific interventions and supplementary aids.
 - 2) Example: (Student's name) is eligible for special education services under emotional disability in the areas of self-regulation and attention. Auditory and tactile sensory stimulation, crowded environments, changes to the routine, making an error and independent work sessions that last more than 20 minutes adversely affect (student's name) involvement and progress in the general education setting without specific interventions and supplementary aids.

D. Goals and Objectives/Benchmarks

Writing IEP Goals to the Illinois Learning Standards (ILS):

When connecting a student's IEP goals to the ILS for English/Language Arts and Mathematics, referencing the standard is sufficient to meet the federal requirement that the annual goals must enable the student to be involved and make progress in the general education curriculum 23 IAC 226.230(a)(1)).

1. Key Ideas:

- a) It is important to keep in mind that when a state standard is referenced in a student's IEP goal, **the standard itself is not the goal.**
- b) Align the ILS referenced in a student's IEP goals with the student's **grade level**, regardless of his/her performance/instructional level.
- c) Ensure that goals and objectives can be implemented and measured in a variety of settings (remotely)
- d) Example: Reading Informational Text –Grade 3- Standard 3; 3.RI.3 Key Ideas and Details - Describe the relationship between a series of historical events, scientific ideas or concepts, or steps in technical procedures in a text, using language that pertains to time, sequence, and cause/effect.

- 1) IEP Goal Example: When exposed to grade level curriculum, (Student's Name) will increase comprehension skills from a 2nd grade equivalency to a 3rd grade equivalency by 09/10/2027 as measured by a standard reading assessment. (3.RI.3, Connect Events by Time & Cause/Effect)
 - 2) IEP Objective Example: By (date), after reading a historical grade level text, (name) will correctly answer 4 out of 5 short-answer comprehension questions in 2-3 sentences that require an understanding of how events are connected in time or by cause/effect (e.g. "What effect did the arrival of the Pilgrims have on the Native American population?") for 3 out of 4 passages.
 - 3) IEP Goal Example: When exposed to grade level curriculum, (Student's Name) will answer grade level comprehension questions on chapter and unit tests with 80% or above accuracy by 09/10/2027. (3.RI.3, Connect Events by Time & Cause/Effect)
 - 4) IEP Objective Example 1: By (date), after a pre-teaching of domain-specific vocabulary, when given a historical grade level text, (name) will answer 4 out of 5 short-answer comprehension questions in 2-3 sentences that require an understanding of how events are connected in time or by cause/effect for 3 out of 4 passages.
 - 5) IEP Objective Example 2: By (date), after a pre-teaching of domain-specific vocabulary, when given a historical text at (name)'s independent reading text, (name) will answer 4 out of 5 multiple-choice comprehension questions (with 2 answer choices) that require an understanding of how events are connected by cause/effect for 3 out of 4 passages.
 - 6) IEP Goal Example: When exposed to grade level curriculum, (Student's Name) will demonstrate comprehension of the topic through the attainment of 3 out of 3 objectives by 09/10/2027. (3.RI.3, Connect Events by Time & Cause/Effect)
 - 7) IEP Objective Example: By (date), after seeing a short film on a series of historical events, (name) will correctly order 2 events on a cause/effect graphic organizer or placemat using pictures of the events as measured by teacher data collection for 2 out of 3 films.
2. Dynamic Learning Maps (DLM) alternative state test:
Illinois has committed to the Dynamic Learning Maps (DLM) as the alternate assessment for students who are eligible. The ISBE, in conjunction with DLM, has constructed the Illinois Essential Elements document as an additional resource for educators of students with significant cognitive disabilities to assist with developing their instructional programs. This document provides a crosswalk between the ILS and the performance level of students with significant cognitive disabilities. The tool provides educators with Instructional Achievement level descriptors which are designed to allow students with significant cognitive disabilities to progress toward the achievement of state standards linked to grade level expectations. If a student qualifies for DLM, use the Essential Elements as the standards link to IEP goals.
- a) If a student is receiving specialized instruction in Life Skills/Cross Categorical Setting and they **do not** qualify for DLM, you must use the ILS when establishing a link to IEP goals.
3. The Illinois Early Learning and Development Standards (IELDS) for three (3) through five (5) year olds align with the ILS. The IELDS are to be used when establishing a link to IEP goals for students in PreK settings (3-5 years of age).
4. Writing Measurable Goals and Objectives:
- a) A measurable annual goal must be written for each identified deficit area.
 - b) Each annual goal must have a minimum of two (2) objectives or benchmarks.
 - c) When developing a measurable goal, do not write the goal to a special test OR screening tool or program. Write the goal for the specific skill the student will achieve in one year's time. The objectives/benchmarks are a set of specific skills/strategies the student will learn in order to reach the annual goal statement.
 - d) Ensure that the annual goal can be implemented and measured in a variety of settings (remotely).
 - e) When deciding upon evaluation criteria, think about how you can easily measure and show what the student has accomplished toward the annual goal and/or objective/benchmark. You must use evaluation criteria that includes hard data. Examples, charting, grades, work samples, etc.
 - f) On each goal page at the top make sure "Progress Reports" is checked as a method of notifying parents of progress.

- g) Present Level of Performance: Include a brief statement of the specific academic or functional performance deficit that is to be addressed by the annual goal and objectives/benchmarks. Do not copy and paste the full eval section from the PLAAFP page. If the goal is targeting reading fluency then only include the most recent reading fluency scores and leave reading comprehension scores out. For students 14.5 and older, describe student strengths and weaknesses within the context of his/her post-school goals.
- h) Goal Statement: Provide a statement written in objective and measurable terms that describes what the student should be able to accomplish in the next 12 months. The annual goal should be based on the team's determination of the student's deficits that result from his/her disability as described in the evaluation. Each goal must reflect consideration of the Illinois Learning Standards (ILS).
- i) Short Term Objectives/Benchmarks: Provide at least two statements written in measurable terms that identify the intermediate steps between the student's present levels of performance and his/her annual goals.
- j) **All goals and objectives must include: (see attached goal reminder)**
 1. **CONDITION** – under which behavior will be performed
 2. **BEHAVIOR** – to be performed by the students and observed
 3. **CRITERIA** – level of performance at which the goal will be achieved
 4. **BY WHEN**

Goals and objectives may also include:

5. **GENERALIZATION** – additional conditions/settings/materials
6. **MAINTENANCE** – specified period of time

Examples of IEP Goals/Objectives/Benchmarks:

Speech

Goal: X will demonstrate improved functional communication skills to initiate and engage in conversations, express her wants and needs, follow directions, and answer questions through traditional communicative means or augmentative device, in 2 settings, ¾ observed attempts, and maintain for 3 consecutive sessions by 09/10/2025.

- Obj: Given direct language therapy, X will initiate communication with an adult or peer, using traditional or augmentative means, in any setting at least 3 times per day and maintain for 3 consecutive sessions by 03/10/27.

Reading

Goal: Given assignments at a 5th then 6th grade reading level, X will apply reading strategies to increase comprehension from 5th grade to 6th grade level by May 1, 2027.

- Obj: Given a classroom assignment, X will locate and write or dictate a list of 5 factual pieces of information (e.g., details, events, sequences) with 85% accuracy by May 1, 2027.

Math

Goal: With exposure to the preschool environment, X will increase academic readiness skills by successfully identifying colors, shapes, and numbers activities and attaining the following 3/3 objectives listed below by 09/10/2027.

- Obj: When given 8 colors, X will sort, name and match the colors with 100% accuracy in 3/3 attempts by 3/10/27.
- Obj: When directed by the teacher, X will rote count numbers 1-20 with no errors in 3/3 consecutive trials by 9/10/2027.

Goal: Given direct math instruction, X will solve algebraic problems using systems of numbers and their properties with 75% accuracy by May 15, 2027.

- Obj: When given an equation, X will use order of operations and exponent rules to evaluate and simplify numerical and algebraic expressions containing whole numbers, integers, absolute value, fractions, or exponents with 75% accuracy by May 15, 2027.

Employment

Goal: Given support from educational staff, X will identify and list three tech schools that have the auto mechanic major by the end of the 2026-2027 school year with 100% accuracy.

- Obj: Given direction from the teacher, X will record/list the entrance requirements for one tech school that offers the auto mechanic major by 10/2026, a second by 1/2027, and a third by 4/2027 with 100% accuracy.

Education/Training

Goal: Given the requirements for high school graduation, X will select, enroll and earn passing grades (65% or higher) in 8 classes that support her post-secondary choices of becoming a police officer, doctor, or architect by May 25, 2027.

- Obj: X will independently meet with the guidance counselor 2 times during the school year to update her 4 year plan based on information gathered on personal interest inventories with 100% completion as charted by the guidance counselor by April 1, 2027.

Attention

Goal: Given supplementary aids, X will attend to the same task until it is finished up to 10 minutes in length in 5/5 attempts by 09/10/2027.

- Obj: With visual reminders, X will participate in teacher directed whole class activities for a duration of 10 minutes in 4/5 daily attempts by 11/1/2026 and in 5/5 daily attempts by 1/1/2027.

E. Educational Accommodations (Under Annual Forms)

Please remember that accommodations and modifications must be something the student needs in order to be successful. If they only need it *as needed*, then they don't need it. These are not optional once they are determined by the team to be needed. Also, do not put the student will use a Chromebook when every student is issued a Chromebook.

1. Consideration of Special Factors

- a) All students – assistive technology devices and services (mark “yes” if they require assistive tech due to their disability such as picture schedules, eye gaze communication equipment, graphic organizer, multiplication chart, agenda books, ipads, taped books, etc.). If “no”, specify why AT is NOT needed to access FAPE.
 - 1) Example: The team decided that the student does not require Assistive Technology in order to access the general curriculum and a Free Appropriate Public Education.
- b) All students- communication needs (mark “yes” if the student receives speech and/or language services)
- c) Deaf/hard of hearing-language and communication needs (mark “yes” if the student receives hearing impairment services, uses hearing aids, FM systems, interpreter, etc.)
- d) Limited English Proficiency- language needs (mark “yes” if English is second language)
- e) Blind/visually impaired-provision of Braille instruction (mark “yes” if student is receiving vision services, has vision equipment, braille instruction, etc.)
- f) Behavior mark “yes” if the student has a BIP, is eligible under emotional disabilities, or if the student requires an FBA/BIP and qualifies under any disability category. Also mark “yes” if unique/specific behavioral interventions are needed but no BIP is necessary.
- g) Linguistic and Cultural Accommodations- English as second language, D&HH
- h) Supplementary Aides, Accommodations, and Modifications
 - 1) Use the blue “add accommodations” button and click to add from the drop down or click “other” and write your own to save time and space.
 - 2) For every accommodation list the class/subject in which it is needed and how the accommodation is to be used. (**Limit list to only needed accommodations**). All accommodations must be linked to the student’s eligibility. For example, if a student has a math deficit only, then the student wouldn’t qualify for extended time in all subject areas; only math related subjects.
 - 3) As a Special Education Teacher, you are responsible for ensuring every accommodation listed is consistently implemented so keep the list small and document that they are being used.
 - 4) All supplementary aids must be directly linked to the student’s disability area(s).

- 5) 5 Important Steps when determining a supplementary aide:
 - i. Expect students with disabilities to achieve grade level academic content standards
 - ii. Learn about accommodations for instruction and assessment
 - iii. Select accommodations for individual students
 - iv. Administer accommodations during instruction and assessment
 - v. Evaluate and improve accommodation use
- 6) This is good place to document BCBA/RBT supports that are required to help a student be successful in the general education setting.

i) Extra-curricular and other non-academic activities

- 1) Please make sure to put something in this box. If none are needed for the student, put “none” or “n/a”
- 2) Remember that whatever you put in this box carries over to after-school activities, so be mindful of how the aids, accommodations, and or modifications will be implemented and by whom.
- 3) You can specify what accommodations/modifications they may need for which activity i.e. “Student will be monitored by staff during lunch recess” OR “student requires tryout requirements/expectations in writing.”

j.) Supports for School Personnel

- 1) Check the “yes” box to indicate that supports for school personnel are needed for all resource/instructional IEPs. Speech/Language only students may not require supports for school personnel.
 - 2) List the training/support you will provide to staff related to the accommodations and modifications listed on the IEP including behavioral needs.
 - 3) List any training to be provided for medical needs (conditions, medications, seizures, transfer/lift training, stretching programs, etc.)
 - 4) List all specialized equipment needed (communication devices, electric wheel chair, FM systems, slant boards, etc.)
 - 5) List behavior Interventions/training that have been provided (CPI, BIP, Incredible 5-point scale, cueing/prompting, etc.)
 - 6) List specialized instruction/accommodations training (Discrete Trial, color overlays, picture schedule, etc.)
- ii) Parent Training or Counseling- Check “yes” if parent counseling and training services are needed to help parents acquire the necessary skills to support the implementation of their child’s IEP. If checked “yes”, support will be added as a related services. If checked “no”, no further action is needed.

The supports should be based on the student's needs and should include, when appropriate, information that clarifies when the supports will be provided, by whom, in what location, etc. **BE SURE TO INCLUDE ANY ONGOING SUPPORT YOU WILL BE PROVIDING TO STAFF** (strategies, modifications, etc.).

Examples:

- 1) “All staff working with (student name) will be provided with specific IEP information that pertains to their role in educating the student”.
- 2) “All staff working with (student name) will be trained at the beginning of each school year in seizure care training by a certified provider.”
- 3) “All staff working with (student name) will be provided training on the student’s behavioral intervention plan.”
- 4) “All staff working with (student name) will be trained on FM system, basic functionality and trouble shooting.”
- 5) “All staff working with (student name) will be trained on the side effects of medications taken by the student, seizure care procedures, toileting procedures, and behavior interventions. Staff will meet bi-weekly to discuss aforementioned student procedures.”

- 6) “Special Education Teacher will provide training to staff prior to implementation of the Incredible 5-point scale to ensure consistency and common language during implementation of the intervention.”

Accommodations are practices and procedures in the areas of presentation, response, setting, and timing/scheduling that provide equitable instructional and assessment access for students with disabilities.

Accommodations reduce or eliminate the effects of a student’s disability and do not reduce learning expectations.

1. **Presentation Accommodations** allow students to access information in ways that do not require them to visually read standard print. These alternate modes of access are auditory, multi-sensory, tactile, and visual.
2. **Response Accommodations** allow students to complete assignments, tests, and activities in different ways or to solve or organize problems using some type of assistive device or organizer.
3. **Setting Accommodations** change the location in which a test or assignment is given or the conditions of the assessment setting.
4. **Timing/Scheduling Accommodations** increase the allowable length of time to complete a test or assignment and may also change the way the time is organized. In the IEP you must define what the allowable length of time is. Examples; One extra class period to complete math tests or one extra day to complete a math assignment.

Modifications are procedures or practices changing, lowering, or reducing learning or assessment expectations. Modifications may result in implications that could adversely affect a student throughout that individual’s educational career.

Examples include:

- a. Requiring a student to learn less material
- b. Revising assignments or tests to make them easier

Questions to Ask Yourself when Determining an Accommodation:

1. What are the student’s learning strengths and needs?
2. How do the student’s learning needs affect the achievement of grade level content standards?
3. What specialized instruction (e.g., learning strategies, organizational skills, reading skills) does the student need to achieve grade level content standards?
4. What accommodations will increase the student’s access to instruction and assessment by reducing the effects of the disability?
5. Review Current Accommodations
 - a) What accommodations directly related to the student’s deficits are currently used by the student during instruction and for assessments?
 - b) What are the results for assignments and assessments when accommodations were used and not used?
 - c) Are there effective combinations of accommodations?
 - d) What difficulties did the student experience when using accommodations?
 - e) What is the student's perception of how well accommodations “worked”?
 - f) What are perceptions of parents, teachers and specialists about how well accommodations “worked”?
 - g) Is the student consistently taking advantage of the accommodation?
6. Decide whether the student should:
 - a) Continue using an accommodation “as is”
 - b) Use an accommodation with changes
 - c) Have an accommodation discontinued
7. Of the Accommodations that match the student’s deficit area(s) and needs, consider:
 - a) The student’s willingness to learn to use the accommodation
 - b) Opportunities to learn how to use the accommodation in classroom settings
 - c) Whether or not they are allowed on state assessments
8. Involve students:

- a) Involve students in selecting, using, and evaluating accommodations
 - b) The more input students have in selecting their accommodations, the more likely the accommodations will be used
 - c) Students should see accommodations as adding value to their daily life—not only in school—but for postsecondary, career, and community life
9. Do not write “as needed” next to any accommodation or modification. If the IEP team agrees that a specific accommodation or modification is necessary to allow the student to access the general curriculum it must be implemented with fidelity not once in a while.

F. Assessment: (Under Annual Forms)

The Assessment section is filled out for every student.

1. Classroom-Based Assessments
 - a) Select appropriate box for classroom-based assessments
2. District-Wide Assessments
 - a) Box 1- Mark only if your district does not offer any district wide assessments
 - b) Box 2- Mark only if your district offers district wide assessment, but not at students grade level. Note you must enter in the student’s current grade level.
 - c) Box 3- Mark for students who will not participate in the entire district-wide assessment.
 - d) Box 4- Mark for students who will participate in the entire district-wide assessment WITHOUT accommodation(s).
 - e) Box 5- Mark only for students who will participate in the entire district-wide assessment WITH accommodation(s). (Complete assessment accommodations section on the IEP.)
 - f) Box 6- Mark if the student will participate in only part of the district-wide assessment (specify which part(s) and what, if any, accommodations are required).
 - g) Box 7- Mark only if the student will participate in the district-wide alternate assessment without accommodation(s). This is only for a student who would qualify for DLM and your district has an alternate assessment.
 - h) Box 8- Mark only if the student will participate in the district-wide alternate assessment with accommodations. This would only apply for students who would qualify for DLM and your district has an alternate assessment. (Complete assessment accommodations section on the IEP).
3. State Academic Assessments
 - a) Box 1- Mark this box for students in grades Prek, grade 1 or 2 (unless IEP is due during 3rd grade year), and 12. Make sure to fill in the student’s current grade level.
Illinois Assessment of Readiness (IAR, Grades 3-8)
 - b) Box 1.1 (IAR Assessment is not appropriate)- Mark this for students who qualify for DLM. In the box write, “(Name of Student) meets criteria for DLM”.
 - c) Box 1.2- Mark for students participating in the IAR assessment with NO accommodations.
 - d) Box 1.3- Mark for students participating in the IAR assessment with accessibility features turned on in advance and/or accommodations(s). (Complete the IAR Assessment Accommodations section of the IEP).
Dynamic Learning Maps (DLM-AA, Grades 3-11)
 - e) Box 2.1- Mark for student who qualifies for the DLM (Complete the DLM Participation Guidelines)
 - f) Box 2.2- Mark if student taking the DLM does not need accommodations
 - g) Box 2.3- Mark if student taking the DLM requires features/accommodation(s). Complete the DLM Accessibility Features and Accommodations section of the IEP.
National Assessments (ACT, Pre-ACT 9/10)
 - h) Box 3.1- Mark for students not taking due to grade level (grades other than 9-11)
 - i) Box 3.2- Mark if student taking the assessment without accommodations.
 - j) Box 3.3- Mark if student is taking the assessment with accommodations. The list is at the bottom of the page under “Assessment Accommodations” and “National Assessments”.
Illinois Science Assessment (Grades 5 and 8, High School Biology)

- k) Box 4.1- Mark if the ISA is not administered at the student's grade level (Grades 5, 8)
- l) Box 4.2- Mark if student will participate in the ISA with NO accommodations.
- m) Box 4.3- Mark if student will participate in the ISA with Accommodations (complete assessment accommodations section of the IEP).

Physical Fitness Assessment (Grades 3-12)

- n) Box 5.1- Mark if student will not participate in the physical fitness assessment (Explain): (grades PreK-2nd excluded from assessment)
- o) Box 5.2- Mark if student will participate in Fitness Gram assessment with no accommodation(s).
- p) Box 5.3- Mark if student will participate in Fitness Gram assessment with accommodation(s).
- q) Box 5.4- Mark if student will participate in the Brockport assessment with no accommodation(s). This assessment is an alternate to the Fitness Gram. Check with your building administrator and Physical Education Teacher prior to marking this box.
- r) Box 5.5- Mark if student will participate in the Brockport assessment with accommodations(s). This assessment is an alternate to the Fitness Gram. Check with your building administrator and Physical Education Teacher prior to marking this box.

Kindergarten Individual Development Survey (KIDS)

- s) Box 6.1- Mark if the Kindergarten Individual Development Survey (KIDS) is not appropriate.
- t) Box 6.2- Mark if the student will participate in KIDS with no accommodation(s). Select which subtests the student will receive no accommodation(s) for.
- u) Box 6.3- Mark if the student will participate in KIDS with accommodation(s). Select which subtests the student will receive the accommodation(s) for.

Other

- v) Box 7.1- This "Other" box is for additional state assessments that may pertain to the student.
- w) Box 7.2- Mark if the student will participate in the above assessment with no accommodation(s).
- x) Box 7.3- Mark if the student will participate in the above assessment with accommodation(s). (Complete assessment accommodations section of the IEP).

3. State Assessment of Language Proficiency

- a) Box 1- Mark "yes" if the student is an ELL. Mark "no" if the student is not an ELL and then skip to the next section. If marked "yes", choose below whether the student will participate in the ACCESS with or without accommodation(s) or whether the student will participate in the alternate ACCESS with or without accommodation(s).

4. Assessment Accommodations

- a) Classroom-Based Assessments- Complete this section with the accommodations used for students taking tests and quizzes in the classroom;
 - 1) Extended time, word boxes, fewer multiple-choice answers (4 to 3), tests read, student answers orally, speech to text, etc.
 - 2) If none, type "Student does not require accommodations"
- b) District-Based Assessments- Complete this section with the accommodations needed to and participate in District wide assessments. If none, type "Student does not require accommodations"
- c) IAR/ISA Accommodations- Complete this section for students grade 3-8, 11, High School Biology. List the specific accommodation(s). If none, type "student does not require accommodation(s)". Make sure to discuss accommodations with your building administrator and consult the IAR Administrator Guidelines to determine allowable accommodations based on disability.
- d) DLM Assessment- Complete this section if the student is eligible for the DLM assessment and will be taking the assessment. List the specific accommodation(s). If none, type "student does not require accommodations".
- e) National Assessments- Complete this section for students in grades 9-11. List the specific accommodations needed to participate in the science assessment. If none, type "Student does not require accommodations".
- f) Physical Fitness Assessment- Complete this section for students taking the Fitness Gram or Brockport Assessment. List the specific accommodation(s). If none, type "student does not require accommodations".

- g) KIDS Assessment- Complete this section for student taking the KIDS Assessment. List the specific accommodation(s). If none, type “student does not require accommodations”.
- h) Other Assessments- Make sure to list the assessment to be given and the accommodations needed. If none, type “Student does not require accommodations”
- i) Access/Alternative Access- For students who are ELL. If none, type “Student does not require accommodations”

G. Transition: USE YOUR TRANSITION FOLDER FOR GUIDANCE

Indicator 13: Secondary Transition

Compliance Indicator: Percentage of youth aged 14.5 and above with measurable postsecondary goals

Must be completed for all students who are 14.5 years of age and older. When you submit the NOC to the Program Coordinator for review also CC your Transition specialist.

ALL transition activities must be completed prior to the draft going home and uploaded into EmbraceIEP.

1. Indicator 13 measures the percent of youth age 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student’s transition service’s needs. You may link an educational deficit goal to a transition goal, but do not combine multiple Transition goals together. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority.
2. Transition IEP Review Checklist
 - A. Transition Consent must be signed and uploaded into EmbraceIEP before the Notification of Conference is sent to parent/guardian
 - B. Notification of Conference
 - a. Mark Transition as a purpose of meeting
 - b. The student must be invited and attend
 - c. Invite the Transition Specialist (grades 9-12+)
 - d. Invite DRS (grade 11 & 12+)
 - e. Invite Post Secondary training (grade 12+)
 - C. Conference Summary Report- Mark Transition as a purpose of meeting
 - D. Present Levels of Performance Page- Under the Functional section, add a transition statement that is reflective of the students strengths (in all domain areas) and must align with the transition plan
 - E. Each annual goal statement must include a link to transition (Employment, education, and independent living). As an option, individual transition goals may be written.
 - F. Indicator 13 Form- must be completed for every transition meeting
 - a. Question #8 should be marked Yes (Y), No (N), No (N) if no outside agency is invited (8th grade, 9th grade, and 10th grade)
 - b. Question #8 should be marked No (N), Yes (Y), Yes(Y) for all 11 grade and 12 graders+ when outside agencies are invited
 - G. Secondary Transition Page Plan Components
 - a. Identify if student will be earning a diploma or certificate of completion (This conversation should be occurring starting in the 8th grade)
 - b. Transition Packet/Assessments for all transition areas (Employment, education, and independent living) must be updated annually with date of completion listed on the Transition Plan. The date listed must be before the annual IEP review date.
 - c. Upload the completed Transition Packet/Assessments into EmbraceIEP using the following format (year, month, date, last name of student, first name of student, Transition packet)
 - d. Under Post-Secondary Outcomes Section:

- i. The Post-Secondary statement must be written as a measurable goal. Follow to format below to address all areas. “Upon completion of high school, (student) will work in the (career) field.”
- e. Under Course of Study Section:
 - i. Make sure to discuss with Guidance Counselor and be aware of credits earned and needed
 - ii. Must align with the Career goal and demonstrate progression of course completion
 - iii. Must align with the Educational Services and Placement Page
- f. Under Transition Services Section:
 - i. All areas need to be completed (no blank areas)
 - ii. Date to be completed should reflect the anticipated graduation/completion date
- g. Under Home-Based Support Services Section
 - i. Must be marked either yes or no
 - ii. Make sure each question is answered

3. Forms

- a) Transition Services (Under Annual Forms)
- b) Transition Agency Invite Parent (Under District Doc/Transition)
- c) Transition Agency Invite Student (Under District Doc/Transition)
- d) Transition Consent for Agency Invitation (Under Notice and Consent)
- e) Transition Transfer of Rights (Under Notice and Consent)
- f) Transition Delegation of Rights (Under Notice and Consent)
- g) Transition Extended Course of Study (Under District Doc/Transition)
- h) Transition SOP Student Perspective (Under District Doc/Transition)

H. **Illinois Child Outcomes Summary Form** (Under Add Form/Custom)- This form should be filled out with input from parent and IEP team. The best practice is to complete during an IEP meeting.

Indicator 6: Preschool Environment

Monitoring Priority: FAPE in the LRE

Results indicator: Percentage of children aged 3-4 with IEPs attending a:

Target A. Regular early childhood program receiving the majority of special education and related services in the regular education early childhood program.

Target B. Separate special education class, separate school, or residential facility

Target C. Services in the home

School year 20267-2027 (FFY 26) targets will be released in 2027

FFY	FFY 2025
Target A > or =	48.50%
Target B < or =	25.00%
Target C > or =	0.23%

Indicator 7: Preschool Outcomes

Monitoring Priority: FAPE in LRE

Results indicator: Percentage of children aged 3-4 with IEPs who demonstrate improvement:

Target A1. Positive Social-Emotional skills increased (including social relationships)

Target A2. Positive Social-Emotional within age expectations

Target B1. Acquisition and use of knowledge and skills increased (language/literacy)

Target B2. Acquisition and use of Knowledge within age expectations

Target C1. Use of appropriate behaviors to meet their needs increased

Target C2. Use of appropriate behaviors to meet their needs within age expectations

- 1. Early Childhood Outcomes learning modules can be found at <http://www.eclre.org/good-to-know/ec-outcomes/>

2. The Educational Environment Code Generator User Guide can be found at <http://ec-ecotool.com/>
3. Decision Tree for Educational Environments can be found at <https://www.isbe.net/Documents/decisiontreeforcodingil.pdf>
4. The Early Childhood Outcomes Rating App User' Guide can be found at http://www.eclre.org/media/89396/eco_standarduserguide_090114.pdf

I. Functional Behavioral Assessment (FBA) and Behavior Intervention Plan (BIP):

1. Functional Behavioral Assessment Consent (Under District Doc/Behavior)
2. Functional Behavioral Assessment (Under Additional Forms)
3. Behavior Intervention Plan (Under Annual Forms)
4. Behavior Intervention Plan Steps (Under District Doc/Behavior)

Steps to follow when completing and updating a FBA/BIP: (FBA/BIP Instructions attached)

The goal of a BIP is to positively change behavior. Plans should be short term and address specific behaviors. This requires frequent analysis and discussion by team members.

1. The FBA/BIP process should be initiated if a student is exhibiting repeated behavior that is interfering with his/her learning or the learning of others, school attendance is being impacted, progress toward goals and objectives is limited, student is being considered for a placement change due to disciplinary action, student is being suspended often, or student has a primary or secondary label of ED.
2. The Special Education Teacher must schedule an IEP meeting with the parent, social worker, regular education teacher, program coordinator and principal to discuss the concerns and consider the need for a Functional Behavior Assessment. Three notices must be provided to the parent for this IEP meeting.
3. Concerns and current data will be discussed and recorded in the Additional Notes section of the IEP.
4. The Special Education Teacher will ask parent to sign the Functional Behavior Assessment Consent form found under District Doc/Behavior.
5. The IEP team will decide which specific behavior(s) are most problematic and provide an operational definition of the behavior(s) (No more than two behaviors should be addressed)
6. The Special Education Teacher and/or Social Worker will develop data collection procedures and determine how additional information will be gathered. The IEP team members must train staff on the data collection procedures.
7. The Special Education Teacher and/or Social Worker will complete the FBA form found under Additional Forms. This includes the following:
 - a) Participants/Titles
 - b) Student Strengths
 - c) Operational Definition of Target Behavior
 - d) Setting
 - e) Antecedents
 - f) Consequences
 - g) Environmental Variables
 - h) Hypothesis of Function
 - i) Type of Deficit
8. If the FBA shows that a BIP is warranted, the Special Education Teacher and/or Social Worker will complete a draft Behavioral Intervention Plan under Annual Forms. A BCBA may assist with this process but it is not his/her responsibility to complete it.
 - a) Students Strengths
 - b) Target Behavior
 - c) Hypothesis of Behavioral Function
 - d) Summary of Previous Interventions
 - e) Replacement Behaviors

- f) Environment/
- g) Instruction/Curriculum
- h) Positive Supports
- i) Motivators/Rewards
- j) Restrictive Disciplinary Measures
- k) Crisis Plan
- l) Data Collection Procedures
- m) Coordination with Caregivers

9.” Isolated time out, time out, and physical restraint shall only be used when the student’s behavior presents an imminent danger of serious physical harm to the student or others and less restrictive and intrusive measures have been tried and proven ineffective.” These restrictive interventions should only be included in BIPs when absolutely necessary to keep a student safe. (IAC 23 Section 1.285) Only those restrictive interventions listed in the BIP can be used with a student unless they are needed in an emergency situation to keep students safe.

10. It is best practice for the Special Education Teacher and/or Social Worker to complete the Behavioral Intervention Plan Steps (page 3) found under District Doc/Behavior or another one page plan showing the specific steps that need to be followed during a crises situation. This one page form gives all service providers a clear description of the specific procedures to follow to ensure implementation fidelity
Behavior Intervention Plan Steps

- a) Behavior goal
- b) Function (hypothesis on why the student engages in the behavior)
- c) Prevention Plan/Positive Supports (steps taken to prevent the behavior)
- d) Action Plan/Crisis Plan (steps taken when the behavior occurs)
- e) Replacement Behavior (new behavior that will be taught to the student)
- f) Method of Evaluation
- g) Monitoring Schedule

11. The Special Education Teacher schedules another IEP meeting with the parents, social worker, regular education teacher and principal to share the findings (using graphed data) and proposed BIP. Three notices must be provided to the parent for this IEP meeting.

12. The BIP becomes part of the student’s IEP and is attached to the current IEP, provided to the parent, and placed in the temporary file.

13. The Special Education Teacher and/or Social Worker train all staff who interact with the student on the Positive Supports, Crisis Plan, and Replacement Behaviors, and data collection procedures listed in the BIP.

14. The Special Education Teacher and/or Social Worker regularly check to see that the plan is being implemented with fidelity, provide support to staff and offer additional training if needed.

15. All FBA & BIPs must be reviewed at least quarterly to determine if the plan is working or if changes need to be made. If changes are needed an IEP meeting should be scheduled or an amendment completed, with parent agreement, by the Special Education Teacher.

16. Special Education Teachers must report on the behavioral progress being made every time they provide an update on IEP goals and objectives. A visual chart or graph showing the data that has been collected over the last 9 weeks should be used to share progress.

17. The FBA and BIP must be updated at every annual review.**The goal of a BIP is to positively change behavior. Plans should be short term and address specific behaviors. This requires frequent analysis and discussion by team members.

J. **Autism Considerations** (Under Evaluations)

This form must be completed for any student with an autism eligibility

1. Discuss this form immediately after discussion of Present Levels of Educational Performance.
2. In accordance with Section 14-8.02 of the School code, “In the development of the individualized education program for a student who has a disability on the autism spectrum (which includes autistic disorder, Asperger disorder, pervasive developmental disorder not otherwise specified, childhood disintegrative disorder, and Rett Syndrome, as defined in the [(DSM-IV,2000)], the IEP team shall consider all the following factors.”

- This information should be shared along with the IEP Summary to all staff working with the student to ensure understanding of the student’s needs.

Form Consideration Guidance:

- Students Present Levels and Needs:* Explain how this area affects the student educationally and academically and provide a detailed description. Utilize the information provided from the Related Service Providers on the Present Levels of Educational Performance if available. Make sure you are asking input from the parents for each area.
- Supports Identified:* Type in the specific supports needed by the student
 - Verbal & Nonverbal Communication Needs**
 - Considerations: Picture Schedules, Augmentative Communication, Visual prompts, Sign Language, Picture Communication, Visual Supports (break cards, scripts, etc)
 - Social Interaction Skills and Proficiencies**
 - Considerations: Direct instruction of social skills, direct instruction of social/emotional awareness, role playing, scripts (turn taking, greetings), participate in a social skills group, social stories
 - Needs Resulting from Unusual Responses to Sensory Experiences**
 - Considerations: Proprioceptive (sense of the body’s position), sensory diet, visual, auditory, vestibular (sense of movement), environmental adjustments, gustatory (sense of taste), fidgets/hand helpers, tactile (sense of touch), special equipment (weighted vests, seat cushions, etc.), schedule breaks
 - Needs Resulting from Resistance to Environmental Change or Change in Daily Routine**
 - Considerations: Individual Schedule (object, phone, picture, word)), Visual supports showing the passage of time, relaxation techniques, picture schedule indicating change, timer (visual and/or auditory), transition objects, social stories
 - Needs Resulting from Engagement in Repetitive Activities and Stereotypical Movements**
 - Considerations: Sensory diet, substitution of replacement activity, FBA, relaxation training, solitude, incompatible replacement behavior, time, fidgets/hand helpers
 - Needs for any Positive Behavioral Interventions, Strategies and Supports**
 - Considerations: FBA/BIP, direct instruction of social/emotional awareness, provide structure and predictable routine, minimize distractions, allow escape to designated area, create boundaries, social reinforcement, alternate passing periods, allow movement, tangible rewards/reinforcers, token system, structured environment
 - Other Needs which Impact Progress in General Curriculum, including Social and Emotional Development**
 - Considerations: Any other supports needed (not listed above)

K. Educational Services and Placement

Indicator 5: Educational Environment

Results Indicator: Percentage of students with IEPs ages 5 – 22 served in each environment

The current targets are listed below *School year 20267-2027 (FFY 26) targets will be released in 2027*

	FFY22	FFY23	FFY24	FFY25
5A Gen Ed 80% or more of the day	53.10%	53.30%	53.50%	53.70%
5B Gen Ed less than 40% of the day	12.33%	12.31%	12.29%	12.27%
5C Separate School/Facility/Home/Hospital	6.37%	6.36%	6.35%	6.34%

- Complete two Educational Services and Placement pages, one for the current school year and a 2nd page for the following school year since service minutes/case managers change.
- Input start and end dates ensuring they are no more than 364 days apart.
- Review Case Manager and School to ensure accuracy.
- Indicate if student will participate in regular physical education (Mark YES or NO)
- Double check bell to bell and instructional minutes for accuracy.
- Participation in General Education Environment

- a) Special Education in General Classroom – list the class/subject and minutes of support provided by a certified special education teacher within general ed. For Co-teaching record half of the total class minutes per week. Do not include minutes for co-taught classes the student happens to attend but are not a direct result of the student’s disability. Specialists (HI/VI) who are overseeing accommodations and modifications (**consultation- length of services is recommended by the provider and unique to the needs of the student**) provided by the case manager and/or classroom teacher and who are not providing direct or resource support should also be listed in this section with a minimal number of minutes (15 mpq).
 - b) General Education with Supplementary Aids – list classes/subject in which accommodations/supports are necessary based on identified deficits.
 - c) General Education No Supplementary Aids – list class/activities throughout the day where no supports are needed.
7. Participation in Special Education Environment
- a) Special Education Outside General Classroom – list direct instruction classes and minutes per week that are directly linked to the student’s identified deficit(s).
8. Related Services
- a) Related service minutes are documented in minutes per quarter (mpq)
 - 1. Related Service logs must be available at the request of the parent/guardian for the following related services: OT, PT, speech, nursing, counseling, and social work. A copy of logs must be provided to the parent/guardian within 3 days of the request.
 - 2. A special education teacher must ensure that paraprofessional health care logs are being kept up to date by the individual providing the service. These logs should be kept in the student’s temporary file.
 - 3. All related service logs must be maintained in the student’s Embrace file and placed in the student’s temporary file monthly.
 - b) If marked elsewhere in the IEP and required for the student, document BIP, Special Transportation, and/or transition related services
9. Education Environment Considerations
- a) If a student is removed from the general education environment for instruction mark YES and explain why.
 - b) Students who are being served in the public-school setting have an opportunity to participate in nonacademic activities with non-disabled peers, therefore, mark YES. If a student is placed at Cornerstone mark NO and explain why.
 - c) If a student is attending their home school mark YES
10. Placement Considerations
- a) The team must consider and document, but are not limited to, at least three options with possible harmful effects. Although an option may have a potential harmful effect, the team may still determine that it is the most appropriate placement for the student. The team should begin with the least restrictive setting when considering placement options.
 - b) At this time also discuss the remote learning plan that will be implemented should the student need to learn remotely. Attach the RLP to the back of the IEP at the end of the meeting.
 - c) Do not mark the YES/NO boxes for placement until after it is discussed at the IEP meeting. This information will need to be hand written on the Conference Summary form at the end of each IEP meeting.
11. Transportation- Mark appropriate boxes. You must use the text box to write specific information regarding transportation needs (accommodations and/or equipment). All equipment and supports must be approved by District Administration prior to being written into the IEP.
12. Extended School Year Services
- a) Contact your Program Coordinator to discuss consideration
 - b) The ESY Decision Making Form must include hard data and be signed by the Superintendent prior to submitting to Program Coordinator/Assistant Director.
 - c) ESY Decision Making Form requires hard data. The best time to collect data is at the end of a school year followed by 6-8 weeks into the new school year.

- d) ESY documentation and completed form DUE DATE: MARCH 1
13. Home-bound Instruction- “Over-ride” the suggested bell to bell minutes and instructional times on the Education Services Page by picking the blank space on “serving school” and then manually typing in the bell to bell minutes and instructional minutes. Be sure the Home-Hospital (see attached) form has been fully completed by the physician
 14. ***If you have a student attending another education setting and they are spending partial days back in the home school as a transition period, keep the placement page reflective 100% of the alternate setting. Reflect the transition plan in the IEP additional notes. Do not change the placement in the IEP until the student is 100% back in the home school.

Documenting Co-Teaching

Document the services actually being provided during co-taught classes.

Example Scenario: 10th grade student is eligible for special education services under specific learning disabilities in reading. The IEP team considered and accepted a co-taught literature class in order to provide specialized instruction in the least restrictive environment. Examples;

1. The special education teacher shares the instruction with the regular education teacher 50% of each class period. The class meets for 60 minutes 5 days per week.
(Co-taught Literature/ Instruction, regular ed. setting, 150mpw)
2. The special education teacher works with a small group of students in the back of the classroom for the last 15 minutes of each class period.
(Co-taught Literature/Instruction, regular ed. setting, 75mpw)
3. The special education teacher supports students as needed during independent student work time. Class period is 45 mins, since the teacher is instructing typically the first half of class we divide the class period in half- 22mins x 5 days per week.
(Co-taught Literature/Resource, regular ed. setting, 110mpw)

Co-taught classes documented on the IEP must align to a student's identified disability(ies).

****Remember, a minimum of 53.7% of the special education population must receive their instruction in the general education setting for 80% of more of the school day according to the guidelines set forth by ISBE.**

Discussion of High School Diploma verses Certificate of Completion

1. Students who complete a modified curriculum
2. Students who participate in DLM
3. Start discussions early (Junior High) and communicate with parents
4. Include Principal and Coordinator in making this decision and document
5. All students CAN legally receive a diploma but it is up to the district and IEP team

L. Additional Notes Page (Under Additional Forms)

Regardless of how much in-depth discussion took place... if the discussion is not in writing...It is like it did not happen.

Areas to be discussed must include but are not limited to:

1. DATE/PURPOSE
2. PRESENT LEVELS/GRADES
3. HEALTH
4. PARENTAL CONCERNS
5. GOALS/OBJECTIVE
6. EDUCATIONAL ACCOMMODATIONS
7. PLACEMENT
8. TRANSITION
9. OTHER

M. Excusal Form (Under Notice and Consent)

Continue to utilize an excusal form for IEP team members who were invited to a meeting but were unable to make the IEP meeting. A report from the excused person must be attached to the IEP. Additionally, if an

IEP team member leaves the IEP meeting early an excusal form should be completed. As long as the person leaving early from the meeting has shared and that information was documented on the “additional notes” page, a written report will not need to be attached to the IEP. In all situations an explanation of why the excusal form was used must be written on the “additional notes” page.

N. Conference Summary Recommendations (Under Notice and Consent)

Make sure to fill out completely and attach to the IEP. If the student is determined eligible, or continues to be eligible, for specialized instruction, indicate if the IEP requires a change of special education and/or related services/educational placement OR requires placement in a separate educational setting. This must be documented any time the IEP requires a change of special education and/or related services/educational placement or placement in a separate education setting, regardless of whether the meeting was held in conjunction with an evaluation

O. Submit IEP

When you are completely finished with the IEP (meeting has been held, all changes have been made, and information from the meeting has been entered), click the “submit IEP” tab and select the appropriate secretary. The “submit IEP” tab should be clicked when you are ready for the IEP to be locked (archived). This must be done by the Special Education Teacher.

After the meeting has been held the Special Education Teacher will ensure, 1) additional notes are entered, 2) changes discussed at the meeting are reflected in EmbraceIEP, and 3) IEP is “Submitted”. Once the “Submit IEP” has been reviewed by your Mid-State Secretary and required information has been entered into I-STAR the IEP will be locked (archived).

P. Uploading Documents:

After every meeting held with parents, you will upload all forms that were signed/initialed by the parents. Attach these files to the student’s file that is associated with the meeting date. In order to make uploaded documents easy for everyone to find within each student's EmbraceIEP file, please save each upload using the following format:

(Year/Month/Day) (Students Last name/ first name) (Name of document).

Examples:

2024 8 20 Tester Sally Reevaluation Packet

2024 8 22 Tester Sally MCAP Data

2023 8 25 Tester Sally Domains Form

2023 9 05 Tester Sally OT Report

Procedures at IEP Meetings

1. Steps

- a) Everyone participating in the IEP meeting will be prepared and conduct themselves in a professional manner.
- b) All staff members will be present (at the table or virtually) and ready to start the meeting on time.
- c) The Special Education Teacher will be prepared with all necessary paperwork which includes an agenda.
 - 1) The IEP meeting is a professional meeting that produces a legal document stating how the school district will meet the educational goals of a student with an identified area(s) of disability(ies).
 - 2) Best practice is to use an agenda during the IEP meeting
 - i. Demonstrates professionalism
 - ii. Facilitates time management
 - iii. Ensures all required and necessary items are discussed
- d) The Program Coordinator or the Special Education Teacher will begin the meeting by welcoming parents and ensuring everyone invited to the meeting is in attendance. If a professional is not in attendance, the Program Coordinator or Special Education Teacher will get permission from the parent to continue with the meeting and complete the Excusal Form.

- e) The Program Coordinator, Special Education Teacher, or LEA will start introductions while passing around the Conference Summary Report for participants to sign in and have the parent initial the Procedural Safeguards and the Waive 10 Days (if necessary) line.
 - f) The Program Coordinator or Special Education Teacher will state the purpose of the IEP meeting.
 - g) The Program Coordinator or Special Education Teacher will begin the discussion.
 - h) The Program Coordinator will take notes on the additional information page, complete the parental concerns, and document how the parental concerns were addressed. If the Program Coordinator is not present, the Special Education Teacher or a Related Service Provider will take the notes.
 - i) The Program Coordinator or Special Education Teacher will review the parental concerns and the IEP meeting notes (remember the meeting notes should contain detailed information regarding discussion and must address the parental concerns).
 - j) The Program Coordinator and/or the Special Education Teacher will complete one last review of paperwork.
 - k) The IEP is ended.
 - l) After the meeting has been held the Program Coordinator and the Special Education Teacher will, 1) ensure notes are entered and, 2) changes discussed at the meeting are reflected in EmbraceIEP.
 - m) The Special Education Teacher will make copies of the IEP for the parent (Parent must leave with a complete copy of the IEP).
 - n) The Special Education Teacher will upload all signed documents into the students EmbraceIEP file and then place the original IEP in the student's temporary file.
 - o) The Special Education Teacher will submit the IEP via EmbraceIEP. Once the "Submit IEP" has been reviewed by your Mid-State Secretary the IEP will be locked (archived).
2. Blank Forms-Technology does not always work, be prepared! ☺

Reporting on Student Progress:

IEP progress reports including *hard data*, must be sent home as frequently as the regular education students receive progress updates (quarterly, trimester). In some Pre-K's and districts, report card/skills checks are sent home after the first semester, and after the second semester.

1. If a student has a BIP, progress made toward the behavioral goal(s) must also be sent home in the form of a graph. (See example attached)
2. A progress data sentence must be reported for every goal and every objective/benchmark.
3. Prior to every annual review, a final progress update should be entered and the entire progress report document with 4 entries (3 if you follow trimesters or 2 for semesters) should be printed off, discussed at the annual review, and attached to the back of the new IEP.

Home Hospital Instruction Guidance & Form:

Once someone in the district is made aware that a student with an IEP is hospitalized, the district administration and the district's Program Coordinator must be notified. Administration or the case manager will contact the guardian to find out where the student has been hospitalized, the date of the hospitalization, why the student was hospitalized, and how long the student is expected to be hospitalized.

If the hospitalization is for less than 10 school days (2 weeks), you don't need to do anything other than try to obtain any new reports/diagnoses that may have resulted from that stay. If you do get a new report, follow the same procedures as you do when you get an outside report. However, if the student is projected to be hospitalized intermittently that will total 10 or more days, then the team should plan to prepare for home hospital services.

If the school is providing paper packets, those are fine unless we are going over 10 days. Per Brandon Wright, packets don't cover our FAPE requirements. Our FAPE requirements are the services listed in the IEP. We would need to have an IEP meeting/amend the IEP to reflect the hospital instruction. We will not remove the underlying placement page, but add an additional placement page/edit the current page if there are multiple placement pages, and reflect the short-term dates of the prescribed need from the doctor. We will also reflect the entire plan in the notes section. If the hospital offers an educational component, the district can deny that and provide their own services, but often times the district prefers this as it takes care of their responsibility. The district is billed for this educational piece. More on the details of how to change the IEP on the next page.

If the hospitalization is for more than 10 days (2 weeks consecutive or intermittent);

Home/hospital instruction can be either consecutive or intermittent. In order for a student to qualify for intermittent home/hospital instruction, the statute states:

For purposes of this Section, "ongoing intermittent basis" means that the child's medical condition is of such a nature or severity that it is anticipated that the child will be absent from school due to the medical condition for periods of at least 2 days at a time multiple times during the school year totaling at least 10 days or more of absences. There shall be no requirement that a child be absent from school a minimum number of days before the child qualifies for home or hospital instruction.

1. 10 school days of a student not receiving what is listed on their educational services and placement page is considered a change of placement.
2. Find out if the hospital is providing educational services and if those services include special education services including related service that are listed on the educational services and placement page.
3. If the hospital is not providing instruction per the students IEP, request the Home/Hospital form is completed by the doctor. This form should be completed every 6 months. This form will be kept in the student's temporary file.
4. Schedule an IEP meeting to discuss what services and how those services will be provided, update the EE code to reflect Hospital Instruction (EE Code 12), and bell to bell/service minutes. This can also be completed through an amendment, but remember we request a signature by the parent on the program amendment form anytime an amendment is done in lieu of a meeting. See further explanation of how to change the IEP placement pages below.
5. Home Hospital starts no later than 5 school days after receipt of written statement from doctor. Minimum 5 hours per week UNLESS doctor says they can't sustain that amount. If we do it virtually, 2 of the hours should be direct instruction (per BW).
6. If the student is medically fragile and it is not advised the student engage with school work while hospitalized, we need a doctor to certify that in writing.
7. If the parent refuses to complete a release of information form and does not submit the Home/Hospital Form, you will need to document your attempts to contact the parent and the services that were declined in the IEP notes. To hold the IEP meeting, guardians must waive their 10 day NOC or you must provide a 10 day notification of meeting. This may be a challenge and might even have the team meet to determine services after the student has returned to school after spending 11 days in the hospital.
8. If the team has met to make the IEP reflect homebound or hospital instruction and then the parent is refusing services, the placement would stay the same, but the student would be listed as absent. Eventually you will need to hold a meeting to discuss and document everything.

How to reflect the changes in the IEP:

Whether you are creating a new IEP document or amending the IEP, you will want to make sure to not delete the permanent placement that the IEP team agreed on. You will add a placement page to reflect the time the student is hospitalized. That will mean you end the current placement page so the dates don't overlap. You will also want to add an additional placement page to show that the permanent placement will pick back up on a certain date. This may need to be edited later if the return date is sooner/later than anticipated. The bell-to-bell, instructional, placement code (EE 12), and serving location will need to be updated on the placement page as well so our student data clerical staff fully understands. This will need to be submitted to Shera/Kristy promptly. If you are amending the IEP, draw a line and obtain consent from the parent OR have the parent agree via email to the changes.

Student attending outside placements (Cornerstone):

When a student attends Cornerstone and becomes hospitalized, Cornerstone will continue to notify all necessary staff of this information as soon as possible, as they are often the first people to know. The district will communicate with Cornerstone as to what their next steps are (hold an IEP meeting to reflect hospital instruction, whether to make them active/inactive, etc.).

Steps to follow when Using Parent Portal

Embrace IEP added an electronic signature option to obtain parental consent called “Parent Portal”. To watch a training video in Embrace, go to “training” and then click on video “30-Using the Embrace Parent Portal”.

How to use Parent Portal

1. All fields on a form must be completed by the IEP user prior to obtaining consent. Any changes made after obtaining consent will prompt the removal of the electronic signature.
2. To share a form, choose the unlocked student’s meeting in Embrace and click on the blue rectangle named, “Parent Portal”.
3. Select the documents you would like to share and click, “next”.
4. Choose who to invite. If one or both of the student’s parent/guardian email address(es) are listed in Student Info, the email address(s) will appear in a list. There is also an “other” box where you can enter an email address. Only one email address can be chosen per invitation.
5. A unique passcode will be generated. The invitee will be sent an email from Embrace. This email will include a link to the forms but will not be sent the passcode. The passcode will need to be sent to the invitee via email separately.
6. The link will send the invitee to a login page where they will be prompted to agree with the terms or conditions. The invitee will be prompted to enter the passcode which is the 6 digit passcode.
7. Once logged in, they will be able to click on each form that has been shared. Parents can click on the signature field, sign, and click on “save signature” button. When finished in the portal, the parent/guardian can sign out. (see attached parent portal instruction)

Steps to follow when Adding Related Services:

Domains Meeting

1. Special Education Teachers and Related Service Providers work together to schedule a domain meeting. Make sure the School Psychologist is aware so he/she can involve themselves if needed.
2. Special Education Teacher will prepare and send out the Identification of Needed Assessments (notice of conference just for domain meetings) at least 10 days prior to the meeting date. Three notices must be sent.
3. Related Service Providers should prepare the paperwork for the meeting and bring it with them to the meeting. An IEP DRAFT does go out for a domain meeting. The Identification of Needed Assessments, Conference Summary Report, and DRAFT consent for reevaluation form should go out as a draft. Other forms may be added as well if other forms are relevant.

Forms needed:

- a) Notification of Decision Regarding Request for an Evaluation
 - a) This is to document the request and the need for a reevaluation.
 - b) Consent for Reevaluation page
 - a) This is for the parent to sign to give consent for the eval. In the domain boxes: You can refer to past evaluation information or current eligibilities on this page, but document that this is the only area of assessment at this time. For the draft form, only complete the tox box (existing information about the child).
 - c) Conference Summary Report (sign-in page) with
 - a) Review of Existing Data box marked
 - b) Meeting date changed at the top of the page.
 - d) Notification of Conference
 - e) Excusal Form
 - f) Additional Notes
4. When the meeting is over and consent for your evaluation has been signed by the parent/guardian, scan and upload the Consent for Evaluation (Identification of Needed Assessments) page, and the Consent for Reevaluation page, Conference Summary Report, and any other pages where the parent signed/initialed to Embrace.
 5. After the meeting has been held the Special Education Teacher will, 1) ensure notes are entered, 2) ensure changes discussed at the meeting are reflected in EmbraceIEP, and 3) click the “Submit IEP” button. Once the “Submit IEP” has been reviewed by your Mid-State Secretary the IEP will be locked (archived).

After Evaluation is Complete

1. Once the evaluation is completed;
 - a) Related Service Provider will Notify the Special Education Teacher
 - b) Special Education Teacher will calendar match with the IEP team members, including parents/guardians, to determine a date/time for the student's eligibility meeting.
 - c) Special Education Teacher will send out the NOC and ensure the DRAFT IEP is sent out.
2. Related Service Providers prepares and brings the following eligibility paperwork to the IEP meeting;
 - a) Evaluation Results pages-Type in "see previous evaluation results dated xx-xx-xx" on areas where no current assessments were completed. The only domain where there should be evaluation results is your area.
 - b) Final Eligibility Determination Page-The final eligibility determination page will not be sent home with pre-determination information already filled in. Therefore, we send home the form blank in the IEP DRAFT. This allows the parent/guardian to see what we are considering, but it doesn't show them that we already made a decision (**do not add to the adverse effect section prior to the meeting as it is a team decision and that can be viewed as pre-determination**).
 - c) Present Levels of Educational Performance Page (Prepare only)- Update student strengths, functional performance, and adverse areas affected sections (also, if appropriate, health section).
 - d) Goal pages if the student is eligible for the related service
 - e) Educational Services and Placement Pages (Prepare only) to reflect Related Services
 - f) Notice of Conference Recommendations
 - 1) Mark box 1 *Is eligible or continues to be eligible for spec ed and related services*
 - 2) Mark box 3 *Will receive special education and related services*
3. Special Education Teacher will prepare, print and bring the rest of the student's IEP pages to the IEP meeting (**it is required to hold an IEP meeting within 30 days of determining eligibility**). Notes;
 - a) *Conference Summary Report*
 - 1) Mark "Reevaluation"
 - 2) Mark "Annual IEP Review/Revision"
 - 3) Do NOT change the Eligibility Review dates or the Reevaluation Due date as these are only adjusted when a comprehensive reevaluation is completed.
 - 4) Do NOT change the Annual IEP Review date unless this meeting is also an Annual IEP Review meeting
 - b) *Excusal Form*
 - c) *Additional Notes*
 - d) Bring a copy of the *NOC*

At the Meeting

1. The Program Coordinator will take meeting notes on the *Additional Notes* page. If the Program Coordinator is not available, the special education teacher or related service provider will take the notes.
2. If Parents agree, Parents will need to sign "I agree to waive the requirement of a ten school day interval before an initial or change in placement occurs" and parents signs and dates the bottom of the *Notice of Conference Recommendations* Page.
3. If the Parents do not agree, check the "I do not agree to waive the requirement of a ten school day interval before an initial or change in placement occurs" and parent signs and dates the bottom of the *Notice of Conference Recommendations* Page. Special Education Teacher will contact Program Coordinator immediately.
4. Special Education Teacher will
 - a) review the IEP to ensure its accuracy
 - b) make a copy of the IEP for the parent (parents must leave with a copy of the IEP or document in writing how/when they agree to receive the final copy)
 - c) make a copy for themselves
 - d) place original in the students temporary file (located in the school office)
 - e) ensure signed documents are uploaded into EmbraceIEP

5. After the meeting has been held the Special Education Teacher will: 1) ensure notes are entered, 2) ensure changes discussed at the meeting are reflected in EmbraceIEP, and 3) click the “Submit IEP” button. Once the “Submit IEP” has been reviewed by your Mid-State Secretary the IEP will be locked (archived).

Steps to Follow when Dismissing a Primary or Secondary Service (S/L, PT, VI, HD):

According to P.L. 101-476/IDEA regulations, a student is no longer eligible for special education services and related services when it is determined that:

1. The need for specialized services to address the adverse effect(s) on educational performance is no longer present.
2. The disability no longer has an adverse effect on the student’s educational performance.
3. The disability no longer exists.

Related Service Providers will contact the Special Education Teacher. Special Education will send out the Identification of Needed Assessments and Notice of Conference (if applicable) at least 10 days prior to the meeting date. The Related Service Provider will prepare the following paperwork for the meeting. A domain meeting must be held first and have a parent sign that they agree no additional evaluation data is needed. If the parent agrees the meeting moves into an eligibility meeting where you dismiss the student from the related service. (If a student is speech only eligible, the SLP will initiate and complete the dismissal process).

1. Notification of Decision Regarding Request for an Evaluation
 - a) This is to document the purpose of the meeting and that no additional evaluations are necessary to dismiss the student.
2. Consent for Reevaluation page
 - a) This is for the parent to sign to agree that no additional evaluation data is needed.
 - b) You can refer to past evaluation information or current eligibilities on this page, but document specifically in your domain the student’s current performance using hard data and that there is no longer a need or adverse effect. The team is required to consider all of the relevant domain areas.
3. Final Eligibility Determination Page (you do not need the eval results pages unless you complete an evaluation as part of the dismissal, but then you would have 2 separate meetings—one to get consent for the eval and another meeting to dismiss). On the Eligibility Determination page, remove the linking statement for your deficit area and remove the educational needs statement for your service. Do not remove any other information.
4. Present Levels of Educational Performance –remove related service information
5. Remove Related Service Goals and make sure Related Service Provider is not an implementer on any other goals.
6. Special Education Teacher will prepare, print and bring the rest of the student’s IEP pages to the IEP meeting. Notes:
 - a) Conference Summary Report
 - 1) Mark “Review Existing Data”
 - 2) Mark “Reevaluation”
 - 3) Mark “Annual IEP Review/Revision”
 - 4) Do NOT change the Eligibility Review dates or the Reeval Due date as these are only adjusted when a comprehensive reevaluation is completed.
 - 5) Do NOT change the Annual IEP Review date unless this meeting is also an Annual IEP Review meeting
 - b) Excusal Form
 - c) Additional Notes
 - d) Notification of Conference Recommendations page with boxes 1, 3, and 9 completed. Mark “other” and write “Will be dismissed from (related service) services at this time due to meeting goals and/or due to no longer demonstrated an educational need or adverse effect in this area.” Have parents sign to waive their 10 days for this change in service to take effect.
 - e) Bring a copy of the *NOC*
 - f) Bring a copy of the updated IEP with removed services/placement information and related service goals, along with the updated Present Levels of Educational Performance.

8. The student's Medicaid billing must be up to date and complete PRIOR to the dismissal meeting

At the Meeting

1. Program Coordinator or Special Education Teacher will take meeting notes on the *Additional Notes* page.
2. If Parents agree, Parents will need to sign "I agree to waive the requirement of a ten school day interval before an initial or change in placement occurs" and parents signs and dates the bottom of the *Notice of Conference Recommendations* Page. This "change" can include the increase, decrease, addition, or deletion of services and/or minutes.
3. If the Parents do not agree, check the "I do not agree to waive the requirement of a ten school day calendar interval before an initial or change in placement occurs" and parents signs and dates the bottom of the *Notice of Conference Recommendations* Page. Special Education Teacher will contact Program Coordinator immediately.
4. Special Education Teacher will
 - a) review the IEP to ensure its accuracy
 - b) make a copy of the IEP for the parent (parents must leave with a copy of the IEP unless noted in writing to receive it at a later time)
 - c) make a copy for themselves
 - d) place original in the students file (located in the school office)
 - e) ensured signed documents are uploaded into EmbraceIEP
 - f) send in a change sheet to MSSE
5. After the meeting has been held the Special Education Teacher will: ensure notes are entered, ensure changes discussed at the meeting are reflected in EmbraceIEP, and will ensure the "consent for reevaluation" and "conference recommendations" forms are uploaded. They will then click the "submit IEP" button. Once the "Submit IEP" has been reviewed by the MSSE Secretary the IEP will be locked (archived).

Steps to Follow when Dismissing a Related Service

You are not required to hold a re-evaluation meeting or complete re-evaluation paperwork. You will need to terminate related services during an IEP meeting. Consult with classroom teacher and parent(s) to assess current skills and adverse effect prior to the IEP meeting. Use hard data to support dismissing any related service.

According to P.L. 101-476/IDEA regulations, a student is no longer eligible for special education services and related services when it is determined that:

- The need for specialized services to address the adverse effect(s) on educational performance is no longer present.
- The disability no longer has an adverse effect on the student's educational performance.
- The disability no longer exists.

During the IEP meeting:

1. Review IEP goal progress data and attached the IEP progress note to the IEP.
2. On the *Additional Notes* page, include a statement documenting the discussion and agreement to dismiss student from the related service. Include the end date for the related service.
3. On the Present Levels of Educational Performance page, include a data statement along with rationale for dismissal of the related service.
4. Remove Related Service goals/objectives
5. On the Conference Recommendations form check "other" and write, "Dismissed from ___ related service".
6. Click on the submit IEP button. Select the appropriate MSSE Secretary. Enter a message in the message box. "Dismissed from ___ related service".
7. Submit a change sheet to the appropriate MSSE Secretary.
8. The student's Medicaid billing must be up to date and complete PRIOR to the dismissal meeting

Reevaluation Packets:

1. The reevaluation packets will be uploaded into EmbraceIEP by the case manager.
2. You are responsible for making sure all necessary documents are filled out by one of the team members.
3. Once the packet has been completed and uploaded into EmbraceIEP, email the school psychologist to let them know the packet is complete and uploaded.

Reevaluation forms are available in EmbraceIEP. In order to make these forms easier to access, you can save the blank forms in a file on your desktop labeled “Reevaluation Forms”.

Service Logs:

WHAT are service logs?

Related service providers are required to keep a service log of their services for students. These logs should show that all services listed in the IEP are delivered. They can be logged using Embrace DS or in any other logging system of the provider’s choosing. They include:

- Student’s Name
- Date of Service
- Minutes of Service
- Service Description

WHO keeps service logs?

Related Service Providers that are listed below (*Section 226.310*)

- Speech and Language Therapists
- School Social Workers/Counselors
- OT/PT
- School Psychologists
- School Health Services
- Health Aides

WHERE to keep service logs?

Logs may be documented in Embrace (preferred), which is accessible to MSSE administration. If logs are kept using another platform/logging method, logs should be stored in a secure, designated place. In the event that records are requested by the parent/guardian or through a subpoena of records during a time where the provider is not working, administrators should know where to go to access the logs.

WHEN to file service logs?

Logs should be updated monthly, as billing for Medicaid is also completed monthly.

HOW are the logs kept/accessed?

If records are requested by a parent/guardian, we have 10 business days to provide the records. If records are requested by a lawyer/anyone else, the time frame we have to deliver records is dependent on what the order requires. The logs are kept for our records and are kept in the event records are requested. Logs are not sent along with temporary files in the event a student moves. These records stay at the school. If the logs are kept on Embrace DS, no hard copy is required to be kept. We are able to access all files we created in Embrace, even in the event the student leaves.

Temporary Files: Files must be organized in reversed chronological order. Place the initial evaluation, most recent evaluation and current IEP and progress reports in the yellow folder found in the temporary file. Temporary files must be kept 5 years after the student has graduated or moved.

- Includes all information not required to be in the student permanent records
- Records of release of information
- State assessment scores grades K – 8th grade
- Home language survey forms
- Serious disciplinary infractions resulting in expulsion, suspension, or other punishment
- Health related information, accident reports

- Special education records and IEP information
- Intelligence, aptitude, personality assessments
- Honors and awards, etc.

ELL (English Language Learner) and Special Education

- Determination as to whether a special education evaluation is warranted must not be based on the amount of time the ELL has been receiving English instruction or the student's ACCESS score
- Assessments and other evaluation materials used to assess a student must be selected and administered so you are not being discriminatory on a racial or cultural basis AND provided and administered in the child's native language or other mode of communication, and in the form most likely to yield accurate information.
- If the child's language use pattern involves two or more languages, the child shall be evaluated by qualified specialists, or qualified bilingual specialists. When a qualified bilingual specialist is needed but unavailable, after documented efforts to locate and secure the bilingual specialist, a qualified monolingual specialist must complete the evaluation with assistance from a PEL endorsed staff member with competencies in the language or modes of communication of the child. If, after trying and have well documented their attempts, these options are not available, the evaluator may use assessment procedures which do not depend on language.
- ELL support, if given in the gen ed, must also be given in the special ed setting
- Use ACCESS data to help guide the IEP team to develop an IEP that is inclusive to the ELL's needs

EI Students Transitioning to Pre-K

- When a student is referred by CFC, eligibility must be determined by the child's 3rd birthday. It is recommended to schedule the IEP meeting at least two weeks or more before the student's 3rd birthday allow for last minute cancellations and to ensure the deadline is not missed. Eligibility meetings can be held up to 90 days prior to the 3rd birthday.
- If a student turns 3 over the summer, the eligibility must be completed before summer break. In addition to meeting our mandated timeline, the student will also be able to access continued EI services while waiting for school to resume.
- It is the responsibility of the resident district to complete the eligibility process, even if the student plans to attend school outside the district.
- The date the student will start receiving services has to be reported to ISBE. This might not be the date the child turns 3. The "Educational Services and Placement" page should reflect the date the student will start to receive services not the date of the IEP meeting.
- If the student will not start services on their 3rd birthday, the reason should be documented under "Additional Notes" in the IEP. Possible reasons:
 - school not in session – i.e. weekend, holiday, summer break
 - parent request – i.e. didn't want to start on a Friday, has doctor appointments
- If the student is ineligible OR will not start until after summer break, the district will still need to register the student in SIS as "Evaluation". Contact MSSE if help is needed with this process.
- If the student's parents/guardians refuse Early Intervention, the date and reason need to be documented and Mid-State needs to be notified so they can notify CFC. The PC should also send a "ready to serve" letter to the parents and place a copy in the temporary file.

TCT, Initial/Reevaluation Eligibility Related Meetings- what forms do you need when and what procedures do we follow?

1. **TCT (Teacher Consultation Team) meetings/data team meetings where the team is discussing a general education student and the team may move into discussing the need to conduct special education assessments.** This meeting includes all required special education team members, including the evaluation team, parents, any related services providers, and others as applicable.

- **If this is the first meeting and the team is unsure if they will decide to look at the need for special education assessments today**, the district administrator can send their district letter, inviting the parent to the meeting to discuss the student’s progress. If/when the team decides to move into making it a special education meeting, we would ask the parent to waive the 10 days’ notice. Forms needed for this meeting once the team agrees:
 - Identification of Needed Assessments (have parent initial at the top that they waive the 10 days’ notice).
 - Conference Summary Report
 - Parent’s Rights Packet (Procedural Safeguards, ABLE handout, PUNS handout, IEP Facilitation handout)
 - Decision Re: Request for Evaluation (you may insert language that refers the reader to the place where the documentation is found)
 - Consent for Initial Evaluation (note: we only check the boxes that we are providing consent for the provision of the eligibility documentation and provision of the IEP documents when those forms did not go home with the draft. This should be used on rare occasions when we didn’t plan to have that type of meeting ahead of time, the meeting happened sooner than 3 days prior, or in certain meetings where we do a TCT/Initial Eval/Initial IEP all in one.)
 - Additional Notes
- **If we have already met and we know that we are discussing special education assessments at this meeting**, you will send home the notice of needed assessments along with the draft domains (consent for initial evaluation). We only fill in “existing Information about the child” (top box for each domain). If this information is minimal, that is ok. The team’s responsibility is to help to complete the domains (including the parent). This meeting includes all required special education team members, including the parent, evaluation team and any related service providers, and others as applicable.

Forms needed for this meeting:

- Identification of Needed Assessments- this will go out at least 10 calendar days prior to the meeting
 - Conference Summary Report
 - Parent’s Rights Packet (goes home with the notice unless provided recently prior- sending it home again with the notice would be best practice)
 - Decision Re: Request for Evaluation (you may insert language that refers the reader to the place where the documentation is found)
 - Consent for Initial Evaluation (Draft form goes home at least 3 school days prior (parent/guardian must have the draft by at least 3 school days prior) (note: we only check the boxes that we are providing consent for the provision of the eligibility documentation and provision of the IEP documents when those forms did not go home with the draft. This should be used on rare occasions when we didn’t plan to have that type of meeting ahead of time, the meeting happened sooner than 3 days prior, or in certain meetings where we do a TCT/Initial Eval/Initial IEP all in one.)
 - Additional Notes
 - Excusal of Team Member
2. **Initial Eligibility/Initial IEP meeting-** This meeting includes all required IEP team members, including the parent, evaluation team, any related service providers, and others as applicable. This meeting occurs when the team has conducted assessments and/or reviewed all data needed to make an eligibility decision. In the event the team wishes to produce a DRAFT initial IEP at this time as well (pending the team determining that the scores could indicate eligibility), these meetings can be conducted at the same time. A draft cover letter will be included that will state that if the team determines the student is eligible for services, the draft being sent home ahead of

the meeting is a proposed starting point for discussion with the team members in the meeting. The draft IEP will have the DRAFT watermark applied to the entire document before printing.

The draft paperwork will include:

- Documentation of Evaluation Results (listing results, not to pre-determine eligibility)
- Notice of Conference
- Conference Summary Report (leave eligibility category and placement information blank as that is predetermination)
- Present Level of Educational Performance (adverse effect blank for the draft)
- IEP goals
- Educational Accommodations
- Assessment
- Educational Placement & Services
- Eligibility Determination LD or non-LD- this is sent home blank. The team will complete this during the meeting. Completing it ahead of time could result in predetermining eligibility.
- Others as needed (Early Childhood Outcomes, Transition documents, Autism Considerations, Documentation of Intervention Results-SLD, and etc.)
- Parent's Rights Packet- always a good idea to send this as well

The additional forms that are required to be presented and completed during the meeting:

- Conference Recommendations
- Excusal of Team Member
- Additional Notes
- Consent for Initial Services (This is to be presented and signed before the draft is discussed. Please note the language changes as they are consenting to special education services, not to the services presented in the draft)

3. **Initial Eligibility meeting only**- this meeting would occur when the team is establishing eligibility or deciding the student is not eligible. If eligible, the team would have 30 days to hold an initial IEP meeting (but it must still be within the 60 school days that the team has to determine eligibility after the initial consent for the evaluation is signed).

Draft paperwork needed:

- Notice of Conference
- Conference Summary Report (leave eligibility category and other information blank, including placement information as that is predetermination)
- Documentation of Evaluation Results (list results, do not predetermine eligibility)
- Documentation of Intervention Results- SLD (when relevant)
- Eligibility Determination LD or non-LD (send this form home in draft form BLANK)
- Parent Rights Packet- always a good idea to send this as well

The additional forms that are required to be presented and completed during the meeting:

- Consent for Initial Services
- Conference Recommendations
- Excusal of Team Member
- Additional Notes

4. **Initial IEP meeting only**- this meeting would occur when the team already met and established eligibility. This meeting must occur within 30 days of eligibility being established but the entire eligibility determination and initial IEP process must all occur within the 60 school days the team has to complete the evaluations/eligibility process.

Draft paperwork needed:

- Notice of Conference

- Conference Summary Report (leave placement information blank as that is predetermination)
- Present Level of Educational Performance (adverse effect blank for the draft)
- IEP goals
- Educational Accommodations
- Assessment
- Educational Services & Placement
- Others as needed (Early Childhood Outcomes, Transition documents, Autism Considerations, Documentation of Intervention Results, and etc.)

The additional forms that are required to be presented and completed during the meeting:

- Conference Recommendations
- Excusal of Team Member
- Additional Notes

5. **TCT or EI Transition meeting/Initial Eligibility/Initial IEP Meeting**

The draft paperwork will include:

- Cover letter explaining that the draft is being presented in the event the team finds the student eligible
- Consent for Initial Evaluation (these meetings are where you can check the boxes that the parent waives their right to having eligibility documentation (documentation of evaluation results) and draft IEP documents 3 days prior). You will draft the top box of each domain with information known about the student
- IEP Notice of Conference- send out at least 10 days prior to the meeting
- Identification of Needed Assessments- this goes home with the IEP notice of conference (at least 10 days prior)
- Documentation of Evaluation Results (list results only; do not predetermine eligibility)
- Eligibility Determination- LD or non-LD- this is sent home blank
- Conference Summary Report (keep the eligibility section and placement boxes blank)
- Present Levels of Educational Performance- leave adverse effect statement blank
- IEP goals
- Educational Accommodations
- Assessment
- Others as needed (Early Childhood Outcomes, Transition documents, Autism Considerations, Documentation of Intervention Results, and etc.)

The additional forms that are required to be presented and completed during the meeting:

- Consent for initial services (presented after eligibility is established but before draft is reviewed)
- Decision Re: Request for Evaluation (presented at the end of the meeting, you may insert language that refers the reader to the place where the documentation is found)
- Conference Recommendations- completed at the end of the meeting
- Eligibility Determination (non LD or LD)- completed in the meeting after the team decides on eligibility
- Excusal of Team Member
- Additional Notes

6. **Domains Reevaluation Meeting** (obtaining consent to update testing or waive testing)

IEP draft forms:

- Identification of Needed Assessments- required for this meeting type (sent home at least 10 days prior)
- Conference Summary Report- do not reflect pre-determination eligibility or placement changes (existing eligibility can stay but if you anticipate change, don't change ahead of time.)

- Consent for Reevaluation- prepare information known in the top box of each domain-goes home in draft form. (note: we only check the boxes that we are providing consent for the provision of the eligibility documentation and provision of the IEP documents when those forms did not go home with the draft. If these forms aren't relevant to the meeting, disregard the boxes. These boxes should be used on rare occasions when we didn't plan to have that type of meeting ahead of time, the meeting happened sooner than 3 days prior, or for some reason we do multiple meetings at once that includes a reevaluation all in one.)

The additional forms that are required to be presented and completed during the meeting:

- Decision Re: Request for Evaluation (you may insert language that refers the reader to the place where the documentation is found)
- Additional Notes
- Conference Recommendations
- IEP Excusal Form

When also completing an Annual Review meeting to a domain reevaluation and/or an Eligibility Determination meeting, the annual review process still applies (IEP draft includes all required draft forms)

7. **Reevaluation Eligibility Determination Meeting** (reviewing recent testing or determining eligibility based off of waived testing)

IEP draft forms:

- Notice of Conference (sent home at least 10 days prior)
- Documentation of Evaluation Results
- Eligibility Determination (Non LD or LD)- this form is left blank
- Other forms as needed (Autism considerations, Documentation of Intervention Results, etc.)

The additional forms that are required to be presented and completed during the meeting:

- Conference Recommendations
- IEP Excusal Form
- Additional Notes

When also completing an Annual Review meeting to a domain reevaluation and/or an Eligibility Determination meeting, the annual review process still applies (IEP draft includes all required draft forms)

8. **Domain Reevaluation and Eligibility Determination Meeting in one**

IEP draft forms:

- Identification of Needed Assessments- required for this meeting type (sent home at least 10 days prior)
- IEP Notice of Conference (sent home at least 10 days prior)
- Conference Summary Report- do not reflect pre-determination eligibility or placement changes
- Consent for Reevaluation- prepare information known in the top box of each domain-goes home in draft form. (note: we only check the boxes that we are providing consent for the provision of the eligibility documentation and provision of the IEP documents when those forms did not go home with the draft. If these forms aren't relevant to the meeting, disregard the boxes. These boxes should be used on rare occasions when we didn't plan to have that type of meeting ahead of time, the meeting happened sooner than 3 days prior, or for some reason we do multiple meetings at once that includes a reevaluation all in one.)
- Documentation of Evaluation Results
- Eligibility Determination (LD or non LD)- left blank until the team completes it in the meeting
- Others as needed (Doc of Intervention Results, Autism Considerations, etc.)

The additional forms that are required to be presented and completed during the meeting:

- Decision Re: Request for Evaluation (you may insert language that refers the reader to the place where the documentation is found)
 - Additional Notes
 - Conference Recommendations
 - IEP Excusal Form
- *When also completing an Annual Review meeting to a domain reevaluation and/or an Eligibility Determination meeting, the annual review process still applies (IEP draft includes all required draft forms)

9. **Domain reevaluation meeting requested to be done by asking the parent to waive the meeting** (not recommended practice as there is no guarantee that the letter to waive the meeting would hold up if challenged. Moving forward with these last 2 items should only be done with district administrator approval.

- **Consent to waive holding a meeting where you are asking to waive testing**
Contact the parent and let them know that the triennial reevaluation is due soon. The draft Consent for Reevaluation form, Letter requesting consent to waive their right to a meeting, parent rights packet, and any other needed paperwork will be going home. After the parent/guardian reviews the information, they can decide to sign both the consent for reevaluation form (that indicates they agree testing is not needed to complete the reevaluation) and the letter asking them to waive their right to a meeting. If they sign both, the evaluation team can move forward with planning for the eligibility determination meeting. If they do not sign either of the forms, an IEP meeting must be scheduled.
- **Consent to waive holding a meeting where you are asking to update testing**
Contact the parent and let them know that the triennial reevaluation is due soon. The draft Consent for Reevaluation form, Letter requesting consent to waive their right to a meeting, parent rights packet, and any other needed paperwork will be going home. After the parent/guardian reviews the information, they can decide to sign both the consent for reevaluation form (that indicates they agree to the information and the plan that the evaluation team plans to test the student in order to complete the triennial reevaluation) and the letter asking them to waive their right to a meeting. If they sign both, the evaluation team can move forward with testing the student. If they do not sign either of the forms, an IEP meeting must be scheduled.
- Note for the consent for reevaluation form: we only check the boxes that we are providing consent for the provision of the eligibility documentation and provision of the IEP documents when relevant. In cases where we either request consent to update or waive testing, the eligibility documentation nor the IEP documents would need to go home ahead of time.
- Note that an IEP meeting must be held within 30 days of determining eligibility.



MID-STATE
SPECIAL EDUCATION

FBA / BIP Procedural Guide

For Case Managers



The team (MTSS or IEP) is considering a FBA/BIP, complete the following steps:

	Task / Step	Page #
Functional Behavior Assessment (FBA)		
<input type="checkbox"/>	<p>Prior to the meeting, review the components of an FBA and email the BCBA or your program coordinator to determine the level of support you would like.</p> <p>BCBA: emma.reichert@midstatespec.org</p>	5
<input type="checkbox"/>	<p>If the team agrees to proceed with an FBA, have the parent sign the FBA consent form during the meeting.</p> <p><i>Handout:</i> "Functional Behavior Assessment Consent Form"</p>	6
<input type="checkbox"/>	<p>During the meeting, agree upon a TARGET BEHAVIOR and OPERATIONALLY define it</p> <p><i>Handout:</i> "How to Identify a Target Behavior and Define it Operationally"</p>	7-8
<input type="checkbox"/>	<p>During the meeting, determine an ongoing and continuous data collection method (frequency, duration, etc.). Select one tool/method that works best for the team.</p> <p><i>Handout:</i> Frequency, Duration, etc Sample Tools</p>	9-10
<input type="checkbox"/>	<p>After the meeting, review and plan the components of an FBA</p> <p><i>Handout:</i> "Components of an FBA"</p>	5
<input type="checkbox"/>	<p>After the meeting, plan who will conduct A-B-C observations. Consider multiple observers. Select one ABC data tool to be used by all observers.</p> <p><i>Handout:</i> "ABCs of Behavior" and ABC Sample Tools</p>	12-15
<input type="checkbox"/>	<p>Prepare the FAST Questionnaire and send it to at least 3 staff, including yourself as a rater.</p>	11



	<i>Handout: "Functional Analysis Screening Tool" (FAST)</i>	
<input type="checkbox"/>	Collect data for at least 3 weeks or until patterns in data begin to emerge.	
<input type="checkbox"/>	Conduct a record review. Look for: -Medical diagnoses -Medications -Environmental factors inside or outside of school that might increase the likelihood of behavior -Social factors or prior history of learning	
<input type="checkbox"/>	Collect and analyze all data to determine a possible function <i>Handout: "Functions of Behavior"</i>	16-17
<input type="checkbox"/>	Summarize data visually using a graph	
<input type="checkbox"/>	Fill out and write the FBA page <i>Handout: "FBA Directions Document 2025" (Embrace sample form) "Illinois Functional Assessment of Behavior Checklist (iFAB)</i>	18-21
<input type="checkbox"/>	Upload or attach graphic representation to the FBA page	
<i>Behavior Intervention Plan (BIP)</i>		
<input type="checkbox"/>	After opening the BIP page, autofill: -Target Bx -Operational Definition -Student Strengths	22
<input type="checkbox"/>	Meet with the teaching team to brainstorm: -accommodations needed -prevention or antecedent-based intervention strategies -reinforcement procedures <i>Handout: "BIP Directions Document 2025" (2nd page left hand column)</i>	23-24
<input type="checkbox"/>	Meet with the teaching team to agree upon a replacement behavior of focus that meets the same function of the target behavior. Discuss a method for ongoing data collection. <i>Handout: "Functions of Behavior" "BIP Directions Document 2025" (2nd page-replacement behavior box)</i>	16-17 & 23



MID-STATE SPECIAL EDUCATION

<input type="checkbox"/>	<p>Fill out and write the BIP page</p> <p><i>Handout: "BIP Directions Document 2025" (Embrace sample form) "Illinois Behavior Intervention Checklist (iBIC)"</i></p>	<p>22-26, 27-28</p>
<input type="checkbox"/>	<p>Ensure the behavior goal identified on the BIP is copied over to a goal page and broken down into objectives for progress monitoring.</p>	
<input type="checkbox"/>	<p>Review the proposed plan, especially staff response procedures and crisis procedures with all staff working with the student</p> <p><i>Handout: "Crisis Procedure Templates"</i></p>	<p>29-31</p>
<input type="checkbox"/>	<p>Review and retrain staff annually</p>	
<input type="checkbox"/>	<p>Report progress on replacement behavior skills and target behavior reduction/maintenance on the same schedule as other goals and objectives.</p>	

*If you would like access to a recorded training with a model of how to fill out the FBA/BIP form, please email Emma Reichert Campbell, BCBA, LBA



Components of an FBA

Functional Behavior Assessments (FBAs) are made up of the following components. The case manager is responsible to work with the IEP team to assign/complete each step.

1.) Record Review:

- Previous IEPs
- MTSS Data
- Previous Interventions Attempted
- Ongoing classroom data collection (frequency, duration, etc.)

2.) Indirect Assessments:

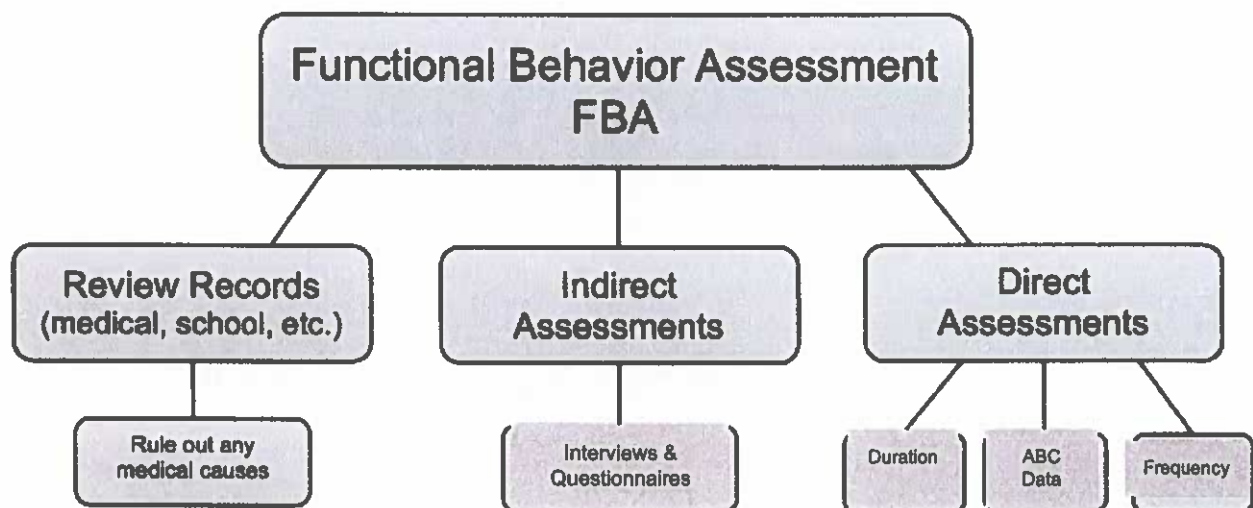
- Staff Interviews
- FAST or QABF Questionnaires

3.) Direct Assessment

- Direct A-B-C observations (determine environmental patterns)
- Multiple sources: case manager, SSW, school counselor, BCBA, etc.

Final Steps:

- Review and Analysis of all components
- Fill out FBA form



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Functional Behavioral Assessment Consent Form

Name of Child:

Date of Birth:

Date:

Dear:

As a way to best serve your child, we would like to conduct a functional behavior assessment (FBA). A functional behavior assessment is the process of:

- Identifying problematic behavior (s)
- Identifying environmental events which impact problem behavior(s)
- Determining the cause/function of the problem behavior(s)
- Outlining the necessary changes needed to be made by the school, teacher, student, and parent/guardian in order to allow the student to successfully access the general curriculum

An FBA may include, but is not limited to, the following components:

- Interviews completed with the student (if applicable), teachers), and parent(s)/guardian(s) regarding the student's behavior
- Information gathering tools (e.g., cumulative file review, motivation assessment scale, teacher rating scale and student self-assessment)
- Observations of student behavior in school settings
Data collection regarding student behavior
- Interventions to address student behavior, which focus on decreasing negative behavior and teaching new, appropriate replacement behaviors
- Ongoing data collection to evaluate intervention effectiveness
- Safety or crisis plan, if necessary

We greatly appreciate your involvement in this plan during each step in the process. If you have any questions regarding this process please call

_____ at _____

Please sign below to indicate whether or not you give consent to conduct a functional behavior assessment (FBA).

-
- I give consent for my child to participate in a functional behavior assessment
 - I do not give consent for my child to participate in a functional behavior assessment

Parent/Guardian Signature

Date



How to Identify a Target Behavior and Define It Operationally

1. Identifying a Target Behavior

A target behavior is the specific behavior that you aim to observe, measure, and change through an intervention. To appropriately identify a target behavior, follow these steps:

- **Focus on observable and measurable actions:** Choose behaviors that can be seen, heard, or otherwise detected objectively (e.g., hand-raising, eye contact, aggression such as hitting). Avoid vague terms like "refusal", "respectful" or "aggressive attitude."
- **Prioritize behaviors based on impact and feasibility:** Target behaviors that are socially significant, those that are unsafe, and where change will improve the individual's quality of life or learning opportunities.

Example: Instead of "being disruptive" try "shouting loudly during group instruction" as the target behavior, specifying when and how it occurs.

2. Operationally Defining the Target Behavior

An operational definition is a concise, clear, and objective description of the target behavior that allows different observers to reliably identify and record the behavior. It includes:

- **Observable terms:** Describe what the behavior looks or sounds like without relying on inferences or internal states.
 - **Measurable components:** Include criteria such as frequency (how often), duration (how long), intensity (how strong), and/or latency (how soon after stimulus).
 - **Contextual specificity:** Note when and where the behavior occurs or environmental conditions if relevant.
 - **Examples and non-examples (if helpful):** Clarify what counts and what does not count as the target behavior.
-



3. Operational Definition Example:

- *Target Behavior:* Tantrum
 - *Operational Definition:* Any instance in which the child yells at a volume louder than a conversational voice, drops to the floor, and kicks or hits objects or people, lasting at least 5 seconds, occurring during classroom instruction or transitions.
-

4. Why Operational Definitions Are Critical:

- They increase measurement reliability and validity.
 - They enable data-driven decision-making by clearly tracking progress or regression.
 - They facilitate effective staff training with clear behavior identification guidelines.
 - They ensure intervention integrity and replication across settings.
-

Summary:

When selecting a target behavior to work on, focus on a clear, specific action you can see or hear. Describe that action in simple, precise words, including exactly what it looks like and when it happens. This helps everyone understand what behavior you mean and track progress consistently.

(Komaki, 2013; Bowman & Weiss, 2023; Ntinis et al., 2007)

Functional Behavioral Assessment

Student Name: Samuel Tester Grade: 8th Date: 09/08/2023 DOB: 12/13/2010

Target Behavior: Directions Document (2025)

Complete when gathering information about a student's behavior to determine the need for a Behavioral Intervention Plan. If used in developing a Behavioral Intervention Plan, the Functional Behavioral Assessment must be reviewed at an IEP meeting and should be attached to the IEP.

The Functional Behavioral Assessment must include data collected through direct observation of the target behavior. Attach documentation of data collection.

STUDENT STRENGTHS - Include a description of behavioral strengths (e.g., ignores inappropriate behaviors of peers, positive interactions with staff, accepts responsibility, etc.).

There is a summary of:

-At least one social behavior strength

-At least one academic strength

-One example of other desirable behaviors the student demonstrates

-Recognize their successes, accomplishments and positive relationships with others.

-Reference supporting sources of information (According to staff interview, Peer interview, informal conversations with ____, IEP meeting notes dated ____, etc.)

-Supporting sources are dated no earlier than 60days before the FBA document date.

OPERATIONAL DEFINITION OF TARGET BEHAVIOR - Include a description of the frequency, duration and intensity of the behavior.

-The target behavior is clearly named, if there is more than one behavior, there is no overlap between the problem behaviors identified.

-If more than one behavior, each behavior is addressed and numbered throughout each section

-Operational definitions are distinct (Pass the Dead Man's test)

-Includes hard data: frequency, duration, or intensity data is summarized

-Refers to supporting sources of information, sources are not older than 60 days before the document date.

SETTING - Include a description of the setting in which the behavior occurs (e.g., physical setting, time of day, persons involved).

-Locations where the behavior is MOST and LEAST likely to occur are summarized

-Times of day when the behavior is demonstrated (Most and Least)

-The persons with whom the behavior is most and least likely to occur

-The activities that are most often occurring when the target behavior happens and those least frequently occurring.

-Refers to summarizing sources of information, Supporting sources are dated no earlier than 60days before the FBA document date

ANTECEDENTS - Include a description of the relevant events that preceded the target behavior.

-One or more antecedents that predictably occur IMMEDIATELY BEFORE each defined target behavior have been summarized (make a list)

-Summaries refer to sources of information. Supporting sources are dated no earlier than 60days before the FBA document date

-Supporting sources include: ABC data, Direct Observations, Parent/Staff Interview, Student Interview, Indirect Assessment (FAST, QABF)

CONSEQUENCES - Include a description of the result of the target behavior (e.g. removed from the classroom and did not complete assignment. What is the payoff for the student?).

Functional Behavioral Assessment

- One or more antecedents that predictably occur IMMEDIATELY AFTER each defined target behavior have been summarized (make a list)
- Summaries refer to sources of information. Supporting sources are dated no earlier than 60days before the FBA document date
- Supporting sources include: ABC data, Direct Observations, Parent/Staff Interview, Student Interview, Indirect Assessment (FAST, QABF)

ENVIRONMENTAL VARIABLES - Include a description of any environmental variables that may affect the behavior (e.g., medication, weather, sleep, diet, social factors).

- One or more setting event that occur prior to the instructional session which predictably impact the likelihood of the target behavior are summarized (Precipitating factors)

OR

There is a statement that says "environmental variables were investigated but none were identified".

- Summaries refer to sources of information. Supporting sources are dated no earlier than 60days before the FBA document date (Interviews, record review, informal conversations, IEP meeting notes, etc.)

HYPOTHESIS OF BEHAVIORAL FUNCTION - Include a hypothesis of the relationship between the behavior and the environment in which it occurs.

- There is a hypothesis of behavioral function statement for each target behavior or class of behaviors in the operational definition.(See Options below)
- A desired change of condition has been identified (escape/delay/avoid OR obtain/maintain)
- A desired outcome has been identified (attention, tangibles, activity/task, automatic)

Positive Reinforcement- Gain access to (attention/tangible)

Negative Reinforcement- Escape/avoid/delay

Positive Automatic Reinforcement- Gain access to sensory stimulation

Negative Automatic Reinforcement- Escape/avoid pain sensations

Is this behavior a Skill Deficit or a Performance Deficit

Skill Deficit: The student does not know how to perform the desired behavior.

Performance Deficit: The student knows how to perform the desired behavior, but does not consistently do so.

Behavioral Intervention Plan

Student Name: Samuel Tester Grade: 8th Date: 09/08/2023 DOB: 12/13/2010

Target Behavior: Directions Document (2025)

Operational Definition (frequency, duration, intensity, setting, antecedents, consequences):

-The target behavior is clearly named, if there is more than one behavior, there is no overlap between the problem behaviors identified.

-If more than one behavior, each behavior is addressed and numbered throughout each section

-Operational definitions are distinct (Pass the Dead Man's test)

-Includes hard data: frequency, duration, or intensity data is summarized

-Refers to supporting sources of information, sources are not older than 60 days before the document date.

Is this behavior a: Skill deficit: The student does not know how to perform the desired behavior.
 Performance deficit: The student knows how to perform the desired behavior, but does not consistently do so.

Behavioral Strengths:

There is a summary of:

-At least one social behavior strength

-At least one academic strength

-One example of other desirable behaviors the student demonstrates

-Recognize their successes, accomplishments and positive relationships with others.

-Reference supporting sources of information (According to staff interview, Peer interview, informal conversations with ____, IEP meeting notes dated ____, etc.)

-Supporting sources are dated no earlier than 60days before the FBA document date.

Function:

Accessing positive reinforcement - Attention

Check the one that corresponds with the FBA. Write in: (If more than one, check the box of the primary function)

The student attempts to gain access to attention from _____.

Accessing positive reinforcement - Tangibles

The student attempt to gain access to _____ (items or activities).

Accessing negative reinforcement - Escape

The student attempts to escape or avoid aversive stimuli such as _____.

Accessing automatic reinforcement - Sensory or Avoid Pain

The student attempts to contact sensory stimulation by engaging in _____

-OR-

Behavioral Intervention Plan

The student attempt to escape aversive and painful sensations such as _____

Positive Supports/ Prevention:	Crises/Action Plan:	Replacement Behavior:
<p>Environment:</p> <ul style="list-style-type: none"> -What changes are needed to reduce the likelihood of behavior in the future? -Link changes to the function. <p>Ideas:</p> <ul style="list-style-type: none"> -Seating changes or physical room rearrangement -Minimize sensory distractions (lights, sound) -Do desired items need to be put out of reach? -Do transitions need to be established or adjusted? -Do certain materials or information need to be posted in the classroom? -Class size, teacher proximity, schedule needs (consistency, etc.) -Furniture types -Visuals posted and/or within student reach <p>Instruction/ Curriculum:</p> <ul style="list-style-type: none"> -What changes/modifications are needed to reduce the likelihood of the target behavior? -Link directly to behavioral function <p>Ideas:</p> <ul style="list-style-type: none"> -List the skills you will teach, order of instruction -Adjusting task difficulty, determining whether modification of the curriculum is necessary -Adjusting pacing, presentation of instruction, time to respond, etc. -Adjusting the way the student shows their knowledge of standards -Use of timers, work breaks, 	<p>Describe steps to be taken during behavior crises</p> <p>Steps to take in order to PREVENT the target behavior:</p> <ol style="list-style-type: none"> 1. 2. 3. ... <p>-Describe the methods used in order to implement any new environmental, instructional, reinforcement, or additional positive support listed on the left hand side. (What staff should say or do)</p> <p>-Describe any prompting or modeling steps staff need to use in order to teach and encourage the replacement behavior skill.</p> <p>-If aide support or proximity support is used during initial instruction, describe how it might be faded over time.</p> <p>Steps to take in RESPONSE to the target behavior:</p> <ol style="list-style-type: none"> 1. 2. 3. ... <p>-Describe the methods used to respond to mild to moderate occurrences of the target behavior (What staff should say or do)</p> <p>-Action plan steps includes methods that are consistent with the hypothesis statement and do not result in the same outcome unintentionally reinforcing the problem behavior.</p> <p>(Ex: Arguing with a student who is seeking attention would reinforce the target behavior)</p> <p>-Describe when staff should</p>	<p>Describe the new behavior and how it will be taught</p> <ul style="list-style-type: none"> -Include a replacement behavior (What the student will do or say) for each target behavior defined. -Each replacement behavior serves the same function as the target behavior. (Ex: If the function is escape, what can they do to escape in socially appropriate way?) -Each replacement behavior is written as a goal statement in the BIP (Done specifically at the bottom of this page) -The goals are also copied to a goal page in the IEP with a plan for monitoring progress -A description of how the replacement behavior will be taught, by whom, and when it will take place is included. <p>Sample statement:</p> <p>("_____ will be taught during both structured (planned) and natural occurring circumstances, using modeling and repeated practice, during (time of day/activity). Initial instruction will occur with the special education teacher during _____. Once the replacement skill is established, it will be generalized to additional settings and locations such as _____."</p>

Behavioral Intervention Plan

chunking, simplify language, etc.

-Including interests/preferences in instruction/curriculum

-Choice/options of order or type of assignment (where, with what, with whom, etc.)

-adding any new curriculums (Zones of regulation, 5 Point Scale, Second Step, etc.)

Other Supports:

-Any additional Positive supports that will reduce the likelihood the target behavior will occur

-Linked directly to behavioral function

Ideas:

-Visuals (be specific about what they are and what they're for, list all type of visuals needed)

*-Necessary schedules, routines
Outline use of breaks (scheduled, contingent, non-contingent)*

-Alerts, reminders, review expectations before transitions

-Ability to engage in sensory experiences that soothe the student

-Devices needed (AAC)

-List any consult services the team will receive

-You can list the accommodations in their IEP (and put some of these on your accommodations list if it makes sense to do so)

Motivator/ Reinforcement System:

-A list of possible motivators and rewards are incorporated into the intervention to increase the likelihood the replacement behavior skills and other desired behaviors will occur in the future.

-Also linked directly to behavioral function

consider using the additional restrictive measures listed below.

(i.e. students are progressing from trigger and agitation stages of escalation to acceleration or peak)

-Include Recovery conversation steps

1. Reflect on the facts

2. Understand the needs of the student

3. Repair staff /student

relationships or student/student relationships

4. Problem solve future events

5. Check for understanding

6. Encourage growth and highlight progress

Behavioral Intervention Plan

-Describe any:

1. Student specific systems of reinforcement
2. Classroom systems of reinforcement that can be utilized to target the replacement behavior
3. How the student will participate in PBIS programs and any modifications to criteria that need to be made.

Restrictive Measures:

- Describe the methods used to respond to ESCALATED occurrences of the target behavior (Steps staff should follow)
- Restrictive methods are consistent with the hypothesis statement and do not result in the same outcome unintentionally reinforcing the problem behavior.
(Ex: Arguing with a student who is seeking attention would reinforce the target behavior)
- The plan includes procedures for documenting restrictive discipline measures and timelines for evaluations.

Method/Procedure Ideas:

- Loss of privileges
- Removal from class or group
- CPI Holds or Transport Procedures (Discuss documentation and notification in your steps)
- Conference with teacher and/or principal
- Social probation (temporary individualized student schedule in order to avoid triggers or limit preferred activities)
- Alternative to suspension plans/programs
- Detention, Suspension, Expulsion

*If the last 3 are utilized, describe evaluations timelines and when the student would return to regularly scheduled activities.

Sample CPI Framework:

[student] will learn about their crisis plan (and what a crisis is) with _____ during _____ by _____.

[student] is in crisis when [describe what it looks like when your student is in crisis mode]. Triggers to this escalation might include [include behaviors or scenarios that could push the student into a crisis situation].

Step 1: The classroom staff will...

Step 2:

Step 3:

Step [optional]: Describe restraint procedures (imminent danger, note taking, timing, etc.) only if there is a history of this need or the behavior is severe enough to warrant this. If not, do not include this.

Step 4: The crisis has ended when...

Step 5: The crisis will be documented by the student's caseworker outlining the date, time, severity of incident, and how it was resolved. If restraint was used it will be documented and processed according to ISBE and RCS requirements.

If the student re-escalates, these steps will be repeated. All incidents of physical contact and aggression towards staff/students and incidents of restraint need to be reported to building administration immediately after the event or by the end of the teacher work day, if administration was not involved with the incident. Select staff in [student]'s building will be trained in Crisis Prevention Intervention strategies and de-escalation techniques. Trained staff must

Behavioral Intervention Plan

revisit the course each year and be recertified yearly.

Outcomes/goal:

Restate the replacement behavior as a goal. Include behavior reduction within that goal.

Example: "When (antecedent trigger), (student) will (replacement behavior) in order to reduce the rate of the target behavior from baseline rates of ___ per ___ to ___ or fewer per ___, by (end date)."

Data Collection:

Charting Work Samples Grade book Attendance Other Select how you will be monitoring

Timeframe: (Date 4-6 weeks out) _____

Coord w/Caregivers:

Prog Rep Email/phone Data sheets Frequency: Quarterly

Progress Updates

Date: 04/11/2025 Evaluated By: Emma Reichert Campbell

Progress: Use this feature to report progress updates and attach ongoing graphic representation.

- Progress monitoring needs to occur within the first 4-6 weeks of any new plan in order to be sure we are seeing desired results (confirms function)
- Provide additional updates at least 2x per annual review cycle, best practice would be quarterly when goal progress is reported.
- Additional updates can be provided as often as the IEP team meets
- Helpful to document use of ATS, Suspensions, etc. and when students will return to regularly scheduled activities.



MID-STATE SPECIAL EDUCATION

Crisis and Restrictive Measures Templates for Behavior Intervention Plans

When preparing a student BIP, consider what restrictive measures have been or might be required in order to keep the student and bystanders safe. If **restrictive CPI interventions (holding skills), time out, or isolated time out** may be needed, add 1 or more of the following procedure templates to the restrictive measures box on the BIP.

STEP 1- List and review all the non-restrictive measures that will have been implemented prior to attempting a more restrictive intervention

Template: Nonrestrictive interventions

- 1) Call for assistance (at least 2 adults present)
 - 2) Attempt to maximize safety within the environment by: asking nearby peers to move to another area, using staff bodies to prevent ____, etc.
 - 3) Offer (STUDENT) choices for break locations and encourage him/her to move to an alternative location. Preferred locations may include: the special education classroom, the _____, or _____, etc.
-

STEP 2- List any restrictive interventions the student's needs may require

Template 1: Momentary Period of Physical Restriction

Use blocking and other disengagement skills that involve momentary periods of physical restriction in order to keep (STUDENT) and others safe. A momentary period of physical restriction is defined as "Direct person-to-person contact, without the aid of material or mechanical devices, that is accomplished with limited force and that is designed to prevent a student from completing an act that would result in potential physical harm to the student or another or damage to property."

(Examples of momentary periods of physical restriction include: CPI related responses for blocking strikes and grabs, staff hands placed on his/her arm or back to quickly guide him/her in a specific direction, etc.)

Template 2: Time Out (supervised)

Use of Time Out:

If (STUDENT) is unable to choose a break location voluntarily and the level of risk indicates immediate danger, a Time Out may be utilized to encourage de-escalation. Time out is defined as "a behavior management technique for the purpose of calming or de-escalation that involves the involuntary monitored separation of a student from classmates with a trained adult for part of



MID-STATE SPECIAL EDUCATION

the school day, only for a brief time, in a non-locked setting.” Time out involves (STUDENT)'s egress from a space being temporarily

blocked and restricted when no other students present. Time out locations may include: classrooms where other students have been evacuated or individual break spaces where egress is blocked. During any time out, the following requirements will be met:

-All staff implementing this procedure will receive annual training (on both CPI and Time Out Procedures)

-(STUDENT) will be continuously observed by trained staff.

-Time out will end when decreased signs of physical and emotional energy are observed and there is no longer any risk of immediate danger.

-Ending a time out will be evaluated no less than at least once every 15 minutes.

Template 3: Physical Restraint or Holds

Use of Physical Restraint:

If the level of risk remains elevated and the student or others are at immediate risk of harm, staff may need to implement a Physical Restraint in order to safely move (STUDENT) to another location or prevent the risk of imminent danger and immediate harm. “Physical restraint is defined as “Holding a student or otherwise restricting the student’s movements and includes only the use of specific, trained techniques.” If Physical Restraint is utilized the following requirements will be met:

-The student’s behavior presents imminent danger of serious physical harm to themselves or others

-Other less restrictive and intrusive measures have been tried and have proven to be ineffective in stopping the imminent danger of serious physical harm; -There is no known medical contraindication to its use

-The staff applying the restraint have been trained in its safe application and only specific and planned techniques will be utilized. Those techniques include: CPI standing or seated holds and/or child control positions

-Staff continually re-evaluate the situation every few minutes

-Restraints will be discontinued when the A) the student arrives at another safe or Time out location and/or B) when there is no longer an immediate risk of harm to the student or staff.

STEP 3- List the restorative practices that will be implemented to ensure tension reduction and therapeutic rapport are achieved.

Template: Restorative Practices

#) When signs of decreased emotional and physical energy are observed. Attempt to meet any physical or emotional needs (STUDENT) may have (Examples: see the nurse, offer a drink, offer a comfort item, etc.)



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#) Offer additional calming and break choices to help (STUDENT) regulate- (ideas include: re-presenting break choices, access to activities such as (List known calming supports.)

#) After a period of approximately 10-15 minutes of calming play, begin planning to return to regular classroom activities. Consider which activity (STUDENT) would be most successful returning to (Ex: waiting for a preferred transition or a natural transition to the next scheduled activity).

#) Hold restorative conversations reviewing the facts and replacement behaviors. Negotiate future approaches.

#) Document all instances of Time out and physical restraint in accordance with district and ISBE guidelines, which includes parent notification within 24hours of the event.

STEP 4- Consider the need for additional Restrictive Measure.

Additional restrictive measures may include alternative to suspension programs (ATS) or calling the CARES hotline or Police.

Template: Alternative to Suspension (ATS)

(STUDENT) behavior has resulted in ___ out of school suspensions (OSS) on (LIST DATES) resulting in ___ total days out of school. In order to prevent future days out of school, the team will implement an Alternative to Suspension (ATS) plan with Menta Academy or (Other entity) in (Location). Procedures are as follows:

- After a behavior incident, that would typically result in a suspension, (STUDENT) will attend the ATS program as a replacement for the identified number of days.
- After attending ATS for the designated number of days, (STUDENT) will return to his/her home district and traditional school schedule.
- The home district will transport to and from the ATS program.

Template: CARES Hotline Call

if episodes of the target behavior lasts for ___ minutes or more and/or involves self-harm statements or actions, a CARES call may be made. When CARES phone calls are made, the CARES crisis line (1-800-345-9049) in Illinois provides 24/7 mental health crisis support, screening, and mobile team dispatch for children, youth, and their families. Immediately call the parents/guardians when CARES calls are made.

Illinois Functional Assessment of Behavior Checklist (iFAB)

(McConkey & Light-Shriner, 2023 update)

Instructions: For each item on the checklist, put a check ✓ in the box left of the listed item if the information provided in the FBA is present and complete for ALL (each) identified problem behavior. If the item information is unclear, vague, or incomplete, do not check the box. For more information and guidance about each section, click on the heading.

Getting Started

- Data sheets that support the FBA have been gathered.

Student Strengths

- There is a summary of at least one strength related to *social behavior*, one *academic strength*, and one
- example of other *desirable behavior* they demonstrate. This section provides recognition of their successes, accomplishments, and positive relationships with others.
 - The summary refers to supporting sources of information.
 - Documentation of supporting sources is attached and dated no earlier than 60 school days before the document date (examples below):
 - Parent and/or School Staff and/or Student Interview
 - Documented Informal Conversations
 - Meeting Notes

Target Behavior and Operational Definition

- Targeted problem behavior(s) has/have been clearly identified (named). If there is more than one behavior, there is no overlap between the problem behaviors identified.
- If more than one behavior, each behavior is addressed and numbered throughout each section of the FBA document. (Example: 1. Hitting 2. Yelling)
- The operational definition of each of the targeted problem behaviors is distinct.
- Frequency, duration, and/or intensity of behavior is summarized.
- The summary refers to supporting sources of information.
- Documentation of supporting sources is attached and dated no earlier than 60 school days before the document date (examples below):
 - Frequency
 - Duration
 - Intensity

Setting (Scatterplot)

- The locations where the behavior occurs most and least frequently are summarized.
- The times of day when the behavior is demonstrated most and least frequently are summarized.
- The persons with whom the behavior occurs most and least frequently are summarized.
- The activities that are occurring when the behavior is demonstrated most and least frequently are summarized.
- The summaries refer to supporting sources of information.
- Documentation of supporting sources is attached and dated no earlier than 60 school days before the document date (examples below):
 - Scatter Plot
 - FBA Observation (FAO)
 - Parent and/or School Staff and/or Student Interview

Antecedents

- One or more antecedents that predictably occur immediately before each of the defined targeted “problem” behaviors have been summarized.
- The summaries refer to supporting sources of information.
- Documentation of supporting sources is attached and dated no earlier than 60 school days before the document date (examples below):
 - A-B-C
 - FBA Observation (FAO)
 - Parent and/or School Staff and/or Student Interview

Consequences

- One or more consequences that predictably occur immediately after each of the defined targeted “problem” behaviors have been summarized.
- The summaries refer to supporting sources of information.
- Documentation of supporting sources is attached and dated no earlier than 60 school days before the document date (examples below):
 - A-B-C
 - FBA Observation (FAO)
 - Parent and/or School and/or Student Interview

Environmental Variables

- One or more environmental variables (setting events) that occur prior to the instructional session and predictably have an impact on each of the defined targeted “problem” behaviors have been summarized.
- OR
- There is a statement that environmental variables were investigated but none were identified or found.
- The summaries refer to supporting sources of information.
- Documentation of supporting sources is attached and dated no earlier than 60 school days before the document date (examples below):
 - Parent and/or School Staff and/or Student Interview
 - Record Review
 - Documented Informal Conversations
 - Meeting Notes

Hypothesis of Behavioral Function Statement

- There is a hypothesis of behavioral function statement for EACH of the targeted behaviors that have been identified and operationally defined in the operational definition section of the FBA document.
- A desired change of condition has been identified (escape/delay/avoid OR obtain/maintain).
- A desired outcome has been identified (attention, tangible, automatic, activity/task).
- Evidence of the identified condition and outcome, and sources to support this function are attached for each hypothesis statement:
 - Behavior Function Matrix

Skill or Performance Deficit

- A skill deficit is identified due to the behavior being a result of a skill deficit.
- A performance deficit is identified with proof that the student has mastered the skill but is not motivated to use the skill.

Illinois Behavior Intervention Checklist (iBIC)

(McConkey & Light-Shriner, 2023 update)

Instructions: For each item on the checklist, put a check ✓ in the box left of the listed item if the information provided in the BIP is present and complete for ALL (each) identified problem behavior. If the item information is unclear, vague, or incomplete, do not check the box. For more information and guidance about each section, click on the heading.

Getting Started

- This BIP is being developed within 60 days of the completion of the FBA.
- The FBA that informs this BIP was rated high quality using the iFAB checklist.
- The FBA is available for reference.
- The IEP Goal Page(s) is/are available for reference.

Target Behavior

- A clear targeted problem behavior, operational definition of each of the targeted problem behaviors, and the designation of skill or performance deficit are identical to that in the FBA.
- Each behavior is addressed and numbered throughout each section of the BIP document. (Example: 1. Hitting 2. Yelling)

Skill or Performance Deficit

- A skill deficit is identified and the behavior plan contains skill based instruction and strategies.
- A performance deficit is identified and the behavior plan contains motivational strategies.

Student Strengths

- The summary of student strengths is identical to strengths identified in the FBA.

Hypothesis of Behavioral Function

- The hypothesis of the behavioral function statement is identical to that which was presented in the FBA for each behavior.

Previous Interventions

- Previous intervention(s) that were effective or had some effectiveness are provided. } not on our form
- Previous intervention(s) that were ineffective are provided.

Replacement Behaviors

- A replacement behavior has been provided for each problem behavior defined.
- Each replacement behavior serves the same function as the problem behavior.
- Each replacement behavior is written as a goal statement in the BIP. Goal Box @ Bottom
- This goal is copied to a goal page in the IEP with a plan for monitoring progress.
- A description of how the replacement skill will be taught, by whom, and when this instruction will take place is provided.

Environment

- Changes to the environment are described that will reduce the likelihood that the problem behavior(s) will occur in the future.
- Changes to the environment are linked directly to the function of behavior(s).

Instruction/Curriculum Changes/Modifications

- Instruction/Curriculum changes/modifications are described that will reduce the likelihood that the problem

behavior(s) will occur in the future.

- Instruction/Curriculum changes/modifications are linked directly to the function of behavior(s).

Positive Supports

- Positive supports are described that will reduce the likelihood that the problem behavior(s) will occur in the future.
- Positive supports are linked directly to the function of behavior(s).

Motivators/Rewards

- Motivators/Rewards are incorporated into a reinforcement intervention that will increase the likelihood that replacement and other desired behavior(s) will occur in the future.
- Differential Reinforcement procedures are explicitly described (delivering reinforcement for alternative or replacement behaviors while not delivering reinforcement to the problem behavior(s)).
- Motivators/Rewards are linked directly to the function of behavior(s).

Restrictive Disciplinary Measures/Methods

- Restrictive Disciplinary Measures/Methods that respond to occurrences of problem behavior(s) defined in this plan are described. (e.g., extinction only, removing privileges, office reports, in school suspensions, detention, etc.)
- The restrictive methods are consistent with the hypothesis statement and/or do not result in the same outcome that reinforces the problem behavior.
- The plan includes procedures for documenting restrictive discipline measures and a timeline for evaluation.

Crisis Plan

- A description of behavior that indicates there is a crisis, is provided.
- The plan includes procedures for keeping the student and others safe.
- The plan explains how to remove triggers and engage in de-escalation techniques that are used in a clear step by step way.
- A statement describing how the crisis plan (prior to any crisis) has been reviewed and discussed with the student is provided.
- Roles and responsibilities are outlined for those involved in the crisis plan.
- Documentation procedures and methods are included.
- A procedure for debriefing and reintegration of the student is included.
- A description of how staff will be trained and monitored to implement the crisis plan is provided.

Data Collection Procedures and Methods

- A description of how staff will be trained to collect data is described. *Check Box*
- Ongoing data collection systems and procedures are described for monitoring the replacement behavior and each target behavior listed.
- Dates for checking fidelity of implementation, reviewing data, monitoring progress, and making decisions are described.
- Timelines and criteria to determine success are included.

Provision for Coordination with Caregivers (and other IEP team members)

- The schedule and frequency of communication to parents/guardians about student behavior and the effectiveness of the plan are provided.
- The schedule and frequency of communication to other relevant staff about student behavior and the effectiveness of the plan are provided.
- Roles and responsibilities are outlined for those involved in the behavior intervention plan.
- A description of how staff will be trained and monitored to implement the plan are provided.

Functional Analysis Screening Tool

Client: _____ Date: _____

Informant: _____ Interviewer: _____

To the Interviewer: The FAST identifies environmental and physical factors that may influence problem behaviors. It should be used only for screening purposes as part of a comprehensive functional analysis of the behavior. Administer the FAST to several individuals who interact with the client frequently. Then use the results as a guide for conducting a series of direct observations in different situations to verify behavioral functions and to identify other factors that may influence the problem behavior.

To the Informant: Complete the sections below. Then read each question carefully and answer it by circling "Yes" or "No". If you are uncertain about an answer, circle "N/A".

Informant-Client Relationship

1. Indicate your relationship to the client: Parent Instructor Therapist Parapro Residential Staff Other
2. How long have you known the client? _____ years _____ months
3. Do you interact with client daily? Yes No
4. In what situations do you usually interact with the client?
Meals Academic training Leisure activities
Work or vocational training Self care
Other _____

Problem Behavior Information

1. Problem behavior (check and describe):
Aggression: _____
Self-injury: _____
Stereotypy: _____
Property destruction: _____
Disruptive behavior: _____

2.

Frequency:			
<input type="checkbox"/> Hourly	<input type="checkbox"/> Daily	<input type="checkbox"/> Weekly	<input type="checkbox"/> Less

3.

Severity:	
	mild: disruptive but little risk to property or health
	moderate: property damage or minor injury
	severe: significant threat to health or safety

4. Situations in which the problem behavior is **most likely**:
Days/Times: _____
Settings/Activities: _____
Persons present: _____
5. Situations in which the problem behavior is **least likely**:
Days/Times: _____
Settings/Activities: _____
Persons present: _____
6. What is usually happening to the client right **before** the problem behavior occurs? _____

7. What usually happens to the client right **after** the problem behavior occurs? _____

8. How do you handle the behavior when it occurs?

9. Comments: _____

1. Does the client usually engage in the problem behavior when he/she is being ignored or when caregivers are paying attention to someone else?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
2. Does the client usually engage in the problem behavior when requests for preferred activities [games, snacks] are denied or when these items are taken away?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
3. When the problem behavior occurs, do you or other caregivers usually try to calm the client down or try to engage the client in preferred activities?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
4. Is the client usually well behaved when he/she is getting lots of attention or when preferred items or activities are freely available?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
5. Is the client resistant when asked to perform a task or to participate in group activities?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
6. Does the client usually engage in the problem behavior when asked to perform a task or to participate in group activities?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
7. When the problem behavior occurs, is the client usually given a break from tasks?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
8. Is the client usually well behaved when he/she is not required to do anything?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
9. Does the problem behavior seem to be a "ritual" or habit, repeatedly occurring the same way?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
10. Does the client usually engage in the problem behavior even when no one is around or watching?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
11. Does the client prefer engaging in the problem behavior over other types of leisure activities?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
12. Does the problem behavior appear to provide some sort of sensory stimulation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
13. Does the client usually engage in the problem behavior more often when he/she is ill?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
14. Is the problem behavior cyclical, occurring at high rates for several days and then stopping?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
15. Does the client have recurrent painful conditions such as ear infections or allergies? If so, please list: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
16. If the client is experiencing physical problems, and these are treated, does the problem behavior usually go away?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

Scoring Summary - Circle the number from above of each question answered "Yes".

Items circled "Yes"				Total	Potential Source of Reinforcement
1	2	3	4		Attention/Preferred Items [Social]
5	6	7	8		Escape [Social]
9	10	11	12		Sensory Stimulation [Automatic]
13	14	15	16		Pain Attenuation [Automatic]

ABCs of Behavior

I wonder why they are acting out like that?

That's easy! Just look at the **ABCs**

Evaluate antecedents and consequences to explain, predict, and change behavior!



(Three-Term Contingency)

What's The Function?

The reason **WHY** the behavior occurred.

Functions of Behavior

- S** Sensory or automatic (because it feels good)
- E** Escape/Avoid (to get out of doing a task or demand)
- A** Attention (to obtain attention)
- T** Tangible (to obtain an object)

Don't forget to collect data!!

When you analyze antecedents and consequences, you are more likely to discover patterns in behavior.

Antecedents Influence...

Our actions and **consequences** helps us to decide whether or not we want to engage in that same behavior again in the future.

Once *patterns* in behavior have been discovered you can....

Prevent - Teach - Reinforce

Name: _____ Date: _____

Time: _____ Location: _____

Antecedent

- | | | |
|--|--|---|
| <input type="checkbox"/> Attention Given to Others | <input type="checkbox"/> New Task/Activity | <input type="checkbox"/> Given Direction Task/Activity |
| <input type="checkbox"/> Presence of Specific Person | <input type="checkbox"/> Difficult Activity/Task | <input type="checkbox"/> Preferred Activity Interrupted |
| <input type="checkbox"/> Signal/Non-Verbal Cue | <input type="checkbox"/> Asked to Wait | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Left Alone | <input type="checkbox"/> Loud, Noisy Environment | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Ignored | <input type="checkbox"/> Transition | <input type="checkbox"/> Other: _____ |

Behavior

- | | | |
|---|--|--|
| <input type="checkbox"/> Hitting/Punching | <input type="checkbox"/> Fighting | <input type="checkbox"/> Screaming/Yelling |
| <input type="checkbox"/> Kicking | <input type="checkbox"/> Work Refusal | <input type="checkbox"/> Verbal Refusal |
| <input type="checkbox"/> Biting | <input type="checkbox"/> Screaming | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Scratching | <input type="checkbox"/> Spitting | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Property Destruction | <input type="checkbox"/> Dropping/Flopping | <input type="checkbox"/> Other: _____ |

Consequence

- | | | |
|---|--|---|
| <input type="checkbox"/> Physical Proximity | <input type="checkbox"/> Specific Error Correction | <input type="checkbox"/> Suggest Breathing Strategy |
| <input type="checkbox"/> Direct Eye Contact | <input type="checkbox"/> Provide Choices | <input type="checkbox"/> Co-Regulate |
| <input type="checkbox"/> Signal/Non-Verbal Cue | <input type="checkbox"/> Verbal Direction | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Behavior Specific Praise | <input type="checkbox"/> Ignore Behavior | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Praise Approximation | <input type="checkbox"/> Offer Break | <input type="checkbox"/> Other: _____ |

Name: _____ Date: _____

Time: _____ Location: _____

Antecedent

- | | | |
|--|--|---|
| <input type="checkbox"/> Attention Given to Others | <input type="checkbox"/> New Task/Activity | <input type="checkbox"/> Given Direction Task/Activity |
| <input type="checkbox"/> Presence of Specific Person | <input type="checkbox"/> Difficult Activity/Task | <input type="checkbox"/> Preferred Activity Interrupted |
| <input type="checkbox"/> Signal/Non-Verbal Cue | <input type="checkbox"/> Asked to Wait | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Left Alone | <input type="checkbox"/> Loud, Noisy Environment | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Ignored | <input type="checkbox"/> Transition | <input type="checkbox"/> Other: _____ |

Behavior

- | | | |
|---|--|--|
| <input type="checkbox"/> Hitting/Punching | <input type="checkbox"/> Fighting | <input type="checkbox"/> Screaming/Yelling |
| <input type="checkbox"/> Kicking | <input type="checkbox"/> Work Refusal | <input type="checkbox"/> Verbal Refusal |
| <input type="checkbox"/> Biting | <input type="checkbox"/> Screaming | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Scratching | <input type="checkbox"/> Spitting | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Property Destruction | <input type="checkbox"/> Dropping/Flopping | <input type="checkbox"/> Other: _____ |

Consequence

- | | | |
|---|--|---|
| <input type="checkbox"/> Physical Proximity | <input type="checkbox"/> Specific Error Correction | <input type="checkbox"/> Suggest Breathing Strategy |
| <input type="checkbox"/> Direct Eye Contact | <input type="checkbox"/> Provide Choices | <input type="checkbox"/> Co-Regulate |
| <input type="checkbox"/> Signal/Non-Verbal Cue | <input type="checkbox"/> Verbal Direction | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Behavior Specific Praise | <input type="checkbox"/> Ignore Behavior | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Praise Approximation | <input type="checkbox"/> Offer Break | <input type="checkbox"/> Other: _____ |

ABC Observation Form

Student Name: _____ **Date:** _____

Antecedent	Behavior	Consequence
<i>Describe what happened right before the behavior occurred:</i> 	<i>Describe what the behavior looks like, how it is performed, and the intensity at which it occurs (low, medium, high).</i> 	<i>Describe what happened right after the behavior occurred:</i>
<i>Where the behavior occurred:</i> Setting/Activity- <i>How long the behavior lasts:</i> Time began- Time Ended-		Possible functions: <input type="checkbox"/> Sensory <input type="checkbox"/> Escape/Avoidance <input type="checkbox"/> Attention <input type="checkbox"/> Tangible
Notes: 		

Antecedent	Behavior	Consequence
<i>Describe what happened right before the behavior occurred:</i> 	<i>Describe what the behavior looks like, how it is performed, and the intensity at which it occurs (low, medium, high).</i> 	<i>Describe what happened right after the behavior occurred:</i>
<i>Where the behavior occurred:</i> Setting/Activity- <i>How long the behavior lasts:</i> Time began- Time Ended-		Possible functions: <input type="checkbox"/> Sensory <input type="checkbox"/> Escape/Avoidance <input type="checkbox"/> Attention <input type="checkbox"/> Tangible
Notes: 		



FUNCTIONAL BEHAVIORAL ASSESSMENT DATA

NAME: _____

COMPLETED BY: _____

Date/Time	BEHAVIOR OF CONCERN e.g., aggression, non-compliance	SETTING e.g., place, people involved, environmental conditions that may have effected behavior	ANTECEDENT e.g., instructions, activity, other factors that may have effected behavior	CONSEQUENCE e.g., end of activity, feedback, punishment, attention	INTERVENTION ALTERNATIVES/ POSITIVE BEHAVIORS e.g., list choices discussed with student

Functions of Behavior

How to Respond

Teach the child a different, socially acceptable behavior to use in place of the inappropriate behavior that will allow them to receive the same sensory input they are seeking.

Sensory

WHY: These behaviors provide access to sensory input. Engaging in these behaviors because the behavior itself "feels good" to the person.

WHEN: Sensory seeking behaviors occur at any time throughout the day, in the presence or absence of another person. Behaviors are not socially mediated.

Escape/Avoid

WHY: These behaviors remove or avoid an undesired situation, person, or task.

WHEN: Escape or avoidance behaviors occur at times when demands are presented that maybe too difficult or possibly too boring. Or during times when nonpreferred activities take place.

How to Respond

Teach the child to request a break when needed that allows them to be able to walk away from the task or activity for a moment. Break the task down into smaller, easier to handle steps. You can also offer choices within the activity.

How to Respond

Teach the child a different, socially acceptable behavior to use in place of the inappropriate behavior that will allow them to access positive attention. Ignore the inappropriate behavior and highly reinforce the appropriate replacement behavior.

Attention

WHY: These behaviors get a reaction from others (positive or negative). Often times they are described as "acting-out" behaviors.

WHEN: Attention seeking behaviors occur when a child desires a social interaction with another person. Whether the response to the child is positive or negative, attention is attention.

Tangible

WHY: These behaviors provide access to highly preferred, reinforcing items or activities.

WHEN: Tangible seeking behaviors occur at times when the child wants access to a specific item or activity.

How to Respond

Teach the child how to request, wait for, and/or display a target behavior prior to receiving the preferred object or task.

Support based on Function

Sensory

- Talk to the occupational therapist
- Provide the appropriate sensory input before the student appears to need it
- Include sensory breaks in the learners schedule on a regular basis
- Teach an alternate behavior that may give the learner the same type sensory input
- Be aware of the potential sensory issues in the environment and have a plan to address/support
- Provide a way for the learner to express their wants and needs

Escape/Avoid

- Provide a scheduled "escape" or break before the student engages in the behavior
- Decrease difficult tasks by breaking them down into smaller more manageable steps
- Decrease the amount of tasks the learner needs to complete prior to receiving reinforcement
- Teach the learner to request a break and/or help
- Increase reinforcement following completion of the task
 - Use a token economy
 - Create a structured environment with consistent routines

Attention

- Provide an overabundance of attention on a scheduled basis for appropriate behavior
- Teach an appropriate way for the learner to gain attention
- Provide reinforcement for engaging in appropriate attention seeking behaviors
- Avoid providing any form of attention for challenging behaviors while still blocking dangerous behaviors

Tangible

- Teach an appropriate, functional way to ask for the item or activity
- Provide the learner with a way to communicate
- Teach the learner to "wait" card, by using a wait card, timer, or first/then board
- Use visual supports to show the learner when they will have access to the item or activity
- Remove behavior inducing items from the environment before the learner enters it

STUDENT IDENTIFIER	NOTIFICATION OF CONFERENCE (NOC) DATE	DATE REVIEWED
RESIDENT SCHOOL	INDIVIDUALIZED EDUCATION PROGRAM (IEP) MEETING DATE	ISBE REVIEWER
SERVING SCHOOL	REEVALUATION DUE DATE	
In accordance with, 23 IAC 226.530 , the Notification of Conference was provided to the parent/guardian at least 10 Days prior to IEP Meeting? <input type="checkbox"/> YES <input type="checkbox"/> NO		If the previous answer was 'No', did the parent agree via signature to waive their rights to the 10-day notification provision? <input type="checkbox"/> YES <input type="checkbox"/> NO
Purpose of Conference (Please check all that apply) <input type="checkbox"/> IEP Review/Revision <input type="checkbox"/> Review of Existing Data <input type="checkbox"/> Reevaluation <input type="checkbox"/> Functional Behavioral Assessment (FBA) / Behavior Intervention Plan (BIP) <input type="checkbox"/> Initial IEP <input type="checkbox"/> Secondary Transition <input type="checkbox"/> Manifestation Determination <input type="checkbox"/> Initial Evaluation/Eligibility <input type="checkbox"/> Graduation		
Purpose of Notification of Conference AND Conference Summary Report is the same? <input type="checkbox"/> YES <input type="checkbox"/> NO		
STUDENT'S DATE OF BIRTH	STUDENT'S RACE/ETHNICITY	GENDER
CURRENT GRADE	<input type="checkbox"/> Asian <input type="checkbox"/> Middle Eastern or North African <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Black or African American <input type="checkbox"/> Two or More Races <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> White	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Non-Binary
<input type="checkbox"/> PK <input type="checkbox"/> 2 <input type="checkbox"/> 5 <input type="checkbox"/> 8 <input type="checkbox"/> 11 <input type="checkbox"/> K <input type="checkbox"/> 3 <input type="checkbox"/> 6 <input type="checkbox"/> 9 <input type="checkbox"/> 12 <input type="checkbox"/> 1 <input type="checkbox"/> 4 <input type="checkbox"/> 7 <input type="checkbox"/> 10		

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<p>In accordance with 23 IAC 226.530(a), a copy of all written material that was considered by the IEP team, was provided to the parent/guardian at least three days prior to the IEP meeting.</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If 'Yes', which method of delivery was utilized?:</p> <p><input type="checkbox"/> Regular Mail <input type="checkbox"/> Picking material up from school <input type="checkbox"/> Sent with Student <input type="checkbox"/> Email</p>																		

In accordance with [23 IAC 226.510](#) and [34 CFR 300.504](#), a copy of the notice of procedural safeguards available was provided to the parents at least annually.

YES NO

In accordance with [105 ILCS 5/14-6.10](#), the district provided the parent/guardian notification, in writing, of the *Transfer of Rights* during the school year in which the student turned 17 years old.

YES NO N/A

In accordance with [105 ILCS 5/2-3.163\(c-5\)\(d\)](#), information regarding *Understanding PUNS: A Guide to Prioritization for Urgency of Need for Services* was provided to the parent/guardian at the annual IEP meeting. (required for every student with an IEP).

YES NO

In accordance with [105 ILCS 5/14-8.02i](#) and [15 ILCS 505/16.6](#), information regarding *Achieving a Better Life Experience (ABLE) Accounts* was provided to the parent/guardian at the annual IEP meeting. (required for every student with an IEP).

YES NO

In accordance, [105 ILCS 5/14-8.05](#), the district provided the parent/guardian with *District Behavior Intervention Policy* annually at the IEP meeting. (required for every student with an IEP).

YES NO

In accordance, [105 ILCS 5/14-8.05](#), the district provided the parent/guardian with the districts *Behavior Intervention Policy* at the Initial Evaluation.

YES NO N/A

In accordance with [34 CFR 300.324\(b\)\(1\)\(i\)](#), there was evidence that the IEP was reviewed and revised at least annually.

YES NO N/A

COMMENTS: If corrections are needed, specify the error(s)

Instructions: This document includes columns for documenting two independent reviews, Local Education Agencies (LEAs) are only expected to conduct one review for each IEP that is selected. LEAs should only complete the column highlighted in blue and provide comments as applicable. The columns highlighted in green, are for ISBE use only.

IEP 1. Language and Interpreter Needs for Parents				<input type="checkbox"/> N/A
LEA		ISBE		Authority: 34 CFR 300.322; 34 CFR 300.324; 23 IAC 226.210; IAC 226.530; 23 IAC 226.800
Response		Response		Response Criteria: The IEP addressed the considerations of the language needs of the parent. Needs must be noted and accommodated.
Y	N	Y	N	a. On the Conference Summary Report, the district recorded the following information.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. The parent uses a language/mode of communication other than English;
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. The parent had a need for an interpreter, and a qualified interpreter was present at the IEP meeting;
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. If the parent had a need for an interpreter, the language for interpretation was noted; <input type="checkbox"/> N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Whether a parent requested that the interpreter serve no other role in the IEP meeting and, if so, did the school district granted that request, and <input type="checkbox"/> N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Whether all documents were provided in preferred language (e.g., consent, IEP, and evaluation).
COMMENTS: If corrections are needed, specify the error(s)				

IEP 2. Parent/Guardian Notification of Conference and IEP Team				
LEA		ISBE		Authority: 34 CFR 300.320322; 34 CFR 300.503; 23 IAC 226.210; 23 IAC 226.530
Response		Response		Response Criteria: An appropriate Parent/Guardian Notification of Conference was completed, and the required team members were present at the IEP meeting, as verified in the Conference Summary Report.
Y	N	Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. A copy of the Parent/Guardian Notification of Conference was in the file and included the date, time, and location of the meeting.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. The parent/guardian was invited and attended, or there was evidence of documented attempts to ensure parent participation, or alternative meeting/method was offered.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. A contact person was listed for the parent to bring other individuals to the IEP meeting.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	d. A contact person was listed for the parent to request or ask questions/express complaints about interpretation services (parent concerns/complaints should be in notes sections).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	e. A contact person was listed for the parent to request an interpreter.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	f. The names and/or titles of individuals invited to the IEP meeting were listed on the Notification of Conference.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	g. Required team members, as listed on the NOC, and the IEP meeting attendees are the same: <ul style="list-style-type: none"> • General educator (of the student), special educator, local education agency (LEA) representatives, and other members (school psychologist, social worker, occupational therapist, audiologist, physical therapist, bilingual specialist, etc.), as required.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	h. If applicable, a signed excusal and written report were included, in the file, for required team members who were not in attendance at the meeting. <input type="checkbox"/> N/A
COMMENTS: If corrections are needed, specify the error(s)				

IEP 3. Present Levels of Academic Achievement and Functional Performance (PLAAFP)				
LEA		ISBE		Authority: 34 CFR 300.320(a)(1); 34 CFR 300.324(a); 23 IAC 226.230
Response		Response		Response Criteria: The IEP includes a statement of the student's present levels of academic achievement and functional performance.
Y	N	Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. The student's strengths included information regarding academic and functional strengths as it relates to the student's disability.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. Parental educational concerns/input are documented.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. The academic performance included assessment results (e.g., baseline/assessment scores vs. expected grade level performance, progress in the general education curriculum) that were impacted by the student's disability. This may include strengths and weaknesses identified in the most recent formative and summative evaluations.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	d. The functional performance included developmental areas impacted by the student's disability, such as social/emotional status, independent functioning, vocational, motor skills, and speech and language communication. This may include strengths and weaknesses identified in the most recent formative and summative evaluations.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	e. The results of the initial or most recent evaluation for the student were included.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	f. The IEP included a statement of how the disability affects :
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. The student's involvement in appropriate activities <input type="checkbox"/> N/A (for a preschool child only)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. The student's pursuit of postsecondary expectations: employment, education, and independent living for students 14 ½ and older only <input type="checkbox"/> N/A (for students not turning 14 ½ during IEP year)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. The student's involvement and progress in the general education curriculum and the functional implications of the student's skills.
COMMENTS: If corrections are needed, specify the error(s)				

IEP 4. Behavior Intervention Plan				<input type="checkbox"/> N/A			
LEA		ISBE		Authority: 34 CFR 300.324(a)(2)(i); 23 IAC 226.230(b); 105 ILCS 5/14 8.02(b)			
Response		Response		Response Criteria: The IEP of a student who requires a Behavior Intervention Plan includes all required components.			
Y	N	Y	N				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. Documentation of the summary of findings of the Functional Behavioral Assessment (FBA) is included.			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. Documentation of the summary of prior, current, and planned interventions to be used, including those aimed at developing or strengthening alternative or more appropriate behaviors is included.			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. Measurable behavior changes expected, method of evaluation, and a schedule to review the interventions' effectiveness is documented.			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	d. Provisions for communicating with the parents about their child's behavior and coordinating school based and home based support services program services.			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	e. Documentation of parental consent if the FBA was completed apart from an evaluation. <input type="checkbox"/> N/A if FBA was completed with evaluation.			
COMMENTS: If corrections are needed, specify the error(s)							

IEP 5. Annual Goals and Short term Objectives/Benchmarks							
LEA		ISBE		Authority: 34 CFR 300.320(a)(2); 34 CFR 300.324(b)(1)(ii)(A); 23 IAC 226.230(a)(1)			
Response		Response		Response Criteria: The measurable annual goals and short term objectives/benchmarks are designed to meet each of the student's educational needs, that result from the student's disability, to enable the child to be involved in and make progress in the general education curriculum.			
Y	N	Y	N				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. The method of reporting a student's progress on annual goals (IEP review/revision, progress reports, parent conferences, or other) was documented quarterly or in accordance with the grading periods for non IEP students.			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. Results of the most recent state, district wide and/or classroom assessments relevant to the goals were documented.			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. Annual goals and short-term objectives/benchmarks reflect consideration of the Illinois Learning Standards and/or Essential Elements.			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	d. Goals were specific, observable, measurable, and included evaluation criteria. (Measurable goals include criterion, condition, behavior, and timeline)			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	e. Short-term objectives were specific, observable, measurable and included evaluation criteria. (Measurable short-term objectives include criterion, condition, behavior, and timeline)			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	f. The IEP addressed any sustained lack of progress on goals and benchmarks. <input type="checkbox"/> N/A if IEP was an initial IEP			
COMMENTS: If corrections are needed, specify the error(s)							

IEP 6. Consideration of Special Factors

LEA		ISBE		Authority: 34 CFR 300.324(a)(2)
Response		Response		Response Criteria: The IEP documented the consideration of assistive technology, (AT); English learner status/language needs; communication needs; support for blind/visually impaired (including the provision of braille instruction); positive behavioral interventions and supports, and other strategies to address behaviors that impedes the learning of the student or others.
Y	N	Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. Each consideration of special factors was identified as "yes," or "no".
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. Any consideration identified as "yes" contained a statement of supports needed or all considerations were identified as "no".

COMMENTS: If corrections are needed, specify the error(s)

IEP 7. Linguistic Accommodations (including Deaf, Hard of Hearing, Blind, and Deaf-Blind Accommodations). **N/A Proceed to the next section**

LEA		ISBE		Authority: 34 CFR 300.324(a)(2); 23 IAC 226.140; 23 IAC226.230(a)(3)
Response		Response		Response Criteria: If the IEP documented that the student has linguistic or cultural needs, accommodations should be provided for the provision of special education and related services in a language or mode of communication other than, or in addition to, English.
Y	N	Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. Accommodations to meet linguistic and/or cultural needs were identified as needed and a statement of accommodations was included in the IEP;
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. The IEP stated that the student would be provided special education and related services in a language or mode of communication other than, or in addition to, English and a statement of accommodations was included in the IEP.
				c. Deaf, Hard of Hearing, and Deaf-Blind only: <input type="checkbox"/> N/A Proceed to the next section
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Language and communication needs were identified.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Opportunities for direct communication/interaction with peers/staff in student's language/communication mode were documented.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. There was identification of the student's mode of communication that was accessible in instruction, school services, and extracurriculars.

COMMENTS: If corrections are needed, specify the error(s)

IEP 8. Supplementary Aids, Accommodations, and Modifications					
LEA		ISBE		Authority: 34 CFR 300.320(a)(4)	
Response		Response		Response Criteria: The IEP contained a statement of the supplementary aids, accommodations, and program modifications that will be provided to enable the student to advance appropriately toward attaining annual goal, be involved in and make progress in the general education curriculum and be educated and participate with other students (with and without disabilities).	
Y	N	Y	N		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Supplementary aids, accommodations, and/or program modifications were needed and listed on the IEP, or there was a statement indicating that supplementary aids, accommodations, and/or program modifications were not needed.	
COMMENTS: If corrections are needed, specify the error(s)					

IEP 9. Supports for School Personnel and Parent Training					
LEA		ISBE		Authority: 34 CFR 300.34c(8)(iii); 34 CFR 300.320(a)(4)	
Response		Response		Response Criteria: A statement of the special education and related services and supplementary aids and services, based on peer-reviewed research to the extent practicable, to be provided to the child, or on behalf of the child, and a statement of the program modifications or supports for school personnel that will be provided to enable the child to advance appropriately toward attaining the annual goals; to be involved in and make progress in the general education curriculum, and to participate in extracurricular and other nonacademic activities; and to be educated and participate with other children with disabilities and nondisabled children.	
Y	N	Y	N		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. Program supports for school personnel were needed for the student to advance appropriately toward attaining the annual goals, participate in the general curriculum for age and grade, and be educated and participate with other students in educational activities. If the answer is no, please proceed to part C.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. If the answer to the above was yes, a statement was made that supports for school personnel were needed to implement the student's IEP with fidelity, and required supports were listed. (e.g, common planning time, training, equipment, etc.)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. Parent counseling and training services are needed to assist parents in understanding the special needs of their child, provide the parent with information about child development, and help parents acquire the necessary skills that will allow them to support the implementation of their child's IEP. If the answer to the question above was yes, the training was listed as a related service.	
COMMENTS: If corrections are needed, specify the error(s)					

IEP 10. Assessment Accommodations					
LEA		ISBE		Authority: 34 CFR 300.160(a); 34 CFR 300.320(a); 34 CFR 300.324(a)(2)(ii)	
Response		Response		Response Criteria: A State must ensure that all children with disabilities are included in all general State and district-wide assessment programs, including assessments described under section 1111 of the ESEA, 20U.S.C. 6311 , with appropriate accommodations and alternate assessments, if necessary, as indicated in their respective IEPs.	
Y	N	Y	N		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	For all assessments in which the student will participate with accessibility features and/or accommodations, the accessibility features and/or accommodations were listed, described, and documented. (e.g., classroom based, district wide and/or state assessments if applicable)	
COMMENTS: If corrections are needed, specify the error(s)					

IEP 11. Participation In General Education Classes and Special Education Classes/Services					
LEA		ISBE		Authority: 34 CFR 300.320(a)(7)	
Response		Response		Response Criteria: The term individualized education program or IEP means a written statement for each child with a disability that is developed, reviewed, and revised in a meeting in accordance with §§ 300.320 through 300.324 , and that must include—The projected date for the beginning of the services and modifications described in paragraph (a)(4) of this section, and the anticipated frequency, location, and duration of those services and modifications.	
Y	N	Y	N		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The IEP included the projected date for the beginning of the special education and related services and the anticipated frequency, location, and duration of those services.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. Initiation date was provided and began no later than 10 school days after the date of the IEP (unless IEP occurs less than 10 days prior to winter or summer break).	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. Frequency and location were specified for all services listed.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. Duration was provided and did not continue past the expiration of the IEP.	
COMMENTS: If corrections are needed, specify the error(s).					

IEP 12. Educational Placement in Alignment with IEP

LEA		ISBE		Authority: 34 CFR 300.116(b)(2); 34 CFR 300.324(a)(1); 105 ILCS 5/147.02
Response		Response		Response Criteria: When determining the educational placement of a student with a disability, the IEP team ensured that the information in the academic, developmental, and functional performance and educational services were aligned with the placement decision.
Y	N	Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. The student receives special education services (either inside or outside of the general education setting) in response to documented areas of need, and
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. The student does not receive special education services (either inside or outside of the general education setting) where there were no documented areas of need.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. If the student might be eligible to receive services from the Illinois School for the Deaf, the Illinois School for the Visually Impaired, or the Illinois Center for Rehabilitation and Education-Roosevelt, the school district notified the parents, in writing, of the existence of these schools and the services they provide and made a reasonable effort to inform the parents of the existence of other, local schools that provide similar services and the services that these other schools provide. This notification shall include without limitation information on school services, school admissions criteria, and school contact information. <input type="checkbox"/> N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	d. For a student who is placed in an out of state special education residential facility, prior to the placement, the school district provided the student and/or the parent/guardian the option to consider a special education residential facility located within this state, if any, that provides treatment and services comparable to those provided by the out of state special education residential facility. <input type="checkbox"/> N/A

COMMENTS: If corrections are needed, specify the error(s)

IEP 13. Educational Environment Considerations				
LEA		ISBE		Authority: 34 CFR 300.114(a)(2); 34 CFR 300.117; 34 CFR 300.320(a)(5)
Response		Response		Response Criteria: To the maximum extent appropriate, all students with IEPs shall be educated and participate in extracurricular activities with students who are nondisabled.
Y	N	Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. The IEP contained an explanation of the extent, if any, to which the student will not participate with nondisabled students in the general education curriculum .
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. The IEP contained an explanation of the extent, if any, to which the student will not participate with nondisabled students in extracurricular and other nonacademic activities .
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. Special education classes, separate schooling, or removal from the regular education environment was documented as required due to the severity of the student's disability, which would affect that student's progress in the general education setting even with the use of supplementary aids and services.
COMMENTS: If corrections are needed, specify the error(s)				

IEP 14. Potential Harmful Effects				
LEA		ISBE		Authority: 34 CFR 300.116(d)
Response		Response		Response Criteria: In selecting the least restrictive environment (LRE), consideration was given to any potential harmful effects on the student or on the quality of services they need.
Y	N	Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The consideration of potential harmful effects was documented for each placement considered.
COMMENTS: If corrections are needed, specify the error(s)				

IEP 15. Transportation				
LEA		ISBE		Authority: 34 CFR 300.34(c)(16); 34 CFR 300.107; 34 CFR 300.320(a)(7); 23 IAC 226.750(b)
Response		Response		Response Criteria: The team documented the consideration/provision of transportation services.
Y	N	Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The IEP documented consideration of the student's need for transportation (travel to and from school and between schools, travel in and around school buildings, and/or with specialized equipment (such as special or adapted buses, lifts, and ramps)).
COMMENTS: If corrections are needed, specify the error(s)				

IEP 16. Extended School Year				
LEA		ISBE		Authority: 34 CFR 300.106(a); 34 CFR 300.320(a)(7); 23 IAC 226.220(a)
Response		Response		Response Criteria: Each public agency must ensure that extended school year services are available as necessary to provide FAPE.
Y	N	Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The IEP team documented the consideration/provision of extended school year services. If ESY services were found to not be necessary, please proceed to section IEP 17.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If extended school year services were determined (via data review) to be needed by the student, the type, location, frequency/amount, initiation of services, duration, transportation, and number of goals of extended school year services were documented in the IEP.
COMMENTS: If corrections are needed, specify the error(s)				

IEP 17. Autism Considerations				<input type="checkbox"/> N/A-Mark only if child does not have an autism spectrum disorder disability.
LEA		ISBE		Authority: 23 IAC 226.220(c)
Response		Response		Response Criteria: The IEP documented autism considerations, for any student who has a disability on the autism spectrum.
Y	N	Y	N	For students with a disability on the autism spectrum, the IEP team considered and documented that the student had needs in the following areas:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. Verbal and nonverbal communication needs.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. Social interaction skills and proficiencies.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. Needs resulting from unusual responses to sensory experience.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	d. Needs resulting from resistance to environmental change or change in daily routines.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	e. Needs resulting from engagement in repetitive activities and stereotyped movements.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	f. Needs for any positive behavioral interventions, strategies, and supports.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	g. Other needs that impact progress in general curriculum, including social and emotional development.
COMMENTS: If corrections are needed, specify the error(s)				

IEP 18. POSTSECONDARY TRANSITION (FOR STUDENTS 14½ OR OLDER)				<input type="checkbox"/> N/A
1. Measurable Postsecondary Goals (for employment, education and/or training, and independent living)				
LEA		ISBE		Authority: 34 CFR 300.320(b); 23 IAC 226.230(c)(1)
Response		Response		Response Criteria: Measurable post secondary outcomes/goals were created for after high school.
Y	N	Y	N	<ul style="list-style-type: none"> Goals that are measurable include objective words, such as "will" (not subjective words - "want," "wish," or "would like"). It should be clear that the goals will be achieved after high school or aging out, and not an activity that the student is currently doing (e.g., job while in high school)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. There area measured postsecondary outcomes/goals in the area of employment to occur after high school/aging out.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. There are measurable postsecondary outcomes/goals in the area of education and /or training to occur after high school/aging out.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. There are measurable postsecondary outcomes/goals in the area of independent living to occur after high school/aging out.
COMMENTS: If corrections are needed, specify the error(s)				

2. Postsecondary Goals Updated Annually in Conjunction with the Development of the Current IEP				
LEA		ISBE		Authority: 34 CFR 300.320(b); 23 IAC 226.230(c)(1)
Response		Response		Response Criteria: The postsecondary goals were addressed/updated in conjunction with the development of the current IEP.
Y	N	Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. The post secondary goals for employment were addressed/updated in conjunction with the development of the current IEP.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. The post secondary goals for education and/or training were addressed/updated in conjunction with the development of the current IEP.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. The post secondary goals for independent living were addressed/updated in conjunction with the development of the current IEP.
COMMENTS: If corrections are needed, specify the error(s)				

3. Age Appropriate Transition Assessments				
LEA		ISBE		Authority: 34 CFR 300.320(b); 23 IAC 226.230(c)(1)
Response		Response		Response Criteria: For each of the postsecondary goal areas, there is evidence that at least one age appropriate transition assessment was used to provide information on the student's needs, strengths, preferences, and interests regarding this postsecondary goal.
Y	N	Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. There was evidence that the measurable postsecondary outcomes/goals were based on age appropriate transition assessments conducted prior to the IEP meeting and addressed for employment .
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. There was evidence that the measurable postsecondary outcomes/goals were based on age appropriate transition assessments conducted prior to the IEP meeting and addressed for education and/or training .
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. There was evidence that the measurable postsecondary outcomes/goals were based on age appropriate transition assessments conducted prior to the IEP meeting and addressed for independent living .
COMMENTS: If corrections are needed, specify the error(s)				

4. Transition Services				
LEA		ISBE		Authority: 34 CFR 300.43(a); 34 CFR 300.320(b); 23 IAC 226.230(c); 105 ILCS 5/14 8.03(a 5)
Response		Response		Response Criteria: There are transition services in the IEP that will reasonably enable the student to meet his or her postsecondary goal(s). Transition services are a coordinated set of activities that are based on the students' strengths, needs, preferences, and interests.
Y	N	Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. There is at least one transition service that will occur during and/or after high school, including academic and functional activities, that addresses the postsecondary employment goal and facilitates movement from school to post school.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. There is at least one transition service that will occur during and/or after high school, including academic and functional activities, that addresses the postsecondary education and/or training goal and facilitates movement from school to post school.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. There is at least one transition service that will occur during and/or after high school, including academic and functional activities, that addresses the postsecondary independent living goal and facilitates movement from school to post school.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	d. Each person responsible for coordinating and delivering transition services was identified (identified position).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	e. The need for home based support services program through PUNS was addressed.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	f. There was evidence of consideration of the student's assistive technology needs related to secondary and postsecondary employment, education and training, and independent living, AND the availability and accessibility of appropriate technology devices and services post high school.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	g. The school provided the student and parent/guardian with information about secondary and postsecondary CTE opportunities, including a list of programming options, the scope and sequence of study, and their locations.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	h. The school provided the student and parent/guardian with information about dual credit courses offered by the district, including options for dual credit and high school credit only, as well as the criteria for enrollment in these courses.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<ul style="list-style-type: none"> For students enrolled in dual credit courses, the student's participation in the course was included as part of the student's transition IEP activities.
COMMENTS: If corrections are needed, specify the error(s)				

5. Course of Study				
LEA		ISBE		Authority: 34 CFR 300.320(b)(2); 23 IAC 226.230(c)(2)
Response		Response		Response Criteria: A complete course of study that includes all years of high school, specific titles of courses and courses that ensure progress towards meeting the post-secondary goals is included in the transition plan.
Y	N	Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The course of study addresses the student's current and remaining years in school and lists names of classes, rather than a statement of instructional program, that depicts a progression towards meeting the postsecondary goals.

COMMENTS: If corrections are needed, specify the error(s)

6. Annual Goals Related to Transition Service Needs				
LEA		ISBE		Authority: 34 CFR 300.320(b); 23 IAC 226.230(c)(1)
Response		Response		Response Criteria: Annual goals or short-term objectives are related to the student's transition service needs.
Y	N	Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. There is at least one annual goal or short-term objective related to the student's transition service needs in the area of employment .
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. There is at least one annual goal or short-term objective related to the student's transition service needs in the area of education and/or training .
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. There is at least one annual goal or short-term objective related to the student's transition service needs in the area of independent living .

COMMENTS: If corrections are needed, specify the error(s)

7. Student Participation in the IEP Meeting					
LEA		ISBE		Authority: 34 CFR 300.321(b)(1); 23 IAC 226.230(c)(1)	
Response		Response		Response Criteria: There is evidence that the student was invited to the IEP meeting.	
Y	N	Y	N		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The student was listed on the Notification of Conference.	
COMMENTS: If corrections are needed, specify the error(s)					

8. Outside Agencies					
LEA		ISBE			
Response		Response		Response Criteria: With parental consent, outside agencies that are responsible for transition services were invited to the IEP meeting.	
Y	N	Y	N		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. It is too early to determine if the student will need outside agency involvement, OR no agency representation is needed at this time, OR the parent/age of majority student provided written refusal to invite an outside agency. IF the answer is yes, skip b and c.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. The transition services are listed in the transition plan that will be provided or paid by an outside agency AND there is evidence that the agency was listed on the Notification of Conference.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. Prior parental/age of majority consent was obtained before inviting an outside agency that will provide or pay for transition services.	
COMMENTS: If corrections are needed, specify the error(s)					