MEMORANDUM

TO: Directors of Special Education
    Parent, Advocacy and Professional Organizations
    Interested Colleagues in Special Education

FROM: Mary McDevitt, Education Specialist
       Unique Learner Needs Section

WAYNE ERICKSON, Manager
Unique Learner Needs Section

DATE: October 9, 1990

RE: RECOMMENDED PRACTICES TO ASSURE THE DELIVERY OF SPECIAL EDUCATION SERVICES IN THE LEAST RESTRICTIVE ENVIRONMENT (LRE)

The Unique Learner Needs Section of the Minnesota Department of Education has developed the attached document: RECOMMENDED PRACTICES TO ASSURE THE DELIVERY OF SPECIAL EDUCATION SERVICES IN THE LEAST RESTRICTIVE ENVIRONMENT (LRE). Representatives from regular and special education, parents, advocacy organizations, higher education and Minnesota Department of Education staff were involved in the design and development. The intent was to reflect what the field believes are current best practices/strategies necessary to implement student programs in the least restrictive environment.

The format parallels the TSES (Total Special Education System) Manual. Policy statements, regulations, key questions, recommended practices/strategies and "Red Flags" are clearly outlined. Our hope is this document, and the IEP Manual will be used as resources by student study teams. We believe the professional skills of team members will enable them to use these documents as productive tools when they face the challenge of developing appropriate plans and services for students.

Regional technical assistance may be arranged by contacting Mary McDevitt, at 612/297-3619.

M/R/pj

Attachment
RECOMMENDED PRACTICES TO ASSURE THE DELIVERY OF SPECIAL EDUCATION SERVICES IN THE LEAST RESTRICTIVE ENVIRONMENT (LRE)

Unique Learner Needs Section
Minnesota Department of Education
550 Cedar St.
St. Paul, MN 55101
September 25, 1990
Acknowledgements

There were many people involved in preparing these recommended practices. The Appendix contains the names and affiliations of nearly 40 parents, advocates, educators, trainers and state staff who formed a field committee to address the issues surrounding LRE. Their contribution is gratefully acknowledged.

Under the direction of Mary McDevitt, the LRE Education Specialist for the Unique Learner Needs Section, a writing committee was formed by nine participants from the field committee. The following individuals contributed many extra hours of writing and editing to prepare this handbook: Marie Anderson, Parent; Jane Johnson, Parent; Linda Lawrie, Principal, White Bear Lake School District; Pat Lytwyn, Early Childhood Coordinator, SW/WC ECSU; Jan Manchester, Special Educator, St. Paul School District; Marilyn Marsh, Director of Special Education, Duluth; Marsha Munt, Regular Educator, Hopkins School District; Denny Ulmer, Director of Special Education, Park Rapids; and Terri Vandercook, Project Director, Institute on Community Integration, Minneapolis. Martha Thurlow of the Institute on Community Integration served as the editor. The extra work contributed by these individuals deserves special recognition.
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CHAPTER 1
INTRODUCTION

In 1975, Public Law 94-142, called The Education for All Handicapped Children Act, was passed to ensure free and appropriate public education for students with handicaps. Several concepts included in the law had the potential of considerable impact on the education of students. One of these concepts was the "least restrictive environment" (LRE) principle. Historically, separation and exclusion characterized the education of individuals with handicaps. The National Information Center for Handicapped Children and Youth (NICHCY) noted that people in institutions received minimal services of any kind, those people who remained at home typically were excluded from the public education system, and even those with mild handicaps were placed in environments segregated from their peers. This was no longer considered acceptable.

Today, increasing recognition is being given for successful efforts to integrate students with handicapping conditions into regular education settings. This has become a national priority as well as a statewide effort for the Unique Learner Needs Section of the Minnesota Department of Education. Growing numbers of schools, districts, and cooperatives in Minnesota are integrating students with disabilities into regular classes and are revising service delivery models so that a true continuum of services are available for all students with special needs. This occurs through a collaborative effort between regular and special education staff as the service delivery is dependent upon the needs of the student, not the handicapping condition or label.

This document was developed with the hope that it will be a "recommended practice" resource for practitioners and parents considering the implementation of the LRE concept in providing services to students with special needs. The contents reflect a field-generated set of philosophy statements, questions, recommended practices, "red flags," and examples of LRE in providing services to students with disabilities, from pre-referral through periodic reviews, with attention also to parent involvement, staff training, and structural modifications. The contents of this manual were generated by a group of approximately 40 people representing regular educators and special education teachers, parents, advocates, special and regular education administrators, university faculty and State Department of Education staff. These individuals, with their varied backgrounds and philosophies, met for two days to brainstorm and discuss issues surrounding recommended practices in providing LRE services for students with disabilities. They started with statements of current laws, statutes, and rules related to LRE policy and a description of the process by which children become a part of the special education service system. From these common pieces of information they blended their unique perspectives to generate the contents of this manual.

1. What Is Current LRE Policy?

Both federal law and state statute include the concept of "least restrictive environment." Federal law tells us that states must establish:
Procedures to assure that, to the maximum extent appropriate handicapped children, including children in public or private institutions or other care facilities, are educated with children who are not handicapped, and that special classes, separate schooling, or other removal of handicapped children from the regular educational environment occurs only when the nature or severity of the handicap is such that education in regular classes, with the use of supplementary aids and services cannot be achieved satisfactorily.

The definition of least restrictive environment that is included in federal law essentially is repeated in Minnesota Statute 120.17, Subd. 3a, which covers school district obligations. In context, the criteria are:

Subd. 3a. School district obligations. Every district shall insure that:
   (a) All handicapped children are provided the special instruction and services which are appropriate to their needs;
   (b) Handicapped children and their parents or guardians are guaranteed procedural safeguards and the right to participate in decisions involving identification, assessment, and educational placement of handicapped children;
   (c) To the maximum extent appropriate, handicapped children, including those in public or private institutions or other care facilities, are educated with children who are not handicapped, and that special classes, separate schooling, or other removal of handicapped children from the regular educational environment occurs only when and to the extent that the nature or severity of the handicap is such that education in regular classes with the use of supplementary services cannot be achieved satisfactorily.

The Minnesota Board of Education Rule 3525.0400, Least Restrictive Environment, states:

To the extent that there are no detrimental effects, children who are handicapped shall be educated with children who do not have handicaps and shall attend regular classes. A handicapped person shall be removed from a regular educational program only when the nature or severity of the handicap is such that education in a regular educational program cannot be accomplished satisfactorily. Furthermore, there must be an indication that the person will be better served outside of the regular program. The needs of the person shall determine the type and amount of services needed.

While the law, statute, and rule are consistent, they do not clarify many of the issues that arise when attempting to implement the idea that a student should be educated in the least restrictive environment appropriate. A critical issue that arises is the balance between "least restrictive" and "appropriate" when making determinations about where services are located.

2. Defining "Appropriate" and "Restrictiveness"

The two key concepts of "appropriateness" and "restrictiveness" have generated much discussion, surrounded by many misconceptions. Both are relative concepts that are difficult to operationalize. The key to their definitions lies in making decisions about individual students based on their unique needs.
Typically, "restrictiveness" has been defined in terms of the extent to which there is intrusion on an individual's rights. When something is "least restrictive," it is done in a manner that least intrudes on (or restricts) individual rights. In special education, the concept has been connected to the model of a continuum or cascade of special education services, from those that are most restrictive (hospitals, institutions, special schools) to those that are least restrictive (regular classrooms in typical schools). This application of the restrictiveness concept derived initially from the federal court decision in the 1970s (Mills v. PARC) that "placement in a regular public school is preferable to placement in a special public school class and placement in a special public school class is preferable to placement in any other type of program of education and training." The court decision, however, also noted that the placement was to be "appropriate to the child's capacity."

Getting at the "appropriateness" of a least restrictive environment is a major part of the special education decision-making process and the development of an educational program based on individual needs. Decisions are made with specific consideration of the most appropriate placement for an individual student, without constraints of what exists or is available, with the underlying notion that "least restrictive" can only be defined in light of the learner's characteristics and needs.

In 1986, several principles related to educational placement as established by Public Law 94-142 were outlined by a national group called "Parent Education and Assistance for Kids" (PEAK):

(1) It is presumed that placement will be in the regular educational environment, unless there is a "strong compelling reason" for separate schooling.

(2) Student-to-student contact is important. Even if education cannot be successful unless the child is separated, the child still must have as much contact as possible with nonhandicapped children.

(3) The child should attend the school that he/she would attend if not handicapped. If there are educationally compelling reasons for not doing so, education must be provided as close as possible to the child's home school.

(4) The variety of educational programs and services available to children without handicaps must be available to children with handicaps.

PEAK also noted that educational placement is to be determined as part of the process of developing the child's IEP. When a placement outside the general education environment is made, the reason for this must be included on the IEP. More specifically, PEAK advises that placement outside of general education must occur only if IEP goals and objectives cannot be met in the general education class. Evidence of need for outside placements must show that (1) the curriculum, teaching approaches, or classroom settings are not the reason the child failed in the classroom, (2) removal from regular class will produce improvement in the child's achievement, and (3) a service that would be provided in the separate setting could not be provided in a less restrictive environment.
3. What Does "Appropriate" LRE Really Mean?

Descriptions of what LRE really means move us away from relatively sterile lists of characteristics to actual people and situations. For example, one mother describes the impact of LRE implementation for her daughter:

Nicole is physically disabled due to cerebral palsy and uses a power wheelchair....Her speech and language skills are still delayed...she is not able to draw or write.

This fall Nicole entered a regular kindergarten class in which she is fully integrated with supports for the half day program. The supports include consultation by a teacher of students with physical disabilities, a speech and language therapist, physical therapist, and an occupational therapist. Nicole also received support services from a classroom aide. Adaptive equipment, including a chair and computer, are provided as well....

One day Nicole's classmates 'wrote' a story about Nicole in a group language lesson. This is what they wrote: "Nicole is nice. Her nickname is Hot Rod (from her power wheelchair and driving skills). She is our friend. She has nice manners. We care about her...."

When I read the story, my eyes filled with tears and I started to smile....It is an experience like this that shows what integration is all about- and that makes all of the efforts worthwhile. (Anderson, 1988).

Other examples demonstrate some of the processes involved in making LRE placements and their effects. For example, a 17-year old student with communication difficulties, who was functioning with a moderate mental handicap, was mainstreamed in an age-appropriate small engine class. Placement there was based on his background experiences with tools and mechanical devices, and the identified need for him to continue instruction in the least restrictive environment. The teacher was receptive, participated in an integration workshop, involved all students in the class, and successfully incorporated the student into the group. The class size was small. This class later was identified as the student's favorite part of the day. His communication skills with his peers improved, as did his fine motor impulse control.

Similar examples can be found for other age levels and for students with other types of handicapping conditions. For example, Fred is an 18-year old who has had long-term history of emotional problems and has been hospitalized for two years without any formal schooling. When movement to residential treatment center resulted in failure for Fred, a decision was made to provide Fred's education on the job. Math, reading, and other survival skills were taught in the job setting with the support of a job coach, working off of Fred's successes. With this approach, Fred discovered a need to learn and decided to work toward a specific license. He returned to in a half-day school site where he participated and behaved appropriately.
Numerous other examples could be provided, with varied ages, disabilities, and LRE placements represented. The common factor in the examples is that they reflect truly individualized approaches to providing an appropriate education, with specific consideration of student needs and strengths through all aspects of the service delivery process.

4. When Should LRE Be Considered?

Consideration of "least restrictive environment" is relevant throughout the process from initial identification of a student with potential difficulties through the provision of services and periodic review of progress. The team decision-making process, which is designed to develop appropriate programs for learners with handicaps, will lead to placement decisions that are based on the individual needs of the youngster and the principle of least restrictive environment. The LRE principle is also relevant when considering classrooms or schools in which placements can be made, if appropriate curricular, instructional, and physical modifications are made. Similarly, parent involvement and due process considerations cannot be overemphasized in the team decision-making process, and therefore in decisions related to the least restrictive environment appropriate for a given student. The primary steps during which LRE considerations are relevant are:

- **Pre-referral** - the time before a formal referral to special education is made; during this time, modifications in the curriculum or instruction, or other interventions in the regular environment, can be made with the goal of avoiding the need for referral.

- **Referral** - the step during which a formal request is made for the review of information about children or youth who may have a handicapping condition and be in need of special education services.

- **Assessment** - the step during which formal and informal procedures are used to determine specific areas of strengths, needs, and eligibility for special education services.

- **IEP Planning Process** - the step during which assessment data are used by a team that includes the parents, to determine a child's current levels of performance, needs, and goals in current and anticipated environments and to develop a written individualized education plan that is based on the unique needs of this learner.

- **Instructional Delivery** - the step during which services are provided to the child in a manner consistent with the goals and objectives on the IEP; this step includes periodic reviews of pupil progress and modifications of instruction, placement, etc.
These steps are described in greater detail in the state manual called *Developing and Improving Your Total Special Education System* (TSES). That manual also includes other aspects of the special education system that are particularly relevant to discussions of LRE - the physical plant (school and classroom), staff (with implications for training), parental involvement, and due process considerations.


This manual contains seven chapters in which LRE issues are addressed and recommended practices identified. The chapters address the basic components of the special education decision-making process pre-referral and referral, IEP development, instructional delivery, the involvement of parents, due process, staff training, and school/classroom modifications.

Within each chapter, information is organized in a manner consistent with the TSES manual. A statement of philosophy is presented, followed by key questions, recommended practices, and red flags. Red flags are those occurrences that indicate a problem area that could lead to problems with complaints, possible litigation or a general situation that indicates a need for a solution. These are followed by examples of recommended practices.
CHAPTER 2
PRE-REFERRAL AND REFERRAL

LRE Philosophy in Pre-Referral and Referral

When a student experiences academic, emotional, social, or developmental difficulty in his or her educational environment, parents and teachers should address the specific area of concern in the least intrusive manner. The pre-referral process is directed toward ensuring that appropriate attempts are made to identify and solve problems or address concerns in the environment in which they occur at the time that they occur so that it is not necessary to move the learner out of that environment.

All children and youth have a right to an education that enables them to progress at a satisfactory level, even when the curriculum is standardized across grade levels or by department (e.g., math, English) in a district. When necessary, the curriculum and instruction must be modified to meet the needs of learners in the regular classroom. If modification of the instructional curriculum, methods, or setting is necessary, the intervention will be implemented in a consistent and timely manner, by interested persons who design and implement the intervention to be: (a) relevant to the area of concern, (b) understandable by parents, students, and instructional staff, (c) measurable over time, (d) directed toward a behavior change, (e) achievable by the student, and (f) manageable by the teacher.

When a student does not achieve satisfactorily in the regular classroom, even with specific interventions, the student may be referred to special education if it is suspected that the student has a handicapping condition and is in need of special education services. A pre-referral review of the student's current level of performance by a child study team should ensure that the student has had a minimum of two consistently implemented and documented interventions that meet the criteria noted previously (relevant, understandable, measurable, etc.) within typical educational environments before a formal referral for special education is accepted.

Key Questions and LRE Recommended Practices in Pre-referral and Referral

Pre-referral is that time before a formal referral to special education is made, after a problem has been noted or a concern raised. Referral is the step during which a formal request is made for the review of information about individuals who may be handicapped and in need of special education services. LRE issues are relevant during this entire time, relating to parent involvement, pre-referral interventions, data collection, and the process itself.

KEY QUESTIONS

Have parents been partners in the intervention process from the beginning of the period when concerns regarding the learner's achievement level have been addressed?

RECOMMENDED PRACTICES AND STRATEGIES

Parents are consulted about the instructional staff's concern for their child's academic, emotional, social, or developmental difficulties. Viewpoints, observations, concerns, plans, and timelines are addressed by parents and staff together.
<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
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<tbody>
<tr>
<td>Is a formal or informal pre-referral process in place to assist the</td>
<td>Classroom teachers and other general education personnel understand the reason for the pre-referral process and implement it appropriately.</td>
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<td>instructional staff in providing two appropriate interventions?</td>
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<tr>
<td>Have appropriate records (e.g., medical and cumulative) been reviewed</td>
<td>A system exists for collecting necessary pre-referral student data.</td>
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<td>and appropriate interviews (parent and child, when developmentally</td>
<td>Physical, social, emotional, communication, academic strengths and needs are considered when the student's history is reviewed.</td>
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<td>appropriate) been conducted?</td>
<td>The extent to which the child has opportunities to be involved in activities with other children is considered.</td>
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<tr>
<td>To what extent is the child or the family involved with external</td>
<td>The school knows about and makes contact with relevant external screening and service agencies after obtaining parental informed consent.</td>
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<td>agencies or support systems?</td>
<td>A description is made of when, where, how often, and with whom the behaviors or characteristics occur.</td>
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<tr>
<td>Do other instructional staff or parents who interact with the student</td>
<td>Opportunities the child has had to acquire the skill or behavior of concern in the natural setting are considered.</td>
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<td>observe the same characteristics or behaviors and share the same concerns?</td>
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</table>
Have two interventions been attempted and documented prior to referral for a special education assessment?

The area of concern is clearly identified in a relevant, understandable, and measurable way.

The intervention plan is in writing and is relevant to the area of concern; it is understandable, measurable, and achievable.

Special efforts are made to adapt the educational environment to allow the student to participate with his or her peer group, and these efforts are documented.

The effects of the intervention plan are measured after sufficient time is given for meaningful change.

Baseline data and data on the effects of the intervention are included in an intervention summary.

Who is responsible for implementing the intervention plan?

The classroom teacher is responsible for coordinating the interventions, which may be implemented by the classroom teacher, a paraprofessional, the parent, or other appropriate regular education support personnel.

LRE Red Flags In Pre-Referral and Referral

"Red Flags" are warnings or cautions that recommended practices are not being implemented. The following is a list of several "red flags" for LRE implementation at the pre-referral and referral stages. This may be used as a checklist - to the extent that there are multiple checks in a program area or on an individual basis, this is a warning or note of caution that LRE issues should be given greater consideration.

* Parents are not personally contacted when a concern about their child is expressed.

* Parents do not think there is a learning or behavior problem.

* Parents do not understand the data collection forms used during pre-referral or why they need to be completed.

* General education staff does not take responsibility for the pre-referral process.

* Students are not involved in the pre-referral process.

* Child history is not reviewed.

* No system exists to gather historical data.
* Concerns occur in only one setting.
* Strengths are not considered.
* Intervention is not relevant to the stated concern.
* Intervention is not documented or measurable.
* Data are collected inconsistently, or not at all.
* Classroom teacher does not take responsibility for coordination of interventions.
* Most referrals come from one or two teachers.
* Many students who are referred for special education are not eligible.
* Regular education resources are not available to assist in the planning and implementation of pre-referral activities.
* The child study team accepts many "emergency" or crisis referrals, without planned interventions being conducted in the regular environment.

Examples of LRE Recommended Practices in Pre-Referral and Referral

**Parent involvement** begins before a formal referral is made. Generally the teacher calls a parent or guardian and holds a conference to discuss the concern. Sometimes the parent calls the teacher. The parent agrees to provide information, sometimes via questionnaires or in general statements about the child's health history or the family's history and about what has been observed at home and in other settings. These involvements are directed toward clarifying and solving problems or addressing concerns in the environment in which they occur, at the time that they occur.

**Pre-Referral process** is directed toward ensuring that appropriate attempts are made to identify and solve problems or address concerns in the environment in which they occur at the time they occur so that it is not necessary to move the learner out of that environment. Examples of possible elements that help direct the process are inservice training on the process, a handbook that outlines and explains the problem, and a formal team such as a Teacher Assistance Team (TAT), that is responsible for appropriate implementation of the process. An additional element might be a resource manual that contains (a) a bank of possible interventions for the typical educational environment, (b) a list of school and community resources, and (c) examples of complete intervention forms.

Resources external to the classroom environment are also employed. District staff that serve as consultants may include the curricular coordinator, physical education specialist, music specialist, and principal. Resource staff (e.g., special education teacher or director, psychologist, social worker) also provide ideas for interventions during the pre-referral process. The student serves as a resource, when appropriate, by providing personal perceptions about the area of concern and by helping to develop intervention plans.
Data collection is undertaken to ensure that objective information is available to refer to when making decisions about intervention effectiveness and the possibilities for maintaining the child in the same environment as that in which problems first occurred. Background and baseline data include information from forms developed for parent and child, and the array of strengths and weaknesses demonstrated by the child in physical, social, emotional, and academic areas. The child’s involvement with other children is part of the data collected, and includes activities with them in general education classes, preschool settings, and other settings such as park recreation programs. Also collected is information on the involvement of the child or family with external agencies such as social services, Head Start, counseling, public health nursing, and community education. During data collection, limitations on opportunities to develop appropriate behaviors in the area of concern are identified, such as when a child has had interrupted schooling due to illness or relocation. Data collection continues until the specifics of when, where, how often, and with whom can be described for the behaviors or characteristics of concern. Descriptions can be simple, such as “comprehension of written material is a concern in reading and social studies” or “physical assaults to other students occur in unstructured situations such as lunch, recess, and bus times.” When trying to document possibilities for maintaining the child in the same environment, information is collected in halls, gym class, and lunchroom as well as during formal class periods. In the classroom, the teacher observes the behavior, collects daily samples of work, and reviews the student’s cumulative file or test scores. Data collection continues during the planned intervention process, which includes periodic reviews of the data to evaluate the effectiveness of the intervention.

Intervention ideas are varied to address specific concerns. Possibilities include the use of a response cost system for undesirable behavior (e.g., student out of desk) or assistance from a “homework” teacher who informs parents of assignments. Alternative grouping patterns (e.g., whole group, cooperative grouping) or a greater variety of teaching methods are used. The effects of any interventions designed to maintain the student in the environment are measured by the teacher keeping ongoing records of observable progress or regression. The intervention log is maintained for a period of time adequate enough to get an accurate measure of effects. All interventions, data collection, and effects are documented in a summary form by the teacher. Throughout the process, the teacher has used an intervention team to plan interventions, consult with parents and/or district resources, and has either coordinated an intervention carried out by a parent or has directly implemented the intervention with the student.
CHAPTER 3

ASSESSMENT

LRE Philosophy in Assessment

The intent of the assessment is to identify the student's strengths, interests, (current levels of performance) and needs in order to plan an appropriate education program. An assessment should be conducted in the least intrusive manner possible while preserving the student's personal dignity. Along with traditional concern about the appropriateness and technical adequacy of assessment instruments, assessors must also consider the environment in which the assessment is conducted and the anticipated environment in which services will be provided. This is done to identify more accurately the physical, social-emotional, academic, domestic, leisure-recreational, community, or vocational skills of the student.

Whenever possible, it is preferable to assess the student in a familiar and natural environment. Only in this way can we truly assess what a student can and cannot do, how the student reacts to various situations, what learning has occurred and what skills a needed for future activities.

Key Questions and LRE Recommended Practices in Assessment

Assessment is the step during which formal and informal procedures are used to determine the current levels of performance, and needs, which are used for program planning and to determine eligibility for special education services. LRE issues are particularly relevant to the setting in which assessment occurs, the specific instruments used, and the intrusiveness of the assessment process.

<table>
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<tr>
<th>KEY QUESTIONS</th>
<th>RECOMMENDED PRACTICES AND STRATEGIES</th>
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<tr>
<td>How should parents be involved in the assessment process?</td>
<td>Parents are involved from the beginning of the pre-referral process.</td>
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<tr>
<td>Are appropriate assessment instruments administered?</td>
<td>Parents understand their role in the assessment process.</td>
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<td>Formal opportunities exist (e.g., phone contact forms) to secure information from the parent about their child's development or performance.</td>
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<td>Assessment is conducted in all areas of concern.</td>
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<td>Assessment tools are technically adequate for (a) the situation in which they are used, (b) the purpose of their use, and (c) the student with whom they are used.</td>
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<tr>
<td>Question</td>
<td>Answer</td>
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<tr>
<td>Where is assessment conducted?</td>
<td>Assessment is conducted in an environment familiar to the student.</td>
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<td>Assessment is conducted in a natural rather than simulated environment.</td>
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<td>Assessment is conducted in either the current or the anticipated environment.</td>
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<td></td>
<td>Assessment includes formal observation of the learner in his/her current environment on multiple occasions. The observation addresses specific known patterns but also allows for the observation of new behavior.</td>
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<td>Are selected tests racially or culturally discriminatory?</td>
<td>Special resources are identified and used to ensure that the assessment is nondiscriminatory.</td>
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<td>Assessment items and procedures are consistent with the linguistic and cognitive styles of the student's culture.</td>
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<td>Assessment personnel are similar in racial or cultural background to student being assessed.</td>
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<td>Does the assessment include transition if the student is 14 years or older, or in 9th grade?</td>
<td>For students 14 years or older, a comprehensive assessment includes all five areas of transition (home-living, community participation, recreation/leisure, jobs and job training and post secondary education and training.</td>
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Are the purpose and goals of the assessment clearly defined? | Data collected during the pre-referral process are used to determine the assessment components.
|---|
| Information gathered during assessment is consistent with the purpose of the referral.
| Assessment data helps the team identify the student's strengths, interests, and needs, as well as learning styles and coping strategies, in current and anticipated environments.
| Assessment includes observations conducted in an environment familiar to the student.

How and when are assessment results reported? | Assessment team conducts a planned team meeting within a specific timeline.
|---|
| Assessment team considers the parents in reporting assessment results.
| Assessment team reports assessment results according to the student's strengths and needs.

Does the assessment summary incorporate the team's decision about how the student functions in current environments? | The observations and results of various team members are compared and compiled into a single team determination rather than just a listing of what each member observed or found.
|---|
| For students who are not eligible for special education, the assessment summary report includes recommendations for meeting the youngster's needs within the regular classroom.
| The assessment summary includes information on the student's functioning in various environments. It highlights the skills needed to function in current and future environments.
LRE Red Flags in Assessment

“Red Flags” are warnings or cautions that recommended practices are not being implemented. The following is a list of several “red flags” for LRE implementation in the assessment process. This may be used as a checklist - to the extent that there are multiple checks in a program area or on an individual basis, this is a warning or note of caution that LRE issues should be given greater consideration.

- Parents are not informed about their role in the assessment of their child and are not members of the student study team.
- Parents do not see a need for assessment.
- Entire assessment was conducted by a single evaluator.
- Lack of variety characterizes the assessment (e.g., most students are given the same assessment).
- Assessment is conducted in unfamiliar environments.
- Needed resources for assessment are not available.
- Transition needs are not addressed or identified.
- Assessment yields only a label or eligibility information and does not provide information relevant to program planning for the area of concern.
- Only standardized test information is collected during the assessment process.
- Assessment yields only information on needs and does not include strengths.
- No plan is made for how assessment data are presented.
- Assessment data are presented round robin according to tests given rather than student's strengths, interests and weaknesses, or areas of assessment, no plan as to presentation of results.
- Reported results do not give information about the student's strengths and needs.
- Written assessment reports are not provided.
- Written assessment summary reports test scores without interp. and rec.
- Written assessment summary is a compilation of individual professionals' test results rather than a team report.
- Parents do not feel they are part of the team.
Examples of LRE Recommended Practices in Assessment

**Parent involvement** continues into the assessment phase when it is determined that additional assessment is needed. The parents are given information about expectations for participation, including completion of forms (which are explained), and membership on the child study team (including their roles). The parents are encouraged to give input and ask questions. The parents are given information about advocacy support systems.

The **assessment process** addresses areas of concerns raised at referral, using instruments and procedures that are age appropriate, technically adequate, and least disruptive to typical school routines in which the student participates. The assessment process does not draw undue attention to the student through such techniques as using the loudspeaker to call the student to the psychologist's office. If the student must leave during class time, it is pre-arranged so that the teacher can provide a pass or discretely signal the student. Assessments are administered to the extent possible in the student's natural environments, most often the school or a day care setting. Appropriate personnel conduct assessments in their areas (e.g., reading specialist in reading assessments, psychologist in aptitude assessments). And, if the student is 14 years or older, or in 9th grade, each transition area is included in the assessment, with appropriate community agencies (e.g., county social services, vocational personnel, Division of Rehabilitation Services) in attendance.

The **assessment focus** is directed by the areas of concern so that there is no unnecessary testing, and to the extent possible, data collected during pre-referral (child history, observation, intervention results) are used to limit additional data collection. From the assessment, lists of strengths, interests, current levels of performance, and needs are generated. To provide data that can address appropriate environments for continued student participation, observations are conducted in familiar environments such as the classroom, home, child care center, or worksite.

The **assessment summary report** is given at a team conference that does not overwhelm parents. The written report is available to the parent before the conference. It includes information that the parent has provided to the team. Only key people attend the conference to report assessment results. The conference follows a pre-planned agenda that is organized according to the team's determination of strengths and weaknesses rather than by administered tests or by individual professional reports.

**IEP PLANNING PROCESS**

**LRE Philosophy in IEP Planning Process**

The preparation of an IEP is required by state and federal laws to assure that individuals with handicapping conditions have adequate educational planning to accommodate their unique instructional needs, and that these needs are met in appropriate learning environments. The process is intended to serve multiple purposes, including providing access to procedural safeguards, documenting a learner's needs and services, and a decision-making process that is effective and instructionally useful. Planning is
accomplished by a team comprised of both special and regular education staff, administrator(s), parents, the child (if the parent and child desire), and community members (when appropriate to plan for the student).

The IEP, and the planning process through which it is developed should move, in order, through the following steps:

1. Current levels of performance statements are made from referral, assessment and achievement information;

2. Based on current levels of performance, specific instructional needs are established;

3. For every need identified and prioritized, at least one goal is stated;

4. For every goal there are specific short-term objectives;

5. The type of service necessary to accomplish each objective is determined;

6. The amount of time needed to accomplish the objectives is determined;

7. The principle of the least restrictive environment is applied while making the placement and programming decisions;

8. The opportunity to participate in regular education activities is described.

Throughout this process, there need to be assurances that the plan will be carried out in the least restrictive environment. In order for this to occur, statements of justification must be provided whenever it is decided that the setting should be other than the classroom the learner would be attending if he/she did not have a handicapping condition. The justification must include both why the learner's goals and objectives cannot be achieved in the regular classroom without the support of special education and why the proposed placement is most appropriate. Statements must be individualized and based on specific instructional needs, not handicapping conditions.

Thus, Public Law 94-142 requires that each individual's educational placement be made based on the Individual Education Plan (IEP). Individuals are to be placed in programs on the basis of their own unique needs and not as a result of their particular handicapping condition. Placement cannot be made based solely on the design of a particular school district's special education delivery system, nor on the availability of related services.

If an individual is removed from a regular school environment, the IEP must contain a clear explanation as to why the student would be unable to receive an appropriate education in a regular education environment.

Students with handicaps are to be removed from regular classes only when the IEP goals and objectives cannot be met in a regular class. The reason the individual is removed must be based on compelling evidence. This evidence must clearly show:
- The curriculum, teaching approaches, or classroom settings are **not** the reason the student fails in the classroom.

- Removing the student from the regular educational environment **will result in** improved educational achievement for that student.

- Evidence that any necessary support service that would be provided in a segregated classroom or setting cannot be provided in a less restrictive environment.

If it is determined that a student should be removed from a regular classroom or setting, several criteria of appropriate placement should be followed:

1 ) A student must be placed in a classroom and/or school with students of his/her own age.

2 ) The educational setting should not be physically isolated so that it is difficult to have any contact or interactions with peers who are not handicapped.

3 ) The proportion of students with handicaps to students without handicaps in a school should be approximately the same percentage as in the overall school age population.
CHAPTER 4

Key Questions and LRE Recommended Practices in IEP Planning Process

The IEP planning process is the step during which assessment data are used to determine a child's educational needs and to develop a written individualized education plan that is appropriate to meet the learner's needs. LRE issues are particularly relevant during this process since goals and objectives are stated, services that are needed to accomplish the goals and objectives are identified, a determination is made about where services are to be provided, and the reasons for placement selection are identified.

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<tr>
<th>KEY QUESTIONS</th>
<th>RECOMMENDED PRACTICES AND STRATEGIES</th>
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<tr>
<td>Who needs to be involved in the IEP planning process to ensure that educational services are carried out in the least restrictive environment?</td>
<td>Parents, student (as appropriate), educators, (both regular and special education staff), administrator and/or administrative designee, job site staff, and potential service providers are involved.</td>
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<td>If a placement outside of the learner's home school is being considered, a representative from the potential site is included in the meeting.</td>
<td>Persons knowledgeable about the handicapping condition and the possible ways it can affect a learner's performance in school are included.</td>
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<td>Persons knowledgeable about any of the learner's diverse needs is included.</td>
<td>The parents are encouraged to bring support people or advocates with them to assist them in the decision-making process.</td>
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<tr>
<td>The parents, child, and principal make decisions about whether the child and/or peers participate in the IEP planning process.</td>
<td>With parent permission, others may participate as appropriate; possibly, these other members are friends and peers, public health, human services, respite care, medical community, private providers, potential employers, another education institution, park and recreation, extended family, mental health, and minority/cultural advocate.</td>
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The parents, child, and principal make decisions about whether the child and/or peers participate in the IEP planning process.
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<th>Question</th>
<th>Answer</th>
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| What procedures are in place to ensure that all team members, particularly teachers and others who provide input about the location of services, are involved in the IEP planning process? | Time is made available (through scheduling, substitute teachers, etc.) for teachers to plan as well as participate in meetings.  
Meetings are scheduled during the academic year at times convenient for working parents' schedules.  
Staff has access to resources (materials, training and assistance) as needed. |
| Where is the IEP meeting held?                                          | Consideration is given to whether the meeting location creates presumptions about placement for instruction.  
Meetings are held at the student's home if appropriate or necessary. |
| What's included in the statement of the student's current level of performance? | A summary of referral and assessment data is included.  
Examples of student data (both objective and subjective) are included. |
| What is included in the statement of special education needs?           | The statement of needs provides more specific information about the learner in order to plan a program for the learner. |
| What is the long-range vision for the student?                          | The vision includes the perspectives of parent, student, and other team members; it guides the establishment of the goals and objectives.  
Vision statements frequently refer to aspects of the environments that have implications for least restrictive environment placements, such as:  
- To be a contributing member of society.  
- To function as independently as possible.  
- To have an accepting peer group.  
- To be part of the community, with supports available as needed. |
| What is the typical environment for students this age?                  | The team considers the total community when identifying typical environments in which other students learn (e.g., home, family, classroom, job, peers). |
Are there guidelines for discussion of the most appropriate placement for providing services to learner's needs and how it is least restrictive for the learner?

Guidelines recommended in the state HANDBOOK FOR THE STATE RECOMMENDED INDIVIDUAL EDUCATIONAL PLAN are followed. They include:
- Discussing previous, current, and recommended sites and services.
- Discussing sites and settings that were considered but not chosen, and describing why these placements were not chosen.
- Discussing previous placements, plans and interventions and student progress with each.
- Discussing learner characteristics as they relate to placements considered.
- Discussing your programmatic components in determining regular education options for the learner.
- Reviewing and discussing the placement location chosen as it relates to the learner's specific needs as identified in previous discussion.

What is the appropriate IEP for the student?

The plan represents a consensus of the team after it has considered student needs, interests, and strengths, and has discussed the vision for the student and then determined goals and objectives.

Goals and objectives are age appropriate and based on needs and priorities.

The plan reflects the environment that is most appropriate for reaching objectives and that minimizes distance from typical environments.

The plan identifies to the extent possible the environment in which other students of similar age learn.
The plan specifies why typical environments are not appropriate if services are to be provided outside of mainstream settings.

For students served outside the mainstream for 50 percent or more of their day, the plan identifies the opportunities for interacting with nonhandicapped peers, including opportunities involving extra-curricular and nonacademic activities.

The learner has available the full range of activities, such as art, music, etc., that are available to peers who are not handicapped.

Specific staff are assigned service delivery responsibility on the IEP form and an IEP manager is identified to take primary responsibility for coordination of the educational program.

Everyone who has contact with the student assists in implementing the IEP.

The team determines an appropriate program by considering data about the need of the student, the services needed to accomplish the goals and objectives; and then where the services should be provided in accordance with the principle of LRE, with consideration given to the following questions:
- Can appropriate services be provided in the school (or other environment) that the learner would attend if not handicapped?
- Are services provided as close to home as possible?
- Are appropriate alternative placements available to the extent necessary to implement the goals and objectives?
- Are there potential harmful effects for the learner or for the quality of services needed if the least restrictive environment is selected?
- Is the placement chronologically age appropriate?
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<tr>
<td>What supports are needed to provide an appropriate education in the least restrictive environment?</td>
<td>Instructional methods and materials in the setting are appropriate for students of this age. The environment is the one in which independent use of skills is required. Administrative support is provided without exception. Funding, transportation, and equipment modification or purchase support is provided. Modifications of the environment (building, classrooms) are made when specified. Extra personnel are provided in the form of job coaches, peers, volunteers, and others as needed.</td>
</tr>
<tr>
<td>How can responsibility for students with special needs be assumed by the total education system, not just by special education?</td>
<td>A positive district philosophy, policy, or attitude toward all students is developed. Time is provided for general education staff to be trained, schedule planning meetings, etc. Efforts are made to invest building-level administrators in the process. Special efforts are made to involve all staff in decisions and/or services, including custodians, cooks, etc., as well as peers.</td>
</tr>
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<td>How are individualized curriculum and supports ensured?</td>
<td>Individualized curriculum and supports are written into the IEP. Alternative instructional strategies and curricular modifications based on the student's learning style and needs are identified on the IEP, and the person responsible is identified. The amount of time and type of direct, and indirect services are included on the IEP.</td>
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<tr>
<td>What planned regular education interaction opportunities are available for the learner?</td>
<td>The following options may be discussed for inclusion in the learner's IEP. (This is a partial list and should not be limited to):</td>
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What is done to provide for transition planning?

- The learner uses other common facilities in the school building, such as the lunchroom, hallways, and playground at the same time as students without disabilities.
- The learner has access to the variety of educational programs and services available to students without disabilities, such as art, music, industrial arts, consumer and homemaking education, and vocational education, etc.
- The learner attends special events and field trips with students without disabilities.
- The learner attends a homeroom with students without disabilities.
- The learner attends classes with students without disabilities.
- The learner has the same arrival/dismissal times as students without disabilities in the building.
- The learner has access to instruction during an extended school year if appropriate.
- The learner participates in school extracurricular activities.
- The learner rides the bus with students without disabilities.
- The learner has access to the community as a learning environment.
- The learner has opportunities for interacting with peers through peer tutoring or special friends.
- The learner's educational placement is barrier free.
- The learner has access to natural environments for learning and generalization of skills.
- The learner has access to modified instructional strategies and testing situations.

The possibility that a goal can be met in a less restrictive environment is continually reviewed.

A staff member from an anticipated less restrictive placement is included in planning meetings.

Outside agency people are included when appropriate.
When does the need for a specific intervention end?

New assessment information is requested when appropriate.

Guidelines are developed to help plan transition steps.

An intervention is no longer needed when the student is successful in the mainstream after a trial period without any special support.

An intervention is no longer needed when specified goals and objectives have been met.

What happens when special education services are terminated for a student?

A plan is developed for periodic follow-up of the student's success.

Records are kept that indicate dates and results of follow-up.

If the student experiences difficulties, concerns are brought back to the team.

LRE Red Flags in IEP Planning Process

"Red Flags" are warnings or cautions that recommended practices are not being implemented. The following is a list of several "red flags" for LRE implementation in the IEP planning process. This may be used as a checklist - to the extent that there are multiple checks in a program area or on an individual basis, this is a warning or note of caution that LRE issues should be given greater consideration.

- Individuals listed as team members do not actually participate in meetings.

- Regular education teachers are not involved in the planning process.

- All team meetings are allocated the same amount of time.

- All IEPs are written within the same month of the year, resulting in insufficient planning time for staff.

- Meetings for students with the same handicapping condition are always held in a specific location, implying service delivery in that location.

- The vision is not individualized for each student.

- Typical environments are not given consideration because they are not accessible.

- The "typical" environments that are identified are the same for all students, regardless of age or other characteristics.
* Services and personnel are assigned on the basis of handicap label rather than the student's needs.

* Several students in the same program have identical plans.

* Goals and objectives have remained the same for several review cycles.

* Goals and objectives are not realistic and have not been prioritized for attainment.

* No one is assigned responsibility for objectives on the IEP.

* The assigned staff person is inadequately trained or supported in carrying out this responsibility for IEP objectives.

* The environment is not specified on the IEP.

* All students with similar disabilities are served in the same site.

* The same regular education teachers have the students with handicaps in their classes.

* The student is not successful in the least restrictive environment because adequate supports are not available in the environment.

* Mandated services, such as transportation, are not addressed on the IEP.

* Students with certain limitations in mobility are not assigned to some locations because of architectural barriers.

* Certain goals and objectives are not met due to lack of appropriate materials or other supports.

* No one is assigned responsibility for modifications in curriculum or instruction.

* IEP does not reflect transition planning.

* Staff attend meetings for students in their building only.

* Special educators plan alone for students receiving special education services.

* Student is dismissed from special education services prior to meeting exit criteria.

* Student does not succeed in the mainstream after having met exit criteria.

* Most students have their special education services terminated at the end of an academic year without regard to exact progress.

* Records indicate that no review has taken place since special education services were terminated.
* LRE justification is a reiteration of needs or proposed services.
* Student is not successful in the environment without special education.

**Examples Of LRE Recommended Practices in IEP Planning Process**

The IEP planning process facilitates and presumes the provision of appropriate services in typical environments. Goals and objectives for the student are formulated prior to decisions about the provision and location of service. Justification is included on the IEP for instruction delivered in other settings. The IEP planning process is ongoing, flexible, and dynamic and includes service delivery, learning adaptations, review of the plan, and plan modifications. Team members share responsibility for assuring that the plan fits their vision for the student, is appropriate, and is implemented in the least restrictive environment. Plans for the transition of the student to new situations and environments and the modifications needed in those environments are incorporated into the process. The IEP generated by this process is a blueprint for the student's instruction in the least restrictive environment.

The IEP planning process addresses transition planning from year to year as appropriate, so that the student remains part of the peer group, which includes age appropriate or situationally appropriate persons such as coworkers. Transition planning encompasses the transition to a work environment, to a different school, or more subtle changes in placement within an environment. Planning involves all potential participants in the service delivery.

The *rationale for placement* contains student-specific reasons for the placement based on the student's needs as identified in the IEP, and indicates alternate placements that were considered and why they were not considered appropriate. The team considers typical classroom environments, and when instruction is not to occur there, the team justifies why. The rationale addresses a timeline for moving the student toward a less restrictive environment for those activities that occur in an environment different from that of the student's peers. The rationale follows the format of an example justification statement provided by a group of practitioners called: Metro SPLISE (Metro Strategic Planners for Low Incidence in Special Education):

**THIS PROGRAM IS MOST APPROPRIATE AND LEAST RESTRICTIVE BECAUSE:**
(David) needs full-time special education services provided in a regular second grade classroom. (David) can meet his objectives by partially participating in the general second grade curriculum with the support of a full-time management aide and six hours per week instruction by a licensed TMR teacher, in addition to the OT, PT, Speech, and Health Services that he needs. (David) needs opportunities throughout the day to work on his objectives in the same activities and lessons as his second grade peers. He should not be removed from his classroom except for community instruction and adapted physical education classes. All therapy services should be provided as part of functional routines in his classroom. The following placement alternatives were discussed: regular second grade classroom, resource room, self-contained classroom with independent mainstreaming, and self-contained classroom with supported
integration and mainstreaming. The team agrees that (David's) needs can be met as identified within the IEP in a regular second grade classroom with a full-time management aide. The other placements discussed are more restrictive than (David) needs at this time.

Inappropriate reasons (e.g., previous placements, space or scheduling difficulties, curriculum constraints) are not used as justification for placement outside of the regular setting (see Taylor, Biklen, Lehr, and Searl, 1987, for explanation and additional examples).

Current levels of performances, determined during the assessment process, are listed on the IEP and used as the basis for planning. Goals and objectives identify skills that lead to the appropriate level of participation in typical environments. Peer environments and activities (including clubs, counseling, extended day programs) are used as a reference point for planning individualized goals and objectives. Details are provided on how plans are to be implemented, with a student schedule indicating the amount of time and the activities in which the student participates. The instructional grouping in which the student will participate during the learning activity is specified.

Attainment criteria are specified on the IEP. Attainment of goals is based on the student's level of performance, not that of peers. Teaching methodology and appropriateness of objectives are considered.

The IEP lists accommodations, modifications, and supports required for the student to participate in all learning environments, remembering that the length of school day and school attendance hours are the same as for peers. A staff person is designated to provide appropriate assistance with these accommodations, modifications, and supports. This person is listed on the IEP. All staff providing services to a student are informed of changes in accommodations, modifications, and supports.

Review of the IEP is conducted at least once per year, and more frequently if determined necessary by the child's needs and the team. Review dates are listed on the IEP. Review dates are selected by considering: (1) whether enough time has passed to determine the appropriateness of goals and objectives, and whether learning has occurred, yet prior to any change in environment or change in goals and objectives, (2) requests of parent or other team members, (3) lack of progress by student, and (4) student accomplishment of goals and objectives on the IEP.
CHAPTER 5
INSTRUCTIONAL DELIVERY

LRE Philosophy in Instructional Delivery

Appropriate instructional delivery occurs in specific environments selected for individualized goals. Thus decisions about instruction rely heavily on the IEP process, which explicitly identifies individual goals. Decisions related to the least restrictive environment in which instruction can occur are intertwined with decisions about student needs. Instructional delivery decisions should not be based on existing program options.

While instructional delivery plans are derived from the IEP process, the implementation of the plans must be given considerable attention. Issues related to the extent to which regular and special education personnel can realistically coordinate goals and objectives are relevant, as are questions about supports actually needed to avoid student failure. Attention also must be given to alternative instructional methodologies that might be used.

Instructional delivery is a process of adapting to individual needs. Although this adaptation process may not be used extensively for students without learning or behavior difficulties, it is a critical element in instructing youngsters who have handicaps. Principles of effective instruction should guide the instructional delivery process.

Key Questions and LRE Recommended Practices In Instructional Delivery

Instructional delivery is the step during which services are provided to the child in a manner consistent with the IEP. Included in this step are periodic reviews of pupil progress and modifications of instruction, placement, etc. LRE issues are relevant here because it is during this step when decisions about the least restrictive environment are implemented.

**KEY QUESTIONS**

Are the goals and objectives for special education also emphasized in the regular program (e.g., speech, reading, social studies, etc.)?

Does consultation occur between regular and special educators?

**RECOMMENDED PRACTICES AND STRATEGIES**

Regular program personnel are informed of special education goals and objectives.

Special education personnel provide regular educators with ideas about ways to reinforce special education goals and objectives within their routines.

Sufficient time is provided for consultation to occur outside of prep time or lunch time.

Consultation is viewed by both regular and special educators as beneficial.

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<tr>
<th>Question</th>
<th>Response</th>
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<tbody>
<tr>
<td>Is the student given adequate support to avoid failure in mainstream classes?</td>
<td>Amount of support provided initially is determined by student needs. Support needs are continually evaluated and adjusted as instruction proceeds. Learner success in LRE placement is continuously monitored.</td>
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<tr>
<td>How are paraprofessionals used to provide appropriate services throughout the day?</td>
<td>Paraprofessionals are provided with adequate training about providing appropriate services. On-going supervision is provided to paraprofessionals. Paraprofessionals are monitored on a regular basis.</td>
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<tr>
<td>Are alternative instructional methods available?</td>
<td>Cooperative learning opportunities are available for all learners. Peer tutoring approaches are attempted.</td>
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<tr>
<td>How much flexibility is in the learner's daily schedule?</td>
<td>The extent of flexibility is reflected in the student's daily schedule. Flexible schedules allow additional help to be provided to the student or additional time on new content.</td>
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<tr>
<td>Do students with handicaps blend with the other students in the building?</td>
<td>Learners with handicaping conditions in age and peer are assisted in finding appropriate clothing. Learners with handicapping conditions are grouped with students who do not have handicapping conditions.</td>
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<tr>
<td>Are multi-level testing procedures available in the classroom?</td>
<td>Adaptations are made to testing materials to reflect the skill and age levels of participants.</td>
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<tr>
<td>Is the instructional delivery system sensitive to student performance and responsive to change?</td>
<td>On-going formal and informal communication occurs among those involved in the delivery system.</td>
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</table>
Is there a plan for assuring effective instruction through an ongoing evaluation process?

An evaluation plan is followed to collect data that accurately reflect the learner's performance.

Have the technical assistance needs in the instructional plan been sufficiently addressed?

All possible strategies are considered to make resources and services available.

Are opportunities for success being afforded to the learner in the instructional plan?

Modifications that foster success are clearly defined, communicated and operational at the onset of programming. Team members understand their responsibilities.

LRE Red Flags in Instructional Delivery

"Red Flags" are warnings or cautions that recommended practices are not being implemented. The following is a list of several "red flags" for LRE implementation in instructional delivery. This may be used as a checklist - to the extent that there are multiple checks in a program area or on an individual basis, this is a warning or note of caution that LRE issues should be given greater consideration.

* Services consistently are delivered in the same environments for learners within a disability category.

* Skills are taught and practiced as "time fillers" in artificial settings.

* Instruction is provided without input from all team members, especially regular classroom teachers.

* No time is provided for consultation or coordination between regular and special education.

* Duplicating, overlapping or dysfunctional services are provided (e.g., a child who does not understand signs has an interpreter).

* The student is allowed to sit idly when the goal-related activity is completed.

* Limited support is provided to the learner even when failure is beginning to occur.

* A student is pulled from a content course where a skill can be practiced in order to receive instruction in an isolated nontypical setting (e.g., pulled out of a home economics class to practice eye-hand coordination with an occupational therapists).

* People involved in student's instruction do not have opportunities to talk to each other.

* Paraprofessionals working with student are not provided with any special training.
• Educators have not attended inservices about appropriate integration options.

• No one reviews daily work or responds to evaluation information by making needed changes.

• The student does not receive services due to logistics, lack of expertise, equipment, time, space, money, etc.

• Instructional modifications do not reflect the child's needs.

• The same instructional methods are always used with the student.

• The student's schedule is inflexible, leaving no time for additional help when it is needed.

• The student is seated at the very front of the class, with no other students within five feet.

• All students with handicaps are grouped with each other whenever small group activities are used.

• Tests are not given to the student with handicaps because they are considered to be too difficult.

Examples of LRE Recommended Practices in Instructional Delivery

*Instructional environment* decisions follow from the IEP process. Consideration is given to providing instruction in more than one setting, possibly including not just the school but also the home and community. If handwashing skills are the focus of instruction, handwashing is taught and practiced at the sink before lunch in school, and in the bathroom at home before dinner. Even when academic goals are identified, attempts are made to teach them in natural integrated settings. A student with limited reading skills still is expected to participate in an integrated reading class by turning pages in a book and attending to the text or illustrations. A student who is hearing impaired and understands signing can participate in general education classes by being provided an interpreter. Rather than pulling a student who is visually impaired from the classroom to practice eye-hand coordination, the student can be provided with an amplification screen in the classroom to use in completing assignments.

*Instructional method* decisions are made with input from key individuals, including the student. In this way, chances are increased for gaining awareness of peripheral strengths, those that elicit positive reactions. Communication and cooperation are encouraged through daily memos, brief conversations, and perhaps weekly meetings that are used to transfer information, concerns, and questions among key individuals. Alternative instructional approaches that promote interactions between students with and without handicaps (e.g., cooperative learning, peer tutoring) are used. To the extent possible, the student with handicaps is blended in with other students rather than separated from them.
Instructional monitoring is ongoing and relevant. Data considered in monitoring include daily assignments, skill charts, behavior and attitude ratings, and other measures as they are appropriate. As needed, modifications are added to foster success. As additional alternative approaches beyond the expertise of team members are deemed necessary, the team may use peer coaching or team teaching techniques to develop and expand instructional expertise.
CHAPTER 6
PARENT INVOLVEMENT AND DUE PROCESS

LRE Philosophy In Parent Involvement And Due Process

Since parents are in a unique position to know and understand their children, parental involvement in the education process is essential in assisting their children to reach their maximum potential. Key elements in ensuring that parents are effective in the process are preparation of parents to participate in the due process system, and empowerment of them to use their knowledge as parents.

Districts and parents alike share responsibility for educating one another about their respective roles in the educational decision-making process. Districts are in a position to provide a wealth of information to parents about the decision-making process in education. Parents may find themselves in the position of "learners" in the process; they must fully educate themselves about the many systems and programs involved. School districts must recognize the value of facilitating parental involvement in the process. Both parties must recognize each other as equal partners with a common goal: providing appropriate services in the appropriate settings, based on the student's unique individually-identified needs.

Key Questions and LRE Recommended Practices In Parent Involvement and Due Process

Parents must be involved in programming for their handicapped son or daughter and must understand due process rights. In these roles, it behooves them to understand the LRE principle and how it relates to their child.

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<tr>
<th>KEY QUESTIONS</th>
<th>RECOMMENDED PRACTICES AND STRATEGIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are there indicators that parent(s) are fully aware of their rights and responsibilities as the IEP process is initiated (e.g., at pre-referral)?</td>
<td>Parent workshops are regularly available in the district or community.</td>
</tr>
<tr>
<td>Are parents involved in the educational decision-making process from the initial time of concern?</td>
<td>District has a well disseminated policy on conflict resolution and on assisting students through parent involvement in a well-designed, problem-solving format.</td>
</tr>
<tr>
<td></td>
<td>Initial contact involves a three-phase process that includes a phone call, in-person conference, and follow-up letter of documentation.</td>
</tr>
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<td></td>
<td>District is involved in dissemination and/or promotion of materials, workshops, etc.</td>
</tr>
</tbody>
</table>
Have parent and school responsibilities in implementation, evaluation and follow-up to interventions been clearly identified?

Are there indicators that parental perception of the problem and the perceptions of school staff are closely matched?

Are parents involved or at least informed in the process of developing a justification for referral?

Are parents involved in the pre-referral process by providing information about relevant factors such as health, family, behavior, etc?

Is the importance of informed consent for the assessment process recognized?

Are parents involved in the assessment process?

A variety of options exist for addressing the identified concern. Options within the due process system are fully explained.

A written plan for implementing intervention strategies is on file; it clearly identifies interventions to be used, who is responsible, and personnel and procedures for evaluation and follow-up.

Specific data collection procedures are identified for those decisions that the team agrees will be data based.

Consensus is reached in identifying and addressing the problem or concern, with parents participating and consistently providing input about the problem or concern.

Parents are contacted when concerns arise so that they are involved in each step leading up to and including the referral process.

Parent inventories, questionnaires, and other tools are routinely used to involve parents in the pre-referral process.

District has written policy on file about procedures for receiving parental requests for referral.

Local standards are established for achieving informed consent based on State and Federal law, rules, and regulations.

Parents are made to feel a part of the assessment process and are engaged by completing surveys, checklists, and other similar procedures.

Meetings are routinely held to review assessment data.
<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
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<tbody>
<tr>
<td>Is parental involvement reflected in the statement of the student's</td>
<td>Information is readily available on all assessment procedures used. Assessments are conducted in a variety of settings. Assessment process takes into account parent or student &quot;individual&quot; needs and circumstances (e.g., use of interpreters).</td>
</tr>
<tr>
<td>current level of performance?</td>
<td>The current level of performance statement is written in terms that specifically describe the learner's performance and that are measurable and understandable.</td>
</tr>
<tr>
<td>Are there indicators that the statement of need reflects the concerns</td>
<td>Parent is directly involved in the development and writing of statements that describe the learner's current level of performance.</td>
</tr>
<tr>
<td>of all involved as well as current assessment results?</td>
<td>The current level of performance statement identifies performance in a variety of settings, including home, community, and other non-school environments.</td>
</tr>
<tr>
<td>Is the learner involved in developing the statement of need when and</td>
<td>Parents are fully involved in developing the statement of needs.</td>
</tr>
<tr>
<td>where appropriate?</td>
<td>Statement of need is carefully developed to reflect current assessment results as well as other input.</td>
</tr>
<tr>
<td>To what extent are parents involved in the development and writing of</td>
<td>Parents are encouraged to participate in the process of discussing their &quot;vision&quot; for their youngster and in writing annual goals and objectives by having them participate in pre-IEP and post-assessment goal and objective &quot;brainstorming&quot; sessions.</td>
</tr>
<tr>
<td>goals and objectives?</td>
<td>Training and resources are available to assist parents in procedures for developing appropriate goals and objectives.</td>
</tr>
</tbody>
</table>
Goals and objectives reflect involvement on the part of all team members.

Goals and objectives are based on a shared vision, used to direct the student's program, and reviewed and revised regularly.

Is a full array of options discussed and reviewed regularly regarding services needed to assist the learner in achieving the identified goals and objectives?

A full array of service options is identified and discussed with parents.

Are there assurances that the team decision about services needed is final? Are identified services directly related to the annual goals and objectives, which are based on the statement of need and the student's current level of performance?

Team decisions are highly valued, and services that are provided are directly based on the team's decision.

Are identified services directly related to the annual goals and objectives, which are based on the statement of need and the student's current level of performance?

Are justifications for services fully documented? Are parents involved in the process of justifying services?

The team, including parents, is involved in justifying services.

**LRE Red Flags in Parent Involvement And Due Process**

"Red Flags" are warnings or cautions that recommended practices are not being implemented. The following is a list of several "red flags" for LRE implementation related to parent involvement and due process. This may be used as a checklist - to the extent that there are multiple checks in a program area or on an individual basis, this is a warning or note of caution that LRE issues should be given greater consideration.

* Limited amounts of parent involvement are seen in the district.

* Workshops and other educational opportunities for parents to learn about the educational decision-making process are limited or nonexistent.

* Limited amounts of information are disseminated or available to parents.

* Initial contact is impersonal, via a letter or written document.

* Follow-up is missing after the initial contact with parents.

* Identified options for resolving a problem or using the due process system are limited or nonexistent.
* Decisions appear to have been made with little or no parental involvement.

* No written plan exists.

* Team does not meet.

* Decisions are made in isolation or by individuals prior to a team meeting.

* Little attempt is made to involve the parent in the process.

* Procedures for receiving parental referrals do not exist.

* Parent requests for referral are not accepted.

* Referrals are not routinely made as part of an identified team process.

* Initial contact with the parent is made at the time of referral.

* Limited or no justification exists for a referral.

* Parents do not understand what they are agreeing to when they sign the consent form.

* Parents are not asked to provide any information as part of the assessment process.

* The first time that assessment data are reviewed is at the IEP conference.

* Parents do not seem to know that they can disagree with other team members or the team decision - few parents openly discuss items, disagree, or refuse to sign the IEP.

* No one knows why certain instruments are used, or anything about the development or norming of them.

* All assessments occur in the psychologist's (or another person's) office.

* Parents' or student's desires have no effect on the assessment process.

* The current level of performance statement is written in heavy "jargon" terminology, and includes characteristics that are not measurable or specific.

* Parent is offered a "canned" or pre-developed statement of current level of performance at IEP meeting, with little or no opportunity for input.

* The current level of performance statement reflects performance in only one or a limited number of environments.

* The current level of performance statement reflects only current assessment results.
- Even when appropriate, the learner is not involved in the development of the statement of current level of performance.

- Statement of need is pre-developed and presented to parent at IEP meeting.

- Parental input is minimized or not addressed at IEP meeting.

- Statement of need does not reflect assessment results.

- Parents are not involved in developing goals and objectives.

- Ten-day period for parents to review goals and objectives for approval is not observed.

- Parents frequently refuse to sign the IEP.

- Parents never refuse to sign the IEP.

- Few goals and objectives are listed on the IEP.

- Services are determined before the IEP process is completed.

- Team decisions frequently are vetoed by higher authority.

- Parents are told what services are available, without their input.

- Statement of justification for services is not part of the IEP or does not reflect individual learner needs.

- Parent is not involved in process of developing a justification for services or placement.

- Documentation of justification does not exist, is limited, or is unavailable to parents.

- Justification statement for placement is developed ahead of time and presented to parents.

**Examples of LRE Recommended Practices In Parent Involvement And Due Process.**

Parents are involved throughout the process of making decisions about their child, beginning from the first suspicion of a problem (and ideally, even before this) through provision and monitoring of special education services. Parents are empowered and treated with respect for their unique knowledge about the child and the contributions they can make to understanding the child's strengths, weaknesses, and interests, as well as educational needs and overall goals. Parents are informed about placement options, the least restrictive environment principle, and ways to balance considerations of "restrictiveness" and "appropriateness."
During the time when problems are first identified, the parent is fully informed through a phone call, followed perhaps by a conference with the teacher or other school person. In addition, the parent is aided in knowing what school expectations are through workshops and disseminated materials. In this way, the parent is a partner in identifying concerns, and the school has a procedure for accepting parent referrals that recognize this parent-school partnership.

Pre-referral concerns and interventions reflect a match between school and parent. Parents are contacted early and communication occurs with the goal of reaching consensus about the nature of a problem, the types of background information relevant to the problem, and the types of interventions to try to solve the problem in the setting in which it occurs. Parents provide input about reasonable interventions, and participate in them to some extent, ranging from full implementation (e.g., a home contract on homework completion) to simply receiving periodic reports on results of per-referral interventions.

Formal consent is obtained in a manner consistent with state and federal standards. Since home-school communication has been ongoing since the first expression of concern, there is agreement on the needs for assessment and parents participate in decisions about assessment information needed. Parents provide additional information, if needed, about behavior at home and community settings. Parents provide input on factors that may affect assessment results and where assessments should be conducted.

Statements of current level of performances, need, and goals and objectives are written jointly by school and parents. Parent input is reflected in all statements. Statements reflect specific settings of relevance. Throughout the process of writing these statements, the "vision" for the youngster is considered. Parent involvement throughout the writing stage is promoted through cooperative relationships with school personnel, bolstered by specific training and other resources to help parents, if needed.

In the team meeting and the IEP development, the parents see themselves as part of the team, whose thoughts are valued. They also see the team process as the decision-making vehicle. Its decisions are not changed by other authorities. As part of the team, the parents understand and help write the justifications for services and their location. The document is in a language the parents and others understand.
CHAPTER 7

STAFF TRAINING

LRE Philosophy In Staff Training

Staff training is a key element in the provision of services to students with handicaps. All students can learn and all staff (adults who come into contact with students in the educational setting) come with knowledge, skill, talent, and abilities. Through effective training or staff development ("training" and "development" are used interchangeably), the staff will be able to accommodate all learners. The staff includes licensed teachers, educational assistants, bus drivers, cooks, secretaries, administrators, school board members, adult volunteers, and others.

A school should be viewed as a mini-community within a larger community, one that should accommodate all learners within its attendance area. All children and youth must be seen as having strengths and being capable, contributing members of the school community. Any differences in learning styles and abilities must be accommodated in a plantful manner. For staff members to meet the educational needs of all students in a least restrictive environment, they will need to be creative and collaborative in their approach.

Key Questions and LRE Recommended Practices In Staff Training

Two primary issues should be addressed when considering staff development or training about the least restrictive environment principle. First, what should be the content of training? Second, how should training be implemented?

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<tr>
<th>KEY QUESTIONS</th>
<th>RECOMMENDED PRACTICES</th>
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<tr>
<td>What content should be included in staff training?</td>
<td>Content should include information that applies to a total building and information that is specific to a student. Stories about successful experiences of children, parents, and teachers should be an integral part of all training sessions. The key components to a comprehensive plan are: Definitions and comparisons of terms such as LRE, integration, inclusion, and mainstream, as well as awareness of terminology peculiar to regular education or special education (assurance of mastery, learner outcomes, conciliation process, levels of performance).</td>
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</table>

Definitions and description of the changing roles of all staff in the delivery of educational services in a least restrictive environment.
What supports are available for schools serving students with all types of handicaps?

- Information on making accommodations for all learners, including adapting curriculum, changing expectations, and altering teaching styles, with the individual responsible for each action made clear.
- Models and opportunities to demonstrate and experience collaboration and consultation.
- A process for answering questions and giving needed information regarding medical issues for certain students.
- A wide variety of interventions that can be accessed easily and used in quality education for all students.
- Information on how to set appropriate expectations for students, and how to accommodate changing expectations.
- Local personnel are available for ongoing technical assistance.
- Follow-up training is provided in a timely manner.
- Within-district support includes special education directors, experienced teachers, previous teachers of students, parents who speak on behalf of their own child, support staff, social workers, counselors, nurses, and administrators.
- Outside district support includes the state department (MDE), colleges and universities, advocating agencies, and departments of social services. Districts with a history in integration are excellent sources for support.
- Training covers both how to ask for help and how to select the best source of support.
- Stories of first hand experiences on the part of staff and parents are a most compelling first step in changing attitudes.

What approaches are effective in changing attitudes?

- Information on making accommodations for all learners, including adapting curriculum, changing expectations, and altering teaching styles, with the individual responsible for each action made clear.
- Models and opportunities to demonstrate and experience collaboration and consultation.
- A process for answering questions and giving needed information regarding medical issues for certain students.
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- Training covers both how to ask for help and how to select the best source of support.
- Stories of first hand experiences on the part of staff and parents are a most compelling first step in changing attitudes.
How should training needs be determined?

Students speaking about experiences with their age mates is a positive method.

Many videos and other aids present the valuing of inclusion.

Speakers who are visionary in their approach to "least restrictive environment" are extremely effective motivators.

A sincere presentation without arguing and open confrontation is best.

Phrases that trigger resistance to change must be addressed. Some of these are:
- Why do I have to do this?
- Why so much for so few?
- How can I do this on top of...?

A needs assessment conducted district wide, by building, by grade level, by classification, or by department determines specific staff training needs.

Individuals' self-identifications, evaluation reports, or previous experience and training determine training needs.

Child-specific needs also determine staff training needs.

All staff know the actual number of students with disabilities in each school attendance area and the timelines for students to be returned to their home school.

The extent of each staff person's anticipated involvement is communicated and understood.

How should training benefits be presented to increase staff commitment?

Use recognition, emotional appeal, or peer pressure.

Identify participants as leaders in the forefront of national change.

College credit, stipends and educator exchange are means of reward.
What methodology should be used for staff training?

- Peer pairing or mentoring procedures.
- Building-based teams involved with a particular student to serve as a model.
- Lectures, videos, role playing, telecommunications and reading.
- Send teams to another school to observe and problem solve.
- Use different grouping methods, including one-to-one small groups and larger groups.
- Include MAPS (McGill Action Planning Systems; see Vandercook, York, and Forest, 1989), student and teacher stories, and cooperative groups.
- Observe students with age mates in the education setting, then analyze and discuss observations.
- Use staff development personnel and effective teachers in educational organizations. Develop networks with districts, universities, colleges, and the state department.

What should be done to find presenters for training?

- Compile and update a list of presenters including teachers who have experienced success, as well as parents and people with disabilities.
- Use staff development personnel and effective teachers in educational organizations. Develop networks with districts, universities, colleges, and the state department.

What funding can be obtained to support training activities?

- State staff development allocations of $10 per special education student.
- Local district fund.
- Chapter II money.
- Education Districts.
- ECSUs.
- Private industries and foundation grants.
- Collaborative arrangements with other public agencies, such as Department of Social Services.
How should the effectiveness of staff development be measured?

- Use evaluation forms developed by the presenter.
- Develop evaluation forms that assess interest, informativeness, clearness, and applicability of training sessions.
- Assess implementation of training after a short period of time month.
- Do follow-up activities after training.
- Hire consultant to conduct evaluation.

**LRE Red Flags in Staff Training**

"Red Flags" are warnings or cautions that recommended practices are not being implemented. The following is a list of several "red flags" for LRE implementation related to staff training. This may be used as a checklist - to the extent that there are multiple checks in a program area or on an individual basis, this is a warning or note of caution that LRE issues should be given greater consideration.

- Insufficient time for planning and participation in staff development.
- Commitment not obtained from staff.
- Lack of funding for training.
- No available LRE models.
- Initiative for training comes from special education.
- Uncertain of board and superintendent support of LRE.
- Uncertain of administrative support of LRE.
- Negative attitudes of people toward integration of students with handicaps.
- Training is contractual obligation.
- Mixed messages from both the state and federal Departments of Education about LRE.
- Potential gaps in LRE services.
- No ownership of the student.
- Little continuity from year to year in staff training.
- Negative reactions of other parents toward integration of students with disabilities.
* Parental resistance to inclusion.
* Negative community reaction/attitude.

Examples of LRE Recommended Practices in Staff Training

The MDE Unique Learner Needs Section has several important documents available to assist districts in planning Personnel Development activities:

1. The *Minnesota Comprehensive System of Personnel Development Manual* outlines (a) the components of a staff development program, sample planning tools such as needs assessment surveys, planning forms and calendars, evaluation forms and group process information.

2. The statewide *CSPD Needs Assessment Survey* provides information on a statewide and regional basis regarding training needs of various categories of staff in the different topical and disability areas.

3. The *SpecialNet Minnesota Calendar Bulletin Board* provides a mechanism to advertise training activities provided by MDE, regional units and some local districts.

4. Paraprofessional Training Resource Lists are available for both supported employment and education staff development training manuals from the Unique Learner Needs Section of the Minnesota Department of Education. Future information will be centered around a cross categorical grid outlining paraprofessional competencies and functions.

In addition to the documents listed above, an in-depth staff development program titled, *Learning Strategies*, has been developed in Kansas and is available from the Institute for Research in Learning Disabilities, The University of Kansas, Lawrence, Kansas 66045. This program outlines a process for training regular and special educators together to establish a collaborative relationship and transfer specialized skills and knowledge from the special education program to the mainstream classroom.
CHAPTER 8

SCHOOL/CLASSROOM MODIFICATIONS

LRE Philosophy in School/Classroom Modifications

The physical plant of the educational environment, including classroom, building, and grounds, should accommodate the learning of all students. When the educational process takes place off the actual school site, every consideration should be given to ensure that no learner is excluded.

Accessibility is just one part of providing for all students in the least restrictive environment. Students need access to teaching stations, restroom facilities, gymnasiums, pools and locker rooms, and the external grounds. In restrooms and locker rooms, they need access to mirrors, hair dryers, sinks, showers and dressing rooms. Libraries are central to the educational process and all students need access to them. This includes use of the card catalogue, research indexes, study carrels, check-out counters and any technology available to other students. Architectural standards and consultation with person(s) who have mobility impairments must be included in the planning to assure that the dignity of the individual is preserved.

Modifications of classroom, building, and other sites can be either short-term and long-term solutions. Short-term solutions should be short term. Short-term modifications made for a given student should be for not more than one to two years while plans for the long-term solution are being implemented.

Key Questions and LRE Recommended Practices in School/Classroom Modifications

In considering modifications in the physical plant—the school or classroom—both short-term and long-term solutions should be considered.

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<thead>
<tr>
<th>KEY QUESTIONS</th>
<th>RECOMMENDED PRACTICES</th>
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</thead>
<tbody>
<tr>
<td>What short-term modifications can be made to the classroom?</td>
<td>Physical size of the classroom, furniture and equipment essential to the students' learning are considered and the need for items are prioritized. Unnecessary furniture and equipment are eliminated, if possible, to minimize overcrowding.</td>
</tr>
<tr>
<td>What short-term modifications can be made to the building?</td>
<td>Individuals knowledgeable in the area of physical disabilities are consulted to help meet the needs of the student in the particular educational situation.</td>
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<td></td>
<td>Short-term modifications to a building take into consideration the needs of the specific students involved.</td>
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</tbody>
</table>
What short-term modifications can be made to other sites?

The purposes of educational experiences at sites other than the building are determined.

If a site is considered inaccessible, alternative sites that meet the intended educational purpose are sought.

Adjustments such as a special wheelchair, an adult assistant, a ramp, a key to the elevator, are made (with considerable pre-planning) to make the education experience possible for all students.

All buildings are surveyed and plans developed to make each facility accessible to all students, staff, and community. Funding is sought and obtained to make all buildings accessible and to achieve long-term (permanent) modifications.

How is it decided that long-term solutions are needed?
<table>
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<tr>
<th>Question</th>
<th>Answer</th>
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<tbody>
<tr>
<td>What are appropriate approaches to long-term solutions for classrooms?</td>
<td>When new buildings are being planned, priority is given to larger classroom space (900-1000 sq.ft.), and adequate footage is planned for all other teaching stations, libraries, vocational education stations, and science laboratories. Improved lighting fixtures, accoustical treatment, and temperature controls are used to enhance the learning of all students. Storage space in all learning areas is adequate to meet typical needs as well as extra needs for specialized equipment.</td>
</tr>
<tr>
<td>What are appropriate approaches to long-term solutions for buildings?</td>
<td>Plans for permanent modifications and new construction include a focus on accessibility. Buildings are made accessible by including elevators, ramps, and railings. All areas (including restrooms, gymnasiums, swimming pools, locker rooms, science laboratories, libraries, nurse stations, and offices) are made accessible through designs that include wider door frames, electrical eyes, door openers, mirrors, telephones, and hair dryers as just a few of the necessary adjustments. Playgrounds, sidewalks, and parking areas are designed to accommodate all learners. Educators assume responsibility for increasing the public's awareness that all community sites should be accessible to all community members. A community that values lifelong learning will make a commitment to accessibility. Stadiums, arenas, auditoriums, museums, and theaters are considered to be learning sites and therefore are strongly encouraged to be accessible.</td>
</tr>
</tbody>
</table>
LRE Red Flags in School/Classroom Modifications

"Red Flags" are warnings or cautions that recommended practices are not being implemented. The following is a list of several "red flags" for LRE implementation in school and classroom modifications. This may be used as a checklist - to the extent that there are multiple checks in a program area or on an individual basis, this is a warning or note of caution that LRE issues should be given greater consideration.

* Costs for building modifications are high, sometimes necessitating a referendum, which is not considered or consistently is not passed.

* Clear direction or commitment for building modifications does not come from the top (community, school board, Department of Education).

* Lack of knowledge about numbers of people in the total community for whom accessibility is needed.

* Long period of time from identification of needed building modifications to resolution.

* Lack of consensus on what needs to occur in order to achieve accessibility.
Examples of LRE Recommended Practices in School/Classroom Modifications

In January of 1988 all Superintendents and Directors of Special Education were sent a copy of the videotape entitled, "Barriers to Growth and Independence." The purpose of this videotape was twofold: to generate discussion at the local level regarding the barriers to independence encountered daily by persons with handicaps; and to assist local policy makers in assessing the barriers present in their districts and initiate actions to make their buildings barrier free.

Two additional support documents are still available from the Unique Learner Needs Section. The first is the Building Survey which was developed to assist districts in conducting a needs assessment for each building. The survey focuses on public buildings and is consistent with the Uniform Federal Accessibility Standards and Minnesota building codes. In cases where there is not agreement between these two sets of standards, the Survey advises the more restrictive requirement.

The other support document is a catalogue prepared under a contract with Julee Quarve-Peterson, Inc., as a resource for school districts. Neither the contractor nor MDE staff were able to review or evaluate all of the items in the catalogue, and no endorsement of products as to use and function is intended or implied. It is the responsibility of local school staff to ensure that any items purchased meet standards set by law, rule or code.

In conclusion, we hope these documents and materials will assist you in assessing your district's needs and provide some ideas as you plan for the removal of architectural barriers. M.S. 16B requires that, prior to construction, school districts submit plans/specifications to the Department of Administration, Building Codes and Standards Division. It is advisable to consult with that agency prior to finalizing plans for construction or modification of buildings. Please contact Robert H. Fisher at (612) 296-4164 if you have questions regarding this information.
BIBLIOGRAPHY

Bibliography


### APPENDIX

**RECOMMENDED PRACTICES/LRE PARTICIPANT LIST**

**RIVERWOOD CONFERENCE CENTER**

**August 3-4, 1989**

<table>
<thead>
<tr>
<th><strong>Parents</strong></th>
<th><strong>Principals</strong></th>
<th><strong>Directors of Special Education</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Pattianne Gumatz</td>
<td>Linda Lawrie</td>
<td>Marilyn Marsh</td>
</tr>
<tr>
<td>North St. Paul, MN</td>
<td>White Bear Lake, MN</td>
<td>Denny Ulmer</td>
</tr>
<tr>
<td>Genny Lynch</td>
<td>Evert Arnold</td>
<td>Park Rapids, MN</td>
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<tr>
<td>Minneapolis, MN</td>
<td>Bemidji, MN</td>
<td></td>
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<tr>
<td>Jane Johnson</td>
<td>Jim Mergens</td>
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<tr>
<td>Duluth, MN</td>
<td>Bemidji, MN</td>
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<tr>
<td>Jennifer Otto</td>
<td>Sanford Nelson</td>
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<tr>
<td>Mendota Heights, MN</td>
<td>Onamia, MN</td>
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<tr>
<td>Marge Mann</td>
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<td>Marshall, MN</td>
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<tr>
<td>Tom Virnig</td>
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<tr>
<td>Mendota Heights, MN</td>
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<tr>
<td><strong>Regular Educators</strong></td>
<td><strong>Special Educators</strong></td>
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<tr>
<td>Diane Janssen</td>
<td>Tom Cain</td>
<td>Jan Manchester</td>
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<tr>
<td>Ellsworth, MN</td>
<td>Hastings, MN</td>
<td>St. Paul, MN</td>
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<td>John Augustine</td>
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<td>St. Cloud, MN</td>
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<td>Tom Cain</td>
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<td>Regular Educators (cont.)</td>
<td>Special Educators (cont.)</td>
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<tr>
<td>Kathy Peterson</td>
<td>Judi Knutson</td>
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<td>Duluth, MN</td>
<td>Waconia, MN</td>
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<tr>
<td>Marcia Munt</td>
<td>Ellen Caughey</td>
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