

A PARENT'S GUIDE to IEPs



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This guide is intended for parents and legal guardians of children with disabilities—especially those who are new to special education. Whether you are simply wondering about your child's academic progress this year or preparing for the annual IEP meeting, this paper has information that can help guide you through the language and processes that are specific to special education.



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Preparing for the Development of an IEP

While the annual IEP process can be daunting and complex, in order to ensure successful outcomes, there are several steps that must be followed before that process even begins:

- Meeting with the academic support team to review concerns about your child's progress
- Monitoring the progress of classroom-based interventions
- Meeting with the support team again to discuss next steps and whether to move forward with evaluations
- Scheduling psychological and educational evaluations with the school psychologist
- Receiving the results of the evaluations and learning what they mean
- Participating in an **initial eligibility meeting** to determine whether your child is eligible for special education services
- Scheduling a follow-up meeting with the support team to develop the IEP

This may seem like a lot and can feel overwhelming at times with all of the meetings to attend, paperwork to review, and technical terms to learn. But, this initial IEP development phase is the beginning of a process that ensures that your child will receive the support he or she needs to progress and succeed. Becoming an informed parent is key to advocating for your child. Knowing what to expect before the first IEP meeting will go a long way toward easing your nerves and boosting your confidence as your child's best advocate.



The Individuals with Disabilities Education Act (IDEA)

The Individuals with Disabilities Education Act of 2004 (IDEA) is the nation's special education law. It is an extremely important piece of legislation that guides schools and families throughout the special education process. IDEA ensures eligible children with disabilities have access to a free and appropriate public education (FAPE). A "free and appropriate public education" means that children with disabilities must be able to attend school free of charge and receive an Individualized Education Program (IEP) with special education and related services designed to meet their learning needs (IDEA, 2004, § 300.101).

IDEA explains what must be included in an IEP, and it outlines several important rules that schools must follow when creating and revising IEPs. It also provides specific rights and protections to children with disabilities and to their families. These rights and protections are called **procedural safeguards**.

IDEA has been in existence for more than 40 years. Here's a brief timeline of its history:

- In 1975, President Gerald Ford signed into law The Education of Handicapped Children Act (Public Law 94-142). This was a landmark civil rights measure that opened public school doors to millions of children with disabilities.
- In 1990, the law was amended and its name was formally changed to the Individuals with Disabilities Education Act.
- In 1997 and 2004, IDEA was amended again. Amendments reflected an increased emphasis on access to the general education curriculum, provision of services for young children from birth through five, transition planning, and accountability for the achievement of students with disabilities.
- In 2015, IDEA was updated with the passage of the Every Student Succeeds Act (ESSA).

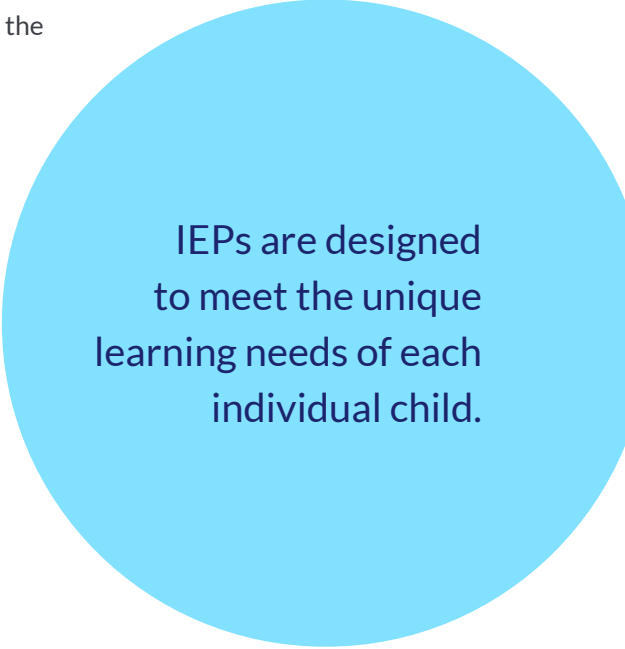
Reference: [U.S. Department of Education](#)

The Big Picture View of the IEP

So, we know the IEP is required by IDEA. But what exactly is it? How is it structured? Can it be changed? How is it implemented? What roles do parents play?

First, an IEP is a confidential legal document. It serves as a roadmap for a child's special education experience. Its primary purpose is to establish measurable annual goals for the child and explicitly state the special education and related services that the school will provide for the child ([Center for Parent Information and Resources \(CPIR\), 2017](#)).

An IEP includes detailed and data-based information about a child's strengths and challenges, including how his or her disability impacts learning. It covers topics such as academic goals, testing accommodations, therapy hours, transportation services, and much more. Of course, not every service is relevant to every child. IEPs are designed to meet the unique learning needs of each individual child.



IEPs are designed to meet the unique learning needs of each individual child.

Quick Facts Regarding IEPs

IEPS ARE COMPREHENSIVE

An IEP is often a lengthy document. It can easily be more than 10 pages. But, it is not like reading a research paper. Rather, the IEP is broken up into different sections with organized tables so you can reference specific parts of the plan as needed.

IEPS CONTAIN SPECIALIZED TERMINOLOGY

An IEP usually has a lot of specialized terms and acronyms related to IDEA, which governs the IEP process. Eventually, phrases such as least restrictive environment (LRE), extended school year (ESY), and assistive technology (AT) will feel very familiar to you. See Appendix 1 for a list of 55 common special education acronyms. As you are learning, don't hesitate to speak up and ask for clarification from the IEP team at your child's school, who should be well versed in these technical terms. Conversations about the IEP are meant to be team-oriented and collaborative. Your voice matters.

IEPS ARE UPDATED ANNUALLY

An IEP is written to describe a child's special education program for one year at a time. By law, it must be updated at least annually. Because the IEP is a living document, it may be updated more than once per year if teachers or parents recognize a need to change something. Maybe a child has mastered all of his math goals in the first quarter of the school year and needs new goals to work toward. Perhaps a student has been struggling behaviorally for the past three months and none of the supportive interventions listed on her IEP are working. There are many reasons why an IEP may need to be amended.

Components of the IEP

The physical layout and some details of the IEP vary by state. However, IDEA does mandate several components that must be present in every single IEP. Apart from the cover page, each component below is required by IDEA.

Cover Page

The cover page of the IEP is where you will find basic demographic information about the student, such as:

- Name of school and current school year
- Child's name, date of birth, gender, grade level, race/ethnicity
- Parent/guardian names and contact information (phone, address, email)
- Language spoken at home
- IEP case manager
- Relevant medical information
- Disability classification*

*At the initial eligibility meeting, the multidisciplinary team makes a decision based on a comprehensive review of several different sources of information, including professional evaluations. If your child was found eligible for special education, he or she was found eligible under one of 13 categories of disabilities defined by IDEA, such as Autism Spectrum Disorder or Orthopedic Impairment, for example (IDEA, 2004, §300.8).

Please note: it is possible to have a diagnosed medical condition and not be found eligible for special education services under IDEA. The key determining factor for special education eligibility is if the disability has a demonstrated adverse effect on a child's education. The multidisciplinary team considers a range of information when determining what constitutes an "adverse effect."

In addition to the information listed above for the cover page, there is also a sign-in page that lists the names and roles of each member of the IEP team, including the parent or guardian. At the IEP meeting, these individuals sign or initial to indicate attendance. Finally, as with every part of the IEP, if you notice any information that is incorrect, misstated, confusing, or missing, you are empowered and encouraged to ask questions and share your concerns so the IEP facilitator can make the appropriate edits.

Present Levels

Present level of academic and functional performance statements (PLAAFP), often referred to as “present levels,” are usually the very first part of the IEP after the cover page. They describe a child’s academic performance and functional performance in the areas of need identified by evaluations. Academic performance generally refers to a child’s performance in academic areas such as reading, writing, math, history, and science. Functional performance generally refers to routine activities of daily living such as eating, dressing, navigating the physical environment, and socializing ([National Association of Special Education Teachers \(NASET\), 2011](#)).

A present level of performance statement for a preschool-aged child will describe how the child’s disability affects his or her participation in a typical preschool classroom environment. It will speak to the child’s progress in activities like using scissors, coloring, grouping things, learning letters, playing games, etc. ([NASET, 2011](#)).

Present levels are critical to the development of the rest of the IEP. They describe what a child can do right now and lay the foundation from which goals, services, accommodations, and other supports are developed.

The data used to create present levels should come from a variety of sources, including but not limited to: formal evaluations, teacher observation, student work samples, formative or summative assessments, and parental input.



PARENTAL INPUT

Parental input is truly important to the development of the present levels statement. Parents are the only members of the IEP team who have insight into the long-term trajectory of their child's educational experience, including the challenges that the child experienced prior to beginning the special education process and what has worked well in previous years. Parents understand their child's strengths, interests, motivations, stressors, and fears better than anyone else. Because of this, parents are able to tell a holistic narrative of who their child is, what works well, and what limits or interferes with learning. This narrative should align with the story told by the IEP. When parents share their input with the IEP team, they may share strategies that help when the child is completing homework or offer a possible explanation for why their child is having difficulty in a particular class or at a particular time of day.

Parental input is truly important to the development of the present levels statement.

Finally, a present level of performance statement should also explain how the child's disability impacts his or her ability to make progress in the general education setting (IDEA, 2004. §300.320a).

Here is one way a present level of performance statement may be written for a third-grade student with an identified area of need in reading.

David completed a Fountas and Pinnell running record exam on 1/10/20 to determine his current instructional and independent reading levels. David is independently reading at Level H (early first grade). He demonstrates a relative strength in reading fluency and rate and has greater difficulty with comprehension. David is more motivated to implement reading comprehension strategies when reading about topics of great personal interest to him, including emergency vehicles, construction equipment, and race cars. (Interests provided by parental input).

David's specific learning disability impacts his ability to make progress with the general education curriculum. He needs explicit instruction in reading comprehension in a small-group setting to access grade-level texts.

Annual Goals

A child with an IEP will have goals in each identified area of need, such as math, writing, speech, or gross motor skills. Some children have multiple areas of need, and others have just one. Areas of need are identified by the results of the psychological and educational evaluations and discussed at the initial eligibility meeting.

IEP goals are written on an annual basis and describe what a child is working toward. They are based on the child's present levels of performance, which helps ensure the goal is appropriately challenging and attainable.

IDEA requires that IEP goals be measurable (IDEA, 2004, §300.320a). Goals should describe a skill that can be counted, seen, heard, and or otherwise measured. They are typically based on state standards for learning and may include some of the language of the standard. IEP goals should answer these questions:

Who? ... will achieve?

What? ... skill or behavior?

How? ... in what manner or at what level?

Where? ... in what setting or under what conditions?

When? ... by what time? An ending date?

(NASET, 2011)

At the IEP meeting, you may hear the IEP team use these guiding questions when reviewing IEP goals, or the team may discuss IEP goals using "SMART goal" language. **SMART goals** are Specific, Measurable, Achievable, Relevant, and Time-bound. These characteristics answer essentially the same questions as above. Different teams use slightly different language, but the overarching point of any IEP goal is to ensure there is a way to recognize the child's progress and adjust instruction or supports accordingly.

Because parents or caregivers are equal members of the IEP team, they share responsibility for writing the IEP goals. Parental input helps the IEP team recognize what is important to the child and ensures that his or her goals are realistically challenging

and appropriate. There are hundreds of possibilities for what to focus on when writing IEP goals. Parents help the IEP team narrow the topics of the goals to be aligned and relevant to standards, curriculum, and student ability and interests.

Children with disabilities who take alternate assessments aligned to alternate academic standards have IEP goals that must include benchmarks or short-term objectives. The benchmarks or short-term objectives describe how the child will show progress along the way. Alternate assessments based on alternate academic achievement standards are intended for children with the most significant cognitive disabilities ([U.S. Department of Education, 2017](#)).

EXAMPLES OF IEP GOALS

Sample IEP Behavioral/Social-Emotional Goal

Sasha will play (participate, share, follow directions, take turns) during choice time, with 1 or 2 peers for 10 minutes with no more than 1 adult prompt in 4 out of 5 opportunities by March 5, 2021.

Sample IEP Math Goal

Jacob will add two-digit whole numbers with regrouping with 75% accuracy in 3 out of 5 opportunities by May 31, 2021.



Measuring Progress

An IEP must specify how a child's annual goals will be measured ([IDEA, 2004, §300.320a](#)).

Well-written IEPs embed the way in which the skill will be measured in the goal statement itself. In other words, the goal names how the skill will be counted, seen, heard, and or otherwise measured.

The following illustrates what is an appropriate and measurable IEP goal for behavior.

Measurable Goal



Patrick will request (verbally or with his cue card) to take a break in the calm down corner, and return back to an approved task after his break in 4 out of 5 opportunities over a minimum of 6 weeks by November 2, 2021.

Nonmeasurable Goal



Patrick will learn to use the calm down corner when he feels frustrated and resume his classwork after a few minutes.

There are many ways to measure IEP goals. Teacher notes and observation, student essays, formal standardized assessments, weekly quizzes, and classwork samples from whiteboard activities are some of the ways to measure progress.

PROGRESS REPORTS

Schools are required to provide periodic updates about a child's progress toward his or her IEP goals ([IDEA, 2004, §300.320a](#)). These updates are typically called IEP progress reports and are often distributed quarterly alongside traditional report cards. However, they can be provided monthly or even weekly, depending on the needs of the student and his or her IEP. So, students with IEPs get two types of grade summaries—a progress report for IEP goals, and a report card for their grades in academic and elective courses. Progress reports often use words such as *mastered*, *progressing*, *no progress*, *regressing*, or *not applicable* to describe a child's progress toward achievement of the IEP goal. Well-written progress reports will also offer narrative commentary for each IEP goal.

Special Education Services

After the cover page, present levels, goals, and measuring progress, the IEP describes the services that will be provided to the child or on behalf of the child. Special education services, related services, and supplementary aids and services are three separate and critical elements of a child's IEP.

Special education is defined as specially designed instruction to meet the unique needs of a child with a disability (IDEA, 2004, §300.39a1). The key words here are “specially designed” and “unique needs.” It cannot be stated enough that special education is individualized to each child. The full definition of special education under IDEA is found in section §300.39 of the law. The law stipulates that special education:

- Must be provided at no cost to families
- May be provided in a continuum of settings, including the classroom, home, hospitals and institutions, and other settings
- Includes instruction in physical education
- Includes speech-language pathology services or any other related service if that service is considered special education rather than a related service under state standards
- Includes travel training (e.g., teaching students with significant cognitive disabilities how to move about their environment safely)
- Includes vocational training (e.g., preparing students for work that does not require a baccalaureate or advanced degree)

Children who receive special education services may participate in an individualized curriculum that is different from that of same-age, nondisabled peers. Or, they may participate in the general education curriculum that is the same as that for same-age, nondisabled peers, with accommodations or modifications made for the student (NASSET, 2011).



ACCOMMODATIONS AND MODIFICATIONS

What's the difference between an accommodation and a modification?

An **accommodation** changes how a student learns and a **modification** changes what a student is expected to learn.

For example, a teacher assigns 20 two-digit by two-digit multiplication problems (such as 87×36) for homework.

A possible **accommodation** is to decrease the number of problems in the problem set to 10 two-digit by two-digit multiplication problems. This could be an appropriate accommodation for a student with ADHD, who may struggle with time management, organization, and staying on task. The student is still expected to know the same material as her nondisabled peers, but the accommodation helps the student work around some of the challenges of her disability.

A possible **modification** is to change the assignment to 15 single-digit multiplication problems (such as 3×7). This is a different skill and a different learning outcome.

Special education services are designed for the identified areas of need. If a child's disability does not impact his or her ability to make progress in physical education, math, and science, for example, then the IEP will not reflect any special education services in these areas.

Finally, IDEA states that special education services should be based on peer-reviewed research "to the extent practicable." Peer-reviewed research may also be referred to as evidenced-based practices or research-based practices.



Through more than two decades of helping students access learning and connect with the world, n2y has evolved to develop the first—and only—comprehensive solution that serves at the epicenter of successful special education programs. Today, our evidence- and standards-based **Total Solution** seamlessly integrates multiple innovative components that empower educators to teach and students to achieve. These solutions are woven together by a powerful workflow that guides and synchronizes the entire IEP team to ensure compliance and the best possible student outcomes. And whether it's in school or at home, our popular, award-winning content enriches and supports all aspects of a successful learning environment: engagement, communication, literacy and math mastery, self-regulation, transition skills, and ultimately a path to independence.

Related Services

Related services help children with disabilities benefit from their special education services. They provide extra support in identified areas of need such as hearing or moving or socializing. This list of related services includes but is not limited to:

Speech-language pathology services

A speech and language pathologist (SLP) helps with speech sounds, language and literacy (understanding language), social communication, cognitive communication (thinking skills), feeding and swallowing, stuttering, and voice (American Speech-Language-Hearing Association, 2020).

Audiology services

Educational audiologists work with students with any type of hearing impairment, including auditory neuropathy, unilateral or fluctuating hearing loss, or an auditory processing disorder. Students with learning disabilities, reading/literacy difficulties, or attention problems, as well as English language learners may benefit from an audiologist's assessment of how listening and learning are affected by noise and classroom acoustics (Educational Audiology Association, 2009).

Interpreting services

Interpreters who work in a school setting with children who are deaf or hearing impaired are called educational interpreters. The educational interpreter is a communication link and facilitator between the child who is deaf or hard of hearing and all those who are speaking to communicate (teacher, classmates, other school personnel). Interpreting services may be provided through American Sign Language, Pidgin Sign English, Oral Transliterating, or Cued Speech (CDE, 2020).

Psychological services

School psychologists provide a range of services, including consultation, assessment, intervention, education, and prevention. They may conduct formal evaluations during the eligibility and re-eligibility processes. They may create behavioral intervention plans and provide weekly counseling sessions (for example).



Physical therapy

School-based physical therapists help students physically access their educational environment. They are specialists in movement and assist a student's participation in a variety of settings throughout the school day. This service is provided only when it is related to a child's educational needs. School-based PTs work to modify the environment (e.g., adaptive seating), help to maximize independence, and educate staff to enhance physical participation (Fox, 2020).

Occupational therapy

In school, occupational therapists focus on academics, play and leisure, social participation, self-care skills, and transition/work skills. School-based OTs analyze and modify a child's educational activities and environment in order to reduce barriers to participation. (AOTA, 2020).

Recreation, including therapeutic recreation

Recreation therapy in schools utilizes recreation and other activity-based interventions to address the assessed needs of students with disabilities. Recreation is a means to psychological and physical health, prevention, recovery, and well-being. School-based recreation therapy assesses a student's motor function, cognition, and social development and provides recreational services within the least restrictive environment. School-based recreation therapy can also help students transition to independent or community living (ATRA, 2020).

Early identification and assessment of disabilities in children

Early identification and assessment are part of the Child Find process. Child Find is the legal requirement (per IDEA) that schools find all children who have disabilities and who may be entitled to special education services. It covers all children from birth through age 21. The school must evaluate any child it knows or suspects may have a disability.

Counseling services, including rehabilitation counseling

Rehabilitation counseling services are services provided to an individual student or group of students that focus specifically on career development, employment preparation, achieving independence, and integration into the workplace and community. This service also includes vocational rehabilitation services (Center for Parent Information and Resources, 2017).

Orientation and mobility services

Orientation and mobility services help a child who is blind or visually impaired know where he/she is in space and where he/she wants to go (orientation). These services also help the child carry out a plan to get there (mobility). In schools, these services are focused on helping children who are blind or visually impaired safely and independently move throughout their educational environment.

Medical services for diagnostic or evaluation purposes

According to IDEA, §300.34 (c) (5), “medical services means services provided by a licensed physician to determine a child’s medically related disability that results in the child’s need for special education and related services.” Medical services are considered a related service under specific conditions: (1) when they’re provided by a licensed physician; and (2) for diagnostic or evaluation purposes only. If the service (such as tracheostomy tube suctioning) can be provided by a non-physician, then the service must be provided by the school or public agency ([Center for Parent Information and Resources, 2017](#)).

School health services and school nurse services

School health services include managing a student’s health problems on the school site. A school nurse or other professional with appropriate training can provide specialized physical health services which are necessary during the school day (such as catheterization, tube feeding, tracheostomy tube suctioning, positioning, or other services that require medically related training). These services also include consulting with students, parents, teachers, and others, and counseling with parents and students concerning health problems ([Center for Parent Information and Resources, 2017](#)).

Social work services in schools

School social workers may have many different roles in assisting with a child with a disability, including preparing a social or developmental history assessment, counseling (group, individual, and/or family), assisting in developing positive behavioral intervention strategies, providing supports/interventions related to problems in a child’s living situation that affect a child’s adjustment in school. School social workers are the link between home, school, and the community ([SSWAA, 2020](#)).



Parent counseling and training

Parent counseling and training helps parents acquire the skills to support the implementation of their child's IEP goals and objectives at school and, in some cases, at home. Parent counseling and training can include providing parents with information about their child's development, assisting parents in understanding the educational needs of their child, and providing parents with contact information about support groups, financial resources, and community support outside the school system (CDE, 2020).

Transportation

Transportation services include travel to and from school and travel in and around school buildings. It must be provided if it is required to assist a child with a disability to benefit from special education. It may include supports such as an aide, positive behavior support plan, bus stop monitors, climate-controlled environment, wheelchair lift, or other special equipment to ensure the child's safety.

Reference: (NASET, 2011)

To qualify for related services, the IEP team reviews the evaluation information. Because evaluations must be sufficiently comprehensive to identify all of a child's special education and related service needs, children sometimes have multiple evaluations during the eligibility process. For example, a child may participate in a psychological evaluation, educational evaluation, and speech and language evaluation to determine areas of need in academic subjects along with speech and language goals. Practitioners in related service fields write annual goals for the IEP just like special education teachers write annual goals for academic areas. Related service goals should include when the service will begin, how often it will be provided and for what amount of time, and where it will be provided (IDEA, 2004, § 300.320 (a)).

It is important to note that speech therapy, physical therapy, occupational therapy, and other services provided through a child's insurance, state program, or private pay are *separate* from the therapies and services provided by the school or on behalf of the school. The key difference here is that school-based therapies are based on a child's access to his or her educational environment and curriculum, whereas therapies provided by insurance, state program, or private pay are based on clinical need and prescribed by a doctor. Certainly, there may be overlap in the goals of a school-based therapy and a clinical therapy. But participation in one does not exclude participation in the other. Additionally, parents do not pay for any related services provided by the school.

Supplementary Aids and Services

Along with special education and related services, supplementary aids and services (SAS) serve three purposes:

- 1 SAS are designed to enable a child to advance toward attaining annual IEP goals;
- 2 SAS should support a child's involvement and progress in the general education curriculum and participation in extracurricular and nonacademic activities;
- 3 SAS allow a child to be educated and participate with other children with disabilities and nondisabled children (NASET, 2011).

In short, supplementary aids and services are the supports that help a child participate in all aspects of school—academic, nonacademic, and extracurricular. They span the entire school day and school experience.

Classroom accommodations and modifications may be included in this section of the IEP. (They could also be captured by the next IEP component entitled Accommodations in Assessment). Supplementary aids and services include other services, too, such as assistive technology devices or specific training for staff who work with the child.

A few examples of supplementary aids and services:

- Noise-cancelling headphones
- Planned seating on the bus
- Frequent breaks during class
- Assistive technology devices such as voice-to-text apps or software
- Dedicated aide
- Extra set of textbooks to be kept at home
- Training needs for teachers and staff

Statement of “Extent of Nonparticipation”

The spirit of IDEA is one of inclusivity—educating children with disabilities alongside children without disabilities. This goal is intricately connected to the principle of the *least restrictive environment* or LRE.

In IDEA, the least restrictive environment (LRE) ensures that children with disabilities are educated with their nondisabled peers to the maximum extent appropriate. Another word for this is *inclusion*. An inclusion classroom follows the general education curriculum, and it is often co-taught by a general education teacher and a special education teacher. The two teachers work together to meet the needs of all students, but the special education teacher is primarily responsible for ensuring the children with documented disabilities receive their specialized instruction and accommodations. This might mean that the special education teacher adapts, or differentiates, classwork to make it more accessible to students with learning disabilities. Or, it might mean that he or she works with a small group of students to remediate a certain skill or provide additional examples.

Special classes (also called “resource rooms,” “pullout classes,” or “full-time special education classes”), separate schooling, or other ways of removing children from the regular educational environment should only occur if the nature or severity of the disability is such that education in regular classes with supplementary aids and services cannot be achieved satisfactorily (IDEA, 2004, §300.114 (a)).

To be sure, there are situations when it is more appropriate to remove a child from the general education setting for special education and related services. The part of the IEP called “extent of nonparticipation” simply means the IEP team must explain why the child is being removed. It is a statement that describes the extent to which a child will not participate with nondisabled children in regular classes and activities. This explanation should also be based on the child’s needs and not what is convenient for the school system. (Center for Parent Information and Resources (CPIR), 2019).



Accommodations in Assessment

IDEA requires that students with disabilities take part in state or district-wide assessments (IDEA, 2004, §300.160). These standardized assessments are given to all students at periodic intervals throughout the school year. It is one of several ways that schools measure student achievement.

Children with disabilities may need accommodations or modifications to participate in these tests and other assignments. The IEP team is responsible for identifying whether accommodations or modifications are needed and if so, which ones.

If a member of the IEP team suggests that your child needs certain accommodations, feel free to ask clarifying questions to make sure you understand what exactly the support entails and when it will be implemented. Some accommodations are allowable in both the classroom for instructional purposes and on statewide assessments, and some accommodations are *not* allowable on statewide assessments. For example, a graphic organizer is allowed in the classroom, but not on standardized assessments. Preferential seating and extended time are allowed in both settings. Check with your IEP team to clarify which accommodations are allowed in which settings.

Parents and guardians may also suggest or request accommodations that support a child's participation in their education program. Parents can offer valuable insight into the nature of their child's disability that teachers may not be aware of. For example, if your child is routinely sluggish in the mornings due to a medication related to her disability, it may be prudent to allow her to have the accommodation of flexible scheduling for tests. Other members of the team may not know to include this without your input.

The IEP team may also determine that a certain test is not appropriate for a child with a disability. If this determination is made, the IEP must include a statement explaining why the test is not appropriate and how the child will be assessed instead. Approximately one percent of the student population participates in alternate assessments (U.S. Department of Education, 2017). Most of these children have significant cognitive disabilities.



Accommodations for assessment are categorized by the presentation, response, setting, and timing/scheduling of the assessment. The following are several examples of possible accommodations in each category.

Presentation Accommodations

allow students to access information in ways that do not require them to visually read standard print.

- Enlarged print
- Human reader to read test/directions
- Repeated directions
- Sign language
- Braille
- Amplification device
- Magnification device
- Secure paper to desk
- Markers (used to help student keep place on page)
- Special paper
- Prompts, cues (to help manage time, to help stay on task)
- Clarification (e.g., explain the directions or clarify what the question is asking)

Response Accommodations

allow students to complete assignments and assessments in different ways.

- Scribe
- Responding in test booklet rather than on answer sheet
- Use of calculator
- Use of graphic organizer
- Point to answer
- Use of technology (e.g., allowed to type answer instead of handwrite)
- Dictation software
- Use of reference materials

Setting Accommodations

change the location in which a test or assignment is given.

- Preferential seating to limit distractions
- Change of setting to permit physical access or allow use of special equipment
- Reduce distractions by allowing student to take test individually or in a small group

Timing and Scheduling Accommodations

increase the allowable length of time to complete an assignment or assessment.

- Extended time
- Flexible scheduling (e.g., allowed to take assessment in morning or afternoon, or over period of multiple days)
- Permission to take frequent breaks

Reference: [Teacher Vision, 2020](#)

This is not a comprehensive list of assessment accommodations.



Service Delivery Details

The service delivery section of the IEP is short but important. It is the part of the IEP where the service details are specified—when, where, how often, and how long a child will receive a service. The table for recording service delivery usually looks like this with a sample line filled in for occupational therapy services.

| Service, Aid, or Modification | Frequency | Location | Beginning Date | Duration | End Date |
|-------------------------------|-----------|--|----------------|----------|--------------|
| Occupational Therapy (OT) | 1 x week | Outside general education classroom (in therapy room) | Sept. 8, 2020 | 30 min. | June 4, 2021 |

Reference: Office of Special Education Program (OSEP), U.S. Department of Education (2006), retrieved from: <https://www2.ed.gov/policy/speced/guid/idea/modelform-iep.pdf>

Transition Planning

Transition planning is required by IDEA. It is the process of helping students with disabilities make the transition from high school to adulthood. By law, transition planning must begin no later than age 16, but some states require an earlier start date (Office of Special Education and Rehabilitative Services, 2017). Most IEP teams begin transition conversations by age 14. For many students and families, though, the process begins as early as middle school as students begin to think about their future. During transition planning, students learn to identify their strengths and interests as they consider postsecondary options and develop goals.

Parental involvement and support are especially important throughout transition planning. It’s never too early to start the discussion about what will happen for your child, in terms of education and vocation, after he or she graduates from high school. Feel free to initiate the conversation and ask many questions.



Your input is invaluable to the development of relevant postsecondary goals and services. As you participate, remember that you are a *partner* on the IEP team.

Consider the transition planning process to be a time to better understand how your child's disability—including learning, communication, and mobility skills—may impact him or her in a postsecondary setting for education, employment, or independent living. As you prepare for IEP meetings on transition, encourage your child to attend. Your child should be formally invited by the school, and your affirmation of his or her attendance and self-determination will go a long way toward building truly meaningful goals and services.

IEP transition planning is a specific and results-oriented process. It involves the student working on specific goals related to his or her identified interests, strengths, preferences, and needs. Transition planning includes development of postsecondary goals and identification of transition services.

Postsecondary goals may be in any of these four areas:

- Vocational training
- Education (college or other school)
- Employment
- Independent living (if needed)

Transition Services


This refers to the services needed to assist the student in achieving the postsecondary goals. These may include instruction, related services, community experiences, employment/post-school adult living objectives, and the acquisition of daily living skills (if appropriate) (NASET, 2012).

These services are meant to be coordinated by a group working together with the student with the disability to plan for the student's future.

Because daily living skills and post-school adult living are included in these discussions, community agency representatives may be present at transition-planning IEP meetings.



The overarching purpose of transition planning and indeed, of the whole experience of the IEP process, can be summed up in the first finding of Congress in IDEA:




Disability is a natural part of the human experience and in no way diminishes the right of individuals to participate in or contribute to society. Improving educational results for children with disabilities is an essential element of our national policy of ensuring equality of opportunity, full participation, independent living, and economic self-sufficiency for individuals with disabilities [IDEA, 2004, 1400(c)(1)].

How Parents Can Support Their Child's Progress

It takes a village to successfully implement a child's IEP. One of the most important ways you can support your child's progress is to proactively communicate and collaborate with the school team. Your child's teachers should also be communicating regularly with you to share positive progress as well as concerns.

If there's something that is working well for you and your child at home, feel free to share it. The school team will appreciate additional insight into how best to support your child. IEPs are strongest when parents and teachers work together. For example, perhaps you have found that your daughter with ADHD completes her math assignments more quickly and with less complaining while listening to music in her earbuds. It may be possible for her to have this accommodation in certain situations at school.

If you are concerned about your child's progress at school, try sending an email or connecting via your school's messaging app. You may want to schedule a meeting. Ask the teacher to elaborate on the IEP progress report comments. She may be able to provide work samples or share anecdotal insight that relieves some of your concerns. You might ask her to explain what intervention strategies she has tried or plans to try soon. You can also ask your child's teacher what you can do at home to supplement the work being done in the classroom.



One of the most important ways you can support your child's progress is to proactively communicate and collaborate with the school team.

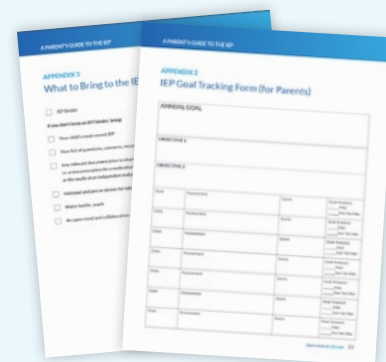
If you're still worried after you've talked with your child's teacher and/or IEP case manager, you may wish to call an IEP meeting. This is one of your rights as a parent of a student with a disability. You don't have to wait until your concerns are dire. It is best practice to send your request for the IEP meeting in writing.

What to Bring to the IEP Meeting

Many parents find it helpful to keep an IEP binder at home to organize documentation. Having everything organized in one place is especially helpful when it is time to prepare for the annual IEP meeting.

An IEP binder may include sections for:

- Notes pages with questions, concerns, recommendations, or proposed changes
- IEPs, in order of most recent to oldest
- IEP goals tracker
- Student work samples that show progress or highlight concerns
- Evaluations, in order of most recent to oldest, including any independent evaluations
- Relevant prescriptions and/or medication forms
- Other relevant medical documentation
- Resources (guides, brochures, cheat sheets, references, etc. related to your child's disability and education planning)



Please see [Appendix 2](#) for a printable *IEP Goals Tracker* and [Appendix 3](#) for a printable *What to Bring to the IEP Meeting Checklist*. Remember, it is completely optional to track goals at home and keep an IEP binder, but many parents find this helpful.

When you're preparing for an IEP meeting, make a list of your concerns and any associated questions or proposed changes. It is likely that the other members of the IEP team will share your concerns and will want to collaborate on the next steps to ensure your child is set up for success. Collaboration is critical! **Each member of the IEP team** brings a specific expertise and an important perspective about the strengths and challenges of your child. Taken together, the knowledge and experience of the whole team, which includes you, have great potential to ensure the development of an IEP that will really work.

For example, if you are concerned that your son has great reading fluency but struggles with comprehension, share this with the team. Explain, for example, that you're worried he doesn't seem to remember what he has read and always has difficulty finishing his summaries for homework. Your concerns should not be surprising to his teachers. His general education teacher, special education teacher, and speech and language pathologist, for example, will each have insight about interventions to try in the classroom and strategies for you to work on at home.

What if the IEP isn't working?

Even the most comprehensive IEPs and strongest IEP teams struggle from time to time to meet the unique needs of students with disabilities. What options do parents have if their child with a disability is still struggling?

First, it is important to remember that it is not uncommon for students to experience setbacks, particularly as they adjust to new teaching styles, routines, and expectations at the start of a school year. This is especially true for students with learning and behavioral differences. It is also true for the great majority of students returning to school amid the disorienting and stressful coronavirus pandemic.

Take some time to clarify your concerns. Write down the specific things you're worried about and any questions you have. This will help direct your next steps. Are you concerned about your child's behavior in just one class or all classes? Are you worried about test grades or homework completion? Have you noticed a change in mood and energy at home?



If, after speaking with your child's teachers, you are still concerned, you may wish to request that the IEP team reconvene. IDEA does not specify the timeline in which the IEP meeting must take place once a parent has made a request, but some states do. Check your state's education website or your state's [Parent Training and Information Center \(PTI\)](#) for more information.

One important note before calling the IEP meeting: consider how long your child's IEP has been in place. If it has only been in place for a few weeks and you aren't yet seeing progress toward IEP goals, it might be too early. If this is the case, still meet with your child's teacher, but try waiting a few more weeks to be sure you are reviewing accurate, definitive data.

Working with an Advocate or Attorney

Some parents may choose to work with a **special education advocate** or an **attorney** to help guide them through the special education process. Advocates and attorneys can both negotiate with the school on your behalf, draft important documentation to the school on your behalf, review IEPs, attend IEP meetings, and advise you on your rights and overall strategy for working with the school (Lee, 2020).

Advocates are often former teachers or education specialists. Some parents are advocates, too. Currently, there are no licenses or certificates required to work as an advocate. Attorneys are licensed legal professionals with a license to practice law in your state. The terms "advocate" and "attorney" are sometimes used interchangeably when referring to a person who helps a family throughout the special education process, but there are distinct differences between the two roles. Choosing which kind of support you need depends on your goals for your child.

If you do invite an advocate or an attorney to an IEP meeting, be sure to let the IEP team know in advance. The school will likely invite its legal representation to the IEP meeting.



Procedural Safeguards

IDEA protects students with disabilities and their parents with certain legal rights called *procedural safeguards*. Procedural safeguards are important because they empower parents to advocate for their children. They lay the groundwork for how parents and school teams work together throughout the special education process, including what to do when there's a dispute. IDEA has a national model that outlines the safeguards, but each state has its own document that reflects its specific laws.

IDEA says that you have the right to disagree with your child's school about your child's education program (IDEA, 2004, §300.504).

Dispute resolution may take several forms:

- Talking with the school—sometimes, disagreements are resolved after another meeting with thorough discussion, brainstorming, and negotiation
- Third-party mediation
- Filing a due process complaint that involves a written complaint and a formal hearing
- Filing a complaint with the state if you believe the school is violating IDEA
- Filing a complaint with the Office of Civil Rights if you believe your child has been discriminated against

It is usually wise to consult a special education advocate or attorney when you are considering filing a formal complaint.

IDEA also says your child has the right to remain in his or her current educational placement while the dispute is resolved. The “stay put” clause is also called the pendency provision (IDEA, 2004, §300.518). Educational placement includes the physical location as well as the types of services provided, such as speech therapy or behavioral consultation. If you wish to invoke the “stay put” right, you typically must do so *before* the change takes place. So, you must act quickly after receiving the notice that explains the proposed change and before the proposed change takes place.

Additional Resources

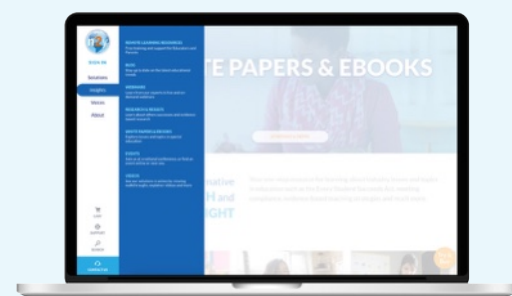
If you're just learning about the world of special education, this guide is a great place to start. Consider printing and placing it in your IEP binder under a section titled "Resources." Remember, it will take time to internalize all the new information flooding your way in the weeks and months following evaluations, eligibility meetings, and IEP development. The important thing is to ask questions when you need clarification or have something to share.

As a parent, your role in developing the IEP is paramount. Every member of the team brings a particular expertise, but no one is an expert on your child in the way you are. Your insights, concerns, recommendations, and questions are hugely important to the successful development and implementation of your child's IEP.

Other helpful sites to review include:

- [Center for Parent Information and Resources](#)
- [Understood](#)
- [Wright's Law](#)
- [National Center for Learning Disabilities](#)
- your state's education website

A good place to start, though, is scheduling a meeting with your child's IEP case manager and/or the school's special education coordinator. A face-to-face conversation goes a long way toward successful collaboration and building the school-family partnership.



There are dozens of high-quality resources available online when you're ready to delve more deeply into the IEP and other aspects of parenting a child with a disability. Many of them can be found on the Insights section of [n2y.com](#). If you are looking for the specific language of the law about a certain section of the IEP, the entire Individuals with Disabilities Education Act is available online through the U.S. Department of Education.

APPENDIX 1

Common Special Education Abbreviations

| | | | |
|-------------|--|----------------|---|
| AAC | Alternative and Augmentative Communication | DIBELS | Dynamic Indicators of Basic Early Literacy Skills |
| ABA | Applied Behavior Analysis | DSM | Diagnostic and Statistical Manual of Mental Disorders |
| ADA | Americans with Disabilities Act | EBP | Evidence-based Practice |
| ADHD | Attention Deficit/Hyperactivity Disorder | ED | Emotional Disturbance |
| ADLs | Activities of Daily Living | EI | Early Intervention |
| ADR | Alternate Dispute Resolution | ELL/ESL | English Language Learner/English as a Second Language |
| ALD | Assistive Listening Device | ESSA | Every Student Succeeds Act |
| APE | Adaptive Physical Education | ESY | Extended School Year |
| APS | Approved Private School | FAPE | Free and Appropriate Public Education |
| ASD | Autism Spectrum Disorder | FBA | Functional Behavioral Assessment |
| ASL | American Sign Language | FERPA | Family Educational Rights and Privacy Act |
| AT | Assistive Technology | ID | Intellectual Disability |
| BASC | Behavior Assessment System for Children | IDEA | Individuals with Disabilities Education Act |
| BIP | Behavior Intervention Plan | | |

| | | | |
|------------------|--|---|---|
| IEE | Independent Educational Evaluation | PWN | Prior Written Notice |
| IEP | Individualized Education Program | RTI | Response to Intervention |
| IFSP | Individualized Family Service Plan | SAS | Supplementary Aids and Services |
| LEA | Local Education Agency | SLD | Specific Learning Disability |
| LRE | Least Restrictive Environment | SLI | Speech and Language Impairment |
| LEP | Limited English Proficiency | SLP | Speech and Language Pathologist |
| MDR | Manifestation Determination Review | SST | Student Study Team/Student Support Team |
| O & M | Orientation and Mobility | TBI | Traumatic Brain Injury |
| OCR | Office of Civil Rights | TVI | Teacher of the Visually Impaired |
| OHI | Other Health Impairment | UDL | Universal Design for Learning |
| OI | Orthopedic Impairment | VI | Visual Impairment |
| OT | Occupational Therapy | VR | Vocational Rehabilitation |
| PALS | Peer-Assisted Learning System | Reference: Center for Parent Information and Resource, 2020 | |
| PBIS | Positive Behavior Intervention and Supports | | |
| PLOP/PLEP | Present Levels of Performance/ Present Levels of Education Performance | | |
| PT | Physical Therapy | | |

APPENDIX 2

IEP Goal Tracking Form (for Parents)

| | | | |
|--------------------|------------|-------|---|
| ANNUAL GOAL | | | |
| OBJECTIVE 1 | | | |
| OBJECTIVE 2 | | | |
| Date | Assessment | Score | Goal Analysis ____ Met ____ Not Yet Met |
| Date | Assessment | Score | Goal Analysis ____ Met ____ Not Yet Met |
| Date | Assessment | Score | Goal Analysis ____ Met ____ Not Yet Met |
| Date | Assessment | Score | Goal Analysis ____ Met ____ Not Yet Met |
| Date | Assessment | Score | Goal Analysis ____ Met ____ Not Yet Met |
| Date | Assessment | Score | Goal Analysis ____ Met ____ Not Yet Met |
| Date | Assessment | Score | Goal Analysis ____ Met ____ Not Yet Met |

APPENDIX 3

What to Bring to the IEP Meeting Checklist

☐ IEP binder

If you don't keep an IEP binder, bring:

☐ Your child's most recent IEP

☐ Your list of questions, concerns, recommendations, and/or proposed changes

☐ Any relevant documentation to share with the team
*i.e. a new prescription for a medication to be taken at school,
or the results of an independent evaluation*

☐ Notepad and pen or device for taking notes

☐ Water bottle, snack

☐ An open mind and collaborative attitude

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ABOUT n2y

For over 20 years, it's been n2y's mission to support special educators, transforming not only the classroom, but also the lives of teachers and administrators, therapists and paraprofessionals, families and all the students we proudly serve. We believe everyone can learn, and every student has the right to reach their full potential. n2y offers the first comprehensive program serving at the epicenter of the entire IEP team. Our differentiated solutions are designed specifically to help unique learners access their state's standards in any learning environment, from self-contained to resource, inclusion, therapeutic, or remote settings. For more information, visit n2y.com and join us on Facebook and Twitter.

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