



SPECIAL EDUCATION FOR SCHOOL NURSES

Frequently Asked Questions (FAQ)

Identifying Children Who May Need Special Education Services; Child Find

1. **What is the Child Find requirement?** The Child Find requirement falls under [Part B of the Individuals with Disabilities Education Act \(IDEA\)](#). Part B requires the district/local education agency (LEA) to identify, locate, and evaluate all children with disabilities age 3-21. Parents/guardians are encouraged to contact the district/LEA to make a referral for an evaluation.
2. **Who can make a referral to the district?** Either the parent/guardian of a child or anyone at the school may initiate a request for an initial evaluation to determine if the child has a disability.
3. **Can the district/LEA delay the special education timeline until the parent/guardian provides enrollment paperwork to the district/LEA (e.g., proof of immunizations, residency)?** The district/LEA cannot delay the processing of a referral for special education until the parent/guardian provides enrollment paperwork to the district/LEA.

Evaluation/Eligibility

1. **What happens while the Review of Existing Data (RED) is completed?** If a child is suspected of having a disability, the district/LEA must conduct a review of existing data within 30 calendar days of the referral. A review of existing data is completed to determine if there is reason to suspect a disability. The case manager will typically complete the RED, however, he/she will gather information from all persons involved with the student. This could include the school nurse. If the student is found eligible for specific learning disability (SLD), the school nurse will need to provide the hearing, vision, and health screenings which are a necessary part of the evaluation process. If the student has an Individual Health Care Plan on file that information should be noted in the RED as well. If there is no reason to suspect a disability the district/LEA must provide the parent/guardian a Prior Written Notice (PWN) refused for an initial special education evaluation within 30 calendar days of the referral and the district/LEA does not conduct a review of existing data.
2. **What is the district/LEA's responsibility when a parent/guardian does not respond to parental consent to evaluate?** The district/LEA is under no obligation to move forward with the initial evaluation if a parent/guardian has not provided consent to evaluate. The 60 calendar days to complete the evaluation does not begin until the date the district/LEA receives signed parental consent to do the evaluation. The district/LEA must maintain documentation of reasonable efforts to obtain parental consent for initial evaluation, to provide special education

and related services for the first time, to reevaluate, and to locate parents/guardians of children who are wards of the state for initial evaluations. The documentation must include a record of attempts in the following ways:

- Detailed records of telephone calls made or attempted and the results of those calls
- Copies of correspondence sent to parents/guardians and any responses received
- Detailed records of visits made to the parent's home or place of employment and the results of those visits

3. **When the child begins the evaluation process in one district/LEA and the family moves to another school district, does the receiving district have to follow the original timeline?** This timeline no longer applies if the student moves to another public agency after the timeline has begun and/or prior to a determination by the student's previous public agency. The public agency must make a good faith effort to complete the evaluation in a timely manner. However, if the child is involved with [First Steps](#), the requirement for the Individualized Education Program (IEP) to be in place by the third birthday is still in effect.

4. **What assessments could be used to determine if my child has a disability?**

Intelligence Quotient (IQ) Tests:

[Wechsler Intelligence Scale for Children \(WISC-IV\)](#). An individually administered intelligence test for children between the ages of 6 and 16.

Stanford-Binet Intelligence Scale

[Woodcock-Johnson III Tests of Cognitive Abilities \(WJ III\)](#)

Developmental Assessments:

[Developmental Assessment of Learning \(DIAL-4\)](#)

[Denver Developmental Screening Test II](#)

Academic Achievement Tests: Academic tests evaluate the student's performance in reading, writing, math, and written language.

[Peabody Individual Achievement Test—Revised/Normative \(PIAT-R/NU\)](#)

[Kaufman Test of Educational Achievement \(K-TEA\)](#)

[Wechsler Individual Achievement Test \(WIAT-II\)](#)

[Woodcock-Johnson Test of Academic Achievement](#)

Adaptive Behavior Scales: Assess skills in daily living, community participation, social abilities, motor abilities, and communication.

[Adaptive Behavior Diagnostic Scale \(ABDS\)](#)

[Vineland Adaptive Behavior Scales \(Vineland-II\)](#)

Behavior Rating Scales: A parent or teacher will rate particular behaviors of the student. The rating or scales will help determine how intense or frequent a challenging behavior is by comparing scores to other students.

[The Devereux Behavior Rating Scale—School Form](#)

[The Social Skills Rating System](#)

5. **If fine motor is the only area of concern for a child, does gross motor also have to be tested? Fine motor skills** as defined by Understood.org: are the ability to make movements using the small muscles in our hands and wrists. We rely on these skills to do key tasks in school, at work, and in everyday life.

Gross motor skills as defined by Understood.org: are abilities that let us do tasks that involve large muscles in our torso, legs, and arms. They involve whole-body movements. We use gross motor skills for all sorts of physical activities, from running to raking leaves.

When deciding what testing is needed for any evaluation, teams should consider the two purposes of special education evaluation: 1) to determine eligibility and 2) to determine educational needs, including the need for special education services. In order to determine eligibility in the area of physical development under Young Child with a Developmental Delay (YCDD) eligibility category in Missouri, both fine and gross motor scores must be included in the overall physical development score. This is consistent with the language found in the federal regulations. If physical development is not the primary suspected area of disability then a team may decide it is not necessary to do testing in both areas of motor development. However, the team should ensure that the evaluation is sufficiently comprehensive to identify all of the student's needs. Even though a child may not qualify for YCDD in the motor (physical) area, occupational and physical therapy can be provided as a related service if the IEP team determines the child needs such intervention in order to access or benefit from specially designed instruction.

Individualized Education Plan (IEP) & Individual Health Plan (IHP)

1. **Can we use an Individual Health Plan (IHP) for a student who needs health services, instead of listing those services in the IEP?** The health services have to be identified in the IEP. Health care services are considered related services on the IEP. The definition of related services is a service(s) that enable the child to benefit from special education. Health services are related services and therefore must be reflected in the IEP. **Both documents need to be consistent.**
2. **Is the school nurse required to participate in the IEP meeting?** It is recommended the school nurse be invited to participate in the IEP meeting especially if the student has health issues that impede learning. These issues should be addressed in the IEP and the student should have an Individual Health Care Plan on file.
3. **If a child is being served in a district/LEA other than that of their current residence, which district/LEA serves as the responsible party?** The district/LEA of residence is responsible for evaluations and the provision of services. However, both districts should collaborate throughout the special education process and the district/LEA providing services, generally includes the child in the Missouri Student Information System (MOSIS) reporting.
4. **A student is having surgery which will require extensive rehabilitative therapy. What is the school district's responsibility with educationally based therapies?** Educationally based therapies are therapies that occur at or by the school. If the child has an IEP would be a related service. These therapies can include occupational therapy, physical therapy, and counseling/mental health related therapy. The school district is not responsible for therapies that are needed for rehabilitation from the surgery; however, it is sometimes hard to distinguish. Ultimately, it is an IEP team decision to determine which therapies are needed as a related service. The school nurse will need to be aware of any changes to the student's health and make

appropriate changes to the IHP. The IEP team will need to meet to decide if any related services/therapies are needed.

Homebound

1. **What is the difference between medical homebound and IEP placement for homebound?** School districts can, and usually do, provide homebound services to students who are not disabled. Additional reasons for homebound services include but are not limited to, reasons such as surgery, accidents, pregnancies, or prolonged illness. There is not a state statute or regulation that specifically addresses this, but the Department of Elementary and Secondary Education does allow for these students to be counted for state aid, if the level of homebound services is for a minimum of at least 5 hours per week.

For students who receive services through an IEP, homebound is part of the continuum of educational placements that is considered when discussing what would be the Least Restrictive Environment (LRE) for a student to receive their services. Homebound is a very restrictive placement. Students are entitled to all special education and related services set forth in the IEP while on homebound placement.

2. **A school district is considering placing a student in the Missouri State School for the Severely Disabled (MSSD), but the student's educational placement is "homebound". Will the student qualify?** Students who are otherwise eligible for the MSSD based on the severity of the disability will not be accepted if they require permanent homebound placement because such a restrictive placement requirement would not allow attendance at a separate day program such as MSSD. Students who would otherwise qualify and require only intermittent homebound placement would be accepted for placement. ([DESE State Plan – Regulation XVI: State Operated Programs](#)).

Signs behavior interventions may need serious tweaking

This chart provides some of the most common tip-offs that it's time to revisit a student's behavioral interventions and consider adding new ones.

Sign	Explanation
<p>The student is repeatedly subjected to restraint and/or seclusion.</p>	<p>If staff members seclude or restrain a child on multiple occasions, that may be a sign the child lacks the behavioral supports he needs. <i>See, e.g., In re: Student With a Disability, 80 IDELR 144</i> (SEA MT 2021) (A district responded appropriately to a child's intensified behaviors resulting in restraint, seclusion, and suspension by conducting a functional behavioral analysis, developing a behavioral intervention plan, and adding behavioral supports).</p>
<p>The student exhibits new or worsening behaviors.</p>	<p>If a student begins to have new behavior problems, or his current behaviors become significantly worse, that's a red flag that the IEP team needs to reconvene and determine whether it should change the student's interventions. <i>See, e.g., Greenbrier Sch. Dist., 121 LRP 34224</i> (SEA AR 09/28/21) (the district denied a 10-year-old child with ED FAPE for two school years and continued to deny him FAPE by failing to appropriately address his increasingly aggressive behaviors.).</p>
<p>The student isn't progressing under the current BIP.</p>	<p>School districts are required to monitor a student's progress toward his behavioral goals to ensure he is still receiving FAPE. If he is making negligible progress, or no progress, they should timely convene the IEP team and revise the IEP. <i>See, e.g., Charles County Pub. Schs., 73 IDELR 193</i> (SEA MD 2018) (A Maryland district violated the IDEA by delaying for several months its efforts to address a 13-year-old's lack of behavioral progress.).</p>
<p>The conduct is a manifestation of a disability.</p>	<p>If a district conducts a manifestation determination review and the MDR team finds the conduct was a manifestation, the team must review the student's existing BIP and modify it as necessary to address the behavior. If the student has no BIP, it must develop one. 34 CFR 300.530 (f).</p>

Joseph L. Frommer, Esq., covers special education issues for LRP Publications.

Copyright 2022 © LRP Publications

5 signs the 504 team may need to reevaluate

To comply with Section 504, 504 teams must reevaluate students with disabilities on a periodic basis, including when a student's disability-related needs have changed. Districts should ensure their staff members, including special education directors and teachers, are able to recognize the red flags (some of the most common ones appear below) indicating a student may need to be reevaluated.

Sign	Explanation
1	<p>The student has new medical diagnoses: New medical or mental health diagnoses generally trigger the need to consider reevaluating a student who is currently receiving 504 services. A diagnosis of autism or bipolar disorder, for example may suggest the student requires new services or accommodations. Or, if the parent reveals that the student has been diagnosed with cancer, even if staff don't see symptoms manifesting presently, the team should consider reevaluating the student. The student may have symptoms that aren't readily observable. Or, the student may have intermittent symptoms which are not occurring at present. A reevaluation may uncover new needs or needs that are likely to arise when the condition worsens, or when side effects from treatment of the condition begin to affect the student at school. <i>See 27J Schs. (CO), 122 LRP 7099 (OCR 12/21/21).</i></p>
2	<p>The student's behavior significantly declines: If a student's behavior becomes increasingly difficult to manage, the team should consider reevaluating to determine whether the student requires new or different interventions. As part of the reevaluation, the team may need to obtain an FBA to get to the root of the behaviors and develop more effective interventions. In addition, a 504 team also view the repeated restraint and/or seclusion of a student, or the repeated suspension of the student, as a signal to consider reevaluating. <i>See Saco (ME) Sch. Dep't, 79 IDELR 284 (OCR 2021).</i></p>
3	<p>The student's grades significantly decline: When there is information suggesting that a student's educational program is not meeting the student's needs, such as a significant decline in grades, the 504 team should consider whether further evaluation or revisions to the student's IEP or placement are necessary. Another example is when a student's grades suffer because the student fails to thrive (such as where a student fails to turn in any assignments) during virtual instruction. <i>See, e.g., Benton Harbor (MI) Charter Schs., 80 IDELR 137 (OCR 2021).</i></p>
4	<p>The parent or teacher requests an evaluation: Teams generally should treat a request for a reevaluation from a parent or teacher as a strong signal that the student has new needs and requires a reevaluation. The 504 team should pay close attention to the information the parent or teacher provides, make notes concerning that input, and follow up to obtain any needed information, such as medical reports or the teacher's written observations of the student. <i>See 27J Schs. (CO), 122 LRP 7099 (OCR 12/21/21).</i></p>
5	<p>A student missed services or a scheduled evaluation because of emergency school closures: If a district failed to evaluate a student or implement a significant portion of a student's services during remote learning, or if the student failed to take advantage of services during remote learning, the student may have new needs of which the district is not yet aware. Districts should consider reevaluating such students to determine whether their needs have changed and whether they require new services or accommodations or additional services to make up for learning loss. <i>See Deming (NM) Pub. Schs., 80 IDELR 113 (SEA NM 2021).</i></p>

Note: A student also must be reevaluated prior to any significant change in placement. [34 CFR 104.35](#).

Joseph L. Pfrommer, Esq., covers special education legal issues for LRP Publications

Copyright 2022 © LRP Publications