

# IDEA Procedural Manual

## October 2025

Guidance on Providing Special Education and Related Services to Students with Disabilities Pursuant to the Individuals with Disabilities Education Act (IDEA)



OFFICE FOR  
STUDENTS WITH  
DISABILITIES



Office for  
Students with Disabilities

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# INTRODUCTION

## Purpose

This manual is intended to provide Chicago Public Schools (CPS) stakeholders with guidance and information on best practices regarding the provision of special education supports and services to students with disabilities. The manual has been developed and revised in accordance with the federal and state mandates, in collaboration with the Illinois State Board of Education (ISBE), and summarized below.

## Individuals with Disabilities Education Act (IDEA) and Article 14 of the Illinois School Code and 23 Illinois Administrative Code Part 226

Under the IDEA, Article 14 of the Illinois School Code, and implementing regulations, students with disabilities have a right to receive a free appropriate public education (FAPE) in the least restrictive environment (LRE). The IDEA defines students with disabilities as students who:

- Are ages 3 through 21 (until the day before their 22<sup>nd</sup> birthday), unless their birthday occurs during the school year, in which case they are eligible for services through the end of the school year; and
- Have been identified with one of the disabling conditions identified in the statute that adversely affects educational performance and requires special education.

The IDEA and its implementing regulations provide students with disabilities and their parents/guardians with [Procedural Safeguards](#) regarding the identification, evaluation, educational placement of, and provision of FAPE to students with disabilities. Meaningful parent/guardian involvement is an essential part of these [Procedural Safeguards](#). The Illinois rules provide further specificity regarding requirements for the identification, evaluation, educational placement, and provision of FAPE to students with disabilities. In addition, rules are provided for the administration of special education, the design of special education programs (including class size), home or hospital programs, state-operated or private programs, special education personnel, transportation, and residential care facilities.

## Section 504 of the Rehabilitation Act of 1973

The purpose of Section 504 of the Rehabilitation Act of 1973 is to (1) eliminate discrimination on the basis of disability in any program or activity provided by school districts and other educational providers that receive federal financial assistance, and (2) ensure that students who are Section 504-eligible have equal educational opportunities equivalent to those of their non-disabled peers. Unlike the IDEA, Section 504 does not limit coverage to certain specific categories of disabilities and no categorical labels are necessary. Instead, a student with a disability under Section 504 is defined as one who (1) has a physical or mental health impairment that substantially limits a major life activity, (2) has a record of such an impairment, or (3) is regarded as having such an impairment. If a student already has an IEP in place, the student will not also be provided a 504 Plan, as any needs that could be addressed by a 504 Plan can be addressed in the IEP.

**NOTE:** This manual is intended to provide guidance specifically related to IDEA and its implementing state and federal regulations. Please refer to the [Section 504 Procedural Manual](#) for more information.

# ROLES AND RESPONSIBILITIES

The following positions represent the CPS staff primarily responsible for supporting students with disabilities; however, this list is not all-encompassing as all school staff support students with disabilities. While individual responsibilities may differ, all are aligned in the greater mission of helping students with disabilities achieve success towards the instructional core, in the educational environment, and in life.

## Principal

As the instructional leader of a school, the principal is responsible for ensuring that their school complies with all applicable federal and state laws so that students with disabilities receive FAPE in the LRE and have access to the age- and grade-appropriate general education curriculum and all program options available at the school. The principal must oversee and ensure the implementation of all IEPs for each student with a disability in their school. The principal supervises all related services and special education staff assigned to the school, including coordinating services between general education teachers and special education teachers. The principal must also ensure that the local school district representative (case manager) has the time necessary to carry out job responsibilities.

**NOTE:** *If the principal delegates administrative duties related to special education procedures and services to the assistant principal, the following responsibilities apply to the designee. "School Administrator" refers to either the principal or assistant principal.*

**School Administrator responsibilities regarding students with disabilities include, but are not limited to:**

- Designating a local school district representative within the school building;
- Designating individual(s) responsible for completing all necessary IDEA notices and paperwork;
- Ensuring a district representative (i.e., local school district representative [which can be the principal, assistant principal, or other appropriately licensed staff member]) or, when authorized by the Office for Students with Disabilities (OSD), the OSD Special Education Coordinator (SEC), is designated on the *Parent/Guardian Notification of Conference* (referred to in this manual as *Notice of Conference [NOC]*) and in attendance at every IEP meeting;
- Providing professional development opportunities for general and special educators, as necessary, including ensuring all relevant staff attend mandatory OSD trainings;
- Allowing paraprofessionals to attend professional development opportunities;
- Providing support and guidance to staff to assist them in adhering to the directives described in this Procedural Manual;
- Making the necessary arrangements for staff to attend eligibility conferences and IEP meetings;
- Ensuring all pre-conference activities are completed in accordance with required timelines, including sending the *Notice of Conference* and indicating whether specific data has been collected;
- Monitoring staff to ensure qualitative and quantitative data are being used to make all IEP decisions;
- Ensuring complete draft IEPs [including General Considerations (Section 7), Areas of Need (Section 9), Accommodations/Modifications (Section 10), Specialized Instruction (Section 11), Grades (Section 13) and, if applicable, Transition Plan (Section 8)] along with - if applicable - paraprofessional, Extended School Year (ESY), and *Learning Environment Intervention* (LEI) forms in SSM, copies of all other conducted evaluations, and any other collected data that will be considered have been developed and provided to the parents/guardians **at least three school days prior to the meeting;**

- Ensuring that parents/guardians have access to school personnel who can answer questions related to their child’s IEP and are involved in IEP development;
- Ensuring an interpreter is at all IEP meetings (including initial and reevaluation eligibility determination meetings and annual reviews) for parents/guardians who have limited proficiency in speaking or understanding English and/or are deaf or hard of hearing to enable parents to meaningfully participate in the IEP meeting;<sup>1</sup>
- Ensuring IEPs are finalized in Student Services Management (SSM) at the IEP meeting (see [Agreement to Proceed with IEP Meeting](#) section);
- Ensuring IEPs for students with disabilities are current;
- Ensuring general education classrooms meet ISBE class size regulations;
- Ensuring separate special education classrooms meet ISBE class size regulations (see [Guidelines for Special Education Class Size](#) section);
- Ensuring general education teachers have access to current IEPs for all students with disabilities they teach;
- Ensuring all separate special education classrooms are located near the similarly age/grade general education classrooms and/or accessible entrances as appropriate;
- Ensuring special education teachers have copies of teacher’s editions for all subjects and grade levels they teach;
- Ensuring students with disabilities have age/grade-appropriate general education textbooks and materials;
- Ensuring scheduled common planning time for general education teachers and special education teachers;
- Ensuring collaboration time for special education teachers and related service providers (RSPs);
- Ensuring students’ schedules match the students’ IEPs;
- Ensuring paraprofessionals’ schedules match students’ IEPs;
- Ensuring students with disabilities participate—with or without specialized instruction in accordance with their IEPs—in all curricular areas available in the school, including non-academic areas during the school day, and ensuring students with disabilities have access to extracurricular activities offered at the school;
- Monitoring the implementation of IEPs and whether students with disabilities are making appropriate progress;
- Ensuring the *Parent/Guardian Notice—IEP Services Not Implemented Within Ten School Days* (referred to in this manual as [Notification of Non-Implementation of IEP Services \(NONI\)](#)) has been sent to the parent/guardian whenever IEP services have not been implemented within ten school days of the IEP meeting (see [Notification of Non-Implementation of IEP Services \(NONI\)](#) section);
- Ensuring the [Break in Service](#) letter has been sent to the parent/guardian whenever an interruption to IEP services occurs outside of the 10-day-implementation period following the finalization of an IEP;
- Ensuring IEP progress reports are completed for each student on a quarterly basis and provided to parents/guardians at the same time as the general report cards (unless the IEP includes a different timeline), and are maintained in the student’s temporary record;
- Sharing comments on student performance, behavior, and attendance with the local school district representative;

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<sup>1</sup> Under the Illinois regulations, a parent/guardian has the right to request that the interpreter provided by the district serve no other role in the IEP meeting than as an interpreter. [23 ILAC 226.530\(b\)\(3\)](#). Additionally, under the ADA, a parent/guardian may request a skilled sign language interpreter through the CPS ADA office, [ADA@cps.edu](mailto:ADA@cps.edu).

- Ensuring that special education teachers are not used as substitute teachers, unless it is an emergency; and
- Ensuring paraprofessionals are not used for class coverage, unless it is an emergency.<sup>2</sup>

## OSD Special Education Coordinator (SEC)

The OSD Special Education Coordinator (SEC) is responsible for providing oversight and guidance to networks, schools, and IEP teams to develop IEPs that meet legal requirements and ensure the provision of FAPE.

### OSD SEC responsibilities regarding students with disabilities include, but are not limited to:

- Monitoring the implementation of procedures and IEP-required services and adherence to best practice standards and protocols;
- Assisting in monitoring special education programs and related services to ensure compliance with federal and state regulations and CPS policies and procedures;
- Providing administrative support and technical assistance to school administrators, special educators, general educators, and school teams in the areas of CPS policy, IDEA, and state law and regulations;
- Providing assistance regarding scheduling and position requests/appeals to ensure maximum, effective, and appropriate utilization of special education staff per student IEPs;
- Troubleshooting major special education service issues to ensure all students with disabilities are receiving FAPE in the LRE;
- Supporting schools around appropriate discipline of students with disabilities and ensuring [Procedural Safeguards](#) are afforded (see [Discipline](#) section);
- Maintaining quality interactions with teachers, students, parents/guardians, and the larger community;
- Serving as the district representative at IEP meetings for charter, options, and contract schools if transportation is being considered as a related service;
- Serving as the district representative at IEP meetings if 100 percent removal from general education is being considered (i.e., CPS specialty school, separate day school or residential, or homebound [as the LRE]);
- Following procedures outlined for placing students in ISBE-approved, non-public facility placements (see [Separate Day School or Residential Placement](#) section); and
- Participating as part of the Network team to review data, engage in strategic discussions and follow-up activities, and participate in school walk-throughs, as needed.

## Local School District Representative (Case Manager)

Each school principal must ensure a staff member has been identified to serve as the local school district representative (also known as the “Case Manager”) In order to serve as the local school district representative at an IEP team meeting, the staff member must have a valid Professional Educator License (PEL) in one of the following areas:

- Special Education (PK-Age 22) endorsement
- School Support Personnel endorsement with a supervisory endorsement
- An administrative endorsement issued under [23 Ill. Admin. Code. Part 25, Subpart E](#).

The school’s case manager/local school district representative for Individualized Education Program (IEP) meetings should also serve as the Section 504 Coordinator.

### Local school district representatives are responsible for:

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<sup>2</sup> See the SEIU contract: <https://seiu73.org/contracts/>

- Coordinating all referrals (see [Referrals](#) section) to ensure that all required components are addressed and that the process is completed within 60 school days after receiving signed parent/guardian consents, including but not limited to, referrals for a Full and Individual Evaluation (FIE), initial Assistive Technology (AT) and Augmentative and Alternative Communication (AAC) evaluations, and/or functional behavioral assessments (FBAs). If the request is communicated verbally, the local school district representative must direct them to put the request for evaluation in writing and assist with transcribing if the parent/guardian is unable to write out their request;
- Completing the [Parent/Guardian Authorization to Send IEP/504 Documents and Related Information via Electronic Mail](#) form if the parent/guardian chooses to receive documents via electronic mail (see [Prior Written Notice \(PWN\)](#) section);
- Providing and explaining the [Notice of Procedural Safeguards for Parents/Guardians of Students with Disabilities](#) (referred to in this Manual as *Procedural Safeguards*) to parents/guardians;
- Providing and explaining the Notification of Transfer of Rights - Age Majority and Delegation of Rights to Make Education Decisions;
- Ensuring that all parent/guardian notices and consents for FIEs and placements are processed (and provided in the home language) and placed in the student temporary files (see [Translation of Vital Documents](#) section);
  - Ensuring an interpreter is invited to all IEP meetings (including initial and reevaluation eligibility determination meetings and annual reviews) for parents/guardians who have limited proficiency in speaking or understanding English and/or are deaf or hard of hearing;<sup>3</sup>
- Convening and facilitating IEP team meetings (e.g., initial and reevaluation eligibility determination meetings, annual reviews, manifestation determination reviews [MDRs], compensatory education, etc.) and acting as the district representative when an OSD SEC has not been designated as the district representative for that particular meeting;
- Arranging special education and related services for a student in accordance with the student's IEP, or contacting OSD to arrange assignment in another school, if necessary, to implement the IEP (see [The Placement Continuum](#) section);
- Facilitating the development of a Summary of Performance (see [Graduation](#) section), as appropriate, that includes information about the student's desired postsecondary goals, academic achievement and functional performance, and recommendations on how to assist the student in meeting their postsecondary goals;
- Finalizing each student's IEP in the SSM system at the IEP meeting and providing the student's parents/guardians with a copy at the conclusion of the meeting or by the end of the next school day, if the district and parent agree via the *Agreement to Proceed with the IEP Meeting* form (see [Agreement to Proceed with IEP Meeting](#) section);
- Ensuring that all relevant student data are entered into the SSM system in a timely manner;
- Entering SSM Events documenting a record request, notice of decision regarding request for an evaluation, excusal letter, consent for evaluation, conference notifications, procedural safeguards, parent/guardian or adult student agreement to proceed with meeting without them, IEP services not implemented within 10 days, providing parent a copy of a document, documentation of related service log, 3-day drafts, and/or parent communication;
- Notifying parents within 20 days from the start of the school year, or at the establishment of an Individualized Education Program, of their ability to request related service logs.<sup>4</sup>

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<sup>3</sup> Under the Illinois regulations, a parent/guardian has the right to request that the interpreter provided by the district serve no other role in the IEP meeting than as an interpreter. [23 ILAC 226.530\(b\)\(3\)](#). Additionally, under the ADA, a parent/guardian may request a skilled sign language interpreter through the CPS ADA office, [ADA@cps.edu](mailto:ADA@cps.edu).

<sup>4</sup> [105 ILCS 5/14-8.02f\(d\)](#)

- Ensuring the *NONI* has been sent to the parent/guardian whenever IEP services have not been implemented within ten school days of the IEP meeting (see [Notification of Non-Implementation of IEP Services \(NONI\)](#) section);
- Ensuring the *Break in Service* letter has been sent to the parent/guardian whenever an interruption to IEP services occurs outside of the 10-day-implementation period following the finalization of an IEP (see [Break in Service](#) section); and
- Consulting with the OSD SEC regarding students who require low incidence services (see [The Placement Continuum](#) section) or regarding problems that develop during the implementation of procedures.

**Prior to an FIE/IEP meeting, the local school district representative is responsible for:**

- Ensuring that all pre-conference activities are completed within required timelines;
- Obtaining consent for agency invite to transition meeting for students who are 14 ½ or older during the life of the IEP using the *Consent for Agency/Agencies Invitation to Transition Meeting form* prior to completing the *Notice of Conference*;
- Determining the date/time/location of the IEP meeting with participation of parents/guardians and other necessary team members;
- Arranging accommodations for parents/guardians as necessary (e.g., interpretation or translation services);
- Providing written *Notice of Conference* **at least 10 calendar days prior to the meeting**, which includes indicating whether specific data have been collected (see [Notification of Conference](#) section);
- Providing IL ABLE<sup>5</sup> information and documenting this within the IEP meeting notes;
- Providing IL Prioritization of Urgency Need for Services (PUNS) information and documenting this within the IEP meeting notes (see [Transition Service Plan Development](#) section);
- Providing parents/guardians a copy of draft FIE/IEP documents **at least three school days prior to the meeting** along with copies of all written material that will be considered by the IEP team at the meeting including, but not limited to, evaluation reports and collected data and, if applicable, paraprofessional, ESY, and *Learning Environment Intervention* forms. If the child already has an IEP, the local school district representative must also provide the parent/guardian with a copy of the IEP components that will be discussed;
  - Draft IEPs must include the following **completed** sections: General Considerations (Section 7), Areas of Need (Section 9), Accommodations/Modifications (Section 10), Specialized Instruction (Section 11), Grades (Section 13) and, if applicable, Transition Plan (Section 8);
- Determining which IEP team member(s) will review previous evaluation reports and provide a summary as the evaluation representative at the annual review meeting;
- Completing the *Parent/Guardian Excusal of an Individualized Education Program Team Member* form and obtaining parent/guardian signature for any required members of the IEP team who are not present for the meeting, in part or in full, **if the district and parent/guardian agree to the excusal**. The signed form is **uploaded as an attachment to the IEP** in SSM; and
- Preparing an agenda for the meeting.

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<sup>5</sup> Additional information regarding IL ABLE is available in the Illinois Able Brochure for Public Education ([English](#) & [Spanish](#)) and [illinoisable.com](http://illinoisable.com).

**At the FIE/IEP meeting, the local school district representative is the chairperson for the conference and is responsible for:**

- Acting as the local school district representative to authorize services, unless an OSD SEC is present. This must be specified on the *Notice of Conference* form;
- Ensuring the IEP is projected during the meeting to enable meaningful parent/guardian participation. If the IEP cannot be projected, ensure the parents/guardians either have access to a CPS computer or a paper copy of the draft IEP;
- Starting the meeting with introductions of all IEP team members, including their specific roles and how they interact with or provide services to the student, and ensuring that all required participants are present;
- Conducting the meeting by following an agenda and process based on the purpose of the conference;
- Documenting, or identifying one or more designee(s) to document IEP Notes to memorialize discussions during the FIE/IEP meeting and summarizing the decisions and decision-making process of the IEP team (see [Meeting Notes](#) section);
- Facilitating the completion of the IEP document at the meeting;
- Uploading into SSM any physician orders and emergency action plans used to develop individualized health care plans and attaching them to the student's IEP, when applicable;
- Completing the *Parent/Guardian Excusal of an Individualized Education Program Team Member* form, if not completed prior to the meeting (which is best practice), and obtaining parent/guardian signature for any required members of the IEP team who are not present for the meeting, in part or in full, **if the district and parent/guardian agree to the excusal**. The signed form is **uploaded as an attachment to the IEP** in SSM; and
- Distributing copies of the completed IEP to parents/guardians, teachers, and RSPs at the conclusion of the IEP meeting.

**Following the IEP meeting, the local school district representative is responsible for:**

- Informing all staff involved in the implementation of the IEP of their responsibilities to implement the IEP as written;
- Ensuring that all services delineated in the IEP are delivered.
- Sending the [Notification of Non-Implementation of IEP Services \(NONI\)](#) to the parent/guardian whenever IEP services have not been implemented within ten school days of finalizing the IEP;
- Ensuring all appropriate staff who interact with and support the student have access to and an understanding of the IEP;
- Arrange staff training (e.g., paraprofessional, AT/AAC, etc.), as appropriate;
- Updating data entry in the Student Information System (i.e., Aspen) with transportation requests, when applicable, and updated contact information, etc.;
- Completing additional documents as necessary based on IEP decisions for implementing IEP supports and services (e.g., Transportation Car Seat or Harness Measurements, ATRC Referrals, School Assignment Request, etc.);
- Reconvening meetings that require additional data collection (i.e., paraprofessional support and ESY) and/or require OSD SEC participation (i.e., consideration of CPS specialty school or separate day school and/or transportation for charter/contract/options schools); and
- Scheduling all meetings related to IEP reviews and revisions, when necessary.

## Special Education Teacher and/or Related Service Provider (RSP)

Prior to the IEP meeting, the special education teacher and/or RSP(s) are responsible for:

- Reviewing the student's current IEP to determine the degree of mastery of annual goals. If this is a conference to determine the student's eligibility for an IEP, compiling data and anecdotal records, samples of student work, and other information relevant to determine the student's potential for learning, rate of learning, and need for specialized instruction, related services, and/or accommodations;
- Assessing current achievement levels and progress toward achieving Illinois Common Core Standards and IEP goals;
- Compiling qualitative and quantitative data and other information about the student's education needs in general and in relationship to the general education curriculum, special factors that may impede the student's learning, information on attendance and class participation, or regarding the need for paraprofessional support and/or ESY services if applicable;
- Identifying the student's strengths, talents, hobbies, and other interests;
- Compiling qualitative and quantitative data if the student is an English Learner (EL) including levels of English language proficiency and home language proficiency for a student receiving bilingual services, in collaboration with the bilingual specialist<sup>6</sup>;
- Completing draft evaluation reports **at least three school days prior to the FIE meeting**;
- Completing a draft, **at least three school days prior to the IEP meeting**, of the proposed General Considerations (Section 7), Areas of Need (Section 9), Accommodations/Modifications (Section 10), Specialized Instruction (Section 11), Grades (Section 13) and, as required, the Transition Plan (Section 8) to support parents'/guardians' meaningful participation in IEP development; and
- Conferring as needed with general educators, bilingual specialists, and other special education providers (e.g., teachers, RSPs, paraprofessionals), and parents/guardians.
- Completing and maintaining related service logs, for RSPs, which are to be available upon parent request.

During the IEP meeting, the special education teacher and/or RSP(s) are responsible for:

- Sharing information regarding the student's present levels of academic achievement and functional performance in relationship to the general education curriculum, including specific progress toward IEP goals;
- Describing the student's learning style(s) and strategies that have been utilized with them, behavior and attendance data, as well as other relevant information regarding the student;
- Explaining the recommendations for proposed accommodations and modifications that will allow the student to be educated in the LRE;
- Explaining the recommendations regarding proposed annual goal(s) and benchmarks;
- **Actively participating in discussion** and completing General Considerations (Section 7), Areas of Need (Section 9), Accommodations/Modifications (Section 10), Specialized Instruction (Section 11), Curriculum, Grades, Promotion, and Graduation (Section 13), and, as appropriate, the Functional Behavioral Assessment/Behavior Intervention Plan (FBA/BIP) and Transition Plan (Section 8);
- **Actively participating in discussion** and ensuring IEP Team (Section 4), Procedural Safeguards (Section 5), Language (Section 6), Placement in the Least Restrictive Environment (Section 12), Extended School Year (Section 14), and Transportation (Section 15) sections are completed; and

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<sup>6</sup> A bilingual specialist is a bilingual-/ESL-endorsed teacher or administrator.

- Finalizing evaluation reports (e.g., RSP evaluations, Learning Environment Interventions [LEI], Learning Environment Screening [LES], etc.) by the conclusion of the meeting.

**Following the IEP meeting, the special education teacher and/or RSP(s) are responsible for:**

- Reviewing the IEP and understanding responsibilities for implementation;
- Arranging staff training (e.g., paraprofessional, AT/AAC, etc.), as appropriate;
- Implementing the IEP by providing direct instruction and/or consultative services in the appropriate setting for the prescribed minutes as outlined in the IEP;
- Communicating and collaborating with other service providers, including general education teachers, on a regular basis;
- Documenting service delivery and collaboration (i.e., RSP progress notes, teacher collaboration logs, etc.);
- Collecting evidence/data regarding progress toward goals and objectives/benchmarks, as indicated by the evaluation criteria and evaluation procedures of each goal;
- Measuring the student's specific progress and documenting it on the IEP Report Card each quarter;
- Establishing and maintaining effective and positive communication with parents/guardians; and
- Informing the local school district representative if there is a need for an IEP revision prior to an annual review.

## General Education Teacher

**Prior to the IEP meeting, each of the student's general education teachers is responsible for:**

- Reviewing the student's current IEP. If the purpose of the conference is to determine a student's eligibility, compiling data including progress monitoring data through Multi-Tiered Systems of Support (MTSS) or other response to interventions, samples of student work, and other information relevant to determining the student's potential for learning, rate of learning, and need for specialized instruction and/or accommodations;
- Identifying the student's strengths, talents, hobbies, and other interests;
- Observing the student's learning style(s) in the general education classroom;
- Identifying instructional and classroom management strategies that have been successful with the student;
- Identifying special factors that may impede the student's learning;
- Compiling qualitative and quantitative data and other information to establish the student's present levels of academic and functional performance (including, but not limited to: educational needs in relationship to the general education curriculum, special factors that may impede the student's learning, attendance, classroom participation);
- Compiling qualitative and quantitative data if the student is an EL including levels of English language proficiency and home language proficiency for a student receiving bilingual services, in collaboration with the bilingual specialist<sup>7</sup>
- If applicable, compiling qualitative and quantitative data regarding the need for paraprofessional support, ESY services, and/or transportation;
- Communicating with the special educator about student progress toward achieving IEP goals, including student's participation in classroom activities;

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<sup>7</sup> A bilingual specialist is a bilingual-/ESL-endorsed teacher or administrator.

- Collaborating with the special educator regarding IEP goal implementation and/or data collection, as appropriate;
- Suggesting positive intervention strategies for improving the student's behavior, supplementary aids and services, program accommodations or modifications, and supports for school personnel that may be necessary for the student to benefit from specialized instruction;
- Preparing a brief report of the student's current performance in relationship to the general education curriculum and including information regarding behavior and attendance patterns; and
- Collaborating with the special education teacher and/or RSP(s) in drafting General Considerations (Section 7) in narrative format **at least three school days prior to the IEP meeting.**

**During the IEP meeting, the general education teacher is responsible for:**

- Discussing information regarding the student's present levels of academic achievement and functional performance in the general education curriculum and the general education environment;
- Describing the student's behavior and interactions with peers in the general education environment;
- Describing age-appropriate curriculum and content;
- Sharing information regarding the effectiveness of accommodations provided for the student in the general education classroom based on the previous IEP;
- Making recommendations for continuation or discontinuation of accommodations;
- Making recommendations for annual goals that relate to the student's progress in the general education curriculum; and
- Assisting in the determination of LRE.

**Following the IEP meeting, the general education teacher is responsible for:**

- Implementing the IEP by providing accommodations and modifications in accordance with the IEP;
- Collaborating with the special education teacher, RSPs, and other teachers about meeting the student's needs and implementing the IEP;
- Establishing and maintaining communication with the parents/guardians;
- Assessing the student's progress on a regular basis (at least quarterly); and
- Informing the local school district representative if an IEP revision is needed.

## Paraprofessional<sup>8</sup>

Paraprofessionals are responsible for assisting in the instruction and personal care needs of students with disabilities in accordance with their IEP. Their primary duties include assisting special education teachers in elementary and high schools in reinforcing supports for students with various disabilities in accordance with each student's IEP.

**Paraprofessionals are responsible for:**

- Working and assisting with the delivery of instructional and/or other direct or indirect services for eligible students per their IEPs;
- Providing instructional supports for students to reinforce learning concepts by reteaching, reviewing, and drilling/ practicing lessons;

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<sup>8</sup> In CPS, paraprofessional support may be provided by a Special Education Classroom Assistant (SECA), Teacher Assistant or Instructor Assistant. See the [CTU contract](#) and [SEIU contract](#).

- Assisting with data collection and providing feedback to the special education teacher and/or RSPs regarding student academic performance and/or behavior;
- Implementing accommodations and modifications and other educational or behavioral strategies, under the direction of the teacher and/or RSPs;
- Documenting service delivery (e.g., SSM Service Capture);
- Assisting teachers and RSPs in maintaining written student records (e.g., data collection, portfolios, etc.);
- Supporting students in accessing the general education curriculum in alignment with student IEPs and/or per the direction of the teacher;
- Assisting students with AT, including computers, software programs, electronic learning tools, and communication devices. This may include assisting with setup/maintenance of devices, data collection, and modeling device use;
- Collaborating and communicating with appropriate school personnel about the needs of students with disabilities;
- Providing input to the teacher regarding the student's response to strategies that have been used in instruction or behavior management;
- Obtaining, preparing, and organizing instructional materials as directed by the teacher;
- Maintaining and protecting students' rights to confidentiality;
- Assisting with personal care needs (e.g., toileting) as identified in the student's IEP;
- Lifting and positioning non-ambulatory students as instructed by the physical therapist or teacher and in adherence to written instructions from students' personal physicians; and
- Assisting students with orthopedic impairments by arranging and adjusting tools, work aids, and equipment used by students in classrooms, including but not limited to, specially equipped worktables, positioning equipment, and wheelchairs.

## Parent/Guardian<sup>9</sup>

### IDEA defines "parent" as:

- Biological or adoptive parent;
- Foster parent;
  - For Youth in Care (children living in foster homes),<sup>10</sup> the educational rights holder is the foster parent. If there is no foster parent, the educational rights holder is the educational surrogate parent.<sup>11</sup>
- Educational surrogate parent;<sup>12</sup>
- Guardian; or
- Individual acting in place of a biological or adoptive parent (including grandparents, stepparents, or other relative), with whom the child lives or an individual legally responsible for the child's welfare.

**NOTE:** DCFS staff (e.g., caseworker or educational liaison) is **NOT** the parent for IDEA purposes but can refer a student for a special education evaluation as a state agency.

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<sup>9</sup> Parent/guardian who is a CPS employee must follow the [CPS Code of Ethics](#). For additional information, see [CPS Code of Ethics Guidelines](#).

<sup>10</sup> See [Youth in Care](#).

<sup>11</sup> See additional information: [ISBE Educational Surrogate Parent](#).

<sup>12</sup> Requests for an Educational Surrogate Parent can be made electronically at: <https://apps.isbe.net/SEMS/SurrogateRequestPublic.aspx>.

Parents/guardians are equal members of the IEP team and are encouraged to actively participate in the discussion and decision-making during eligibility and IEP meetings.

**Prior to the IEP meeting, parents/guardians are encouraged to:**

- Participate with school personnel to determine a mutually convenient date and time for the IEP conference;
- Complete the [Parent/Guardian Authorization to Send IEP/504 Documents and Related Information via Electronic Mail](#) form if receipt of documents via electronic mail is preferred (see [Prior Written Notice \(PWN\)](#) section);
- Review the current IEP or, if the purpose of the conference is to determine eligibility, review evaluation or assessment data submitted in advance of the conference;
- Review the most recent progress reports from teachers;
- Review the draft IEP documents and data that have been prepared for the IEP team's discussion and notify the local school district representative of any specific IEP items they may wish to discuss (e.g., goals, AT, paraprofessional support, etc.) and request draft IEP documents and data from the Case Manager, if not provided within three school days prior to the IEP meeting;
- Request that school staff collect data regarding ESY, paraprofessional, and/or transportation services, and/or placement in a separate day school, if the data have not already been collected and they believe such services and/or placement may be needed;
- Request that school staff collect the necessary data if they believe their child may have a specific learning disability and school staff have not completed the *Learning Environment Intervention* and *Learning Environment Screening* documents and collected applicable data;
- Provide input regarding the student's strengths, abilities, and needs, as well as to communicate any parent/guardian concerns to the team (either verbally or in writing);
- Provide recent medical documentation and/or other documentation for the team to consider (e.g., medical updates, private tutor/therapy progress notes and reports, outside evaluations, etc.);
- Think about and share the skills they would like their child to master by the end of the school year and future goals;
- Notify the local school district representative if additional information is needed (e.g., evaluation reports, previous IEPs or other records or reports, procedural safeguards, etc.), or any special accommodations (e.g., request to record IEP meeting due to parent/guardian disability); and
- Decide whether they would like to invite family members or other individuals who have information regarding the student to attend the conference, and notify the local school district representative in advance of their intention to invite these other individuals.

**During the IEP meeting, parents/guardians are encouraged to:**

- Share their vision for the student's future and expectations for the year;
- Identify the student's strengths and interests, including the types of activities the student enjoys at home and in the community;
- Share information about the student's relationships with siblings and friends;
- Discuss the types of discipline strategies and rewards that are effective at home and in the community;
- Share relevant information about the student's medical and personal care needs;

- Provide input regarding annual goals, objectives/benchmarks, and all other IEP components for consideration by the other IEP team members;
- Ask other IEP team members to clarify, explain, or give examples if any information presented is unclear;
- Ask questions to clarify any reports or information regarding the student's present levels of performance in classwork, behavior, and community activities, as appropriate; and
- Ask the local school district representative to review or explain the [Procedural Safeguards](#), if necessary.

#### **Following the IEP meeting, parents/guardians are encouraged to:**

- Review the IEP document to assure that all decisions made at the conference are documented;
- Establish and maintain communication with teachers, paraprofessionals, and RSPs;
- Assist the child with homework assignments and/or ask the teacher what can be done to help the child with schoolwork; and
- Participate in CPS parent/guardian training programs to enhance knowledge of relevant educational issues.

## **Student**

Students may be invited to attend all or part of an IEP meeting. Students who are 14 ½ or older must be invited to attend IEP meetings **if transition goals and services are being considered**. If the student does not attend, efforts must be made and documented to ensure that the student's postsecondary preferences, interests, and plans are considered by the IEP team.

#### **Prior to the IEP meeting, the student is encouraged to:**

- Identify school activities they enjoy and activities they would like to pursue;
- Identify their educational, employment, and independent living goals (e.g., college, career, job placement);
- Share any concerns or questions with their parents/guardians or teachers;
- Identify which accommodations have been the most and least helpful and those which were not useful; and
- Decide if they would like to share anything else about their educational needs and/or program at the IEP meeting.

#### **During the IEP meeting, the student is encouraged to:**

- Identify their strengths and interests, including the types of activities they enjoy at home and in the community;
- Identify the academic and behavioral accommodations postsecondary preferences, and interventions they have received that are the most and least helpful;
- Share postsecondary preferences, interests, and goals;
- Participate in the discussion of annual goals, objectives/benchmarks, and other IEP components;
- Ask other IEP team members to clarify, explain, or give examples if any information presented is unclear;
- Ask questions to clarify any reports or information presented regarding their present levels of performance in classwork, behavior, and community activities, as appropriate; and
- Ask the local school district representative to review or explain [Procedural Safeguards](#), if necessary.

**Following the IEP meeting, the student is encouraged to:**

- Work with teachers, paraprofessionals, RSPs, and parents/guardians in order to improve achievement and meet benchmarks and goals;
- Review the criteria for promotion and grading;
- Communicate to parents/guardians and teachers about problems they encounter and ask for help as necessary; and
- Indicate to parents/guardians and teachers which accommodations or modifications are most and least helpful.

## ROLE OF MULTI-TIERED SYSTEM OF SUPPORTS<sup>13</sup>

The Multi-Tiered System of Supports (MTSS) is the overarching framework that encompasses both the academic and social/emotional dimensions of learning. The MTSS framework is a key part of the broader CPS strategy to support ALL learners and ensure equitable access to a robust, high-quality education. MTSS implementation is the shared responsibility of all CPS educators, staff, families, and communities. It is designed so that educators can make data-based decisions to meet the needs of students from different backgrounds, levels of language proficiency, learning styles, and levels of achievement.

The MTSS framework embraces the importance of engaging families and the community in a collaborative partnership. Effective partnerships include students, parents/guardians, families, community members, and educators. A positive and welcoming school environment fosters family engagement, improves student outcomes, and is conducive to accelerated learning.

The MTSS framework is designed to provide high-quality, differentiated instruction and targeted support for student needs in all school and classroom settings. The MTSS framework includes direct instruction and other interventions with targeted supports for those students who require additional, explicit, and more focused instruction to meet the academic and behavioral standards. This framework is based upon providing increased instructional time and intensity of academic and/or behavioral supports, as identified on the basis of student needs. The specific needs are identified and supported early and effectively.

**NOTE:** Pursuant to 105 ILCS 5/14-8.02h(c), parents/guardians will be provided with written notice of the use of MTSS. Additionally, parents/guardians will be provided all data collected and reviewed by CPS with regard to the student's MTSS process.

A data-based decision-making process informed by multiple measures of data guides MTSS implementation. It provides a cohesive structure that integrates the various efforts of CPS to ensure that the academic and the social/emotional needs of all students (including ELs, students with disabilities, and gifted students) are the highest priority in all schools.

Progress-monitoring data analysis will allow students to move fluidly between tiers, depending on their progress (rate of improvement). The progress-monitoring tools support teachers' assessments of student development and intervention effectiveness and help teachers make decisions on the frequency, intensity, and duration of a particular intervention.

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<sup>13</sup> For additional information regarding Multi-Tiered System of Supports, see [Multi-Tiered System of Supports](#).

The length of time a student receives an intervention depends on multiple factors, including which skill is being learned, the gap between the desired outcome and current level of proficiency, the time needed to close that gap, student age, or developmental level. Most importantly, the length of time a student receives an intervention depends on the student's rate of progress and response to that intervention. District, network, and school protocols define which individuals may provide interventions; the settings in which the interventions may occur; characteristics that interventions must possess to ensure they are evidenced-based at various levels of intensity; parameters for the minimum length of the intervention sessions and number of interventions per week and duration; and criteria for determining when the intervention is terminated.

**NOTE:** *Whenever there is a reason to suspect a student may have a disability and in need of special education and related services, **the student is not required to complete a specific number of weeks or levels of MTSS or other response to interventions before a referral is made for an FIE.** This decision is always made on an individualized basis.*

*IEP-based Specialized Instruction (i.e., IEP goal) is not considered a Tier 3 intervention. Additionally, students with IEPs continue to receive tiered supports through the MTSS Framework for skills not previously identified as disability-based deficits.*

## CHILD FIND PROCESS

Child Find is an ongoing process that identifies, locates, and evaluates children birth through age 21 who may require special education services. Chicago Public Schools is obligated to actively identify, locate, and evaluate all children ages 3 through 21 residing within the City of Chicago who may be eligible for special education services.

The Child Find process focuses on students who are not currently enrolled in a special education program and who are suspected of having a disability, living within the City of Chicago which includes: students enrolled in a CPS education program, unenrolled students, students attending a non-public school within the City of Chicago, and highly mobile children<sup>14</sup> such as migrants and students in temporary living situations (STLS).

As part of the Child Find process, CPS conducts developmental screenings and partners with Early Intervention.

### Developmental Screenings

The OSD Child Find Screening Team provides free early childhood developmental screenings for children birth to five who are not already enrolled in a CPS school or a Head Start Facility or receiving Early Intervention Services.

Developmental screenings can indicate if a child is having difficulties with cognitive/academic, communication, social-emotional, and fine/gross motor skills. A hearing and vision screening are also available. Regional screenings are held monthly at several Chicago Public Libraries across the city.<sup>15</sup>

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<sup>14</sup> [OSEP Policy Support 22-02: Ensuring a High-Quality Education for Highly Mobile Children](#)

<sup>15</sup> For the current Child Find screening schedule, see [Early Childhood](#).

## Early Intervention (EI) to Early Childhood (EC) Transition<sup>16</sup>

A child who was eligible for EI services must be evaluated to determine eligibility for Early Childhood Special Education (ECSE) services through CPS prior to their third birthday. OSD works collaboratively with Early Intervention Service Coordinators to schedule evaluations with the Citywide Assessment Team (CAT) as the child approaches their third birthday. Direct questions about a child's EI to EC transition and/or evaluations to the EI service coordinator and/or [earlychildhoodevals@cps.edu](mailto:earlychildhoodevals@cps.edu).

The district's EI to preschool transition process ensures continuity of services, minimizes disruption to the family system, promotes child functioning in the natural environment or the least restrictive environment, and hears family concerns and decreases negative emotions around the transition.

## Referrals

Child Find efforts which identify a child with a possible disability may result in a referral for an FIE.

The following persons can make a referral or request an evaluation:

- CPS school personnel,
- Parent/guardian of the student,
- An employee of the Illinois State Board of Education (ISBE),
- An employee from another state agency,<sup>17</sup> or
- An employee from a community service agency.<sup>18</sup>

Requests for an FIE from any of the above persons must be submitted to the school principal or local school district representative in writing (e.g., email and/or paper-based), indicating the sender and date of submission. It is important that the request include:

1. An explanation of the presented concerns; and
2. Any supporting documentation, including any medical or outside evaluation report provided by the parent/guardian.

If the request is communicated verbally, the local school district representative directs them to put the request for evaluation in writing and assist with transcribing if the parents/guardians are unable to write out their request. When a referral is submitted in compliance with all requirements, **the district's response must be provided to the parent/guardian within 14 school days of its receipt.** The *Parent/Guardian Notification of Decision Regarding a Request for an Evaluation* form in SSM must be used to communicate this response.

## CPS Staff Referrals

CPS staff may refer a student for an evaluation by notifying the local school district representative and completing a *Student Referral* form in SSM to document the basis for the referral. Documentation to support the referral must include the following:

- Current information about the student, including grades, attendance, any suspensions, academic performance, behavior, and classroom participation;

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<sup>16</sup> For additional information regarding EI to EC Transition, see [Early Childhood](#).

<sup>17</sup> For information regarding state agencies, see <https://www.ilsos.gov/services/illinks.html>.

<sup>18</sup> For information regarding community service agencies, see <https://www.dhs.sIDAtate.il.us/page.aspx?item=29734>.

- Data regarding any interventions implemented and the student’s response to those interventions; and
- Documentation that the student was provided the appropriate core curriculum instruction by qualified personnel.

**NOTE:** *Whenever there is a reason to suspect a student may have a disability and in need of special education and related services, **the student is not required to complete a specific number of weeks or levels of MTSS or other response to interventions before a referral is made for an FIE.** This decision is always made on an individualized basis.*

### Non-CPS Personnel Referrals

It is important that referrals from non-CPS personnel, including parents/guardians, provide supporting documentation and an explanation of the concern or suspected disability. If the referral request fails to sufficiently articulate the basis for concern, the local school district representative requests the omitted information. If the student is a CPS student, the local school district representative must review the student records and gather information from any CPS staff who have worked with the student. The 14-school-day response time still applies. If there is not sufficient information to support the referral prior to the 14-school-day response deadline, the referral for an evaluation is denied. If the non-CPS person communicates their request verbally, the local school district representative directs them to put the request for evaluation in writing and assist with transcribing if the parents/guardians are unable to write out their request. The principal or local school district representative may ask the parent/guardian to provide any relevant information about the child, including any reports, prior evaluations, health records, school records from other schools, etc., to avoid duplication of information and assist in making appropriate decisions about the referral request. Still, this request may not delay or extend the 14-school-day response timeline.

**NOTE:** *Parents/guardians may also submit private evaluations they have obtained for consideration during the FIE or IEP process or at any other time. The IEP team must review and consider the results of the private evaluation and determine whether the student’s eligibility and/or IEP require revision in light of the new information. If the parent/guardian presents a private evaluation report outside of the IEP meeting, the local school district representative must send a Notice of Conference within 10 calendar days of receipt of the private evaluation, scheduling an IEP meeting (generally within 30 days of receipt of the private evaluation report) for the team to review and consider the report. At this IEP meeting, the team also considers whether an evaluation or reevaluation of the student by CPS is warranted. The IEP team is not obligated to adopt the evaluator’s recommendations or conclusions. Evaluators may accept outside reports in full, in part, or not at all.*

### Referrals of Non-Attending Students

Referrals for students who attend a private school in the City of Chicago, whether or not the student lives in the city, or for a student who lives in the City of Chicago and is home-schooled, must be emailed directly to OSD at [privateschoolevals@cps.edu](mailto:privateschoolevals@cps.edu). In either case, the parent/guardian must register the child as a “non-attending student” by completing the form that will be sent by the private school evaluation team.

### Determining Need for Full and Individual Evaluation (FIE)

To determine if a student requires an FIE, the local school district representative, along with any other individuals designated by the principal (e.g., MTSS Team, Behavioral Health Team, Instructional Leadership Team), must review the referral information and screening data and conduct preliminary procedures. Preliminary procedures can include observation(s) of the student, an assessment or screening for instructional purposes, consultation with the teacher or other individual making the referral, and/or a

conference with the student. As part of this process, the review must ensure that the student's need for an FIE has been considered and documented fully.

### Evaluation Is Not Warranted

If it is determined that the evaluation is not warranted, the local school district representative must ensure that the parent/guardian and any other referral source are provided a written notice of this decision within 14 school days from the date the school received the FIE referral using the *Parent/Guardian Notification of Decision Regarding a Request for an Evaluation* and also provide the [Procedural Safeguards](#).

#### The form must include the following:

- Notice to the parent/guardian/referral source of the referral date, reasons for the referral, and why the school determined that the evaluation was not warranted, and any records, reports, or other information that were used as the basis for the decision;
- The mailing date of the notice;
- Any plan to address the student's needs, such as general classroom interventions designed by the Instructional Leadership Team and a time frame for implementation and review; and
- The contact person, which is usually the local school district representative.

**NOTE:** *Lack of MTSS or other responses to intervention data can **never be the basis** for denying an evaluation for students suspected of having a disability, including a specific learning disability. If a student is suspected of having a specific learning disability and MTSS data are insufficient or not available, the MTSS data are gathered during the 60-school-day evaluation time period.*

### Evaluation Is Warranted

If it is determined that it is appropriate to initiate an FIE after the review of the referral and preliminary procedures, the local school district representative must notify the parent/guardian and requestor (if not the parent/guardian) of this decision **within 14 school days of the school's receipt of the request** through the *Parent/Guardian Notification of Decision Regarding a Request for an Evaluation* and [Procedural Safeguards](#). In addition, a team of individuals, including the parent/guardian, must also convene a meeting to design the evaluation and prepare the *Parent/Guardian Consent for Evaluation* form for the parent/guardian's signature **within the same 14-school-day period**. This process is referred to as the Assessment Planning process. The parent/guardian is provided the [Procedural Safeguards](#) and *Notice of Conference* at least three school days prior to the Assessment Planning meeting. If the parent/guardian cannot attend/participate in the Assessment Planning meeting within the 14-school-day period, the team proceeds and conducts the meeting via the steps below, as the complete assessment plan must be provided to the parent/guardian within the 14-school-day period.

**NOTE:** *For students suspected of or identified as having dyslexia, dyscalculia, or dysgraphia, a referral should be initiated, and an Assessment Planning meeting convened.*

### Assessment Planning

The local school district representative facilitates the Assessment Planning process by assembling a team, including the parent/guardian, to consider the relevant domain(s) of suspected disability and what, if any, additional evaluation data or other information is necessary. The parent/guardian must receive the *Notice of Conference* at least three school days prior to the Assessment Planning meeting.

The Assessment Planning process begins with reviewing existing data and other information about the student, including data from a variety of formal and informal sources. Any student whose Home Language Survey (HLS)<sup>19</sup> indicates a language other than English is spoken at home is screened to determine proficiency in speaking or understanding English. The IEP team may conduct this review without a formal meeting. The local school district representative is responsible for gathering and maintaining all pertinent data from the IEP team members. Participants use the *Parent/Guardian Consent for Evaluation/Assessment Plan* to document these steps.

**NOTE:** *If a referral is specific to one domain area (e.g., communication domain for a speech evaluation), the team must still consider all data to determine if other domain areas are relevant to be considered for assessment.*

**Step One:** Determine which of the eight domain areas (i.e., health, vision, hearing, social/emotional status, general intelligence, academic performance, communication status, and motor abilities) are relevant to the student’s suspected disability. **The relevant domain areas are determined through consensus of the team. Consensus is defined as a general (not necessarily unanimous) agreement and is a decision arrived at by most of those involved versus one individual.** The district is ultimately responsible for ensuring a comprehensive evaluation is conducted. It is not appropriate to make decisions based on a “vote.” When the team cannot reach consensus, the district representative, who is either the local school district representative or the OSD SEC, will identify the final recommendation on behalf of the district when the team cannot reach consensus. **While determining relevant domains is a consensus, evaluations under each domain are conducted by specific individuals, detailed in the chart under the [Evaluation Reports](#) section.**

**NOTE:** *Any presented concerns that may indicate an area of suspected need are to be addressed by domaining-in and conducting an evaluation.*

**Step Two:** For each relevant domain, gather and review existing data and document what existing information about the child is available. Describe a brief summary of historical and current information, which may include:

- Presenting concerns/needs;
- Previous services;
- Internal evaluations (e.g., date of initial and most recent, general findings, etc.); and
- Outside evaluations/reports (e.g., date of evaluation, evaluator details, general summary and recommendations, etc.).

**Step Three:** For each relevant domain, decide whether any “Additional Evaluation Data are Needed” and if there is sufficient information to determine:

- Present levels of academic and functional performance and educational needs (including the student’s strengths/skills);
- Whether the student has or continues to have a disability;
- Whether measurable data show the disability is adversely affecting the student’s education; and

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<sup>19</sup> [The Home Language Survey \(HLS\)](#) and additional languages via [ISBE Home Language Surveys](#).

- Special education and related services, including supplementary aids and services (e.g., AT, augmentative and alternative communication device, etc.), that the student may need to participate and make progress in the general curriculum to the greatest extent possible.

If existing information is NOT adequate for each relevant domain area (additional information needed), determine what additional information is needed and proceed to **Step Four**.

If existing information is adequate for any relevant domain area (no additional information is needed), no additional assessments must be conducted in that domain. However, the parent/guardian must be informed that no additional information is needed and must be in agreement. Additionally, an **Evaluation Report summarizing the existing information must be completed**. Proceed to **Step Five**.

**Step Four:** If additional information is needed, identify the “Sources From Which Data Will Be Obtained.” The team must use a wide variety of assessments, tools, and strategies to gather relevant functional, developmental, and academic information about the child, including information provided by the parent, to conduct the evaluation.<sup>20</sup> The *Assessment Plan* sources identify general information regarding the type of instruments and/or procedures to be utilized. **Names of specific diagnostic instruments are not included.** Additionally, the *Assessment Plan* indicates, at a minimum, the title of the individual who will obtain the additional data.

***NOTE:** Absent extenuating circumstances, all assessments will be conducted by CPS personnel. Any request for an independent educational evaluation at public expense must follow the procedures for Parent/Guardian Request for Independent Educational Evaluation (see [Parent/Guardian Request for Independent Educational Evaluation \(IEE\)](#) section).*

**Step Five:** Finalize the *Assessment Plan* and provide a copy to the parent/guardian, which includes the Consent for Evaluation. Document this as an SSM Event.

If the parent/guardian agrees to the proposed *Assessment Plan*, they must sign and return the *Parent/Guardian Consent for Evaluation*. Once the signed *Parent/Guardian Consent for Evaluation* is received, the 60-school-day FIE time frame begins. The signed *Parent/Guardian Consent for Evaluation* must be uploaded into SSM. Additionally, the local school district representative must schedule an Eligibility Determination meeting to determine eligibility, and an IEP meeting if eligible, prior to the expiration of the 60-school-day time frame.

***NOTE:** Any consent obtained from the parent/guardian is sufficient for one calendar year. If more than one year has passed and the necessary evaluation information has not been obtained/completed by the team, then the local school district representative must receive a new consent from the parent/guardian in order to begin/continue the evaluation process.*

If the parent/guardian disagrees with the proposed *Assessment Plan*, the local school district representative, within 10 calendar days after a parent/guardian requests modifications, must either (1) accept the parent/guardian request, revise the *Assessment Plan* form, and provide the parent/guardian with the updated written *Assessment Plan* explaining that additional or different evaluation information will be

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<sup>20</sup> <https://sites.ed.gov/idea/statute-chapter-33/subchapter-ii/1414>

obtained or (2) deny the parent/guardian request and provide the parent/guardian with **written notification** that the school will not revise the assessment plan and the basis for this decision.

If the parent/guardian does not consent to the proposed evaluation or reevaluation after the necessary attempts to obtain consent have been made, consultation with the OSD SEC is recommended. If the parent/guardian does not return the consent form to a proposed reevaluation, after the necessary attempts to obtain consent have been made, the IEP team can move forward by conducting a review of records.

**NOTE:** For reevaluations, written consent must be obtained, **OR** three attempts must be made to obtain written consent, including a third attempt via certified mail in order to finalize the Consent/Assessment Planning document. Each attempt must be logged as an SSM Event. Prior to making the third attempt, contact the parent/guardian (or student if they are over 18 years old) and inform them that without consent to evaluate, the team will only be able to proceed with a records review. The third attempt to obtain consent must be made at least 10 calendar days after the second attempt was made.

## EVALUATIONS

### Full and Individual Evaluation (FIE)

An FIE is the process used to determine a student's needs and eligibility for special education and related services under IDEA. In conducting the evaluation, a variety of assessment tools and strategies must be used to determine whether the student meets eligibility criteria. The IEP team must design the FIE to include assessments in all areas related to the suspected disability in one or more of the following eight (8) domains, if appropriate: health, vision, hearing, social/emotional status, general intelligence (cognitive functioning), academic performance, communication status, and motor abilities. The evaluation must be sufficiently comprehensive to identify the student's special education needs.

### Initial Evaluation

An initial evaluation determines eligibility for the first time for a student. When conducting an initial evaluation, it's important to examine all areas of a student's functioning to determine not only if they are a student with a disability or suspected disability, but also determine their educational needs. The initial evaluation must be completed, and the IEP team must determine eligibility for special education and related services, within 60 school days after the date the parent/guardian provides written consent to conduct the FIE. ***When fewer than 60 school days are left in the school year, and the parent/guardian has provided written consent, the eligibility determination and the IEP (if the student is eligible) must be completed prior to the first day of student attendance in the next school year.***

The 60-school-day time frame **does not apply** if:

- The parent/guardian repeatedly fails or refuses to produce their child for the evaluation. **Teams need to document all efforts to schedule/conduct assessments for the evaluation, including in reports and SSM Events, as applicable. If the team is unable to engage the parent/guardian to produce the child, then the team proceeds with the Eligibility Determination process and finalizes the Eligibility Determination document, even if the team ultimately does not have sufficient data to make a determination of Eligibility;**
- A student transfers into CPS after the 60-school-day time frame has begun and prior to an eligibility determination by the student's previous district. **This exception only applies if staff is making sufficient progress to ensure prompt completion of the evaluation, and the parent/guardian and the**

local school district representative agree to a specific time when the evaluation will be completed; and

- For students suspected of having a **specific learning disability**, the local school district representative and the parent/guardian may agree in writing, via the *Mutual Written Agreement to Extend Eval Timeline* form, to extend the 60-school-day time frame if necessary to collect sufficient MTSS or other response to intervention data. This agreed-upon extension cannot be longer than 20 school days and is only to be used in extraordinary circumstances.

## Reevaluation

There are two types of reevaluations:

1. **Triennial:** A reevaluation must be conducted for each student with a disability who is receiving special education and/or related services at least every three years from the date of the last eligibility determination to determine if they are still eligible.
2. **Reevaluation prior to triennial:** A reevaluation prior to triennial (also referred to as a special evaluation) is conducted when new data/information is presented that may require the team to consider additional and/or a change in eligibility categories. For this type of evaluation, the 60-school-day time frame for evaluations applies.

**NOTE:** A reevaluation must include ALL RELEVANT domains for a student to be evaluated and considered at the Eligibility Determination meeting.

A reevaluation is NOT required, unless the student is due for their triennial evaluation, for a student prior to terminating special education services due to the student's graduation from high school with a regular high school diploma or for a student who is no longer eligible for a public education based on age (the end of the school year during which the student turns 22). In this case, the local school district representative facilitates the development of a *Summary of Performance* that includes information about the student's desired postsecondary goals, academic achievement and functional performance, and recommendations on how to assist the student in meeting their postsecondary goals (see [Graduation](#) section).

**NOTE:** Failure to conduct the reevaluation, if it is due, can potentially deny the student accommodations from their college or university as many require updated assessment reports.

## Evaluation to Consider a Related Service

A request may be made prior to the three-year reevaluation date to determine if a related service is required. This type of evaluation may be requested to consider the addition or removal of a related service based on a written request by the teacher, RSP, and/or student's parent/guardian because of a significant change in the student's educational needs, including improved academic achievement and functional performance.

An Evaluation to Consider a Related Service is initiated by completing the referral form. The referral will indicate "FIE Not Warranted" as it is not an FIE and does not result in identifying and/or changing the student's special education eligibility or identified disability. The Consent Assessment Plan process is then completed (e.g., NOC, Assessment Plan meeting, obtaining consent, etc.) for the identified related service(s) to be considered to be added/removed (see [Assessment Planning](#) section). Once consent is obtained, the 60-school-day time frame for initial evaluations applies. The evaluation(s) follow the evaluation process described below as well as the guidelines detailed under [Considering a Related Service](#) section.

After the evaluation(s) are completed, an IEP meeting (or IEP revision meeting) is conducted to review the findings and incorporate the assessment recommendations, as appropriate. The IEP team meets 10 calendar days or more after the parent/guardian receives the *Notice of Conference* form, and before the 60-school-day time frame elapses, to review the information gathered through the evaluation process. The parent/guardian may waive the 10-calendar-day notice for the IEP meeting, but the waiver must be in writing, uploaded to SSM and logged as an SSM Event. **Since an Evaluation to Consider a Related Service is NOT an FIE, there is no Eligibility Determination meeting.**

Draft copies of the evaluation reports and the draft IEP **MUST** be provided to the parent/guardian at least three school days prior to the meeting. At the meeting, the *IEP* and evaluation reports should be projected to support meaningful parent/guardian participation in the FIE discussion. If the documents cannot be projected, the parent/guardian must be given either access to a district computer or paper copies of the evaluation reports.

## THE EVALUATION PROCESS

**Evaluators must ensure that their assessments are selected and administered in a nondiscriminatory manner. Instruments and procedures used by evaluators and considered by the team must be:**

- Selected and administered so as not to be discriminatory on a racial or cultural basis;
- Provided and administered in the child's home language or other mode of communication and in the form most likely to yield accurate information about what the child knows and can do academically, developmentally, and functionally;
- Used for the purposes for which the assessments or measures are valid and reliable;
- Administered by trained and knowledgeable personnel;
- Administered in accordance with any instructions of the producer of the assessments;
- Tailored to assess specific areas of educational need and not merely those that are designated to provide a single general IQ; and
- Selected and administered so as to best ensure that if an assessment is administered to a child with impaired sensory, manual, or speaking skills, the assessment accurately reflects the child's aptitude or achievement level or whatever other factors the test purports to measure.

**Evaluations must be conducted in a manner that is not discriminatory with respect to language, culture, race, and gender as follows:**

- The languages used to evaluate are consistent with the home language<sup>21</sup> or other mode of communication of the student. If the language use pattern involves two or more languages or modes of communication, the student must be evaluated by qualified specialists or, when needed, qualified bilingual specialists using each of the languages or modes of communication used by the student.
- Tests and assessments are written and administered in the home language or conducted in the mode of communication most familiar to the student unless it is clearly not feasible.

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<sup>21</sup> Home language is referred to in the Illinois Administrative Code as the "preferred language" and is defined as follows: "Preferred language" means a parent's or guardian's native language or any other language with which both parents or guardians are fluent and have agreed upon. 'Preferred language' does not include artificial or constructed languages, including, but not limited to, Klingon, Dothraki, Elvish, or Esperanto. [23 ILAC 226.75](#).

- Home Language: predominant language used in the student’s home (i.e., language usually used for communication by the student and parents/guardians, siblings, and other family members) as identified on the HLS;
- Clearly Not Feasible: no individual within the greater Chicagoland area can be identified who is capable and willing to communicate effectively with the student and/or parents/guardians for a reasonable fee.
- If documented efforts to locate and secure the services of a qualified bilingual evaluator are unsuccessful, a certificated CPS employee or other individual who has demonstrated competencies in the student’s language can assist a qualified specialist.
- If documented efforts to locate and secure the services of a qualified bilingual specialist or a qualified specialist assisted by another are unsuccessful, a variety of assessment techniques that limit the impact of language acquisition to the greatest degree possible are employed.
- Tests given to a student whose home language is other than English are relevant to their culture to the maximum extent possible.
- If a student's receptive and/or expressive communication skills are impaired due to hearing and/or language deficits, test instruments and procedures that do not stress spoken language are used. One or more of the following methods are used:
  - Visual communication techniques and auditory techniques.
  - An interpreter to assist the evaluative personnel with language and testing.

All test protocols (consumable test booklets, behavior rating scales, drawings, etc.) must be placed in a sealed envelope and kept in the student’s temporary record that is in a secure and locked location. When a parent/guardian requests a student’s educational records and a test protocol includes a student’s name and/or work, contact the Law Department at (773) 553-1700 for guidance regarding parent/guardian rights to access the test protocol.

## Evaluation Components

- Document the sources and assessment methods used, information and results obtained, and the date of the assessment.
- Use problem/issue-focused, educationally relevant, succinct language that may be readily understood by staff and parents/guardians, and devoid of as much jargon as possible.
- Finalize the Learning Environment Interventions (LEI) document for students suspected of having a specific learning disability, which includes a teacher completing the first section of the LEI and another IEP team member conducting an observation and completing the Learning Environment Screening (LES).
- Analyze data, interpret results, and, where applicable, compare prior assessment results, including strengths and weaknesses. The mere collection of data without analysis or synthesis does not benefit instruction.
- Include recommendations that can be used by school staff to effectively impact instruction and transition planning.
- Include recommendations for incorporating direct specialized instruction, curricular accommodations and/or modifications, supplemental aids and services, and related services, if needed.
- Document whether any evaluation component could not be completed due to lack of parent/guardian involvement, religious convictions of the family, or inability of the student to participate; state what components are missing and why they were not completed. This information is needed so that the

team of evaluators can assess the effects of these variances on the validity and reliability of the information reported and determine whether additional assessments are needed.

- Indicate whether the assessment was conducted under nonstandard conditions and describe how and the extent to which it varied from standard conditions. (For example, using a translator when a qualified bilingual professional is unavailable creates a nonstandard condition.)

**When the parent/guardian has provided a private evaluation report conducted since the last FIE or IEP meeting, if any, the appropriate RSP (e.g., school psychologist if the report was from a clinical psychologist) includes in the evaluation report:**

- A summary of the private evaluator’s findings;
- A statement of agreement or disagreement, in full or in part, with the private evaluator’s recommendations; and
- The basis for the RSP’s agreement or disagreement with the private evaluator’s recommendations or findings.

**NOTE:** The private evaluation report **must** be uploaded into SSM and maintained in the student’s special education file.

## Evaluation Reports

The evaluation report synthesizes each evaluator’s individual report based on the relevant domain(s). A **draft report**, signed by the individual conducting the assessment, **must be completed and provided to the parent/guardian at least three school days prior to the meeting**. All evaluation reports must be finalized by the conclusion of the Eligibility Determination meeting.

When writing individual reports of evaluative data, staff consider the following non-exhaustive list of information that pertains to each relevant domain. Each report summarizes assessment results clearly, concisely, and with language that is understandable and useful to general/special educators and families. In addition, the reports provide information that will support the student’s educational planning.

**Assessments may be conducted by those individuals that are identified in the following chart:**

| Assessor                         | Domain Areas |        |         |                      |  |                         |               |       |
|----------------------------------|--------------|--------|---------|----------------------|--|-------------------------|---------------|-------|
|                                  | Health       | Vision | Hearing | Social/<br>Emotional | General<br>Intelligence/<br>Cognitive<br>Functioning | Academic<br>Achievement | Communication | Motor |
| Audiologist                      |              |        | X       |                      |  |                         | X             |       |
| Teacher of the Visually Impaired |              | X      |         |                      |  |                         |               |       |
| Nurse                            | X            |        |         |                      |  |                         |               |       |
| Occupational Therapist (OT)      |              |        |         |                      |  |                         |               | X     |
| Physical Therapist (PT)          |              |        |         |                      |  |                         |               | X     |
| School Psychologist              |              |        |         | X                    | X  | X                       |               |       |
| Counselor                        |              |        |         | X                    |  |                         |               |       |
| Social Worker                    |              |        |         | X                    |  |                         |               |       |

|                                   |  |  |   |  |  |   |   |  |
|-----------------------------------|--|--|---|--|--|---|---|--|
| General Education Teacher         |  |  |   |  |  | X |   |  |
| Special Education Teacher         |  |  | X |  |  | X |   |  |
| Speech-Language Pathologist (SLP) |  |  |   |  |  | X | X |  |

### Health Domain

- Provides a narrative summary of the student’s existing mental or physical health condition(s), which includes additional evaluation data needed and sources from which data will be obtained;
- Provides the date and results of the most recent vision and hearing screenings, including who conducted them.
- Additional evaluation data gathered by completing the appropriate school nurse assessment (initial school nurse assessment, school nurse reevaluation, or school nurse summary). Request current orders from primary care providers;
- Data will be obtained from the following sources: student observation, parent/guardian interview, and review of school health records;

### Vision Domain

- Provides a narrative summary of any visual problems that would interfere with testing or educational performance;
- Describes the near and distant vision acuities and impact on academic and/or functional performance; and
- For students with a visual disability, provides a narrative summary of evaluation results.

### Hearing Domain

- Describes any hearing loss or hearing disorder, based on audiological evaluation and impact on academic and/or functional performance, including mode of communication, language, and communication needs;
- Indicates hearing device use and Hearing Assistive Technology needs in the classroom; and
- For students with a hearing disability, provide a narrative summary of evaluation results.

### Social/Emotional Status Domain

- Describes the student’s social, emotional, and/or behavioral functioning and interpersonal relationships (e.g., development and maintenance, behavior toward others, compliance with rules, etc.) and/or personal adjustment (self-concept, attitudes, coping, etc.);
- Describes relevant behavior, if any, noted during the observation of the student and the relationship of that behavior to the student’s academic or functional performance, including:
  - Factors in the student’s social/emotional functioning and well-being that impact educational performance;
  - Ability to develop and maintain positive interpersonal relationships with peers and adults and to comply with social rules;
  - Self-concept, attitude toward school, coping skills, and feelings;
  - Mood (e.g., depression, unhappiness, fears associated with personal or school problems, etc.);
  - Behavior in school (e.g., classroom, hallway, bus, lunchroom, etc.) and its impact on academic performance;

- Ability to function independently based on developmental norms;
- Ability to exhibit age-appropriate adaptive skills; and
- Extent to which the student demonstrates an understanding of the impact and consequences of behavior, if behavior impedes the student's learning or that of others;
- Describes non-punative behavioral interventions and reinforcements that can be used to support the student, including implications for instruction and necessary support; and
- Identifies the need for a Functional Behavior Assessment (FBA).

### General Intelligence (Cognitive Functioning) Domain

- Addresses the assessment results, including tests/procedures, scores, and dates; and
- Provides a narrative of the student's general cognitive abilities and functioning (e.g., reasoning, problem-solving, memory, attention, concept formation, perceptual skills, cognitive processing, and/or executive functioning skills, etc.).

### Academic Achievement Domain

- Provides baseline data of the student's academic achievement in the current general education curriculum;
- Describes current levels of academic performance (including strengths and needs);
- Describes instructional levels based on the assessment results (e.g., mastery, instructional, and frustration reading levels);
- Identifies learning styles (e.g., listening, visual, speaking, writing, etc.) and strategies that have been utilized with the student;
- Describes classroom participation, work habits, and study habits;
- Describes on-task behavior and independent functioning;
- Describes the student's functional performance in the educational setting, including how the student is managing daily activities to participate in the general education setting;
- Identifies useful accommodations and modifications (e.g., AT, alternate text format);
- For students suspected of having a specific learning disability, an LEI and LES MUST be completed as part of the evaluation; and
- For ELs, describes relative performance in home language and recommended language for instruction.

### Communication Status Domain

- Describes the student's current levels of communication functioning: articulation, expressive and receptive language, fluency, voice, oral motor, and/or feeding skills;
- Provides a narrative summary of the student's communication needs and how this affects participation and progress in the general education setting;
- For students with no verbal or written language skills, describes the student's mode of communication (e.g., sign language or AT/AAC device, etc.) used to receive and communicate information to others;
- For students who are deaf or hard of hearing, describes the student's language and communication needs, mode of communication, and suggested opportunities for direct communication with peers and adults. In addition, it describes any need for assistive listening devices in the classroom for these students and those with central auditory processing issues; and
- Indicates if the student has limited English proficiency and, if so, indicates the current status in English language acquisition and how the student's English language proficiency affects communication and instructional implications.

## Motor Abilities Domain

- Provides a narrative summary of the student's motor abilities in the educational setting, including a statement of how the student's motor skills impact the ability to participate and progress in the general education curriculum;
- Describes any fine and/or gross motor or sensory deficits that adversely impact the student's ability to manipulate objects and/or move bodies effectively and safely in their environment; and
- Summarizes any fine and/or gross motor or sensory deficits that impact the student's overall school participation, occupational performance and/or environmental access in the curriculum and across all activities and contexts in the school day.

## Additional Considerations for Students with an Autism Spectrum Disorder<sup>22</sup>

Illinois law requires the following information to be considered when developing an IEP for a student with an autism spectrum disorder. When such disabilities are suspected, each evaluation report must address the student's academic, developmental, and functional needs and make recommendations in the following areas, as relevant, to support any subsequent IEP development:

- Verbal and nonverbal communication;
- Social interaction skills and proficiencies;
- Any unusual responses to sensory experiences;
- Any resistance to environmental change or change in daily routines;
- Engagement in repetitive activities and stereotyped movements;
- Need for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from an autism spectrum disorder; and
- Other recommendations to assist the student in progressing in the general curriculum, including social and emotional development.

# ELIGIBILITY DETERMINATION

The IEP team meets 10 calendar days or more after the parent/guardian receives the *Notice of Conference* form, and before the 60-school-day time frame elapses for initial FIEs or the reevaluation date, to review the information gathered through the evaluation process. The parent/guardian may waive the 10-calendar-day notice for the Eligibility Determination meeting, but the waiver must be in writing, uploaded to SSM and logged as an SSM Event. The IEP team determines whether or not the student meets the criteria for eligibility, if the disability has an adverse impact on the student's educational performance, and if special education services are required. The IEP team documents their decision using the *Eligibility Determination* form. Draft copies of the evaluation reports **MUST** be provided to the parent/guardian at least three school days prior to the meeting. At the meeting, the *Eligibility Determination* form and evaluation reports should be projected to support meaningful parent/guardian participation in the FIE discussion. If the documents cannot be projected, the parent/guardian must be given either access to a district computer or paper copies of the evaluation reports.

## Participants

The local school district representative convenes an IEP team based on the student's presenting problem(s) and suspected disability area(s). Pursuant to IDEA, the following are required IEP team participants:

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<sup>22</sup> See additional guidance in the [ISBE IEP Instructions \(pg 34-35\)](#).

- At least one parent/guardian of the student;
- At least one general education teacher, if the student is or may be participating in the general education environment. The general education teacher who serves as a member of a student's IEP team should be a teacher who is, or may be, responsible for implementing a portion of the IEP, so that the teacher can participate in discussions on how best to instruct the student;
- At least one special education teacher (If the child is receiving only speech and language services, the speech-language pathologist shall fulfill this role.);
- For students who are 3 to 5 years of age, an individual qualified to teach preschool students without disabilities;
- An individual who can interpret the instructional implications of the evaluation results. (A person may assume this role in addition to another role at the conference.);<sup>23</sup>
- A representative of CPS (special education coordinator) who is qualified to supervise the provision of special education services, is knowledgeable about the general education curriculum and available resources, and is authorized to commit resources on behalf of the district. (If a representative from OSD attends the meeting, that person acts as the district representative and is identified on the *Notice of Conference* form as such.);
- Every CPS staff person involved in conducting an assessment; and
- The student, if a purpose of the conference is to plan transition services (age 14½ and older during the life of the IEP), the student is age 18 or older, or the parent/guardian chooses to have the child participate.

#### The IEP team must also include:

- At the discretion of the parent/guardian or CPS personnel, other individuals having knowledge or special expertise regarding the child (e.g., child welfare specialist if the student is a youth in care, outside therapist, etc.);
- A qualified bilingual specialist or bilingual teacher, if the student is an EL or the presence of such a person is needed to assist the other participants in understanding the child's language and cultural factors as they relate to instructional needs;
- A person knowledgeable about positive behavior strategies, if the child's behavior impedes their learning or the learning of others; and
- An interpreter for parents/guardians who have limited English proficiency<sup>24</sup> or who are deaf.<sup>25</sup>

**NOTE:** A single member of the IEP team, **except the general education teacher**,<sup>26</sup> may meet two or more of the qualifications specified above, so long as they are identified on the Notice of Conference form as such (see [Notification of Conference](#) section).

## Making the Eligibility Determination

When determining if a child has a disability under IDEA, the IEP team must:

<sup>23</sup> If an AT/AAC evaluation report is being presented, this role can often be filled by the SLP, OT, or special education teacher following a consultation with the evaluator.

<sup>24</sup> Under the Illinois regulations, a parent/guardian has the right to request that the interpreter provided by the district serve no other role in the IEP meeting than as an interpreter, [23 ILAC 226.530\(b\)\(3\)](#).

<sup>25</sup> Under the ADA, a parent/guardian may request a skilled sign language interpreter through the CPS ADA office, [ADA@cps.edu](mailto:ADA@cps.edu).

<sup>26</sup> Under the Illinois regulations, a parent/guardian has the right to request that the interpreter provided by the district serve no other role in the IEP meeting than as an interpreter, [23 ILAC 226.530\(b\)\(3\)](#). Additionally, under the ADA, a parent/guardian may request a skilled sign language interpreter through the CPS ADA office, [ADA@cps.edu](mailto:ADA@cps.edu).

- Review MTSS or other response to intervention data for students suspected of having a disability;
- For students suspected of having a specific learning disability, a classroom teacher and another IEP team member must complete the *Learning Environment Interventions (LEI)* and *Learning Environment Screening (LES)* documents, which include classroom observation(s) in addition to reviewing MTSS or other response to intervention data;
- Review and consider all assessment data, including results from any independent (outside) evaluations;
- Use the results of more than a single assessment or evaluation procedure; and
- Ensure the determinant factor for any disability determination is not the student's lack of appropriate instruction in reading or math, or because of limited English proficiency.

### Step One: Summarize Pertinent Information About Each Relevant Domain on the *Eligibility Determination Form*

The IEP team reviews the evaluation findings with the parent/guardian during the Eligibility Determination meeting. If additional information and/or changes need to be made in the report(s) based on what is shared by the parent/guardian and/or another team member at the meeting, it is revised in the report(s), as well as included in the summary of that domain on the Summary of Assessment section of the *Eligibility Determination* document.

### Step Two: Determine if the Student Meets Eligibility Criteria for One or More of the 14 Disability Categories

After the IEP team reviews all of the information pertinent to each relevant domain, the IEP team must determine whether the evaluation data indicate the student has a disability. If the team suspects the student has one of the 14 IDEA disabilities discussed below, the team determines whether the **determinant<sup>27</sup> factor** for any suspected disability is one or more of the following:

- Lack of appropriate instruction in reading, including the essential components of reading instruction, which include explicit and systematic instruction in phonemic awareness, phonics, vocabulary development, and reading fluency, including oral reading skills and reading comprehension;
- Lack of appropriate instruction in math; or
- Limited English language proficiency.

If the answer to any of the above is “Yes,” the student is NOT eligible for services under IDEA for the disability under consideration. If the answers are all “No,” based on the totality of the assessment data, the IEP team must determine if the student exhibits any of the characteristics of one or more of the following disabilities and, if yes, identify the disability on the *Eligibility Determination* form. If it is determined that the student does not have any IDEA-recognized disabilities, “No” is indicated on the *Eligibility Determination* form, and the student is NOT eligible for services under IDEA for the disability under consideration. The IEP team considers if the assessment data indicate the student might be eligible under Section 504. If yes, a Section 504 meeting is convened.

### Disability Categories and Eligibility Criteria<sup>28</sup>

The 14 IDEA disability categories and eligibility criteria are as follows:

**Autism:** A developmental disability generally evident before age three that significantly affects verbal and nonverbal communication and social interaction, thus adversely affecting a child's educational

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<sup>27</sup> “Determinant” means the primary factor.

<sup>28</sup> For additional information, see <https://www.isbe.net/Pages/Special-Education-Disability-Areas.aspx>.

performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. The term includes any autism spectrum disorder that adversely affects educational performance. The term does not apply if a student's educational performance is adversely affected primarily because the child has an emotional disability.

**NOTE:** For students suspected of being on the autism spectrum, conducting a psychological, social-emotional, communication, and/or sensory evaluation must be considered.

**Deaf/Blindness:** The student exhibits concomitant hearing and visual disabilities, the combination of which causes severe communication, developmental, and educational needs that cannot be accommodated by special education services designed solely for students with either deafness or blindness.

**Deafness:** A hearing impairment that is so severe that the student is impaired in processing linguistic information through hearing, with or without amplification, thus adversely affecting a student's educational performance.

**NOTE:** While a student may present with other possible eligibility categories, Deafness must be specifically identified to ensure appropriate supports and services (e.g., services from DHH teacher<sup>29</sup> and/or audiology).

**Developmental Delay (age 3 through 9 only):** Delay in physical development, cognitive development, communication development, social-emotional development, or adaptive development.

**NOTE:** For students suspected of having or having a developmental delay, at least one RSP must conduct an evaluation. Students eligible under the developmental delay category must be re-evaluated, and a new eligibility determination must be made by the end of the school year during which the student turns nine years old.

**Emotional Disability:** A condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance:

- An inability to learn that cannot be explained by intellectual, sensory, or health factors;
- An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
- Inappropriate behavior or feelings under normal circumstances;
- A general pervasive mood of unhappiness or depression; or
- A tendency to develop physical symptoms or fears associated with personal or school problems.

This includes schizophrenia but does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disability.

**NOTE:** For students suspected of having or having an emotional disorder, a psychological evaluation and/or social work evaluation must be conducted.

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<sup>29</sup> For additional guidance, see [Illinois Best Practices Guide For the Education of Students Who Are Deaf/Hard of Hearing/Deaf-Blind](#).

**Hearing Impairment:** An impairment in hearing, permanent or fluctuating, that adversely affects a child's educational performance but that is not included under the definition of deafness.

*NOTE: While a student may present with other possible eligibility categories, Hearing Impairment must be specifically identified to ensure appropriate supports and services (e.g., services from DHH teacher<sup>30</sup> and/or audiology).*

**Intellectual Disability:** Cognitive development significantly below that of their typically developing peers, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, and thus adversely affecting a child's educational performance. Intellectual disabilities are classified as mild, moderate, or severe/profound.

*NOTE: For students suspected of having or having an intellectual disability, a psychological evaluation including the general intelligence (cognitive functioning) domain, if not conducted previously or data indicating a new assessment is needed, must be conducted and a recommendation for eligibility must be made by a school psychologist.*

**Multiple Disabilities:** Concomitant impairments (such as intellectual disability-blindness, intellectual disability-orthopedic impairment, etc.), the combination of which causes severe educational needs that cannot be accommodated in special education programs solely for one of the impairments. (Does not include deaf/blindness.)

**Other Health Impairment:** Limited strength, vitality, or alertness, including a heightened alertness to environmental stimuli that results in limited alertness with respect to the educational environment, due to chronic or acute health problems such as a heart condition, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, attention deficit hyperactivity disorder (ADHD), leukemia, diabetes, rheumatic fever, or Tourette syndrome, and adversely affects a child's educational performance (i.e., academic as well as functional performance (e.g., behavior, social, communication skills, adaptive/independent living skills, etc.)).

**Physical (Orthopedic) Impairment:** A severe orthopedic impairment that adversely affects a child's educational performance. The term includes impairments caused by a congenital anomaly, disease, or other cause (e.g., cerebral palsy, amputation, fractures, or burns).

**Specific Learning Disability (SLD):** A disorder in one or more of the basic psychological processes involved in understanding or using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell or do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia,<sup>31</sup> and developmental aphasia.

*NOTE: For students suspected of having a specific learning disability, before the IEP team can determine if the student has a specific learning disability, they must complete the steps described in the [Eligibility Criteria for Students Suspected of Having a Specific Learning Disability \(SLD\)](#) section. Additionally, OSD recommends that*

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<sup>30</sup> For additional guidance, see [Illinois Best Practices Guide For the Education of Students Who Are Deaf/Hard of Hearing/Deaf-Blind](#).

<sup>31</sup> For additional information, see [The Dyslexia Handbook: Information for Caregivers, Educators, and Students](#).

*the school psychologist be part of the IEP team for this discussion given their expertise in data analysis and basic psychological processes.*

**Speech or Language Impairment:** A communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment that adversely affects a child's educational performance.

**Traumatic Brain Injury:** An acquired injury to the brain, caused by an external force. This injury results in total or partial functional disability, psychosocial impairment, or both, that adversely affects the student's educational performance. This term does not apply to brain injuries that are congenital, degenerative, or induced by birth trauma.

***NOTE:** For students suspected of having or having a traumatic brain injury, a psychological evaluation must be conducted.*

**Visual Impairment:** An impairment in vision that, even with correction, adversely affects a child's educational performance (includes both partial sight and blindness).

***NOTE:** While a student may present with other possible eligibility categories, Visual Impairment must be specifically identified to ensure appropriate supports and services (e.g., options for braille).*

### Step Three: Determine if the Student's Disability Adversely Affects Educational Performance

If the IEP team determines that a student has characteristics of one or more disability areas, the team must next determine if the student's disability adversely affects educational performance. Educational performance includes academic as well as functional performance (e.g., behavior, social, communication skills, adaptive/independent living skills, etc.) If there is no adverse effect, the student is NOT eligible for special education and/or related services. If yes, the IEP team must proceed to Step 4.

### Step Four: Determine if the Student Requires Special Education and Related Services

Next, the IEP team must determine if the student requires special education and related services to address the adverse effect of the disability on educational performance. If yes, the student is eligible and the IEP team identifies the student's specific needs and proceeds to draft the student's IEP that addresses those needs. If the student does not require special education to address the adverse effect of the disability on educational performance (e.g., the student's disability can be accommodated in the general education classroom without the services of a special education teacher/specially designed instruction **or** the student only requires related services), the student is not eligible for special education and no IEP will be developed. The student may be eligible under Section 504, so the team should consider completing the *Section 504 Eligibility Determination* forms at another meeting for that purpose.

Eligibility determination is reached through consensus by the IEP team. Consensus is defined as a general (not necessarily unanimous) agreement and is a decision arrived at by most of those involved versus one individual. The district is ultimately responsible for ensuring FAPE is provided. It is not appropriate to make decisions based on a "vote." When the team cannot reach consensus, the district representative, who is either the local school district representative or the OSD SEC, will identify the final recommendation on behalf of the district when the team cannot reach consensus. In this event, the parents/guardians must be provided with a written copy of the school's proposals or refusals, or both, regarding the child's educational program, and the parents/guardians have the right to seek resolution of any disagreements as outlined in the [Procedural Safeguards](#).

Meeting notes are used to record relevant discussions that occurred during the Eligibility Determination meeting that were NOT memorialized elsewhere, such as discussions around disability categories considered, questions/concerns/disagreements regarding evaluation findings, eligibility category, etc. The meeting notes also include an explanation as to why the team decided the requested disability category was not appropriate and/or not needed. Meeting notes are **highly** recommended in order to fully capture the team's discussion and decision-making process (see [Meeting Notes](#) section).

If a team member feels that the eligibility determination does not reflect their conclusion, that team member **must** submit a separate statement presenting their conclusion. This written statement is completed on the *Dissenting Opinion* page (see [Dissenting Opinion](#) section).

The *Eligibility Determination* form and *Parent/Guardian Notification of Conference Recommendations* (referred in this manual as *Conference Recommendations*) must be provided to the parents/guardians. Parents/guardians who disagree with the IEP team's conclusions may seek resolution as outlined in the [Procedural Safeguards](#) (see [Dispute Resolution](#) section).

**NOTE:** Parents/guardians may choose to receive documents via electronic mail. This is to be documented via the [Parent/Guardian Authorization to Send IEP/504 Documents and Related Information via Electronic Mail](#) form (see [Prior Written Notice \(PWN\)](#) section).

## Eligibility Criteria for Students Suspected of Having a Specific Learning Disability (SLD)

As part of an initial or reevaluation to determine SLD eligibility, an observation in the student's learning environment to document the student's academic performance and behavior in the suspected areas of difficulty must be conducted.<sup>32</sup> The teacher must complete the *Learning Environment Interventions* (LEI) form and another school-based IEP team member must conduct an observation and complete the *Learning Environment Screening* (LES) form.

When determining SLD eligibility, documentation must show that the student's low achievement is NOT due to the lack of high-quality Tier 1 instruction, or a lack of targeted and appropriate Tier 2 and Tier 3 interventions that were provided and progress-monitored with fidelity, consistent with the MTSS/Response to Intervention (RTI) framework. When reevaluating students already identified as having a specific learning disability, progress monitoring data are also included in the reevaluation process. This data may be obtained via progress toward IEP goals or via MTSS progress monitoring data.

If appropriate interventions were not implemented with fidelity for the student and/or sufficient qualitative and quantitative data<sup>33</sup> were not collected to consider the student's response to the interventions, the local school district representative and the parent/guardian may agree to an extension of the evaluation time frame. An extension of no more than 20 school days is only to be agreed upon in extraordinary circumstances. If the parent/guardian does not consent to an extension, the district must

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<sup>32</sup> [34 CFR 300.542](#)

<sup>33</sup> Qualitative and quantitative data in this context means data that describe the types of scientific or evidence-based interventions utilized with the students that are directly linked to the area of deficit; the interventions were delivered with integrity; the expected outcome of those interventions; the student's actual responses to the interventions and rate of progress; how often the student's progress was monitored; and the amount of time the intervention was provided to demonstrate sufficient time was allowed for change to occur in the student's skill level (e.g., two different interventions for a minimum of five-weeks each).

complete as many evaluation activities as possible and convene an FIE/IEP meeting within the existing time frame.

An IEP team may decide that a student has a specific learning disability only if documentation and a required classroom observation, either before or after a referral for special education evaluation, shows that **ALL** of the following criteria are met:

### Criteria 1: Lack of Adequate Achievement

The student falls significantly below age or state-approved grade-level standards in one of the following areas: (i) oral expression; (ii) listening comprehension; (iii) written expression; (iv) basic reading skills; (v) reading fluency skills; (vi) reading comprehension; (vii) mathematical calculation; and/or (viii) mathematical problem solving. This criterion is supported when **ALL** of the following exist:

- A. **Qualitative and quantitative data from a variety of sources show the gap** between the student's current performance and age- or grade-level standards in reading, math, written expression, oral expression and/or listening comprehension, as applicable. The selected and administered assessment tools must be linguistically and culturally appropriate;
- B. **For an EL, the student's limited English language proficiency (if applicable) has been ruled out as the primary cause** for the student's lack of adequate achievement (as further described in Criteria 3 and 4 below);<sup>34</sup>;
- C. **Appropriate curriculum-based assessment measures** document the student's performance in reading, math and/or written expression, as applicable. The measures must be aligned with learning expectations at the student's age and grade level and use content-controlled materials. There must be evidence that scores were reliable, valid estimates of the student's performance and predictions of future success at that grade level;
- D. **The data are based on standard administration procedures**, and the validity of the administration and scores has been verified;
- E. **The data are aligned with the student's learning expectations** for the relevant point in the school year; and
- F. **The consideration of differences in the student's culture or language** when interpreting their assessment data.

Based on all of the above considerations, the student is performing significantly below grade level peers in one or more of the above-listed areas on (1) state assessments and (2) district grade-level norms from universal screening after receiving scientific, research-based intervention. Typically, the "average range" on a norm-referenced assessment is considered to be between the 25<sup>th</sup> and 75<sup>th</sup> percentile. Students who perform at or below the 10<sup>th</sup> percentile are typically considered to be significantly below their grade-level peers.

### Criteria 2: Lack of Sufficient Progress

The student demonstrates a lack of sufficient progress to meet age or state-approved grade-level standards in one or more of the above areas, after receiving scientific, research-based interventions. This criterion can be met through the provision of MTSS or another response to intervention and documenting the implementation of the MTSS/Response to Intervention framework. This criterion is supported when either: (i) evidence shows that prior interventions have not sufficiently improved the student's progress; or

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<sup>34</sup> For ELs, the IEP team must include at least one person who is knowledgeable about: (i) the development of English language skills; (ii) related achievement skills for the student's age and language/cultural background; and (iii) analyzing data relevant to ELs suspected of having an SLD.

(ii) evidence shows that prior interventions have sufficiently improved the student's progress, but are so intensive that they cannot be implemented long-term except through the special education process.

If appropriate interventions were not provided for an identified area of need, not implemented with fidelity for the student and/or sufficient qualitative and quantitative data were not collected to consider the student's response to the interventions, the local school district representative meets with relevant IEP team members to consider the need to ask the parent/guardian to agree to an extension of the evaluation time frame.

**NOTE:** *In determining if a student has a specific learning disability, CPS does not use the "pattern of strengths and weaknesses" and/or "severe discrepancy" (i.e., IQ vs. achievement) models.*

### Criteria 3: Lack of Achievement and Progress Not Primarily Due to Other Factors

As relevant to the student, the IEP team must review the qualitative and quantitative data and conclude that the student's lack of adequate achievement and lack of sufficient progress is NOT primarily<sup>35</sup> the result of:

- A. **A visual, hearing, or motor disability;**
- B. **An intellectual disability;**
- C. **An emotional disability;**
- D. **Environmental or economic disadvantages or cultural factors** (e.g., communication patterns, behavioral expectations and/or prescribed cultural factors). To consider these factors, the IEP team considers information such as the following:
  - Socioeconomic status;
  - Family mobility;
  - Number of schools attended;
  - School attendance;
  - Family change such as divorce or death;
  - Substandard housing;
  - Inadequate nutrition and food insecurity;
  - Severe physical/psychological trauma; or
  - Exposure to violence in the community.
- E. **A student's limited English language proficiency.** As noted above, the IEP team must include a bilingual specialist knowledgeable about (i) the development of English language skills; (ii) related achievement skills for the student's age and language/cultural background; and (iii) analyzing data relevant to students suspected of having an SLD. Furthermore, all assessments conducted must be linguistically and culturally appropriate in order to ensure an appropriate determination that a student's limited English language proficiency is not the primary cause of his or her lack of adequate achievement/sufficient progress.

### Criteria 4: Lack of Appropriate Instruction in Reading or Math

The student's lack of adequate achievement and sufficient progress is not due to the lack of appropriate instruction from qualified personnel in reading or math. In order to demonstrate that appropriate instruction from qualified personnel in reading and math has been provided, the IEP team must provide the following qualitative and quantitative data:

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<sup>35</sup> "Primarily" means the predominant basis.

### A. Data demonstrating the provision of appropriate instruction from qualified personnel.

Qualitative and quantitative data documenting satisfaction of the following requirements: (i) use of a scientifically-based curriculum; (ii) implementation with integrity; and (iii) assessment for impact on outcomes for all students.

**NOTE:** When the student is an EL, the team must also document: (i) provision of appropriate language acquisition programming; (ii) delivery by teacher(s) knowledgeable regarding language acquisition and competence; and (iii) effectiveness of core curriculum for ELs.

### B. Data documenting repeated assessments.

Qualitative and quantitative data documenting repeated assessments of achievement at reasonable intervals as follows: (i) local universal screening/benchmarking collected on all students at multiple times throughout the school year; and (ii) repeated progress monitoring to determine the effectiveness of interventions.

**NOTE:** When the student is an EL, the team must also document the appropriateness of assessments in light of any limitations in the student's English language proficiency, including assessment of the student's English language proficiency, assessment in the student's home language to the degree appropriate and measurement based on state standards for ELs.

### C. Evidence that both universal screening/benchmarking data and progress monitoring data have been provided to the student's parent/guardian.

## Eligibility Criteria for English Learners (ELs) Suspected of Having a Disability<sup>36</sup>

The following criteria govern an IEP team's decision that an EL needs special education/related services.<sup>37</sup> This decision is based on evaluation results showing the student's disability is not primarily due to limited English proficiency or lack of linguistically/culturally appropriate instruction. To demonstrate that, **EACH** of the following must be met:

### Criteria 1: Student Received Appropriate Language Instruction/Supports

The student received appropriate language instruction/supports, as determined by considering **ALL** the following:

- A. **Years of EL Instruction.** Appropriate and consistent Transitional Bilingual Education (TBE)/Traditional Program Instruction (TPI) placement, according to relevant program requirements:
- TBE applies to schools enrolling 20 or more ELs of the same language classification. This bilingual program model provides home language instruction in core academic areas and English as a Second Language (ESL) instruction; and
  - TPI applies to schools enrolling 19 or fewer ELs of the same language classification. This program model provides ESL instruction and accommodations and home language support, where possible, in core academic areas.
- B. **Meaningful access to content and language development** as demonstrated by the following:

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<sup>36</sup><https://www.isbe.net/Pages/EL-IEPs.aspx#>

<sup>37</sup> These criteria do not apply to students with assessment data and disability eligibility criteria that do not rely on language acquisition to determine the presence of a disability and need for special education, e.g., ELs with a medically-determined physical disability, traumatic brain injury, blindness, deafness, or visual disability.

- TBE provided home language instruction in core academic areas (language arts, math, science, and social studies); and English as a Second Language (ESL) instruction; or
  - TPI provided ESL instruction and accommodations and home language support, where possible, in core academic areas; and
  - When transferring to a CPS school, TBE/TPI instruction was provided in a timely manner, providing the student with consistent access to EL services/programming;
  - When the latest EL Monitoring Report for the school reflected a partial or minimal rating, evidence shows the student's instruction was not negatively impacted by school practices that produced this rating; and
  - Tiered interventions were provided and progress was monitored with fidelity, consistent with the MTSS framework.
- C. **Receipt of instruction by qualified teachers**, as demonstrated by each of the following:
- Properly licensed bilingual/ESL teachers with endorsement(s) in the language, grade level(s), and subject area(s) taught, and having a bilingual endorsement(s).
- D. **Classroom environment and materials** reflected:
- Curricular information was linguistically accessible, grade level appropriate, and culturally relevant in collaboration with the Office of Multilingual-Multicultural Education (OMME).<sup>38</sup>
  - Instruction was conducive to the EL's learning.<sup>39</sup>

### Criteria 2: Failure to Develop Age-Appropriate Home Language Skills

Despite receiving appropriate home-language instruction and/or supports as referenced in Criteria 1, the student failed to develop age-appropriate home language skills.

#### The student has:

- English language proficiency scale scores (based on the ACCESS language domains) that have remained at the same level for more than one year; and
- Persistent learning difficulties in both the home language and English.

### Criteria 3: Low Achievement/Behavior

The student's low achievement/behavior is **NOT** primarily due to the student's:

- English acquisition; and/or
- Additional special factors, such as:
  - Refugee or immigrant status;
  - Acculturation;
  - Interrupted schooling; and/or
  - Racial or ethnic bias.

### Criteria 4: Criteria Relevant to One or More Disability Categories

The student meets criteria relevant to one or more disability categories (e.g., specific learning disability)<sup>40</sup> and needs special education/related services to benefit from their education.

<sup>38</sup> For more information, reference the [OMME website](#) and [OMME Comprehensive EL Resource Toolkit](#).

<sup>39</sup> Conducive learning environments include but are not limited to: extensive use of visuals; explicit oral language instruction; teaching of vocabulary and background knowledge; multiple response opportunities; interaction with non-EL peers; incorporation of language/content objectives and comprehensible input; and frequent opportunities for practice.

<sup>40</sup> In addition, the SLD criteria are used to determine the presence of this disability and the related services guidelines are used when discussing the need for services from an RSP.

## Notifying Parents/Guardians Of Eligibility Determination Decision

The *Conference Recommendations* form notifies parents/guardians of the eligibility determination results. If the student is eligible for special education, the form is completed and provided to parents/guardians along with the *Eligibility Determination* form **and** the IEP. If a decision has been reached that the student is not eligible for special education, the local school district representative gives parents/guardians the *Conference Recommendations* form, along with the *Eligibility Determination* form. In either case, the parent/guardian receives the [Procedural Safeguards](#) (see [Conference Recommendations](#) section).

## Parent/Guardian Consent for Initial Services

IDEA requires schools to obtain informed written parent/guardian consent before the initial provision of special education and related services to a student. The parent/guardian consents by signing and dating the *Parent/Guardian Consent for Initial Provision of Special Education and/or Related Services* form, which is included within the *Eligibility Determination* document for an Initial Evaluation, and must be uploaded to SSM.

**NOTE:** *Parent/guardian consent decision must be checked within the document in SSM and the signed consent form must also be uploaded to SSM. If the Eligibility Document is finalized without the consent decision indicated, the standalone Parent/Guardian Consent for Initial Provision of Special Education and/or Related Services form must be completed and finalized.*

If the parent/guardian consents to the initial provision of special education and related services, the school must develop an IEP. The provision of services cannot begin until 10 school days have passed from the receipt of the signed consent unless the parent/guardian waives the 10-school-day requirement. The *Conference Recommendations* form is used to indicate the waiver of the 10 school days for provision of services.

**NOTE:** *The Parent/Guardian Consent for Initial Provision of Special Education and/or Related Services must also be completed for students with disabilities transferring from other school districts as part of the out of district IEP transfer process (see [Students with Disabilities Transferring from CPS and Other School Districts](#) section) via the standalone document in SSM.*

## CONSIDERING A RELATED SERVICE

Related services refers to developmental, corrective, and other supportive services required to assist a student with a disability to benefit from special education. It includes speech-language pathology and audiology services, interpreting services, psychological services, social work services, physical and occupational therapy, recreation (including therapeutic recreation), early identification and assessment of disabilities in children, counseling services (including rehabilitation counseling), orientation and mobility services, medical services for diagnostic or evaluation purposes, and transportation. Related services also include school health services, school nursing services, social work services in schools, and parent/guardian counseling and training.

**Typically, related services include (but are not limited to):**

- School nursing services, which work to minimize and/or remove physical and mental health<sup>41</sup> barriers to learning and promote student health, thereby increasing instructional time and improving academic and functional performance;
- Audiology services, which provide care in the prevention, identification, diagnosis, and evidence-based treatment of hearing and other auditory disorders. Audiologists provide supports and services to minimize the negative impact of these disorders, assist students in benefitting from their special education, and ensure student access to the educational program;
- Social work and/or psychological services, which promote academic and social-emotional development by providing services to support the social, emotional, and behavioral needs of students;
- School social work services, which actively support the social and emotional, as well as educational, outcomes of all students through the MTSS framework; implementation of evidence-based interventions, crisis intervention, and postvention; planning, development, and facilitation of positive behavior interventions, and supports in the least restrictive environment; and coordination of relevant community resources to address specific needs of students within the home and school contexts;
- Speech-language pathology services, which address communication, language, and related literacy needs. Speech-language pathologists (SLPs) work with a variety of communication disorders which adversely impact the academic performance of students;
- Occupational therapy services, which deliver diagnostic and therapeutic services to students by supporting academic and functional outcomes; and
- Physical therapy services, which evaluate and facilitate the development of functional gross motor movement skills in order for students to access and participate in the educational environment and benefit from their special education.

RSPs are specialists who work directly with students and school personnel to improve educational outcomes by assisting students in benefitting from special education and increasing student access to the curriculum and learning environment. RSPs provide a variety of prevention and intervention services; collaborate and consult with teachers, school staff, and families to provide instructional strategies along with behavioral interventions and classroom management skills; create a continuum of support services for all students; and provide direct services and supports.

**NOTE:** *The Illinois School Code now requires that the related services logs of students who receive related services must be made available to the parents/guardians at the annual IEP meeting, and a copy of the related services logs must be provided at any time upon the parent/guardian request.*

When an RSP supports an EL's continued academic development, the RSP needs to use appropriate resources to communicate with the student in their preferred language.

- To the maximum extent possible, monolingual RSPs provide services to ELs in a classroom with a bilingual/ESL-endorsed teacher; **or**
- In limited circumstances when providing services in a separate environment, the monolingual RSP may be assisted by a:
  - Bilingual/ESL teaching assistant; or
  - Bilingual/ESL-endorsed teacher providing consultation.

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<sup>41</sup> [Supporting the Mental Health of Young People: Guide for School Staff](#)

An IEP team may decide that a student with disabilities needs related services only if documentation shows that the student has an identified disability **AND** the student needs related services to benefit from their special education in **AT LEAST ONE** of the following areas:

- A. Academic
- B. Functional
- C. Vocational/Transition

The IEP team determines if a student needs related services. The team then considers if there is a need for direct services and/or RSP consultation with the classroom teacher(s), paraprofessional(s), and/or others in order to enhance development and generalization of the skill being addressed through direct service delivery.

**Required Documentation within an RSP Report:** Various sources of data can be used to help determine the need for related services, but not all data sources are required for all students.

Review – record review including, but not limited to, MTSS or other response to interventions data, any private sector reports, and diagnoses

Interview – parent/guardian, teacher, and/or student

Observe – formal or informal observation of student in multiple settings

Test – formal and informal assessment measures

## Determining Need for Speech-Language Pathology Services

The development of communication skills is integral for the success of all students. The SLP works with a variety of communication disorders such as articulation (speech sounds), language comprehension (following directions, understanding texts), language expression (putting words together, using correct grammar, word meaning), voice (use of voice to produce sound), pragmatic language (social language), and fluency (rhythm of speech) which adversely impact the academic performance of students. SLPs at schools work with students directly and/or with classroom teachers, families, and administrators to address communication, language, and related literacy needs. SLPs assist with the prevention of communication disorders through implementation of MTSS, identification of at-risk students for academic problems, assessment of students' communication skills, implementation and development of IEPs, and evidence-based interventions. The SLP works collaboratively with school staff, parents/guardians, and the community to support the academic, social, and vocational needs of all students.

An IEP team may decide that a student with disabilities needs school speech-language services only if **BOTH** of the following guidelines are discussed and documented:

### Guideline 1: Speech-Language Deficit

The student has a speech-language deficit in **ONE OR MORE** communication areas below:

#### A. Language

The student:

- Has difficulty understanding and applying oral directions according to developmental norms;
- Has difficulty understanding conversations when compared to similarly aged peers;
- Relates stories or events in an illogical, poorly organized manner;
- Has difficulty expressing their needs and ideas at an age-appropriate level;
- Has difficulty adapting language for a variety of social contexts; or

- Other (must be specified).

### B. Speech or Sound Production

The student:

- Produces speech or sounds that affect intelligibility;
- Has one or more disordered phonological processes;
- Has consistent speech sound errors compared to typically developing students; or
- Has a feeding disorder due to oral motor dysfunction. If the oral motor dysfunction improves, feeding skills may improve.

### C. Voice

The student:

- Based on medical documentation, has a vocal impairment without short-term physical factors (respiratory virus or infection, allergies, short-term vocal abuse); or
- Has a vocal disorder due to an impairment in one or more of the five voice characteristics: vocal quality, pitch, range, volume, and/or intensity.

### D. Fluency

The student:

- Has atypical dysfluencies, such as:
  - Hesitations;
  - Repetitions (e.g., sound, syllable repetitions, whole word);
  - Prolongations; and/or
  - Blocks; or
- Has secondary behaviors related to dysfluencies, such as:
  - Eye blinking;
  - Facial tension;
  - Facial tics;
  - Poor eye contact;
  - Avoidance;
  - Tremors;
  - Pitch and loudness variability;
  - Facial grimaces; and/or
  - Lip, limb, or torso movements.

## Guideline 2: Speech-Language Services Are Necessary for the Student to Benefit from Special Education

The student's speech issue adversely affects their academic, social performance, and/or postsecondary transition activities; or speech-language services are required to assist the student to benefit from special education.

**ALL** of the following guidelines must be discussed and documented. The speech-language services:

- Are required beyond that which is normally available to all students (e.g., tiered supports);
- Will support functional change in speech-language skill;
- Address skills that are significant, constant and developmentally appropriate;
- Are present regardless of the student's dialectical and/or characteristic of an EL;

- Are related to issues other than selective mutism<sup>42</sup> or school phobia;
- Are not contraindicated by medical/physical, dental, or other circumstances that warrant discontinuation of services temporarily or permanently;
- Are needed to meet continuing targeted speech-language goals/benchmarks, if any; and
- Are necessary for the student's educational performance or specially designed instruction and cannot be directly provided by any other school personnel.

## Determining Need for School Audiology Services

An audiologist helps students with audiological deficits communicate and connect more effectively with others at school and school-related settings. A school audiologist conducts audiological evaluations for students with known or suspected hearing loss/disorders and/or central auditory processing disorders (CAPD). The audiologist also makes recommendations for goals, service delivery, and/or accommodations for students with hearing loss/disorders and/or CAPD to support them in school and school-related settings.

An IEP team may decide that a student with disabilities needs school audiology services only if **BOTH** of the following guidelines discussed are documented:

### Guideline 1: Hearing Loss/Disorder and/or CAPD Has Been Identified Through an Evaluation

### Guideline 2: Audiology Services Are Necessary for the Student to Benefit from Special Education

**ALL** of the following must be discussed and documented. The student's audiology services:

- Are required and beyond that which is normally available to all students;
- Will support:
  - Further functional change in hearing function; and/or
  - Hearing amplification and/or auditory processing in order to access education and to participate successfully throughout the day;
- Are not contraindicated due to medical/physical, psychological, or other circumstances that warrant discontinuation of services temporarily or permanently;
- Are needed to meet all targeted hearing supports, goals/benchmarks, if any; and
- Are necessary for the student's educational performance or specially designed instruction and cannot be directly provided by any other school personnel.

## Determining Need for School Social Work and/or School Psychological Services

### School Social Work Supports

School social workers promote academic and social/emotional development by providing a wide array of services to support the social, emotional, and behavioral needs of all students. They provide services to students both in general and special education programs using individual, group, and classroom settings. School social workers support educational outcomes through implementation of MTSS utilizing evidenced-based interventions; development and implementation of intervention and prevention programs that support at-risk students; and participation on problem-solving teams in the school environment to support student success by providing crisis support, evidenced-based group practices,

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<sup>42</sup> According to the DSM-V, selective mutism is a psychiatric disorder that impacts communication. Therefore, the school SLP can be a part of the IEP team that develops a treatment plan for a student who is selectively mute, but not the sole provider. Given the nature of this disorder, other relevant RSPs include, but are not limited to, the school social worker and school psychologist.

supporting school culture and climate, participating in behavioral health teams, and providing individual therapeutic supports. They foster a positive and safe learning environment by facilitating the development of students' prosocial, decision-making, and self-management skills. School social workers also act as a liaison between home, school, and the community through collaboration with teachers, parents/guardians, and community agencies.

## School Psychological Supports

School psychologists are qualified members of school teams that support students' ability to learn and teachers' ability to teach. School psychologists provide direct support and interventions to students, consult with teachers, and collaborate with families and other school-based mental health professionals (e.g., school counselors and school social workers). Such collaboration enhances evidence-based support strategies. School psychologists may also work closely with school administrators to improve school-wide practices and policies, and collaborate with community providers to coordinate needed services. They help schools successfully:

- Improve academic achievement;
- Promote positive behavior and mental health;
- Support students with disabilities;
- Create safe, positive school climates;
- Strengthen family-school partnerships;
- Improve school-wide assessment and accountability; and
- Monitor individual student progress in academics and behavior.

School psychologists serve as members of interdisciplinary teams to address the needs of all students, including involvement in MTSS. They are an integral part of the MTSS, from system-wide program design, consultation, data collection, and analysis, to specific assessment and intervention efforts with individual students. School psychologists support a student's ability to learn and teachers' ability to teach. They apply expertise in mental health, learning, and behaviors to help children and youth succeed academically, socially, behaviorally, and emotionally. School psychologists partner with families, teachers, school administrators, and other professionals to create safe, healthy, and supportive learning environments. School psychologists are instrumental in FIEs and the eligibility determination of an educational disability.

An IEP team may decide that a student with disabilities needs school social work and/or psychological services only if documentation shows that **BOTH** of the following criteria are met:

### Guideline 1: Student Demonstrates Social, Emotional, or Adaptive Skill Deficits and/or Behavior That Impedes the Student's Learning or That of Others

School social work or psychological services are considered if a student has an ongoing or recurring need, including, but not limited to:

- Exhibiting difficulty developing and/or sustaining appropriate social relationships with peers and/or authority figures;
- Requiring support to identify, manage, and regulate feelings/emotions;
- Needing assistance resolving conflicts effectively with peers and/or adults;
- Struggling with responsible decision-making and anticipating the consequences of their behavioral choices;
- Displaying difficulty with knowledge and awareness of their own personality/character;

- Struggling with self-management and taking responsibility for their own actions, behaviors, and well-being;
- Requiring assistance with organization, time management, and planning skills; and
- Employing ineffective problem solving and coping strategies in response to stressful situations.

## Guideline 2: Social Work and/or Psychological Services Are Necessary for the Student to Benefit from Special Education

**ALL** of the following guidelines must be discussed and documented. The social work and/or psychological services:

- Are required and beyond that which is normally available to all students (e.g., tiered supports);
- Will support development or improvement of a student's social-emotional skills in order to access education and participate successfully throughout the day;
- Are needed to meet targeted social-emotional IEP goals/benchmarks, if any; and
- Are necessary for the student's educational and/or functional performance or specially designed instruction and cannot be directly provided by any other school personnel.

## Determining Need for School Nursing/Health Services<sup>43</sup>

The essential role of the school nurse is to work to promote the health of the whole child. This is achieved through collaborative relationships with teachers, counselors, and administrative staff to minimize and/or remove physical and mental health barriers to learning. School nurses work to promote student health, thereby increasing instructional time and improving academic outcomes and functional performance. School nurses also provide first aid, emergency care, and chronic condition case management to students.

### There are four nursing classifications within CPS:

- Licensed Practical Nurse (LPN)
  - Performs certain direct and indirect clinical care as well as additional nursing duties under the direction and supervision of a registered nurse, as guided by the scope and standards of their professional licensure. LPNs may not write IEP or 504 Plans.
- Health Services Nurse (HSN) - Registered Nurse
  - Provides direct services, may delegate task to LPN and/or unlicensed assistive personnel;
  - Assist with medication per physician or healthcare provider documentation and in congruence with nursing practice governing bodies and laws;
  - Conducts follow-up and implementation of IEP/504 Plans and family meetings; and
  - Writes 504 Plans, but may not write IEPs.
- Certified School Nurse (CSN) - Registered Nurse with School Nurse Certification
  - Provides direct service(s);
  - Delegates tasks to the HSN and/or LPN;
  - Serves as lead nurse, as needed; and
  - Writes IEPs and/or 504 Plans.
- Advanced Practice Registered Nurse (APRN)
  - Develops practice guidelines for nursing department through evidence-based practice and research; and
  - Collaborates with a physician partner and has prescriptive authority.

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<sup>43</sup> <https://www.cps.edu/services-and-supports/health-and-wellness/>

An IEP team may decide that a student with disabilities needs school nursing services only if **BOTH** of the following guidelines are discussed and documented:

### Guideline 1: Health Condition/Impairment

The student has a health condition/impairment in **ONE OR MORE** of the following areas:

#### A. Chronic Health Condition

The student has an ongoing or recurring health issue, such as, but not limited to:

- Asthma;
- Allergies;
- Diabetes - Type 1 or 2;
- Seizure Disorder;
- Sickle Cell Disease;
- Cardiomyopathy;
- Hemophilia;
- Cerebral Palsy; or
- Spina Bifida

B. The healthcare provider has prescribed medication and/or a treatment procedure to control a condition, maintain a condition, prevent illness, or restore health; or

C. The student has impaired mobility—chronic or temporary—which requires planning and accommodations in the school environment to assure the student’s safety and comfort.

### Guideline 2: Nursing Services Are Necessary for the Student to Benefit from Special Education

**ALL** of the following guidelines must be discussed and documented. The nursing services:

- Will be provided to support the health and well-being of students with chronic health conditions as documented by the physician or healthcare provider;
- Assist with medication per physician or healthcare provider documentation; and
- Are needed to meet all targeted nursing goals/benchmarks.

### Determining Need for Occupational Therapy Services

The role of the occupational therapist includes providing diagnostic and therapeutic services to students and collaborating with and supporting parents/guardians and school support staff. Occupational therapists work with members of the school-based team to break down barriers to students’ learning environment in order to access their education. They support academic and functional outcomes, including social skills, math, reading and writing, behavior management, recess, participation in sports, self-help skills, and pre-vocational/vocational participation. Occupational therapists are particularly skilled in facilitating student access to curricular and extracurricular activities through supports, designing and planning, and other methods. Additionally, they play a critical role in training parents/guardians, other staff members, and caregivers on educating students with disabilities.

An IEP team may decide that a student with disabilities needs school occupational therapy (OT) services only if documentation shows that **BOTH** of the following guidelines are discussed and documented:

### Guideline 1: Motor or Sensory Impairment/Deficit

The student has a motor or sensory impairment/deficit in **ONE OR MORE** of the following areas:

#### A. Motor Impairment/Deficit

The student:

- Needs assistance planning and producing voluntary movement;

- Does not reach for objects with intention;
- Has difficulty grading force and timing movement;
- Needs assistance demonstrating age-appropriate grasp and release;
- Has difficulty carrying objects; or
- Has difficulty initiating and completing activities of daily living, such as:
  - Arrival/departure;
  - Hygiene management or other self-care activities;
  - Feeding/eating; or
  - Other (must be specified).

### B. Sensory Impairment/Deficit

The student:

- Has poor organized behavioral responses/unsafe behavior;
- Is unable to self-manage or self-monitor own behavior;
- Is inattentive or distractible, resulting in off-task behavior the majority of the school day;
- Has extensive difficulty interpreting and integrating sensory input; or
- Has delays in developing an integrated perception of the world and/or delayed motor exploration of surroundings and objects.

### Guideline 2: OT Services Are Necessary for the Student to Benefit from Special Education

ALL of the following must be discussed and documented. The OT services:

- Are required beyond that which is normally available to all students (e.g., tiered supports);
- Will support:
  - Functional change in motor or sensorimotor skill function;
  - Self-regulatory behavior (e.g., develop strategies to manage incoming sensory information, choose appropriate responses, and maintain levels of arousal) to actively and effectively participate in learning; and/or
  - Effective use of adaptive devices/assistive technology to access education;
- Are needed to meet targeted motor or sensorimotor IEP goals/benchmarks; and
- Are necessary for the student's educational performance or specially designed instruction and cannot be directly provided by any other school personnel.

Based on Illinois licensure requirements, occupational therapists may evaluate and add services for students without a physician's prescription document. Current physician's prescriptions (within one calendar year) are required by Medicaid when OT services are included on a student's IEP.

### Determining Need for Physical Therapy Services<sup>44</sup>

School-based physical therapists evaluate and facilitate the development of functional gross motor coordination and movement skills in order for students to access and participate in the educational environment and to benefit from their special education. The physical therapist is responsible for evaluations and intervention, including participation in team decisions about eligibility and postsecondary transition planning. Physical therapy (PT) interventions are designed to enable the student to move throughout the educational environment; participate in academic and non-academic educational activities; and maintain and change positions across all educational environments.

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<sup>44</sup> For additional information, see [Recommended Practices For Occupational And Physical Therapy Services In Illinois Schools](#).

An IEP team may decide that a student with disabilities needs school PT services only if documentation shows that **BOTH** of the following guidelines are discussed and documented:

### Guideline 1: Physical Condition/Orthopedic Impairment

The student has a physical condition or orthopedic impairment in **ONE OR MORE** of the following areas:

#### A. Posture and Positioning

The student:

- Needs assistance to participate in activities and routines due to poor postural control; or
- Needs assistance to sustain proper positioning.

#### B. Safe Transfers and Functional Mobility/Movement

The student:

- Needs assistance to keep up with peers due to poor speed and endurance;
- Has limited wheelchair skills;
- Needs assistance to safely transfer; or
- Needs assistance moving safely within educational environments.

#### C. Gross Motor Activities and Routines

The student:

- Needs assistance participating in age-appropriate motor activities and routines, such as:
  - Motor groups;
  - Physical education; or
  - Recreation with peers.

#### D. Self-Care from a Gross Motor Perspective

The student:

- Needs assistance participating safely and/or independently in mealtime (e.g., navigating the lunchroom, carrying a lunch tray);
- Needs assistance participating safely and/or independently in entrance/exit routine due to mobility, transfers, and/or balance concerns;
- Needs assistance participating safely and/or independently in toileting routine due to mobility, transfers, and/or balance concerns; or
- Needs assistance to safely and/or independently manage classroom materials and personal belongings due to mobility, transfers, and/or balance concerns.

### Guideline 2: PT Services Are Necessary for the Student to Benefit from Special Education

**ALL** of the following must be discussed and documented. The PT services:

- Are required and beyond that which are normally available to all students (e.g., tiered supports);
- Will support:
  - Effective use of adaptive devices/assistive technology to access education; and/or
  - Functional change in motor skill function;
- Address the student's ability to independently transfer and take care of personal care needs throughout the school day;
- Are needed to meet targeted motor-related IEP goals/benchmarks, if any; and

- Are necessary for the student's educational performance or specially designed instruction and cannot be directly provided by any other school personnel.

Physical therapists may evaluate and provide services without a physician's prescription document conditioned upon the ability to communicate with the student's healthcare professional.<sup>45</sup> The physical therapist needs to notify the student's healthcare professional within five business days of initiation of services, and a request for a physician's prescription can satisfy this request. Current physician's prescriptions (within one calendar year) are required by Medicaid when PT services are included on a student's IEP.

## THE INDIVIDUALIZED EDUCATION PROGRAM (IEP)

The IEP is a written document required for each student who is eligible to receive special education services under IDEA. It is provided to a student who has been determined to have a disability and to need special education services because of the adverse effect of that disability. An IEP identifies a student's unique needs and how a school will strategically address those needs, and it reflects the discussion and decisions of the IEP team. The IEP establishes goals and identifies the supplementary aids, supports, and services that will allow the student to meet those goals. It also commits Chicago Board of Education (Board) resources that are necessary to meet the student's individualized educational needs.

Most importantly, the IEP sits at the heart of a student's educational journey and is a document that sets both realistic and ambitious outcomes for academic, functional (including, but not limited to, social/emotional and behavioral), and developmental growth. It also allows for meaningful access to the general education curriculum and serves to advance the goal of increased academic achievement and functional performance for students with disabilities.

The IEP is developed through consensus by the IEP team. Consensus is defined as a general (not necessarily unanimous) agreement and is a decision arrived at by most of those involved. The district is ultimately responsible for ensuring FAPE is provided. It is not appropriate to make decisions based on a "vote." When the team cannot reach consensus, the district representative, who is either the local school district representative or the OSD SEC, will identify the final recommendation on behalf of the district when the team cannot reach consensus. In this event, the parents/guardians must be provided with a written copy of the school's proposals, or refusals, or both, regarding the child's educational program. The parents/guardians have the right to seek resolution of any disagreements as outlined in the [Procedural Safeguards](#).

### IEP Meeting

The local school district representative must ensure the parents/guardians are provided with written notice of an IEP meeting at least 10 calendar days prior to the IEP meeting. The parent/guardian may agree, in writing, to waive the right to this 10-calendar-day notice. A copy of written materials that will be considered by the IEP team at the meeting **MUST** be provided to the parents/guardians **at least three school days prior to the meeting**. This includes, but is not limited to, evaluation reports, collected data that will be considered at the meeting, and, if applicable, copies of paraprofessional, ESY, and *Learning Environment Intervention* forms. For a child who already has an IEP, a copy of the draft IEP components that will be discussed must also be provided.

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<sup>45</sup> Refer to the [Illinois Physical Therapy Practice Act](#).

At the IEP meeting, the IEP should be visually projected to support meaningful parent/guardian access and participation in the IEP discussion. If the IEP cannot be projected, the parent/guardian must be given either access to a district computer or a paper copy of the draft IEP sections that have been completed. If the parent/guardian has limited proficiency speaking or understanding English, or has a preferred language other than English, an interpreter **MUST** be present at the IEP meeting upon parent/guardian request to enable the parent/guardian to meaningfully participate in the meeting. Please see information regarding the translation of IEP meeting documents in the [Translation of Vital Documents](#) section.

**NOTE:** *If a parent/guardian requests a written translation of the final IEP into a language other than English, school staff must contact the OSD Service Delivery to request guidance on providing a copy of the IEP for the parent/guardian in the preferred language.*<sup>46</sup>

If the parent/guardian does not show up to the scheduled meeting, the meeting must be rescheduled at least once. The second *Notice of Conference* form must be sent in three different formats, one of which is US mail. Other types of transmission of the notice could be email, facsimile (fax), certified mail, or a phone call/voicemail. If the parent/guardian does not show up for the second meeting, the IEP team can proceed without them unless the parent/guardian has requested another meeting date. The third meeting notice is sent via US mail. The team may proceed on the third meeting date even if the parent/guardian does not show up or requests a fourth meeting date. All types of transmission of the *Notice of Conference* form must be documented in detail in the SSM Event.

**NOTE:** *The 10-calendar-day notice must be given in the parent/guardian's preferred language via the Notice of Conference form for each continued meeting date, unless the parent/guardian waives in writing the 10-calendar-day notification period. Notice and Consent forms in additional languages are available from ISBE at <https://www.isbe.net/Pages/Special-Education-Required-Notice-and-Consent-Forms.aspx> (see [Translation of Vital Documents](#) section).*

At the conclusion of the IEP meeting, the IEP must be finalized and a copy must be provided to the parent/guardian as well as the *Conference Recommendations* form. If all areas of the IEP have been discussed at the meeting but additional time is needed for the school team to finish the documentation to ensure it incorporates the discussions that occurred at the IEP meeting, then the school team and parent/guardian can complete the *Agreement to Proceed with the IEP Meeting* form (see [Agreement to Proceed with the IEP Meeting](#) section). If the IEP meeting concludes prior to all areas of the IEP being addressed, then the team must reconvene at a later date. The meeting must be scheduled at a mutually agreed upon date, time, and location and proper notification (i.e., *Notice of Conference*) must be provided to the parent/guardian. **Both meeting dates must be memorialized on the cover sheet of the IEP.**

**NOTE:** *Parents/guardians may choose to receive documents via email. This is to be documented via the [Parent/Guardian Authorization to Send IEP/504 Documents and Related Information via Electronic Mail](#) form (see [Prior Written Notice \(PWN\)](#) section).*

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<sup>46</sup> Per [IL Admin Code Section 226.530\(b\)\(3\)](#), a parent/guardian has the right to request that the interpreter provided by the district serve no other role in the IEP meeting than as an interpreter. The district must make reasonable efforts to fulfill this request. Requests for interpreters to serve no dual role at an IEP meeting, and whether this request was fulfilled, must be documented in the IEP Notes page; if not fulfilled, the district's reasonable efforts to fulfill the request must also be noted.

IEP team members may participate in the conference by telephone or other alternative means if they are unable to attend physically. The mode of participation must be documented on the cover sheet of the IEP and/or the IEP Notes Page (see [Meeting Notes](#) section).

IEP meetings cannot be recorded unless all IEP team members agree. If any IEP team member, including a parent/guardian, requests an accommodation for an IEP meeting in order to have meaningful participation, they must seek and obtain reasonable accommodation based on a disability by emailing [ADA@cps.edu](mailto:ADA@cps.edu). This email is overseen by the Americans with Disabilities Act and Compliance Office (ADA Office) that is part of the CPS Talent Office. If an IEP meeting is recorded, the local school district representative ensures that a copy of the recording is saved in the student's temporary file and maintained by CPS. The local school district representative must ensure that any recording is made using a CPS-issued device.

**NOTE:** Artificial intelligence (AI) generated transcripts (e.g., Google transcript feature) are considered recordings and are not permissible, unless all IEP team members agree. Additionally, AI transcripts do not reliably capture verbatim notes and, as such, are not recommended.<sup>47</sup>

**IDEA allows certain IEP team members to be excused from attending an IEP meeting in whole or in part. The person who serves as the district representative may NEVER be excused from an IEP meeting. A team member may only be excused if:**

1. The parent/guardian and district representative must **agree in writing** to the excusal. The *Parent/Guardian Excusal of an Individualized Education Program Team Member* form must be used whenever an IEP team member is excused, in whole or in part, from an IEP meeting. Parent/guardian signature and district representative signature are both required on this document. It is uploaded to SSM, and the signed form is maintained in the student's special education file.<sup>48</sup>
2. The excused team member must submit input and any recommendations for the student in writing to the parent/guardian and the rest of the IEP team **prior to the meeting**. This "written input" could include, but is not limited to, draft goals, suggested accommodations and modifications, evaluations, screenings or assessments conducted, record review summary, or summary of classroom observations.

**NOTE:** The *Parent/Guardian Excusal of an IEP Team Member* form must be completed anytime a required team member does not participate in the **ENTIRETY** of the meeting (e.g., arrives late, leaves early, etc.)

## Participants

**Pursuant to IDEA, the following are required IEP team participants:**

- At least one parent/guardian of the student;
- At least one general education teacher, if the student is or may be participating in the general education environment. The general education teacher who serves as a member of a student's IEP team should be a teacher who is, or may be, responsible for implementing a portion of the IEP, so that the teacher can participate in discussions on how best to instruct the student. The general education teacher also provides input regarding grade-level curriculum and content;
- At least one special education teacher. (If the child is receiving only speech and language services, the speech-language pathologist shall fulfill this role.);

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<sup>47</sup> For additional information, see [CPS AI Guidebook](#).

<sup>48</sup> If the *Parent/Guardian Excusal of an Individualized Education Program Team Member* form is not completed and signed prior to the meeting (which is best practice) and the parent/guardian is unable to sign the form due to virtual participation, written agreement may be obtained and confirmed by the parent/guardian via email. Upload the email agreement **as an attachment to the IEP** in SSM.

- For students who are 3 to 5 years of age, an individual qualified to teach preschool students without disabilities;
- An individual who can interpret the instructional implications of any evaluation results. (A person may assume this role in addition to another role at the conference.);<sup>49</sup>
- A representative of CPS (local district representative) who is qualified to supervise the provision of special education services, is knowledgeable about the general education curriculum and available resources, and is authorized to commit resources on behalf of the district. (If a representative from OSD attends the meeting, such as when the IEP team may be discussing placement in a separate day school, that person acts as the district representative and is identified on the *Notice of Conference* form as such.); and
- The student, if a purpose of the conference is to plan transition services (age 14½ and older during the life of the IEP), the student is age 18 or older, or if the parent/guardian chooses to have the child participate.

#### The IEP team must also include:

- At the discretion of the parent/guardian or CPS personnel, other individuals having knowledge or special expertise regarding the child (e.g., child welfare specialist if the student is a youth in care, etc.);
- A qualified bilingual specialist or bilingual teacher, if the student is an EL or the presence of such a person is needed to assist the other participants in understanding the child's language and cultural factors as they relate to instructional needs;
- A person knowledgeable about non-punative behavior strategies, if the child's behavior impedes their learning or the learning of others; and
- An interpreter for individuals who have limited English proficiency<sup>50</sup> or who are deaf.<sup>51</sup>

A single member of the IEP team, except the general education teacher, may meet two or more of the qualifications specified above, so long as they are identified on the *Notice of Conference* form as such (see [Notification of Conference](#) section).

**NOTE:** Paraprofessionals may be invited to attend IEP meetings at the request of the parent/guardian, principal, and/or district representative.

## Agreement to Proceed With the IEP Meeting

If all areas of the IEP have been discussed at the meeting but additional time is needed for the school team to finish the documentation to ensure it incorporates the discussions that occurred at the IEP meeting, the school team and parent/guardian can complete the *Agreement to Proceed with the IEP Meeting* form. If the *Agreement to Proceed with the IEP Meeting* form is completed, then the IEP must be finalized by the end of the next school day. The discussion regarding the agreement to proceed with the IEP meeting is also **memorialized in the IEP Notes section**. The parent/guardian has the right to request that the IEP meeting be reconvened if there are questions/concerns regarding the finalized IEP document.

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<sup>49</sup> If an AT/AAC evaluation report is being presented, this role can often be filled by the SLP, OT, or special education teacher following a consultation with the evaluator.

<sup>50</sup> Per [IL Admin Code Section 226.530\(b\)\(3\)](#), a parent/guardian has the right to request that the interpreter provided by the district serve no other role in the IEP meeting than as an interpreter. The district must make reasonable efforts to fulfill this request. Requests for interpreters to serve no dual role at an IEP meeting, and whether this request was fulfilled, must be documented in the IEP Notes page; if not fulfilled, the district's reasonable efforts to fulfill the request must also be noted.

<sup>51</sup> Under the ADA, a parent/guardian may request a skilled sign language interpreter through the CPS ADA office, [ADA@cps.edu](mailto:ADA@cps.edu).

If the school team or parent/guardian is not in agreement to proceed with the IEP meeting, then the team must reconvene at a later date. The meeting must be scheduled at a mutually agreed upon date, time, and location, and proper notification must be provided to the parent/guardian. Both meeting dates are memorialized on the cover sheet of the IEP.

*NOTE: The purpose of the Agreement to Proceed with the IEP Meeting form is to provide additional time for the school team to complete the IEP as discussed at the IEP meeting. The IEP team does not need additional communication with a parent/guardian to finalize the IEP.*

## IEP Development<sup>52</sup>

The IEP must be reviewed and updated at least annually to determine a student's progress toward the attainment of their goals and to set new goals, etc. It must include:

- A statement of the student's Present Levels of Academic Achievement and Functional Performance (PLAAFP) that includes how the disability affects their involvement and progress in the general education curriculum.
- A statement of measurable annual goals and benchmarks, including academic and functional goals, designed to meet the student's needs and enable them to be involved and make progress in the general education curriculum and meet other needs resulting from the disability.
- A description of how the student's progress toward meeting the goals and benchmarks will be measured and when periodic reports will be provided to parents/guardians on the progress toward meeting these goals and benchmarks.
- A statement of the special education, related services, and supplementary aids and services, based on peer-reviewed research to the extent practicable, and program modifications or support for school personnel that will be provided to enable the student (1) to meet annual goals; (2) to participate and make progress in the general education curriculum, nonacademic parts of the school day, and extracurricular activities; and (3) to be educated and integrated with age/grade-appropriate non-disabled peers.
- An explanation of the extent, if any, the student will not participate with non-disabled peers in the general education classroom.
- A statement of any individual appropriate accommodations necessary to measure the academic achievement and functional performance of the student on state and district assessments. If the IEP team determines that the student will take the Dynamic Learning Maps Alternate Assessment (DLM-AA), the IEP must include a statement why the student cannot participate in the standard district and state assessments.

## GENERAL CONSIDERATIONS (IEP Section 7)

General considerations is the foundation upon which the IEP is developed. This information provides an overview of a student's skills and drives the development of the supports and services within the IEP. All needs stemming directly or indirectly from the student's disability that impact the student's academic or functional performance are subsequently addressed in the IEP through accommodations, modifications, assistive technology, goals and benchmarks, consult services, behavior plans, and/or paraprofessional support as needed.

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<sup>52</sup> For additional IEP development support, see the [IEP Quality Project](#) and the [ISBE Instructions for Individualized Education Program Forms](#).

## Student Strengths

The IEP team describes what the student can do in positive terms. A summative narrative describes the student's strengths in academic, developmental, social/emotional, functional, and transition areas. Student strengths also include student interests, and, for transition-age students, the results of preference assessments, interest inventories, and/or career exploration measures.

## Academic, Developmental, and Functional Needs

### Academic Needs

Contains a narrative summation of the student's academic needs, preferred learning style, curriculum-based assessments, and district/state test results in each subject or content area.

#### General Academic Needs

Includes a description of the student's academic needs, current levels of academic performance, and areas of need in each core curricular subject. More detail for each subject or content area must be detailed in the PLAAFP as part of the Specialized Instruction (Section 11). Reviews and documents the effectiveness of past interventions and/or strategies used with the student, including the success or failure of the accommodations/modifications outlined in the prior IEP. For students with an existing transition plan, transitional supports that were or were not effective during the last IEP year are also discussed.

#### Preferred Learning Style

The student's preferred learning style (e.g., visual, auditory, or tactile/kinesthetic) and strategies utilized are identified. Not all learning styles must be listed, but at least the learning style which is most effective with the student is indicated. Preferred learning styles may differ across academic areas or with distinct types of instruction. The chosen learning styles are also reflected in the accommodations, modifications, and goals. For example, if the student is an auditory learner, books-on-tape, repeating directions, and other auditory cueing would be appropriate; whereas if the student is a visual learner, these types of accommodations may be less effective and visual cueing and guides may be noted instead.

#### Curriculum-Based Assessment Results

Includes the date, type of assessment, and narrative describing how the student performed (e.g., common unit assessment, Skyline Interim Assessment, etc.). Include progress monitoring data as well as teacher administered diagnostic tests, formative assessments, and a narrative analysis of student strengths and weaknesses indicated through all assessments. Assessments conducted over 12 months ago are not generally relevant to the IEP development.

#### District/State Test Results

Includes most recent scores, date, and a narrative description of the test results including strengths and weaknesses (e.g., REACH, Teaching Strategies GOLD, iReady, SANDI, IAR, DLM-AA, PSAT, etc.). Discuss progress in relation to previous performance, as appropriate. Assessments conducted over 12 months ago are not generally relevant to the IEP development.

### Developmental/Functional Needs

Describes how the student manages daily activities in the areas of social/emotional, behavioral, independent functioning, motor skills, executive functioning, and vocational. Explicit information about the student's strengths and weaknesses in each area are described along with the effectiveness of past interventions and/or strategies.

For transition-age students (14½ years and older during the life of the IEP) who have an independent living skills outcome identified in their transition plan, include the results of assessments/screenings conducted.

For students with an existing transition plan, discuss transitional supports that were or were not effective during the last IEP year.

## Communication Needs

Describes how the student communicates with others and how the student's communication impacts participation in the general education setting. Completed for all students and is **not limited** to those with a speech or language impairment or currently receiving speech-language services. Verbal and nonverbal communication is considered, as well as pragmatic language skills. If a student utilizes an AAC device, includes a detailed description of the type of device and any back-up communication system the student may utilize. Additionally, discuss the effectiveness of any communication device/system in allowing the student to communicate independently is noted as well as if any changes need to be made.

## Considerations for Students with Autism Spectrum Disorders

The IEP team must consider each listed factor and provide a narrative of the student's needs, if any, and the effectiveness of the interventions and strategies already used with the student. All relevant items are addressed in the body of the IEP through goals, services, accommodations, and/or modifications.

- Verbal and nonverbal communication needs;
- Social interaction skills and proficiencies;
- Any unusual responses to sensory experiences;
- Any resistance to environmental change or change in daily routines;
- Engagement in repetitive activities and stereotyped movements;
- Need for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from an autism spectrum disorder; and
- Other recommendations to assist the student to be involved and progress in the general curriculum.

## Relevant Transition Information

Relevant transition information within General Considerations does **not** refer to postsecondary transitions but addresses consideration of the student's skills for classroom-based transitions, school-wide transitions, and LRE transitions. The IEP team describes any supports necessary to assist the student in these transitions. Any supports described must also be included in Accommodations and Modifications and/or Specialized Instruction.

### When detailing the relevant transition information:

- Describe the current LRE setting;
- Describe what supports/strategies have and have not been effective in the past;
- Describe the team's consideration and criteria for adding and/or reducing supports/services;
- Describe the team's consideration and criteria for adding and/or reducing paraprofessional support for the purpose of increasing student independence;
- Consider and describe transition to another LRE setting as appropriate; and/or
  - Describe the effectiveness of the current LRE setting;
  - When contemplating a move to a less restrictive setting, identify the continuation of and/or new support strategies; or
  - When contemplating a move to a more restrictive setting, identify how previous support strategies did not work;

- Include information regarding the student's ability to transition as well as any supports necessary to transition
  - Within school setting;
  - Between classes;
  - Subject to subject;
  - Elementary to high school; or
  - Post high school.

## Medical Concerns

The certified school nurse must be a part of the IEP team if the student has identified medical conditions. The nurse will provide a narrative summary of any past and current medical conditions that require accommodations or modifications. For students with a chronic medical condition, the nurse will identify areas of concern in alignment with the primary care physician's orders.

## Language and Cultural Considerations<sup>53</sup>

Include language(s) spoken at home and school by the student and family. Discuss cultural background and its potential impact. Describe the bilingual service delivery model that has been used with the EL and if any changes need to be made. The information summarized drives the supports outlined in Accommodations and Modifications: Special Factors, English Learners.

Describe how the language of the student and/or parents/guardians impacts learning and if any cultural considerations exist which need to be addressed through accommodations or other supports. Examples include:

- Language(s) of exposure
- General information such as language at home (with siblings, parents, peers), name pronunciation, when student was exposed to different languages, type of language learner (e.g., simultaneous, learning English, etc.)
- Background (e.g., born in the U.S., refugee, etc.)
- Interpretation and narrative of ACCESS Scores
- Culture and heritage
- Recommended interventions/strategies

## Parent/Guardian Concerns

As valuable members of the IEP team, parents/guardians are encouraged to participate actively during the IEP meeting and provide input in the development of their child's IEP, including any ideas and/or concerns they have to enhance the student's education. Parents/guardians are asked to describe how they perceive the child to be functioning at school and how their child functions at home; the success of any interventions (e.g., rewards, chores, routines, etc.) used in the home; the child's experiences at school; and the parents'/guardians' short-term and long-term goals for their child. To facilitate parent/guardian input in the IEP, prior to the meeting, the local school district representative asks them to identify their child's strengths, areas of need, and any concerns they may have in order to share them at the IEP meeting. At the meeting, the local school district representative is responsible for ensuring the parents'/guardians' concerns are discussed and accurately documented in the Parent/Guardian Concerns in Section 7 of the IEP. Significant discussions and disagreements that occur during the meeting are captured in the IEP Notes (see [Meeting Notes](#) section) and/or via a dissenting opinion (see [Dissenting Opinion](#) section). Parent/guardian

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<sup>53</sup> See additional information: [Writing IEPs for English Learners](#) and [Office of Multilingual-Multicultural Education \(OMME\)](#).

concerns received within 10 calendar days of the IEP meeting, must be attached as a file-based document to the IEP.

## TRANSITION SERVICES (IEP Section 8)<sup>54</sup>

A transition plan must be developed for **all** students who are entering high school and who are or will be 14½ years old during the life of the IEP, whichever occurs first, and annually thereafter. Transition services are a coordinated set of activities for students with disabilities that are:

- Designed to be within a results-oriented process, focused on improving the academic and functional achievement of the student with disabilities to facilitate the student’s movement from school to post-school activities, including postsecondary education, vocational education, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation; and
- Based on the individual student’s needs, taking into account the student’s strengths, preferences, and interests related to instruction, related services, community experiences, the development of employment and other post-school adult living objectives, and the acquisition of daily living skills.

### Transition Service Plan Development<sup>55</sup>

#### Transition Assessments

Each student **MUST** have the following:

- At least one formal or informal assessment pertaining to postsecondary employment;
- At least one formal or informal assessment pertaining to postsecondary education and/or postsecondary training; and
- At least one formal or informal assessment pertaining to postsecondary independent living.

Assessment results must always be available if referenced in the IEP, and assessments must be conducted within one calendar year of the IEP meeting date.

#### Relevant Assessment Results

A detailed paragraph is provided for each assessment completed. Expand on information presented in General Considerations (Section 7) and PLAAFPs (Section 11), specifically focusing on how the student’s current and needed skills will affect their ability to work, learn, and live independently.

- **Employment:** Describe how the student’s transition assessments related to postsecondary employment provide information on the following: student interests; work stamina; level of independence in the workplace (including supports required); relative strengths or limitations in communication, social, conflict resolution, and time management skills; student self-determination skills; and other relevant areas.
- **Education/Training:** Describe how the student’s transition assessments related to future education and/or training opportunities provide information on the following: student interests; accommodations and/or supports that may be required; study skills; student aptitudes; and other relevant areas.
- **Independent Living:** Describe how the student’s transition assessments related to future independent living provide information on self-determination, independent functioning, ability to use technology,

<sup>54</sup> CPS staff visit [CPS INTRANET Transition Services](#).

<sup>55</sup> [Transition Planning Checklist for Parents/Guardians](#)

social skills, ability to self-travel, communication skills, and any other information that would be relevant in identifying the student's independent living need.

Include emphasis on how assessment findings might affect the student's success in postsecondary employment, education/training, and independent living settings.

### Postsecondary Outcomes

Indicate realistic, appropriate, and **measurable** postsecondary outcomes that take into account the student's preferences, strengths, and interests. Postsecondary outcomes are based upon age-appropriate transition assessments related to employment, education and/or training, and independent living skills. The postsecondary outcomes are statements that indicate what a student **"will do"** rather than "plans to do" or "hopes to do" after leaving high school and are individualized to the student's preferences, strengths, and interests.

### Planned Course of Study

Discuss courses the student will take while in high school (following the CPS graduation requirements and course sequences). Six courses per year must be listed. The final section "Extended Age 18-21" is not to be completed until the student's fourth year in high school. For students who are sophomores or in higher grades, the Planned Course of Study reflects both the courses the student has already taken and those that the student anticipates taking in the coming high school years. If a student has failed courses and has credit recovery needs, this information is included in General Considerations (Section 7) and addressed in the IEP.

As a component of transition planning, the IEP team needs to provide the student with information about the district's dual credit, career and technical education (CTE) opportunities, and postsecondary CTE opportunities. This is reflected in the Coordinated Set of Activities and Course of Study found within the Transition Plan, Part 2. A student in high school with an IEP may enroll in the district's dual credit and/or CTE program at any time if participation in such a program is consistent with the student's transition goals. Please collaborate with the school counselor, programmer, and city college partners for additional resources and programming options.

### Coordinated Set of Activities

The coordination of activities is focused on improving academic and functional achievement to facilitate the student's movement from high school to post high school. The services can be implemented by multiple school-based IEP team members, and are intended to ensure transition planning is actively taking place throughout the year and that multiple individuals (e.g., parent/guardian, student, general education teacher, special education teacher, social worker) are involved.

- **Instruction** - Identify any specialized instruction, school-based tutoring, skills training, college preparatory instruction, and/or self-determination instruction being provided and the provider(s) of those services. If applicable, identify what may need to occur in the future.
- **Related Services** - Identify if the student is receiving any related services (e.g., transportation, social work, health services, guidance counseling, etc.) and write a brief statement on how the related services pertain to transition needs. If a student utilizes AT or an AAC device to communicate, this is also included. The IEP team then discusses alternate postsecondary funding sources for the AT devices with the parent/guardian and student. If a student does not require related services, indicate "No related services are needed at this time."

**NOTE:** All district-provided assistive technology devices must be returned upon leaving the district (e.g., graduation, certificate of completion, etc.).

- **Work Experience** - Describe any work opportunities the student had or will have during the course of the IEP year and the acquisition of service learning hours. If the student is too young to have competitive employment experience, consider whether the student volunteers, babysits, does household chores, or has classroom or school-based jobs. Other considerations to include can be setting up job shadow opportunities or paid/unpaid work experiences in or out of school.
- **Development of Employment and Other Post-School Adult Living Objectives** - Describe how the IEP team will engage the student in learning about career planning, workplace skills, job try-outs, registering to vote, adult benefits planning, and any other post-school adult living objectives. If relevant, discuss the need to link the student to an outside agency for supports and the status of the linkage (e.g., The linkage will occur during the current IEP year; family has started the process but it is not yet complete; [Student] is currently linked and receiving XYZ services). If a student has medical needs that will require ongoing support post high school, plans for addressing these needs with the student and family are discussed.
- **Acquisition of Daily Living Skills** - For all students, describe how the IEP team will engage the student in developing skills in areas such as personal hygiene/grooming, self-care, mealtime skills, budgeting, care of clothing, fitness, wellness, nutrition, community travel, and any other necessary skills needed for independent living post high school.
- **Functional Vocational Evaluation** - Discuss how assessment data will be gathered to determine a student's vocational aptitudes and skills (e.g., career interest inventories, situational work assessments, work condition inventories, or work experience inventories, if relevant). If the IEP team agrees that there is adequate assessment information available, the team can make a statement such as: "A functional vocational evaluation is not required at this time, as there is sufficient data with which to make vocational decisions." If the IEP team determines a functional vocational evaluation is necessary, the local school district representative ensures OSD Transition Services is contacted.

### Linkages to Adult Services/Supports<sup>56</sup>

Parent/guardian/student (if the age of majority) provides consent<sup>57</sup> or refusal to invite an outside agency<sup>57</sup> to the IEP meeting for the current year. If consent is not received, the IEP team provides information about relevant agency supports to the parent/guardian or student. If consent is received, outside agencies are invited to the meeting and noted as invited on the Notice of Conference.

The IEP team has an obligation to anticipate future areas of need and facilitate linkages to adult services and support for students who may need continued or additional services after graduation. To that end, the team must document the support services and agencies for which the student and their family have been referred. Future IEP teams may review these supports and revise services based on the student's needs.

### Home-Based Support Eligibility

Home-based support services programs are intended to permit adults with mental illness or developmental disabilities to remain in their own home by providing payment for services or equipment needed to enable the adult to become more independent. Through linkage with local agencies, service plans are designed to allow individuals to live independently, learn living skills, or obtain vocational skills.

### Prioritization of Urgency of Need for Services (PUNS)<sup>58</sup>

Students and families should be made aware of PUNS as early as possible. PUNS is a database that registers individuals who want or need Developmental Disability Waiver services (i.e., Community

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<sup>56</sup> [Outside Agency List](#) & [Lista de Agencias Comunitarias](#)

<sup>57</sup> [Consent to Invite Outside Agency](#) & [CONSENTIMIENTO DEL PADRE/ESTUDIANTE PARA INVITAR A UNA AGENCIA A LA REUNIÓN DEL IEP.](#)

<sup>58</sup> [Understanding PUNS A Guide to Prioritization for Urgency of Need for Services](#) and [Illinois Department of Human Services.](#)

Integrated Living Arrangements, Home Based Supports, Child Group Homes) funded by the Illinois Department of Human Services/Division of Developmental Disabilities. For all students (1) with intellectual or developmental disabilities, as defined by the Illinois Department of Human Services, Division of Developmental Disabilities and (2) seeking home-based, day, and/or residential programs, a Pre-Admission Screening assessment by an Independent Service Coordination (ISC) agency is required. The ISC assessment leads to subsequent placement on the Prioritization of Urgency of Need for Services (PUNS) list, the state's database of unmet service needs. The ISC assessment must be completed before any adult services can be offered to students with a developmental disability. This planning process must begin no later than when the student is 14½ due to the complexity of the state's funding situation. IEP teams shall determine a student's PUNS registration status at annual IEP based on information provided by parent/guardian/student. If the student is not registered, parents are to be referred to school staff to provide parents with name, location, and contact info for appropriate service centers to register the student. Families are encouraged to start planning early, and CPS will provide students/parents/guardians with a referral to the ISC for assistance with the intake process for PUNS, if needed.

### Department of Rehabilitation Services (DRS)<sup>59</sup>

The DRS Home Services Program provides services to individuals with severe disabilities so they can remain in their homes and be as independent as possible. Services can include maintenance home health, adult day care, personal assistant, assistive equipment, respite, etc.

### Transition Goals

For each area in which a postsecondary outcome is identified, a measurable, annual IEP goal and benchmarks must be developed; these are called "transition goals". There must be, at a minimum, goals addressing postsecondary employment, education/training, and independent living. All transition goals must last the lifetime of the IEP and span both LRE environments, elementary and high school (if applicable). There are two ways to develop transition goals:

- Overlapping goals: An academic goal can be a transition goal if it is relevant to the student's postsecondary outcome in the transition plan.
- Standalone goals: At times, transition goals will be standalone (i.e., separate from the student's other academic goals).

## AREAS OF NEED (IEP Section 9)

The IEP team identifies the needs stemming directly or indirectly from the student's disability and the area(s) in which the student requires special education services, related service(s), supplementary aids, and/or accommodations/modifications in order to address the identified needs and to make progress in the general education curriculum. The Areas of Need must correspond with the information provided in General Considerations (e.g., if an English Language Arts goal is identified, General Considerations include a description of the student's reading issues and the need for specialized instruction). It is important to identify all areas in which the student's disability is adversely affecting their educational performance. For example, a student with a reading deficit might be adversely impacted in multiple academic areas beyond English Language Arts, so appropriate accommodations/modifications and/or goals, if necessary, cover all areas impacted by the reading deficit.

Each school must ensure that students with disabilities have an equal opportunity to participate in academic, non-academic, and extracurricular activities with non-disabled peers. The IEP team must

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<sup>59</sup> [DRS Office Locator](#) and [DRS Online Application](#).

determine and document the required supplementary aids and services necessary to enable the student to participate in all these programs.

Non-academic and extracurricular activities in which the student will or may participate are discussed by the IEP team, including any supports (e.g., paraprofessional, nursing, etc.) or accommodations needed in order to participate in the activities. Extracurricular support is not limited to students who are currently participating in extracurricular activities; it is discussed for all students who may participate.

If the student is in a grade that has a standard field trip (e.g., eighth-grade trip to Washington D.C.), there must be a discussion regarding what supports, if any, are needed to allow the student to participate in this field trip. Students with disabilities are to be included in all age/grade-appropriate field trips. A school may never refuse to integrate students with disabilities in lunch, field trips, assemblies, or recess based on administrative convenience, scheduling, or disability alone; any decisions regarding participating in such activities are made on an individualized basis with a focus on the student's needs and safety.

## ACCOMMODATIONS AND MODIFICATIONS (IEP Section 10)

**Accommodations and modifications, including supplementary aids and services, are provided to students based on individual needs.** Accommodations aim to reduce the effects of a student's disability to provide equitable access to instruction and assessment, but they do not substantially change the instructional level, content, or performance criteria. Modifications may change the instructional level, the content, and/or the performance criteria; however, even with a modified program, the student may work on the same subject area as the rest of the class. **Supplementary aids and services may include, but are not limited to:**

- Accommodations that change how a student accesses information, such as books-on-tape, large print books, highlighted reading materials, main idea summations, organizational aids, pre-written notes, study guides, rephrasing a question, additional time, calculators, or a word processor;
- Modifications that change what a student is expected to learn and how the student will demonstrate achievement in the general education curriculum;
- Consultative services where the special education teacher and/or RSP consult with each other and/or the general education teacher on strategies to assist the student to progress in the general education curriculum;
- AT devices or services;
- Behavior intervention services, supports, and strategies; and
- Paraprofessional support to provide assistance in specific areas of need.

### Accommodations and Modifications: Special Factors (IEP Section 10(a))

The IEP identifies seven special factors that are discussed to further identify each student's individualized needs and determine if the student requires this type of support in order to make progress in the age/grade-appropriate general education curriculum. A student may or may not have needs in some or all of these areas. The seven special factors include:

- For a student who is blind or visually impaired, if instruction needs to be provided in braille and/or include the use of braille;

- For a student who is deaf or hard of hearing, the student’s language needs and opportunities for direct communication with peers and staff and considerations for the need of a sign language interpreter;<sup>60</sup>
- For a student who is an EL, their language needs as they relate to the student’s disability;
- The communication needs of a student and whether a trial to determine the appropriate AAC device is needed;
- A student’s need for AT devices or services to access the educational curriculum;
- For a student whose behavior impedes their or others’ learning, the need for positive behavior interventions, supports, and strategies; and
- For a student who requires paraprofessional support to access the general education curriculum or to meet social, communication, behavioral, or adaptive needs (see [Paraprofessional Support](#) section).

### A. Consideration of braille needs

The IEP team will only be able to choose “yes” or “no” if the student’s most recent evaluation identified them as blind or visually impaired. If the answer is yes, the team must state if instruction provided in braille and the use of braille are needed. For a student who is functionally blind, it is presumed that proficiency in braille reading and writing is essential for their educational progress. Students (i) whose vision loss is so severe that they are unable to read and write at a level comparable to their peers solely through the use of vision; and (ii) who show evidence of progressive vision loss that may result in functional blindness, are also entitled to braille instruction. Braille instruction may be used in combination with other special education services to meet the student’s educational needs.

**NOTE:** The team is required to notify the parents/guardians that their student might be eligible to receive services from the Illinois School for the Visually Impaired and the services they provide. This notification is given to the parents/guardians at the IEP meeting (see [Notification of Services from Illinois School for the Deaf and Illinois School for the Visually Impaired](#) section).

### B. Consideration of communication needs

The IEP team must consider the student’s communication needs. In the case of a student who is deaf or hard of hearing, the IEP team must also consider the student’s language needs, opportunities for direct communication with peers and staff in the student’s language and communication mode (e.g., visuals, oral/aural, sign language, total communication), academic level, and full range of needs, including opportunities for direct instruction in the student’s language and communication mode, including consideration for the need of a sign language interpreter.<sup>61</sup>

**NOTE:** For students who are deaf or hard of hearing, the team is required to notify the parents/guardians that their student might be eligible to receive services from the Illinois School for the Deaf and the services they provide. This must be given to the parents/guardians at the IEP meeting (see [Notification of Services from Illinois School for the Deaf and Illinois School for the Visually Impaired](#) section).

### C. Consideration of ELs’ language needs<sup>62</sup>

For ELs, the team must describe how language impacts learning and what type of support is needed to address the student’s language and cultural needs (e.g., native language materials, ESL materials, native language strategies, ESL strategies, etc.).

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<sup>60</sup> See additional information: [ISBE Educational Sign Language Interpreter FAQ](#)

<sup>61</sup> See additional information: [ISBE Educational Sign Language Interpreter FAQ](#)

<sup>62</sup> See additional information: [Writing IEPs for English Learners](#) and [Office of Multilingual-Multicultural Education \(OMME\)](#)

#### D. Consideration of need for AT and/or AAC devices or services<sup>63</sup>

AT provides students with disabilities with the supports needed to allow them to develop, improve, or maintain their functional capabilities in a variety of tasks. AT for students with disabilities can include, but is not limited to, low-tech, mid-tech, and high-tech tools that support access to their educational environment, and AAC, which enables a student with a disability to have a means of supplementing existing speech or replacing speech that is not functional. ISBE guidance makes clear: “The responsibility for AT/[AAC] consideration falls upon the entire IEP team and is not relegated to an individual or outside evaluator. While schools may engage in ongoing and recurring AT consideration, discussion of the need for AT is required to, at every IEP meeting.”<sup>64</sup> This means that teams are expected to have necessary knowledge and skills to meaningfully discuss and determine a student’s need for AT/AAC, and to the extent teams lack necessary knowledge and skills, they must promptly either collect more information or seek assistance from a person or team that has the knowledge and skills.

**AT/AAC device:** Any item, piece of equipment, or product system—whether acquired commercially off the shelf, modified, or customized—that is used to increase, maintain, or improve functional capabilities. This may include low-tech, mid-tech, or high-tech devices.

**AT/AAC service:** Any service that directly assists in the selection, acquisition, or use of an AT/AAC device, including assessment of the needs of a student with disabilities; purchasing, leasing, or otherwise providing for the acquisition of AT/AAC devices; selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing AT/AAC devices; coordinating and using other therapies, interventions, or services with AT/AAC devices; and AT/AAC training or technical assistance.

**AAC system:** A tool ranging from picture and symbol communication boards to a speech-generated communication device that may increase social interaction and school performance.

AT provides compensatory benefits to improve or maintain functional performance (e.g., reading, communicating, or mobility). An AT tool is not tied to a specific disability type but rather to an area of functional performance and can help students show what they know and compensate for a barrier posed by their disability. Everyday technologies can be identified as AT for a student with a disability if they are used as a compensatory intervention and an IEP team determines that a student needs them to receive FAPE.

The consideration of AT is an ongoing process in which AT is considered, selected, provided, supported, and periodically assessed to determine its effectiveness for a student. AT is also documented in a student’s IEP. The IEP team identifies AT required for the student to interact with staff and peers, access any portion of the curriculum, or meet the social and/or communication needs of the student.

**NOTE:** *The need for AT and AAC devices and services must be considered at every IEP meeting, and when appropriate and based on the individual student’s needs.*

An IEP team may decide that a student with disabilities needs AT/AAC devices and/or services based on documentation that shows that the guidelines below have been discussed and are supported by qualitative

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<sup>63</sup> See additional information: [The Illinois Assistive Technology Guidance Manual, Second Edition 2020, Myths and Facts Surrounding Assistive Technology Devices and Services](https://www.cps.edu/services-and-supports/special-education/related-services-and-providers/assistive-technology-resource-center/)  
<https://www.cps.edu/services-and-supports/special-education/related-services-and-providers/assistive-technology-resource-center/>

<sup>64</sup> [The Illinois Assistive Technology Guidance Manual, Second Edition 2020](https://www.cps.edu/services-and-supports/special-education/related-services-and-providers/assistive-technology-resource-center/)

and quantitative data.<sup>65</sup> School-based staff, RSPs, parents, and/or students will either receive training in person or utilize online webinars and/or training resources. For AAC systems, training is required for staff working with students for whom a communication system is recommended. Training is open and strongly recommended for anyone within the student's community (e.g., parents/guardians, caregivers, etc.)

**NOTE:** Any training needs must be documented under *Accommodations and Modifications: General (IEP Section 10(b))* under “staff training” or “parent training” in the appropriate area of need(s).

### AT/AAC Guidelines:

The student’s access to the curriculum, ability to communicate, or other functional capabilities may be adversely affected by the student’s disability. Examples include, but are not limited to, a student who:

- Has communication skills that are impacted due to a medical or physical condition;
- Has speech that is highly unintelligible;
- Is nonverbal or minimally verbal;
- Requires adapted materials to complete typical classroom tasks;
- Requires supports to focus, transition, interact with others, or engage meaningfully with the curriculum throughout the day. Supports can include visual or tactile supports, such as a visual picture schedule, visual timer, or tactile schedule (which are provided by the school team), or items such as reader pens, screen readers, predictive text software, or mounting equipment (which are provided by the Assistive Technology Resource Center (ATRC) department); or
- Has a motoric deficit that impacts access to the school curriculum or environment.

IEP teams can and should initially consider AT/AAC without referring to ATRC if the devices (e.g., core boards, visual schedules, Chromebook/laptop for typing assignments, text-to-speech/speech-to-text, and audiobooks) are readily available and have data supporting this determination.<sup>66</sup> If the IEP team is unable to determine the AT/AAC needed for a student, a request for an AT and/or AAC consultation or assessment by ATRC staff is submitted. School staff can complete the *AT Referral* form found in SSM. Parent/guardian requests for AT and/or AAC assessment must be made in writing to the local school district representative. If the request is made verbally, the local school district representative must instruct the referrer to put the request for assessment in writing and assist with transcribing if the parents/guardians are unable to write out their request. The school team must still fill out an ATRC referral on SSM to obtain guidance from the ATRC department. When filling out an ATRC referral, the school team selects AAC if the student is being considered for an augmentative and alternative communication device and AT if the student requires AT to assist in access to the curriculum. If a student is being considered for an AAC device and has significant mobility impairments that impact the student's ability to touch a device using their hands, then both AT and AAC are selected on the referral.

**NOTE:** An ATRC assessment supports the development of appropriate supports and services for IEP development and if a student previously has had AT/AAC, is not an evaluation that must follow the 60

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<sup>65</sup> Qualitative and quantitative data in this context includes data regarding (1) how the student’s access to the curriculum, ability to communicate or other functional capabilities is adversely affected by their disability, and the specific nature of the adverse effect; and/or (2) how and to what extent the IEP-specified instruction or accommodations, modifications, and/or other supports used during instruction were insufficient to support the student’s performance and/or participation in activities.

<sup>66</sup> When listing AT, describe required features of the device. Specific brands/equipment should not be included. If high-tech AT devices have been identified, include low-tech backups of the device (e.g., if a student has a dynamic AAC device, they also need access to a core board or communication book).

*school-day timeline for completion. To the extent that an ATRC assessment is not an evaluation; the ATRC assessment must be completed in a reasonable timeframe to support the development of a student's IEP.*

*If a student has never had an AT or AAC assessment, then an AT/AAC evaluation should be conducted, and certain procedural safeguards and legal timelines apply, such as the requirement to obtain parental consent for the evaluation and the 60-school day timeline to conduct the AT/AAC evaluation and make a determination of a student's need for AT/AAC. This process can be conducted by the school team if members possess sufficient information regarding potential AT/AAC for a student. If the school team lacks sufficient knowledge to do so, then the team should complete an ATRC referral for either a consultation or an evaluation.*

*If it is determined that AT/AAC is recommended, the IEP must be revised throughout to reflect the appropriate supports and services (e.g., General Considerations (Section 7), Accommodations/Modifications (Section 10), Specialized Instruction (Section 11), etc.)*

When students are issued equipment through ATRC, the *ATRC Loan Use Agreement*<sup>67</sup> form must be completed. A school administrator must sign the agreement indicating the receipt of the listed equipment and assuring a secure location as well as routine supplies such as batteries, ink cartridges, and paper. If the student needs to use the AT/AAC equipment at home, a parent/guardian must sign the *ATRC Loan Use Agreement*. The completed *ATRC Loan Use Agreement* must be uploaded to SSM as soon as is practicable after it has been completed.

**NOTE:** *It is strongly encouraged that AAC devices are utilized across all environments, including home. Other types of AT devices may also be considered for home use, especially if required for completion of school-related activities (e.g., homework).*

#### **E. Consideration of student's need for positive behavioral interventions, strategies, and supports**

Positive behavior interventions, strategies, and supports, or a formal functional behavior assessment (FBA) is initiated and a behavior intervention plan (BIP) developed when a student's behavior impedes their learning and/or their peers' learning, including when a student is chronically absent or demonstrates school refusal. The initiation or revision of an FBA and BIP is required when disciplinary sanctions result in out-of-school removal beyond 10 school days in a school year or whenever a manifestation determination review (MDR) is conducted. Prior to conducting the FBA, **parent/guardian consent must be obtained** either through the Assessment Planning process if the student is undergoing an FIE, or via the standalone Consent for Functional Behavior Assessment document in SSM.

**NOTE:** *The 60-school-day time frame for evaluation applies for completing an FBA upon receiving parent/guardian consent.*

The FBA is a problem-solving process for analyzing student behavior(s) and environmental factors that affect these behaviors that impede their learning or the learning of others. It is designed to help teams select non-punitive and appropriate interventions that directly address problematic behavior; its focus is on identifying significant, student-specific, social, affective, cognitive, and/or environmental factors associated with the occurrence and nonoccurrence of specific behaviors. The broad perspective offers a better understanding of the root cause of the student's behavior and an effective plan for addressing it.

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<sup>67</sup> CPS staff access [ATRC Loan Use Agreement](#).

**An FBA:**<sup>68</sup>

1. Involves a systematic process for identifying target behavior(s) and gathering information about when, where, and why a behavior is occurring, which leads to the development of the BIP;
2. Is designed to help determine the antecedents and consequences of target behavior(s), as well as the communicative and functional intent of such behaviors;
3. Leads to more specific and effective behavioral interventions; and
4. Summarizes prior interventions implemented and indicates which prior interventions were successful and which were not.

**A BIP must:**

- Summarize the findings of the FBA;
- Describe the behavioral interventions to be used, including those aimed at developing or strengthening alternative or more appropriate behaviors;
- Identify the measurable behavioral changes expected and methods of evaluation;
- Include a schedule for a review of the interventions' effectiveness; and
- Include provisions for communicating with the parents/guardians about their child's behavior and coordinating school-based and home-based interventions.

**NOTE:** Major changes to a BIP cannot occur without a new FBA. If there is a need to revise the BIP, in most cases, a new FBA must be conducted; therefore, parent/guardian consent must be obtained. The FBA/BIP must be completed as a section within the student's IEP document. The standalone FBA/BIP document is only utilized for students with a 504 Plan, when needed.

CPS staff visit [CPS INTRANET BST](#) and [FBA/BIP Guidance Document](#).

**F. Paraprofessional Support**<sup>69</sup>

Any member of the IEP team, including the parents/guardians, may initiate a request for paraprofessional support to be discussed at the IEP meeting and for qualitative and quantitative data<sup>70</sup> to be gathered to support this discussion. When the IEP team determines that paraprofessional support is required, the team will also determine if it is appropriate to include in the student's IEP a relevant measurable goal designed for the student to achieve greater independence within the targeted area(s) of need and decrease reliance on paraprofessional support (see [Paraprofessional Support](#) section).

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<sup>68</sup> For additional information, see [Using Functional Behavioral Assessments to Create Supportive Learning Environments](#) and [ISBE Guidance Document: Behavioral Interventions in Schools: Guidelines for the Development of District Policies for Students with Disabilities](#).

<sup>69</sup> CPS staff utilize the [Guiding Questions to Support Justification and Determination of Paraprofessional Support](#)

<sup>70</sup> Qualitative and quantitative data needed to determine whether a student requires paraprofessional support will vary depending on the need(s) for which the IEP team is contemplating paraprofessional support. For support with personal care, the team may consider reports from OTs, PTs, doctors, etc., or staff or parent/guardian input as to why the student needs assistance. For support related to behavior, the data describe the target behavior(s) (e.g., elopement) along with frequency and/or duration of the target behavior(s). For support related to academics, the data describe how the area of concern is currently being addressed, the frequency and duration of needed support(s) (e.g., student requests directions be repeated every five minutes), and why the needed support(s) exceeds what a teacher alone can provide in a classroom setting. Data must include, for both behavior and academic, current and past intervention(s) and their effectiveness or lack thereof.

## Accommodations and Modifications: General (IEP Section 10(b))

The IEP team determines what accommodations are needed to address the student's individualized needs and if any would support the student in being involved and progressing in the general education curriculum. Every Area of Need in IEP Section 9 with a check under "Accommodations and/or Modifications" will automatically pre-populate. For each area identified, the IEP team determines what accommodations are needed to address the student's individualized needs that were highlighted in General Considerations (Section 7). The IEP team discusses if any of the list of accommodations that automatically appear in the IEP would support the student in being involved and progressing in the general education curriculum. If a needed accommodation is not included in the pre-populated list, the IEP team describes the needed accommodation in the "Other Accommodations" box. Accommodations are likely to vary between curriculum areas to assist the student in being involved and progressing in a particular curriculum area, depending on a student's needs.

**NOTE:** *If a student with disabilities will be participating in aquatic activities during the life of the IEP (e.g., swimming class for P.E.), the team discusses what, if any, accommodations will be needed for the student to safely participate. Any necessary accommodations are documented under the P.E. Area of Need. The IEP team also considers the need, if any, for safety-related accommodations during the school day and at other school-related activities.*

The IEP team decides whether collaboration/consultation between service providers is needed to enable the student to be involved and make progress in the general education curriculum or to achieve IEP goals. If the team decides consultative services are needed, the IEP must indicate who will be consulting with whom, for how long, and the nature of the consultation. For example, consultation might be considered to monitor student progress, student attendance, student behavior, the effectiveness of interventions used, and/or the implementation and effectiveness of accommodations/modifications.

### Individual Health Care Plan for Diabetes, Asthma, Food/Non-Food Allergies, and Other Health Conditions

A health care plan must be created as part of an IEP for IDEA-eligible students who have diabetes, asthma, and food/non-food allergies. Other conditions such as seizures are episodic and may also require an individual health care plan that is part of the student's IEP. The health care plan must be updated at least annually when the IEP is annually reviewed or as soon as possible when the school receives updated medical information. When a health care plan is developed, a copy must be provided to the student's parents/guardians and all staff members who interact with the student on a regular basis. These staff members may include, but are not limited to, teachers, substitute teachers, paraprofessionals, regular volunteers, administration, lunchroom aides, coaches, recess coordinators, and bus aides. Training for school staff on the health care plan in the student's IEP on how to keep the student safe at school and during school activities might also be necessary and must be included in the health care plan.

**NOTE:** *Any training needs must also be documented under Accommodations and Modifications: General (Section 10(b)) under "staff training" in the appropriate Area of Need(s).*

All health care plans include a description of the child's symptoms, accommodations, and/or supports needed in the school setting to address the symptoms, what medications the student takes, and a plan for emergencies. The prevention of symptoms includes steps to keep the child healthy in the long term, and to prevent the child from exposure to triggers that could lead to emergencies. The emergency plan contains

emergency contacts, information on how to immediately treat symptoms when the child has been exposed to triggers, and descriptions of situations that require calling 911 and hospitalization.

**NOTE:** *When in doubt about how to respond to a medical emergency, always call 911.*

The health care plan in the student's IEP also includes procedures to be followed during and in preparation for field trips, school parties, and all emergency drills and actual emergencies (including loss of power, fire and tornado drills, active shooter drills, lockdown situations, etc.). For example, it may be necessary to have non-perishable food on hand in case of a drill that would interrupt a student's usual eating schedule.

Additionally, the health care plan must indicate the name, dosage, route, frequency, and expiration date of the student's medication, as well as parent/guardian consent, doctor authorization, and any special instructions necessary for taking the medication. It must also state if the student self-administers the medication or if staff will have to administer the medication. The health care plan also indicates where the medication (including emergency medication) is located. This information is taken verbatim from the completed physician's order forms and/or emergency action plan. Finally, the plan describes any side effects that the student may experience when taking the medication and how to respond if they occur.

**NOTE:** *All physician orders and emergency action plans must be uploaded and attached to the IEP.*

### Diabetes Care Plan (DCP)<sup>71</sup>

**Medication:** The DCP notes what kind of device is used to deliver insulin to the student—a syringe, insulin pen, insulin pump, or something else; note what kind of insulin therapy is used at school, and how it is implemented. If the student uses a Continuous Glucose Monitor (CGM), the DCP notes the type of care it needs. The DCP also explains where the student's insulin and equipment are stored. If the student uses syringes or lancets, make sure the plan includes how to properly dispose of them.

**Accommodations:** The DCP also describes what accommodations and/or other supports a student will receive on a typical school day, during extracurricular activities, during field trips, and on the bus. For example, what kind of snacks, drinks, or equipment is kept on hand in the event of hypoglycemia or hyperglycemia? What are the student's personal food-sharing rules? When and how often do glucose levels need to be checked, and where does the student prefer to be tested? (The side of the fingertip, or somewhere else?) The school also takes into consideration the extent to which the student is independent and can check their own glucose levels. It is important to recognize the student's self-management strengths and weaknesses.

The DCP also notes if the student's diabetes is impairing or interfering with their school performance. If so, include both which activities are impaired and which other accommodations may be necessary.

When developing all DCPs, the IEP team is required to identify and train a Delegated Care Aide (DCA) for each student with diabetes to help that student manage their diabetes when the school nurse is not in the building or unavailable. "Delegated Care Aide" means a school employee who has agreed to receive training in diabetes care and assist students in implementing their DCP. The parent/guardian must authorize the use of a DCA for their child, and they and CPS must agree to the staff member who

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<sup>71</sup> See the district's [Chronic Conditions Management Policy, Section 704.12](#).

volunteered to act as the student's DCA. The IEP team must complete the *Delegated Care Aide* form, on which the parent/guardian indicates whether the parent/guardian agrees to the DCA.

**Safety Procedures:** The DCP outlines what steps to follow in case of an emergency. The plan describes the student's symptoms of hypoglycemia and hyperglycemia and how to prevent them from occurring. Some symptoms may include, but are not limited to, dry mouth, extreme thirst, nausea, vomiting, severe abdominal pain, heavy breathing or shortness of breath, chest pain, increasing sleepiness or lethargy, a depressed level of consciousness, or unconsciousness. The plan indicates the student's target blood sugar range, as well as what is considered low, high, and extremely high. It is also important to include what foods or drinks the student should have on hand to treat hypoglycemia and other steps to be taken in the event of an emergency. The DCP also includes emergency contacts in addition to 911. After handling an emergency, always contact a student's parent/guardian to inform them of its occurrence and complete an incident report.

**NOTE:** *When in doubt about how to respond to a medical emergency, always call 911.*

### Asthma Action Plan<sup>72</sup>

**Medication:** The Asthma Action Plan indicates when and how often the student should use an inhaler, where the inhaler is kept (e.g., in their pocket, backpack, or desk), and if the teacher or another adult has an extra inhaler kept in a safe, locked place.

**Accommodations:** The Asthma Action Plan describes the accommodations a student needs to receive during regular school days, extracurricular activities, field trips, and bus rides. Accommodations consider how best to prevent acute episodes as well as long-term care and prevention. Prevention measures might include good ventilation, dust control, and humidity control.

Document if the student's asthma is in any way impairing or interfering with their school performance. If so, which activities are impaired? In particular, do adjustments need to be made to the student's physical education classes?

**Safety Procedures:** The Asthma Action Plan outlines what steps to take in an emergency. The plan includes emergency contacts in addition to 911. It also describes what might trigger a student's asthma attack. Common asthma triggers include allergens (like pollen, animal dander, mold, etc.), physical exercise (particularly in cold weather), respiratory infections, and other irritants (like cold air, perfume, chalk dust, etc.). It also describes the student's symptoms during an asthma attack. Common symptoms include, but are not limited to, excessive coughing, shortness of breath, wheezing, chest tightness, nostrils flaring, hunched-over shoulders, and abnormal anxiety or fear. In addition to the administration of medication and contacting emergency contacts, the Asthma Action Plan outlines any other necessary steps to take in the case of an emergency. After handling an emergency, always contact a student's parent/guardian to inform them of its occurrence.

**NOTE:** *When in doubt about how to respond to a medical emergency, always call 911.*

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<sup>72</sup> See the district's [Chronic Conditions Management Policy, Section 704.12](#).

### Individual Health Plan for Food/Non-Food Allergies<sup>73</sup>

**Medication:** The Individual Health Plan for Food/Non-Food Allergies indicates if the student requires an EpiPen or any other medications. If the student has an EpiPen, the plan indicates where the student keeps it (e.g., in their pocket, backpack, desk, etc.).

**Accommodations:** The Individual Health Plan for Food/Non-Food Allergies includes a list of all the student's allergies and how to prevent the student from having an allergic reaction. Some of the most common food allergies are peanuts, tree nuts (walnuts, cashews, pecans, hazelnuts, almonds, etc.), milk, eggs, fish, shellfish, soy, and wheat. The plan puts into place personal food sharing rules for the student to ensure that the student does not eat anything that would cause a reaction. It carefully considers what measures can be put in place to prevent reactions from occurring, including keeping the student's eating, work, and play areas clean.

***NOTE:** Lesson plans or art projects cannot include food to which the student is allergic. Class rewards must also not include food to which the student is allergic.*

**Safety Procedures:** The Individual Health Plan for Food/Non-Food Allergies includes what to do in an emergency. The Individual Health Plan for Food/Non-Food Allergies details the symptoms of a student's anaphylactic shock, what to do if the student goes into anaphylactic shock, where the district-issued EpiPens are kept, and how to use an EpiPen if necessary (as well as how to dispose of a used EpiPen). The plan also includes emergency contacts in addition to 911. In addition to the administration of medication and contacting emergency contacts, the Individual Health Plan for Food/Non-Food Allergies outlines any other necessary steps to take in the case of an emergency. After handling an emergency, always contact a student's parent/guardian to inform them of its occurrence.

***NOTE:** When in doubt about how to respond to a medical emergency, always call 911.*

### Health Care Plan for Other Health Conditions<sup>74</sup>

Health conditions that may require a health care plan can include, but are not limited to:

- Multiple sclerosis;
- HIV/AIDS;
- Chronic fatigue syndrome;
- Migraines;
- Chronic pain; or
- Seizures (including all required components for a Seizure Action Plan under the new Seizure Smart School Act<sup>75</sup>).

The Health/Medical section of the IEP allows the team to create a health care plan for conditions other than asthma, diabetes, and allergies. If a student has an episodic condition that requires medication during the school day, the team may want to develop a health care plan. It describes what types of medication are required during the school day, if the student can self-administer the medication, where the medication is stored, and any side effects from the medication. It must also detail any accommodations needed during the school day, school activities, field trips, and bus rides. Finally, it outlines what steps must be taken in an

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<sup>73</sup> See the district's [Chronic Conditions Management Policy, Section 704.12](#).

<sup>74</sup> See the district's [Chronic Conditions Management Policy, Section 704.12](#).

<sup>75</sup> See the [Seizure Smart School Act](#).

emergency. After responding to an emergency, always contact a student's parent/guardian to inform them of its occurrence.

*NOTE: When in doubt about how to respond to a medical emergency, always call 911.*

## Accommodations and Modifications: Assessments (IEP Section 10(c))

Three criteria are essential when considering any classroom assessment accommodations:

- The accommodation provides the student with the same opportunities in the testing situation as students who receive no accommodation;
- The purpose of the test is not compromised by the accommodation (example: reading a decoding test to a student would compromise the purpose of the decoding assessment); and
- Test security is not compromised by the accommodation.

Accommodations can be organized into six categories: setting, presentation, timing, response, scheduling, and other. They must accurately reflect a student's knowledge and skills and not their disability when taking assessments. A description of the necessary accommodation is noted in the "Other Accommodation" box.

*NOTE: If a student requires AT to access the curriculum, the IEP team must consider whether AT is also required during assessments.*

All students with disabilities must participate in the district and state assessments or in an alternate assessment if non-disabled students of the same age or grade are tested. It is anticipated that almost all students with disabilities will be able to participate in the standard district/state assessments.

If a student does not require classroom assessment accommodations in a subject area that is part of a district or state assessment, the student will take the assessment without accommodations in that subject area.

If it has been determined a student cannot participate in the standard district/state assessments even with accommodations, the student will take the DLM-AA.<sup>76</sup> Under federal law, the **DLM-AA is limited to only 1% of the total population of students with disabilities.** The purpose of the DLM-AA is to measure progress of students with significant intellectual disabilities who cannot participate in state assessments even with accommodations and to ensure that the educational progress of these students is included in the statewide accountability system at the individual school, district, and state levels.

## SPECIALIZED INSTRUCTION (IEP Section 11)

The IEP team must develop specialized instruction goal(s) to address a student's individualized needs.

All specialized instruction goals developed must be SMART goals:

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<sup>76</sup> Reference the [DLM-AA Participation Guidelines](#). The alternate assessment is intended for students with the most significant cognitive disabilities. These students have intellectual functioning well below average (typically associated with an IQ below 55) that exists concurrently with impairments or deficits in adaptive functioning (e.g., communication, self-care, home living, social/interpersonal skills, use of community resources, self-directions, functional academic skills, work, leisure, health, and safety).

| SPECIFIC  | MEASUREABLE   | ACHIEVABLE   | RELEVANT  | TIME-BOUND  |
|---|---|--|---|---|
| S   | M   | A  | R   | T   |
| G   | O   | A  | L   | S   |
| What will the student be able to do? Action words help. | What observable, objective criteria tells us the goal is met? Measurable criteria includes NUMBERS. | Is it both ambitious and within reach of the student and IEP team? | Does this goal matter given the student's individual needs and what's required by the curriculum? | Is the goal aligned in a timely manner to the general education curriculum and can it be met within the time allowed? |

**Duration of IEP:** Decide if the goal being developed will be worked on for the life of the IEP (i.e., one year), this school year, or the next school year. The answer to this question will generate the necessary LRE grids. If the IEP team opts for the life of the IEP, the start date is the date of the IEP meeting and the end date is one year from that date. If the answer is this school year, the start date is again the date of the IEP meeting but the end date is the last day of student attendance of the appropriate school year. If the answer to the question is next school year, the begin date is the first day of student attendance of the appropriate year (which is generated automatically) and the end date is one year from the date of the IEP meeting.

**Goal Area:** Indicate the applicable area (i.e., academic, functional, or transition). Note that some specialized instruction goals may impact more than one area (e.g., a transition goal can also be functional), and some specialized instruction goals for a core content area may only be based on functional needs of the student versus academic needs.

**Provider:** The special education teacher or RSP is the primary provider responsible for implementing the goal and providing the minutes of service reflected in Justification of Placement in the Least Restrictive Environment (LRE Grid - Section 12). The "Other Provider" can be any other staff member (e.g., general education teacher or paraprofessional) who will be assisting in implementing the goal. For all goals implemented in the general education classroom, the general education teacher must be selected as an "Other Provider." If paraprofessional support is identified in the subject area for which a goal is being developed (found under the Accommodations and Modifications: Special Factors – Paraprofessional Support section of the IEP), then the paraprofessional is identified as an "Other Provider."

**Frequency of Service Delivery:** A student's service minutes must be provided in accordance with their IEP, including *frequency of delivery*. Frequency must be determined AFTER the goal and benchmarks are completed and reviewed as part of the IEP team's discussion of IEP services and placement. **The Placement/LRE Grid (Section 12) calculates minutes per week; however, the specialized instruction frequency (e.g., weekly or monthly) is based on the student's need and controls the actual frequency of service delivery.** Service minute frequency must be indicated via the drop-down box in SSM under each area of Specialized Instruction.

Monthly services should be considered when schools utilize block scheduling or chunking of services, and/or when the duration of specialized instruction requires a variation based on content or student

needs. Chunking of service minutes is the practice of making up any missed minutes from a separate week. Chunking is *only* permitted in cases where a student’s IEP indicates that services can be provided monthly.

**Areas of Need:** Goals are based on the identified *Areas of Need* (see [Areas of Need \(IEP Section 9\)](#) section).

## Present Level of Academic Achievement and Functional Performance (PLAAFP)

The information in the PLAAFP cannot be a “cut and paste” of the information from General Considerations. The focus must be on the student’s skill deficit(s) in **the particular area of need being addressed by the goal**. For example, for a reading comprehension goal, the information does not discuss math issues but rather focuses on the specific reading comprehension deficits addressed by the goal. The content of the PLAAFP is specific and tailored to the specific goal/deficit area. As such, the student’s current ability level must be clearly outlined in narrative format with the corresponding data available. When combined, these two elements provide the specific present level of performance and provide justification for why the goal/benchmarks are being targeted at the exact level indicated. The PLAAFP also explains how the student’s disability affects their involvement and progress in the general education curriculum. For preschool students, as appropriate, the PLAAFP explains how the disability affects the student’s participation in appropriate activities.

**Academic Achievement:** Focus on the student’s strengths and needs that specifically relate to the subject area. Include what the student can and cannot do in that specific subject area and delineate how the student is performing at the time the IEP is being developed. The student’s most recent grade in the subject being addressed may be included but should never be the sole basis for a “present level” statement.

**Functional Performance:** Discuss how the student functions by describing motor, communication, social/emotional, adaptive/independent functioning skills, and, where applicable, vocational skills that relate to the subject area; this may include how the student performs with assistive technologies or augmentative and alternative communication systems.

**Standardized Test Results:** Identify any standardized test scores that relate to the subject area of each individual goal. Include evaluation results from the most recent FIE as well, indicating the date of the assessment(s). Detail student performance, including strengths and areas of need, identified by each assessment.

**Other Considerations:** Describe the effect of the student’s disability on involvement and progress in the general education curriculum. Consider the student’s learning preferences and cultural and/or environmental factors. Recommend strategies to improve access to the general education curriculum. For preschoolers, include how the disability affects the student’s participation in early-childhood-appropriate activities and outcomes. For students age 14½ and older, describe the effect of the student’s disability on the pursuit of postsecondary expectations (e.g., living, learning, and working).

**NOTE:** Describe specific effects or characteristics of their individual disability that may impede participation in the general education curriculum, rather than the student’s disability category.

## Measurable Annual Goal and Benchmarks

The goal is a statement of the level of performance the student is expected to achieve at the end of the IEP year, must align to the Common Core/Illinois Learning Standards, and must be measurable (for example, it

may contain evaluation criteria such as “in four out of five trials over three consecutive attempts”). The goal must directly link to the newly-written PLAAFP and include instructional supports (for example: Given guided practice, K-W-L, QAR, anchor charts, and scaffolding, the student will demonstrate comprehension of grade-level literary and informational text by achieving 80% accuracy on curriculum-based assessments). It is the final benchmark, so it reflects where the student should be within one year’s time or, if shorter than one year, by the end date identified for the goal.

The benchmarks are the stepping stones to goal attainment, and as such must be directly aligned to the present level statement and the goal; measurable and progress monitored at least quarterly; and include instructional strategies, such as assistive technology or augmentative and alternative communication solutions. Expectations must be set high for students with disabilities and reflected in the evaluation criteria delineated in the benchmarks. The evaluation guidelines identified to measure progress are implemented by the special education teacher/RSP and shared at the next annual IEP meeting (e.g., charting, observation, oral/written test, etc.). The special education teacher/RSP adheres to a schedule determining progress (e.g., daily, weekly, monthly, quarterly, or annually). When considering evaluation criteria and procedures for IEP goals and benchmarks, align the frequency of progress monitoring to the Tiered Level of Support the student is receiving.

A student’s progress on benchmarks, as measured by the evaluation procedure identified, must be reported quarterly in the IEP Report Card. It must be included with the student’s standard CPS Report Card and given to parents/guardians in the same manner as the standard Report Card. In addition, if a student’s IEP team determines that more frequent progress reporting is needed, the teacher will provide parents/guardians with the required information.

## PLACEMENT IN THE LEAST RESTRICTIVE ENVIRONMENT (LRE) (IEP Section 12)

IDEA and state law require that every eligible student who has a disability and is 3 through 21 years old (until the day before the 22<sup>nd</sup> birthday), unless their birthday occurs during the regular school year, in which case they are eligible for services through the end of the regular school year, must receive FAPE in the Least Restrictive Environment (LRE) that is appropriate for the student.

Placement/LRE<sup>77</sup> is not the school/program location or the services themselves. Rather, LRE indicates an area on the district’s required continuum of placement options by which the student’s IEP can be implemented. The placement/LRE decision is made only after all of the goals, modifications and accommodations, and BIP and/or transition plan (when applicable) have been developed in the IEP and discussed in an IEP meeting. The placement/LRE decision is based on the student’s unique needs **and not on the student’s disability/disabilities**.

### Least Restrictive Environment (LRE) Defined

The LRE mandate requires that, to the maximum extent appropriate, students with disabilities, including students in public or private institutions or other care facilities, are educated with students without disabilities. Special classes, separate schools, or other removal of students with disabilities from the general education classroom occurs only when the nature or severity of the student’s disability is such that

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<sup>77</sup> <https://www.cps.edu/services-and-supports/special-education/process/least-restrictive-environment/>

education in the general education classroom with the use of supplementary aids and services cannot be achieved satisfactorily.

## The Placement Continuum<sup>78</sup>

# The LRE Continuum



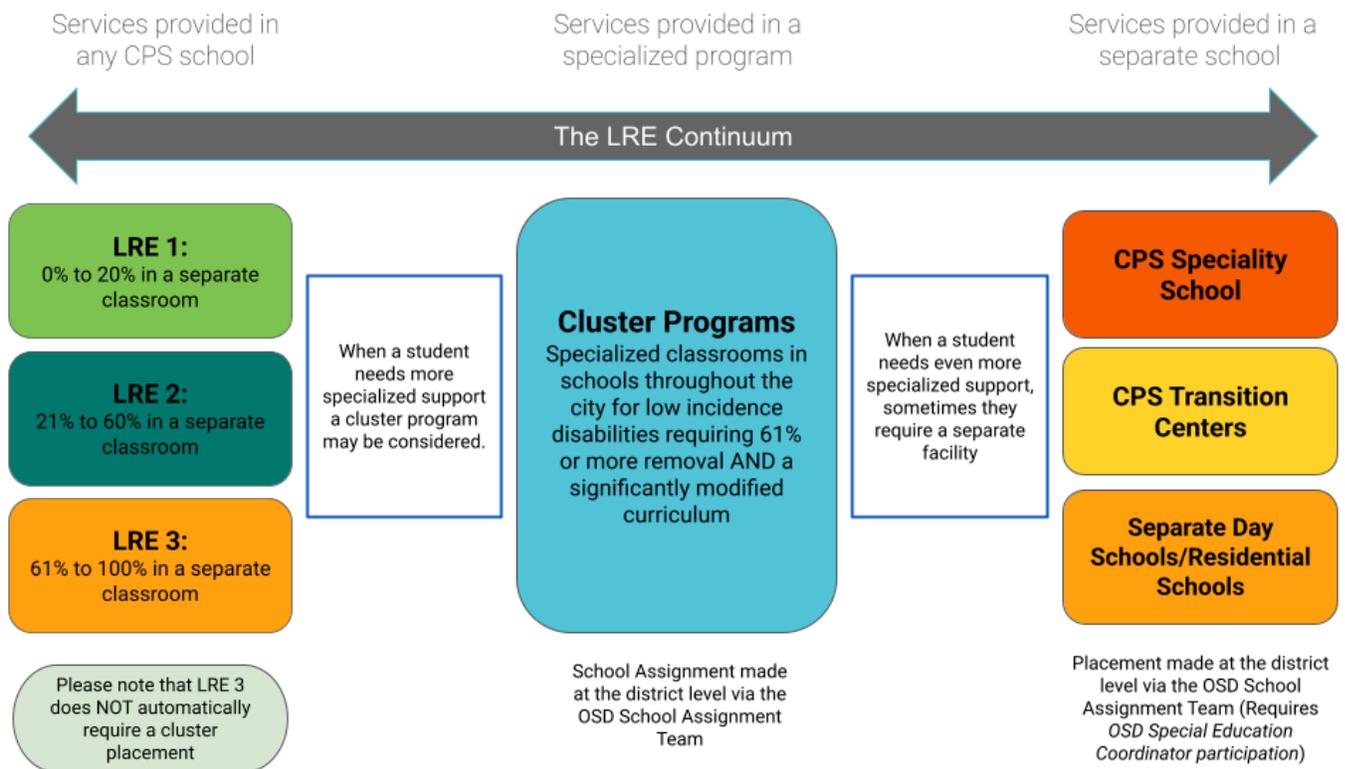
The LRE may be very different for each student, but the determining factor is always the student's individual needs. Depending on a student's needs, the LRE could be:

- Full-time in the general education classroom with supplementary aids and services, including special education teacher support through consultation or co-teaching;
- Removal from the general education classroom for up to 20% of the student's day (student spends the remainder of their day in the general education classroom with supplementary aids and services, as appropriate);
- Removal from the general education classroom for 21 to 60% of the student's day (student spends the remainder of their day in the general education classroom with supplementary aids and services, as appropriate);

<sup>78</sup> Home Hospital Placement as an LRE is different from HHIP/Homebound.

- Removal from the general education classroom for 61 to 100% of the day (student has integrated activities whenever appropriate, including homeroom, specials/electives, lunch, recess, etc.);  
**NOTE:** This may include 100% removal at a CPS specialty school and/or CPS transition learning center.
- Placement in a separate day school (i.e., state-approved non-public day school). Integrated activities, including community-based programs, are provided when appropriate;
- Placement in a residential facility; or
- Full-time placement in a home/hospital program.

The chart below illustrates CPS' LRE continuum of services.<sup>79</sup>



## Making the Placement/LRE Decision

Each year when the IEP is developed, the placement/LRE discussion for every student with a disability, including preschool students, begins with the general education classroom as the first placement option, including a discussion of special education, related services, and necessary supplementary aids and services being provided in the general education classroom. The IEP team identifies the student's strengths and builds upon those strengths while determining if the student can benefit educationally from receiving their special education services and supports in the general education classroom. Non-academic considerations, such as the social-emotional benefits of interacting with non-disabled peers, communication development, and self-care skills, are also important when discussing general education classroom placement. The deficit areas that have been identified in the IEP must be carefully reviewed annually to determine if services can be delivered in the general education classroom through consultation, co-teaching, or other supplementary aids.

<sup>79</sup> This chart does not include all programming options (e.g., preschool, accessible building, etc.).

**NOTE:** Placement predetermination is strictly prohibited. Predetermination is any placement decision made prior to or outside an IEP meeting.

When determining the LRE for a student with disabilities and before the IEP team recommends educational services outside of the general education classroom, the team needs to address several questions to ensure the student will be educated with non-disabled peers to the maximum extent appropriate.

- Would the student benefit from receiving special education and related services in a general education classroom for all or some of the school day?
- Can supplementary aids and services support the student's needs in the general education class?
- Can the student achieve their IEP goals within the general education classroom with the use of special education, related services, and/or supplementary aids and services?
- Does the IEP provide for a full range of supplementary aids and services that would facilitate the student's progress in the general education class?
- What are the non-academic benefits for the student from interacting with non-disabled peers?
- Is the student so disruptive in the general education classroom that the student's education or that of other students is impeded, even with appropriate supports in place?
- Does the student require the curriculum to be modified so significantly that it bears little or no relation to the general education curriculum and instruction in the classroom?

**Begin the decision-making process by examining the general classroom placement as the first option. Have a serious and thoughtful discussion about the following three factors:**

**1. Consider if the student can be educated satisfactorily in the general education classroom with one or more of the following (not an exhaustive list):**

- Supplementary aids and supports, as well as program and/or curriculum modifications;
- Special education teacher co-teaching the class;
- Special education teacher and/or RSP working with the student(s) individually or in small groups within the classroom;
- Training or other supports for the general education teacher;
- The use of AT; and/or
- The implementation of a BIP designed to identify and meet the behavioral challenges presented by the student in the general education classroom.

**2. Compare the academic and non-academic benefits to the student provided in the general education classroom and those provided in a special education classroom or separate setting, including consideration of the following (not an exhaustive list):**

- Social, communication, and self-help skills, as well as academic benefits; and
- Whether the general education classroom placement is contingent on the student's ability to learn the same things in the same way as peers.

**3. Consider the potentially beneficial or harmful effects that a general education class placement may have on the student with a disability or the other students in the class, including the following. (This list is not exhaustive):**

- Positive benefits such as social interaction with non-disabled peers, peer modeling, high expectations, and acceptance of others; and

- Harmful effects such as unduly disruptive behavior that impairs the student's learning or that of others, even with the implementation of a BIP and other supports.

**Keep in mind that the placement decision cannot be solely based on:**

- Category of disability;
- Severity of disability;
- Behavior;
- Language and communication needs;
- Needed modifications to curriculum;
- Configuration of the district's service delivery system; or
- Availability of space or educational and related services.

No one factor outweighs the others. The IEP team looks at a student's individual needs and determines the most appropriate and least restrictive setting in which they would benefit educationally. Remember—even if the team determines that a student with disabilities be placed in a separate class for a particular curricular area(s), they still must be integrated with non-disabled peers to the **maximum extent appropriate** and have access to the age/grade-appropriate general education curriculum and materials, even in the separate setting.

If the IEP team determines that a student with disabilities must be removed from the general education classroom because they will not benefit educationally—even with the provision of special education, related services, and supplementary aids and services—the IEP team must document the basis for this decision. **A decision to remove a student with disabilities from the general education setting must always be based on individual needs and not on the nature of the student's disability.** Additionally, separate classes, separate schooling, or other removal of students with disabilities from the general education classroom must only occur if the nature or severity of the disability is such that education in general education classes with the use of supplementary aids and services cannot be achieved satisfactorily.

If the student will be removed from the general education classroom for any part of the day, the IEP team will continue its discussion of the continuum of options to determine an appropriate placement. The IEP must support both the identified LRE placement and the basis for rejecting each of the less restrictive settings. A student with disabilities does not have to fail in a less restrictive setting before the team reconvenes and discusses moving the student to a more restrictive setting.

IEP decisions regarding LRE are based on student need, not school programming. All Chicago Public Schools must implement IEPs across the LRE continuum for LRE 1, 2, and 3 settings, but they may not be able to implement IEPs that require OSD school assignment<sup>80</sup> for settings such as cluster programs, specialty schools, separate day schools, residential placements, or home/hospital placements.

In determining whether an OSD school assignment is warranted, including for preschoolers, the IEP team begins the discussion with consideration of whether the student's current or neighborhood school is able to support the student's needs. If the student's needs require an LRE/program that cannot appropriately

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<sup>80</sup> For information about available programs in the district, including OSD cluster programs, please visit [OSD Services and Programs](#) and [OSD Policies and Procedures](#).

be implemented at that particular school, the team then must discuss and document the team's rationale and decision with supporting data in the IEP. The discussion needs to be thorough and captured in the IEP Notes and summarized in the General Considerations - Relevant Transition Information (Section 7). **Data must also be included in, or uploaded to, the IEP.** The local district representative must then promptly submit a *School Assignment Request* to OSD to provide the appropriate school closest to the student's residence that can implement the IEP (see [OSD School Assignment](#) section).

If placement of 100% removal from general education (i.e., CPS specialty school, CPS transition learning center, separate day school, residential placement, or home/hospital placement as an LRE) will be, or will likely be, discussed at the IEP meeting, the OSD SEC **MUST** be invited to the meeting and participate as the district representative. If the OSD SEC is not present, or if the topic arises unexpectedly, the IEP cannot be finalized with 100% removal, and the meeting **must be reconvened within 10 school days** to further consider the educational setting.

***NOTE:** While the OSD SEC may not unilaterally reject or "veto" an IEP team's decision, they must ensure robust data have been collected to support a decision for 100% removal of a student from a general education setting. The district is ultimately responsible for ensuring FAPE is provided. The OSD SEC is also the appropriate representative to commit the district and its resources to 100% removal from the general education setting.*

## Related Services Delivery and LRE

When a student with disabilities needs related services, the IEP team determines if the related service will be provided in the general education classroom, in a separate location but with non-disabled peers, in a separate class without non-disabled peers, or in a combination of these locations. The first option considered must be a general education environment. Services provided in a general education setting meet the needs of students by providing access for all learners to the general education curriculum, promoting their relationships with general education peers, and eliminating additional transitions during the school day whenever practicable. The location of the services is based on the student's individual needs and the most appropriate environment for skill acquisition. The location for related services may change over time in response to student performance and the educational program. If the team determines that the general education classroom or an integrated setting with non-disabled peers is not the appropriate location for delivery of the related services, the basis for this decision must be included in the IEP.

## Non-Academic and Extracurricular Activities and LRE

In providing or arranging for the provision of non-academic and extracurricular activities, the IEP team must ensure that each student with a disability participates in these activities with non-disabled students to the maximum extent appropriate. The socialization opportunities available to students with disabilities when participating in these activities are very important. The IEP reflects the special education, related services, or supplementary aids and services (e.g., paraprofessional, nursing, accommodations, etc) that are necessary to enable the student to participate in the non-academic and extracurricular services offered at the school.

## Extended School Year (ESY) and LRE

LRE must also be discussed by the IEP team in the context of an ESY program for a student who is eligible for ESY services (see [Extended School Year \(ESY\)](#) section); however, IDEA does not require that a school establish summer programs for non-disabled students for the sole purpose of providing integrated activities for students with disabilities in ESY programs. As such, a student's placement for ESY services

may differ from the placement during the regular school year. The LRE decision for ESY is made on a case-by-case basis.

## OSD School Assignment

When a student's current or neighborhood school cannot implement the student's IEP based on the IEP placement/program recommendation(s), a request for a school assignment<sup>81</sup> is completed by a school-based member of the IEP team. A school assignment is when OSD assigns a student to a school location because the IEP team determines that the student requires either an accessible school building, specially designed instruction (e.g., Deaf and Hard of Hearing Program or Orientation and Mobility Program), and/or a program with a significantly modified curriculum and/or intensive support due to the student's unique needs and abilities.

When determining a school assignment, OSD considers the following factors: (1) the school's ability to implement the student's IEP; (2) the school that is closest to the student's residence; and (3) an available seat in a school that can provide the supports and services documented in the student's IEP. Once a school has been assigned, the parent/guardian will receive a letter from OSD with next steps to enroll. If the school assignment letter is issued more than 10 school days after the IEP is finalized, then staff must issue a *Notice of Non-Implementation* (see [Notification of Non-Implementation of IEP Services \(NONI\)](#) section).

## CPS Programs<sup>82</sup>

The following programs require an OSD school assignment:

- Preschool Inclusive
- Early Childhood Cluster
- Low Incidence Cluster<sup>83</sup>
  - Moderate
  - Intensive<sup>84</sup>
  - Specialty School (i.e., 100% removal)
  - Transition Learning Centers (i.e., 100% removal)
- Deaf and Hard of Hearing
- Program for Students with Visual Impairments
- Accessible Building

## CPS Specialty School or Transition Learning Center

If placement in a CPS specialty school and/or transition learning center will be, or will likely be, discussed at the IEP meeting, the OSD SEC **MUST** be invited to the meeting and participate as the district representative. If the OSD SEC is not present, or if the topic arises unexpectedly, the IEP cannot be

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<sup>81</sup> <https://www.cps.edu/services-and-supports/special-education/process/school-assignment/>

<sup>82</sup> <https://www.cps.edu/services-and-supports/special-education/services-and-programs/>

<sup>83</sup> The K–12 low incidence cluster programs are designed for students requiring a significantly modified curriculum with moderate to intensive support in a separate setting for the majority of the day (over 61%), in alignment with [DLM-AA Participation Guidelines](#). For information about available programs in the district, including OSD cluster programs, please visit [OSD Services and Programs](#) and [OSD Policies and Procedures](#).

<sup>84</sup> Students requiring intensive support have the most significant intellectual disabilities (typically associated with an IQ below 40) and additional adaptive and independent functioning needs. Additionally, these students generally need medical care throughout the day as a result of a chronic debilitating condition(s) and meet at least one of the following criteria: 1) technologically dependent for life or health-sustaining functions; 2) requires complex medication regimens or medical interventions to maintain or to improve their health status; or 3) requires ongoing assessment or intervention to prevent serious decline of health status or medical complications that put life, health, or development at risk.

finalized with 100% removal, and the meeting **must be reconvened within 10 school days** to further consider the educational setting.

**NOTE:** While the OSD SEC may not unilaterally reject or "veto" an IEP team's decision, they must ensure robust data have been collected to support a decision for 100% removal of a student from a general education setting. The district is ultimately responsible for ensuring FAPE is provided. The OSD SEC is also the appropriate representative to commit the district and its resources to 100% removal from the general education setting.

Placement in a specialty school is appropriate only if the IEP team determines, based on data and other relevant information, that the nature or severity of a student's academic or functional (e.g., social-emotional, behavioral, or transitional) needs due to their disability are such that education within an OSD cluster program and integration with general education peers—with the use of special education, related services, and supplementary aids and services—cannot be satisfactorily achieved. If the student's needs require 100% removal at a CPS speciality school, the team then must discuss and document the team's rationale and decision with supporting data in the IEP. The discussion needs to be thorough and captured in the IEP Notes and summarized in the General Considerations - Relevant Transition Information (Section 7). Data must also be included in, or uploaded to, the IEP. The local district representative must then promptly submit a *School Assignment Request* to OSD to provide the appropriate school closest to the student's residence that can implement the IEP (see [OSD School Assignment](#) section).

As with all IEP decisions, placement (including, but not limited to, CPS specialty schools) may not be determined prior to an IEP meeting or without parent/guardian input. The duration of a student's placement in a specialty school will depend upon the student's individual needs as determined by the IEP team.

### Separate Day School or Residential Placement

If placement in a separate day school (sometimes referred to as therapeutic day school) or residential setting will be, or will likely be, discussed at the IEP meeting, the OSD SEC **MUST** be invited to the meeting and participate as the district representative. If the OSD SEC is not present, or if the topic arises unexpectedly, the IEP cannot be finalized with a separate day school or residential setting, and the meeting **must be reconvened within 10 school days** to further consider the educational setting.

**NOTE:** While the OSD SEC may not unilaterally reject or "veto" an IEP team's decision, they must ensure robust data have been collected to support a decision for 100% removal of a student from a general education setting. The district is ultimately responsible for ensuring FAPE is provided. The OSD SEC is also the appropriate representative to commit the district and its resources to separate day school and residential settings.

Placement in a non-public separate day or residential school is appropriate only if the IEP team determines, based on data and other relevant information, that the nature or severity of a student's academic or functional (e.g., social-emotional, behavioral, or transitional) needs due to their disability (i.e., regardless of current disability classification) are such that education within the CPS system—with the use of special education, related services, and supplementary aids and services—cannot be satisfactorily achieved. As

with all IEP decisions, placement (including, but not limited to, separate day school or residential placement) may not be determined prior to an IEP meeting or without parent/guardian input.<sup>85</sup>

The separate day or residential school must provide all special education and related services and all educational accommodations and supports in accordance with the IEP and at no cost to the parents/guardians. CPS retains responsibility for the continued development, review, and revision of the student's IEP. The duration of a student's placement in a separate day or residential school will depend upon the student's individual needs as determined by the IEP team.

A student placed by CPS in a separate day or residential school retains all of their substantive and procedural rights under IDEA.

**If an IEP team is considering whether a student with disabilities requires a separate day school or residential placement due to behavioral needs, ALL of the following guidelines must be discussed and documented:**

#### **Guideline 1: Highly Intensive Behavior**

The student's behavior is considered to be **highly intensive** compared to peers and includes, but is not limited to:

- Physical aggression that causes serious bodily injury, including but not limited to:
  - Hitting/kicking,
  - Biting, or
  - Fighting.
- Self-injurious behavior;
- Property destruction that causes or may cause injury to self/others (e.g., throwing furniture, materials); and/or
- Sexual behaviors (e.g., harassment, aggression).

#### **Guideline 2: Frequent Behavior**

The student's behavior occurs at a frequency and/or duration that **significantly differs** from that of the student's peers.

#### **Guideline 3: Tiered Supports and Interventions Implemented Without Success**

As documented by the student's teacher pursuant to the MTSS/Response to Intervention framework or IEP progress monitoring, the school team needs to have done the following with fidelity and consistency without improved student behavior:

- Requested parent/guardian consent to conduct/update an FBA and followed the procedure outlined above.
- Convened an IEP meeting to develop or update the BIP.
- Implemented function-based interventions and progress monitoring, including data collection (e.g., behavior interventions for a minimum of five weeks, where practicable).

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<sup>85</sup> Prior to the placement of a child in an out-of-state special education residential facility, the district must refer to the child or the child's parent or guardian the option to place the child in a special education residential facility located within this state, if any, that provides treatment and services comparable to those provided by the out-of-state special education facility.

With regards to behavior, the IEP team must also consider information, if any, regarding student hospitalization, SASS assessments, recommendations from private service providers who work with the student, and parent/guardian input.

If an IEP team is considering whether a student with disabilities requires a separate day school or residential placement due to needs other than behavioral needs, **ALL** of the following guidelines must be discussed and documented:

#### Guideline 1: Highly Intensive Academic or Functional Needs

The student's academic or functional needs (including, but not limited to, emotional, adaptive, or transition-related) are considered to be **highly intensive**. This may include, but is not limited to, a need for:

- Unique specialized instruction due to significant academic delays and failure to make progress;
- An educational setting with therapeutic milieu and/or access to specially-trained staff throughout the school day;
- One-on-one or small group (less than three students) specialized instruction or services provided continuously throughout the school day; or
- Unique vocational programming that is not otherwise available in a district program.

With regard to functional needs, such as emotional or adaptive, the IEP team must also consider information, if any, regarding student hospitalization, SASS assessments, recommendations from private service providers who work with the student, and parent/guardian input.

**Guideline 2: District Programming, Including Supplementary Aids and Services, Cannot Satisfactorily Address the Adverse Effects of the Student's Disabilities and Is Insufficient to Meet the Student's Identified Needs**

### Home and Hospital Instruction Program (HHIP)<sup>86</sup>

The continuum of placement options includes instruction in the home or hospital setting when a student is unable to attend a school elsewhere due to a documented medical or psychiatric condition. When documentation from a physician is provided, the IEP team decides if a student is eligible for HHIP and services. A certified school nurse must be a member of the IEP team that makes this placement decision as they are qualified to interpret medical data provided to the team. It is also recommended that the Home/Hospital Manager be invited to the meeting, and the Manager will join if available.

In addition to HHIP as an LRE, when a student has a medical or psychiatric condition that will cause an absence of two or more weeks of school or on an ongoing intermittent basis, the student's IEP team must consider the need for home or hospital instruction and related services. In such cases, home or hospital instruction and related services must be based on a written statement from a physician licensed to practice medicine in all of its branches, licensed physician assistant, or licensed advanced practice nurse that specifies: (1) the student's medical or psychiatric condition; (2) the impact of the condition and treatment or therapy on the student's ability to participate in education (the student's physical and mental tolerance for receiving educational services); and (3) the anticipated duration or nature of the student's absence from school. Home or hospital services required by the IEP must be implemented no later than five school days after CPS receives the physician's written statement.

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<sup>86</sup> See [OSD Homebound Standard Procedure](#). CPS staff visit [CPS INTRANET Homebound Services](#).

**NOTE:** “Ongoing intermittent basis” means that the student’s medical or psychiatric condition is of such a nature or severity that it is anticipated that the student will be absent for periods of at least two days at a time multiple times during the school year totaling at least ten days or more of absences. However, there is no requirement that a student be absent from school a minimum number of days before the student qualifies for home or hospital instruction.

The main goal of HHIP services is to provide the student access to instruction while the student is away from school managing an illness. This program strives to keep the student on track with classroom instruction and facilitate the seamless return to the classroom setting. The amount of instructional and related service time will not be less than five hours per week, unless a physician states otherwise in writing, and will only occur on regularly scheduled CPS school days. These services may be provided in person or virtually by a teacher with a valid PEL and the appropriate endorsements. Homebound support generally occurs after regular school hours, and this must always be determined by a student’s IEP team based on their individual special educational needs and medical advice from the licensed physician, licensed physician’s assistant, or licensed advanced practice nurse, as well as consultation with the family. **The IEP team must also determine the amount and frequency of any related services a student requires to access their education in the home/hospital setting, if eligible.**

If a student misses a homebound session due to student illness or teacher absence, the session must be made up. For any make-up homebound session, the school team requests that the parent provide documentation from the student’s physician, which then advises the school team on the number of hours that can be made up that week (in consideration of and in conjunction with the student’s regularly scheduled sessions for that week). This documentation needs to be shared with the school homebound coordinator or nurse.

## Review of Placement/LRE

The IEP must be reviewed and revised as appropriate, but at a minimum of once a year. At each IEP meeting, the student’s LRE is discussed, beginning with placement in the general education classroom. The IEP team may recommend placement in a more restrictive setting only if the student’s needs can no longer be met in a less restrictive placement, based on data provided in the IEP. The IEP team must document and describe the educational justification of the new placement recommendation.

## Potential Harmful Effects

In selecting the LRE placement, the IEP team must consider the potential harmful effects, if any, on the individual student or the efficiency of services that the student needs in the identified placement. Whether or not any harmful effects exist is documented in the IEP (*Justification of Placement in the Least Restrictive Environment*). Some potential harmful effects to consider include, but are not limited to:

- Decreased access to the instructional opportunities available in integrated settings;
- Lack of opportunity for social interaction with non-disabled peers;
- Decreased self-esteem;
- Lack of opportunities to engage with appropriate social, behavioral, or communication role models;
- Stigmatization; and/or
- Travel time to and from the school location.

**NOTE:** IEP teams must carefully consider potentially harmful effects. **Rarely should 'None' be selected.** If the team is considering that there are no potential harmful effects, consultation with the OSD SEC is recommended.

## PARAPROFESSIONAL SUPPORT

In addition to the classroom teacher or RSPs, paraprofessionals may be needed to support a student with personal care, medical, academic, behavioral, social, communication, transition, and other needs at school, school-sponsored activities, or events. Any member of the IEP team, including the parents/guardians, may request that paraprofessional support be discussed at the IEP meeting and for qualitative and quantitative<sup>87</sup> data to be gathered to support this discussion. If data have not been collected or are incomplete, the meeting must be reconvened **within 15 school days** to discuss the student's needs and the data that have been collected since the last IEP meeting.

### Determining Need for Paraprofessional Support

When the IEP team determines that paraprofessional support is required and appropriate via data collection, the team must also decide whether it is appropriate to include a relevant, measurable goal in the student's IEP. The goal will be designed for the student to achieve greater independence within the targeted area(s) of need and decrease reliance on paraprofessional support.

If a student with disabilities is in an OSD assigned program, the IEP team determines whether the student's needs can be met in the separate cluster classroom with a teacher and the programmatic paraprofessional(s) already assigned to the classroom. If so, indicate this on the IEP and describe the specific support(s) the student will need from the programmatic paraprofessional. If the student needs no other adult assistance, none of the below guidelines apply. If the student also requires personal care (including medical) assistance, the IEP team follows [Guideline 1](#) below. If the student needs academic or behavioral support beyond the teacher and the programmatic paraprofessional(s) assigned to the classroom, the IEP team follows [Guideline 2](#) and [Guideline 3](#) below.

If the qualitative and quantitative data, other relevant information collected, and IEP team discussion support a need for paraprofessional support, the team must then specify on the IEP (i) when, where, and for what tasks or activities paraprofessional support is needed; (ii) if the paraprofessional will be shared or dedicated per task/activity; and (iii) any training or other supports that the paraprofessional is to be provided. The IEP team must also develop a *Student Independence Paraprofessional Plan* in which the team **identifies strategies to promote independence and fade the student's need for paraprofessional support across all relevant settings** (see [Student Independence Plan](#) section).

**NOTE:** Any training needs must be documented under *Accommodations and Modifications: General* (Section 10(b)) under "staff training" in the appropriate area of need(s).

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<sup>87</sup> Qualitative and quantitative data needed to determine whether a student requires paraprofessional support will vary, depending on the need(s) for which the IEP team is contemplating paraprofessional support. For support with personal care, the team may consider reports from OTs, PTs, doctors, etc., or staff or parent/guardian input as to why the student needs assistance. For support related to behavior, the data describe the target behavior(s) (e.g., elopement) along with frequency and/or duration of the target behavior(s). For support related to academics, the data describe how the area of concern is currently being addressed, the frequency and duration of needed support(s) (e.g., student requests directions be repeated every five minutes), and why the needed support(s) exceeds what a teacher alone can provide in a classroom setting. Data must include, for both behavior and academic, current and past intervention(s) and their effectiveness or lack thereof.

For all other students with disabilities, an IEP team may decide that the student needs paraprofessional support only if documentation shows that **ONE OR MORE** of the following guidelines have been discussed, supports the team's decision, and is based on qualitative and quantitative data and other relevant information.

**NOTE:** Paraprofessional support **cannot** be revised using the Waiver of IEP Revision Meeting. It requires an IEP meeting. The [Paraprofessional Justification Form IEP](#) cannot be older than 90 days and must be within the same school year.

### Guideline 1: Personal Care or Medical Condition

The student's teacher and RSP provide documentation of the student's potential or continuing need for assistance, extending beyond that expectation for similarly aged peers, in **ONE OR MORE** of the following specific area(s) of support:

#### A. Toileting/Hygiene

The student requires direct services from an adult for moving, transferring, positioning, initiating, or completing toileting/diapering/hygiene activities, such as:

- Cueing and supervising the completion of toileting;
- Diapering or toileting when, for example, the student is:
  - Not toilet trained;
  - Trained, but requires lifting onto toilet; and/or
- Not independent with tasks related to personal hygiene.

#### B. Mobility

The student requires direct services from an adult to be mobile or maintain mobility in activities, such as:

- Moving from sitting to a standing position and/or standing position to sitting;
- Walking;
- Range of motion; and/or
- Mobility and/or mobility training as needed when, for example, the student:
  - Is in a wheelchair and unable to navigate independently;
  - Uses a walker or wears orthotics but is unable to navigate independently; and/or
  - Is blind or visually impaired and unable to navigate independently.

#### C. Lifting/Positioning

The student requires direct services from an adult for lifting/positioning in activities, such as:

- Cueing the student to adjust positioning to prevent stiff muscles/sores;
- Assisting the student to adjust positioning to prevent stiff muscles/sores; and/or
- Moving the student from one position to another.

#### D. Feeding

The student requires direct services from an adult for feeding activities, such as:

- Cueing and supervision of eating; or
- Feeding when, for example, the student:
  - Is unable to feed self;
  - Requires prompting to feed self; and/or
  - Requires assistance with food preparation.

### E. Monitoring and Documenting Medical Conditions

The student requires direct services from an adult for monitoring or documenting medical or health conditions, such as:

- Asthma;
- Diabetes;
- Seizure disorder; or
- Other medical conditions.

### F. Dressing

The student requires direct services from an adult for dressing activities, such as:

- Dressing when, for example, the student is unable to:
  - Put on or take off own clothing, coat, shoes, or boots, etc.;
  - Put on or take off orthotics; and/or
  - Button or secure buttons, snaps, or zippers.

### G. Other Daily Living Skills

The student requires direct services from an adult for other activities of daily living not listed above.

## Guideline 2: Academic Support

Prior to considering a student's need for paraprofessional support based on academic needs, the student's teacher and/or RSP collects qualitative and quantitative data for:

- Each subject area (e.g., English Language Arts, Math, Science, etc.) in which a paraprofessional may be required **and** in each setting (i.e., general education class, separate class, and community, where applicable) for each subject area; and/or
- Exploratory classes, regardless of setting.

The student's teacher or RSP, including bilingual- or ESL-endorsed personnel for an EL, provides qualitative and quantitative data of the student's potential or continuing need for assistance in **ONE OR MORE** of the following specific area(s) of support:

### A. Reinforce Instruction That Teacher Has Already Provided

The student requires direct support during instruction, such as:

- Frequent additional explanations concerning assigned work;
- Hand-over-hand assistance, organizational assistance, or other assistance during school activities; and/or
- Practice and repetition of skills.

### B. Review of Directions

The student requires direct assistance in understanding or following directions, such as:

- Repeating directions using their own words;
- Breaking directions down into manageable pieces; and/or
- Providing directions in more than one format (such as verbal, visual, written, or gestures).

### C. Completion of Tasks

The student requires direct support to complete tasks, such as:

- Identifying assignments or tasks to be completed with due date/time due identified;
- Breaking down each task/assignment into smaller tasks;
- Developing a rubric or simple checklist; and/or
- Setting up and/or using AT.

#### D. Remaining Engaged/On Task

The student requires direct delivery of prompts, which increases the likelihood that the student will emit a correct response and reduces the possibility of errors being made, in forms such as:

- **Proximity prompting**, which involves positioning self or item in a particular location near the student to encourage desired behavior;
- **Gestural prompting**, which involves using a direct or indirect physical gesture to encourage desired behavior, such as pointing, nodding, or motioning;
- **Verbal prompting**, which is a direct or indirect cue or instruction that is given orally before or during the student's action or response. This can include full verbal prompts and partial verbal prompts (e.g., verbally models only part of the desired behavior);
- **Visual prompting**, which is the use of direct or indirect visuals such as pictures, symbols, and text that can assist a student to respond correctly; and/or
- **Physical prompting**, which may include full physical assistance (e.g., hand over hand when teaching the child to pick up a cup, the teacher takes the child's hand and guides them to pick it up) or partial physical assistance (e.g., when teaching the child to pick up the cup, the teacher guides the child's hand to the cup by tapping their elbow).

#### E. Communication

The student requires direct communication support, such as:

- Visual support, which involves the provision of picture supports for students to answer questions, provide information, and engage in social interactions;
- Total communication support for students to use various modes of communication, (e.g., sign language, oral, auditory, written and visual aids, etc.); and/or
- Augmentative and alternative communication device support, which is the support of students as they use a device or communication system. This would be done in conjunction with supervising personnel such as an occupational therapist (OT), speech-language pathologist (SLP), and/or teacher.

### Guideline 3: Behavior, Including Safety and Social Supports

If paraprofessional support may be required for **both** academic and behavioral reasons, the qualitative and quantitative data described in [Guideline 2](#) also includes behavioral data.

If paraprofessional support is only being considered for behavioral reasons, and not academic reasons, the student's teacher and/or RSP collects qualitative and quantitative data documenting the student's potential or continuing need for assistance in **ONE OR MORE** of the following specific area(s) of support:

#### A. Physical Aggression

The student, as outlined in the student's BIP:

- Is a safety threat to self;
- Is a safety threat to others; and/or
- Is a threat to school property or personal property in the school.

#### B. Safety/Supervision

The student, as outlined in the student's BIP, requires direct supervision to address the student's potential harm to self or others during activities such as:

- Offsite travel, in unstructured settings, etc.;
- Transition within the classroom;
- Transition across school environments; and/or
- If the student:

- o Leaves assigned area without permission;
- o Leaves school building without permission (elopement); and/or
- o Attempts to ingest inedible objects.

### C. Social Support to Model and/or Facilitate Appropriate Social Interactions

The student requires direct support to engage in social interactions appropriately, such as:

- Reinforcing behavioral, interpersonal, and social communication skills;
- Modeling skills necessary to appropriately join, leave, comment, and participate appropriately in a social conversation and encouraging imitation of that behavior; or
- Reinforcing use of new skills (e.g., self-awareness, conflict resolution, social interactions, etc.)

The IEP team identifies the area and nature of supports needed based on the qualitative and quantitative data, in alignment with the above guidelines. Next, the IEP team determines if the qualitative and quantitative data support the need for shared or dedicated paraprofessional support through analysis and discussion at the meeting. A key factor in this decision is whether the support being provided is a support that can be provided to multiple students at the same time or during the same class period.

**NOTE:** Teams must consider and identify the least restrictive support for students. CPS staff utilize the [Guiding Questions to Support Justification and Determination of Paraprofessional Support](#) to identify the least restrictive support. When considering paraprofessional support for behavior, the team must STRONGLY consider an FBA/BIP.

## Student Independence Plan

The ultimate goal of paraprofessional support is to build student independence and self-sufficiency. Identify strategies to promote independence including use of prompting hierarchy, proximity to the student, and shifting support back to teacher and student to fade the student's need for paraprofessional support across all relevant settings. Incorporate quantifiable actions demonstrating student progress toward independence.

# CURRICULUM, GRADES, PROMOTION & GRADUATION (IEP Section 13)

## Curriculum<sup>88</sup>

All school curriculums align to the same educational standards based on Common Core Standards, Next Generation Science Standards (NGSS), and Illinois Learning Standards, while every CPS school is responsible for adopting and/or supplementing its own curriculum.<sup>89</sup> In most instances, students follow the standard curriculum.

## Significantly Modified Curriculum

A significantly modified curriculum changes what is being taught (not how the material is taught), which requires the standard curriculum to be significantly altered to meet the individual student's needs. Modifications to the curriculum may involve combinations of altered content knowledge, conceptual

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<sup>88</sup> [CPS Education Standards.](#)

<sup>89</sup> [Illinois Learning Standards.](#)

difficulty, educational goals, and instructional method. The IEP team must specifically describe how the standard curriculum must be modified to meet the student's needs. The IEP team is encouraged to utilize the Dynamic Learning Maps Essential Elements<sup>90</sup> to support students requiring significantly modified curriculum.

## Grades

Most students with disabilities are graded based on the school's standard grading criteria. **All students with disabilities must receive a grade for all subject areas reported for all other students in their grade.** Students with disabilities receive grades on both class assignments and report cards based on the level of achievement and progress toward curriculum standards and mastery of IEP goals/benchmarks.

Some students with disabilities are graded based on modified grading criteria. If a modified grading criterion is necessary, the IEP team determines whether the standard grading scale (e.g., 92% = A; 82% = B) used by the school needs to be modified for the student and/or whether a new grading rubric needs to be developed that includes items other than numeric grades (e.g., attendance, class participation). A weighted grading system that arbitrarily assigns lower grade weights to a student with an IEP cannot be used. Depending on the general education course syllabus and grading criteria by subject, an alternate system can be adopted to grade the individual student in each course or subject based on the student's needs. For example, if all students are graded using the following weighted system: 30% classroom assignments/projects, 40% classroom assessments, and 30% homework, then the IEP team can modify the general education grading system for a student with a disability by indicating the student will not be graded on homework, substituting that 30% of the grade with class participation. A letter grade must always be linked to the modified scale/rubric.

**NOTE:** *Progress toward IEP goals/benchmarks must not be referenced as part of a modified grading criteria. Additionally, if a student requires a significantly modified curriculum, consider using standard grading.*

If a student with a disability exceeds or fails to meet general or IEP-modified grading standards, the grade reflects that achievement. There is no categorical rule that prohibits a student with disabilities from receiving a high ("A") or low ("F") grade. When a student has chronic poor achievement, school staff need to use the evaluation and IEP process to ensure that all appropriate curricular supports are identified and provided.

Students with disabilities receive a standard report card in addition to the IEP Report Card. On the IEP Report Card, the special education teacher and/or RSP describes the student's progress toward meeting the annual goals. The standard report card gives letter grades for specific academic areas. The general education teacher assigns the grade to a student with a disability placed in their class for that subject area; the special education teacher assigns the grade to a student with a disability placed in their separate class, and the student does not receive instruction in their general education class for that particular subject. The general and special education teachers collaborate to ensure that the letter grade and IEP Report Card accurately reflect the student's performance. On the IEP Report Card, RSPs are expected to describe the student's progress toward meeting any annual goal in their discipline.

**NOTE:** *The local school district representative is responsible for maintaining documentation that the IEP Report Cards were provided to parents/guardians of students with disabilities.*

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<sup>90</sup> [ISBE DLM-AA Essential Elements](#)

## Promotion

All students with disabilities are expected to meet the CPS promotion policy criteria, and each student's IEP must reflect whether the student is expected to meet the standard promotion criteria or a modified one. Based on the student's individual needs, the IEP team determines whether the student requires a modification to the promotion criteria; if so, the team identifies which criteria will be modified, along with a description and explanation of the basis for the modification.

The IEP team must have high expectations for all students with disabilities. The need for special education and related services does not automatically indicate that a student is unable to meet standard promotion criteria. Since IEPs provide supports, services, accommodations, and modifications in the classroom, on standardized testing, and/or for grading, students with disabilities are expected to meet the same promotion criteria as their non-disabled peers. **Modification to the promotion criteria is the exception, rather than the norm.**

Students with disabilities are not required to meet additional promotion criteria compared to their same grade, non-disabled peers. For example, the standard promotion policy for students in second grade is meeting a certain score on a district assessment and grades; for a second-grade student with disabilities, the modified promotion criteria needs to only address the required score on the district assessment and needed grades, but never add another criteria (e.g., adding an attendance requirement) or increase an existing criterion (e.g., increasing the NWEA promotion score).

The Board promotion policy does not include specific criteria for students, including students with disabilities, who are not in benchmark grades (K, 1, 3, 4, 6, and 7). The [Elementary School Promotion Policy](#) indicates that students can be retained at the "discretion of the school." For students with disabilities in these grades, the IEP team determines whether the school has its own promotion criteria and if it needs to be modified based on individual needs. If the school does not have its own promotion criteria for that grade, the team indicates standard criteria on the IEP. Board policy also indicates kindergarten students may not be retained.<sup>91</sup>

Chicago Public Schools requires high school students to successfully complete a minimum number of credits before they can be promoted to the next grade level and graduate.<sup>92</sup>

**If at the end of a report card quarter, or near the end of a school year, the student is not on-track for meeting the promotion criteria outlined in the IEP, the IEP team must reconvene to consider the following questions:**

- Were the appropriate promotion criteria established for the student?
- Were the services identified in the IEP appropriate to meet the student's needs to enable the student to meet the identified promotion criteria?
- Were the methods of assessing the student's performance on IEP goals/benchmarks, classroom, and district/state assessments, as identified in the IEP, appropriate?
- Was the IEP implemented?

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<sup>91</sup> See the [Elementary Promotion Policy](#).

<sup>92</sup> See the [High School Promotion Policy](#).

If all the above questions were answered “yes,” the student will not be promoted to the next grade and follows CPS summer school policies unless the IEP team has determined that the student requires ESY services.

If any answers to the above questions are “no,” the IEP team revises the IEP as necessary. The team may decide to change the promotion criteria and make any necessary revisions to goals, accommodations, modifications, and/or grading criteria to enable the student to be involved and make progress in the general education curriculum.

To comply with the Illinois School Code and the Chicago Board of Education’s enrollment procedures, all students, including students with disabilities, who turn 15 years old on or before September 1 must be enrolled in a high school program.

## Graduation<sup>93</sup>

All students with disabilities are expected to meet the CPS graduation requirements, and the student’s IEP must reflect whether the student is expected to meet the standard graduation criteria or a modified one. For a student with a disability, graduation with a regular high school diploma is a significant change in placement and terminates a student’s right to FAPE. Based on the student’s individual needs, the IEP team determines whether the student requires a modification to the graduation criteria; if so, the team identifies which criteria will be modified along with a description and explanation for the basis of the modification.

On an annual basis, the IEP team decides if the student will graduate high school in the traditional four-year time span or whether the student will require special education, transition planning or services, or related services after completing their four years of high school. The projected year of graduation is discussed in the context of every IEP team’s transition planning and is reflected on the IEP to ensure appropriate credit acquisition and transitional-related services. In deciding when a student is ready to graduate, the IEP team reviews the accumulation of required credits and other high school graduation criteria, as well as the student’s transition readiness.

**NOTE:** *Waivers and/or modifications of graduation requirements based on a student’s disability may be granted in extenuating circumstances in accordance with the Illinois School Code, ISBE Administrative rules, and Board policy. When unrelated to a student’s disability, requests to waive graduation requirements should be directed to and assessed by school-level and network-level leadership, rather than a student’s IEP team.*

Pursuant to Board policy, all students with disabilities receive a standard diploma when they complete four years of high school and meet standard or IEP-modified graduation requirements. At the time of graduation with a regular high school diploma, or reaching the end of the school year during which the student turns 22, the school must complete the *Summary of Performance* form to provide the student with a summary of their academic achievement and functional performance, including recommendations on how to assist the student in meeting their postsecondary goals.

**NOTE:** *School year is determined to be the regular school term that is specified in the regular school calendar as adopted by the serving entity. If the student’s 22nd birthday is after the start date of the regular school*

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<sup>93</sup> [Chicago Public Schools Graduation Requirements](#) and [Illinois Graduation Requirements](#).

term, then the student may continue to be eligible to receive services until the last date of that regular school term. Regular school term does not include summer school or extended school year calendars.<sup>94</sup>

CPS staff reference the [Summary of Performance Guidance](#) document.

At least one year prior to a student's anticipated graduation, if the student is to receive a regular high school diploma, both the parent/guardian and the student shall receive written notification that eligibility for CPS special education services ends following the granting of the diploma. The parent/guardian or student may request an IEP meeting to review the recommendation that the student receive a high school diploma and graduate.

### Certificate of Completion (Brittany's Law)<sup>95</sup>

The Illinois School Code requires districts to allow students with disabilities who will have completed four years of high school at the end of a school year to participate in the graduation ceremony of their high school's graduating class and to receive a certificate of completion, if their IEP provides for special education, transition planning, transition services, or related services beyond their four years of high school. The district will provide timely notice to eligible students and their parents/guardians of these rights. Eligible students will be sent their certificates of completion during the summer following their completion of four years of high school and will not receive a diploma at this time.

## EXTENDED SCHOOL YEAR (ESY) (IEP Section 14)

ESY services provide special education and related services beyond the CPS regular school year to students with disabilities who need such services to receive FAPE. The primary purpose of ESY is to prevent significant skill loss caused by an interruption of special education and/or related services during extended periods when school is not in session.

All students with disabilities must be considered for ESY services annually. ESY may be necessary when a student is likely to experience regression in areas of learning crucial to their attainment of self-sufficiency and independence during scheduled breaks in instruction.

### Eligibility Criteria for Determining Need for ESY Services

An IEP team may decide that a student with disabilities needs ESY services to receive FAPE only if qualitative and quantitative data<sup>96</sup> show that **ONE OR MORE** of the following criteria are met:

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<sup>94</sup> For additional information, see <https://www.isbe.net/Documents/FAQ-HB-40-HB-2748.pdf>.

<sup>95</sup> Public Act 93-1079, as codified in [105 ILCS 5/14-16](#), is referred to as "Brittany's Law."

<sup>96</sup> Qualitative and quantitative data in the context of regression/recoupment means data demonstrating the student's level of mastery of a specific skill/goal being contemplated for ESY right before the summer, winter, and/or spring break; the student's level of mastery when they return from break; and progress monitoring levels in that specific skill/goal over a period of time, such as the first 30 school days of the new school year, to demonstrate recoupment.

### Criteria 1: Regression/Recoupment<sup>97</sup>

The special education teacher(s) and RSP(s) collect qualitative and quantitative<sup>98</sup> data for each specific skill/goal that is relevant to the student's potential need for ESY. The student compared to students without disabilities:

- Loses knowledge/skills related to specific IEP goals following summer, winter, and/or spring break or other breaks in instruction; AND
- Requires more time to recoup the knowledge/skills relevant to the measured IEP goals.

**NOTE:** All students typically spend time at the beginning of each school year for review and re-teaching of previously learned skills. Longstanding ISBE guidance suggests that review and re-teaching should not extend beyond the first 30 school days of a school year.

### Criteria 2: Skills in Critical Stage of Development

When a student is in a critical stage of developing a skill that will increase their academic or functional performance or self-sufficiency, and the skill is not completely acquired and mastered at the end of the school year, it is likely that the emerging skill will be lost due to the interruption of instructional services, particularly during the summer break.

The special education teacher(s) and RSP(s) collect qualitative and quantitative<sup>99</sup> data for each specific skill/goal that is relevant to the student's potential need for ESY. The data must show that **EACH** of the following are met:

**A. The specific skill/goal will enable the student to increase their academic or functional performance or self-sufficiency. Examples include, but are not limited to:**

- Acquiring the ability to communicate (e.g., functional sign, communication device, braille);
- Independent use of the toilet;
- Independence in feeding;
- Independence in mobility;
- Academic,
- Behavior, or
- Other;

**B. The specific skill/goal is at a critical stage of development, as documented by progress monitoring data; and**

**C. A break in services will result in a loss of the window of opportunity for mastery of the specific skill/goal, as documented by progress monitoring data.**

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<sup>97</sup> "Regression" is defined as the amount of loss during a scheduled break in instruction of learned skill or acquired knowledge which has been specified in a student's IEP goals. "Recoupment" is the amount of time required to recoup those lost skills when school instruction resumes.

<sup>98</sup> Qualitative and quantitative data in the context of regression/recoupment means data demonstrating the student's level of mastery of a specific skill/goal being contemplated for ESY right before the summer, winter, and/or spring break; the student's level of mastery when they return from break; and progress monitoring levels in that specific skill/goal over a period of time, such as the first 30 school days of the new school year, to demonstrate recoupment.

<sup>99</sup> Qualitative and quantitative data for skills at a critical stage of development means data identifying the specific skill/goal being contemplated for ESY, the level of mastery at the time of the IEP meeting, and data demonstrating why the summer break will cause a substantial disruption to the student's mastery of the specific skill/goal.

**NOTE:** The IEP provides notice that if the student has mastered a goal to be addressed during ESY related to the acquisition of a skill that was in a critical stage of development prior to the end of the school year, ESY is no longer required for that goal. If the student has met all goals related to a skill(s) at the critical stage of development, the local school district representative schedules an IEP meeting to determine whether the student still requires ESY services.

### Criteria 3: Special Circumstances

Special circumstances are unique situations involving or affecting a student that resulted in a substantial disruption in the delivery of special education and related services and are considered by the IEP team on a case-by-case basis. Special circumstances include, but are not limited to, the student experiencing extended absences from school due to a mental or physical condition and being unable to participate in home/hospital educational services or transitions due to homelessness or guardianship changes that impact the student's education.

The special education teacher(s) and RSP(s) collect qualitative and quantitative data<sup>100</sup> showing the existence of a special circumstance when **ONE** of the following are met:

- A. During the school year, the student's mental or physical condition resulted in extended absences from school without home/hospital services;
- B. The student experienced a substantial disruption to the delivery of special education and/or related services (e.g., due to transitions because of homelessness or guardianship changes); or
- C. A due process hearing decision, resolution session, mediation, or other settlement agreement calls for the student to receive ESY services.

There are no time limitations on when ESY decisions can be made during the school year; however, qualitative and quantitative data from the current school year must be collected prior to determining ESY eligibility and supporting the IEP team's decision. If data are not collected, the IEP may be finalized, but the team **must reconvene when data are collected and prior to the end of the school year** (see [IEP Revisions section](#)).

If **ALL** qualitative and quantitative data collection are **not** completed because of the student's absence, teacher absence, etc., the IEP team must document the reasons why all the required data were not collected and review other relevant information (e.g., progress monitoring data, staff or parent/guardian input) to make the ESY determination.

### Determining ESY Services

Once the student has been determined to be eligible for ESY services, the IEP team determines which goals need to be addressed during the ESY period and the frequency, duration, and location of the services. If a goal identified to be addressed during the ESY period is met by the end of the school year, that goal will no longer be addressed during ESY. If the student has met goals to be worked on during ESY, the local school district representative schedules an IEP meeting to determine whether the student still requires ESY services.

When a student is determined eligible for ESY services, the parent/guardian must decide whether to accept or decline the services. The parent/guardian's decision of whether to accept or decline ESY services

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<sup>100</sup> Qualitative and quantitative data for special circumstances describe the amount of school time missed, such as 10 or more school days, what caused the absences, and why special education and/or related services could not be provided during the absences.

must be reflected in the IEP. Additionally, if the parent/guardian declines ESY services, the decision must be reflected on both the IEP **and** the *Parent Non-Acceptance of IEP Services Letter*, which will populate as part of the IEP. The signed and dated form must be uploaded in SSM. If the parent/guardian provides notice (oral or written) to the local school district representative after the IEP meeting that they have changed their mind regarding accepting or declining ESY services, the IEP must be revised to reflect the parent/guardian's new decision to accept ESY services following the [Procedural Safeguards](#) for IEP revision meetings.

All students whose IEPs indicate they are eligible for ESY services and their parents accepted the service at the IEP meeting will receive an *ESY Parental Acceptance Letter* identifying the student's ESY school site. The parent's decision regarding ESY services after receiving the *ESY Parental Acceptance Letter* must be documented in SSM.

## TRANSPORTATION (IEP Section 15)

IDEA includes transportation within its definition of "related services." Transportation includes travel to and from and between schools, travel in and around school buildings, and specialized equipment if required to provide transportation to a student with a disability. The IEP team is responsible for determining if transportation is required to assist a student with a disability to benefit from special education and how the transportation services will be implemented. The IEP describes the transportation services to be provided, including transportation to enable a student with disabilities to participate in nonacademic and extracurricular activities in the manner necessary to afford the student an equal opportunity for participation in those services and activities to the maximum extent appropriate to the needs of that student.

**NOTE:** *Special education services can include travel training.<sup>101</sup> Travel training is instruction that enables students with significant disabilities, and any other students with disabilities who require this instruction, to develop an awareness of the environment in which they live and to learn the skills necessary to move effectively and safely from place to place within that environment. Travel training may not be appropriate for students who are blind or have certain visual impairments, as this is often best addressed through support by an orientation and mobility specialist.*

Specialized transportation services can be a fundamental component of the provision of FAPE that will assist students in preparing for employment and independent living in their communities. Therefore, IEP teams need to consider the need for both transportation and travel training services when planning for a student's postsecondary transition needs.

When a student is determined to need transportation services, the parent/guardian must decide whether to accept or decline the services. The parent/guardian's decision of whether to accept or decline transportation services must be reflected on the IEP. Additionally, if the parent/guardian declines transportation services, the decision must be reflected on both the IEP **and** the *Parent Non-Acceptance of IEP Services Letter* which will populate as part of the IEP. The signed and dated form must be uploaded in SSM.

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<sup>101</sup> CPS staff visit [CPS INTRANET Transition Services](#).

If the parent/guardian accepts transportation services, the IEP team then determines whether the student needs any accommodations (e.g., bus aide, nurse on the bus, air conditioning, pick-up/drop-off other than home, presence of an adult at drop-off location not required, car seat, harness, wheelchair lift or other specialized equipment, or other accommodations or supports) while traveling on the bus. The IEP team must also decide whether the student needs transportation as a related service for the life of the IEP, only this school year, only the next school year, or on a temporary basis with specific start and end dates and a justification.

**NOTE:** If the parent/guardian provides notice (oral or written) to the local school district representative after the IEP meeting that they have changed their mind regarding accepting or declining transportation services, the IEP **must be revised** to reflect the parent/guardian's new decision following the [Procedural Safeguards](#) for IEP revision meetings.

Once the student has been found eligible for transportation services, the local school district representative or principal designee must submit a request for transportation in the Student Information System (i.e., Aspen) within 24 hours (not including weekends). For additional support, contact Student Transportation Services (STS) at [stutran@cps.edu](mailto:stutran@cps.edu) or (773) 553-2860.

**NOTE:** If transportation starts more than ten school days after the IEP is finalized, then the school must issue a Notice of Non-Implementation (see [Notification of Non-Implementation of IEP Services \(NONI\)](#) section).

## Guidelines for Determining Need for Transportation as a Related Service

An IEP team may decide that a student with disabilities needs transportation services only if documentation shows that **ONE OR MORE** of the following guiding principles is met:

### Guideline 1: Student in Neighborhood (Zoned) School or School of Choice

Parents/guardians may apply to schools of choice as an alternative to having their children attend the neighborhood school (i.e., zoned school). When the parent/guardian of a student with a disability chooses to send their child to a school of choice (e.g., magnet school, selective enrollment school, charter school, another school that is not the student's neighborhood school, etc.), it is presumed that the student will not receive transportation as a related service. Distance between the home and school of choice, on its own, is not the basis for FAPE-based transportation unless one of the four guidelines or other special circumstances exist (and are documented) supporting the need of an individual student with a disability, as determined by the IEP team. The student may qualify for non-FAPE-based transportation if provided for in a Board policy for all students who attend the school of choice.

If a student is attending a charter, contract, or options school, the OSD SEC **MUST** be part of the IEP team and act as the district representative at the meeting unless they delegate the role to the local school district representative via the *SEC Review Form*.

A student who attends their neighborhood school or school of choice and who has a disability that prevents them from traveling to school in a manner comparable to similarly aged peers without disabilities is eligible for CPS-provided transportation when **AT LEAST ONE** of the following guiding principles are discussed and documented:

#### A. The student has a physical or orthopedic condition and, as documented on the IEP:

- Uses a wheelchair to ambulate;

- Uses a walker to ambulate;
  - Wears orthotics and is unable to walk the distance from home to school; or
  - Has displayed significant limitations with endurance due to the physical or orthopedic condition when transitioning, when moving throughout the school building, or when participating in P.E. or recess.
- B. The student has a chronic or persistent medical condition and, as documented on the IEP:**
- Requires monitoring by a nurse in transit;
  - Requires monitoring by a delegated care aide or other adult other than a nurse;
  - Relies on specialized medical equipment (e.g., oxygen tank, tracheostomy tube, catheter, etc.) that is not readily transportable in a non-adapted or standard vehicle;
  - Requires limited exposure to environmental elements (e.g., extreme temperatures, extreme pollen levels, extended exposure to sun); or
  - Is otherwise unable to walk the distance from home to school.
- C. The student demonstrates a pattern of behavior that is dangerous to the student or others while traveling to and from school and requires constant adult supervision, as documented on the IEP.**
- D. The student has an intellectual, sensory, communication, hearing, vision, or other condition and, as documented on the IEP:**
- Is unable to assess risk or advocate for their personal safety;
  - Lacks the ability to navigate an established route to and from school;
  - Reacts to unwanted stimuli or attention from others in a manner that is dangerous; or
  - Lacks the ability to travel to school without getting lost or avoiding dangerous traffic situations.

**NOTE:** See [Guideline 3: Students Six Years of Age or Younger](#), for additional considerations based on the student's age.

## Guideline 2: OSD-Assigned School

A student who attends an OSD-assigned school is presumed to qualify for transportation services when the following are met:

- A. OSD personnel assigns a student to a school that the student would not otherwise have attended based on one or more of the following specialized programs and/or reasons:**
- Preschool Inclusive
  - Early Childhood Cluster
  - Low Incidence Cluster<sup>102</sup>
    - Moderate
    - Intensive
    - Specialty School (i.e., 100% removal)
    - Transition Learning Centers (i.e., 100% removal)
  - Deaf and Hard of Hearing
  - Program for Students with Visual Impairments
  - Separate day school; and/or
  - Accessible Building
- B. The assigned school is not located closer to the student's home than their zoned school.**
- If the assigned school is located closer to the student's home than their zoned school, the IEP team must revisit the student's need for transportation under Guidelines [1](#) or [4](#).

<sup>102</sup> The K-12 low incidence cluster programs are designed for students requiring a significantly modified curriculum with moderate to intensive support in a separate setting for the majority of the day (over 61%), in alignment with [DLM-AA Participation Guidelines](#).

### Guideline 3: Students Six Years of Age or Younger

The nature of the student's disability prevents the student from traveling to and from school in a manner comparable to similarly aged students without disabilities. Students age six or younger generally do not have the developmental capacity to travel to school safely without a parent/guardian or caregiver. It is expected that students with disabilities in this age group will travel to and from school with their parents/guardians or caregivers unless the IEP team determines otherwise based on Guidelines [1](#), [2](#), or [4](#).

#### Preschool Student Pick-Up/Drop-Off Location

If a **preschool student with a disability** requires transportation as a related service in order to receive a FAPE, transportation may be provided to, from, and between locations other than home. The IEP team **must** document in the Student's IEP (Section 15) that a preschool student requires a pick-up or drop-off other than home to receive a free appropriate public education. Transportation may be provided between home, the location of the child's special education services (CPS school), and any other childcare setting or community-based early learning program the child may be attending. Transportation services are limited to and from locations within the City of Chicago. Pick-up and drop-off locations may be at different locations; however, the selected location(s) must be the same every day of the week. For example, a parent may elect to have the student picked up at home but dropped off at a childcare setting as long as it is consistent each day of the week.

This accommodation must be documented in the IEP as a transportation accommodation and list the name and exact address of the child care location in the appropriate text. Additionally, the completion of the *Stop Change Request for Eligible Preschool Students with Disabilities* ("Purple Form") identified via a link in the Transportation Accommodations. The completed *Purple Form* must be scanned and emailed to [stutran@cps.edu](mailto:stutran@cps.edu), the CPS – Student Transportation Services Department. This form can be used for preschool students with disabilities who attend a CPS full-day preschool program or a CPS half-day preschool program.

**NOTE:** For students with disabilities in grades kindergarten and above that require transportation as a related service and would like a pick-up/drop-off location other than the student's home, the parent/guardian can complete the *Day/Child-Care Stop Change Request for Students with Disabilities* ("Blue Form").<sup>103</sup> The criteria for transportation form eligibility are found in the respective documents. The transportation forms,<sup>104</sup> with the exception of the Purple Form, are completed outside of the IEP team meeting process.

### Guideline 4: Special Circumstances

The student has a special circumstance that is documented and requires transportation services.

## Transportation Accommodations

The following requirements apply to the IEP team's determination that one or more of the below services, accommodations, or specialized equipment is required for the student to travel safely to and from school.

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<sup>103</sup> Requests for Day/Child-Care Stop Change are not guaranteed.

<sup>104</sup> Transportation forms can be found at [CPS Transportation](#).

| Identified Need  | Personnel Required at the IEP Meeting | Action to be Taken   |
|--|---------------------------------------|--|
| Bus Aide   | IEP team                              | Document the information supporting the need for a bus aide, such as the student: <ul style="list-style-type: none"> <li>• Uses a wheelchair or walker to ambulate;</li> <li>• Has a documented medical condition that requires constant monitoring by a delegated care aide or another adult other than a nurse;</li> <li>• Has demonstrated a pattern of behavior that is considered dangerous to self or others while traveling to and from school and/or requires adult supervision; or</li> <li>• Travels with oxygen as required by a doctor's order.<sup>105</sup></li> </ul> |
| Specialized Equipment  | IEP team                              | <ul style="list-style-type: none"> <li>• Requires a car seat;</li> <li>• Requires a safety harness; or</li> <li>• Requires a wheelchair lift.<sup>106</sup></li> </ul>   |
| Nurse on the Bus   | CPS CSN                               | Participate and review a doctor's order <sup>107</sup> documenting the student's medical needs.  |
| Air Conditioning   | CPS CSN                               | Participate and review documentation of the student's medical needs. <sup>108</sup>  |
| Preschool Student Pick-Up/Drop-Off Location Other than Home        | IEP team                              | Document the location in the IEP, complete the <i>Stop Change Request for Eligible Preschool Students with Disabilities</i> form, and submit the form to the CPS – Student Transportation Services Department.   |
| Presence of Adult at Drop-Off Location Not Required <sup>109</sup> | Parent/guardian                       | Document in writing the preference for a student who is in the 6th grade or higher.  |
|  | IEP team                              | Approve documentation showing that, in light of factors such as the student's age and disability, the student has demonstrated the necessary maturity and ability to be dropped off without a receiving adult.   |
| Other (Medical)  | CPS CSN                               | Review the documented basis of student needs and note agreement with the recommendations of other team members.  |

The duration of transportation is also identified under transportation accommodations. Transportation can be for the life of the IEP, for the current school year, for the next school year, or on a temporary basis with specific start and end dates and a justification.

<sup>105</sup>A CPS Nurse MUST participate at the IEP/504 meeting and review a doctor's order documenting the student's need. The doctor's order must be attached in the IEP.

<sup>106</sup> For car seat or harness accommodation, the *Car Seat and Harness Measurements* form in SSM must be completed. The doctor's order must be attached in the IEP and finalized. CPS staff reference the [Transportation Car Seat or Harness Measurement in SSM](#).

<sup>107</sup> The doctor's order must be attached in the IEP.

<sup>108</sup> The doctor's order must be attached in the IEP.

<sup>109</sup> When a student receives IEP-required transportation services, the student's parents/guardians are expected to meet the bus at the curb for pick-up/drop-off.

## Transportation Process for Non-Public School Referrals

In developing the student's IEP, the IEP team, including the parent/guardian, determines if the student qualifies for special education transportation as a related service. Once the case manager finalizes the IEP and it reflects 100% removal from the general education setting, the OSD SEC assigned to the current school completes the internal *Separate Day Placement Request* form in SSM. The *Separate Day Placement Request* form notifies the OSD Non-Public team that a student referral for separate day placement has been received. Upon receipt of the form, the OSD Non-Public team reviews the student's IEP and makes referrals to potentially appropriate, ISBE-approved separate day schools. When transportation is reflected on the student's IEP, the OSD Non-Public staff facilitates the request for transportation and enters the transportation request into the Student Information System (i.e., Aspen). Note that students referred for a Separate Day School are eligible for transportation; however, parents/guardians can decline the service via the *Parent Non-Acceptance of IEP Services Letter*, which will populate as part of the IEP. The signed and dated form must be uploaded in SSM. The parent can contact the case manager at any time to request an IEP meeting to revise this IEP to reflect they now accept CPS transportation. If transportation starts more than ten school days after the IEP is finalized, then the Non-Public staff must issue a *Notice of Non-Implementation* (see [Notification of Non-Implementation of IEP Services \(NONI\)](#) section).

## Transportation for Youth in Care (Foster) and STLS Students

Students with IEPs who are also Youth in Care or STLS present unique transportation considerations and are eligible for transportation under the Every Student Succeeds Act (ESSA) and/or the McKinney-Vento Act to/from the school of origin. However, transportation for non-IEP foster and STLS students is typically provided in the form of CTA bus passes. The IEP team must check to ensure that the [Guidelines for Determining Need for Transportation as a Related Service](#) were applied based on the student's disability-related needs but must not add transportation to the IEP solely because the student now qualifies for transportation as a Youth in Care or STLS. After review, if the student is not eligible for transportation as a related service, the student will be provided with transportation according to CPS' [STLS and Youth in Care Transportation guidelines](#).

# MEETING NOTES, DISSENTING OPINION & IEP REVISIONS

## Meeting Notes

Meeting notes are used to record relevant discussions that occurred during the IEP team meetings (e.g., Eligibility Determination, IEP, etc.) that were NOT memorialized in the document, such as any parent/guardian requests that were discussed but not agreed upon via team consensus. In this example, the notes must include an explanation as to why the team decided the requested service was inappropriate and/or not needed to provide the student FAPE.

**NOTE:** Any parent/guardian requests that were discussed but not agreed upon via team consensus must be documented at the bottom of the Meeting Notes page under the question "Was there an action proposed or refused by the district?" The notes must include an explanation as to why the team decided the requested service was inappropriate and/or not needed to provide the student FAPE (see [Prior Written Notice \(PWN\)](#) section).

Meeting notes are ***imperative*** to fully capture the team's discussion and decision-making process. Well-drafted meeting notes will help to establish procedural compliance, show meaningful parent/guardian participation, and document when several options were discussed and considered. They may also serve as critical elements in dispute resolution matters.

### Best Practices for meeting notes include, but are not limited to:

- Identify a team member (or members) prior to the meeting to type and track notes;
- Document the date and manner in which the 3-day draft materials were provided, including details of any data that were included;
- Include a statement regarding the offer of [Procedural Safeguards](#) and any parent/guardian questions regarding [Procedural Safeguards](#);
- Document that the IL ABLE brochure has been provided to the parent/guardian;
- Indicate any staff that has been excused, in part or in whole, for the meeting and document the time/length of participation;
- Note if the translation of documents is not needed by the parent/guardian when the Home Language Survey indicates a different language;
- Include timestamps for the start and end times of the meeting, capturing length of discussions, arrival/departure of participants, etc.;
- Document details regarding meeting participant engagement and all efforts to ensure parent/guardian participation; use quotes to convey the details or tone;
- Include discussions involving multiple perspectives - identify topics and state who expressed opinions/input;
- Summarize issues discussed;
- Identify any reports reviewed by the team, who presented each report by role, including any agreement/disagreement with internal or external reports;
- Include discussions reflecting team considerations of any outside, private reports provided by parents/guardians;
- Include any parent/guardian requests during the meeting and the district's response and rationale;
- Indicate areas of significant discussion regarding assessment findings, ESY, placement, grading, transportation, service delivery, etc.;
- Document intended/promised follow-up on agreed-upon items and any next steps;
- Ensure that what is written is consistent with other areas of the document;
- Capture if an *Agreement to Proceed with the IEP Meeting* was provided and detail what additional actions are to be completed outside of the meeting; and
- Proofread notes before finalizing the document.

## Dissenting Opinion

Any IEP team member, including parents/guardians, may record when they disagree with the ultimate decision of the IEP team regarding identification, evaluation, educational placement, and/or the services identified to ensure the student receives FAPE. The parents/guardians and any other IEP team member can record their dissenting opinion in any written format, including the IEP dissenting opinion page. If the dissenting opinion is recorded in an alternate format, such as email, the local school district representative must ensure the document is scanned, uploaded, and attached to the student's document in SSM. A written dissent, whether included in the document on the dissenting opinion page or submitted after the meeting, is considered part of the IEP; however, it does not invoke further rights nor "stop" the Eligibility Determination or IEP process. The parent/guardian has the right to seek resolution of any disagreements as outlined in the [Procedural Safeguards](#) (see [Dispute Resolution](#) section).

## IEP Revisions

After the annual IEP meeting, parents/guardians and the district can agree to make changes to the student's IEP by holding an IEP revision meeting or by waiving a formal meeting. If a student is not making meaningful progress, IEP team members may need to hold an IEP revision meeting to make adjustments to the supports and services.

Parent/Guardian participation is essential to IEP development per federal and state regulations. As such, a change in the student's special education, placement/LRE, and most changes in the student's special education services may only be completed through an IEP Revision Meeting and not through the Waiver of IEP Revision Meeting process.

If an IEP Revision meeting needs to be conducted, the local school district representative must ensure that an IEP meeting is scheduled, and the parent/guardian is sent the *Notice of Conference* form with at least 10-calendar-days notice. The IEP participants at a revision meeting are dependent on which sections of the IEP are being revised.

The parent/guardian and school may agree to revise the IEP without convening an IEP meeting for **some** IEP sections, but the agreement must be in writing via the *Waiver of IEP Revision Meeting* form. After the school receives the signed form, the school may amend or modify the student's current IEP by indicating "Revision to the IEP" as the purpose of the conference. If the parent/guardian waives the IEP revision meeting, the local school district representative must ensure the parent/guardian is sent a copy of the revised IEP in addition to the *Parent/Guardian Notification of IEP Revision* form and log an event in SSM.

With the school and parent's/guardian's written agreement, **and within 30 calendar days of finalizing the Waiver of IEP Revision document**, the Waiver of IEP Revision Meeting process may be used for making changes to the IEP without a meeting for the following purposes or IEP sections **only**:

- Language;
- General Considerations;
- Transition Services and Transition Service Plan;
- Extended School Year (ESY);
  - Only if the student is already eligible for ESY;
- Transportation;
  - Only if the student is already eligible for transportation and changes need to be made regarding parent/guardian acceptance and transportation accommodations;
- Functional Behavior Assessment and Behavioral Intervention Plan;
- Student Independence Plan; and
- Remote Learning Plan,

Other areas of an IEP may be modified by an OSD SEC in special circumstances, such as correcting administrative errors (e.g., typos) and incorporating agreed-upon revisions via due process/mediation/settlement agreements.

# DISCIPLINE<sup>110</sup>

Schools are responsible for keeping students and staff safe. If any student engages in actions that are dangerous for the student or others, the school's first priority must be to address that danger and keep everyone safe.

A student with a disability who engages in unsafe behavior or behavior that otherwise constitutes a violation of the [Student Code of Conduct \(SCC\)](#) can receive the same consequences as other students, with the exception that a student with a disability has some additional [Procedural Safeguards](#) if they are suspended or removed for more than 10 days in a school year. All students must abide by the SCC.

## Disciplinary Removal of Student from Current Setting

### Short-Term Removal (Out-of-School Suspension)

School officials can suspend students with disabilities for up to 10 consecutive or cumulative school days in one school year in the same manner as their non-disabled peers. For a single violation, administrators are permitted to suspend students with disabilities for fewer days than the periods set forth in the SCC.

Federal regulations provide some flexibility to suspend students with disabilities in excess of 10 school days in the school year under certain circumstances. In order to determine whether the circumstances permit a suspension in excess of 10 school days in the school year, the school must discuss this with the OSD SEC. If appropriate, the OSD SEC will consult with the Chief of OSD or their designee for review and approval.<sup>111</sup> Without such consultation and approval, the 10-school-day limit on out-of-school suspensions will remain in effect.

### In-School Suspension

**In-school suspensions are not included in the 10-day limit on disciplinary removals if the student continues to:**

- Participate in the general education curriculum;
- Receive IEP services from a certified provider; and
- Have access to non-disabled peers during the in-school suspension to the same extent as specified in their IEP.

**NOTE:** See [Student Code of Conduct](#) for more information regarding discipline.

### Suspension from the Bus

Suspensions from the bus will count toward the 10-day maximum if the student's IEP includes transportation as a related service.

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<sup>110</sup> For additional information, see [OSEP Positive, Proactive Approaches To Supporting Children With Disabilities: A Guide For Stakeholders, Questions And Answers: Addressing The Needs Of Children With Disabilities And IDEA's Discipline Provisions](#) and [USDOE School Climate and Student Discipline Resources](#).

<sup>111</sup> An MDR is not required prior to submitting the request for approval of additional suspension days. The OSD determination letter will detail whether an MDR is required. Additional suspension days beyond the 10 school days allowed by law cannot be issued without written approval from OSD. CPS staff, see [Procedure for Requesting Additional OSS or ISS Days for Students with Disabilities who have Exhausted or are Approaching the 10-Day Limit](#) for additional information.

## Exceeding 10 Cumulative Suspension Days in a School Year

If a school is considering issuing a suspension that would result in more than 10 cumulative suspension days in the school year, the school must first perform the following:

- Discuss the circumstances with the OSD SEC and, if appropriate, consult with the Chief of OSD (or their designee). If approved for additional suspension days, the school must:
  - Provide the parent/guardian with written notice that their child is being suspended, the number of days of the suspension, the fact that it was determined that this suspension would not constitute a “change of placement,” and an explanation of the basis for this determination. In that notice, the parent/guardian is informed of their right to request an IEP meeting to discuss this determination if they disagree.
  - Provide the student with all required special education services during the suspension. Required services are determined in consultation with at least one teacher so the student can continue participating in the general education curriculum and progress toward the goals contained in their current IEP.
  - Schedule an IEP meeting within 10 school days of the date that the school notifies the parent/guardian of the suspension. The purpose of the meeting is to review the student’s current FBA and BIP or to initiate an FBA and develop a BIP if none exists.

**NOTE:** *Notifying parents/guardians of a student’s behavior during the school day and requiring the parent/guardian to pick up the student from school due to misbehavior and/or crisis behavior **counts toward the 10-day maximum**, even if the parent/guardian agrees to do so. If a parent/guardian voluntarily picks up their child due to behaviors without being required or encouraged to do so by school staff, this does not count toward the 10-day maximum. Likewise, school staff cannot encourage or imply that a student may voluntarily leave school during the school day subsequent to a behavioral incident, as this would also count toward the 10-day maximum. [Procedural Safeguards](#) apply for any removals that count toward the 10-day maximum.<sup>112</sup>*

## Manifestation Determination Review (MDR)

When a student with a disability engages in behavior that constitutes a violation of the SCC and the school proposes to remove the child (i.e., removal in excess of 10 school days—consecutive or pattern) or change the student’s placement to an Interim Alternative Education Setting (IAES) as a result, the school must hold a meeting to determine if the child’s behavior was caused by, or substantially related to, their disability, or the direct result of the school’s failure to implement the student’s IEP.<sup>113</sup> This meeting is called the MDR, at which the team reviews all relevant information and the relationship between the student’s disability and the behavior.

### An MDR must be conducted by the IEP team when:

- A student with a disability has been suspended in excess of 10 school days during the school year for similar behaviors, as determined by OSD in consultation with school personnel;
- A student with a disability has been suspended for 10 days in a row; or
- School officials initiate a referral for expulsion, including referrals requesting emergency assignment to an IAES pursuant to the SCC.

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<sup>112</sup> For additional information, see the [ISBE Position Statement on Informal Removals of Illinois Students](#).

<sup>113</sup> For additional information about conducting MDRs for students with 504 Plans, see the [504 Procedural Manual](#).

## MDR Process Checklist

- Ensure a *Misconduct Report* has been completed and timely provided to the parent/guardian for the behavior leading to the need for an MDR no later than the date on which the decision to take disciplinary action is made, in addition to a copy of the [Procedural Safeguards](#).<sup>114</sup>
- Schedule the MDR within 10 school days of the decision date to refer for an expulsion hearing or to request an emergency assignment to an IAES. If the MDR is held to determine if the student can be issued a short-term suspension in over 10 school days, the student must be allowed to attend class until a determination is made.

**NOTE:** *At the time of or prior to scheduling an MDR, schools should inform the OSD SEC of the MDR. The OSD SEC may choose to attend the MDR, where appropriate.*

- Provide the parent/guardian written notice at least three school days prior to the date on which the MDR has been scheduled, using the *Notice of Conference* in SSM. Indicate the purpose of this conference as:
  - o Consider relatedness of disability to disciplinary code violation(s);
  - o Consider the need for an FBA for the student; and
  - o Review a need to create or revise a BIP for the student.
- Provide parent/guardian/educational surrogate parent with a written copy of the [Procedural Safeguards](#).
- Conduct the MDR.** The parent/guardian, local school district representative, special education teacher, evaluation representative, and any other relevant members of the IEP team must be present for and participate in the MDR. The “relevant members of the team” are determined by the parent/guardian and a local district representative.

**NOTE:** *If the parent/guardian does not attend the MDR, the school may proceed with the meeting if the parent/guardian is provided with proper notification of the meeting. Attempts to contact the parent/guardian must be documented as SSM Events.*

**At the MDR, the IEP team must:**

- Determine whether the misconduct is related to the student’s disability by reviewing **all relevant** information, including evaluation and diagnostic results, information from the parent/guardian, observations of the student, any previous interventions, and the student’s IEP. **This review is not to be limited to information contained within the student’s IEP.** The behavior is a manifestation of the student’s disability if:
  - o The conduct in question is caused by the student’s disability or has a direct and substantial relationship to the student’s disability; and/or
  - o The conduct in question is the direct result of the school’s failure to implement the student’s IEP.
- Provide a written narrative substantiating the determination. The written narrative must include a summary of the team’s considerations, including the student’s eligibility and information known to the school about the student’s disability; what supports/services and interventions the student receives or has received to address the behavior, including those provided for in the Student’s IEP, if any; an explicit statement of why the team determined the behavior to be, or not to be, a manifestation; and whether there was any disagreement with the team’s consensus, including from the student (if present) and the parent/guardian.

<sup>114</sup> Additional notice requirements may apply for disciplinary actions involving youth in care. See [Youth in Care](#).

- The IEP team must review and revise the student's existing BIP to address the misconduct. If no FBA has been conducted for the student prior to the behavior leading to the need for the MDR, the team must complete an FBA. The FBA/BIP must address the behavior(s) which led to the disciplinary action. The team also reviews the student's IEP to determine whether additional supports or services may be provided to address the misconduct.<sup>115</sup>
- The local school district representative provides the parent/guardian the finalized *Manifestation Determination Review* document along with the *Conference Recommendations* form. Document this as an SSM Event. The parent/guardian must be informed of their right to disagree with and/or appeal the MDR outcome.

If the student's **behavior is not a manifestation** of the disability, school officials may implement the SCC, taking into consideration the student's special education and disciplinary records. However, in no event may the student be suspended for more than 10 consecutive or cumulative school days in a school year without providing IEP services.

If the student's **behavior is a manifestation** of the disability, a disciplinary change in placement (e.g., expulsion) cannot occur. The IEP team also considers if there is a need for a re-evaluation and/or revision of the IEP. Students with disabilities, even if expelled, must be provided with FAPE in an alternative educational setting.

All MDRs are subject to review by the Interdepartmental Expulsion Hearing Review Committee before an expulsion hearing is approved or conducted.

## Removal to an Interim Alternative Educational Setting (IAES) (Emergency Assignment)

**Students with disabilities can be removed to an IAES pursuant to the SCC for up to 45 school days under the three special circumstances below, without regard to the MDR outcome:**

- The student carries to school or possesses a weapon at school, on school grounds or at a school function;
- The student knowingly possesses, uses, sells, or solicits the sale of illegal drugs at school, on school grounds, or at a school function; or
- The student inflicts serious bodily injury on another person at school, on school grounds, or at a school function.

A student with a disability may also be removed for up to 45 school days by order from an ISBE hearing officer after a due process hearing or by a federal or state court judge when it is determined that keeping the student in their former placement is substantially likely to result in danger to self or others.

When removed to an IAES, the student must receive services that enable the student to continue participating in the general education curriculum, although in another setting, and progress toward meeting their IEP goals.

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<sup>115</sup> For additional information, see [Using Functional Behavioral Assessments to Create Supportive Learning Environments](#) and [ISBE Guidance Document: Behavioral Interventions in Schools: Guidelines for the Development of District Policies for Students with Disabilities](#).

**NOTE:** When considering whether to remove a student with a disability to an IAES, schools should first discuss the circumstances with the OSD SEC; where appropriate, schools may then submit a request to the Interdepartmental Expulsion Hearing Review Committee for review. Removals to an IAES are not permitted for district students who attend charter schools. Reintegration of a student subsequent to an IAES includes consideration of whether a Safety Plan may be necessary.

## Students Not Yet Determined Eligible for Special Education and Related Services

Discipline-related [Procedural Safeguards](#) for students with disabilities may also apply to students who are not yet eligible for special education and related services. Students who have not been determined eligible for special education and related services and who engage in conduct that violates the SCC may assert [Procedural Safeguards](#) of IDEA if the district is deemed to have had knowledge that the student had a disability *before* the behavior occurred that precipitated the disciplinary action. School officials are deemed to have prior knowledge that the student has a disability when:

- The parent/guardian expressed concern in writing to supervisory or administrative personnel or to any of the student's teachers that the student is in need of special education and related services;
- The parent/guardian requested an evaluation of the student; or
- The student's teacher or any other district personnel expressed specific concerns about a pattern of behavior demonstrated by the student directly to supervisory personnel.

If any of these circumstances exist, school staff must follow the disciplinary procedures and afford the same disciplinary protections applicable to students with disabilities. If none of these circumstances exist, the student may be subjected to the same disciplinary measures applied to non-disabled students.

If a request is made for an evaluation during the time the student is subject to disciplinary removal, the evaluation must be conducted in an expedited manner. If an evaluation is requested and the district did not have prior knowledge that the student had a disability before the behavior that led to the disciplinary action, the student remains in their educational placement, which may include suspension or expulsion—without educational services—until the evaluation is completed. If the student is determined eligible for special education and related services upon completion of the expedited evaluation, a Manifestation Determination Review (MDR) must be conducted if the school proposes to remove the child or change the student's placement to an Interim Alternative Education Setting (IAES). Where the student is found eligible for special education and related services, suspension days issued during the current school year but before school officials had knowledge that the student has a disability must be counted when considering whether the 10-school-day limit has been reached (see [Manifestation Determination Review \(MDR\) section](#)).

## Reporting Crimes to Police

When a CPS employee reports a crime committed by a student with a disability to appropriate law enforcement authorities, the employee must ensure that copies of the special education and disciplinary records of the student are transmitted to the police for consideration.

**Whenever the Chicago Police Department or any other law enforcement agency is called because school officials believe that a student with a disability has committed a crime, the following steps must be taken:**

- Give the police officer copies of the *Misconduct Report* and the Cover Sheet and Determinant Factors – For All Disabilities sections of the student’s most recent *Eligibility Determination* document. Upon request, the officer must be given any additional information from disciplinary and special education records, with the exception of mental health records, in the student’s file.
- Give the [Police Notification of Record Release for Student with Disability](#) form to the police officer to explain the basis for providing them with information about the student.
- Provide notice of action to the parent/guardian by giving them the [Parent Notification of Record Release for Student with Disability Referred to Police](#) form and a copy of the *Misconduct Report*. These forms are maintained in Aspen and not SSM.

## Anti-Bullying Requirements<sup>116</sup>

According to the U.S. Department of Education, Office of Special Education and Rehabilitative Services, bullying of a student with a disability may result in denial of FAPE if, as a result, the student is not receiving meaningful educational benefits from the special education and related services provided by the school.

If a student with disabilities is the victim of bullying, an IEP meeting needs to be scheduled to determine if the student’s needs have changed as a result of the bullying. For example, if the student’s disability affects social skill development or makes the student vulnerable to bullying, the IEP team considers whether the IEP needs to be revised to include goals and/or accommodations to develop the student’s skills and proficiencies to avoid and respond to bullying, or whether a reevaluation is needed to make these determinations. The IEP team only considers an LRE or location change if the student cannot receive FAPE in the current setting.

If the student who engaged in bullying behavior is a student with a disability, the school must convene the IEP team to determine if a reevaluation is warranted or if additional supports and services are needed to address the inappropriate behavior. The team needs to also consider examining the environment in which the bullying occurred to determine if changes to the environment are warranted. For example, the IEP team should consider an FBA/BIP for the student or review a current BIP and revise it if necessary.

## PROCEDURAL SAFEGUARDS<sup>117</sup>

IDEA requires that parents/guardians receive a copy of their [Procedural Safeguards](#) at least once a year, except that a copy must also be provided:

- When there has been an initial referral or parent/guardian request for an evaluation;
- When CPS has received a due process complaint or state complaint; or
- Upon a disciplinary removal that constitutes a change in placement (e.g., placement in an interim alternative educational setting or recommendation for expulsion).

Parents/guardians must be provided a copy of the [Procedural Safeguards](#) upon request even if the school has already provided them a copy within the year. Log an event in SSM each time a copy is provided to the parent/guardian.

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<sup>116</sup> For more information, see the [Addressing Bullying and Bias-Based Behaviors Policy](#).

<sup>117</sup> The Notice of Procedural Safeguards for Parents/Guardians of Students with Disabilities (Last updated: June 2022) can be found at: [https://www.isbe.net/SPEDReqNotConForms/nc\\_proc\\_sfgrds\\_34-57i.pdf](https://www.isbe.net/SPEDReqNotConForms/nc_proc_sfgrds_34-57i.pdf).

## Prior Written Notice (PWN)

There are certain times when the school must put in writing its decisions about the child's education and state the reasons for those decisions. This written communication is called prior written notice (PWN). Parents/guardians must be provided PWN whenever the district proposes or refuses to initiate or change the identification, evaluation, or educational placement of the child or the provision of FAPE to the child.

The CPS documents below provide Prior Written Notice<sup>118</sup>:

- Referral Decision
- Assessment Plan
- Evaluation Reports
- Eligibility Determination
- Initial Consent for Special Education and/or Related Services
- Notice of Conference
- IEP and Meeting Notes
- Conference Recommendations
- Notice of Non-Implementation
- Waiver of IEP Revision Meeting
- Parent/Guardian Notification of IEP Revision
- Notification of Transfer of Rights - Age Majority
- Delegation of Rights to Make Education Decisions
- PS - Revocation Letters
- Procedural Safeguards

**NOTE:** Vital Documents must be provided in the preferred language, as indicated on the HLS (see [Translation of Vital Documents](#) section).

During an IEP Meeting, any parent/guardian requests discussed but not agreed upon via team consensus must be documented at the bottom of the Meeting Notes page under the question "Was there an action proposed or refused by the district?" In this example, the notes must include an explanation as to why the team decided the requested service was inappropriate and/or not needed to provide the student FAPE.

Parents/Guardians may choose to receive prior written notice via electronic mail. This is to be documented via the [Parent/Guardian Authorization to Send IEP/504 Documents and Related Information via Electronic Mail](#)<sup>119</sup> form. If at any time parents/guardians no longer wish to receive documents via email, written notification of email authorization revocation must be provided to the school case manager.

**NOTE:** Ensuring parents/guardians receive all the above-listed documents and accurately documenting that they have been provided (e.g., obtaining signatures, uploading signed forms, entering SSM Events, etc.) is imperative in ensuring that PWN is provided.

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<sup>118</sup> [ISBE Instructions for Required Notice and Consent Forms 34-57.](#)

<sup>119</sup> [Autorización para el Padre/Tutor para mandar documentos del IEP/504 e información relacionada a través de Correo Electrónico \(E-mail\)](#)

## Notification of Non-Implementation of IEP Services (NONI)

The [Procedural Safeguards](#) and Illinois law<sup>120</sup> requires every CPS school, including charter schools, to notify parents/guardians if IEP services are not administered within 10 school days after a date or frequency set forth within the IEP. If any part of a student's IEP has not been implemented within 10 school days of the IEP services' expected implementation period (typically 10 school days following the development of the IEP, unless the frequency of the services is not set as a daily or weekly service), the school must send the *Notice of Non-Implementation* form. This form must be sent within three school days of the non-compliance. On the form, the school must specifically identify each service not being implemented, what actions the school is taking to ensure the student is receiving FAPE, and inform the parent/guardian of the ability to request compensatory services.

**NOTE:** "School days" for purposes of determining non-implementation of IEP services do not include days where a student is absent from school for reasons unrelated to a lack of IEP services, nor does it include days when services are available but the student is unavailable.

If there is a break in IEP services **outside of the ten school days** immediately following the finalization of an IEP, school administrators must notify families in writing via the *Break in Service* form, such as for staff leaves, vacancies, etc. (see [Break in Service](#) section).

When services resume, notify families in writing. This letter/email communication should be uploaded in SSM and maintained in the student's special education file.

## Notification of Conference

The *Notice of Conference* must be sent at least 10 calendar days prior to any IEP team meeting, including initial FIEs, 3-year reevaluations, and initial, annual, and other IEP meetings. The parent/guardian may waive the 10-calendar day notice of the IEP meeting, but the waiver **must be in writing**.

**NOTE:** The parent can agree in writing via signed letter and/or email to waive the 10-calendar day notice of the IEP meeting. The letter/email must be uploaded to SSM and logged as an SSM Event.

The *Notice of Conference* form must identify the appropriate purpose(s) of the conference. Below are the purpose(s) of the conference:

- IEP Review and Revision
- Initial Evaluation/Eligibility
- Reevaluation
- Manifestation Determination Review
- Functional Behavioral Assessment/Behavioral Intervention Plan
- Secondary Transition
- Service Plan
- Compensatory Education
- Other (specify)
- Initial Individualized Education Program
- Review of Existing Data
- Graduation

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<sup>120</sup> [23 IAC §226.220\(b\)](#)

The *Notice of Conference* form also informs the parent/guardian as to who from the district will be attending the meeting. If one of the individuals listed is unable to attend due to unforeseen circumstances, the district will designate an appropriate and suitable replacement to attend the IEP meeting. Any student, age 14 ½ and older, must be invited to any meeting if the purpose of the meeting is to consider transition service needs.

Illinois law requires that the *Notice of Conference* must indicate whether specific data have been collected regarding services to be discussed at the IEP meeting, including but not limited to paraprofessional support, ESY, and services for students with specific learning disabilities.

If the parent/guardian does not show up to the scheduled meeting, the meeting must be rescheduled at least once. The second *Notice of Conference* form must be sent in three different formats, one of which is US mail. Other types of transmission of the notice could be email, facsimile, certified mail, or a phone call/voicemail. If the parent/guardian does not show up for the second meeting, the IEP team can proceed without them unless the parent/guardian has requested another meeting date. The third meeting notice is sent via US mail. The team may proceed on the third meeting date even if the parent/guardian does not show up or requests a fourth meeting date. All types of transmission of the *Notice of Conference* form must be documented in detail in the SSM Event.

**NOTE:** As indicated on the HLS, 10-calendar-day notice via the *Notice of Conference* form in the **preferred** language, must be given for each continued meeting date unless the parent/guardian waives in writing the 10-calendar-day notification period. Notice and Consent Forms provided by ISBE are available at [Required Notice and Consent Forms](#).

## Conference Recommendations

The *Conference Recommendations* form summarizes and notifies the parent/guardian of any educational recommendations developed for a student at the conference conducted (e.g., Eligibility Determination, IEP, MDR, etc.). The *Conference Recommendations* form must be completed and provided to the parent/guardian each time a conference is concluded (e.g., Eligibility Determination, IEP and/or IEP Revision, MDR, etc.).

**NOTE:** If a meeting is continued across multiple days, the *Conference Recommendations* form is provided at the conclusion of the meeting in conjunction with the finalized document (e.g., Eligibility Determination, IEP, etc.).

### Conference Recommendations include:

- Is eligible or continues to be eligible for special education and related services;
- Is not eligible for special education and related services;
- Will receive the special education and related services as listed in the IEP;
- Requires and will receive the postsecondary goals and transition services (beginning at age 14½) as listed in the IEP;
- Requires and will receive a Functional Behavioral Assessment (FBA) and Behavioral Intervention Plan (BIP);
- Was determined that the disciplinary code violation(s) was related to your child's disability;
- Was determined that the disciplinary code violation(s) was not related to your child's disability;
- Is recommended for graduation; and/or
- Other (e.g., termination of placement, aging out, DLM-AA, compensatory education, etc.).

**NOTE:** All applicable boxes that summarize recommendations determined at the conference need to be indicated.

For an Initial Evaluation, the provision of services cannot begin until 10 school days have passed from the receipt of the signed *Parent/Guardian Consent for Initial Provision of Special Education and/or Related Services* unless the parent/guardian waives the 10-school-day requirement. When an IEP team changes a child's placement (i.e., LRE) via annual IEP and/or IEP Revision, the parent/guardian may also waive the 10-school-day interval requirement.

The school should indicate the parent/guardian decision regarding the waiver of the 10-school-day interval requirement on the *Conference Recommendations* form. The *Conference Recommendations* form with the parent/guardian response and signature must be uploaded to SSM, and the document must be maintained in the student's special education file.

**NOTE:** Case Managers must obtain the parent/guardian response regarding the 10-school-day interval requirement **before finalizing** the *Conference Recommendation* document. In order to ensure that PWN is adequately documented, the signed form must be uploaded, and an SSM Event created to record the document was provided to the parent/guardian.

## Compensatory Education

Compensatory education ("Comp Ed") is an equitable remedy that aims to place a student in the position they would have been in if IEP services were not interrupted, delayed, or not provided. Comp Ed may be considered at any time where IEP services were interrupted, delayed, or not provided. An IEP team does not need to wait for services to be reinstated before holding a Comp Ed meeting, especially when a loss of services may be for an extended period of time.

Compensatory education services must be considered when the school fails to provide IEP services, such as:

- When special education and/or related services are interrupted due to a failure of a staff member to implement an IEP service or support;
- When procedural errors occur that delay or interrupt the student's services; or
- When staff is not available to provide a student's IEP services (e.g., staff on long term leave or due to a position vacancy).

**NOTE:** Compensatory education may be ordered by ISBE or a hearing officer through a formal complaint if the district has denied a student FAPE, either by not developing an appropriate IEP or by not properly implementing the IEP that has been developed.

### Participants at a compensatory education meeting:

- Parent/Guardian;
- Student, if appropriate;
- Principal and/or local district representative;
- Special education teacher;
- General education teacher, if applicable;
- Related services provider (SW, OT, SLP, etc.), if applicable; and

- Paraprofessional, if applicable.

**Before a compensatory education meeting, the team must:**

- Identify the time period when services were not provided;
- Identify the specific service(s) that were not provided (e.g., special education services, paraprofessional support, RSP services, transportation, etc.);
- Gather and review all relevant data regarding whether the student made expected progress during the time period; and
- Share all data that will be discussed at the meeting with the parent/guardian **at least three school days prior to the meeting.**

**During the compensatory education meeting, the team must:**

Thoroughly discuss and document discussions and anything related to the components of the compensatory education meeting, following the steps below.

**Step One:** Determine whether the student’s services were interrupted, delayed, or not provided.

- If the answer is NO, the team must provide evidence and documentation supporting the determination that services, in fact, were provided. The IEP team must document why this meeting was held and what data they reviewed to reach this conclusion. Proceed to **Step Four.**
- If the answer is YES, the team must document what services were delayed, interrupted, or not provided and for how long. Proceed to **Step Two.**

**Step Two:** Determine whether the student met the expected levels of achievement and benchmarks.

- If the answer is YES, compensatory services are not warranted. The team must review and discuss the student’s progress, data, and present levels of academic achievement and functional performance based on their IEP in effect during the interruption of services. The team must explain why the interruption of services did not impact the student’s progress. Proceed to **Step Four.**
- If the answer is NO, compensatory services are warranted. The team must thoroughly analyze and describe how the delay, interruption, or services not provided impacted the student (e.g., which goals/benchmarks were not met, how behaviors escalated/changed, grades decreased, etc.). Proceed to **Step Three.**

**Step Three:** Determine appropriate compensatory education remedies.

- Consider the amount of time/duration the student was denied FAPE.
- Take into account the specific educational deficits resulting from the loss of FAPE and the specific compensatory measures needed to best correct those deficits.
- The remedy needs to be reasonably calculated to provide the educational benefits that likely would have accrued from special education services that the student did not receive.
- The remedy should put the student in the same position they would have been in if all services had been provided.

***Potential remedies for teams to consider:***

- Extended School Year (ESY) for students who do not already qualify;
- Before/after school tutoring;
- After-school programs;
- Additional related service minutes for a specified period of time; and/or
- Additional instructional support from a special education teacher during the school day, as long as it does not otherwise impact the student’s schedule and/or limit access to other general education classes.<sup>121</sup>

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<sup>121</sup> This remedy is utilized on a limited basis to ensure that a student’s instructional plan is not affected.

**Step Four:** Finalize the *Compensatory Education* document and provide a copy to the parent/guardian in addition to the *Conference Recommendations*. Document this as an SSM Event.

**NOTE:** CPS staff can reference the [Compensatory Education in SSM](#) document.

## Revocation of Consent

Parents/guardians may revoke consent for evaluations (initial and reevaluations) and for the provision of special education services at any time. According to Illinois state regulations, parents/guardians may revoke this consent either in writing or orally.

Any time a parent/guardian orally revokes consent, the school must memorialize the parent/guardian's revocation in writing within five calendar days and provide the parent/guardian with a copy of the written summary of the oral revocation. The written summary indicates that the school understands that the parent/guardian is revoking consent for an evaluation (initial or reevaluation) and/or special education services. The written summary includes a statement indicating that the parent/guardian contacts the school immediately if the parent/guardian disagrees with the school's summary.

**NOTE:** To ensure the parent's/guardian's intentions to revoke consent are clear, it is imperative that teams explain the implications of revocation. The written summary of oral revocation is completed on school letterhead, shared with parent/guardian, logged as an SSM Event, and uploaded to SSM. It is strongly recommended to email the revocation summary to the parent/guardian (if the [Parent/Guardian Authorization to Send IEP/504 Documents and Related Information via Electronic Mail](#)<sup>122</sup> form has been completed) and have them either confirm receipt or sign the revocation.

### When a parent/guardian revokes consent, the following procedures are followed:

#### Special Education and Related Services:

The school must provide prior written notice to the parent/guardian within 10 calendar days of either the receipt of the written revocation of consent for services or of the written summary of the parent/guardian's oral revocation of consent for services before ceasing the student's special education and related services.

**NOTE:** The five calendar days for the written summary of oral revocation are included in the 10 calendar days for PWN requirements for revocation of consent.

A student whose rights have transferred at age 18 may revoke services unless the adult student delegated educational rights to the parent/guardian or a legal guardian for the student has been appointed by a court. In these instances, prior written notice is given to both the student and the parent/guardian. The prior written notice must be provided using the appropriate form - *Consent Revoked for Services*. The notice includes a statement that all special education and related services will cease because of the revocation of consent. The school ceases services no later than 10 calendar days after the revocation of consent.

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<sup>122</sup> [Autorización para el Padre/Tutor para mandar documentos del IEP/504 e información relacionada a través de Correo Electrónico \(E-mail\)](#)

IDEA does not allow the district to request mediation or a due process hearing when a parent/guardian has revoked consent for special education and related services.

### Evaluations:

If the parent/guardian revokes consent for an initial evaluation or reevaluation, the evaluation process must stop immediately. The revocation is acknowledged on either the *Revoked Consent for Initial Evaluation* or the *Revoked Consent for Reevaluation* form. The school will have the option of requesting a due process hearing to obtain an order from a hearing officer to proceed with the evaluation process. Neither IDEA nor state regulations set a time limit for this due process request; however, IDEA mandates three-year reevaluations and has a time frame associated with them. If a parent/guardian revokes consent for a three-year reevaluation, the school must contact the Law Department at (773) 553-1700 at least 30 days prior to the due date for completion of the three-year reevaluation so that a due process request can be considered.

If a parent/guardian revokes consent for special education and related services and later requests to resume special education services, the request must be treated as a request for an initial evaluation. Once services have ceased, the student whose parent/guardian revoked consent will be considered a general education student. All rights and responsibilities previously held by the student (as described in the [Procedural Safeguards](#)), including special education disciplinary protections, will also cease.

The school is not required to amend the student's educational records to remove any reference to the student's receipt of special education and related services because of the revocation. Parent/guardian requests to amend/expunge a student record must be made in compliance with the CPS Board Policy on [Parent and Student Rights of Access to and Confidentiality of Student Records](#).

## Parent/Guardian Request for Independent Educational Evaluation (IEE)

Parents/guardians have the right to request an independent educational evaluation (IEE) at public expense if they disagree with an evaluation conducted by CPS. The parent/guardian must make a written request for an IEE at public expense to the Chief Executive Officer (CEO) of the Chicago Public Schools and the Chief of OSD, 42 W. Madison, Chicago, IL 60602.<sup>123</sup> Upon receipt of the parent/guardian's IEE request to the CEO/Superintendent, CPS will decide whether to grant the IEE request or request a due process hearing to show the appropriateness of the CPS evaluation. If the parent/guardian's written request for an IEE is sent directly to the school, the school must inform the parents/guardians to submit the request to the CEO's office. The school must also contact the Law Department immediately regarding the anticipated IEE Request at 773-553-1700.

## Parentally-Placed Private School Students with Disabilities<sup>124</sup>

IDEA, along with federal and state regulations, contains specific provisions governing the Chicago Public Schools' obligations under Child Find and the provision of services to students with disabilities placed by their parents/guardians in a private, not-for-profit elementary or secondary school or children who are homeschooled. These provisions have been extended to include non-resident students with disabilities who attend a private school located within the City of Chicago.

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<sup>123</sup> Contact information for the CEO can be found at <https://www.cps.edu/about/departments/executive-offices/> and emails can be sent to [osd@cps.edu](mailto:osd@cps.edu) for the Chief of OSD.

<sup>124</sup> [OSEP Q&A On Serving Children With Disabilities Placed By Their Parents In Private Schools](#)

## Child-Find Obligations

Under IDEA, public schools are required to identify, locate, and evaluate all children residing in their attendance area who may have a disability and be in need of special education services. This legal mandate also extends to children who attend private schools if they attend a private school located within the city, regardless of whether the student lives in Chicago.

**NOTE:** For students found eligible for services, once CPS is put on notice that a student has been unilaterally placed (privately enrolled) by a parent/guardian, CPS is obligated to conduct annual reviews and three-year reevaluations (triennials).

When a parentally placed private school student is referred for an evaluation, the procedures to follow include:

### Students Attending a Private School in the City of Chicago

For students who attend a private school located in the City of Chicago, whether or not the student lives in the city or for a student who lives in the city and is home-schooled, the referral for an evaluation is submitted directly to OSD by email to [privateschoolevals@cps.edu](mailto:privateschoolevals@cps.edu). In either case, the parent/guardian must register/enroll the child as a non-attending student, and OSD staff will complete the registration/enrollment process. OSD will follow the same evaluation process as described in the [Full and Individual Evaluation \(FIE\)](#) section of this document.

For students who live in the City of Chicago and are found eligible to receive special education and related services, an IEP is developed as if the student would be attending a CPS school. If the parents/guardians inform OSD that their child will not attend a CPS school, and the parent/guardian signs the *Parent Waiver of IEP Development* form, an IEP does not have to be developed, and OSD, in collaboration with the student's private school, may develop an Individual Service Plan. In addition, CPS is obligated to conduct annual reviews and three-year evaluations as long as the student continues to reside in the City of Chicago.

For students who do not live in the City of Chicago and are found eligible to receive special education and related services, the resident school district is responsible for developing a full IEP. If the parent/guardian chooses to continue at the private school located in the City of Chicago, OSD, in collaboration with the student's private school, may develop an Individual Service Plan. The Individual Service Plan will be developed, reviewed, and revised consistent with IEP timeline requirements.

### Students Residing in the City of Chicago but Parentally Placed in a Private School Outside the City of Chicago

If the parent/guardian requests an initial evaluation or reevaluation, the parent/guardian should be referred to the school district where the private school is located for the evaluation. However, CPS, as the student's resident district, is required to conduct an evaluation if the parent/guardian requests one for the purpose of making FAPE available to the child.<sup>125</sup>

If a parent/guardian or other school district presents a special education eligibility finding from the school district in which the private school is located, the student should be enrolled as a non-attending student by

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<sup>125</sup> See Questions A-4, [OSEP Questions And Answers On Serving Children With Disabilities Placed By Their Parents In Private Schools - February 2022](#)

completing the form that will be sent by the citywide assessment team (privateschoolevals@cps.edu), and an IEP must be developed.

### Proportionate Share Services<sup>126</sup>

IDEA requires that CPS spend a proportionate share of its IDEA funds to provide special education and related services to students with disabilities placed in private schools by their parents/guardians, including home-schooled students. Unlike the Child Find obligation, the proportionate share obligation only extends to students with disabilities who attend a private, not-for-profit, elementary, or secondary school located within the City of Chicago, whether or not the student is a resident of the City.

OSD determines the proportionate share services each year, pursuant to the procedures outlined in IDEA.

OSD will develop an Individual Service Plan for students eligible to receive proportionate share services. These students do not have due process rights to challenge the content of the service plan, only those related to Child Find.

### Students with Disabilities Transferring from CPS and Other School Districts

If a student with a disability transfers from another CPS school, including CPS charter schools, the IEP must be implemented as written. If the school disagrees with something in the IEP, the parents/guardians must be notified, and an IEP meeting must be held to discuss the concerns. If the prior CPS school began the FIE process, the new school must continue the FIE process wherever the prior school left off.

For students with disabilities who transfer to CPS from another school district, whether an Illinois district or out-of-state district, CPS school staff must immediately, but no later than the next business day after enrollment, request from the sending school district the student's school records, including the IEP, evaluation data and any other records relating to the student's disability and the provision of special education and related services. If the records are not received within one week of the request, the CPS school calls the transferring school to expedite the receipt of the records. All requests for student records and follow-up contacts with the transferring school are noted in the student's temporary file and documented as an SSM Event.

CPS must ensure that these transfer students with disabilities immediately receive FAPE. The receiving school determines if it will adopt the IEP as written by the transferring school district or whether it will implement "comparable" services to those described in the other school district's IEP until the CPS school develops a new IEP. The school must consult with the parent/guardian to determine what "comparable" services will be provided.

**In order for the CPS school to adopt the transferring district's IEP, the following three conditions must exist:**

- The school must have a full copy of the student's current IEP;
- The parents/guardians must agree with the current IEP; and
- The school determines the current IEP is appropriate, and all services can be implemented as written.

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<sup>126</sup> [ISBE Guidance Document: Nonpublic Proportionate Share Services](#)

If the transferring district's IEP is not adopted, the CPS school must develop a new IEP and provide comparable services in the interim. While the "comparable" services are being implemented, the school must decide whether an FIE is necessary before the new IEP can be developed. If the IEP team determines an FIE is necessary, it needs to be conducted in an expedited manner. A *Notice of Conference* must be sent within 10 calendar days of enrollment indicating a date and purpose for the IEP meeting.

The *Parent/Guardian Consent for Initial Provision of Special Education and/or Related Services* form should be completed for students with disabilities transferring from other school districts as part of the out-of-district IEP transfer process.

**NOTE:** CPS staff visit the [Out of District IEP Transfer Process Checklist](#) for more information.

## Dispute Resolution<sup>127</sup>

### State-Sponsored IEP Facilitation

State-sponsored IEP facilitation is a process that helps foster effective communication between parents/guardians and the district as they develop mutually acceptable IEPs. This process may be used as a preventative measure in which a trained facilitator promotes whole-team participation, acknowledging and addressing differing opinions in a respectful and neutral manner. IEP facilitation can improve relationships between the district team and parents/guardians in order to effectively plan services to meet the needs of the student. Any member of the IEP team, including parents/guardians, may request IEP facilitation. Requests can be made via the [State-Sponsored IEP Facilitation Electronic Request Form](#).

**NOTE:** IEP Facilitation is a voluntary process. Both parties must agree that it would be valuable to have a neutral facilitator present at the IEP meeting to assist with the development of the IEP **before** a facilitator is identified by ISBE.

### State-Sponsored Mediation

Mediation is a formal process of conducting a meeting led by an ISBE-appointed neutral mediator to resolve a disagreement between a parent/guardian and the district about the services and supports needed by a student with a disability. A mediation can occur whether or not a formal complaint or due process hearing request is on file. Requests for state-sponsored mediation can be made by filling out the [ISBE Mediation Form](#) and following the instructions for submission on the form.

**NOTE:** Mediation is a voluntary process. Both parties must agree to participate in mediation before a mediation can take place, and ISBE must identify a third-party, neutral mediator. Upon request, the district must provide a qualified interpreter at mediation for a parent/guardian whose normally spoken language is other than English.<sup>128</sup>

### State Complaint<sup>129</sup>

A state complaint is a formal process where a person submits a written complaint to ISBE, claiming that the school/district has violated state or federal special education regulations. The complaint must identify the student(s), the facts that have led to the dispute, and the suggestions for how the situation needs to be

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<sup>127</sup> For additional information, see [ISBE Effective Dispute Resolution](#), [ISBE Parent Guide](#) & [ISBE Qualified Interpretation and Translation Services in Mediation and Due Process Hearings - March 2024](#). Advocacy resources are available: [Parent Advocates - Local Services](#) & [ISBE Advocacy Resources](#).

<sup>128</sup> [105 ILCS 5/14-6.01; 5/14-8.02; 5/14-8.02a](#)

<sup>129</sup> [ISBE State Complaint Process](#)

fixed. A complaint can result in a letter of finding that requires the district to engage in a corrective action to remedy the violation. A state complaint can be submitted via the [Request for State Special Education Complaint](#) form.

### Impartial Due Process Hearing

An impartial due process hearing is a formal legal proceeding that occurs if a parent/guardian or the district files a complaint requesting a due process hearing. The hearing may involve attorneys and advocates for each side and will result in a legally binding written decision that can be appealed to a court of law. A parent/guardian can request a due process hearing via the [Parent Request for an Impartial Due Process Hearing](#) form.

### Access to Educational Records

The records of students with disabilities shall be maintained confidentially in accordance with the requirements of IDEA, the Family Educational Rights and Privacy Act (FERPA), the Illinois School Student Records Act (ISSRA), the Illinois School Code, the Illinois Mental Health and Developmental Disabilities Confidentiality Act and, where applicable, their implementing regulations.

Student records are defined as “Any writing or other recorded information, whether in paper or electronic form, concerning a student and by which a student may be individually identified, maintained by a school or at its direction or by an employee of a school, regardless of how or where the information is stored.”<sup>130</sup> For a more comprehensive review of the treatment of student records, review the district’s policy on [Parent and Student Rights of Access to and Confidentiality of Student Records](#) and [Student Records Retention](#). These policies include the records of students with disabilities. Outside of the exceptions listed in the policy, student records and the information in them must not be released or disclosed to anyone without the authorization of the student’s parent/guardian.

**NOTE:** The [Consent for Release/Exchange of Student Records and Information](#)<sup>131</sup> must be completed, signed, and uploaded to SSM for student records to be released to any outside party. Consent forms are valid for one year from the signature date.

Each local school principal ensures that the privacy rights of students with disabilities are protected. Without parent/guardian authorization, information about students (including information identifying students as having a disability) must not be disclosed or posted, publicly or privately.

**NOTE:** This includes postings online, on whiteboards, bulletin boards, or on paper in public places. For example, a schedule of evaluations or IEP meetings that contains student names, student ID numbers, or other information that could identify the students would be considered a disclosure of student record information.

**Consistent with state law, each school principal or principal’s designee assumes responsibility for ensuring the confidentiality of student information and student records and shall:**

- Respond within 10 business days to any request for inspection and review of an education record, including a request for a copy of an education record, subject to certain statutory extensions;
- Respond to any request for an interpretation of an education record;
- Respond to any request to amend an education record;

<sup>130</sup> [Parent and Student Rights of Access to and Confidentiality of Student Records](#)

<sup>131</sup> [Consentimiento para la Divulgación/Intercambio de Registros e Información del Estudiante.](#)

- Respond to any request to disclose or release student record information;
- Respond to any request to destroy an education record;
- Keep a record of parties obtaining access to education records, including the name of the party, the date access took place, and the purpose of the authorized use;
- Maintain, for public inspection, a current listing of names and positions of the employees who may have access to student record information;
- Provide a parent/guardian, upon request, a list of the types and locations of education records collected, maintained, or used by the district;
- Ensure that confidentiality of student record information at collection, storage, disclosure, and destruction stages is protected; and
- Ensure that each person collecting or using student information shall receive training or instruction regarding the policies and procedures governing the confidentiality of that information.

The school principal or principal's designee ensures that all student records, including records for students with disabilities, are maintained in a central and secure location. No original records may be removed from the property of CPS.

Each school will maintain a record of all requests to review student records and any disclosure of student records. The record of requests to review and disclose student records must contain the name of the student, the name of the person making the request, the purpose of the request, the date of the request, the date of the review, and the name of the school official with whom the review was made. A notation indicating a student's record has been reviewed must be filed in the student's cumulative folder.

## Notice to Parent/Guardian/Adult Student

When a student with a disability reaches the age of majority (18 years of age) or becomes an emancipated minor pursuant to the Emancipation of Minors Act, special education rights transfer from the parent/guardian to the student. Both the parent/guardian and the student shall receive written notification of the transfer of rights at the student's IEP meeting convened during the school year in which the student turns 17 years of age. Upon reaching 18 years of age, both the parent/guardian and the student shall receive written notification that the rights have been transferred.

***NOTE:** If a student has been adjudged as a person with a disability or has executed a Delegation of Rights to Make Education Decisions form that is still in effect, the special education rights are retained by the parent/guardian or the adult designated in the Delegation of Rights to Make Education Decisions form.*

## ADDITIONAL GUIDELINES

### Observations by Parents/Guardians, Independent Evaluators, or Other Qualified Professionals

To ensure that a parent/guardian can participate fully and effectively with school personnel in the development of appropriate educational and related services for their child, the parent/guardian, independent educational evaluator, or a qualified professional retained by or on behalf of the parent/guardian must be afforded reasonable access to educational facilities, personnel, classrooms, buildings, and the student. This requirement pertains to any CPS facility, building, or program, including non-public facilities in which CPS has placed a student receiving special education services.

Prior to an observation, the parent/guardian must inform the principal in writing of the proposed visit, its purpose, and the requested duration using the [Request to Access Classroom\(s\) or Personnel for Special Education Evaluation and/or Observation Purposes](#) form. The parent/guardian and the principal/designee must arrange the visit(s) at reasonable times that are mutually agreeable. The principal must afford the parent/guardian, independent educational evaluator, or qualified professional access of sufficient duration and scope for the purpose of conducting an evaluation of the student, the student's performance, current/proposed educational program, placement, services, or environment. Such access may include interviews of educational personnel, student observations, and tests/assessments. If one or more interviews of school personnel are part of the evaluation, the interviews must be conducted at a mutually agreed upon time, date, and place that does not interfere with the school employee's school duties. CPS may limit interviews to personnel having information relevant to the student's current/proposed educational services, program, or placement.

**NOTE:** Prior to conducting interviews, the Parent/Guardian Authorization to Release Student Record Information must be signed on the [Request to Access Classroom\(s\) or Personnel for Special Education Evaluation and/or Observation Purposes](#) form or the [Consent for Release/Exchange of Student Records and Information](#)<sup>132</sup> form must be completed. Consent forms are valid for one year from the signature date.

The parents/guardians, independent educational evaluator, or other qualified professional must comply with school safety, security, and visitation policies at all times and not disrupt the educational process. They must also comply with the requirements of applicable privacy laws, including laws protecting the confidentiality of education records, such as the federal Family Educational Rights and Privacy Act (FERPA) and the Illinois School Student Records Act.

**NOTE:** Observing parties classify as a visitor, not a volunteer. Visitors must be accompanied by school personnel for the duration of the visit.

The local school district representative may contact the OSD SEC for assistance when a parent/guardian asks to observe, or asks to have an independent educational evaluator or other qualified professional observe.

## Medicaid Billing Consent

CPS provides health evaluations and related health services to students at no cost to parents. CPS participates in a state program whereby the state makes payment available to CPS for health evaluations and related health services provided to students.

The Medicaid Billing Consent Form is automatically added to IEPs when it is indicated that the student is to receive health related services such as speech, occupational therapy, physical therapy, psychology, social work and/or nursing. CPS may be reimbursed by the State of Illinois for eligible health-related services. In order to facilitate the process, parents must consent in writing using the *Consent for State Reimbursement of Health Related Services* form. By signing this form, CPS shares student health information with the State of Illinois for billing and payment purposes only. The State of Illinois is legally obligated to maintain confidentiality.

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<sup>132</sup> [Consentimiento para la Divulgación/Intercambio de Registros e Información del Estudiante.](#)

Whether the State of Illinois reimburses CPS has no effect on a family's insurance/benefits program. CPS continues to provide students health services whether or not parents provide such consent, which is only required one time. Parents may notify the district at any time should they change their agreement to consent.

## Break in Service

If there is a break in IEP services outside of the ten school days immediately following the finalization of an IEP, **school administrators notify families in writing of the break in service, such as for staff leaves, vacancies, etc.** via the *Break in Service* form in SSM. This includes a description of the service(s) that has been interrupted, including a date as to when the interruption started. Include information as to when the service is expected to start, if known, supports being provided in the meantime, and any compensatory services being affirmatively offered.

While [23 IAC §226.220\(b\)](#) requires a *Notice of Non-Implementation* form be provided if any part of a student's IEP has not been implemented **within 10 school days** of the IEP services' expected implementation period (typically 10 school days following the development of the IEP, unless the frequency of the services is not set as a daily or weekly service), the break in service form is not legally mandated but is utilized by the District to communicate to families when an interruption of any IEP service occurs outside of the NONI timeframe (see [Notification of Non-Implementation of IEP Services \(NONI\)](#) section).

**NOTE:** *When services resume, notify families in writing. This letter/email communication should be uploaded in SSM and maintained in the student's special education file.*

## Translation of Vital Documents<sup>133</sup>

All Illinois school districts must provide written translation<sup>134</sup> of the Vital Documents into the ten most commonly spoken languages in Illinois<sup>135</sup> other than English. Translated documents must be provided to Limited English Proficiency parents/guardians of children with disabilities. Translated information must include the student-specific content in the Vital Documents.

The state of Illinois identifies Vital Documents as follows:

- IEP
- Notice of Conference
- Conference Recommendations
- Procedural Safeguards
- Parent/Guardian Consent for Initial Evaluation
- Parent/Guardian Consent for Reevaluation
- Evaluation Reports
- Eligibility Determination
- Manifestation Determination Review documents
- IEP Progress Reports/IEP Report Cards
- Medicaid Consent Forms

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<sup>133</sup> [23 Ill. Adm. Code 226.75, 226.500](#). For additional information, see [Interpretation & Translation Procedure \(4-2025\)](#) and [ISBE Guidance Document Qualified Interpreting and Translation Requirements](#).

<sup>134</sup> "Translation" refers to written translation of documents, whereas "interpretation" refers to oral interpretation.

<sup>135</sup> The top 10 languages are identified by the most recently published [English Learners in Illinois Statistical Report](#).

A translated *Conference Recommendations* form must be provided simultaneously with English IEP documents. All reasonable efforts must be made to provide the translated IEP **within seven school days after the IEP meeting** or as soon as possible thereafter. All other vital IEP documents must be translated and provided to the parents/guardians as soon as practicable **but not more than 30 school days after the IEP meeting**.

Parents/Guardians may also request translation of documents not on the Vital Documents list that have a vital relation to the child's educational planning. Direct such requests to the school's case manager. If a case manager requires assistance, consultation with the OSD SEC is recommended.

All translations must be performed by competent translators who have undergone sufficient professional training regarding special education terminology and processes or by outside vendors that are commercially recognized as providing competent translation services. In the alternative, an automated translation program or application approved by the OSD Translation Manager may be utilized; however, the results must be reviewed and edited as needed by a qualified individual. All translations must be certified to be true and accurate to the best of the translator's knowledge and ability.

**NOTE:** Additional documents may be available for translation in SSM. CPS staff access the [Translations in SSM Guidance Document](#).

Translation of all documents will be done in a confidential manner that complies with FERPA and ISSRA.

## Prohibition Against Requiring Medication

IDEA prohibits educators from requiring a student to obtain a prescription for medication as a condition of attending school, receiving an FIE, or receiving special education and related services. Teachers and other school personnel are not prohibited from consulting or sharing classroom-based observations with parents/guardians regarding a student's academic and functional performance, behavior in the classroom or school, or the need for evaluations for special education or related services.

## Notification of Services from Illinois School for the Deaf and Illinois School for the Visually Impaired

Public Act 093-0282 amended The School Code by changing Section 14-8.02 to read: "If the child is deaf, hard of hearing, blind, or visually impaired and he or she might be eligible to receive services from the Illinois School for the Deaf or the Illinois School for the Visually Impaired, the school district shall notify the parents or guardian, in writing, of the existence of these schools and the services they provide. This notification shall include, without limitation, information on school services, school admissions criteria, and school contact information."

This information/documentation must be included within the IEP for students who are deaf, hard of hearing or visually impaired. The *Notification of Services from Illinois School for the Deaf and Illinois School for the Visually Impaired* form and the accompanying *Illinois School for the Visually Impaired* and *Illinois School for the Deaf Fact Sheet* forms are under "Other Sections" within the IEP in SSM. They can also be found on the ISBE website: <https://www.isbe.net/Pages/Deaf-and-Visually-Impaired.aspx>.

## Practitioner Orders for Life-Sustaining Treatment (POLST)

In the state of Illinois, POLST forms have evolved from previous versions of a do not resuscitate (DNR) form. The POLST enables a patient to take control of their medical care while establishing a plan of care that aligns with their treatment wishes. If a student has a POLST on file with the school, the following guidelines must be followed in order to ensure the POLST is carried out as it is a legally binding document for the student.

**Upon receipt and after review of the POLST form, the registered nurse shall initiate the following steps:**

1. Notify the principal and case manager that the POLST was received.
2. Arrange an in-person conference with the parent, appropriate school staff, and RSPs. The school nurse meets the parent/guardian initially, then allows time for appropriate school staff to meet with the parent/guardian.
3. Prior to the conference, the school nurse will review the student's IEP or Section 504 Plan. If the student does not have an IEP or Section 504 Plan, the nurse will refer the student for an evaluation to determine whether the student is eligible for a Section 504 Plan or IEP. A revision to the IEP or Section 504 Plan must be made noting the POLST.
4. The purpose of this conference is to outline the expectations, procedures, and goals of care per parent/guardian wishes. Specific team members and their roles will be identified at the meeting. The student's IEP or Section 504 Plan is reviewed with emphasis on the POLST. The registered nurse (CSN or HSN) is responsible for communicating with the parent every month for any updates or changes to the student's plan of care. All contact information must be confirmed with the parent/guardian at this time. The parent/guardian must sign a [Consent for Release/Exchange of Student Records and Information](#)<sup>136</sup> to initiate communication with the provider.
5. The signed POLST form is uploaded under the designated title in SSM. Any additional medical forms are also uploaded with current contact information. An additional flag will be noted in ASPEN.
6. Student confidentiality must be maintained at all times. Only staff with a legitimate need to know will be informed of the student's POLST status. These staff members will be trained to follow the expected procedures regarding the student's POLST.

### Implementing the POLST

**If a student with a POLST form experiences a respiratory or cardiac arrest or is in distress, the designated team member must take these steps:**

1. Call the RN and the student's parent/guardian.
2. Call the main office to activate 911 immediately.
3. Isolate the student by moving to a private area or screen off the area.
4. Provide access to emergency medical services upon their arrival.
5. Provide emergency medical services with a copy of the student's POLST.

**Copy of POLST Must be Kept:**

- In the main office;
- By the RN; and
- With the student's homeroom teacher.

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<sup>136</sup> [Consentimiento para la Divulgación/Intercambio de Registros e Información del Estudiante.](#)

**NOTE:** The POLST must be included with instructions provided to any substitute nurse or teachers working with the student.

## Revocation of a POLST

- A POLST may be revoked at any time with the written consent of the parent/guardian who signed the initial form.
- If the parent/guardian revokes, such revocation must be put in writing and uploaded to SSM. The revocation will be noted in the student's record and appropriate members of the student's team will be notified.

## Service Animals

If a student with a disability requests the use of a service animal at school, school activities, and/or on the bus to/from school, the parent/guardian must complete the *Service Animal Request - For Students* form found in SSM outside of the IEP process.

A service animal is a dog<sup>137</sup> that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability.

**NOTE:** Emotional support animals, comfort animals, resident animals, and therapy dogs are **NOT** service animals under the ADA and are not allowed in any CPS school, on Board property, or at Board events. Other species of animals, whether wild or domestic, trained or untrained, are also not considered service animals.

A parent/guardian of a student with disabilities (or the student, if 18 years or older) who wishes for a child with a disability to have the use of a service animal provided by the family during school hours and/or at school activities must contact the Principal, or their designee. The request must be memorialized on the *Service Animal Request - For Students* form found in SSM.

Prior to the service animal entering the school building or attending a school activity, the local school district representative must meet with the parents/guardians and complete the *Service Animal Accommodation* form found in SSM.

As part of the *Service Animal Request - For Students* form and *Service Animal Accommodation* form, the parent/guardian must identify the work or tasks the service animal will perform for the student during school and/or at school activities. The work or tasks performed by a service animal must be directly related to the student's disability. Examples of work or tasks include, but are not limited to:

- Assisting students who are blind or have low vision with navigation and other tasks;
- Alerting students who are deaf or hard of hearing to the presence of people or sounds;
- Pulling a wheelchair;
- Assisting a student during a seizure;
- Alerting a student to low blood sugar level;
- Alerting students to the presence of allergens;
- Alerting staff when a student with a disability is in distress;
- Carrying or retrieving items, such as books, school supplies or medicine;

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<sup>137</sup> In certain circumstances, entities covered under the ADA must also permit the use of a miniature horse.

- Providing physical support and assistance with balance and stability to students with mobility disabilities; or
- Preventing or interrupting impulsive or destructive behaviors, including retrieving students who elope.

Work or tasks do **NOT** include providing therapeutic benefits to the student through emotional support or companionship.

If any accommodations are needed to assist the student in handling the service animal during school hours and at school activities, these accommodations must be listed on the *Service Animal Accommodation* form. Such accommodations may include, but are not limited to, allowing the student a certain time during the school day to take the service animal outside to allow the animal to relieve itself, identifying how/where/when the student will feed and water the service animal, etc. If the student's age and/or disability make it impossible for the student to act as the dog's handler, this should be noted as an accommodation and identify the person who will act as handler. The adult handler will be expected to comply with the Board's [Volunteer Policy](#), including successfully completing a background check.

**NOTE:** A Board employee must **NEVER** be identified as the dog's handler.

The Principal must ensure that all necessary school personnel have access to and/or copies of the *Service Animal Accommodation* form. The Principal, as appropriate, also ensures that other members of the school community are made aware of the presence of the service animal.

**NOTE:** Service animals do not have to be hypoallergenic. If another student is allergic to dogs and the presence of the service animal is affecting a student in school, the allergic student may require additional evaluations or accommodations. If the allergic student is already on an IEP or Section 504 Plan, that student's plan is revised to address any accommodations needed because of the presence of the service animal. If the allergic student is not on an IEP or Section 504 Plan, a Section 504 evaluation is considered to determine if the student qualifies under Section 504 for accommodations during school because of the presence of the service animal.

## Safety Plans<sup>138</sup>

A Safety Plan is designed to provide special supervision to an individual student (either with disabilities or without disabilities), with the goal of minimizing the risk of harm to that student or the risk of the student causing harm to others. A Safety Plan addresses issues of safety, includes specific interventions that target dangerous or potentially dangerous behavior, and identifies individuals who are responsible for implementing the Plan. A Safety Plan does not require parent/guardian consent and can be developed or revised at any time by a school team without regard to whether a student has or may need an FBA/BIP. A Safety Plan is **not part of a Student's IEP**, but should be attached to a Student's IEP where appropriate. Safety Plans are always uploaded in ASPEN. The Office of Social and Emotional Learning (OSEL), the Office of Student Protections (OSP), and Safety & Security can be partners in developing Safety Plans.

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<sup>138</sup> For additional information, see [Office of Student Protections & Title IX \(OSP\) Procedure Manual](#) and the [Crisis Management Manual \(2021\)](#).

## Physical Restraint and Time Out (PRTO)<sup>139</sup>

The use of physical restraint and/or time out is applicable to CPS students, with and without disabilities, and must only be used when the student's behavior presents an imminent danger of serious physical harm to the student or others, and other less restrictive and intrusive measures have been tried and proven ineffective in stopping the imminent danger of serious physical harm, there is no known medical contraindication to its use on the student, and the school staff members or members applying the intervention have been fully trained in its safe application of such techniques. A physical restraint must immediately end when the threat of imminent danger of serious physical harm ends or the student indicates the inability to breathe or staff supervising the student recognize the student may be in respiratory distress.

Staff may employ a brief momentary physical intervention (i.e., 5 seconds or less) with any student (with or without disabilities) using limited force in emergency situations to prevent the student from completing an act that would result in physical harm to themselves or another person. PRTO must not be used as a form of discipline or punishment. The use of isolated time out, supine restraint, prone restraint, mechanical/chemical restraint for the purpose of managing behavior or maintaining discipline, and the use of restraints that restrict the student's breathing are prohibited.

All PRTO incidents must be reported in Aspen within 24 hours. The school administration must make every attempt to notify the student's parents/guardians of a PRTO incident by the end of the school day. Within 24 hours after the use of PRTO, the parents/guardians must be sent a copy of the completed ISBE PRTO form, a copy of the standards for when PRTO can be used, information about parent and student rights, information about the state complaint process, and written notice informing the parents/guardians of their right to meet to discuss the PRTO incident must be sent no later than 2 days after the incident occurred. Parents/guardians needing additional information should email [OSD@cps.edu](mailto:OSD@cps.edu).

## Guidelines for Special Education Class Size<sup>140</sup>

ISBE has established special education rules regarding class size.<sup>141</sup> The focus remains on the number of students with disabilities, which refers to students with IEPs per classroom, per class period – not the number of students assigned to any particular teacher on their “caseload;” however, the definition of “students with disabilities,” solely for the purposes of class size, excludes a student who only receives speech services outside of the general education classroom and who does not require modifications to the content of the general education curriculum.

### General Education Classrooms

When a student's IEP calls for services in a general education classroom, the student must be served in a class that has no more than 30% of students with disabilities, excluding speech-only students who receive their speech-language services outside of the general education classroom. Additionally, the general education curriculum must be utilized, and the class cannot be deemed a “remedial” class.

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<sup>139</sup> For additional information regarding requirements, restrictions, and procedures related to the use of physical restraints, time out, and momentary physical interventions in CPS schools, see [ISBE: Physical Restraint, Time Out, and Isolated Time Out](#), [CPS: Behavioral Interventions, Physical Restraints, Time Outs, and Momentary Physical Intervention for Students](#), and [Reducing PRTO & Increasing PBIS | School Leader Handbook](#).

<sup>140</sup> CPS staff, visit [CPS INTRANET Scheduling](#) & [School Scheduling Guidance Overview & Look-Fors](#).

<sup>141</sup> [23 Illinois Administrative Code 226.730](#)

## Separate Special Education Classrooms

In determining the number of students with disabilities in a separate special education class, the amount of required special education services (ARS) is the determinant factor in class size, **not the student's LRE**. The bell-to-bell minutes appear in the first line under Section 12 and refers to the total number of minutes per week. A student's ARS (total number of specialized instructional minutes) is calculated by totaling all three columns: Direct Services in General Education Class, Direct Services in a Separate Class, and Community-Based Instruction<sup>142</sup> and dividing by the total instructional minutes for the week.<sup>143</sup>

- Students receiving special education and related services for up to 20% of the school day – The separate special education class can have no more than fifteen (15) students with disabilities per class period. Two additional students, for a total of seventeen (17) students per class period, can be added if a paraprofessional is present at all times that the class enrollment exceeds fifteen (15) students.
- Students receiving special education and related services for 21% to 60% of the school day – The separate special education class can have no more than ten (10) students with disabilities per class period. Five additional students, for a total of fifteen (15) students per class period, can be added if a paraprofessional is present at all times that the class enrollment exceeds ten (10).
- Students receiving special education and related services for more than 60% of the school day - The separate special education class can have no more than eight (8) students with disabilities per class period. Five additional students, for a total of thirteen (13) students per class period, can be added if a paraprofessional is present at all times that the class enrollment exceeds eight (8).
- Students ages three through five – The separate special education class for students ages three through five can have no more than five (5) students with disabilities per class period. Five (5) additional students, for a total of ten (10) students per class period, can be added if a paraprofessional is present at all times that the class enrollment exceeds ten (10).

**NOTE:** A dedicated paraprofessional specified on a student's IEP **cannot** be the ISBE class-size paraprofessional; however, shared paraprofessional support can be the ISBE class-size paraprofessional.

The age, nature, and severity of the students' disabilities and their academic and functional needs are considered when grouping students with disabilities in separate special education classrooms. They should be grouped in relation to their common educational needs and the types of services they require to meet those needs. If such grouping is not possible, the administration should be prepared to explain why and must ensure that the special education services can be individualized to meet the students' needs and the assigned teacher is qualified to plan and provide appropriate instruction for each student in the classroom.

If students with various ARS are grouped in the same class period, the number of students with disabilities in the classroom is controlled by the student with the highest ARS. For example, if a school wanted to schedule eleven students with disabilities who receive 250 minutes per week of special education and related services (ARS 20% or less) and one student who receives 1500 minutes per week of special education and related services (ARS 61% and over) into the same separate special education classroom for the same class period, then the classroom can have no more than eight students. Because the classroom is

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<sup>142</sup> Community-Based Instruction is an instructional method focusing on student academic and functional skills in natural environments, providing real-life experiences to practice essential skills in the areas of daily living, employment, and education to prepare for life after graduation. Community-Based Instruction as part of an LRE placement is intended for students 18-21 which are typically classified as integrated services with the general public.

<sup>143</sup>For most CPS schools, the bell-to-bell elementary school week is 2100 minutes, and the high school week is 2175 bell-to-bell minutes; preschool students in a half-day program have 775 bell-to-bell minutes.

scheduled to have twelve students, a paraprofessional must be in the room the entire time the class exceeds eight students or four of the students must be scheduled for another class period.

Finally, the age range for a separate special education classroom in elementary schools may not exceed four years based on student birth dates. For high schools, the age range may not exceed six years based on student birth dates.

### Special Education Class Size at a Glance<sup>144</sup>

| Classroom Type   | Number of Students with Disabilities   | Number of Special Education Teachers | Number of Paraprofessionals |
|--|--|--------------------------------------|-----------------------------|
| General Education  | No more than 30% per class period, excluding speech-only students, who receive their speech-language services outside of the classroom |                                      |                             |
| Separate Special Education Classroom – ARS 20% or less         | 15   | 1                                    | 0                           |
|  | 16 or 17   | 1                                    | 1                           |
| Separate Special Education Classroom – ARS 21% to 60%          | 10   | 1                                    | 0                           |
|  | 11 to 15   | 1                                    | 1                           |
| Separate Special Education Classroom – ARS 61% and over        | 8  | 1                                    | 0                           |
|  | 9 to 13  | 1                                    | 1                           |
| Separate Special Education Classroom – Preschool 3-5 year-olds | 5  | 1                                    | 0                           |
|  | 6 to 10  | 1                                    | 1                           |

### ISBE Special Education Deviations

All efforts to abide by the class size regulations must be afforded, however, this may not be possible in all instances. Applications for each deviation type can be found on the website, [ISBE Special Education Deviations](#). All applications must be approved by the Chief of OSD and also approved by ISBE **prior to implementing the deviation.**

- 70/30 Class Composition Deviation
- Special Education Class Size Deviation
- Special Education Age Range Deviation

**NOTE:** If a school is considering a deviation, consultation with the OSD SEC is strongly recommended.

<sup>144</sup> This table references current ISBE staffing allocation regulations for students with disabilities. CPS currently over-allocates paraprofessionals for some low incidence classroom environments, which is subject to change.

## Supporting Gender Diversity<sup>145</sup>

Students have the right to be addressed by names and pronouns that correspond to the gender identity they consistently assert at school. Students are not required to obtain a court-ordered name change and/or submit medical or psychological documentation as a prerequisite to being addressed by the name and pronouns that correspond to their gender identity. Parent/guardian consent is not required to address students by their affirmed name and pronouns. School staff shall comply with the Student Administrative Support Team's recommendations in communicating with parents/guardians. See the [Supporting Gender Diversity Toolkit](#) for more information on how to change names in the Student Information System (i.e., Aspen).

**NOTE:** *The team needs to document the student's affirmed name and gender on the Meeting Notes page. The district maintains a permanent student record, which includes the legal name of the student, as well as the student's legal gender marker. That information will auto-populate into the header of the student's SSM documents, but **the team needs to use the student's affirmed name and pronouns throughout the student's documents.***

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<sup>145</sup> [LGBTQ+ Supportive Environments](#)

## APPENDIX A – TIMELINES QUICK REFERENCE

- **Referral Decision** – Within 14 school days of receipt of a referral, the local school district representative, along with other school personnel, must determine whether an evaluation is warranted and provide the parent/guardian with a written response. If an evaluation is warranted, the parent/guardian is provided the [Procedural Safeguards and Notice of Conference](#) at least three school days prior to the Assessment Planning meeting, and the *Assessment Plan* must be completed and sent to parents/guardians within the same 14-school-day period even if the parent does not attend.
- **Initial Evaluation** – Completed within 60 school days from the date parent/guardian signed written consent.  
*NOTE: When fewer than 60 school days are left in the school year, and the parent/guardian has provided written consent, the eligibility determination and the IEP (if the student is eligible) must be completed prior to the first day of student attendance in the next school year.*
- **Reevaluation** – Within 60 school days from the date parent/guardian signed written consent, but no later than three years from the previous IEP meeting at which eligibility was discussed.
- **Notice of Conference (NOC)** – At least 10 calendar days prior to the meeting.
- **Parents/Guardians Disagree Regarding No Additional Information Needed for Evaluation** – Within 10 calendar days, school must respond in writing to parent/guardian’s request for additional evaluation.
- **Additional Assessments Agreed to by Parents/Guardians** – Wait 10 calendar days after the date parent/guardian signed consent for evaluation unless the parent/guardian waived the 10-day waiting period.
- **Evaluation Reports Completed** – At least three school days prior to the FIE meeting.
- **IEP Development** – Initial: within 60 school days after receipt of written parent/guardian consent for initial evaluation (*When fewer than 60 school days are left in the school year, and the parent has provided written consent for the evaluation, the IEP (if eligible) must be completed prior to the first day of student attendance in the next school year*); otherwise within 1 year of previous IEP.
- **Initial Placement or Change in Placement** – 10 school days from the date IEP was finalized unless parent/guardian waives the waiting period.
- **Consideration of Private (Outside) Evaluations** – If received from parent/guardian outside of an IEP meeting, within 10 calendar days after receipt, *Notice of Conference* scheduling IEP meeting must be sent to parent/guardian. Best practice is to schedule a meeting within 30 calendar days of receiving such a report on a mutually agreeable date and time. Receipt of a private evaluation may also require consideration of additional evaluations.
- **Parent/Guardian Requests IEP Prior to Annual Date** – Within 10 calendar days after receipt of request, must send either a *Notice of Conference* scheduling IEP meeting or written explanation as to why no IEP meeting is necessary for the student to receive FAPE. If a meeting will be scheduled, best practice is to schedule such meeting within 30 calendar days of receiving the meeting request on a mutually agreeable date and time.
- **Draft Evaluation Reports** – At least three school days prior to an eligibility determination meeting, provide parents/guardians draft copies of evaluation reports.
- **Draft IEPs** – Illinois law mandates that CPS schools provide parents/guardians draft copies of the IEP, along with copies of all written material that will be considered by the IEP team at the meeting including, but not limited to, evaluation reports and collected data and, if applicable, paraprofessional, ESY, and *Learning Environment Intervention* forms, at least three school days before the IEP meeting.
- **Notification of IEP Non-Implementation (NONI)** – Illinois law mandates CPS schools notify parents/guardians if any IEP services have not been implemented within 10 school days after the IEP meeting. The notification must be provided to the Parent/Guardian **within three school days** of the school’s non-compliance with the child’s IEP.

## APPENDIX B - ACRONYMS/ABBREVIATIONS

|               |  |               |  |
|---------------|--|---------------|--|
| <b>ABA</b>    | Applied Behavior Analysis                                    | <b>IEE</b>    | Independent Educational Evaluation                               |
| <b>AAC</b>    | Augmentative and Alternative Communication                   | <b>IEP</b>    | Individualized Education Program                                 |
| <b>ADHD</b>   | Attention Deficit Hyperactivity Disorder                     | <b>ISBE</b>   | Illinois State Board of Education                                |
| <b>AT</b>     | Assistive Technology   | <b>ISSRA</b>  | Illinois School Student Records Act                              |
| <b>AUT</b>    | Autism   | <b>LEI</b>    | Learning Environment Interventions                               |
| <b>ATRC</b>   | Assistive Technology Resource Center                         | <b>LES</b>    | Learning Environment Screening                                   |
| <b>APRN</b>   | Advanced Practice Registered Nurse                           | <b>LPN</b>    | Licensed Practical Nurse   |
| <b>BIP</b>    | Behavior Intervention Plan                                   | <b>LRE</b>    | Least Restrictive Environment                                    |
| <b>BST</b>    | Behavior Support Team (previously SBSS)                      | <b>MD</b>     | Multiple Disabilities  |
| <b>CAPD</b>   | Central Auditory Processing Disorder                         | <b>MDR</b>    | Manifestation Determination Review                               |
| <b>CAT</b>    | Citywide Assessment Team                                     | <b>MTSS</b>   | Multi-Tiered Systems of Support                                  |
| <b>CPS</b>    | Chicago Public Schools (also referred to as “the district”)  | <b>NOC</b>    | Notice of Conference   |
| <b>CSN</b>    | Certified School Nurse                                       | <b>NONI</b>   | Notice of Non-Implementation                                     |
| <b>D-B</b>    | Deaf/Blindness   | <b>OHI</b>    | Other Health Impaired  |
| <b>DCFS</b>   | Department of Child & Family Services                        | <b>OMME</b>   | Office of Multicultural-Multilingual Education                   |
| <b>DCA</b>    | Delegated Care Aide  | <b>OSD</b>    | Office for Students with Disabilities                            |
| <b>DCP</b>    | Diabetes Care Plan   | <b>OSEL</b>   | Office of Social Emotional Learning                              |
| <b>DD</b>     | Developmentally Delayed                                      | <b>OSP</b>    | Office of Student Protections (Title IX)                         |
| <b>DHS</b>    | Department of Human Services                                 | <b>OT</b>     | Occupational Therapy and/or Therapist                            |
| <b>DRS</b>    | Department of Rehabilitative Services                        | <b>PEL</b>    | Professional Educator License                                    |
| <b>DLM-AA</b> | Dynamic Learning Maps Alternate Assessment                   | <b>PHY</b>    | Physical (Orthopedic) Impairment                                 |
| <b>EC</b>     | Early Childhood  | <b>PLAAFP</b> | Present Level of Academic Achievement and Functional Performance |
| <b>ECSE</b>   | Early Childhood Special Education                            | <b>PRTO</b>   | Physical Restraint and Time Out                                  |
| <b>ED</b>     | Emotional Disability   | <b>PT</b>     | Physical Therapy and/or Therapist                                |
| <b>EI</b>     | Early Intervention   | <b>PUNS</b>   | Prioritization of Urgency of Need for Services                   |
| <b>EL</b>     | English Learner  | <b>PWN</b>    | Prior Written Notice   |
| <b>ESL</b>    | English as a Second Language                                 | <b>RSP</b>    | Related Service Provider   |
| <b>ESY</b>    | Extended School Year   | <b>RTI</b>    | Response to Intervention   |
| <b>FAPE</b>   | Free Appropriate Public Education                            | <b>SCC</b>    | Student Code of Conduct  |
| <b>FBA</b>    | Functional Behavioral Assessment                             | <b>SEC</b>    | Special Education Coordinator                                    |
| <b>FERPA</b>  | Family Educational Rights and Privacy Act                    | <b>SECA</b>   | Special Education Classroom Assistant                            |
| <b>FIE</b>    | Full and Individual Evaluation                               | <b>SEL</b>    | Social/Emotional Learning  |
| <b>HHIP</b>   | Home and Hospital Instruction Program                        | <b>SLD</b>    | Specific Learning Disability                                     |
| <b>HI</b>     | Hearing Impairment   | <b>SLP</b>    | Speech-Language Pathologist                                      |
| <b>HSN</b>    | Health Service Nurse   | <b>SSM</b>    | Student Services Management                                      |
| <b>IAES</b>   | Interim Alternative Education Setting                        | <b>SW</b>     | Social Worker  |
| <b>ID</b>     | Intellectual Disability - Mild, Moderate, or Severe/Profound | <b>TBI</b>    | Traumatic Brain Injury   |
| <b>IDEA</b>   | Individuals with Disabilities Education Act                  | <b>VI</b>     | Visual Impairment  |

# APPENDIX C - DISTRICT, STATE & FEDERAL RESOURCES

## Chicago Public Schools

- Addressing Bullying and Bias-Based Behaviors Policy  
<https://www.cps.edu/about/policies/student-code-of-conduct-policy>
- Chicago Board of Education Policies  
<https://www.cps.edu/about/policies>
- CPS Transportation  
<https://www.cps.edu/services-and-supports/transportation-services>
- Multi-Tiered System of Supports (MTSS) Department  
<https://www.cps.edu/about/departments/multi-tiered-system-of-supports-mtss>
- Office for Students with Disabilities (OSD)  
<https://www.cps.edu/about/departments/diverse-learner-supports-and-services>
- Office of Early Childhood  
<https://www.cps.edu/services-and-supports/special-education/early-childhood>
- Office of Multilingual-Multicultural Education (OMME)  
<https://www.cps.edu/about/departments/multilingual-multicultural-education>
- Office of Student Health and Wellness  
<https://www.cps.edu/services-and-supports/health-and-wellness>
- Office of Student Protections & Title IX (OSP) Procedure Manual  
<https://www.cps.edu/globalassets/cps-pages/about-cps/departments-directory/student-protections-and-title-ix/office-of-student-protections--title-ix-osp-title-ix-procedure-manual-v.7.0-fnl.pdf>
- OSD - Parents of Students with Disabilities  
<https://www.cps.edu/services-and-supports/parent-engagement/parents-of-students-with-disabilities>
- OSD - Policies and Procedures  
<https://www.cps.edu/services-and-supports/special-education/understanding-special-education/cps-policies-and-procedures>
- Students in Temporary Living Situations (STLS)  
<https://www.cps.edu/services-and-supports/crisis-support/students-in-temporary-living-situations>
- Student Records and Transcripts  
<https://www.cps.edu/services-and-supports/student-records-and-transcripts>
- Supporting Gender Diversity Toolkit  
<https://docs.google.com/document/d/1sz2SD1MEts05MyMykwPADWuxGAC1NBftdCSOIEQomtc/edit?usp=sharing>
- Supporting the Mental Health of Young People: Guide for School Staff  
<https://www.cps.edu/globalassets/cps-pages/services-and-supports/health-and-wellness/mental-health/staff-mental-health-guide-english.pdf>

## State

- DCFS- Education Resources for Youth in Care:  
<https://dcfs.illinois.gov/brighter-futures/growing-minds.html>

- Illinois School Code  
<http://www.ilga.gov/legislation/ilcs/ilcs4.asp?DocName=010500050HArt%2E+14&ActID=1005&ChapterID=17&SeqStart=110500000&SeqEnd=116100000>
- Illinois Department of Human Services - Family and Community Services  
<https://www.dhs.state.il.us/page.aspx?item=29734>
- ISBE A Parent Guide: Educational Rights and Responsibilities: Understanding Special Education in Illinois - English  
<https://www.isbe.net/Documents/Parent-Guide-Special-Ed-Aug20.pdf>
- ISBE Educational Surrogate Parent  
<https://www.isbe.net/Pages/Special-Education-Surrogate-Parent-Program.aspx#collapse0undefined>
- ISBE Guidance Document: Behavioral Interventions in Schools: Guidelines for the Development of District Policies for Students with Disabilities  
<https://www.isbe.net/Documents/BAT-Statutory-Guidance.pdf>
- ISBE: Physical Restraint, Time Out, And Isolated Time Out  
<https://www.isbe.net/Pages/restraint-time-out.aspx>
- ISBE Regulations  
<https://www.ilga.gov/agencies/JCAR/EntirePart?titlepart=02300226>
- ISBE Required Notice and Consent Forms (English, Spanish, Arabic, Chinese, Chinese- Simplified, Chinese-Traditional, French, Gujarati, Korean, Polish, Russian, Tagalog, Ukrainian, Urdu and Vietnamese)  
<https://www.isbe.net/Pages/Special-Education-Required-Notice-and-Consent-Forms.aspx>
- ISBE A Parent Guide: Educational Rights and Responsibilities: Understanding Special Education in Illinois - Spanish  
(Available Shortly)
- ISBE: Special Education- Dispute Resolution  
<https://www.isbe.net/Pages/Special-Education-Effective-Dispute-Resolution.aspx>
- ISBE Youth in Care Glossary  
<https://www.isbe.net/Documents/Youth-in-Care-Glossary.pdf#search=glossary>
- Notice of Procedural Safeguards for Parents/Guardians of Students with Disabilities (English)  
[https://www.isbe.net/SPEDReqNotConForms/nc\\_proc\\_sfgrds\\_34-57i.pdf](https://www.isbe.net/SPEDReqNotConForms/nc_proc_sfgrds_34-57i.pdf)
- IEP Quality Project <https://iepg.education.illinois.edu/public/about>
- Office of the Illinois Secretary of State <https://www.ilsos.gov/services/illinks.html>

## Federal

- IDEA regulations  
[https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title34/34cfr300\\_main\\_02.tpl](https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title34/34cfr300_main_02.tpl)
- OSEP Policy Support 22-02: Ensuring a High-Quality Education for Highly Mobile Children  
<https://sites.ed.gov/idea/files/Letter-to-State-Directors-of-Special-Education-on-Ensuring-a-High-Quality-Education-for-Highly-Mobile-Children-11-10-2022.pdf>
- U.S. Department of Education - IDEA (USDOE)  
<https://sites.ed.gov/idea>
- USDOE - Office for Civil Rights (OCR)  
<https://www2.ed.gov/about/offices/list/ocr/index.html>

- USDOE - Office of Special Education Programs (OSEP)  
<http://www.ed.gov/about/offices/list/osers/osep>
- USDOE - Using Functional Behavioral Assessments to Create Supportive Learning Environments  
<https://sites.ed.gov/idea/files/Functional-Behavioral-Assessments-11-19-2024.pdf>