



State Board Approves Some Special Ed “Operating Standards”

At its March 10 and 11, 2008 meeting, Ohio's State Board of Education approved the new special education Rules 01 through 04, and 06 through 09. These rules, along with 05 (due process and procedural safeguards) and 11 (preschool special education) make up the new “Operating Standards for Ohio Schools Serving Children with Disabilities,” which follow the IDEA 2004 law, P.L. 108-46, and its federal regulations issued October 13, 2006. These new “Operating Standards” will become effective on July 1, 2008.

Rule 05, due process and procedural safeguards, and Rule 11, preschool special education, have been refiled for an additional hearing before the Joint Committee on Agency Rule Review of the Ohio General Assembly on April 3. If JCARR approves either or both rules as refiled, it is expected that the State Board of Education will approve them at their April board meeting.

The Ohio Department of Education has been working on a guidance document which will provide additional information for schools as to how to implement the IDEA 2004 law. A group of stakeholders has been advising the ODE as work on this document moves forward. Work on the guidance document may be completed by fall 2008. In addition, the ODE is convening a work group to discuss ratios for teachers (intervention specialists) and caseloads for

related services personnel to begin work in April. These ratios and caseloads are contained in Rule 09, delivery of services, which has already been approved by the State Board of Education. If changes are agreed upon by the department and organization representatives, Rule 09 would have to be refiled with JCARR and subsequently with the State Board. This is not likely to happen before July 1, 2008.

“No Child Left Behind” Has Positive Impact

The National Council on Disability (NCD) just released a report analyzing the progress of the No Child Left Behind (NCLB) Act and the Individuals with Disabilities Education Act (IDEA) that says students with disabilities are no longer ignored. To that end, NCLB and IDEA have had a significant, positive impact. The report states, “students with disabilities appear to be doing better academically, and they also appear to be graduating with diplomas and certificates at higher rates than in prior years. Data suggests, however, that there is still cause for concern about the dropout levels of students with disabilities nationwide...” For more information and the full report, go to <http://www.ncd.gov/newsroom/publications/index.htm>

Changes in IDEA 2004 Regulations

1. Supplemental aides and services apply to extracurricular and nonacademic settings.
2. Parents receive Procedural Safeguards, (Parents' Rights) only once a year. The exceptions are upon referral/parent request for evaluation, filing of a complaint, and when the parent asks for another copy.
3. Initial evaluation and eligibility determination is completed within 60 days of the time parents consent for evaluation is received.
4. Physical education must be available to all students with disabilities receiving FAPE.
5. A statement of the student's present level of academic achievement and functional performance (PLAAFP) statement is needed instead of a present level of educational performance (PLEP.)
6. Every student needs measurable annual goals as well as measurable benchmarks or short-term objectives.
7. Between annual IEP meetings, changes in the IEP may be made without a meeting if the parent and school agree; changes must be documented in written form. Date and initials of teacher next to the changes is a good practice.
8. The IEP team members required at meetings have not changed: at least one general education teacher of the student, a school representative, special education teacher, parent, a person to interpret test data, and others as needed. However, an IEP team member may be excused from a meeting if the parent and school agree and the team member provides written input to parent and IEP team prior to the meeting.
9. For meetings on IEPs and placement, the parent and the school may agree to use alternative means of participation, such as a video conference or teleconference.
10. For a child age 3-5, the IEP team considers the IFSP, current statewide agreement requires that an Early Intervention representative be invited to the initial IEP meeting.
11. Transition planning begins at the IEP prior to the student's 14th birthday. At the 16th birthday, a transition services plan must be in place as part of the IEP.
12. Students who graduate or age out of special education receive a summary of academic achievement and functional performance with recommendations on how to assist the student to reach post-secondary goals.
13. When a child with disabilities transfers between school districts within the same State with an IEP in effect, the new school provides FAPE, including services comparable to the previous district's IEP, until it adopts the previous IEP or develops a new IEP. If from another State, the new school provides FAPE, including services comparable to the previous IEP, until the school conducts an evaluation, if necessary, and develops a new IEP. The previous school takes steps to respond promptly to a request for transfer of the child's school records.
14. All IEP members should be informed of their responsibilities to implement the IEP.

Editor's Note: Adapted from "The Circuit" newsletter, 2007, Mountain Plains Regional Resource Center, Logan, Utah. Website: www.rfcnetwork.org/mprrc

Students Learn “It’s My Turn”

“It’s My Turn”, a three-day workshop presented free by trainers from The Ohio Coalition for the Education of Children with Disabilities, is a self-determination curriculum for students with disabilities. “It’s My Turn” is designed to make self-determination easier and to help students become self-advocates so they will understand the options and supports available to them in their life “after high school”.

In the workshop, the question is asked, “How many of you are going to live with your parent’s for the rest of your life?” Typically only one or two hands may sneak up and then go down quickly. There is also moaning and giggling heard amongst the participants in the room. Thus starts a transformation for many students participating in this workshop. They are given the opportunity to determine their preferences and match them to a career/occupation using a set of cards and multi-sensory activities. They become aware of their right to make choices and have a voice for their life. They begin to understand the happiness one feels when they make choices for themselves. AND at the same time, the consequences that go along with their choices. Time is taken to review and discuss the pros and cons of making their own decisions. Students share how quickly they learn the importance of speaking up for themselves as they realize that life after high school means that they will need to do just that! During the workshop, students also complete a draft transition plan of their choices to take to their IEP (Individualized Education Plan) meeting.

The skills considered necessary for successful outcomes of “It’s My Turn” include: having dreams, goals, self confidence and belief in oneself, persistence, understanding what a competitive attitude can bring about, the

ability to take constructive criticism and turn it into something positive for oneself, gaining the courage to stand up for ones beliefs, willingness to learn new things, study and practice, being observant of even the small things, learning to use supports, resources and ideas available to you, and finally taking all that you have learned and using it in the adult world.

In the past, this training has typically had a two-three year waiting list. Currently OCECD has multiple teams available to present “It’s My Turn”, eliminating the lengthy wait for schools to participate. For more information on scheduling an “It’s My Turn” training in your school, contact Joy Cull at OCECD at 1-800-374-2806, ext. 24. To view an online presentation of “It’s My Turn”, go to www.ocecd.org

IDEA

It stands for Individuals with Disabilities Education Act.

But to me it stands for greatness.

Other people shut us out.

It’s about helping kids with disabilities.

We reach for the stars.

We shine high in the sky when we get help.

It helps us figure out what we want to be.

So as I write this down on paper,

I say Thank you.

Submitted by Kyle Simmons and his parents David & Alice. Kyle is a student at Coventry High School who had just completed a three day “It’s My Turn” self-determination Transition Workshop.

Youth with Disabilities May Fall Through Cracks in Foster Care System

The National Council on Disability (NCD) today released *Youth with Disabilities in the Foster Care System: Barriers to Success and Proposed Policy Solutions*. The report focuses on the unique challenges older youth with disabilities face as they negotiate the foster care system.

According to NCD Chairperson John R. Vaughn, "The goal for our country's youth is to live healthy, happy lives and to become self-sufficient, contributing members of society as adults. However, there are subsets of youth who cannot reach these goals with ease. These youth need additional supports to assist them in their journey toward a healthy adulthood, as they are more vulnerable than the 'average' youth and thus are more apt to fall through the cracks during their journey. Youth development researchers have determined that some specific youth populations are more vulnerable than others. This report examines one exceptionally challenged group in particular: older youth (specifically, preteens through young adults) with disabilities who are involved in the foster care system."

"The child welfare community generally accepts the fact that, while the American foster care system has come a long way in recent years, there is still much to be done to ensure the health and well-being of the children and youth it serves. Likewise, the disability community has seen great improvements in recent years but still advocates for additional needed change. But what is often overlooked among experts in both of these realms is the idea that foster care is indeed both a child welfare issue and a disability issue. This is due to the alarmingly high numbers of foster youth with mental, developmental, emotional, learning, and physical disabilities. The purpose of this report, therefore, is to shift the lens

through which youth advocates and service providers view the importance of ensuring the well-being of foster youth. This new lens asserts the importance of understanding the prevalence of disability among foster youth and better ascertaining who should be held accountable for this uniquely challenged and often underserved population," Vaughn concluded.

NCD is an independent federal agency and is composed of 15 members appointed by the President, by and with the advice and consent of the Senate. NCD provides advice to the President, Congress, and executive branch agencies to promote policies, programs, practices, and procedures that:

** guarantee equal opportunity for all individuals with disabilities, regardless of the nature or severity of the disability; and

** empower individuals with disabilities to achieve economic self-sufficiency, independent living, and inclusion and integration into all aspects of society.

For more information, please contact NCD's Director of External Affairs at 202-272-2004. To review the entire report, go to http://www.ncd.gov/newsroom/publications/2008/FosterCareSystem_Report.html

Summertime: When Young Minds Turn to Mush

According to The Center for Summer Learning:

** All young people experience learning losses when they do not engage in educational activities during the summer. Research spanning 100 years shows that students typically score lower on standardized tests at the end of summer vacation than they do on the same tests at the beginning of the summer.

** Most students lose about two months of grade level equivalency in mathematical computation skills over the summer months. Low-income students also lose more than two months in reading achievement, despite the fact that their middle-class peers make slight gains.

** Two-thirds of the achievement gap between lower- and higher-income youth can be explained by unequal access to summer learning opportunities. As a result, low-income youth are less likely to graduate from high school or enter college.

For sources and more information, visit this website: www.summerlearning.org

Summer Enrichment Suggestions

As summer approaches, it is not uncommon for parents to wonder what they can do to provide an environment at home that is enriched with learning and discovery activities. Fortunately, the internet provides parents with unfettered access to many resources. For parents who do not have internet access at home, public libraries provide free internet access.

Although many of the things you already do are contributing to your child's learning in the home -- reading, writing, singing, storytelling, game playing -- and in the community -- trips to museums and zoos and cultural events -- wouldn't it be great to combine these two experiences, meaning bringing the museum or the cultural event into your home?

Many museums have online exhibits or programs that students can experience from home. The Smithsonian, for example, has many different activities on their website for exploring other cultures and their traditions. You and your child can learn together and from each other during your free time at home. The Smithsonian website is: http://folklife.si.edu/explore/online_exhibitions.html

Two Facts of Life: Taxes & Financial Planning

Tax filing season is upon us. Tax credits can provide thousands of dollars to families struggling to make ends meet - but only if families are informed of the credits and claim them on their tax returns. For more information, go to the National Women's Law Center's Tax Credits Outreach Campaign website - www.nwlc.org/details.cfm?id=3134§ion=tax

The "Special Needs Planning Guide: How to Prepare for Every Stage of Your Child's

Life" is written by authors who also have family members with special needs (John W. Nadworny & Cynthia R. Haddadis). Also included is a CD-Rom which contains a helpful Financial Planning Timeline and a printable Letter of Intent that lets parents communicate key information, concerns, and desires to future caretakers. The book is available through Brookes Publishing: <http://www.brookespublishing.com/store/books/nadworny-68028/index.htm>

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The Tourette Syndrome Association (TSA) is in its fourth year of collaboration with the Centers for Disease Control & Prevention to provide a series of educational programs on Tourette Syndrome and associated disorders. TSA is looking for organizations interested in participating in these trainings, either in person or through long-distance technologies. One program is geared toward medical and allied professionals and a second for education and school-based professionals. Details and contact information can be found at: www.tsa-usa.org/news/cdc_tsa_year4.html

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The Council of Parent Attorneys and Advocates, Inc. has announced the Stan Appell Restraints and Abuse Education Fund, created in memory of Stan Appell, who loved all children and supported work to stop their maltreatment and abuse. This fund will be used to create legal educational publications to assist attorneys and advocates in combating the restraint and abuse of students with disabilities. COPAA believes that restraints, seclusion, and abuse are neither effective nor educational. For further information, visit [www.coppa.org](http://www.coppa.org).

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The National Council on Disability (NCD) recently released a new publication: *The No Child Left Behind Act and the Individuals with Disabilities Education Act: A Progress Report*. The study analyzes how these laws have affected student outcomes and what barriers still exist for students with disabilities. The report is available in HTML, Word, and PDF formats at: www.ncd.gov/newsroom/publications/index.htm

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The Maternal and Child Health Bureau has published the National Survey of Children

with Special Health Care Needs Chartbook, 2005-06, which provides both national and state-level data on children with special health care needs. The Chartbook reports that 14% of all U.S. children have special health care needs and more than a fifth of U.S. households with children have at least one child with special needs. Children with special health care needs are defined as having or being at risk for "chronic physical, developmental, behavioral, or emotional conditions that have lasted or are expected to last at least 12 months." For a hardcopy of the Chartbook, call the HRSA Information Center toll-free at 1-888-ASK-HRSA, or see it online at <http://mchb.hrsa.gov/cshcn05/>

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CADRE (the Consortium on Appropriate Dispute Resolution in Special Education) has developed a web-based video overview of their technical assistance project. The four minute segment outlines CADRE's goals, partnerships, and resources. View the video at: www.directionservice.org/cadre/OverviewCaptive.cfm

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The annual **KIDS COUNT** report from the Annie E. Casey Foundation has a new presence on their Web site. The online tool tracks more than 100 indicators on education, income, health, and other risk factors for all 50 states and the nation as a whole. <http://www.kidscount.org/datacenter/>

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This report from the **National Center for Special Education Research** uses data from the National Longitudinal Transition Study (NLTS2) to look at how many students are receiving mobility training and the factors affecting their levels of orientation skills. Access the report online at: ies.ed.gov/ncser/pubs/index.asp#20083007

6th Annual Partnering for Progress: Accountability Improves Results for *ALL* Children Conference

Sponsored by the Ohio Coalition for the Education of Children with Disabilities,
In collaboration with the Ohio Department of Education

October 21, 2008 9:00 a.m. to 3:30 p.m.
(registration begins at 8:00 a.m.)

Crowne Plaza Columbus North, 6500 Doubletree Avenue, Columbus, Ohio

Free Conference, Lunch provided at no charge, No parking fees, No registration fee

Participants: Educators, Parents, School Administrators, and others interested in educational accountability for *ALL* students.

Registration opens May 1 online at www.ocecd.org

Due to limited space, registration will be limited to the first 500. You will receive a registration confirmation in the same form as you registered (by email or fax).
There will be no walk in registrations.

Deadline for registration: October 3, 2008

Certificates of Attendance will be available (No CEUs)

Some of the sessions will include:

- Linkages that the Office for Exceptional Children is making with other offices at the Ohio Department of Education i.e., School Improvement, Medicaid, Licensure, Response to Intervention, SPP/APR, Part C to Part B and Agency Interconnection
- Q & A for Parents with ODE, OEC staff
- Q & A for Educators with ODE, OEC staff
- Parent Leadership Program - Cincinnati Public Schools and other districts' programs that are working well
- "Keeping Your Child with Disabilities Out of Juvenile Detention"
- Department of Youth Services Panel
- Parent Mentors, the Parent Mentor process and how it works

Questions? Contact Connie Hudson, Conference Coordinator,
at ocecdcsh@earthlink.net or 937-842-2150

Ohio Kids on Medicaid Have Trouble Finding Dentists

A Toledo Blade newspaper article recently detailed the shortage of dentists in north-west Ohio who will accept children who are on Medicaid. (Source: "A gap that needs to be filled: Dentists for Medicaid kids," Toledo Blade, 1-20-08) "Low reimbursement rates are chief among the reasons why dentists don't routinely accept disabled or poor children covered by Medicaid. Programs in Ohio, for example, pay about 51 cents on the dollar." According to Dr. Paul Casamasimo, a past president of the American Academy of Pediatric Dentistry, "A lot of dentists can't afford to take Medicaid. It costs them money to take care of the kids." This lack of care results in dentists who do treat Medicaid recipients seeing "emergency cases where children have infections from abscessed teeth because they don't get routine dental care. In rare cases, such infections--as with a 12-year-old Maryland boy last year who had no dental insurance at all--are fatal."

Despite this, statistics show that the move to Medicaid managed-care programs in recent years in Ohio has helped increase the percentage of children seeing dentists. "Ohio, for example, has had a 20% hike in



the number of Medicaid-covered children getting help over the last five years, with about half of those aged 4 to 21 having a dental visit in the fiscal year ending June 30, 2006, according to the Ohio Department of Job and Family Services."

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