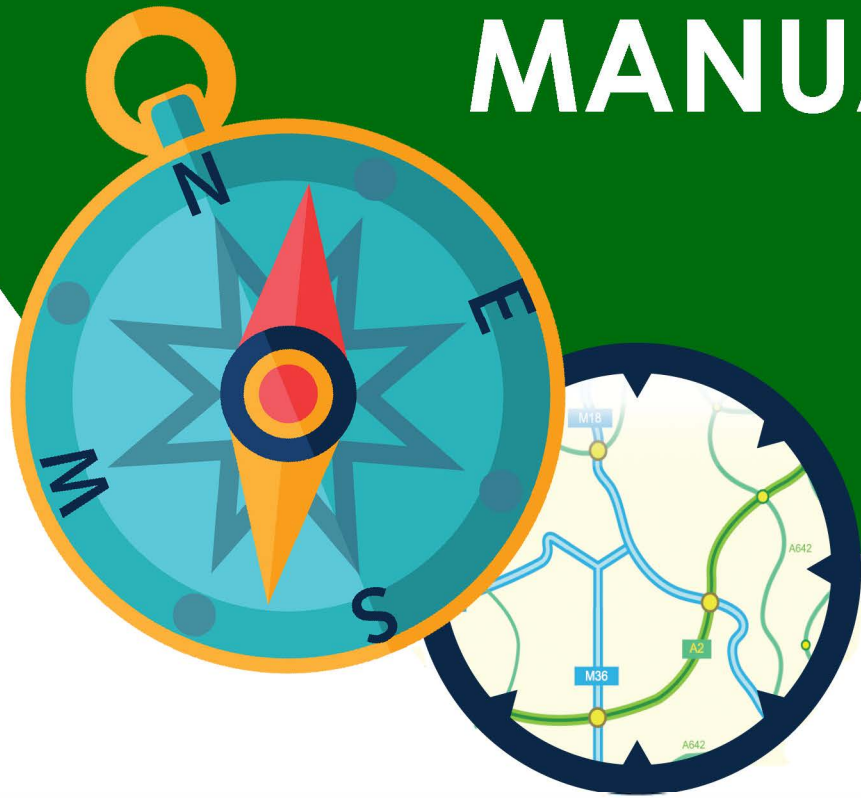




# Kent ISD IEP GUIDANCE & COMPLIANCE MANUAL



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This document was designed for Kent Intermediate School District Member Districts to guide staff in completion of Individualized Education Programs (IEP) in Michigan PowerSchool Special Education (MiPSE), the Kent ISD web-based special education student management system. Additionally, guidance within this document is intended to serve as a supplement to the Michigan Administrative Rules for Special Education (MARSE) and the Individuals with Disabilities Education Act (IDEA).

# Participants and Profile

## DEMOGRAPHICS

- A. Verify accuracy of demographic information.

## PURPOSE

- B. Check all purposes that apply. If transition services will be discussed, be sure to select Transition as an additional purpose.

## PARTICIPANTS

- C. Participants with multiple roles must be listed multiple times, so that all required roles are listed. See Appendix A for required IEP Team participants.
- Prior consent from the parent must be obtained for required IEP Team members to be excused. If "Not Present" is selected for a required participant, upload the signed excusal form to the IEP.

## STUDENT PROFILE AND ELIGIBILITY

- D. Student Strengths:
- Ask IEP Team, including parent/guardian, for information to document skills the student demonstrates as it directly relates to Social-Emotional, Behavioral, Communication, and Academic areas. If possible, include areas of strength that relate to identified need areas.
  - If possible, include the student's self-identified strengths and areas of interest.
- E. Parent/Guardian Concerns
- Engage parent/guardian and seek participation by including a detailed explanation of parent concerns.
  - Avoid using "None." If the parent/guardian has no concerns it should be specifically noted that *parents have no concerns at this time, along with a detailed description of satisfaction with programs/services or any other statements to document the absence of parent concerns.*

### INDIVIDUALIZED EDUCATION PROGRAM (IEP) TEAM REPORT

Date of IEP Team Meeting:	Date of IEP Offer of FAPE:	Date of Most Recent Evaluation IEP:
Student Name: Suzy Sample41	Home Phone:	
Student's Address:	State:	Zip Code:
County:	Resident District for Purpose of FAPE:	
Student Primary Language:	Language in the Home:	Grade: Ninth grade
Birthdate:	Age:	

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**PURPOSE**

Purpose of IEP Team Meeting: Annual Review      Additional Purpose: Transition

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**PARTICIPANTS**

Participant Name	Title/Relationship	Present in Meeting?
Required Member	Parent/Guardian	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Not Present
Required Member	Special Ed Provider	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Not Present
Required Member	General Ed Teacher	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Not Present
Required Member	Eval Team Rep	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Not Present
Required Member	School District Rep	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Not Present

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**STUDENT PROFILE AND ELIGIBILITY**

In determining both eligibility and need for special education programs/services, the IEP Team must consider each of the following:

**D** Student Strengths

**E** Parent/Guardian Concerns

**F** Current Evaluations

Based on 1) Suzy's current functioning, 2) the most recent evaluation findings and 3) any additional assessment information, does the IEP Team determine that this student has a disability that requires special education programs/services?

Yes, Suzy is **eligible** for special education

<u>Primary Disability</u>	<u>Qualifying Criteria</u>	<u>Qualifying Criteria</u>
Specific Learning Disability		

- F. List all evaluation tools used to drive the creation of the PLAAFP, goals, and objectives. Additionally, list state assessments the student has participated in.
- ★ Avoid adding specific data from the assessments in this section.
- G. The evaluation team recommends eligibility and the IEP team analyzes evaluation data and other information presented at the IEP team meeting and then determines eligibility.

Check to ensure accuracy of Disability and Qualifying Criteria with most recent Eligibility Recommendation and Evaluation IEP. Areas cannot be added or removed without a REED.

# Transition Plan

## TRANSITION ASSESSMENTS AND NOTICES

- A. Include a list of all **transition assessments** and interest inventories, along with month/year administered, that were completed within the last three months and used in the development of the student's post-secondary goals/vision.

Examples include, but are not limited to: TRS, ESTR, Career Cruising, district developed surveys, Discovery Process, EDP, observations, student demonstrations, interviews, etc.

Specific data (strengths, preferences, interests) for the four transition activity areas, based on the completion of the most recent transition assessment, should be included.

- B. If a student will reach age 17 during this IEP year, they must be informed of their impending transfer of rights and Procedural Safeguards (at age 18). If a student will reach age 18 during the IEP year, they must be informed that their rights will transfer this year. Families need to be knowledgeable of the options available to protect student's rights and how to procure those options.

- C. With the consent of the parent or age of majority student, the school must invite an agency representative that is likely to pay for or provide transition services to the extent appropriate. *If there is a need to invite a community agency, teams must complete a Consent to Invite Community Agency and obtain signed consent before inviting.*

## POSTSECONDARY GOALS AND TRANSITION ACTIVITIES

- D. The student must be provided the opportunity to be a meaningful participant in creating and developing the postsecondary goals and transition plan.

Each postsecondary goal statement must be updated annually based on age appropriate transition assessments and written in such a way that there are measurable outcomes. Annual goals and objectives should be designed to **develop skills**.

Student Name:

IEP Date:

### TRANSITION PLAN

#### TRANSITION ASSESSMENTS AND NOTICES

##### ASSESSMENTS

Transition Assessment:

Month/Year of Current Transition Assessment:

Results:

##### PARENTAL RIGHTS AND AGE OF MAJORITY

Sally has turned age 18 and Sally and Sally's parent were informed of parental rights that were transferred to Sally at age 18, including the right to invite a support person such as a parent, advocate, or friend.

##### COMMUNITY AGENCY INVOLVEMENT

Was there a need to invite a community agency representative likely to provide current or future services?

Yes  No

Date that Consent to Invite Community Agency was signed:

Did agency representative attend?  Yes  No

Additional comments regarding community agency involvement:

Did parent invite a community agency representative?  Yes  No

#### POSTSECONDARY GOALS AND TRANSITION ACTIVITIES

**Adult Living** — After you have finished school, what type of place will you live in?

Does Sally require instructional goals and short-term objectives in order to get ready for adult living?  Yes  No

Does Sally require transition activities or services in order to get ready for adult living?  Yes  No

Transition Activity/Service Needed	Person/Agency	Due Date

**Getting Ready for Employment** — After you have finished school, what kind of work will you do?

Does Sally require instructional goals and short-term objectives in order to get ready for employment?  Yes  No

Does Sally require transition activities or services in order to get ready for employment?  Yes  No

- There must be evidence of an updated postsecondary goal, unless you are writing the first transition IEP. Evidence may include a comparison to previous IEP, or notation to show the update. Ex. As previously stated in his transition IEP dated x/x/xxxx. Suzy maintains that after graduation she is still interested in working in a restaurant as a cook or chef.
- A "None" or "I don't know" response must show appropriate steps that will be taken to explore options. Consider writing transition activities, such as career exploration, informal interviews or observations, or transition assessments as a means to explore options

# Transition Plan

## POSTSECONDARY GOALS AND TRANSITION ACTIVITIES CONT.

- A. Activities and Services listed should be individualized and specific.  
The transition services/activities **provide experiences** and exploration and help enable the student to meet his or her postsecondary goals.
- B. At least one annual goal must be developed to support the student's transition services needs/postsecondary goal.

## COURSE OF STUDY

- C. Describe how the student's course of study supports his post-secondary goals written in each domain area above:

A course of study is **more** than completion of the Michigan Merit Curriculum. Course of study is a multi-year description of coursework, from current date to anticipated date of exit, which will allow the student to **build/expand knowledge** and gain experience through coursework in their post-secondary goal area. Be sure to include any career readiness classes, work based learning opportunities, expo's or career fairs in addition to other courses.

**Example:** Suzy is taking core classes and electives that will support the achievement of a Michigan Merit Curriculum Diploma, which will further support her vision of attending a 2 year college or technical school, eventually leading to employment as a chef. Suzy will have the opportunity to take Foods for Fitness her sophomore year, Independent Living her Junior year, and personal finance her senior year. She will also have the opportunity attend KCTC's culinary arts program to further explore her goal of becoming a chef.

Transition Activity/Service Needed	Person/Agency	Due Date
<p><b>A</b> <b>Community Participation</b> — After you have finished school, how <b>will</b> you spend your time in your community?</p> <p>Does Suzy require <b>instructional goals and short-term objectives in order to get ready for community involvement</b> ? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No            Does Suzy require <b>transition activities or services in order to get ready for community involvement</b> ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>Postsecondary Education/Training</b> — After you have finished school, what additional education and/or training <b>will</b> you require in order to meet your post-secondary employment goal?</p> <p>Does Suzy require <b>instructional goals and short-term objectives in order to get ready for post-secondary education or training</b>? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No            Does Suzy require <b>transition activities or services in order to get ready for post-secondary education or training??</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		

**B** **COURSE OF STUDY**

What is Suzy's anticipated date of graduation/completion?

**C** What is Suzy's course of study?  
 Classes leading to a Michigan Merit Curriculum high school diploma  Classes leading to a certificate of completion

Describe how Suzy's course of study supports her post-secondary goals written in each domain area above:



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

- A.** Select an Area of Need from the dropdown list. In the Subarea of Need box, enter the need related to the skill being taught.
- Areas of need should be identified to address all qualifying criteria/core features of the disability. Other needs not directly related to the disability may also be identified when applicable.

- B.** Areas of need must be addressed in one or more sections within the IEP. Select one or more sections within the IEP where the need will be addressed. All supplementary aids/services, accommodations, transition planning, programs, and services listed throughout the IEP, **must be** connected back to a need outlined in the PLAAFP.

Fields displayed below will be based on selections in this area. For example, the Baseline Data and Starting Point for Instruction textbox will only appear if Goals and Objectives is checked under section **B**.

- C.** Progress on Most Recent Goals and Objectives is no longer at the top of this page and is now under each area of need. Select "Yes" if there was a previous goal and objectives to address the area of need.

Review the goals from the previous IEP and student progress reports.

- Include **specific data** regarding the progress on most recent IEP goals and objectives. Provide evidence for goal and objective achievement, progress toward achievement, or lack of progress toward achievement. Be sure the data reported matches the criteria listed in the goal/objectives from the most recent IEP. See graph in Appendix C for more information on collecting progress monitoring data.
- **Do not** include additional data unrelated to most recent goals and objectives.

- D.** Include a statement of the student's present levels of academic achievement and functional performance (PLAAFP) based on relevant data sources and the corresponding/specific data. This should include statements regarding what the student can do and what they cannot do compared to same-grade/age peers.

<b>Student Name:</b>	<b>IEP Date:</b>	
<b>PRESENT LEVEL OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE</b>		
<b>Area of Need</b>	<b>Subarea of Need</b>	<b>Where in the IEP will this need be addressed?</b>
<b>A</b>		Supplementary Aids and Services <input type="checkbox"/> Goals and Objectives <input type="checkbox"/> Transition Plan <input type="checkbox"/> Programs and/or Services <input type="checkbox"/>
Was there a previous IEP goal and objectives to address this area of need? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>C</b>	<b>Progress on Most Recent Goals and Objectives</b>	
<b>D</b>	<b>Description of Need Based on Data</b>	
<b>E</b>	<b>Baseline Data and Starting Point for Instruction</b>	
<b>F</b>	<b>Adverse Impact</b>	

- E.** For all areas of need that will be addressed by a goal and objectives, baseline data and starting point for instruction must be provided. A starting point for instruction is established when baseline data is provided to document the student's current performance-level (include the date of baseline assessment).

The baseline, target for the corresponding goal, and related IEP progress report will all use a consistent source of data. See Appendix C and D for more information on Baseline Data.

- F.** Provide a description of how the disability affects the student's involvement and progress in the general education curriculum/environment and achieving their annual and post-secondary goals. Include a description of the student's current performance compared to grade-level peers.

**Does the Adverse Impact Statement:**

- explain **how** the disability impacts access to, participation in, and/or progress in the general education curriculum?
- connect to the need for specially designed instruction and/or supplementary aids and services?

**Examples:**

*Due to Student's emotional impairment, he does not comply with directives from staff and he is not actively engaged in instruction. His refusal to stay in the learning environment and refusal to complete work negatively affects his task completion and academic skill development.*

*Due to Student's cognitive impairment, she is performing at a first-grade level in math. Because Student is working on mastering counting money at a first-grade level, she requires a functional curriculum and specialized instruction to progress and acquire the skills of counting money. Her difficulty mastering functional math skills, impacts independence in the community and her post-secondary goal of being a dog walker.*



# Special Factors, Supplementary Aids and Assessments

A. **Communication needs:** Select “Yes” if a student is unable to express their wants and needs independently (either verbally, through sign, picture exchange, and/or augmentative and alternative communication/AAC) to peers/staff across environments/tasks and has specific communication needs that require the use of supplementary aids and services.

**Need for assistive technology devices and services:** Select “yes” if a student has any area of need that requires the use of an assistive tool including those that are light, mid, or high tech.

B. For any box that is checked, ensure that the need is addressed within the IEP. If a need is considered, but the box is not selected, ensure the reasons for this are addressed in the Notice section of the IEP, in Considered Options and Reasons Not Selected.

**Examples:** A student with a VI who does not need Braille OR a student who has behavioral needs identified in the PLAAFP but does not need a FBA/PBSP.

C. The PLAAFP should provide data which correlates to Supplementary Aids and Services that are needed to address the student’s missing skills, concepts and for accessibility and participation in the general education curriculum including translation services, parent and staff training, etc.

Specifically describe how the supplementary aids and services provide access to the general education curriculum. Consider using the words, “...for the purpose of...”

**Frequency/Timeline:** Specific details should be provided regarding how, when, how often, and to what degree supplementary aids and services will be used in instruction. **Do not** use “as needed,” “per teacher discretion,” or “upon student request,” as a frequency.

**Location:** Be specific as to where the accommodation is needed - this has documentation implications when stated too vaguely. Be sure to include all locations where the accommodation is delivered. **Examples:** general education environment, special education environment.

**SPECIAL FACTORS, SUPPLEMENTARY AIDS, AND ASSESSMENTS**

Student Name: \_\_\_\_\_ IEP Date: \_\_\_\_\_

Supports and Modifications to the environment, behavior training needs, social interaction supports, health-related needs, physical needs, transition aids and supports will be provided to enable Sally:

- to advance appropriately toward attaining Sally’s annual goals,
- to be involved in and make progress in the general education curriculum,
- to participate in extra-curricular and other nonacademic activities, and
- to be educated and participate in activities with other students with disabilities, as well as nondisabled students.

The IEP team must consider the following areas of need for each student.

For the areas of need below, does Sally require supports and/or services due to?

Yes  No Communication needs

Yes  No Need for assistive technology devices and services.

The IEP team must consider the following for Sally, as appropriate.

**Does Sally require supports and/or services in the areas of need below?**

The use of positive behavioral interventions and supports, and other strategies, to address behavior because Sally has behavior that impedes Sally’s learning or the learning of others.

Language needs because Sally has limited English proficiency.

Braille instruction because Sally is blind or visually impaired.

The mode of language and communication because Sally is deaf or hard of hearing.

**Supplementary aids and services are needed at this time.**

Supplementary Aids/Program Modifications/Support for School Personnel	Frequency/Timeline	Location

**STATE ASSESSMENTS**

Are state assessments required for the grade level(s) covered by this IEP?  Yes  No

To participate in the state assessment(s), will Sally require accommodations?  Yes  No

Does Sally have a significant cognitive disability that significantly impacts (1)intellectual functioning and (2)adaptive behavior AND (3)the instruction provided is most closely aligned to the alternate content standards in at least one content area?  Yes  No

Upon review of Alternate Assessment Selection Guidelines, does Sally need to take an alternate assessment?  Yes  No

Rationale: \_\_\_\_\_

Refer to the [Kent ISD Supplementary Aids and Services Manual](#) for more information and guidance on Supplementary Aids and Services

### STATE ASSESSMENTS

D. Required Assessments:

- Early Literacy and Math Benchmark Assessments are required in Kindergarten - 2nd grade
- M-STEP or MI-Access are required for 3-8 and 11
- PSAT 8/9 and PSAT 10 are required
- SAT 11 is required

E. The first consideration for a student with a disability should be participation in the M-STEP. However, IEP teams may, based on data and state guidelines, determine that the alternate assessment is most appropriate. A rationale must include a detailed description of the team’s decision. The IEP team **must** use the MDE Alternate Assessment Selection Guidance to ensure the appropriate selection and provide guidance documents to parents.

**Note:** General education and special education staff must document accommodations, the date, and results of all accommodations provided. Documentation should be reviewed periodically.

# Accommodations and Alternate Assessment

★ The first consideration for a student with a disability should be participation in the M-STEP/MME assessment with their peers with no accommodations needed.

This page only needs to be completed if a student requires accommodations or an alternate assessment for the statewide and/or a districtwide assessment.

A. Students with disabilities must be included in state and district-wide assessments, with appropriate accommodations and alternate assessments, if necessary, as indicated in their IEP. The IEP must specify what assessment accommodations, if any, are needed for each content area.

B. Keep in mind that accommodations may **only** be used if: (1) the student's IEP indicated that they are appropriate for the student, **and** (2) align with the classroom and district assessment supports listed on the Supplementary Aids and Services page. Each state assessment in MiPSE includes a list of approved accommodations in the dropdown menu.

C. **The use of alternate assessments is reserved only for students with the most significant cognitive disabilities.** The IEP Team has the final determination regarding which assessment is appropriate for the student. IEP teams must follow the state guidelines for participation included in the MiPSE document (Michigan guidelines: Should My Student Take the Alternate Assessment flow chart).

**MDE Guidance:** MI-Access is not designed for most students whose primary disability is a specific learning disability, speech language impairment, emotional impairment or other health impairment.

**M-STEP/MI-Access** – IEP teams may, based on the decisions made using state guidelines, determine that a student should be assessed with the general assessment (M-STEP) in some content areas and the alternate assessment (MI-Access) in others.

- In grade 8, ELA and mathematics cannot be split between PSAT 8/9 and MI-Access FI. Students must be administered both content areas with PSAT 8/9 or with MI-Access FI.

Student Name: \_\_\_\_\_ IEP Date: \_\_\_\_\_

**ACCOMMODATIONS AND ALTERNATE ASSESSMENT**

The IEP Team has determined that Suzy will participate in the following state assessments:

- Early Literacy and Math Benchmark Assessments for students in grades K-2
- M-STEP: The Michigan Statewide Assessment for students in grades 3-8 and 11
- MI-Access: The Michigan Alternate Assessment for students in grades 3-8 and 11
- A District Developed Alternate Social Studies Assessment for students in grades 5 and 8
- The WIDA Access or WIDA Alternate Access for English Language Learners grades K-12
- The PSAT for students in grades 8,9 and 10
- The SAT for students in grade 11

For the state assessments listed, the IEP Team has determined that the following accommodations and/or alternate assessments are needed for Suzy to participate:

Assessment	Subtest	Time/Schedule	Setting	Presentation	Response
MI State-wide Assessment					
MI State-wide Alternate Assessment					

For the state assessments listed, the IEP Team has determined that the following accommodations and/or alternate assessments are needed for Suzy to participate:

Assessment	Accommodation 1	Accommodation 2	Accommodation 3	Accommodation 4
PSAT 8/9				

For the state assessments listed, the IEP Team has determined that the following accommodations and/or alternate assessments are needed for Suzy to participate:

Early Literacy and Mathematics Benchmark Assessment Accommodations			
Assessment	Universal Accommodations	Designated Supports	Accommodations
Early Literacy			

Additional Information:

- In grade 11, ELA and mathematics cannot be split between SAT with Essay and MI-Access FI. Students must be administered both content areas with SAT with Essay or with MI-Access FI.
- IEP teams may, based on student instructional needs, determine that a student take MI-Access at different levels (FI/SI/P). This may be done so long as the student is not taking more than a total of 2 levels and that those levels are adjacent to one another.

When an alternate assessment is selected, Notice should contain a statement of M-STEP considered and Reasons Not Selected to document the use of State guidelines

D. In rare cases (i.e., student with severe multiple impairments) where the IEP team determines the student will not participate in any state/district-wide assessment, the IEP must address why the assessment is not appropriate, how the student will be assessed, and what alternate assessment will be given.



# Goals and Objectives

**A. Area of Need** – Areas of educational need noted here from the PLAAFP must have at least one annual goal and two short-term objectives.

**B. Grade level Standard** – For each applicable goal, select a relevant curriculum reference and standard aligned to the student’s current grade level. As of August 2022, the Social Emotional Learning Competencies have been added and Essential Elements and CCSS are updated. Always include the most specific standard by clicking to the bottom of the options so all fields are completed in the document.

**C. Annual Goal** – Each goal to be taught must directly correspond to a skill deficit as described within the PLAAFP.

- There should be a clear and explicit connection between all goals and their corresponding PLAAFP sections evidenced by consistent data source used to describe baseline data as well as the target for the goal. A date the goal will be achieved must be specified, along with a method of measurement.

**D. Short-Term Objectives/Benchmarks** – Must have two or more for each goal.

- These must **always be** measurable.
- List the skill the student should learn in order for them to move closer to achieving their measurable annual goal.
- **The final objective/benchmark should be the required criteria for mastery of the annual goal.**
- **Criteria** –Identify the target for the student to achieve when working toward mastery expected for the skill and attainment of the goal. Mastery criteria should be based on baseline data from the PLAAFP and/or expected rate of progress, which encompass achievable score of growth over the course of one year. See bolded criteria in examples.
- **Evaluation** – Identify HOW you will measure the student’s ability to achieve the stated criteria for each objective/benchmark. Examples: Documented observation, informal reading assessment, provider logs, etc.

Student Name:
IEP Date:

## GOALS AND OBJECTIVES

**A** Area of Need:

Curriculum Reference:

**B** Grade:

Grade Level Standard:

**C** Annual Goal:  
and Post-Secondary Goal Connection:  
In order to , Sally will by , as measured by .

Will a graph be used within MIPSE to report progress toward the annual goal and associated objectives/benchmarks?  Yes  No

**D** Short-Term Instructional Objectives/Benchmarks:

	Objectives/Benchmarks	Criteria	Evaluations	Data Collection Frequency
1				
2				
3				
4				

**E** Staff Responsible for Goal:

Comments:

When will progress on goals and objectives/benchmarks be reported?  
 Every Grading Period  
 Other

Subarea:

Strand:

- **Schedule** –Identify how often you will measure the student’s ability to achieve the stated criteria for each objective/benchmark. This is where you will answer WHEN you will collect progress data. This is NOT how often you will report progress to parents.

Special education teams should monitor progress bi-weekly, unless otherwise and appropriately stated. They should analyze and revise instruction based on student progress on goals and update/change goals when mastery criteria is met or sufficient progress is not being made. Graphing is a preferred method for depicting progress.

Remember that you must **maintain data** and **document** how you have measured progress toward meeting the annual goal/short-term objectives. The actual measurement must take place as often as you have listed under **Schedule**.

**E. Staff Responsible** – Record the title of the staff person(s) who will be responsible for the goal. All staff recorded here must work on the goal and maintain data related to progress.

**Examples:**

By DATE, when given a list of 10 words containing beginning and ending blends, STUDENT will read 9 out of 10 words correctly in **4 out of 5 trials/opportunities (criteria)**, as measured by documented observation.

By DATE, when given a social script, STUDENT will use a socially appropriate voice tone, volume and will face the speaker while making a request or responding to a peer or adult in order to extend conversation with minimal prompts in **2 out of 3 opportunities (criteria)**, as measured by documented observation.

# Programs and Services

A. Programs and Services are selected at the time of the meeting based on student needs, goals, and short-term objectives/benchmarks.

B. Specify the date range of the IEP, School years, and Grades.

C. Review [Kent ISD's Guidance for Related Services in the IEP](#) for more information.

Teacher Consultant (TC) listed under Related Service should be the approval/endorsement of the teacher consultant (**not** the student's eligibility label).

D. Check the type of service delivery you will be providing, either direct or consultative.  
*Direct services:* the provider works directly with the student related to goals and objectives.  
*Consultative:* used to practice and demonstrate generalization of a skill.

E. Setting within Location – Specify the location the service is being delivered (e.g., GE class(es), SE class(es), SE Environment (related service), job site).

F. Note that elementary and secondary programs can **both** be departmentalized. An IEP identifies if an individual student's program is departmentalized.  
*Departmentalized* means a delivery system in which 2 or more special education teachers teach groups of students with disabilities by instructional content areas.

G. As part of the protections afforded under the IDEA, students with disabilities have the right to attend school for the same length of time in each school day as non-disabled students (34 CFR § 300.11(c)). The only time it is appropriate to shorten the school day for a student with a disability is when the student's IEP team determines a shortened day is required to address the student's **unique disability-related needs** as a result of a diagnosed medical/psychological condition.

**Note:** Per MDE Shortened School Day Guidance, shortened school days may not be used to manage student behavior or as a means of discipline.

Student Name: A IEP Date:

**Programs and Services**

**Related Services with General Education and/or Special Education Programs**  
**Direct Service:** the primary mode of service is directly working with the student. There may be occasional consultation with others.  
**Consultative Service:** the primary mode of service is working with the teacher(s) and others having daily contact with the student. Direct work with the student is occasional

Current IEP Year: From Date \_\_\_\_\_ To Date: \_\_\_\_\_  
 School Year: \_\_\_\_\_ School Year: \_\_\_\_\_  
 Grade: \_\_\_\_\_ Grade: \_\_\_\_\_

Related Services	Start Date	End Date	Service Mode	Minutes		Sessions		Frequency	Setting within Location
				Low Min.	High Min.	Low Number	High Number		
			<input type="checkbox"/> Direct <input type="checkbox"/> Consultative						<span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">E</span>
Programs	Departmentalized	Start Date	End Date	Bldg/Location	SE		GE		Total Frequency
	<input type="checkbox"/> Y <input type="checkbox"/> N				Low Min	High Min	Low Min	High Min	Min

*All programs and services listed above will begin on the initiation date of the IEP and continue for one calendar year following the approved school district calendar. Services will be provided as stated above, except when the week or month is shortened due to the approved school calendar or student absence. Extended school year services (ESY) must be provided only if the IEP Team determines on an individual basis that ESY services are necessary for the provision of a free appropriate public education.*

Does the student require a shortened school day?  Yes  No

**Least Restrictive Environment (LRE)** - With the exception of Sample's programs and services, Sample has the same opportunity as their peers who are nondisabled to participate and make progress in all of the following: (1) general education setting, (2) general education curriculum, and (3) nonacademic and extracurricular activities.  
 Yes  No

H. Children with disabilities must be educated with nondisabled peers to the maximum extent appropriate. If the student's IEP programming/services: (1) does not allow for participation in the general education environment, AND/OR (2) does not allow for involvement in the general curriculum, AND/OR (3) does not allow for participation in extracurricular or nonacademic activities, check "no" and explain these circumstances in detail. This description should align to the programs/services.

**Selecting "No" Example 1:** Student requires an alternate curriculum met through the programs/ services listed within this IEP. He will participate with nondisabled peers during lunch/recess and as appropriate for school specials/electives

**Selecting "No" Example 2:** Student attends a center-based program with no access to general education peers.

**NOTE:** Remember that **Special Education Programs and Services** (as well as accommodations/modifications) are derived from the student's goals and objectives. As a result, any program or service listed on this page will have one or more corresponding goals. It is acceptable (and even desirable at times) for more than a single service provider to be working on one or more of the same goals. However, **each service provider must maintain documentation that instruction was consistent with the short-term objectives.**

# Other Considerations

## SPECIAL TRANSPORTATION AND ANTICIPATED NEEDS

A. Special Transportation is utilized solely for students with disabilities. Specific transportation needs must be addressed here. Examples include lift bus, use of restraints, and extra supervision. When a bus transports both general education students and students with disabilities it is not considered special education transportation (even if the bus has a lift).

Special Transportation is considered a related service. If selected as a requirement for the student, a new row with Special Transportation will populate under related services with start and end dates entered in this section. You will not be required to enter any additional information under Related Services.

B. This is where the student's need for extended school year (ESY) and/or programming beyond the regular school year is addressed. If more space is needed, record additional information in the **anticipated needs and other comments** area below.

ESY is designed to:

- Maintain skills
- Work specifically in one or more goal area(s) of concern which represents skill(s) essential to the progress of the student

The determination for ESY is based on:

- A serious potential for regression of skills beyond a reasonable period of recoupment
- The nature or severity of the disability indicates a need to provide services during breaks
- The student is at a critical stage or areas of learning, where cessation of services would severely limit the acquisition of skills.

	<b>OTHER CONSIDERATIONS</b>	IEP Date:
	<p><b>TRANSPORTATION PROVISIONS</b></p> <p>Has the IEP Team determined that Suzy requires <b>special transportation</b>?</p> <p><input checked="" type="checkbox"/> No, transportation is not required or general education transportation is sufficient to meet Suzy's needs.</p>	
A	<p><b>EXTENDED SCHOOL YEAR</b></p> <p><input checked="" type="checkbox"/> The IEP Team has considered the anticipated needs of this student including the need for extended school year (ESY) services</p> <p><input type="checkbox"/> ESY services are needed</p>	
B	<p><b>ANTICIPATED NEEDS AND OTHER COMMENTS</b></p> <p>Other Comments related to this IEP:</p>	
C		

### Data collection:

The determination for ESY is based on data collected after each extended break in instruction (i.e., holiday break, spring break, summer vacation). This data should be collected using the *Kent ISD Consideration of the Need for Extended School (ESY) Year Services* (Appendix B) or a district-created form and included when the two ESY boxes are selected and the text box appears on this page.

C. This section is used as extra space to specify other provisions or anticipated needs that were not covered elsewhere, such as trimester schedules, upcoming outside evaluations, or rationale for why ESY was not selected, if appropriate. If there are no other comments or anticipated needs, write "**None**."

**Please note:** Anticipated needs and/or accommodations listed in this section require the same documentation as those listed in Supplementary Aids and Services.

# Notice Regarding Provision of Special Education

The purpose of Notice is to:

- Inform the parent/guardian of the offer of special education
- Provide evidence of the district’s offer of a Free Appropriate Public Education (FAPE)

## A. Initial Provision of Programs and Services

IEP implementation cannot start until District Commitment and FAPE date has been signed by the District Superintendent/Designee. The MARSE requires IEP Implementation within 15 school days of providing Notice to the parent.

If the IEP Team considers other programs, services, or supplementary aids requested by the parent/guardian or discussed by the school district that will NOT be implemented, include documentation here.

The IEP team must specify the less restrictive environment being considered under considered options and add a rationale under reason not selected including what the student would be losing or gaining by moving to a less restrictive environment and why that option was not selected. If a more restrictive option was NOT considered or discussed by the IEP team, leaving it blank and pressing “save, done editing” will result in the box not displaying when printed. Refer to [Kent ISD LRE examples](#) for more information.

Communication needs, assistive technology, and participation in the M-STEP must be documented as considered options if not selected.

Include data-based rationale for why the IEP team did not proceed with the considered option. Rationale can be chosen from the insert statements when available.

## COMMITMENT SIGNATURES

The resident district may choose to authorize an operating district to conduct future IEP Team meetings by selecting, “Operating District”. Regional and center programs must track authorizations.

District Commitment and FAPE date must occur within 7 school days of the IEP Meeting Date.

**NOTICE REGARDING PROVISION OF SPECIAL EDUCATION**

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**STUDENT INFORMATION**

<b>Student:</b>	<b>Date of IEP Team Meeting:</b>
<b>Birthdate:</b>	<b>Resident District for Purpose of FAPE:</b>
<b>Age:</b>	<b>Student Primary Language:</b>
<b>Grade:</b>	<b>Language in the Home:</b>

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**PURPOSE**

This notice is a result of the Individualized Education Program (IEP) Team meeting that was held on the date listed above for the following purpose(s):

**Primary Purpose:** Annual Review      **Additional Purpose:** Transition

**NOTICE FOR PROVISION OF PROGRAMS AND SERVICES**  
 You are receiving this notice because, based upon the most recent IEP Team meeting, Kelly remains eligible for special education programs/services. Upon district signature, this notice and Kelly’s IEP constitute the district’s offer of a Free Appropriate Public Education (FAPE).

**All programs/services/supplementary aids will start on:** \_\_\_\_\_  
**The following person will assure implementation of this IEP:** \_\_\_\_\_

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**OPTIONS CONSIDERED**

The IEP Team Report describes the assessment/evaluation procedures and data used during the IEP Team meeting. The following options were considered but not selected for the reason(s) indicated below:

Considered Options	Reasons Not Selected
Less Restrictive Environment	
More Restrictive Environment	
Communication needs	
Need for assistive technology devices and services.	
Participation in the MI Statewide Assessment (M-STEP)	

**Other relevant factors to the district’s proposal or refusal:**

\_\_\_\_\_

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**RESOURCES FOR PARENTS & STUDENTS**

The Parent Handbook and Procedural Safeguards issued annually describes protections under the Individuals with Disabilities Education Act (IDEA). Information is also available from:

- FAMILY MATTERS, an online resource center for families developed by the Michigan Department of Education - Office of Special Education (MDE-OSE), provides information about special education and other resources, in a parent friendly format. <http://bit.ly/MDEFamilyMatters>
- DISABILITY ADVOCATES OF KENT COUNTY: 160 68th Street SW, Grand Rapids, MI 49548; 1-616-949-1100; <https://www.dakc.us/>
- DISPUTE RESOLUTION CENTER OF WEST MICHIGAN: 678 Front Ave NW, Grand Rapids, MI 49504; 616-774-0121; [www.drcwm.org](http://www.drcwm.org)
- ARC OF KENT COUNTY: 2922 Fuller Ave NE #201, Grand Rapids, MI 49505; 616-459-3339; [www.arc Kent.org](http://www.arc Kent.org)
- MICHIGAN ALLIANCE FOR FAMILIES: 1325 S. Washington Ave, Lansing, MI 48910; 1-800-552-4821; [www.michiganallianceforfamilies.org](http://www.michiganallianceforfamilies.org)
- DISABILITY RIGHTS MICHIGAN: 4095 Legacy Parkway, Suite 500, Lansing, MI 48911-4263; 1-800-288-5923; [www.drmich.org](http://www.drmich.org)
- MICHIGAN DEPARTMENT OF EDUCATION-OFFICE OF SPECIAL EDUCATION: PO Box 30008, Lansing, MI 48909; 888-320-8384; [www.michigan.gov/mde](http://www.michigan.gov/mde)
- SPECIAL EDUCATION MEDIATION SERVICES: Call 833-KIDS-1ST, 833-543-7178, 517-334-0034; <https://mikids1st.org>

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**SIGNATURES**

**DISTRICT COMMITMENT**  
 The school district superintendent/designee assures that the least restrictive environment has been fully considered and assigns this student to the following:  
 The resident district  
 An operating district  
**Building/Program:** \_\_\_\_\_

**E** Resident District Superintendent/Designee: \_\_\_\_\_ Date: \_\_\_\_\_

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**QUALIFIED SIGNATURE**

The qualified provider signing here has reviewed this plan with the IEP team and agrees that the planned intervention(s) are appropriate based on the needs of the students in accordance with Medicaid policy. If applicable, all services are provided with the expectation that the student’s primary care provider (PCP) and the student’s case manager, therapist etc. is informed through a Release of Information.

\_\_\_\_\_  
**Qualified Medical Provider**  
 Signature      Date: \_\_\_\_\_

A

B

C

D

E

F

F. When a student is receiving a direct service or personal care services, a qualified signature must be obtained for Medicaid purposes from one of the team members providing a direct service or the individual signing the personal care authorization such as an Audiologist, Counselor, OM Specialist, OT, PT, Psychologist, Nurse, School Social Worker or Speech and Language Pathologist.

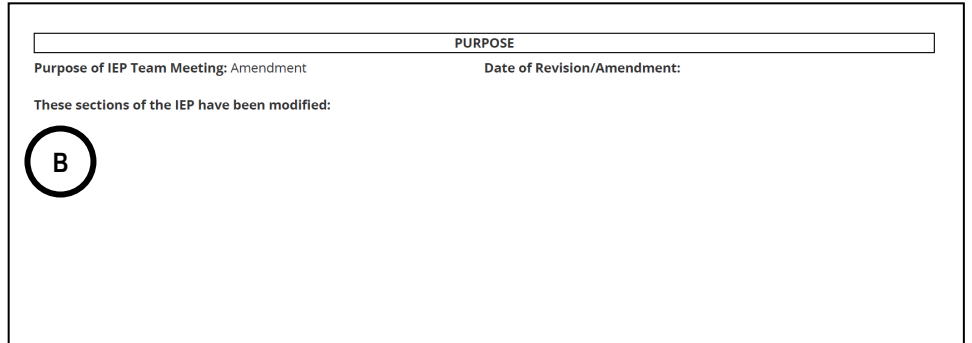
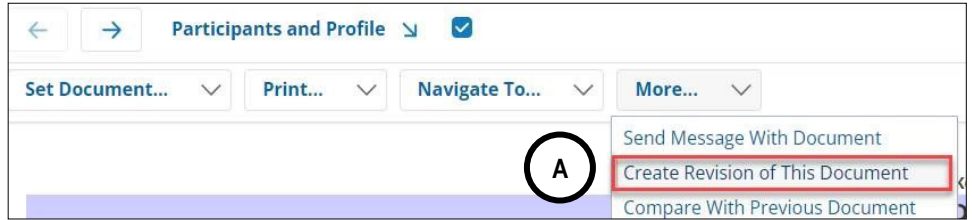
**NOTE:** Parent/guardian signature is required for initial provision of programs/services. Parent/guardian or student (when applicable) should be provided a copy of the IEP at the conclusion of the meeting. If parent/guardian or student (when applicable) does not attend an annual review IEP, the IEP must be completed by the annual due date and a copy of the IEP must be provided within 7 days of the meeting date.

# IEP Amendment

- A. In order to create an Amendment of an IEP, open the Active IEP document the team wishes to amend and select Create Revision of This Document
- B. The purpose of an IEP Amendment is to make **minor changes** to the IEP during the year it is in effect. If programming and/or substantial changes need to be made to a student's IEP, an IEP Team meeting should be convened to develop a new IEP.

Minor changes may include: additions or revisions to supplementary aids/services, updated goals, objectives/benchmarks, add or remove related services, increase or decrease time/frequency of service or programming, ESY, short-term changes such as homebound/home-based instruction.

Please detail explicitly which sections have been modified.



**It is critically important for both the parent and school district to be in agreement with using an IEP Amendment to modify a current IEP. If objections are raised by either party, a full IEP meeting should be scheduled.**

When completing an amendment, the student's IEP team must be informed of the changes. As a result, it is recommended to list all required participants as "Present" on the IEP Amendment to document that all IEP team members either participated in making changes to the IEP or were informed of the changes made.

When an IEP meeting is held, Notice requirements to parents are the same as for all other IEP Team meetings including Invitation and Notice Regarding Provision of Services. When no IEP Amendment meeting is held and parent agrees to change(s) over the phone, then no invitation is required.





# Progress Reporting

A. Progress Reporting should **include data that aligns with the criteria, evaluations, and schedule** listed in the short-term objectives/benchmarks table.

Comments should include progress data unless the objective is not applicable at time of reporting

- Progress on goals must be reported with same frequency as general education students receive report cards.
- Must report on all goals/objectives or relevant benchmark(s)
- Assure reporting is accessible upon request.
- Progress report will include a **summary of data collected** during the scheduled progress monitoring

**Examples:**

*When given a list of 10 words containing beginning and ending blends, STUDENT is reading an average of 7 out of 10 words correctly and based on the last three trials. The students most recent scores are: 7/10, 6/10, 8/10.*

*Based on documented observations and when using a social script, STUDENT is able to use socially appropriate voice tone, volume, and faces the speaker to make a request or respond to a peer or adult in 1 out of 3 opportunities.*

**Ongoing Data Collection—**

- Facilitates instructional planning
- Helps determine whether instructional strategies are working
- Facilitates communication between IEP Team members
- Gives direction for setting future IEP goals
- Assists in making placement and extended school year (ESY) decisions

Student Name: Suzy Sample41
IEP Date:

### Progress Reporting

Area of Need: Other
Subarea:

Curriculum Reference:
Strand:

Grade:
Grade Level Standard:

Annual Goal:
Suzy will by , as measured by .

Short-Term Instructional Objectives:

	Objectives	Criteria	Evaluations	Schedule
1				
2				
3				
4				

Staff Responsible for Goal: Special Ed Teacher:

Progress On Short-Term Instructional Objectives

Date	Grade Level	Objective	Status	Comments on Progress	Staff Initial

A

**NOTE:** Based on progress monitoring data, if a student achieves their annual goal prior to the expiration date of the IEP, the IEP team should reconvene to revise the IEP in order to increase the target and/or target the next subsequent underdeveloped skill. When a student is progressing below the expected rate, include an explanation. If this status continues, the IEP team should reconvene and the IEP should be revised accordingly.

# Authorization for Personal Care Services

A. When the “Has Personal Care?” checkbox is selected on the Supplementary Aids and Services page, the Authorization for Personal Care Services page will populate into the IEP and completion will be required prior to finalization.

**Has Personal Care Services?**

B. Please note that personal care services require an authorization by a licensed practitioner operating within the scope of their practice, including Registered Nurses (RN), Occupational Therapists (OT), Physical Therapists (PT) and Master of Social Work (MSW)

Please ensure this form is signed, dated and uploaded to the student's documents as an attachment to the IEP. Naming convention should be: student last name, first name, type of prescription and date prescription was signed.

A

Student Name: \_\_\_\_\_

## Medicaid School Based Services: AUTHORIZATION FOR PERSONAL CARE SERVICES

Personal Care Services include a range of human assistance services provided to persons with disabilities and chronic conditions which enables them to accomplish tasks they would normally do for themselves if they did not have a disability. Assistance may be in the form of hands-on assistance or cueing so the person performs the task by him/herself.

Please indicate with a check mark all services identified in the PLAAFP section that the above named student requires on a daily basis:

- Ambulation
- Assistance with self-administered medications
- Bathing
- Dressing
- Eating/Feeding
- Grooming
- Health related functions through hands-on assistance, supervision and cueing
- Maintaining continence
- Meal Preparation
- Mobility/Positioning
- Personal hygiene
- Redirection and intervention for behavior
- Respiratory Assistance
- Skin Care
- Toileting
- Transferring

**Authorization** Personal care services require an authorization by a licensed practitioner operating within the scope of their practice, including Registered Nurses (RN), Occupational Therapists (OT), Physical Therapists (PT) and Master of Social Work (MSW).

### Licensed Practitioner Authorization:

I certify that the above named student requires daily personal care services due to their disability or medical condition. Services indicated above are noted the student's PLAAFP and Personal Care Service has been documented in the *Supplementary Aids/Program Modifications/Support for School Personnel* section of the student's IEP. This authorization is valid for one year from the signature date below.

B

Licensed Practitioner: \_\_\_\_\_ Date: \_\_\_\_\_  
*Stamped signature not valid*

**Authorization must be updated annually and kept in student's Medicaid record for 7 years for audit purposes.**

**Using the Personal Care Authorization form, a section of the IEP, please ensure this form is signed, dated and uploaded to the student's documents as an attachment to the IEP. Naming convention should be: student last name, first name, type of prescription and date prescription was signed. (Example: Bunyan, Paul\_Personal Care\_1/15/2015). The student's Prescription Profile must also be completed. If you do not have access to add prescription information to the student's profile, please send this form to your Special Ed Secretary.**

## Appendix A – Required IEP Team Participants

Participants:	Initial determination of eligibility, or review of eligibility	Review, revision IEP Held at least annually	Transition IEP No later than age 15, and older
<b>Student</b>	As appropriate	As appropriate	Must be <b>invited</b> . If not attending the IEP, indicate transition preferences and interests on the IEP and document how student input was obtained.
<b>Parent / Guardian</b>	Must be <b>invited</b>	Must be <b>invited</b>	Must be <b>invited</b>
<b>School District Representative</b> Someone who: (1) is knowledgeable about curriculum, (2) is able to provide or supervise the provision of special ed., (3) is knowledgeable about, and can commit the resources needed to implement the IEP. It is recommended that this person is not the student's teacher.	Attendance Required	Attendance Required	Attendance Required
<b>General Education Teacher</b> A general education teacher to whom the student is now assigned, or may be assigned in the future.	Attendance Required	Attendance Required	Attendance Required
<b>Special Education Provider</b> Someone who provides special education classroom instruction or related services.	If not previously enrolled in special education, must include a provider appropriate for the student's age level.	Attendance Required	Attendance Required
<b>Evaluation Team Representative</b> Someone who can interpret the instructional implications of the initial or three-year evaluation.	Required role. For all eligibility determinations this member <b>must</b> be a MET member per MI rules.	Required role. A knowledgeable person who <b>may</b> be a member of the evaluation team (i.e., Special Ed Teacher).	Required role. <b>Must</b> be MET member for eligibility determination IEP per MI rules. Otherwise, a knowledgeable person who <b>may</b> be a member of the evaluation team (i.e., Special Ed Teacher).
<b>Out of Resident District Placement</b> In cases where another district is authorized to provide evaluation, planning and services	Must be <b>invited</b>	Must be <b>invited</b>	Must be <b>invited</b>
<b>Public Agency Representatives</b> A representative from agencies likely to provide or pay for transition services.	NA unless the eligibility determination is part of a transition IEP (see far right column)	NA	School required to seek parent consent to invite agency(s), and then invite parent-approved agencies if permission granted
<b>Others</b> Someone invited by the parent or school due to his or her knowledge or special expertise regarding the student.	As appropriate	As appropriate	As appropriate, subject to transition agency invitation requirement above

## Consideration of the Need for Extended School (ESY) Year Services

This document explains Extended School Year services and how to determine whether they are needed. A worksheet “Review of Data for Considering ESY Services” is included to assist IEP Teams.

### What are ESY Services?

ESY is an entitlement under the Individuals with Disabilities Education Act (IDEA) and refers to special education and/or related services provided to eligible students with disabilities beyond the normal academic year for the purpose of providing a free appropriate public education (FAPE). The purpose of ESY is to maintain a skill that is both being developed through an annual IEP goal and essential to an individual student. ESY services are offered at no cost to parents and will vary by type, location, and length of time, depending on the individual needs of the student.

### ESY Services are NOT:

- Mandated for all students with disabilities.
- Determined based on an eligibility category.
- Summer school, an enrichment program, or compensatory services.
- Provided to teach new or remediate skills.
- Provided for credit recovery.
- Required 12-month programs.
- A continuation of the IEP provided during the regular academic year.
- Required to be provided all day or every day.
- An automatic provision from year-to-year.
- Required to be provided in a traditional classroom setting.
- A service to be provided to maximize each student’s potential.
- A replacement for lack of attendance.
- Childcare services.

### Who is Eligible for ESY Services?

Although ESY services must be considered annually for each student with an IEP, not every student is eligible. Each student has their own individual educational needs that are defined in the present level statement of academic achievement and functional performance (PLAAFP) of the IEP and supported through accommodations or specially designed instruction and IEP goals. IEP Teams must annually consider whether the student requires ESY services to maintain skill development in one or more IEP goal areas of concern. When considering the need for ESY services the IEP Team must use data to support ESY decision making, which will ensure the provision of a FAPE.



## The IEP Team Determines the Need for ESY Services Based on Data/Information Review

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Data review at the IEP Team meeting includes a review of a variety of information, ongoing assessment, and informal and formal methods. Considerations should include multiple forms of data. Examples of data that may be used include:

- Daily academic or behavioral performance records
- Criterion-referenced and norm-referenced test data
- Anecdotal records from information collected throughout the year
- Behavioral checklists
- Student's work samples
- IEP progress reports
- Parent input
- Therapy logs
- Point sheets or frequency charts
- Prior regression/recoupment
- Other predictive information



The critical question for the IEP team is not whether the student can benefit from ESY, but rather whether ESY is essential for providing FAPE.

**Resource documents available from MDE:**  
[Guidance for Extended School Year Services in Michigan](#)  
[Standards for Extended School Year Services in Michigan](#)

## Review of Data for Considering ESY Services

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The IEP Team must consider the data and information in the following table when determining the student's need for ESY services as required within MARSE Rule 340.1721e(2).





Student Name:	IEP Date:	
Standard for Extended School Year	Standard Met	Data/Information Review
<p><b>Regression/Recoupment:</b> Does the student demonstrate serious potential for regression of skills related to IEP goals as evidenced by the following data review? Can the student's regression be recouped within a reasonable period of time after returning to school?</p> <p>Note: All students lose skills when there is a break in services. The IEP Team determines what a reasonable period of recoupment is for the student's goal area(s) of concern.</p> <ul style="list-style-type: none"> <li>● <b>Part 1:</b> Does student data reflect a consistent pattern of learning (i.e., steady baseline) or an increase in skill acquisition, with a drop in student performance following a break in instruction? <input type="checkbox"/> Yes <input type="checkbox"/> No</li> <li>● <b>Part 2:</b> Does the data demonstrate the student required an extended period of time to regain the previous level of acquired skill/level of performance? <input type="checkbox"/> Yes <input type="checkbox"/> No</li> </ul> <p><b>If the answer to either part 1 or part 2 is yes, the standard is met.</b></p>	<p><b>Yes</b> <input type="checkbox"/></p> <p><b>No</b> <input type="checkbox"/></p>	
<p><b>Nature and/or Severity of Disability:</b> Does the nature or severity of the student's disability require consistent programming without substantial breaks in service for the student to make progress towards IEP goals as evidenced by the following data review:</p> <ul style="list-style-type: none"> <li>● Does student data reflect a <b>significant drop</b> in performance of goal maintenance after a break in consistent programming? <b>If yes, the standard is met.</b></li> </ul>	<p><b>Yes</b> <input type="checkbox"/></p> <p><b>No</b> <input type="checkbox"/></p>	
<p><b>Critical Stages/Areas of Learning:</b> Is the student at a critical stage of development where a break in services will jeopardize skill acquisition as evidenced by the following data review:</p> <ul style="list-style-type: none"> <li>● Does student data reflect a very slow rate of learning with a sudden and/or steep incline/increase prior to a break in instruction? <b>If yes, the standard is met.</b></li> </ul>	<p><b>Yes</b> <input type="checkbox"/></p> <p><b>No</b> <input type="checkbox"/></p>	
<p><b>ESY Eligibility</b> If one or more standard above is met, the student is eligible for ESY services. Based on the evidence above, this student:</p> <p><input type="checkbox"/> Does <u>not</u> require Extended School Year; or, <input type="checkbox"/> Requires Extended School Year to address a specific goal or need.</p> <ul style="list-style-type: none"> <li>● Record ESY determination within the IEP or IEP Amendment</li> <li>● Maintain a record of provision of ESY service.</li> </ul>		



## PLAAFP Enhancements: Measurable Goals Begin Here!

Through Kent ISD’s General Supervision Monitoring process, only **35%** of IEPs (n = 197) reviewed included a clear and explicit connection between goals and their corresponding PLAAFP sections evidenced by **consistent data sources used to describe baseline data and the target for the goal**. Although this is not a new requirement, baseline data was often omitted when developing the Present Level of Academic Achievement and Functional Performance, which is a critical component in determining the student’s current level of performance and to measure progress required through the IEP Progress Report.

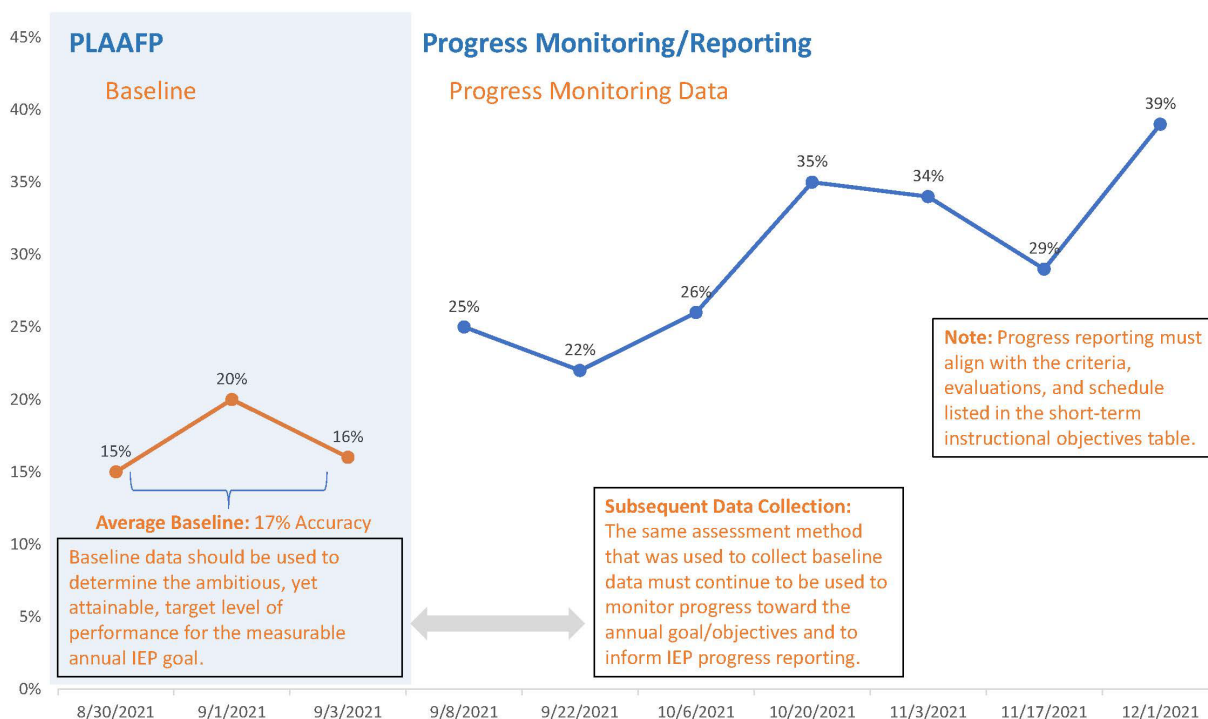
As a result, the MIPSE paperwork has been revised to support this requirement. When an area of need will be addressed through a goal/objectives, a textbox will now display to include Baseline Data and Starting Point for Instruction.

In moving forward, staff will need to begin by collecting baseline data on the student’s current level of performance for the targeted skill/behavior they plan to address through the goal. The same method of assessment should be used to monitor progress on the goal. Include this baseline data in the PLAAFP citing the assessment method, date of baseline assessment and the specific skill/behavior being measured.

### Connection to the Annual Goal and Objectives

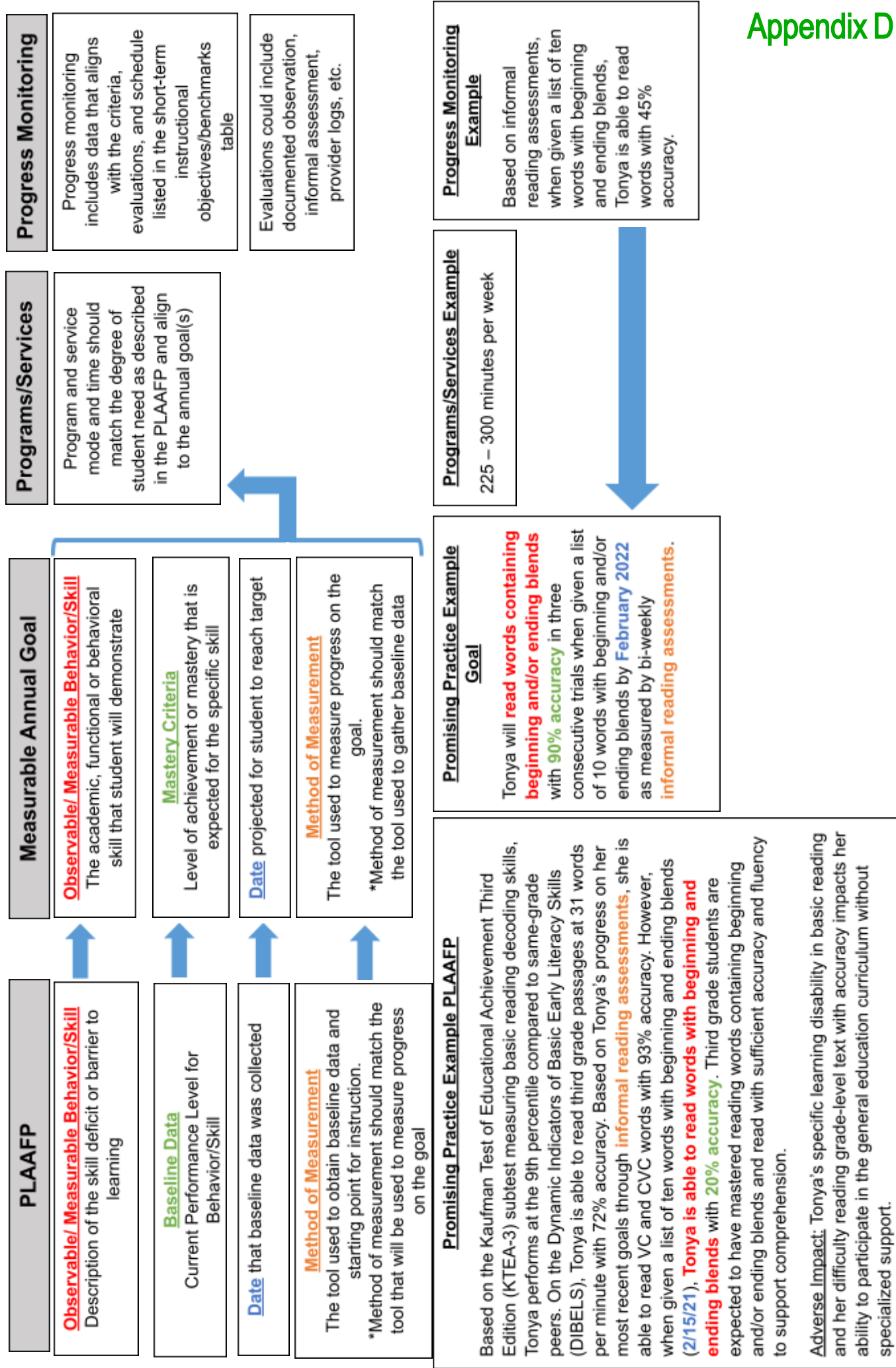
- Baseline data should be used to determine the ambitious, yet attainable target level of performance for the measurable annual IEP goal. The goal must include:
  - The same skill/behavior for which baseline data was collected
  - The same assessment method used to collect baseline data and will continue to be used to progress monitor

#### Example:



**Note:** Special educators should use professional judgement to determine the number of data points needed to establish a baseline level of performance. At least one data point must be used; however, more data points are encouraged/preferred to establish a reliable baseline.

# IEP Alignment



## PLAAFP & GOALS ALIGNMENT WORKSHEET

Note: components of the PLAAFP must be included in a logical order; however, there can be more than one acceptable way to organize PLAAFP components

Present Level of Academic Achievement & Functional Performance (PLAAFP)	Goals and Objectives
<p><b>Establishing the Need</b> - Include two data sources in addition to the data source used to monitor progress related to the need (Data sources 1 &amp; 2)</p>	↑
<p><b>Strengths: Observable/ Measurable Behavior/Skill</b> - Based on data, what can the student do relative to previous IEP goals (if applicable) and/or current assessments?</p>	
<p><b>Observable/ Measurable Behavior/Skill</b> - Description of the skill deficit or barrier to learning</p>	↑
<p><b>Baseline Data</b> - Current Performance Level for Behavior/Skill (Data source 3)</p>	↑
<p><b>Date</b> that baseline data was collected</p>	↑
<p><b>Method of Measurement</b> - The tool used to obtain baseline data and starting point for instruction. <b>Method of measurement should match the tool that will be used to measure progress on the goal.</b></p>	↑
<p><b>Same-grade and/or Age-level Peer Performance</b> for this Behavior/Skill</p>	
<p><b>Adverse Impact</b> of the skill deficit on the student's progress in general education with connection to the disability (if applicable)</p>	

## Starting Point for Instruction



		<b>PLAAFP: Narrative Description of Unique Need</b>	
		Yes	No
<b>Compliance</b>	Describes the skills that the student CAN do.		
<b>Promising Practice</b>	Includes data and data source(s) used to identify the skills that the student has mastered. Data from previous IEP goals is included if applicable.		
<b>Compliance</b>	Describes the student's skill deficit/barrier to learning. Includes data and data source(s) used to identify the skill(s) the student has NOT yet mastered.		
<b>Promising Practice</b>	Includes at least three relevant data sources and the corresponding/specific data. One data source can be used to monitor student progress related to the student's skill deficit/barrier to learning.		
<b>Promising Practice</b>	Defines in understandable terms where the student currently functions as compared to grade and age level peers/expectation.		
<b>Compliance</b>	The IEP specifically states how the <b>disability</b> adversely impacts progress in the gen ed curriculum and post-secondary goals, if applicable.		
<b>Promising Practice</b>	Areas of need are identified to address all qualifying criteria/core features of the disability.		



		<b>Annual Goal/Objectives</b>	
		Yes	No
<b>Compliance</b>	Consistent skill deficits/barriers to learning are described in the PLAAFP and targeted in the annual goal.		
<b>Promising Practice</b>	There is a consistent data source used to describe baseline data in the PLAAFP as well as the target for the goal.		
<b>Compliance</b>	IEP goal and objectives have defined mastery criteria for growth based on baseline data from the PLAAFP.		
<b>Compliance</b>	The student should demonstrate the skill over time/ trials to indicate mastery (e.g., {Student} will read words containing beginning and/or ending blends with 90% accuracy in three consecutive trials.)		
<b>Promising Practice</b>	Based on baseline data, mastery criteria are individualized and encompass high expectations for learning that are achievable over the course of one year.		
<b>Compliance</b>	The IEP goal specifically describes the methods used for measurement of progress. Method of measurement should match the tool used to gather baseline data.		