

TURNING THREE YEARS OLD

Transitioning from Early Start
To Preschool



A Planning Workbook for Families of Children with Special Needs

Matrix Family Resource Center
800-578-2592

Adapted from a collaborative project with Sonoma County Office of Education and North
Bay Regional Center

THIS TRANSITION PLANNING WORKBOOK BELONGS TO:

CHILD'S NAME
AND HIS/HER FAMILY



*YOUR CHILD'S SERVICE COORDINATOR
(THE PERSON RESPONSIBLE TO HELP YOU PLAN FOR
THE PRESCHOOL YEARS):*

WHO	FROM WHERE	PHONE
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OTHER PERSONS WHO MAY BE HELPFUL...

WHO	FROM WHERE	PHONE
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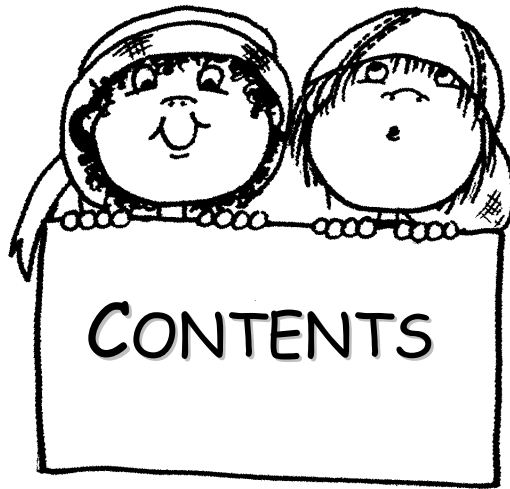
WHO	FROM WHERE	PHONE
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WHO	FROM WHERE	PHONE
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YOUR LOCAL SCHOOL DISTRICT

SCHOOL DISTRICT NAME	PHONE
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The time lines in this booklet are taken from the
California Code of Regulations
Early Intervention Services Transfer and Transition Procedures.



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TURNING THREE YEARS OLD!

Before long, your child will be turning three years old. There are changes ahead as your child moves from services for infants and toddlers to services for preschool age children.



Changes can bring lots of feelings, such as **worry**, **excitement**, sadness, and **hope**. You may even feel all these and others at the same time!

This workbook is intended to help you prepare for those changes. You and the people working with you and your child can go through it together, and as a team, you can think about what you want, get all the information you need, and make the best **decisions** for your family.

Parents' Vision for Their Children

- ☆ We want our children to be happy.
- ☆ We want our children to progress developmentally.
- ☆ We want our children to be safe from ridicule.
- ☆ We want our children to have appropriate social skills.
- ☆ We want our children to have friends who love them for who they are.
- ☆ We want our children to be invited to birthday parties.
- ☆ We want our children to feel loved and accepted by our community.
- ☆ We want our children to reach their greatest potential.
- ☆ We want our children to be involved in fun after school activities with neighborhood friends.
- ☆ We want our children to have similar opportunities as their same-age peers and siblings.



*From Handbook on Family Involvement in
Early Childhood Special Education Programs*

Before your child turns 2 1/2 years old:

Your service coordinator will:

Ask you whether you have started to think about what you want for your child after he/she turns three years old.

You may think about:

- * Will my child still need special help during the preschool years?

- * Do I want my child to attend a preschool class, a day care, or stay at home with me or someone else?

- * How are infant programs and special preschool programs ALIKE and DIFFERENT? (See page 13)



Your service coordinator will:

Listen to your thoughts and give you information you need about:

- * Services and programs available in the community.

- * The eligibility criteria of any programs in which you may be interested.

- * The next steps in the process of transition.

- * How to contact another parent who has gone through transition.
(You can call Matrix Family Resource Center at 800-578-2592 or visit their website at www.matrixparents.org to connect with other parents and to learn more about the transition to preschool process.)

You may discover:

Talking over your ideas with your service coordinator, family, friends, and/or other parents is a good way to get the most information possible.



If it seems likely that your child will continue to need special help during the preschool years, your service coordinator will:

Tell you about choices such as:

- *Special help in a typical preschool
- *Special help in your home or at daycare
- *Special help in a special preschool

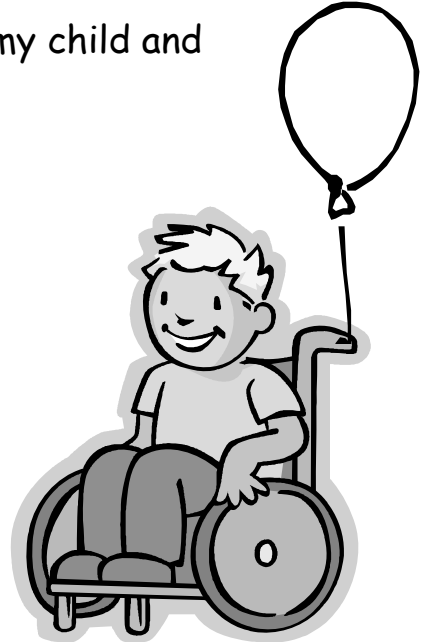
Your service coordinator should also notify the special education department of your local school district that your child is expected to require services after age 3

If it seems likely that your child will NOT continue to need special help during the preschool years, your service coordinator will:

- *Ask if you would like help getting information about Head Start preschools, another preschool program or child care.
- *Ask for your written permission to share information with administrators of programs in which you might be interested.

You may decide:

Who do I want to be given information about my child and family?



If your child is a client of North Bay Regional Center, your Service Coordinator may need to:

Schedule a developmental or medical evaluation to help determine whether your child will be eligible for Regional Center services after age 3.

You may think about:

What do I want the developmental specialist or doctor to know about my child?



When your child is between 2 1/2 & 2 3/4 years old:

Your service coordinator will:

- * Schedule and hold a **transition** IFSP at a time and place that is convenient for you.
- * Provide information on your legal rights during the transition process.

You may discover:

That you want to attend a training with the Matrix Family Resource Center to learn more about your child's rights, the IEP process and special education services. Call 800-578-2592 for more information.



If your child is a client of North Bay Regional Center, your Service Coordinator will:

Meet to discuss your child's case and determine if he or she will continue to be eligible for NBRC services after age 3. You will receive notice about the decision of eligibility. You have the right to appeal that decision if you disagree.

You may:

Ask for copies of developmental and/or medical records from the Regional Center and/or your child's doctor(s), therapist(s) or any one else who has worked with your child.



When your child is between 2 1/2 & 3 years old:

If you are thinking about enrolling your child in a preschool classroom, a school representative may:

Go with you, if you choose, to visit any programs or preschools in which you may be interested.



You may think about:

What questions do I want to ask about the classrooms I visit?

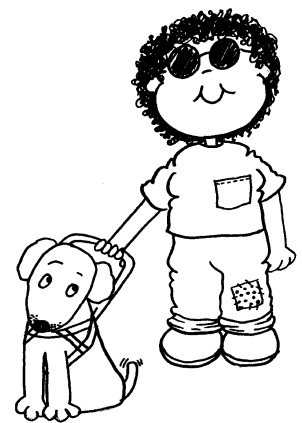
Is there anyone else we would like to come with us when we visit?

How Infant Programs & Special Preschool Programs are ALIKE

- Both provide *individualized services* to children and families.
- Both have trained staff and specialists that work with children and their families.
- Both use a team approach.
- Both work with you to write an individualized plan for services for your child.

How Infant Programs & Special Preschool Programs are DIFFERENT

- Preschool programs usually provide services in a classroom while infant programs usually provide services in the home.
- Preschool programs often take children to school in a school bus without the parent along while infant programs usually require a parent to come along with the child.
- Preschool programs usually provide lots of opportunities for play with other children during the school day.
- Children receive preschool services from once to four or five times a week; infant programs usually provide services once or twice a week.
- Preschool programs have times when your child might eat or nap away from home without you.
- Infant programs write an *Individualized Family Service Plan (IFSP)* with outcomes for your child and your family.
- Preschool programs write an *Individual Education Plan (IEP)* with goals and objectives for your child which may go along with a separate *Individual Person Plan (IPP)* written by the North Bay Regional Center.



QUESTIONS TO ASK ABOUT A PRESCHOOL

Who are the children attending the class?

Are they all children with disabilities?

Mostly children without disabilities?

Are they the same age as my child?

Where is the class located?

Is it near my home?

Do I have to provide transportation?

Will my child ride a bus? How long will my child be on the bus?

How much time do the children spend in school?

How many days per week?

How many hours per day?

Do they go during the summer?

Will I have to pay for my child to go to this school?

Is the classroom safe for my child?

Is the outside area fenced?

Is the play equipment safe for my child?

Are the children well supervised?

Are there children who are too rough or active around my child?

Will my child need to be potty-trained to go to school?

Will they work on potty training while my child is there?

How do they handle wet or messy pants or changing diapers?

What is the atmosphere in the classroom?

Is there a happy, relaxed feeling?

Are the children busy with learning activities?

Does the staff speak to the children with caring and respect?

Is the classroom clean, with interesting toys and materials?

How will they handle my child's special medical or diet needs?

Can I send special food or medicine?

What will happen if my child gets sick at school?

If my child needs to be fed, who will do it?

How will I be involved in my child's school?

Can I visit the school whenever I want to?

Will the teacher let me help in the class if I want to?

Are there parent meetings? Am I required to go to them?

How will the teacher let me know what is going on at school?

What will they teach my child at school?

Is the curriculum the same for all the children or do they have individualized (differentiated) instruction?

How much time is spent in structured versus unstructured activities?

Inclusion



Inclusion means children with special needs are part of their community, attend their neighborhood schools, and participate in chronologically age-appropriate education regardless of their disability. The law guarantees that all children have access to a free, appropriate public education (FAPE) in the least restrictive environment (LRE), and that should first mean the general education classroom. It is the spirit of the law that all children will be **included** as participants in their communities and schools; that they will have opportunities to participate in activities, to interact with age mates, and to develop friendships.

Inclusion is **not** the placing of students into general education without supports or doing away with special education. Inclusion recognizes the unique needs of the student with disabilities and does not sacrifice the education of typical students.

All students, with or without special need, benefit from inclusion. Inclusion provides students with disabilities opportunities to interact socially with peers. Those peers provide them with models for appropriate behavior. Typically developing students learn to appreciate and accept individual differences. They show increased respect for all people. All children have the opportunity to develop positive relationships and friendships with others.

Inclusion allows your child his/her right to be educated with peers. It emphasizes an acceptance of your child as a child, without focusing on his/her disabilities. Your child learns by participating in all parts of school life rather than being separated based on needs caused by his/her challenges.

Within one month before your child turns 3 years old:

Your service coordinator will:

Schedule and hold a meeting to "transition" (move) your child from services for infants to services for preschool aged children.

There are several types of meetings which could be held, depending on what services your child has been receiving and what services your child will receive after age 3:

- Final IFSP meeting
- Transition IEP meeting
- IPP meeting



You may think about:

What is important that I share about my child and family at these meetings?

The Individual Education Plan (IEP)

The Team:

- ☆ Parent(s) or surrogate parent(s) of the student.
- ☆ At least one special education teacher, or where appropriate, at least one special education provider
- ☆ The regular education teacher if the child is, or may be participating in the regular education environment.
- ☆ A representative of the local education agency who:
 - Is qualified to provide, or supervise, special education services;
 - Knows about the general curriculum
 - Knows about the availability of resources of the school district
 - Someone who can interpret the instructional implications of the evaluation results;
- ☆ Others may attend and participate in the assessment review and planning process. Such persons may include a friend/advocate for the parent/student, other professionals working with the child, independent evaluators, doctors or other health professionals.

Timeline

The IEP meeting and process must, by California State law, be completed by 60 calendar days after the assessment plan is signed and returned to the school, not including school breaks.

Eligibility

After assessment, the IEP team makes the decision as to whether or not the child meets the requirements necessary to receive special education services. In order for a child to receive special education services, the child must first qualify according to guidelines stated in the law and regulations.

IDEA defines children with disabilities are those who have been evaluated as having any one or combination of the following and, because of these impairments, require special education and related services:

- | | |
|----------------------------------|---|
| * Autism | *Multiple disabilities |
| * Deaf-blindness | * Orthopedic impairment |
| * Deafness | * Other health impairment |
| * Emotional disturbance | * Visual impairment |
| * Established medical disability | *Speech and/or language impairment in one or more areas of voice, fluency, language and articulation. |
| *Hearing impairment | *Specific learning impairments |
| * Mental retardation | *Traumatic brain injury |

The Individualized Education Plan (IEP)

When a child qualifies for special education services, an Individual Education Plan is written. This plan is a legally binding document between the local educational agency (LEA) and the parent (the student). The IEP summarizes the assessment information, sets goals and objectives appropriate to the student, describes who is responsible for the delivery of specific services and defines the least restrictive environment in which the child's education and related services will be delivered. Parents, teacher, and administrators work together to develop the IEP.

What is an IEP?

1. A statement of the child's present levels of educational performance, including:
 - How the child's disability affects the child's involvement and progress in the general curriculum.
 - How the disability affects the child's participation in appropriate activities.
2. A statement of measurable annual goals, including benchmarks or short term objectives, related to:
 - Meeting the needs of the child to be able to participate in the general curriculum.
 - Meeting each of the child's other educational needs that result from the child's disability.
3. A statement of the special education and related services and supplementary aids and services to be provided for the child
 - To advance toward achieving annual goals.
 - To be involved in the general curriculum and participate in extracurricular and nonacademic activities.
4. An explanation of the extent, if any, to which the child will *not* participate with nondisabled children in the regular class
5. A statement of any individual modifications in the administration of State or district-wide assessment of student achievement that may be needed for the child to participate in those assessments. If the IEP team decides the student cannot participate in those assessments, an explanation of why the assessment is not appropriate, and how the child will be assessed.
6. The projected date for the beginning of services and modifications as stated in the IEP.
7. The frequency, location and duration of services and modifications.
8. A statement of how the child's progress will be measured and how the parents will be regularly informed of the child's progress.

(From: IEP Training, Northern California Coalition, DREDF, Matrix and Parents Helping Parents, 1998.)

(For families preparing for education services)

PREPARING FOR YOUR CHILD'S IEP (Individual Educational Plan)

Now that your child is turning 3 years old it is time to transition from "Early Start" services for infants to services for preschool-age children. Every child in special education has the right to an **Individual Educational Program (IEP)** that describes the needs of the child and the best program to meet those needs. If your child has been receiving infant services you are used to the IFSP or

Individual Family Service Plan. Now your teacher and others will meet with you to develop an IEP (Individual Educational Plan). This plan will be created at least yearly and will describe what your child is able to do now, what you want your child to do in the next year, and what services schools will provide to help you and your child to meet these goals.

"PREPARING FOR YOUR CHILD'S IEP" has been developed to help you plan for this very important meeting. Use the following worksheets to note what things you think are important for your child to work on in school. Remember, no one knows your child better than you!



- ♥ **Gross Motor:** (Large movements like crawling, running and jumping.)
What my child can do now:

What I'd like my child to work on:

- ♥ **Fine Motor:** (Small movements like holding a crayon or small toy, scribbling, etc.)
What my child can do now:

What I'd like my child to work on:

- ♥ **Prevocational:** (Ways my child helps around home or at school.)
What my child can do now:

What I'd like my child to work on:

- ♥ **Cognitive:** (Ways my child plays and solves problems, etc.)
What my child can do now:

What I'd like my child to work on:

- ♥ **Social/Emotional:** (How my child gets along with others.)
What my child can do now:

What I'd like my child to work on:



♥ Language/Communication: Receptive: (What my child understands)
What my child can do now:

What I'd like my child to work on:

♥ Language/Communication: Expressive: (How my child communicates wants and needs.)

What my child can do now:

What I'd like my child to work on:

♥ Self-Help: (Eating, dressing, toileting, etc.)

What my child can do now:

What I'd like my child to work on:

♥ Things about my child's personality that the teacher should know: (For example, "Rebecca never gives up." "Avery needs a nap daily or he gets cranky.")

♥ Hopes and dreams we have for our child:



(For continuing consumers of North Bay Regional Center)

PREPARING FOR YOUR CHILD'S IPP (Individual Person Plan)

Now that your child is turning 3 years old, if he or she still qualifies for Regional Center services, it is time to transition from "Early Start" services to services for older children. This usually means that your child will also be assigned a new Service Coordinator.

While receiving Early Intervention services your child has had an IFSP or Individual Family Service Plan. Now your new Regional Center Service Coordinator will meet with you to develop your child's first IPP (Individual Program Plan). This plan will be updated at least every three years, close to the time of your child's birthday. It will describe what your child is able to do now, what you want your child to be able to do in the future, and what services the Regional Center will provide to help you and your child to meet these goals.

"PREPARING FOR YOUR CHILD'S IPP" has been developed to help you plan for this very important meeting. Remember, no one knows your child better than you!!



♥ Things my child...
Likes a lot:

Does not like:

♥ Some great things about my child:

♥ These things make my child feel happy:

♥ These things make my child feel sad:

♥ These are my biggest worries about my child's future:

♥ My child and family currently receive these services:

♥ My child's health needs are:



♥ Things my child and family like to do for fun;

♥ My family and friends think these things about my child:

♥ If my world were perfect, this is what my child and family would be doing:
At home:

At school:

In the community:

With our friends:

♥ These people are important to my family, so I want to invite them to our IPP meeting:



It's the person first—then the disability



What do you see first?

The wheelchair?

The physical problem?

The person?

If you saw a person in a wheelchair unable to get up the stairs into a building, would you say, "There is a handicapped person unable to find a ramp?" Or would you say, "There is a person with a disability who is handicapped by an inaccessible building?"

What is the proper way to speak to or about someone who has a disability?

Consider how you would introduce someone—Jane Smith—who doesn't have a disability. You would give her name, where she lives, what she does or what she is interested in: she likes swimming, or eating Mexican food, or watching movies.

Why say it differently for a person with a disability? Every person is made up of many characteristics. Few people want to be identified only by their ability (or inability) to play tennis or by their love for fried onions.

In speaking or writing, remember that children or adults with disabilities are like everyone else—except they happen to have a disability. Therefore, here are a few tips for improving your language related to people with disabilities.

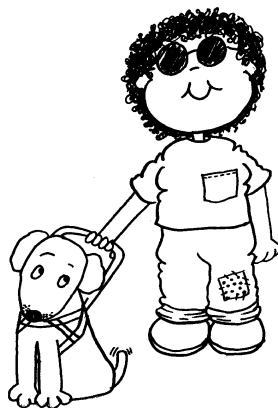
1. Speak of the person first, then the disability. (Better yet, is the disability relevant? Why not just say, "I went to the basketball game with my friend Debbie" rather than saying, "I went to the basketball game with my friend Debbie who uses a wheelchair.?"?)
2. Emphasize abilities, not limitations.
3. Do not label people as part of a disability group. Don't say "the disabled." Instead, say "people with disabilities."
4. Don't give excessive praise or attention to people with disabilities; don't patronize them.
5. Choice and independence are important. Let the person do or speak for him or herself as much as possible.
6. A disability is a functional limitation that interferes with a person's ability to walk, hear, talk, learn, etc. Use "handicap" to describe a situation or barrier imposed by society, the environment, or oneself.

Say...

child with a disability
person with cerebral palsy
person who is deaf or hard of hearing
person with mental impairment or retardation
person with epilepsy or seizure disorder
person who has...
without speech, nonverbal
developmental delay
emotional disorder or mental illness
uses a wheelchair
person with Down syndrome
has a learning disability
nondisabled, typically developing
has a physical disability
congenital disability
condition
seizures
cleft lip
mobility impaired
medically fragile or has chronic illness
paralyzed
has hemiplegia (paralysis on one side of the body)
has quadriplegia (paralysis of both arms & legs)
has paraplegia (loss of function of lower body)
of short stature, little person
accessible parking
child with autism

Instead of...

disabled or handicapped child
cp or spastic
deaf or dumb
retarded or retard
epileptic
afflicted, suffers from, or victim
mute or dumb
slow or retarded
crazy, insane, or mentally ill
confined to a wheelchair
Mongoloid or retard
is learning disabled
normal or healthy
crippled
birth defect
disease (unless it is a disease)
fits or spells
hare lip
lame
sickly
invalid or paralytic
hemiplegic
quadriplegic
paraplegic
dwarf or midget
handicapped parking
autistic child



Terms, Abbreviations and Acronyms... Oh My!

This glossary was written to help parents understand the terms, abbreviations and acronyms that are commonly used in developmental services and special education.

Some of the abbreviations and acronyms may be the same, but stand for different words. If you don't understand what terms that are being used, always ask for an explanation. Also, sometimes professionals use different terms for the same thing and sometimes terms change over time.

Finally, some terms are difficult for parents to hear, but are commonly used by Regional Center staff, school districts and medical professionals. Those terms are included here also so that you will be familiar with them, even though they may be uncomfortable to you.



ALPHABET SOUP (COMMON ACRONYM)

AAC	Augmentative Alternative Communication	LD	Learning Disabled/Learning Disability
ABA	Applied Behavior Analysis	LEA	Local Education Agency (local school district)
ADA	Americans with Disabilities Act	LH	Learning Handicapped
ADD	Attention Deficit Disorder	LRE	Least Restrictive Environment
ADHD	Attention Deficit Hyperactivity Disorder	MD	Muscular Dystrophy
APE	Adapted Physical Education	MD	Multiple Disabilities
ASD	Autism Spectrum Disorder	MH	Multihandicapped
AUT	Autism	MR	Mentally Retarded
CAC	Community Advisory Committee	NBRC	North Bay Regional Ctr.
CCS	California Children Services	OH	Orthopedically Handicapped
CH	Communicatively Handicapped	OI	Orthopedically Impaired
CP	Cerebral Palsy	OHI	Other Health Impaired
DD	Developmentally Delayed/Disability	O&M	Orientation and Mobility
DDS	Dept. of Developmental Services	OT	Occupational Therapy
DHOH	Deaf and Hard of Hearing	PDD	Pervasive Developmental Disorder
DIS	Designated Instruction and Services	PDDNOS	Pervasive Developmental Disorder, Not Otherwise Specified
DOE	Department of Education	PL	Public Law (Federal)
ED	Emotionally Disturbed	PT	Physical therapy
ECSE	Early Childhood Special Education	RC	Regional Center
ESY	Extended School Year	SCOE	Sonoma Co. Office of Education
FAPE	Free Appropriate Public Education	SDC	Special Day Class
FRC	Family Resource Center	SED	Severely Emotionally Disturbed
HSA	Human Services Agency	SELPA	Special Education Local Plan Area
IBI	Intensive Behavioral Intervention	SH	Severely Handicapped
IDEA	Individuals with Disabilities Education Act	SI	Severely Impaired
IEP	Individualized Education Program	SLD	Specific Learning Disability
IFSP	Individualized Family Service Plan	SLP	Speech & Language Specialist
IHSS	In-home Support Services	SSI	Supplemental Security Income
IPP	Individual Program Plan	SST	Student Study Team
IQ	Intelligence Quotient	TDD	Telecommunications Device for the Deaf
		VI	Visually Impaired

Terms Used in Special Education, Regional Centers, and Medicine

504: Refers to Section 504 of the Rehabilitation Act: any student with special needs, with or without an IEP, may qualify for 504. This allows modifications in the physical arrangement of a room, in lessons, in classrooms assignments and test taking. It also makes possible modifications to deal with behaviors, medical and other special circumstances.

Adapted Physical Education (APE): special physical education provided by an adapted physical education specialist who assists children with motor activities such as balance, climbing, and other gross motor skills.

Advocate: someone who takes action to help someone else (as in "educational advocate"); also, to take action on someone's behalf.

Advocacy Training: training that helps the parent to better understand the process and advocate for his/her child.

Alternative Dispute Resolution (ADR) - A process for resolving conflicts that may occur between families and schools related to a child's special education program/services.

Appropriate Placement: a specific educational setting which provides special education and related services according to the Individual Education Program.

Asperger's Syndrome: a neurological disorder in which children have normal intelligence and language skills, but have autistic-like behaviors and serious difficulty with social and communication skills. One of the disorders on the "autism spectrum".

Assistive Technology (AT): any item, piece of equipment, or system used to increase, maintain, or improve function of individuals with disabilities.

Assessment: observing and testing a child in order to identify the strengths and needs of that child. Assessment makes it possible to develop an appropriate educational program and to monitor progress.

At Risk: a term used for children who have, or could have, developmental problems that affect later learning.

Attention Deficit Hyperactivity Disorder (ADHD): a combination of symptoms relating to inattention and hyperactivity-impulsivity that last for at least 6 months and are not consistent with the child's developmental level.

Audiological Services: service provided by a licensed audiologist who identifies children with hearing losses and helps children with hearing losses to use their strengths and abilities.

Auditory Processing: the ability to understand, remember, and use information that is heard, both as words and as other verbal sounds.

Augmentative and Alternative Communication (AAC): augmentative and alternative communication is the use of other means to communicate in support of, or as an alternative to, speech.

Autism: is a disorder which severely impairs a person's ability to communicate and to interact with other people and usually occurs before the age of three. Autism is usually referred to as a *spectrum disorder* - that is, a disorder in which symptoms can occur in any combination and with varying degrees of severity.

Behavior Assessment - see Functional Behavior Assessment.

Cerebral Palsy: a range of neuromuscular disorders caused by injury to an infant's brain sustained during late pregnancy, birth, or trauma during the first two years of life. Children with cerebral palsy may have difficulty walking, speaking or swallowing.

Cognition; Cognitive Skills: thinking skills; sometimes referred to as preacademic or problem-solving skills in preschoolers.

Communicatively Handicapped (CH): a term used to describe children whose major disability is in the area of speech and language.

Community Advisory Committee (CAC): a group made up of parents of children with disabilities, members of the community, students, and special education professionals, who discuss and make recommendations on special education issues and hold informative meetings.

Deaf-Blind: a disability in which children have impairment of both vision and hearing that affects their ability to learn.

Designated Instruction and Services (DIS): (also called **related services**) additional services a student needs in order to benefit from his or her IEP (speech, adapted physical education, transportation, etc.).

Developmental: having to do with the stages of growth and development before the age of eighteen.

Developmental Specialist: someone who tests a child to measure how his/her development compares to other children of the same age.

Developmentally Delayed/Disability: a mental or physical impairment or combination of mental and physical impairments that is manifested before the individual attains age 22.

Down Syndrome: a chromosomal disorder that results in mild to severe developmental delays and physical symptoms.

Due Process: the legal procedures used to make sure that parents and educators make fair decisions about the identification, assessment and placement of children with disabilities.

Emotionally Disturbed (ED): a term used to describe children who have emotional problems significantly interfering with learning or from getting along with other people; the emotional problems must occur for a long period of time.

Early Intervention Services: services designed to identify and reduce the impact of a developmental problem as early as possible.

Early Start: California's program to help families whose infants or toddlers have, or are at risk for, disabilities or developmental delays.

Evaluation: the collection of information about a student's learning needs, strengths, and interests.

Extended School Year (ESY): a summer session designed to help children continue to work on IFSP/IEP goals.

Fair Hearing/Due Process Hearing: a formal hearing called by parents or a school district and run by an outside person. The purpose of the hearing is to resolve a disagreement about a child's educational program.

Family Resource Center (FRC): an organization of parents who are dedicated to serving families whose children have disabilities. This is done through parent-to-parent support, advocacy training, information and resources. The FRC Matrix Family Resource Center - 800-578-2592.

Fine Motor Skills: skills needing the use of hands or the use of small muscle groups.

Free Appropriate Public Education (FAPE): one of the key parts of the IDEA, which requires that an education program be provided for all school-aged children without cost to families.

Functional Behavior Assessment: "behavior assessment" usually performed by a behavioral specialist or school psychologist, it identifies problem behavior and provides interventions to teach acceptable alternative to the behavior.

Gross Motor Skills: skills needing the use of large muscle groups.

Head Start: Pre-school program for qualifying children ages 3 to 4 years. Head Start provides health, nutritional, educational, social and other services. Ten percent of children served must be children with disabilities.

Hearing Impaired (HI): a term used to describe children whose major disability is in the area of hearing and understanding speech.

Individuals with Disabilities Education Improvement Act (I.D.E.I.A.): the Federal Law that guarantees children with disabilities will receive a free and appropriate education. This may be accomplished in a special education and/or regular education setting.

Inclusion: children with and without disabilities participating together in an educational setting. Students with disabilities are placed in typical classrooms taught by regular education teachers. Help from special education teachers and/or special instruction and services can offer additional support in such a setting.

Individualized Education Program (IEP): a written plan for children ages 3 to 22 years which states a child's present level of educational performance, sets annual goals and short-term objectives (for some students) and identifies appropriate services needed to meet those goals.

Individualized Family Service Plan (IFSP): a written plan for families and children aged birth to three years which includes a statement of the family's priorities and resources and a statement of the child's present levels of development with outcomes and services to be provided.

Individualized Program Plan (IPP): a written, person-centered plan for persons after age 3 prepared by Regional Center and parents which includes the child's and family's desires, information about the child, and a plan for delivering services.

Integration: children with and without disabilities participating in community activities together.

Itinerant Instruction: a method of teaching whereby the teacher "goes to the child" and provides instruction and services wherever the child may be.

Language Delay: a lag or slowness in the development of a child's ability to speak or understand language.

Lanterman Act: The Lanterman Developmental Disabilities Services Act (Lanterman Act) is that part of California law that sets out the rights and responsibilities of persons with developmental disabilities, and creates the agencies, including regional centers, responsible for planning and coordinating services and supports for persons with developmental disabilities and their families.

Learning Disability (LD): a disability in which children have problems using language, remembering, concentrating, following instructions, reading, calculating or learning through listening or looking.

Least Restrictive Environment (LRE): a school setting which is most like, or is, a regular classroom while still meeting the child's special needs.

Mediation: an *informal* meeting that is held when parents and the school district cannot agree on a child's education program. This step comes before a due process hearing.

Mentally Retarded: see **Developmentally Delayed**

Multihandicapped (MH): when a child has two or more disabilities.

Natural Environment: a place where infants and toddlers without disabilities and their families might typically be found. Early Intervention services are required to be provided in a natural environment as much as possible.

Occupational Therapy (OT): a service provided by a licensed occupational therapist who assists children with fine motor activities and everyday tasks like eating, dressing and hand use.

Orientation and Mobility (O&M): a service provided by an orientation and mobility specialist who teaches children with visual impairments how to know their position in space and how to move safely from place to place.

Orthopedically Impaired (OI): a disability in which children have difficulty getting around without adaptive equipment, e.g., wheelchair, braces, etc.

Pervasive Developmental Disorder (PDD): a term used to describe a group of disorders in which there are delays in development of social and communication skills. Autism is the best understood PDD. Other types of PDD include Asperger's syndrome, childhood disintegrative disorder, Rett's syndrome, and PDDNOS (not otherwise specified). Children with PDD vary widely in abilities, intelligence and behaviors.

Physical Therapy (PT): a service provided by a licensed physical therapist who assists children with gross motor activities such as rolling, sitting, and walking.

Preschool: refers to classrooms that serve children three to five years of age.

Program Specialist: a person at the district level who is knowledgeable about available special education programs in that district, and who is responsible for making sure that children receive needed services.

Receptive Language: recognition and/or understanding of what is heard.

Related Services: see **Designated Instruction and Services**

Resource Room: a special education classroom for children who are in a regular classroom for more than half of the school day.

Resource Specialist Program (RSP): taught by a special education teacher who provides instruction and services for children who are assigned to a regular classroom for the majority of the day but who have needs for special education services as identified by the IEP team.

Self-Help Skills: a term relating to skills such as feeding, dressing, and toileting.

Sensory Integration Therapy (SI): usually provided by a specially trained occupational therapist, SI therapy does not attempt to develop specific skills, but rather provides the sensory and motor activities which help the overall functioning of the nervous system and helps the child to cope with the sensory input from the environment.

Special Day Class (SDC): a classroom set aside for children who would benefit from specialized services for over half of the school day; the children receive most of their teaching from a special education teacher.

Speech/Language Therapy: services provided by a remedial language and speech therapist or speech pathologist who helps children learn to communicate.

Transition: a time in a person's life when he or she moves from one education program to another. (This workbook helps with students moving from an early intervention infant program to a preschool program.)

Visual Impairment (VI): a disability in which children have a vision loss that affects their ability to learn.



PARENT RIGHTS & APPEALS PROCEDURES IN SPECIAL EDUCATION

The Individuals with Disabilities Education Act (IDEA) is a federal law which guarantees all children with special needs from the age 3 through 21 years the right to a free appropriate public education designed to meet their individual need.

Free Appropriate Public Education

- All children with special needs have the right to a free and appropriate public education.
- If no appropriate public program is available, a program in a state- approved non-public school may be offered as an alternative.
- You shall receive a full explanation of all procedural safeguards and rights regarding your child's education.

Education in "Least Restrictive Environment" (LRE)

- All children with special needs must be educated in a program that allows him/her the greatest possible amount of contact with nondisabled peers. School districts must make available programs and placement alternatives in the "Least Restrictive Environment." LRE incorporates "integration" or "mainstreaming" on the basis of individual needs. LRE may also be full-time inclusion in a general education classroom.
- The school environment supports opportunities for students with disabilities and students without disabilities to play, grow and learn from each other. Students with disabilities are placed under the direction of a special education teacher. Classes for students with disabilities should be available or developed within the district according to similarity of chronological age.
- There are planned and structured interactions for students without disabilities to promote acceptance and understanding of students with disabilities and special education teachers, students and families are equal participants in all school activities. When a child is in a special day class, he or she may be "integrated" or "mainstreamed" for part of the day.
- Inclusion means placement of students with disabilities in general education classrooms under the direction of general education teachers with support from teachers of special education and/or designated instruction and services.
- Placement is not forever. As your child's learning

needs change, so should the type of placement.

Related Services and Supplementary Aids

- Instructional and supportive services which assist your child to benefit from special education must be provided as indicated in the individualized education program (IEP). Examples of these possible services are: transportation, speech therapy, adaptive physical education, counseling, etc.
- Some services such as physical therapy and occupational therapy may be provided by different agencies in the community creating a need for close communication and coordination between your school, agencies and you.

Records

- The confidentiality of your child's records shall be maintained.
- You may examine all records concerning your child within five days of your request.
- You may request copies of records.
- You may challenge the content of records and tape recordings in accordance with federal and state laws.
- You have a right to be informed about amendments to or destruction of student records, and the right to a hearing.

Assessment

- You may request an educational assessment for your child to guide the development of the IEP.
- You must give written permission before any assessment may be conducted, and you may revoke that consent at any time.
- You shall be given a written assessment plan within 15 calendar days of receipt of your written consent for assessment (not counting school vacation or days between school sessions in excess of five school days), unless you have agreed in writing to an extension. If a referral is made 10 days or less prior to the end of the regular school year, the assessment plan shall be developed within 10 days after the start of the new regular

school year. A copy of the Parent Rights shall be included with the assessment plan.

- The assessment plan shall explain each type of assessment instrument to be used, the purpose of the instrument, and the professional personnel responsible for administering the instrument
- You shall have at least 15 calendar days from receipt of the proposed assessment plan to return it signed. Assessment may begin immediately after the district receives your consent.
- You shall be fully informed of the assessment results and may obtain, upon request, a copy of the findings of the assessment.
- You have the right to obtain, at public expense, an independent educational assessment if you disagree with the assessment conducted by the district. However, the district may initiate a due process hearing to show that its assessment is appropriate, if the hearing determines that the district's assessment is appropriate, you still have the right to an independent assessment, but not at public expense.
- You have the right to have the results of an independent assessment considered by the district.

Individualized Education Program

- You will be notified before an Individualized Education Program (IEP) team meeting is held to discuss the assessment, the educational recommendations, and the reasons for these recommendations. You will be invited to participate in the development of your child's IEP.
- An IEP shall be developed within 60 calendar days of receipt of your written consent for assessment (not counting school vacation or days between school sessions in excess of five school days), unless you have agreed in writing to an extension. If the referral was made 20 days or less prior to the end of the regular school year, the IEP shall be developed within 30 days after the start of the new regular school year.
- Your child's program placement will be based upon the goals and objectives stated in his/her IEP.
- The IEP team meeting shall be arranged at times and places mutually agreeable to you and the district.
- You have a right to receive prior written notice, in your native language, when the school district initiates a change in the identification, assessment or educational placement of your child in special education.
- You and the district/SELPA have a right to make an audiotape recording of the IEP team meeting by giving

24-hours' notice to the IEP team of the intent to tape the meeting.

- You may request a copy of the IEP in your primary language.
- You have the right to present information to the IEP team, in person or through a representative, and participate in eligibility recommendations and program planning.
- You have the right to request a review by the IEP team. The meeting shall be held within 30 days (not counting days in July and August) from the date of receipt of your written request.
- Your child's IEP and placement will be reviewed at least once each year by the IEP team and you will be invited to participate.
- Your written consent is necessary before any program placement or special education services may begin. You may consent to all or part of the proposed IEP.
- You may withdraw your consent at any time after submitting written notification to an administrator.

Procedures for Resolving Differences (This list has been abridged. Call your SELPA or Special Education Department for complete information.)

- Either you or the district may request a due process hearing in the event of a disagreement regarding a proposal to initiate or change the identification, assessment, or educational placement of a child, or the provision of a free, appropriate public education. The due process hearing procedures include the right to a mediation conference, the right to examine pupil records, and the right to a fair and impartial administrative hearing at the state level.
- If you disagree with the district regarding your child's special education placement or a proposed change in placement, the law requires the student to "stay put" in the current program until the dispute is resolved.
- The hearing must be completed within 45 days unless a continuance is granted.
- You may file a written complaint with the State Department of Education with a copy to the district alleging a violation of federal or state law involving special education and related services. Call 800-578-2592 for more information.

From Sacramento County Special Education Department and Sacramento City Unified School District Special Education Parent Handbook

REGIONAL CENTER NOTICE OF
CONSUMER RIGHTS COMPLAINT PROCESS (For consumers over 3 years old.)
(Welfare and Institutions Code Section 4731)

The Consumer Rights Complaint process is a mechanism to be used when an individual consumer, or any representative acting on behalf of a consumer, believes that any right has been wrongly or unfairly denied by a regional center, developmental center or a service provider. This process is available to all consumers over the age of three.

Senate Bill 1039, Statutes of 1977, established this consumer complaint process effective

January 1, 1998. W & I Code, section 4731(f) states that "All consumers or, where appropriate, their parents, legal guardian, conservator, or authorized representative, shall be notified in writing in a language which they comprehend, of the right to file a complaint pursuant to this section when they apply for services from a regional center or are admitted to a developmental center, and at each regularly scheduled planning meeting."

- Complaints should be made to the director of the regional center from which a consumer receives case management services. If the consumer resides in a state developmental center, the complaint goes the director of the developmental center.
- Within 20 working days of the director receiving the complaint, the regional center/developmental center director or designee shall investigate and send a written proposed resolution to the complainant and, if appropriate, to the service provider.
- The regional center/developmental center director's written proposed resolution should include a description of the complaint and the regional center's /developmental center's efforts to solve the issues and shall include a telephone number and mailing address for referring the proposed resolution to the Director of the Department of Developmental Services at:

Office of Human Rights and Advocacy Services
1600 Ninth Street, Room 240, MS 2-15
Sacramento, CA 95814

- The regional center/developmental center director's proposed resolution to the complaint will become effective on the 20th working day after receipt by the complainant unless it is appealed within 15 days to the Director of the Department of Developmental Services. The Director has 45 days to investigate and issue a final administrative decision.



This transition workbook has been adapted and reproduced by Judy Adams/Sonoma SELPA, Nona Koroluk/NBRC and Nora Thompson/Matrix.

It came from a version adapted by Laura Soto, Cid Van Koersel and Al Millan of the WarmLine Family Resource Center in Sacramento.

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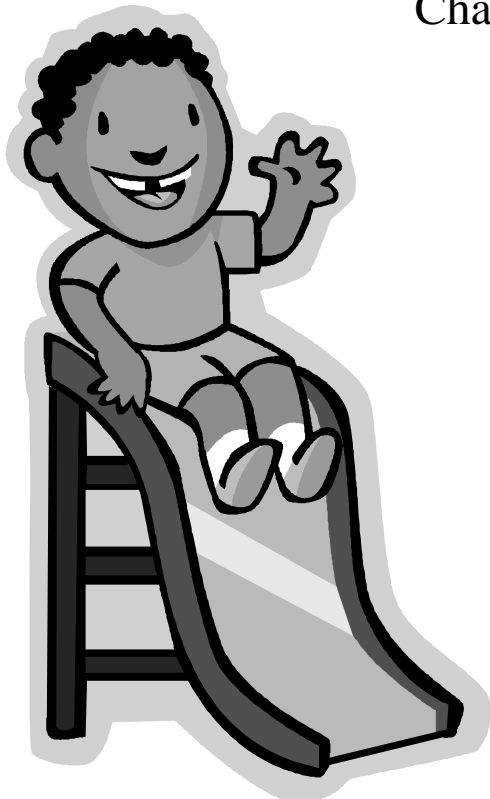
Central Valley Regional Center

Susan Thomas

Infant Care Program
Merced County Office of Education

Gaye Riggs

Merced County Early Start
Merced County Office of Education



**We thank them ALL for
generously sharing their
hard work with us.**

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(REFERRAL FOR ONGOING SERVICES)

*"Serving families and professionals involved with
children with special needs"*

2008