California Association of Health and Education Linked Professions Joint Powers Authority (CAHELP JPA) DESERT/MOUNTAIN SELPA STEERING and FINANCE COMMITTEE MEETING January 15, 2021 – 9:00 a.m. Virtual via Teleconference Desert Mountain Educational Service Center, 17800 Highway 18, Apple Valley CA 92307

AGENDA

NOTICE: This meeting will be held virtually only. If members of the public wish to participate in the meeting and/or make public comment, please follow the instructions below to participate telephonically:

PARTICIPATE BY PHONE:

Dial Access Number: 1-415-655-0003 When prompted - enter Access Code: 177 300 5163 Follow directions as a Participant; an Attendee I.D. is not required to participate.

If you wish to make a public comment at this meeting, prior to the meeting please submit a request to address the Steering and Finance Committee to the recording secretary via fax at 1-760-242-5363 or email <u>jamie.adkins@cahelp.org</u>. Please include your name, contact information and which item you want to address.

<u>Reasonable Accommodation</u>: if you wish to request reasonable accommodation to participate in the meeting telephonically, please contact the recording secretary (via contact information noted above) at least 48 hours prior to the meeting.

1.0 CALL TO ORDER

2.0 ROLL CALL

3.0 PUBLIC PARTICIPATION

The public is encouraged to participate in the deliberation of the Desert/Mountain SELPA Steering and Finance Committee. Several opportunities are available during the meeting for the Council to receive oral communication regarding the presentations of any items listed on the agenda. Please ask for recognition either before a presentation or after the presentation has been completed. Please complete and submit a "Registration Card to Address the Desert/Mountain SELPA Steering Committee" to the Recording Secretary and adhere to the provisions described therein.

4.0 ADOPTION OF THE AGENDA

4.1 **BE IT RESOLVED** that the January 15, 2021 Desert/Mountain SELPA Steering and Finance Committee Meeting Agenda be approved as presented.

5.0 CONSENT ITEMS

It is recommended that the Steering and Finance Committee consider approving several Agenda items as a Consent list. Consent Items are routine in nature and can be enacted in one motion without further discussion. Consent items may be called up by any Committee Member at the meeting for clarification, discussion, or change.

5.1 **BE IT RESOLVED** that the following Consent Items be approved as presented:

California Association of Health and Education Linked Professions Joint Powers Authority (CAHELP JPA) DESERT/MOUNTAIN SELPA STEERING and FINANCE COMMITTEE MEETING January 15, 2021 – 9:00 a.m. Virtual via Teleconference

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5.1.1 Approve the December 18, 2020 Desert/Mountain SELPA Steering and Finance Committee Meeting Minutes.

6.0 CHIEF EXECUTIVE OFFICER AND STAFF REPORTS

6.1 Legislative Updates

Jenae Holtz will present the latest in State and Federal law related to students with disabilities and school law.

6.2 Governor's Financial Incentive for Reopening Schools

Jenae Holtz will lead a discussion regarding the potential of schools reopening.

6.3 CAHELP JPA Referral Procedure Manual Revisions

Jenae Holtz will present CAHELP JPA Referral Procedure Manual Revisions.

6.4 Desert Mountain Operations Updates

Rich Frederick will present Desert Mountain Operations Updates.

6.5 Desert/Mountain Children's Center Client Services Reports

Linda Llamas will present the D/M Children's Center Client Services monthly reports.

6.6 Professional Learning Summary and Updates

Heidi Chavez will present the D/M SELPA's Professional Learning Summary and Updates including Crisis Prevention Institute Training and HOLA Training.

6.7 Resolution Support Services Summary

Kathleen Peters will present the D/M SELPA's Resolution Support Services Summary and update.

6.8 Office of Administrative Hearings Decisions

Kathleen Peters will review Office of Administrative Hearings (OAH) decisions.

6.9 Prevention and Intervention Update

Kami Murphy will present the Prevention and Intervention update.

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6.10 Postsecondary Transition Services Manual

Adrienne Shepherd-Myles will present updates to the Postsecondary Transition Services Manual.

6.11 Compliance Update

Peggy Dunn will present an update on compliance items from the California Department of Education (CDE).

6.12 Nonpublic School/Nonpublic Agency Update

Peggy Dunn will provide a nonpublic school/nonpublic agency update.

7.0 FINANCE COMMITTEE REPORTS

7.1 Marina Gallegos will provide information pertaining to the governor's January budget.

8.0 INFORMATION ITEMS

- 8.1 Monthly Audiological Services Reports
- 8.2 Monthly Occupational & Physical Therapy Services Reports
- 8.3 Monthly Nonpublic School/Agency Placement Report
- 8.4 Upcoming Professional Learning Opportunities

9.0 STEERING COMMITTEE MEMBERS COMMENTS / REPORTS

10.0 CEO COMMENTS

11.0 MATTERS BROUGHT BY THE PUBLIC

This is the time during the agenda when the Desert/Mountain SELPA Steering and Finance Committee is again prepared to receive the comments of the public regarding items on this agenda or any school related special education issue.

When coming to the podium, the speakers are requested to give their name and limit their remarks to three minutes.

Persons wishing to make complaints against Desert/Mountain SELPA Steering and Finance Committee personnel must have filed an appropriate complaint form prior to the meeting.

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When the Desert/Mountain SELPA Steering and Finance Committee goes into Closed Session, there will be no further opportunity for citizens to address the Council on items under consideration.

12.0 ADJOURNMENT

The next regular meeting of the Desert/Mountain SELPA Steering and Finance Committee will be held on Friday, February 19, 2021, at 9:00 a.m., at the Desert Mountain Educational Service Center, Aster/Cactus Room, 17800 Highway 18, Apple Valley, CA 92307.

Individuals requiring special accommodations for disabilities are requested to contact Jamie Adkins at (760) 955-3555, at least seven days prior to the date of this meeting.

California Association of Health and Education Linked Professions Joint Powers Authority (CAHELP JPA) DESERT/MOUNTAIN SELPA STEERING and FINANCE COMMITTEE MEETING December 18, 2020 – 9:00 a.m. Virtual via Teleconference Desert Mountain Educational Service Center, 17800 Highway 18, Apple Valley CA 92307

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D/M SELPA MEMBERS PRESENT:

Academy for Academic Excellence – Marcelo Congo, Samantha Gonzalez, Adelanto SD – Alicia Johnson, Apple Valley USD – Renee Castillo, David Wheeler, Barstow USD – Deanna Dibble, Heather Reid, Bear Valley USD – Aimee Hoover, Desert/Mountain Operations (SBCSS) – Rich Frederick, Health Sciences – Julie Kroener, Helendale SD – Michael Esposito, Hesperia USD – Matt Fedders, Teri McCollum, Elaine Nelson, Lucerne Valley SD – Vici Miller, Oro Grande SD – Nelda Colvin, Silver Valley USD – Cheri Rigdon, Snowline JUSD – Lori Delgado, Victor Elementary SD – Tanya Benitez, and Victor Valley UHSD – Rama Bassham.

CAHELP, SELPA, & DMCC STAFF PRESENT:

Jamie Adkins, Guille Burgos, Heidi Chavez, Craig Cleveland, Tara Deavitt, Lindsey Devor, Peggy Dunn, Adrien Faamausili, Thomas Flores, Marina Gallegos, Bonnie Garcia, Renee Garcia, Colette Garland, Derek Hale, Jenae Holtz, Linda Llamas, Maurica Manibusan, Robin McMullen, Angela Mgbeke, Kami Murphy, Lisa Nash, Sheila Parisian, Karina Quezada, Daria Raines, Linda Rodriguez, Jennifer Rountree, Natalie Sedano, Jessica Soto, Pamela Strigglers, Jennifer Sutton, Stephanie Sweem, Athena Vernon, and Charis Washington.

1.0 CALL TO ORDER

The regular meeting of the California Association of Health and Education Linked Professions Joint Powers Authority (CAHELP JPA) Desert/Mountain SELPA Steering Committee Meeting was called to order by Jenae Holtz, at 9:01 a.m., at the Desert/Mountain Educational Service Center, Apple Valley.

2.0 ROLL CALL

3.0 PUBLIC PARTICIPATION

None.

4.0 ADOPTION OF THE AGENDA

4.1 **BE IT RESOLVED** that a motion was made by Cheri Rigdon, seconded by David Wheeler, to approve the December 18, 2020 Desert/Mountain SELPA Steering and Finance Committee Meeting Agenda as presented. A vote was taken and the following carried: 15:0 Ayes: Bassham, Benitez, Colvin, Congo, Delgado, Esposito, Fedders, Frederick, Hoover, Johnson, Kroener, Miller, Reid, Rigdon, and Wheeler. Nays: None, Abstentions: None.

5.0 CONSENT ITEMS

It is recommended that the Steering and Finance Committee consider approving several Agenda items as a Consent list. Consent Items are routine in nature and can be enacted in one motion without further discussion. Consent items may be called up by any Committee Member at the meeting for clarification, discussion, or change.

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- 5.1 BE IT RESOLVED that the following a motion was made by Rich Frederick, seconded by David Wheeler to approve the Consent Item as presented. A vote was taken and the following carried: 15:0 Ayes: Bassham, Benitez, Colvin, Congo, Delgado, Esposito, Fedders, Frederick, Hoover, Johnson, Kroener, Miller, Reid, Rigdon, and Wheeler. Nays: None, Abstentions: None.
 - 5.1.1 Approve the November 20, 2020 Desert/Mountain SELPA Steering and Finance Committee Meeting Minutes.

6.0 CHIEF EXECUTIVE OFFICER AND STAFF REPORTS

6.1 State SELPA Update

Jenae Holtz presented the latest information provided by the California Department of Education at the last State SELPA meeting. She said there was discussion pertaining to overdue assessments and IEPs as there are thousands across the state which causes great concern. Jenae reported the D/M SELPA numbers were high in the December data pull but many of them are in a pending status so the January data should be better since the LEAs have been working hard to complete IEPs and assessments and become compliant. Jenae continued that CDE will be contacting each LEA and SELPA to work on how to correct the errors and get caught up on the IEPs and assessments.

Jenae said there was also discussion that Intensive Reviews conversations with CDE are going well with good questions being asked seeking answers and collaboration which is appreciated by the LEAs and SELPAs. She shared the new CDE director of Special Education has been collaborative with State SELPA and listening to the concerns of the duplicity of work and how to help SELPAs become proactive instead of reactive to requests of the state.

Jenae shared that CDE reported they will not require Special Education Plans next year. If an LEA is found out of compliance in a certain area, an LEA will have to write an overview or progress report on that area on the Special Education Plan presented this year. The Mega Letter will be distributed in January 2021 that will show the out of compliance area(s).

Jenae called on Colette Garland to speak on CalPads updates. Colette said CalPads Flash #197 announced special education errors that were occurring statewide would be changed to warnings allowing LEAs to certify by the December 18, 2020 deadline. Colette will be contacting the LEAs that have not submitted their certification though most have been submitted. She continued that CDE has not provided a date that the warnings will turn in to errors. She will continue to work on the warnings so on the January 29, 2021 final certification date, D/M SELPA is ready.

Jenae reminded the committee members that it is important for the data in CalPads to match the data in Management Information System (MIS) because it is related to LEA funding. D/M SELPA works to get the numbers to match so the LEAs can receive maximum funding.

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Jenae then asked Karina Quezada to provide information pertaining to changes in the Alternate English Language Proficiency Assessments for California (ELPAC). Karina shared the CDE is submitting to the state board to have the Alternate ELPAC suspended this school year due to the possibility of inaccurate data caused by the pandemic. She continued that students who are designated to take the Alternate ELPAC will need to default back to the local alternate assessment which is Ventura County Comprehensive Alternate Language Proficiency Survey (VCCALPS). Due to the change, D/M SELPA will be providing VCCALPS trainings on January 11, 2021 and February 2, 2021. Karina shared Cruz Gustafson emailed that training flyer to directors on December 17, 2020.

6.2 Students on Campus

Jenae Holtz reported that COVID-19 cases have grown drastically in the high. She said LEAs have reported returning to distance learning only, including small cohorts. She asked for the committee members to share their plans going forward.

Nelda Colvin shared Oro Grande SD will continue in Phase 2 with students on campus twice a week as they do have a waiver. She continued they did have high school students in general education and special education that were having difficulties on campus. Nelda shared teachers are getting sick due to parents allowing their ill students to be on campus. She said this is causing the district to fall behind on IEPs.

Cheri Rigdon stated Silver Valley USD will return after winter break with the first two weeks as distance learning only then will proceed with small groups and cohorts in a hybrid model.

Matt Fedders reported Hesperia USD cancelled most of their cohorts due to teacher concern until at least mid-January. He said they will reevaluate at that time in the interest of letting the number of cases decline before returning students to campus.

Vici Miller said Lucerne Valley SD is maintaining their current status with extra cleaning and disinfecting so students can continue to be on campus. She said there are families with high-risk parents or siblings that have requested to continue with distance learning so the district will continue to offer that as an option.

David Wheeler reported Apple Valley USD has paused on campus classes, cohorts, and students on waiver. The district will reevaluate the decision mid-January with the hopes of restarting.

Julie Kroener shared Health Sciences High and Middle College made a commitment to continue distance learning through the current semester which will take them to the beginning of February. She said in January, the LEA will evaluate whether to remain in distance learning or transition to in-person classes for the next quarter.

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Lori Delgado stated Snowline JUSD has also paused cohorts until mid-January at the earliest. She said this provides two weeks beyond winter break then the hybrid waiver for elementary at Pinon Hills to begin at the same time.

6.3 Desert Mountain Operations Updates

Jenae Holtz stated Rich Frederick had to leave the meeting prior to present in Desert Mountain Operations Updates.

6.4 Desert/Mountain Children's Center Client Services Reports

Guille Burgos presented the Desert/Mountain Children's Center Client Services monthly reports. She asked for her or Linda Llamas to be notified of any discrepancies in the reports.

6.5 Suicide Ideation and School Connectedness Information

Guille Burgos presented information pertaining to Suicide Ideation and School Connectedness. She shared a study that was conducted during the years of 2017-2019 of California students in 9th and 11th grades. The study provided information from the students' perspectives regarding the correlation between fidelity and school connectedness. Guille said the students that felt highly connected to school were less likely to seriously consider attempting suicide while students who felt a low level of school connections were more likely to consider it. The research also reflected a link between social isolation and poor mental health. Guille shared that the DMCC clinicians have noticed an increase in depression and anxiety because there is an increase in isolation and less connectivity with schools. She also said there has been an increase in parental depression which also impacts the supports children have at home. Guille said this is a reminder to connect children to mental health services.

Jenae Holtz said it is important for LEAs to know who their high risk and most isolated students are and to attempt to reach out to that population during winter break. Around the holidays, there seems to be a spike in depression and suicide attempts which makes it important to keep an eye on those children or notify D/M SELPA and DMCC. Jenae continued the holidays are a difficult time and this year it is compounded with the pandemic and parents being more concerned about finances, their businesses and their jobs. She reminded the committee members to use Care Solace as a resource as well.

6.6 Professional Learning Summary and Update

Heidi Chavez presented the D/M SELPA's Professional Learning Summary. She reported there were 477 participants in November and 1911 participants year to date.

Heidi also shared the Crisis Preventions Institute (CPI) training Question and Answer Session is scheduled for January 20, 2021 at 2:30pm-4:00pm. She said the online modules must be

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completed before that date. Heidi said the in-person training has not yet been scheduled due to COVID-19 but more information will be provided at January D/M Charter SELPA and Finance Committee Meeting.

Heidi reminded the committee that the Physical Therapy/Occupational Therapy/Adapted Physical Education/Orthopedic Impairment Collaborative Conference is scheduled for January 20, 2021 at 1:00pm-2:30pm with no registration fee.

Renee Garcia reported HOLA Translator Training is being scheduled for February 18 and 19, 2021. She said it is going to be a ten-hour training with five hours on each day and the cost is \$100 per participant. The training will include a section on how to translate in a virtual setting. Renee asked to be provided with names of staff that would like to attend so they can be added. The registration link will be established in January 2021 after winter break.

Vici Miller asked if trainings that are not as interactive could be recorded and put in a library to be accessed at a later time. She said her district is trying to limit the use of substitute teachers to lower the risk of Covid-19 which reduces teacher availability for trainings. Vici said they have students on campus from 8:00a-1:30pm then teachers are on Zoom with students that are fully in distance learning until approximately 3:30pm.

Jenae Holtz agreed with reducing exposure to Covid-19 and stated that there is also a lack of substitutes. She said CAHELP has been researching the best platform for recording trainings as there has been some concern with the platforms as well as some great opportunities. Jenae agreed with Vici about the need for a library of recorded trainings. D/M SELPA will continue to work on recording all trainings for easy accessibility.

6.7 Resolution Support Services Summary

Sheila Parisian presented the D/M SELPA's Resolution Support Services Summary and update. She reported there are currently eighteen cases. She shared that cases with D/M SELPA are reflecting an increase in Child Find in relation with severe mental health concerns, many students being admitted to hospitals based on suicide attempts, increased aggression at home and with family, and self-injurious behaviors. Sheila asked committee members to have their teachers be mindful of students with decreasing grades and decreasing participation. DMCC can provide resources and information.

6.8 Office of Administrative Hearings COVID-19 Decisions

Sheila Parisian reviewed Office of Administrative Hearings (OAH) COVID-19 decisions. She did not cite specific cases but said she found that cases in which the school psychologists provided in depth, explicit, thorough, and compelling assessments of why a child was or was not eligible for specific categories. When the details are provided, the OAH judge is able to find in favor of the LEA.

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6.9 Prevention and Intervention Update

Kami Murphy presented Prevention and Intervention Updates. She shared Family Fun Days brought by Outreach Team is scheduled for December 21 at 1:0pm-2:00pm. It is intentional for families to engage in an activity together during winter break. Kami said there is no cost and can be signed up for until the time of the event.

Kami shared Universal Screener Overview training is virtually scheduled for February 16, 2021 at 1:00pm-2:30pm. This is for behavior screening and will help identify simple and free tools that can be utilized in successful interventions.

Kami said she submitted the end of the year report for the triage grant for mental health services. Though it is called the triage grant, it is really the utilization of multi-tiered systems interconnected with mental health. Kami said she will be receiving feedback in early January that will be shared with the LEAs so they can see some of the behind the scenes work as well as trainings and supports.

6.10 Compliance Update

Peggy Dunn presented an update on compliance items from the California Department of Education (CDE). She reported the Special Education Plans (SEP) have been submitted to meeting the CDE deadline. Peggy said the next step is CDE reviewing the plans and then sending letters to the LEAs and SELPA.

Colette Garland shared her appreciation with the collaborative efforts in getting the Special Education Plans completed and submitted. She said it will take time for CDE to respond to the plans but she will keep the LEAs posted as she receives information.

Colette continued that LEAs that are in disproportionality, the corrective actions are due by December 21, 2020. She continued that CalPads first certification is due today then Jenae will SELPA certify. Colette reminded the committee that as per CalPads Flash #197, all special education errors are warnings at this time so LEAs are able to self-certify but the warnings will turn to errors turning the amendment window to allow those errors to be corrected.. Colette stressed CalPads numbers and Web DA numbers must match with January 29, 2021 being the final certification date.

Jenae Holtz thanked the directors for the hard work that went into the SEP plans.

6.11 Nonpublic School/Nonpublic Agency Update

Peggy Dunn provided a nonpublic school/nonpublic agency update. She said Desert View and Bright Futures are looking at Covid-19 case numbers and are following the decisions made by the LEAs.

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7.0 FINANCE COMMITTEE REPORTS

Marina Gallegos has no reports or updates to provide.

8.0 INFORMATION ITEMS

- 8.1 Monthly Audiological Services Reports
- 8.2 Monthly Occupational & Physical Therapy Services Reports
- 8.3 Monthly Nonpublic School/Agency Placement Report
- 8.4 Upcoming Professional Learning Opportunities

The Region 10 Training A Webinar: Inclusionary Practices Mini-Conference was highlighted with a flyer.

Jenae Holtz reported the Alternative Dispute Resolutions (ADR) State Conference is accepting registrations. She will speak with Marina Gallegos about how many registrations D/M SELPA can pay for the LEAs. An email providing that information will be sent after winter break.

9.0 STEERING COMMITTEE MEMBERS COMMENTS / REPORTS

Mike Esposito thanked Adrien Faamausili for spending the week working with him, the caseworkers and special education teachers. Mike also thanked DMCC for contributing to the district toy drive. They were able to collect more than 800 gifts.

10.0 CEO COMMENTS

Jenae Holtz said this has been a hard year with things we could not have imagined. Jenae respects that each of the committee members cares about the children we work with and the families we serve.

11.0 MATTERS BROUGHT BY THE PUBLIC

None.

12.0 ADJOURNMENT

Having no further business to discuss, a motion made by Matt Fedders, seconded by Alicia Johnson, to adjourn the meeting. A vote was taken and the following carried: 14:0 Ayes: Bassham, Benitez, Colvin, Congo, Delgado, Esposito, Fedders, Hoover, Johnson, Kroener, Miller, Reid, Rigdon, and Wheeler. Nays: None, Abstentions: None.

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Individuals requiring special accommodations for disabilities are requested to contact Jamie Adkins at (760) 955-3555, at least seven days prior to the date of this meeting.

From: Jenae Holtz	
To: Jamie Adkins	
Subject: FW: Non-COVID-19 Related Education Bills	Begin to Emerge
Date: Friday, January 8, 2021 9:47:05 AM	

From: Christina Marcellus <christina@capitoladvisors.org>
Sent: Thursday, January 7, 2021 7:21 PM
To: Jenae Holtz <Jenae.Holtz@cahelp.org>
Subject: Non-COVID-19 Related Education Bills Begin to Emerge

CAUTION:This email originated from outside of the organization. Please do not click links or open attachments unless you recognize the sender and know the content is safe.

We want to highlight a number of recent bill introductions of potential interest that are not related to COVID-19.

Due to ongoing health and safety concerns, the Legislature's scheduled January 4 return date to Sacramento has been delayed until January 11. Another delay wouldn't be unexpected, especially given the state's skyrocketing COVID-19 case numbers and the appearance of a new, far more transmissible strain. The February 19 deadline to introduce bills is looming, and the longer the Legislature's return is delayed, the more chaotic the days will be when they actually make it back to the Capitol.

The bills highlighted below are in addition to those we highlighted in a similar **update** when the Legislature reconvened in early December. While some already have well developed legislative language, a large number are "spot bills," meaning they state the author's intent to engage in the policy area, while the details still need to be ironed out.

SB 70 (Rubio) Elementary education: kindergarten.

SB 70 would require, beginning with the 2022-23 school year, children to complete one year of kindergarten prior to being admitted into the first grade. Bills identical or substantially similar to this have been introduced in many of the past several legislative sessions but haven't made it into law. One of the biggest concerns has been cost. Assembly Appropriations Committee analysis of a 2015 bill seeking to do the same thing cited increased costs to the state in the potentially hundreds of millions of dollars. What remains to be seen is if growing concerns over the impacts of learning loss (due to the COVID-19 pandemic) on young children will be enough to get this legislation across the finish line.

AB 53 (Low) Election day holiday.

This bill would require community colleges and public schools to close on the

day of the General Election. Assemblymember Evan Low (D-Campbell) has made voting rights and voting access a top priority, and was even in the running to replace Alex Padilla as Secretary of State (an appointment which was ultimately given to Assemblymember Shirley Weber from San Diego). Low has run similar efforts unsuccessfully in the past, and it's still too early to know if the issues that have previously held it up can be overcome.

<u>AB 99 (Irwin) Statewide longitudinal data system: California</u> <u>Cradle-to-Career Data System.</u>

COVID-19 didn't sideline the work of the Cradle-to-Career Data System workgroup, which met throughout 2020 to make recommendations for the implementation of the Data System itself. The group's final report is available **here**, and AB 99 states the intent to codify its recommendations. The concern, of course, is how much funding the Governor, who is the most vocal advocate of this new data system, is willing and able to dedicate to its success. Given the myriad other priorities he needs to address, there is a concern among stakeholders that it will be an afterthought and suffer from inadequate funding. Governor Newsom's budget proposal, which will be released tomorrow, should provide insight into where this project stands on his list of priorities.

AB 101 (Medina) Pupil instruction: high school graduation requirements: ethnic studies.

AB 101 would add a one-semester course in Ethnic Studies to the list of requirements a student must meet to receive a high school diploma, beginning with the 2029-30 graduating class. Assemblymember Jose Medina (D-Riverside) has championed this effort for several years, and this year his push is fueled by the racial tensions that exploded in 2020. After Governor Newsom issued a late and somewhat surprising veto of this requirement in 2020, there's a good chance that the recent progress that has been made on the Ethnic Studies Model Curriculum will improve AB 101's odds.

AB 102 and AB 103 (Holden) College and Career Access Pathways (CCAP) partnerships.

Assemblymember Chris Holden (D-Pasadena) has been a staunch advocate of CCAP's, which permit partnerships between community colleges and school districts/charter schools to increase college going rates of students traditionally underrepresented in higher education. AB 102 would remove the January 1, 2027 sunset date of the CCAP program, making it a permanent program within state education law. AB 103 would expand access to the CCAP program to county offices of education, and would specify that community schools, continuation high schools, and juvenile court schools can also engage in these partnerships.

COVID-19's impact on the legislative cycle in 2020 caused the vast majority of bills to stall, and there's sure to be pent-up demand among legislators to make progress on their legislative priorities. So far, legislative leadership has not imposed limits on the number of bills each member can introduce, but even with those restrictions, authors will need to make compelling cases on why their bills should be heard.

We'll continue to provide analysis of legislation introduced over the coming weeks. Below is a full list of education bills that has been introduced so far, sorted by subject area. Contact any of us at Capitol Advisors if we can provide additional information.

Take care, Christina

Christina Marcellus

Legislative Advocate | Capitol Advisors Group 310.963.2023 - mobile

Curriculum and Instruction

<u>AB 10 (Ting) - Pupil instruction: in-person instruction: distance learning.</u>

Current law establishes a system of public elementary and secondary education in this state, and authorizes local educational agencies throughout the state to provide instruction to pupils in kindergarten and grades 1 to 12, inclusive. Current law establishes procedures for the apportionment of state funds to these local educational agencies. Current law, for purposes of calculating apportionments for the 2020-21 fiscal year, requires a local educational agency to offer in-person instruction and authorizes these agencies to offer distance learning, as specified. This bill would specify that the requirement to provide in-person instruction applies when that instruction is allowed under state and county public health orders.

AB 76 (Kiley) - Open California Schools Act.

Would require a local educational agency, as defined, to offer in-person instruction, as defined, as soon as state and county health orders and guidelines no longer prohibit the local educational agency from reopening for full-time in-person instruction, as specified. During any period of time in the 2020-21 or 2021-22 school years that state and county health orders and guidelines prohibit a local educational agency from offering full-time in-person instruction due to the COVID-19 pandemic, the bill would authorize a local educational agency to offer a hybrid model including both in-person and distance learning that meets certain requirements.

Early Childhood

<u>AB 22 (McCarty) - Transitional kindergarten: enrollment for 4-yearold children.</u> Would require, by no later than the 2030-31 school year and in each school year thereafter, a school district or charter school, as a condition of receipt of apportionments for pupils in a transitional kindergarten program, to admit to a transitional kindergarten program maintained by the school district or charter school children who will have their 5th birthday between September 2 of the calendar year in which the school year begins and September 1 of the following calendar year.

AB 92 (Reyes) - Preschool and childcare and development services: family fees.

Current law requires the Superintendent of Public Instruction to establish a fee schedule for families using preschool and childcare and development services. Current law exempts certain families from those fees. This bill would declare the intent of the Legislature to enact legislation that would alleviate the burden on low-income families of fees for preschool and childcare and development services.

<u>SB 50 (Limon) - Early learning and care: California Early Learning and Care Program.</u>

Would express the intent of the Legislature to establish the California Early Learning and Care Program to create a seamless, integrated, mixed-delivery, whole-child, 2-generation early learning and care system from birth to schoolage to advance the state's Master Plan for Early Learning and Care. The bill would additionally require the State Department of Education to allow and arrange for interagency adjustments between those contracts for the same agency or different agencies and the same funding allocation, and to establish timelines for those interagency contract fund transfers.

Facilities

<u>AB 33 (Ting) - Natural gas.</u>

Current law vests the Department of General Services with the authority to supervise the design and construction of a school building or the reconstruction or alteration of or addition to a school building to ensure that plans and specifications comply with applicable rules and regulations and building standards, and to ensure that the work of construction has been performed in accordance with the approved plans and specifications, for the protection of life and property. This bill would prohibit the department from approving or providing funding from the construction on new school buildings that have natural gas connections.

<u>AB 75 (O'Donnell) - Education finance: school facilities:</u> <u>Kindergarten-Community Colleges Public Education Facilities Bond</u> <u>Act of 2022.</u>

The Leroy F. Greene School Facilities Act of 1998 provides for the adoption of rules, regulations, and procedures, under the administration of the Director of General Services, for the allocation of state funds by the State Allocation Board

for the construction and modernization of public school facilities. This bill would add provisions to the act to require the Department of General Services to process all applications received under the act on and after an unspecified date and to present those applications to the State Allocation Board within 120 days of receipt. The bill would require applicants for bond funding to supply designated information to the State Department of Education. The bill would authorize school districts to receive a supplemental grant to expand an existing, or construct a new, gymnasium, multipurpose room, library, or school kitchen under specified conditions.

<u>SB 22 (Glazer) - Education finance: school facilities: Public</u> <u>Preschool, K-12, and College Health and Safety Bond Act of 2022.</u>

Current law authorizes the governing board of any school district or community college district to order an election and submit to the electors of the district the question of whether the bonds of the district shall be issued and sold to raise money for specified purposes. Current law generally requires, to pass a school bond measure, that either at least 2/3 of the votes cast on the proposition of issuing bonds be in favor of issuing the bonds to pass the measure, or, if certain conditions are met, at least 55% of the votes cast on the proposition of issuing bonds be in favor of issuing the bonds. Current law prohibits the total amount of bonds issued by a school district or community college district from exceeding 1.25% of the taxable property of the district, as provided. This bill would raise that limit to 2%.

Governance/Operations

<u>AB 20 (Lee) - Political Reform Act of 1974: campaign contributions:</u> <u>The Clean Money Act of 2021.</u>

The Political Reform Act of 1974 imposes various limitations on contributions that may be made to, or accepted by, candidates for elective office. A violation of the act's provisions is punishable as a misdemeanor and subject to specified penalties. This bill, the Clean Money Act of 2021, would prohibit a candidate for elective office from receiving a contribution from a business entity, and a business entity from making a contribution to a candidate for elective office, and would make related findings and declarations.

AB 37 (Berman) - Elections: vote by mail ballots.

Current law required county elections officials to mail a ballot to every registered voter for the November 3, 2020, statewide general election. Existing law, for the November 3, 2020, statewide general election, also required county elections officials to use a specified Secretary of State vote by mail tracking system or a system that meets the same specifications. This bill would extend these requirements to all elections. By requiring a county elections officials to mail a ballot to every registered voter, and to take other actions, this bill would impose a state-mandated local program.

AB 40 (Gonzalez, Lorena) - Political Reform Act of 1974: slate

mailers.

The Political Reform Act of 1974 requires that each candidate and each ballot measure that has paid to appear in the slate mailer be designated by an asterisk. The act limits the required type size of the asterisk to no more than 10-point boldface type. This bill would require the slate mailer to disclose the number of members who make up the slate mailer organization or committee. The bill would also require the total amount paid to appear on the slate mailer to be disclosed for each candidate and ballot measure that is required to be designated by an asterisk, immediately below the name or ballot measure, in no less than 9-point roman type and in a color or print that contrasts with the background so as to be easily legible. The bill would also delete the provision limiting the required type size of the asterisk to no more than 10-point boldface type.

SB 29 (Umberg) - Elections: vote by mail ballots.

Current law required county elections officials to mail a ballot to every registered voter for the November 3, 2020, statewide general election. Existing law, for the November 3, 2020, statewide general election, also required county elections officials to use a specified Secretary of State vote by mail tracking system or a system that meets the same specifications. This bill would extend these requirements to all elections conducted prior to January 1, 2022. By requiring a county elections officials to mail a ballot to every registered voter, and to track those ballots, this bill would impose a state-mandated local program.

<u>SB 34 (Umberg) - Elections: polling places.</u>

Current law sets forth procedures for the operation of polling places and imposes various penalties for violating procedures related to the conduct of elections. This bill would state the intent of the Legislature to enact legislation that would increase the penalties for operating a polling place that falsely purports to be a location established by an elections official.

SB 35 (Umberg) - Elections: electioneering.

Current law makes it a crime to conduct certain political activities, including electioneering, within 100 feet of a polling place, an election official's office, or a satellite voting location, as defined. Current law defines electioneering as displaying visible or disseminating audible information that advocates for or against any candidate or measure on the ballot in specified locations. Current law makes it a crime to conduct certain activities within 100 feet of a polling place with the intent of dissuading another person from voting. This bill would extend the distance within which such activities are prohibited to 200 feet.

SCA 1 (Hertzberg) - Elections: referenda.

A majority vote in favor of a referendum measure approves the statute or part of the statute subject to the referendum, and the statute then takes effect on the fifth day after the Secretary of State files the statement of the vote for the election at which the measure is voted on. This measure would instead require that the ballot for a referendum measure provide that a "Yes" vote is in favor of the referendum and rejects the statute or part of the statute subject to the referendum, and a "No"vote is against the referendum and approves the statute or part of the statute subject to the referendum, thus requiring a majority vote in favor of the referendum to reject the statute or part of the statute subject to the referendum. The measure would also make conforming changes.

Human Resources

<u>AB 25 (Kiley) - Worker classification: employees and independent</u> <u>contractors.</u>

Current law exempts specified occupations and business relationships from the application of the ABC test as specified. Current law, instead, provides that these exempt relationships are governed by the multifactor test previously adopted in the case of S. G. Borello & Sons, Inc. v. Department of Industrial Relations (1989) 48 Cal.3d 341 (Borello). This bill would generally repeal provisions relating to the "ABC"test for various specified occupations and business relationships. The bill would, instead, require the determination of whether a person is an employee or an independent contractor to be based on the specific multifactor test set forth in Borello, including whether the person to whom service is rendered has the right to control the manner and means of accomplishing the result desired, and other identified factors.

AB 55 (Boerner Horvath) - Employment: telecommuting.

Current law promotes and develops the welfare of workers in California to improve working conditions and advance opportunities for profitable employment. Current law regulates the wages, hours, and working conditions of any worker employed in any occupation, trade, or industry. This bill would declare the intent of the Legislature to enact future legislation to ensure certain rights and benefits for telecommuting employees.

AB 95 (Low) - Employees: bereavement leave.

Would enact the Bereavement Leave Act of 2021. The bill would require an employer with 25 or more employees to grant an employee up to 10 business days of unpaid bereavement leave upon the death of a spouse, child, parent, sibling, grandparent, grandchild, or domestic partner, in accordance with certain procedures, and subject to certain exclusions. The bill would require an employer with fewer than 25 employees to grant up to 3 business days of leave, in accordance with these provisions. The bill would prohibit an employer from interfering with or restraining the exercise or attempt to exercise the employee's right to take this leave.

<u>AB 123 (Gonzalez, Lorena) - Paid family leave: weekly benefit</u> <u>amount.</u>

Current law establishes, within the Unemployment Compensation Disability Fund program, a family temporary disability insurance program, also known as the paid family leave program, for the provision of wage replacement benefits for up to 8 weeks to workers who take time off work to care for a seriously ill family member or to bond with a minor child within one year of birth or placement, as specified. Current law defines "weekly benefit amount" for purposes of both employee contributions and benefits under this program to mean the amount of weekly benefits available to qualifying disabled individuals pursuant to unemployment compensation disability law, calculated pursuant to specified formulas partly based on the applicable percentage of the wages paid to an individual for employment by employers during the quarter of the individual's disability base period in which these wages were highest, but not to exceed the maximum workers' compensation temporary disability indemnity weekly benefit amount established by the Department of Industrial Relations. This bill would revise the formula for determining benefits available pursuant to the family temporary disability insurance program, for periods of disability commencing after January 1, 2022, by redefining the weekly benefit amount to be equal to 90% of the wages paid to an individual for employment by employers during the quarter of the individual's disability base period in which these wages were highest, divided by 13, but not exceeding the maximum workers' compensation temporary disability indemnity weekly benefit amount established by the Department of Industrial Relations.

<u>SB 46 (Stern) - Employment: contact tracing and safety policies:</u> <u>COVID-19.</u>

Current law requires an employer to furnish employment and a place of employment that is safe and healthful for its employees. This bill would state the intent of the Legislature to enact legislation that would require an employer to develop and implement contact tracing and safety policies for its employees, including requiring notice to the employer when an employee receives a positive COVID-19 test.

School Finance

<u>AB 5 (Fong) - Greenhouse Gas Reduction Fund: High Speed Rail</u> <u>Authority: K-12 education: transfer and loan.</u>

The California Global Warming Solutions Act of 2006 designates the State Air Resources Board as the state agency charged with monitoring and regulating sources of emissions of greenhouse gases. The act authorizes the state board to include in its regulation of those emissions the use of market-based compliance mechanisms. Current law requires all moneys, except for fines and penalties, collected by the state board from the auction or sale of allowances as part of a market-based compliance mechanism to be deposited in the Greenhouse Gas Reduction Fund. Existing law continuously appropriates 25% of the annual proceeds of the fund to the High-Speed Rail Authority for certain purposes. This bill would suspend the appropriation to the High-Speed Rail Authority for the 2021-22 and 2022-23 fiscal years and would require the transfer of those amounts from moneys collected by the state board to the General Fund.

ACA 1 (Aguiar-Curry) - Local government financing: affordable housing and public infrastructure: voter approval.

The California Constitution prohibits the ad valorem tax rate on real property from exceeding 1% of the full cash value of the property, subject to certain exceptions. This measure would create an additional exception to the 1% limit that would authorize a city, county, city and county, or special district to levy an ad valorem tax to service bonded indebtedness incurred to fund the construction, reconstruction, rehabilitation, or replacement of public infrastructure, affordable housing, or permanent supportive housing, or the acquisition or lease of real property for those purposes, if the proposition proposing that tax is approved by 55% of the voters of the city, county, or city and county, as applicable, and the proposition includes specified accountability requirements.

School Safety

AB 9 (Wood) - Wildfires.

Current law establishes various programs for the prevention and reduction of wildfires. This bill would state the intent of the Legislature to enact subsequent legislation that would increase California's capacity to prevent and reduce the impact of wildfires, and would make related findings and declarations.

AB 31 (Lackey) - Child abuse.

Would state the intent of the Legislature to enact legislation relating to child abuse and neglect.

<u>AB 57 (Gabriel) - Hate crimes.</u>

Would state the intent of the Legislature to enact legislation to respond to the increase in hate crimes by, among other things, strengthening requirements for law enforcement training and education regarding hate crimes and enhancing statutory prohibitions against online hate and harassment.

<u>SB 17 (Pan) - Public health crisis: racism.</u>

Current law requires the Office of Health Equity to develop department-wide plans to close the gaps in health status and access to care among the state's diverse racial and ethnic communities, women, persons with disabilities, and the lesbian, gay, bisexual, transgender, queer, and questioning communities, as specified. Current law requires the office to work with the Health in All Policies Task Force to assist state agencies and departments in developing policies, systems, programs, and environmental change strategies that have population health impacts by, among other things, prioritizing building cross-sectoral partnerships within and across departments and agencies to change policies and practices to advance health equity. This bill would state the intent of the Legislature to enact legislation to require the department, in collaboration with the Health in All Policies Program, the Office of Health Equity, and other relevant departments, agencies, and stakeholders, to address racism as a public health crisis.

SB 24 (Caballero) - Domestic violence: protective orders:

information pertaining to a child.

Current law authorizes a court to issue an order enjoining a party from engaging in specified acts against another party, including threatening or harassing that party, and, in the discretion of the court, against other named family or household members. An intentional or knowing violation of this order is punishable as a misdemeanor. This bill would authorize a court to issue an ex parte order restraining a party from accessing records and information pertaining to the health care, education, daycare, or employment of a minor child of the parties, and would require the Judicial Council to develop or update any other forms or rules of court that are necessary to implement this provision. The bill would require the third party to develop protocols relating to the enforcement of the order, as specified.

<u>SB 63 (Stern) - Fire prevention: vegetation management: public</u> <u>education: grants: defensible space: fire hazard severity zones:</u> <u>forest management.</u>

Would, among other things, require the Director of Forestry and Fire Protection to identify areas of the state as moderate and high fire hazard severity zones and would require a local agency to make this information available for public review and comment, as provided. By expanding the responsibility of a local agency, the bill would impose a state-mandated local program.

Special Education

<u>AB 126 (Garcia, Eduardo) - Special education programs: Family</u> <u>Empowerment Centers on Disability.</u>

Current law requires the State Department of Education to award grants for the establishment of Family Empowerment Centers on Disability in 32 regions in the state to provide training and services to children and young adults with disabilities and their families. Current law establishes a minimum base rate of \$150,000 for each center awarded a grant and requires a center that receives a grant to complete specified actions related to providing that training and those services. Current law establishes a Family Empowerment and Disability Council composed of the executive directors of the centers and certain other members, establishes a base amount of \$150,000 to be made available annually to the council, and requires the council to, among other actions, develop a uniform tracking and data collection system to be used by each center. This bill would revise and recast the provisions related to Family Empowerment Centers on Disability, including requiring the department to give priority to grant applicants in those of the 32 regions in the state that do not have a center, increasing the minimum base rate for each center awarded a grant from \$150,000 to \$237,000 commencing with the start of the fiscal year after a center has been established in each of the 32 regions, and, commencing with the 2024-25 fiscal year, providing for an annual cost-of-living adjustment of the grant amount, as specified.

Student Services

<u>AB 27 (Rivas, Luz) - Homeless children and youths and unaccompanied youths: reporting.</u>

Under current state law, public schools, including charter schools, and county offices of education are required to immediately enroll a homeless child or youth seeking enrollment, except as specified. Current law requires a local educational agency liaison for homeless children and youths to ensure that public notice of the educational rights of homeless children and youths is disseminated in schools within the liaison's local educational agency that provide services pursuant to the McKinney-Vento Homeless Assistance Act. This bill would require a local educational agency to ensure that each school within the local educational agency identifies all homeless children and youths and unaccompanied youths, as defined, enrolled at the school, administer a housing questionnaire, as specified, for purposes of identifying homeless children and youths and unaccompanied youths, and annually provide the housing questionnaire to all parents or guardians of pupils and unaccompanied youths of the local educational agency.

AB 32 (Aguiar-Curry) - Telehealth.

Current law requires a health care service plan contract or health insurance policy issued, amended, or renewed on or after January 1, 2021, to specify that coverage is provided for health care services appropriately delivered through telehealth on the same basis and to the same extent as in-person diagnosis, consultation, or treatment. Current law exempts Medi-Cal managed care plans that contract with the State Department of Health Care Services under the Medi-Cal program from these provisions, and generally exempts county organized health systems that provide services under the Medi-Cal program from Knox-Keene. This bill would delete the above-described references to contracts issued, amended, or renewed on or after January 1, 2021, would require these provisions to apply to the plan or insurer's contracted entity, as specified, and would delete the exemption for Medi-Cal managed care plans. The bill would subject county organized health systems, and their subcontractors, that provide services under the Medi-Cal program to the above-described Knox-Keene requirements relative to telehealth. The bill would authorize a provider to enroll or recertify an individual in Medi-Cal programs through telehealth and other forms of virtual communication, as specified.

AB 46 (Rivas, Luz) - California Youth Empowerment Act.

Would create the California Youth Empowerment Act to address, among other issues, the growing need to engage youth directly with policymakers. The bill would establish the California Youth Empowerment Commission in state government consisting of 25 voting commissioners between 14 and 25 years of age and meeting specified requirements, with 21 members appointed by the Governor, 2 at-large members appointed by the Senate Committee on Rules, and 2 at-large members appointed by the Speaker of the Assembly, along with several ex officio, nonvoting members from various geographic regions of the state. The bill would establish the commission to be advisory in nature, for the main purpose of providing meaningful opportunities for civic engagement to improve the quality of life for California's disconnected and disadvantaged youth.

<u>AB 58 (Salas) - Pupil health: suicide prevention policies and training: school-based health programs: pilot program.</u>

Would require a local educational agency, on or before June 1,2022, to review and update its policy on pupil suicide prevention, and revise its training materials, to incorporate best practices identified by the department in the department's model policy. The bill would require a local educational agency, commencing with the 2022-23 school year, to provide suicide awareness and prevention training, at the beginning of each school year, to teachers of pupils in all of the grades served by the local educational agency. By imposing additional duties on local educational agencies, the bill would impose a statemandated local program.

AB 93 (Garcia, Eduardo) - Pandemics: priority for medical treatment: food supply industry workers.

Current law requires various public safety protocols and protections for workers in response to the 2019 novel coronavirus disease, also known as COVID-19. These protocols include, among others, contact tracing and wearing face coverings under specified conditions, except as specified. This bill would state the intent of the Legislature to enact legislation to prioritize workers in the food supply industry, including, but not limited to, field workers and grocery workers, for rapid testing and vaccination programs in response to pandemics, including COVID-19.

<u>AB 104 (Gonzalez, Lorena) - Pupil instruction: learning recovery</u> <u>opportunities.</u>

Would express findings and declarations of the Legislature relating to the effect of the distance learning on pupil learning outcomes during the COVID-19 crisis. The bill would also express the intent of the Legislature to enact subsequent legislation that would provide learning recovery opportunities for pupils who have faced adverse learning circumstances as a result of the COVID-19 crisis.

AJR 1 (Kalra) - Abolition of U.S. Immigration and Customs Enforcement.

This measure would urge the federal government to abolish U.S. Immigration and Customs Enforcement within the Department of Homeland Security.

<u>SB 14 (Portantino) - Pupil health: school employee and pupil</u> training: excused absences: youth mental and behavioral health.

Current law, notwithstanding the requirement that each person between 6 and 18 years of age who is not otherwise exempted is subject to compulsory fulltime education, requires a pupil to be excused from school for specified types of absences, including, among others, if the absence was due to the pupil's illness. This bill would include as another type of required excused absence an absence that is for the benefit of the mental or behavioral health of the pupil. To the extent this bill would impose additional duties on local educational entities, the bill would impose a state-mandated local program.

SB 21 (Glazer) - Specialized license plates: mental health awareness.

Would require the State Department of Education to apply to the DMV to sponsor a mental health awareness license plate program, and would require the DMV to issue the license plates if the State Department of Education meets certain requirements. The bill would also establish the Mental Health Awareness Fund in the State Treasury and would require the revenue generated from the license plates to be deposited in the fund for use, upon appropriation by the Legislature to the State Department of Education, for mental health services in public schools.

<u>SB 71 (McGuire) - Infractions: community service: education</u> programs.

Current law authorizes a court to sentence a person convicted of an infraction to perform community service in lieu of the total fine, as defined, that would otherwise be imposed, upon a showing that payment of the total fine would pose a hardship on the defendant or the person's family. This bill would additionally authorize the court to allow a person to participate in educational programs to satisfy community service hours.

<u>SB 97 (Roth) - Pupil health: type 1 diabetes information: parent</u> notification.

Would require the department to develop type 1 diabetes informational materials for the parents and guardians of pupils, as specified. The bill would require, on and after January 1, 2023, school districts, county offices of education, and charter schools to make those materials available to the parent or guardian of a pupil while the pupil is enrolled in kindergarten or when the pupil is first enrolled in elementary school, and while the pupil is enrolled in grade 7. By imposing additional requirements on school districts, county offices of education, and charter schools, the bill would impose a statemandated local program. This bill contains other related provisions and other existing laws.

SB 106 (Umberg) - Mental Health Services Act: homelessness.

Current law, the Mental Health Services Act (MHSA), an initiative measure enacted by the voters as Proposition 63 at the November 2, 2004, statewide general election, establishes the continuously appropriated Mental Health Services Fund to fund various county mental health programs and requires counties to spend those funds as specified. This bill would state the intent of the Legislature that the MHSA be updated to better focus on people with mental illness who are also experiencing homelessness, who are involved in the criminal justice system, and for early intervention for youth.

<u>SB 107 (Wiener) - CalFresh.</u>

Would require the State Department of Social Services, in order to increase client access and retention within CalFresh, to participate in the Elderly Simplified Application Project, a demonstration project operated by the United States Department of Agriculture, Food and Nutrition Service. The bill would require the department, on or before January 1, 2023, to develop a CalFresh user-centered application for seniors 60 years of age or older and for people with disabilities who are eligible to be enrolled in the Elderly Simplified Application Project.

SB 108 (Hurtado) - State Healthy Food Access Policy.

Would declare that it is the established policy of the state that every human being has the right to access sufficient healthy food. The bill would require all relevant state agencies, including the State Department of Social Services, the Department of Food and Agriculture, and the State Department of Public Health, to consider this state policy when revising, adopting, or establishing policies, regulations, and grant criteria when those policies, regulations, and grant criteria are pertinent to the distribution of food and nutrition assistance.

Technology

<u>AB 14 (Aguiar-Curry) - Communications: broadband services:</u> <u>California Advanced Services Fund.</u>

Current law establishes the State Department of Education in state government, and vests the department with specified powers and duties relating to the state's public school system. This bill would authorize local educational agencies to report to the department their pupils' estimated needs for computing devices and internet connectivity adequate for at-home learning. The bill would require the department, in consultation with the Public Utilities Commission, to compile that information and to annually post that compiled information on the department's internet website.

AB 34 (Muratsuchi) - Communications: Broadband for All Act of 2022.

Would declare the intent of the Legislature to enact legislation that would enact the Broadband for All Act of 2022, to become operative only if approved by the voters at the November 8, 2022, statewide general election, to authorize the issuance of state general obligation bonds to fund increased access to broadband services to rural, urban, suburban, and tribal unserved and underserved communities.

AB 41 (Wood) - Broadband infrastructure

Current law provides that the Department of Transportation has full possession and control of state highways and associated property. Current law requires the department to develop guidelines to facilitate the installation of a broadband conduit on state highway rights-of-way. This bill would state the intent of the Legislature to enact future legislation that will improve California's "Dig Once" policy and expedite the deployment of broadband infrastructure in communities that are currently unserved and underserved.

HR 5 (Chau) - Relative to California Data Privacy Day.

This measure would resolve that the Assembly declares January 28, 2021, as California Data Privacy Day, to increase awareness of privacy and data protection issues among consumers, organizations, and government officials.

<u>SB 4 (Gonzalez) - Communications: California Advanced Services</u> <u>Fund.</u>

Current law establishes the Governor's Office of Business and Economic Development, known as "GO-Biz," within the Governor's office to serve the Governor as the lead entity for economic strategy and the marketing of California on issues relating to business development, private sector investment, and economic growth. This bill would require the office to coordinate with other relevant state and local agencies and national organizations to explore ways to facilitate streamlining of local land use approvals and construction permit processes for projects related to broadband infrastructure deployment and connectivity.

<u>SB 28 (Caballero) - Digital Infrastructure and Video Competition</u> <u>Act of 2006.</u>

Would state the intent of the Legislature to enact legislation relative to the Digital Infrastructure and Video Competition Act of 2006, to be known as the California Rural Broadband and DIVCA Reform Act of 2021.

Capitol Advisors Group, LLC | 925 L Street, Suite 1200, Sacramento, CA 95814

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Only in town for a single-day organizational session to swear in new and returning members, Legislators wasted no time in introducing legislation and staking an early claim on high-profile issues.

Interestingly, despite the impacts of the pandemic still limiting the operations of the Legislature, Legislators are not confining issues to COVID. With over 180 bills introduced on Monday, proposals range from direct COVID-19 relief efforts, combating global warming, police reform and a resolution to declare a state Taekwondo Day.

Of particular interest, a number of education bills were introduced on Monday, both to address impacts of the pandemic on schools and students as well as on general education issues.

Based on these early bill introductions, the reopening of schools has emerged as an early priority for the Assembly. The two bills introduced in this area, AB 10 by Assembly Member Phil Ting (D – San Francisco) and AB 76 by Assembly Member Kevin Kiley (R – Rocklin), highlight the growing tensions on this subject: should schools be required to go back to full-time in-person instruction once infection rates go down?

Another early priority for this Legislature appears to be addressing the state's current Digital Divide. As the COVID-19 pandemic has forced a majority of California's students into distance learning models, the Digital Divide has become a high-profile issue for members on both sides of the aisle, as well as the Governor and Superintendent of Public Instruction. While earlier efforts in this area stalled at the end of the last legislative session, it is clear by the number of bills introduced on Monday aimed at increasing broadband access that this will be a major issue for the next legislative session.

Monday also saw the introduction of some renewed efforts. With the introduction of AB 75, Assembly Member Patrick O'Donnell (D – Long Beach) has declared his intent to place another K-14 school facility bond on an upcoming statewide ballot. Assembly Member O'Donnell was also the author of the school facility bond that went before voters in March of this year.

Below we highlight the early bill introductions of interest for schools, organized by general subject area. Please note that these early versions of bills are often just placeholders for an issue a legislator seeks to address, and the bills will likely be significantly modified during the legislative process.

School Reopening

<u>AB 10 (Ting) Pupil Instruction: in person instruction: distance</u> <u>learning</u>.

This bill would specify that the requirement for a local educational agency (LEA) to provide in-person instruction applies when in-person instruction is allowed under state or county health orders. Additionally, the bill provides that, between March 1, 2021 and June 30, 2021, distance learning is only allowed at the district or schoolwide level if there is an order or guidance from a state public health officer or local public health officer requiring campus closure.

AB 76 (Kiley) Open California Schools Act.

This bill would require an LEA to transition to full-time in-person instruction within two weeks of state and county health orders and guidelines no longer prohibiting the LEA from opening for full-time in-person instruction.

School Facilities

AB 33 (Ting) Natural gas.

This bill would prohibit, beginning January 1, 2022, the Department of General services from approving or providing funding for the construction of a new school building that has natural gas connections.

<u>AB 75 (O'Donnell) Education finance: school facilities:</u> <u>Kindergarten-Community Colleges Public Education Facilities Bond</u> <u>Act of 2022</u>.

This bill would, among other things, establish the Kindergarten-Community Colleges Public Education Facilities Bond for an unspecified amount of funding for the construction and modernization of K-12 and community college education facilities.

<u>SB 22 (Glazer) Education finance: school facilities: Public</u> <u>Preschool, K-12, and College Health and Safety Bond Act of 2022</u>.

This bill would, among other things, establish the Public Preschool, K-12, and College Health and Safety Bond Act of 2022, a \$15 billion facilities bond funding for the construction and modernization of preschool, K-12, community college, CSU, UC facilities. Under the bond, \$9 billion would go towards preschool and K-12 schools (\$2.8 billion for new school district construction, \$5.2 billion for school district modernization, \$500 million for charter schools, and \$500 million for career technical education facilities). The remaining \$6 billion would be split evenly between the community colleges, CSUs, and UCs.

Student Services

AB 27 (Rivas) Homeless children and youths and unaccompanied youths: reporting. This bill would require an LEA to ensure that each of its schools immediately identifies all homeless children and youth and unaccompanied youths by requiring an LEA to administer a housing questionnaire and annually provide the housing questionnaire to all parents or guardians of pupils and unaccompanied youths of the LEA.

AB 58 (Salas) Pupil health: suicide prevention policies and training: school-based health programs: pilot program. This bill would require an LEA, on or before June 1, 2022, to review and update its policy on pupil suicide prevention, and revise its training materials, to incorporate best practices identified by the California Department of Education (CDE) in the department's model policy. The bill would also require an LEA, commencing with the 2022–23 school year, to provide suicide awareness and prevention training, at the beginning of each school year, to all its teachers.

<u>SB 14 (Portantino) Pupil health: school employee and pupil</u> training: excused absences: youth mental and behavioral health.

This bill would expand the list of excused absences for a student to include absences for the benefit of the mental or behavioral health of a student. The bill would also require CDE to identify an evidence-based training program on youth mental health and behavior health and require LEAs to use the program to train their classified and certificated school employees that have direct contact with students.

Human Resources

AB 25 (Kiley) Worker classification: employees and independent contractors. This bill would repeal the "ABC Test" established in *Dynamex Operations West, Inc. v. Superior Court of Los Angeles* and codified by AB 5 (2019) and instead require the question of that whether a person is an employee or an independent contractor be governed by the multifactor test established in *S.G. Borello & Sons, Inc. v. Department of Industrial Relations*.

AB 95 (Low) Employees: bereavement leave.

This bill would enact the Bereavement Leave Act of 2021, which would require and employer with 25 or more employees to grant an employee up to 10 business days of unpaid bereavement leave upon the death of a spouse, domestic partner, or immediate relative. The bill would also require an employer with fewer than 25 employees to grant up to 2 business days of unpaid leave.

<u>SB 46 (Stern) Employment: contact tracing and safety policies:</u> <u>COVID-19</u>.

This bill declares the Legislature's intent to enact legislation that would require an employer to develop and implement contract tracking and safety policies for its employees, including requiring notice to the employer if an employee receives a positive COVID-19 test.

Early Learning

<u>AB 22 (McCarty) Transitional kindergarten: enrollment for 4-yearold children</u>.

This bill would require, by the 2030–31 school year, a school district or charter school, as a condition of receipt of apportionments for pupils in a transitional kindergarten (TK) program, to admit to its TK program, children who will have their 5th birthday between September 2 of the calendar year in which the school year begins and September 1 of the following calendar year.

AB 92 (Reyes) Preschool and childcare and development services: family fees.

Only intent language at this point, the bill expresses the Legislature's interest in enacting legislation to address the impact of preschool and child care fees on low-income families.

Broadband Access

<u>AB 14 (Aguiar-Curry) Communications: broadband services:</u> <u>California Advanced Services Fund.</u>

This bill would make various changes to California Advanced Services Fund (CASF). Among other things, it would require the development of recommendations and a model for streamlined local permit processes for projects related to broadband infrastructure deployment and connectivity. The bill would also specify new speed requirements for projects funded out of the CASF, requiring that projects be capable of providing access with speeds at minimum of 25 megabits per second (mbps) downstream, and 25 mbps upstream, with a stated goal of 100 mbps downstream.

AB 34 (Muratsuchi) Communications: Broadband for All Act of 2022.

Currently, this bill only contains intent language. However, it expresses the intent of the Legislature to enact the Broadband for All Act of 2022. The Act, which would need to go before voters at the November 2022 statewide general election, would authorize the issuance of state general obligation bonds to fund increased access to broadband services to rural, urban, suburban, and tribal unserved and underserved communities.

AB 41 (Wood) Broadband infrastructure.

Also only intent language as of today, this bill seeks to make changes to California's "Dig Once" policy in an effort to expedite and more efficiently deploy broadband infrastructure in communities that are currently unserved and underserved.

<u>SB 4 (Gonzalez, Lena) Communications: California Advanced</u> <u>Services Fund.</u>

This bill would also make changes to the CASF. Among other things, it would define an "unserved area" to mean an area for which at least 90% of the population has no facility-based broadband provider offering at least one tier of broadband service at speeds of at 25 mbps downstream, 3 mbps upstream, and a latency that is sufficiently low to allow real-time interactive applications. The bill would also give priority to fund projects in unserved areas where internet connectivity is available only at speeds at or below 10 mbps downstream and 1 mbps upstream, or areas with no internet connectivity, with a goal of achieving at least 100 mbps downstream.

School Funding

<u>AB 5 (Fong) Greenhouse Gas Reduction Fund: High Speed Rail</u> <u>Authority: K-12 education: transfer loan</u>.

This bill would suspend the appropriation to the High-Speed Rail Authority for the 2021-22 and 2022-23 fiscal years and would instead require the transfer of those amounts from moneys collected by the State Air Resources Board to the General Fund to support K-12 education and to offset any funding reduction for K-12 education.

What's Next?

The bills introduced on Monday will be the last new bills we see until the Legislature returns to Sacramento in January. With Members now back in their districts for the holidays, no legislation may be introduced until the Legislature reconvenes on January 4.

As always, if you have any questions or would like additional information, please reach out to any of us.

Best, Caitlin

Caitlin Jung Legislative Counsel | Capitol Advisors Group 916-838-3254 - mobile



What obstacles schools must overcome to offer inperson instruction

JANUARY 6, 2021 I LOUIS FREEDBERG

G ov. Gavin Newsom's "Safe Schools for All" plan presented during the waning days of 2020 has raised hopes that more schools could reopen for in-person instruction this school year, at least for the state's youngest children.

The goal, Newsom explained, is "to support all communities to be on track for safe inperson instruction by early spring 2021."

Yet the outlook for that happening appears daunting. What challenges do districts face in jump-starting in person instruction? Here are the principle ones:

Covid-19 spreading across the state

Even those most vigorously arguing that returning to school presents relatively few risks to children acknowledge that it should be done within the context of containing the spread of the virus in the larger community.

But the virus is surging in California, reaching crisis levels in many parts of the states. What's more, several countries that were often held up as models for what California, and the United States, should be doing, have shut their schools, most notably <u>the United</u> <u>Kingdom</u>. <u>Germany</u> also has closed its schools for a month, at least until mid-January, as have other countries such as the Netherlands and South Korea.

Not helping the situation is the detection of a new more contagious strain of the virus.

All this is likely to make more parents, in addition to school staff, more apprehensive about coming back to school for in-person instruction. It also presents a contradictory messaging

problem for the state and schools: <u>ordering families to stay home</u> and not mix with other families or households for any reason — and simultaneously saying it is OK for them to return to school to interact with children and adults from multiple households, indoors, for hours each day.

Logistics and costs of testing for Covid-19.

Newsom's reopening plan calls for testing everyone in a school — both school staff and students — including those who are asymptomatic. It says they must be tested every two weeks if the school is in a county in the purple tier, with infection rates of less than a daily average of less than 14 positive cases per 100,000 residents. Those in counties with more than 14 positive cases — currently all but two counties — would have to be tested *every week*.

School administrators worry about the logistics and costs of such a comprehensive testing program. Newsom says that private insurance plans would cover the costs of those who are insured, or MediCal. Fortunately, all but 3.6% of young people between 0 and 20 years have some form of health coverage in California, according to the <u>Kaiser Family Foundation</u>.

But the logistics of making sure that all staff and students are tested on a regular basis remain daunting, even if most of the costs are covered by MediCal, SCHIP, or individual health plans. Sources says Newsom is expected to provide more details soon about how the state will support testing programs, but these have yet to be announced.

Disparate impact on districts serving low-income students in areas with high infection rates

In a <u>highly critical letter</u> to Newsom, the superintendents of some of the state's largest school districts (Los Angeles, San Diego, Long Beach, San Francisco, Oakland and Sacramento) expressed concerns that districts like theirs serving predominantly low-income communities, where infection rates are far higher, would not qualify for funds under Newsom's plan. That's because infection rates are higher than the level set by Newsom (a daily average of 28 positive cases per 100,000 residents). "A funding model which supports only schools in communities less impacted by the virus is at odds with California's longstanding efforts to provide more support to students from low-income families," they said. "If nothing changes, many students in high-need communities are at risk of being left behind."

Buy-in from teachers' unions

Gov. Newsom's plan requires school districts to get support from teachers' unions before they can reopen, which means that reopening plans would have to be negotiated with teachers district by district. But taking issue with a central element of Newsom's plan, the California Teachers Association is saying that schools shouldn't open for in-person instruction in counties that are still in the purple tier. Given that all but two counties (Alpine and Sierra) are currently in the purple zone, making concrete plans for reopening schools will be difficult without assurances that teachers will agree to participate. The seven superintendents are asking Newsom to impose a uniform standard for reopening for in-person instruction, and then to require schools to reopen once they meet that standard, regardless of opposition from labor unions or anyone else.

Shortage of teacher substitutes and other staff

A big unknown for some districts is whether they will have the staff they need to provide in-person instruction — in addition to distance learning for children whose parents wish to stick with remote instruction. More teachers are expected to call in sick because of having to quarantine or sequester after exposure or possible exposure to the virus. In some districts, teachers at greater risk may choose to take a leave rather than take the chance of exposure in the classroom. Typically, these vacancies could be filled by substitute teachers. The problem is that even before the pandemic many districts were experiencing difficulties finding substitutes. In fact, there has been a precipitous decline in the number of substitute credentials issued in California. As <u>reported by EdSource</u>, over a six-month period in 2020, there were 22,236 applicants for substitute credentials. That was down from 31,871 for the same period in 2019, and 42,300 in 2018.

The problem is especially acute in rural areas where the shortages are most severe. The situation is so bad that Tim Taylor, executive director of the <u>Small School Districts'</u> Association, describes the substitute shortage as "a code-red issue" for rural schools.

Another challenge is that implementing health and safety practices could require additional non-teaching staff. Scott Borba, superintendent of the Le Grand Union Elementary School District in Merced County, for example, says his district needs more custodians to sanitize school facilities.

Slow pace of vaccinations, with school employees not yet on the priority list

The availability of vaccines could make a big difference in convincing school staff to return to school, as well as to parents who for health reasons may be reluctant to have their children back in school.

But there are numerous unknowns regarding both the pace of vaccinations, and who will be receiving them. It seems certain that teachers and other school employees will soon be placed on the priority list (Phase 1B) to receive the vaccinations. But it is unclear when that would happen, whether the state will set a list of priorities for which school employees should be vaccinated first, and whether this will happen quickly enough to open schools this spring.

Uncertainties about state and federal funds to cover education and health costs

Currently, it is not entirely clear how much money districts can expect to get from the state and federal governments to get them through this school year — and whether the federal government will come up with additional funds after Joe Biden becomes president. The Georgia runoff election results make it more likely that more funds will be forthcoming, but that won't be known for weeks, at best. EdSource has <u>come up with estimates</u> about how much districts can expect to receive from the federal government's \$900 billion relief bill approved in September, but these are only estimates. When it comes to state funding, districts will have a clearer idea about where they stand after Gov. Newsom announces his proposed budget for the coming fiscal year this week.

Finding a pathway for in-person instruction for middle and high school students

Gov. Newsom's plan does not provide a pathway for middle and high school students to

return to school. In fact, it is silent on the issue. If state regulations are still in force, school communities would be limited in what they can do on infection rates in their counties coming into the red, orange or yellow tiers before middle or high school students could even be considered for in-person instruction. Because of the dire situation in the state now, it is impossible to predict whether that will occur in time for students and staff to return to school before May.

Overcoming divisions within school communities on in-person instruction

The entire issue of reopening schools is an emotional one, with different people having different comfort levels and needs regarding in-person instruction. In some communities, some parents feel passionately about the need to get children back to school as soon as possible, while other parents feel just the opposite. In many districts, teachers have been especially reluctant to return to their classrooms because of health concerns, often leading to stressful negotiations. Complicating the entire discussion is that school officials have limited time to figure out the best way to get students back to school this academic year.

To get more reports like this one, <u>click here</u> to sign up for EdSource's no-cost daily email on latest developments in education.

Q Comments

Comments Policy

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Ken Firl

6 hours ago

Marin county has been 80% open since September. Please put students first and reopen now. Calif public schools should be ashamed.

COVID-19

Related Links:

- Safe Schools for All Rationale
- Safe Schools for All Science

Summary: California's Safe Schools for All Plan

Throughout the course of the COVID-19 pandemic, Governor Newsom has prioritized the health and safety of California's children and schools. As a father of four, Governor Newsom agrees with parents, educators, policymakers, and pediatricians that in-person is the best setting to meet not only the core learning needs of students, but also their mental health and social-emotional needs. It's especially important for our youngest kids, students with disabilities, and those already disproportionately impacted by the pandemic. Resuming in-person instruction is critical for kids, families, and communities throughout the state.

The safety of staff and students is foundational. With growing evidence that the right precautions can effectively stop the spread of COVID-19 in schools—especially in elementary schools—the Administration is committed to doing everything it can to make in-person instruction in schools safe for students and staff. Developed in partnership with the Legislature, the Administration's plan focuses on ensuring careful implementation and building confidence by supporting schools to bring back the youngest children (TK-2) and those who are most disproportionately impacted first, then phasing in other grade levels through the spring, as conditions allow. This phased-in approach recognizes that younger children are at a lower risk of contracting and transmitting COVID-19, with core safety measures in place.

At the same time, distance learning will remain an option for parents and students who choose it and for those whose health status does not allow them to return to school in the near term.

Today, Governor Newsom pledges to advance, with the Legislature, California's Safe Schools for All Plan, built on four pillars:

- Funding. The Budget will propose for immediate action in January, \$2 billion for the safe reopening of schools beginning in February, with a priority for returning the youngest children (TK-2nd grade) and those who are most disproportionately impacted first, then returning other grade levels to in-person instruction through the spring. These funds will provide approximately \$450 per student to school districts offering inperson instruction and will be weighted for districts serving students from low-income families, English learners and foster youth.
- 2. **Safety & Mitigation.** To further ensure health and safety in the classroom, the Administration will focus on implementation of key measures, including testing, PPE, contact tracing, and vaccinations.
 - 1. **Testing.** The Administration will support frequent COVID-19 testing for all school staff and students, including weekly testing at schools in communities with high rates of transmission. For example, any interested public school will be on-boarded to the state-owned Valencia Branch Lab for PCR tests at one-third the market rate and the State will establish a hotline to help schools implement testing.
 - 2. **PPE.** All staff and students in schools are required to wear masks. Furthermore, surgical masks will be recommended for school staff, and the Administration will distribute millions of surgical masks to schools at no cost. The Administration has also enabled schools to leverage state-negotiated master contracts for PPE to reduce costs and streamline supply chains.

- 3. **Contact Tracing.** Schools will continue to be on-boarded onto the School Portal for Outbreak Tracking (SPOT) to improve collaboration between school and health officials, and members of the state contact tracing workforce will be deployed to improve communication with schools.
- 4. Vaccinations. School staff will be prioritized in the distribution of vaccines through the spring of 2021.
- 3. **Oversight & Assistance.** Dr. Naomi Bardach, a UCSF pediatrician and expert on COVID-19 transmission in schools, will lead the Safe Schools for All Team, a cross-agency team composed of dedicated staff from CDPH, Cal/OSHA, and educational agencies. The Team will provide hands-on support to help schools develop and implement their COVID-19 Safety Plans. These supports include school visits and walk-throughs as warranted, webinars and training materials, and ongoing technical assistance.
- 4. **Transparency & Accountability.** A state dashboard will enable all Californians to see their school's reopening status, level of available funding, and data on in-school transmissions. Additionally, a web-based "hotline" will empower school staff and parents to report concerns to the Safe Schools for All Team, which will lead to escalating levels of intervention, starting with technical assistance and ending with legal enforcement.

California's Safe Schools for All Plan provides the support and accountability to establish a clear path to minimize in-school transmissions and enable, first, a phased return to in-person instruction, and then ongoing safe in-person instruction.

Page Last Updated : December 30, 2020

COVID-19

Related Links:

- Safe Schools for All Summary
- Safe Schools for All Rationale

Evidence Summary: TK-6 Schools and COVID-19 Transmission

This is a summary document of the evidence thus far that informs safe and successful in-person instruction in TK-6 schools in the context of the COVID-19 pandemic. The overall topics covered include: frequency of infection in elementary-aged students; why they get it less often and with less severe disease than adults; transmission patterns in elementary-school aged students; transmission patterns in TK-12 schools; and the evidence for COVID-19 transmission mitigation strategies particular to the school context.

This summary is not comprehensive, but focuses on the best evidence we have to inform us regarding the safety of in-person instruction for TK-6 students. The studies cited are chosen for their rigor, rather than because they support a specific position regarding whether or not it is safe to be open. We have learned a considerable amount since March 2020 regarding schools, through scientific studies of schools or camps that have been open in the U.S. or internationally. Because change is the only constant in the COVID-19 pandemic, we will continue to gather and monitor the evidence carefully, to inform safe and successful schooling.

Why Children Get COVID-19 Less Frequently and Have Less Severe Disease

In epidemiological studies globally and nationally, the evidence suggests that children seem to get COVID-19 less frequently than adults. Originally it was thought that they might be less frequently diagnosed due to less testing because children are more often asymptomatic or have less severe symptoms. However, population-wide studies in Iceland and Spain using antibody tests that assess prior infection at any time find that children have lower rates of infection compared to adults.

There are two general explanations for why children get COVID-19 less frequently and have less severe disease compared to adults. The first is that they produce fewer ACE-2 receptors. Essentially, ACE-2 receptors are the doorway into human cells for SARS-CoV-2, the virus that causes COVID-19. A study from May 2020 showed that elementary students produce fewer ACE-2 receptors than middle and high school-aged students, who produce fewer receptors than receptors adults. Consequently, children have fewer doorways into the body for the virus, which leads to fewer infections and less severe infections for those who catch the virus.

The other explanation is that, because children's immune systems are used to fighting off common colds, they are better primed to fight off COVID-19. Other viruses in the same family (coronaviruses) as the SARS-CoV-2 virus cause the common cold. Since they are in the same family of virus, some parts of the virus, including something called the S2 spike, are very similar. There is a study of children from 2011-2018 (before SARS-CoV-2 appeared) that shows that more children (ages 1-16) had antibodies against the S2 spike than young adults (17-25), likely because they have coughs and colds from other coronaviruses more often than adults. It is likely a combination of these two phenomena—ACE-2 receptor production and pre-existing antibodies to other coronaviruses—that explain why

children get disease less frequently and less severely.

Children with COVID-19 Most Often Get It from a Household Contact

When children do get COVID-19, the predominant pattern of transmission is to get the infection from an adult household contact (someone the child lives with at home who has COVID-19). High rates of household infection from adults to children have been seen in studies from Chicago, India, Greece, Australia, Switzerland, South Korea, and China. This has been seen even in settings where schools were open. For instance, a study of 10 early childhood centers and 15 schools (>6000 people) found low rates in the schools overall (1.2%) and >90% of cases were from the community, not from in-school transmission.

Transmission Among or from Students Is Uncommon

A recent study in the Morbidity and Mortality Weekly Report (MMWR) from the Centers for Disease Control and Prevention (CDC) found that for students, going to schools was not associated with having a positive COVID-19 test, but that social gatherings were—including weddings, parties, and playdates. This likely reflects the more controlled school environment leading to a low risk of transmission. It may also be that families who were going to these types of higher-risk social gatherings may have had other higher risk behavior such as decreased mask use.

The study from Australia mentioned above investigated the cases where there was transmission in school. It found that, of children who tested positive—a low number relative to the total number of students—only 0.3% had had contact with another child who was positive (child-to-child transmission). Child-to-adult transmission occurred only 1% of the time. In contrast, adult-to-child transmission occurred 1.5% of the time, and adult-to-adult transmission was 4.4%, almost 15 times higher than child-to-child transmission. This was in the context of masks not being encouraged at the time in Australia, though small groups and physical distancing recommendations were in place. The higher risk of adults transmitting to others compared to children transmitting to others is likely due to adults getting COVID-19 more often than children and youth, and adults having worse symptoms like cough, which makes it easier to transmit the virus.

These data suggest that adult-to-adult transmission is the most likely scenario for in-school transmission. This indicates that we have more control over in-school transmission, since adults are more likely to be able to adhere to policies for mitigation strategies such as masking and physical distancing. To achieve low in-school transmission, school communities will need to remain focused on ensuring places like teacher/staff break rooms are well-controlled and on effectively implementing the core mitigation strategies for staff as well as for students.

Low Risk of Transmission in Elementary Schools

The data indicate that the risk of transmission in elementary schools can be low. Two studies from early in the pandemic in Oise, one of the most heavily affected areas of France, focused on elementary schools and the local high school. Both studies examined the presence of antibodies (evidence of prior infection) to the SARS-CoV-2 virus in students and staff who had been attending the open schools without any precautions (e.g., masking, distancing) in place. The high school study showed evidence of potential spread within the school, with 43% of teachers, 59% of other school staff, and 38% of students with antibodies, compared to community prevalence of 9%. The elementary school study included six schools and >500 students, with only 9% of students, 7% of teachers, and 4% of non-teaching adults with antibodies, very similar to community prevalence. The lower transmission in the

elementary schools likely reflects the lower infection rates and lower severity of illness in elementary students. However, it also likely reflects the much higher rates of student mixing in a traditional high school curriculum. This highlights why a modified high school curriculum that creates stable groups can substantially mitigate the risk of widespread in-school transmission in high schools.

Lessons About What Not to Do

In addition to the studies above, a study from a middle and high school in Israel after re-opening in May illustrates the need for mitigation strategies to support safe schools. The school re-opened in May, with no physical distancing measures in place. Due to a heat wave, they stopped requiring masking for two days and had closed windows with air conditioners. During the two days without masking or proper ventilation, two symptomatic cases were in the school, leading to an outbreak across more than 100 students and staff. This study highlights the risk of spread without mitigation strategies—teaching us what <u>not</u> to do. Core strategies include masks, physical distancing, enhanced ventilation with open windows and without strong inward-directed air currents, and symptom screening.

Testing Students and Staff with Symptoms Can Prevent Outbreaks

Though approximately 40% of children do not have symptoms of COVID-19, symptom screening will still identify children with a higher likelihood of COVID-19 compared to students without symptoms. Screening students and staff and excluding those with symptoms creates a system for preventing possibly infectious people with COVID-19 from coming to school, thereby avoiding or breaking the chain of in-school transmission. One potential option for getting cleared to return to school after having symptoms includes getting tested. So, in addition to helping to prevent in-school transmission, the screening and testing of symptomatic students and staff provides ongoing data about COVID-19 in school communities.

Core Mitigation Strategies

The successful approach to preventing transmission in schools leverages layers of safety strategies. Core strategies include: masks; physical distancing; small, stable groups; hand hygiene; ventilation; screening for symptoms or close contact; and asymptomatic testing. Each layer provides additional protection and, when used together, have been associated with low or zero transmission, even in communities with high COVID-19 prevalence (paper in-press at *Pediatrics*). A modeling study examined the efficacy of different mitigation strategies to prevent in-school COVID-19 transmission. The study compared the efficacy of masking, monthly and weekly testing of teachers and students, and stable groups of students and staff, examining each strategy alone and then examining combinations of strategies. The authors looked at how much each strategy could decrease the proportion of symptomatic infections for teachers in high schools, middle schools and elementary schools, and for students, and for household members of students or teachers. They found that masks alone and stable cohorts alone were more effective than even weekly testing of students and teachers. This illustrates again the importance of masks and stable cohorts.

In Summary:

Though the evidence continues to evolve, we know more now than we did in July regarding how to prevent

transmission in schools. We have learned from examples of what works and what does not work. Core mitigation strategies are necessary for safe and successful schooling. If those mitigation strategies are implemented as several layers of safety, elementary schools can be safe workplaces for teachers and other staff and safe learning environments for children.

Page Last Updated : December 30, 2020

COVID-19

Related Links:

- Safe Schools for All Summary
- Safe Schools for All Science

Rationale: California's Safe Schools for All Plan

Protecting the safety and wellbeing of California's children throughout the COVID-19 pandemic has been a top priority of the Newsom Administration. The benefits of in-person instruction are plain to see, especially for our youngest students and students disproportionately impacted by the pandemic. Now, with growing evidence that the right precautions can effectively stop the spread of COVID-19 in schools—particularly in elementary grades—the Administration is committed to doing everything it can to support students and staff to safely return to in-person instruction.

We have learned a great deal since the beginning of the pandemic, and both national and international studies demonstrate the relatively low risks and high benefits of educating students in classrooms—especially for elementary grades.

With the Right Precautions, We Can Minimize Transmissions in Schools—Especially in Elementary Grades

Research across the globe shows that children get COVID-19 less often than adults, and when they do get sick, they get less sick than adults. Population-wide studies in Italy and Spain using antibody tests, which indicate whether a person has been infected at any point previously, find that children have lower rates of infection compared to adults.

In studies of open schools in America and around the world, children do not seem to be major sources of transmission—either to each other or to adults. In fact, the greatest risk in school settings comes from adults transmitting it to other adults, often in settings like breakrooms where we sometimes let down our guard. One study in Australia of 10 early childhood centers and 15 schools (>6000 people) found low rates in the schools overall (1.2%), and an adult-to-adult transmission rate almost 15 times higher than child-to-child transmission.

The growing body of evidence is particularly strong for lower risks associated with elementary schools. For example, a study analyzing elementary schools in a heavily impacted region of France found that the risks of transmission inside schools were approximately the same as outside schools. The lower risks associated with younger grades is likely due to, among other reasons, the fact that younger people produce fewer ACE-2 receptors —COVID's doorway into human cells.

Even in communities with many COVID cases, we do not see many outbreaks in schools. That's because the right precautions can stop outbreaks before they start. Evidence shows that schools with the right mitigation strategies have been able to prevent in-school transmission among students and staff.

We know what works. We can stop the spread in schools by layering and carefully implementing mitigation

strategies, including masks, cohorting, proper ventilation, washing hands, testing and symptom screening.

For more information, please refer to Evidence Summary: TK-6 Schools and COVID-19 Transmission (California Department of Public Health)

In-Person Instruction Is Critical for Learning and Growth–Especially in Elementary Grades

While California has made great strides in distance learning—and this option will remain for parents and students who choose it and for those whose health status does not allow them to return to school in the near term—remote learning is still very challenging for many students and their caregivers. In a recent survey by the Alliance for Children's Rights, 42% of caregivers reported that they are not comfortable supporting youth in their care with technology needs, and 39% of caregivers reported that they are not comfortable providing academic support to the youth in their care during distance learning.

Older students are better equipped to manage technology and benefit from distance learning, but younger students —especially TK-2—are less equipped. Furthermore, the social-emotional skills cultivated in the youngest grades are foundational for future wellbeing. In the classroom, students learn not only academic skills, but social and emotional skills as well. In a classroom of peers led by an expert teacher, students learn to listen and focus, to share, to wait their turn, to encourage others and to allow others to encourage them. They also begin to learn skills such as self-awareness, social awareness, self-management and responsible decision-making that will carry them through life.

There are also immediate health-related benefits for children who are provided in-person instruction, including lower rates of anxiety and depression, higher rates of immunizations, and other positive indicators of public health and wellbeing. These benefits are particularly critical for foster youth, homeless youth, and other students disproportionately impacted by the pandemic, for whom school provides safety and stability. In-person instruction also helps school staff to detect and address child abuse and neglect. For example, the state observed a roughly 40% drop in child welfare referrals following the stay-at-home orders in March 2020 compared to spring averages from the prior year.

Conclusion

Through careful implementation of safety measures and by phasing in our youngest students—who are at lowest risk and stand to benefit the most from in-person settings—we can build experience, confidence, and trust that our schools can be both safe workplaces and safe learning environments.

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SELPA Referral Procedures

This referral handbook was developed by the California Association of Health & Education Linked Professions (CAHELP), a Joint Powers Authority (JPA), to assist participating local education agencies (LEAs) in the Desert/Mountain Special Education Local Plan Area and the Desert/Mountain Charter Special Education Local Plan Area (hereinafter referred to as the SELPA) in the referral processes for special education and related services and behavioral health programs.

Note: <u>All services may not be available in all areas</u>. Please check with the Program Specialist assigned to your LEA with any questions regarding the referral process.

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Section 1: Audiological Assessment

Initial

The SELPA Audiological Program provides students with audiological assessment and services that will assist the student to participate and progress in the general education curriculum.

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for an Audiological Assessment.
- 2. Complete the Initial Request for Audiological Evaluations/Services form (D/M 108) and obtain the signatures of the person making the referral and the director of special education.
- 3. Complete the Assessment Plan form (D/M 66) and obtain the parent/guardian signature.
- 4. The person making the referral should check the box that corresponds to the type of assessment(s) requested.
- 5. The parent/guardian should initial each applicable statement listed under the Parental Authorization section of form D/M 66.

- 6. LEAs are encouraged to have assessment plans signed close to the date of their LEA audiology evaluation date and within the required 60-day assessment time frame.
- 7. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name as the SELPA/Pacific Hearing Services. The disclosing agency will vary depending on whether it is a physician, medical center, or audiologist.

Referral Procedures

Forward the following completed documents to the attention of the Area Director for Desert/Mountain Operations (DMOPS).

D/M 108 Initial Request for Audiological Evaluations/Services form

D/M 66 Assessment Plan form

D/M 63 Authorization for Use and/or Disclosure of Information form

IEP or IEP Addendum dated within one year of the referral for an audiological assessment

LEA's hearing screening form that documents a minimum of two repeated failures on threshold tests or previous audiological assessment reports and/or audiograms for students who have an identified hearing loss. (This does not apply to Desert/Mountain Operations)

Timeline for Assessment

The audiological assessment must occur within 60 calendar days from the date the Assessment Plan was received by the LEA. When the signed Assessment Plan is received by the LEA, it should be date stamped or the date entered in the field at the bottom of the Assessment Plan (D/M 66).

An Audiology Assessment Calendar is published on an annual basis at the beginning of each school year. The calendar lists the scheduled assessment dates and referral due dates for each LEA within the SELPA that participates in the SELPA Audiological Program. The calendar can be found on the SELPA website at <u>www.dmselpa.org</u>.

For students who require services outside of the regularly scheduled LEA visit, services may be coordinated between the SELPA and the LEA. Arrangements may be made for students to be served at the school site, at a nearby LEA, the Desert/Mountain Children's Center (DMCC), or at the service provider's office, whichever is available and appropriate. Please contact the CAHELP Chief Executive Officer at the SELPA for assistance.

Timeline for Services

Upon completion of the audiological assessment, a written report will be sent to the Area Director for Desert/Mountain Operations (DMOPS). DMOPS will electronically send a copy of the cover letter and the report to the LEA director of special education and a copy to the director's secretary and LEA Coordinator for Audiology Services. DMOPS will upload a copy of the cover letter to the student's electronic file. A monthly meeting coordinated with the DHH Itinerant teachers,

DMOPS, and the Audiologist will be held to review all the reports to assist LEAs in determining who may need further assessment and DHH services.

The LEA director of special education should reconvene the IEP team to review the findings and recommendations of the assessment, consider the educational impact, and determine whether audiological services are needed.

If ongoing audiological follow-up is recommended, code 720 should be listed under the Special Education and Related Services section of the IEP form.

If it is decided that classroom amplification equipment is needed, a request for a proposal of the specific equipment should be made to DMOPS or the LEA Coordinator for Audiology Services requests a quote from Pacific Hearing Services.

If a profound hearing loss has been found, the deaf disability code (020) should be listed under the Eligibility section of the IEP form.

If a mild to severe hearing loss has been found, the hard of hearing disability code (030) should be listed under the Eligibility section of the IEP form.

If the disability is due to a hearing loss, the Low Incidence Disability box on the IEP form should be checked.

If the hearing loss is not the primary disability, it may be listed as the secondary disability.

If recommended and agreed upon, classroom amplification equipment should also be noted under Assistive Technology on the IEP form (D/M 68E).

If the student is to receive amplification equipment for the first time, goals should be included for mastering equipment utilization, care, and operation.

Annual

Students who have previously been referred and evaluated for audiological services as part of the SELPA Audiological Program are eligible for annual audiological assessments.

Pre-Referral

Local Education Agency (LEA) Responsibility

LEAs participating in the SELPA Audiological Program may request an annual audiological assessment by following the procedure listed below. It is not necessary that the Individualized Education Program (IEP) team convene for this type of referral.

- 1. Complete the Annual Request for Audiological Evaluations/Services form (D/M 108A). Please DO NOT complete the Initial Request for Audiological Evaluation/Services form (D/M 108) for annual referrals.
 - A. Include information that is related to the school of attendance, program placement, and services the student is currently receiving.

- B. Include behavior and/or academic successes or challenges.
- C. Include information regarding the use and functioning of equipment such as hearing aids and/or FM systems.
- D. Include medical information related to the student's hearing.
- 2. Complete the Assessment Plan form (D/M 66) and obtain the parent/guardian signature.
 - A. The person making the referral should check the box that corresponds to the type of assessment(s) requested. Most often the "other" box is checked followed by the statement, "Audiological assessment to be completed by SELPA contracted audiologist."
 - B. The parent/guardian should initial each applicable statement listed under the Parental Authorization section of form D/M 66.
 - C. LEAs are encouraged to have the assessment plans signed close to the date of their LEA audiology evaluation date and within the required 60-day assessment time frame.
- 3. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name as the SELPA/DMOPS/Pacific Hearing Services. The disclosing agency will vary depending on whether it is a physician, medical center, or audiologist.

Referral Procedures

Forward the following completed documents to the attention of the Area Director for Desert/Mountain Operations (DMOPS).

D/M 108A Annual Request for Audiological Evaluations/Services form

D/M 66 Assessment Plan form

D/M 63 Authorization for Use and/or Disclosure of Information form (for the current school year)

Timeline for Assessment

The audiological assessment must occur within 60 calendar days from the date the Assessment Plan was received by the LEA. When the signed Assessment Plan is received by the LEA, it should be date stamped or the date entered in the field at the bottom of the Assessment Plan (D/M 66).

An Audiology Assessment Calendar is published on an annual basis at the beginning of each school year. The calendar lists the scheduled assessment dates and referral due dates for each LEA within the SELPA that participates in the Audiological Program. The calendar can be found on the SELPA website at <u>www.dmselpa.org</u>.

For students who require services outside of the regularly scheduled LEA visit, services may be coordinated between the SELPA and the LEA. Arrangements may be made for students to be served at the school site, at a nearby LEA, the Desert/Mountain Children's Center (DMCC) or at the service provider's office, whichever is available and appropriate. Please contact the CAHELP Chief Executive Officer at the SELPA for assistance.

Timeline for Services

Upon completion of the audiological assessment, a written report will be sent to the Area Director for Desert/Mountain Operations (DMOPS). DMOPS will electronically send a copy of the cover letter and the report to the LEA director of special education and a copy to the director's secretary and LEA Coordinator for Audiology Services. DMOPS will upload a copy of the cover letter to the student's electronic file. A monthly meeting coordinated with the DHH Itinerant teachers, DMOPS, and the Audiologist will be held to review all the reports to assist LEAs in determining who may need further assessment and DHH services.

The LEA director of special education should reconvene the IEP team to review the findings and recommendations of the assessment, consider the educational impact, and determine whether audiological services are needed.

- If ongoing audiological follow-up is recommended, code 720 should be listed under the Special Education and Related Services section of the IEP form.
- If it is decided that classroom amplification equipment is needed a request for a proposal of the specific equipment should be made to the SELPA Coordinator for Audiology Services who requests a quote from Pacific Hearing Services.
- If a profound hearing loss has been found, the deaf disability code (020) should be listed under the Eligibility section of the IEP form.
- If a mild to severe hearing loss has been found, the hard of hearing disability code (030) should be listed under the Eligibility section of the IEP form.
- If the disability is due to a hearing loss, the Low Incidence Disability box on the IEP form should be checked.
- If the hearing loss is not the primary disability, it may be listed as the secondary disability.
- If recommended and agreed upon, classroom amplification equipment should also be noted under Assistive Technology on the IEP form (D/M 68E).
- If the student is to receive amplification equipment for the first time, goals should be included for mastering equipment utilization, care, and operation.

Section 2: Assistive Technology/Low Incidence

Assessment for Low Incidence Equipment (LIE)

Assistive Technology refers to a device or service that can be used as a tool by students with disabilities to achieve or maintain function.

The IDEA and California law require that Individualized Education Program (IEP) teams consider whether students need assistive technology devices or services when developing IEPs. Assistive Technology (AT) relates to the tools required to maintain, improve, or increase functional capabilities to bridge the gap between student's performance and the demands of the curriculum. AT devices and services are defined in the IDEA as:

- Any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized that is used to increase, maintain, or improve functional capabilities of a child with a disability.
- Any service that directly assists a child with a disability in the selection, acquisition, or use of an AT device. This includes evaluation; providing for the acquisition of AT equipment; selecting, designing, interventions or services with AT devices; and training or technical assistance for the child, family, and other professionals who work with the child.

Low incidence disability is defined in **California Education Code § 56026.5** as a severe disabling condition with an expected incidence rate of less than one percent of the total statewide enrollment in kindergarten through grade 12. For purposes of this definition, severe disabling conditions are hearing impairments, vision impairments, and severe orthopedic impairments, or any combination thereof. For purposes of this definition, vision impairments do not include disabilities within the function of vision specified in Section 56338.

Pre-Referral

Local Education Agency (LEA) Responsibility

- A. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for an Assistive Technology (AT) Assessment.
- B. Complete the Assistive Technology Assessment Referral form (D/M 127) and obtain the signatures of the person making the referral and the director of special education.
- C. Complete the Assessment Plan form (D/M 66) and obtain the parent/guardian signature.
 - The person making the referral should check the box that corresponds to the type of assessment(s) requested.
 - The parent/guardian should initial each applicable statement listed under the Parental Authorization section of form D/M 66.

D. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name, if known. If not, leave the field blank.

Referral Procedures

Forward the following completed documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- D/M 127 Assistive Technology Assessment Referral form
- D/M 66 Assessment Plan form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year of the referral for an Assistive Technology Assessment
- Psycho-educational evaluation dated within three years of the referral for an Assistive Technology Assessment
- Any additional supporting information

Timeline for Assessment

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA will assign the assessment to an independent assessor who will coordinate the assessment through the contact person named on the referral form (D/M 127).

Timeline for Services

Upon completion of the assessment, a report will be sent to the Director of Special Education by either the agency that conducted the assessment or the Program Manager for Resolution Support Services at the SELPA with a request to schedule an IEP meeting.

The Director of Special Education will reconvene the IEP team to review the report findings and recommendations of the assessment and determine whether or not AT services are warranted.

If the IEP team agrees that services are not needed, it will be documented in the IEP notes.

How to request Low Incidence Funding for Assistive Technology Recommended by Assessment

(1) For students with a documented low incidence disability for whom assistive technology, equipment is recommended after an assessment, use the following procedure for equipment requests other than mobile devices/applications:

- IEP team must note the need for the low incidence equipment on the student's IEP, and link one or more of the student's annual goals to the use of that specialized equipment.
- Complete SELPA Low Incidence Pre-Approval/Reimbursement Request form (D/M 86A). [*NOTE: For Low Incidence Pre-Approval for Mobile Computing Device(s) and/or device applications, use form D/M 86B and follow instructions below.*] Director of Special Education must sign form D/M 86A before the packet is submitted to the SELPA.
- Submit the completed form D/M 86A signed by the Director of Special Education with a copy of the current IEP documenting the student's disability and goal for use of low incidence equipment to the Accounting Technician, SELPA Business Office.
- (2) For students with a documented low incidence disability for whom assistive technology equipment is recommended after an assessment, use the following procedure for requesting a mobile computing device and/or applications for the mobile computing device.

NOTE: Mobile computing device refers to an iPad, Chromebook, Samsung Galaxy Tab, or other computing tablet, with or without an attached/detachable keyboard, that operates with mobile applications and features that are linked to/purchased through an account to which the device is registered, and that are updated through the account (i.e. Apple Store, Google Play Store, Galaxy Store, etc.), rather than traditional hardware operating system built into a desktop or laptop computing system.

• Complete SELPA Low Incidence Pre-Approval Request for Mobile Computing Device (Form D/M 86B). Director of Special Education must sign form D/M 86B before the packet is submitted. The SELPA or the LEA will be responsible for purchasing the mobile computing device and educational device applications that meet criteria as educationally appropriate to the child's functional level. The SELPA will assign the low incidence equipment/ID number, download approved device applications, and coordinate delivery and release of the equipment to the LEA/Student. When the LEA purchases the equipment, this will be indicated on the LIE pre-approval referral form. *NOTE: Entertainment/game applications will not be permitted*.

For protective covers or screen protectors (i.e. Otter Box, Survivor Case, LifeProof, etc.), removable or wireless keyboards/mice, tablet stands, carry cases or other physical accessories for the Mobile Computing Device, use form D/M 86A and submit both forms together. The LEA will purchase and seek reimbursement for accessory items listed on the D/M 86A after approval by SELPA.

Assessment for Non-Low Incidence Equipment

Pre-Referral

Local Education Agency (LEA) Responsibility

1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for an Assistive Technology (AT) Assessment.

- 2. Complete the Assistive Technology Assessment Referral form (D/M 127) and obtain the signatures of the person making the referral and the director of special education.
- 3. Complete the Assessment Plan form (D/M 66) and obtain the parent/guardian signature.
- 4. The person making the referral should check the box that corresponds to the type of assessment(s) requested. Write Assistive Technology Assessment on the line for "other."
- 5. The parent/guardian should initial each applicable statement listed under the Parental Authorization section of form D/M 66.
- 6. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name, if known. If not, leave the field blank.

Referral Procedures

Forward the following completed documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- D/M 127 Assistive Technology Assessment Referral form
- D/M 66 Assessment Plan form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year of the referral for an Assistive Technology Assessment
- Psycho-educational evaluation dated within three years of the referral for an Assistive Technology Assessment
- Any additional supporting information

Timeline for Assessment

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA will determine whether to conduct the assessment using a multi-disciplinary team approach or assign the assessment to an independent assessor who will coordinate the assessment through the contact person named on the referral form (D/M 127). All assessments must be completed within 60) days.

Timeline for Services

Upon completion of the assessment, a report will be sent to the director of special education by either the consultant or agency that conducted the assessment or the Assistive Technology Program Specialist at the SELPA with a request to schedule an IEP meeting.

The director of special education will reconvene the IEP team to review the report findings and recommendations of the assessment and determine whether or not AT services or devices/equipment are warranted.

If the IEP team agrees that services are not needed, it will be documented in the IEP notes or under the IEP Consideration of Special Factors form (D/M 68E page 2) and/or in the Supplementary Aids and Supports form (D/M 68E page 1).

Section 3: Behavioral Health Counseling

SATS

School-Aged Treatment Services (Ages 7 – 21 or Grades 1-12)

The Desert/Mountain Children's Center (DMCC) provides individual, group, and family counseling services for children and youth ages seven to 22. The DMCC accepts Medi-Cal, IEHP, TriCare, Pacific Care, Molina, and cash on a sliding scale for services provided. The goal of the DMCC is to assist clients in developing skills to reach their full potential. Referrals may be made through the child's school, parents, physicians, and/or guardians. The DMCC provides School-Aged Treatment Services (SATS) medication support and management upon referral from the treating therapist to the DMCC medical doctor. SATS are primarily provided at each child's school, but are also offered in the home, clinic, and community as needed. The DMCC also provides Screening, Assessment, Referral, and Treatment (SART) for children birth to six years old as well as Therapeutic Behavioral Services (TBS), and/or Children's Intensive Services (CIS). For more information, please contact the DMCC.

Pre-Referral

Local Education Agency (LEA) Responsibility

Complete the Referral for Behavioral Health Services form (DMCC 100A) with as much detail as possible and obtain the signatures of the parent/guardian and the school administrator.

Referral Procedures

Forward the completed Referral for Behavioral Health Services form (DMCC 100A) to the attention of the Director of the DMCC.

Timeline for Assessment

Upon receipt of the completed Referral for Behavioral Health Services form (DMCC 100A), the DMCC will contact the parent/guardian by letter (up to three times) to schedule the assessment intake meeting. An intervention specialist or behavioral health counselor will be assigned to conduct the assessment. If no response from the parent/guardian is received by the third letter, the referral will be closed.

Timeline for Services

- > If services are not deemed appropriate, the referral will be closed.
- > If services are deemed appropriate, a clinician will be assigned and services will begin.

The DMCC provides a monthly report to the directors of special education. The report includes a list of students who are currently served by the DMCC as well as an update for each referral that is in process.

SART

Screening Assessment Referral and Treatment (Ages 0 - 6)

The Screening Assessment Referral and Treatment (SART) program utilizes a team of highly qualified professionals to screen, assess, refer, and treat a child. San Bernardino County has collaboratively developed a program designed for children birth to six years of age who may have been prenatally exposed to drugs, alcohol, and/or violence. The SART program also addresses concerns with children experiencing behavior problems and difficulties maintaining appropriate behaviors in pre-school settings and the child's home. The SART program offers a comprehensive screening process, assessment, and appropriate referrals to excellent treatment to improve overall functioning of the child. The Desert/Mountain Children's Center (DMCC) provides medication support and management upon referral from the treating therapist to the DMCC medical doctor.

Pre-Referral

Local Education Agency (LEA) Responsibility

Complete the SART Referral for Behavioral Health Services form (DMCC 100B) with as much information as possible and obtain the signatures of the parent/guardian and the school administrator.

Referral Procedures

Forward the completed SART Referral for Behavioral Health Services form (DMCC 100B) to the attention of the Director of the DMCC.

Timeline for Assessment

Upon receipt of the completed SART Referral for Behavioral Health Services form (DMCC 100B), the DMCC will contact the parent/guardian by letter and send the Ages and Stages Questionnaire: Social Emotional in order to gather more information regarding the parent/guardian's concerns. A DMCC Clinical Nurse will be assigned to contact the parent/guardian and provide case management throughout the assessment process.

Timeline for Services

- > If services are not deemed appropriate, the referral will be closed.
- > If services are deemed appropriate, a clinician will be assigned and services will begin.
- The DMCC provides a monthly report to the directors of special education. The report includes a list of students who are currently served by the DMCC as well as an update for each referral that is in process.

SAP

Student Assistance Program

The Desert/Mountain Children's Center (DMCC) Student Assistance Program (SAP) serves students, their families, and the school community. Students who are dealing with non-academic barriers to learning are the primary target for SAP services. Students are referred by staff, parents, or concerned others to the program. Students may also self-refer.

The purpose of SAP is to:

- > To reduce the risk factors, barriers, and stressors of kids, youth, and their families.
- To provide appropriate strategies, interventions, and activities to school staff and families that increase their knowledge of social, emotional, and behavioral issues.
- To increase student awareness of the issues they face daily, including the social emotional choices that impact their lives.
- > To build protective supports for students and their families that include significant connections to others, training, and education.

Pre-Referral

Local Education Agency (LEA) Responsibility

Complete the Referral for Behavioral Health Services form (DMCC 100A) with as much detail as possible and obtain the signatures of the parent/guardian and the school administrator.

Referral Procedures

Forward the completed Referral for Behavioral Health Services form (DMCC 100A) to the attention of the Director of the DMCC.

Timeline for Assessment

Upon receipt of the completed Referral for Behavioral Health Services form (DMCC 100A), the DMCC will contact the parent/guardian by letter (up to three times) to schedule the assessment intake meeting. An intervention specialist or behavioral health counselor will be assigned to conduct the assessment. If no response from the parent/guardian is received by the third letter, the referral will be closed.

Timeline for Services

- > If services are not deemed appropriate, the referral will be closed.
- > If services are deemed appropriate, a clinician will be assigned and services will begin.
- The DMCC provides a monthly report to the directors of special education. The report includes a list of students who are currently served by the DMCC as well as an update for each referral that is in process.

Section 4: Nonpublic Agency Behavioral Intervention

Behavioral Intervention Assessment Only

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for a behavioral intervention assessment.
- 2. Complete the Assessment Plan form (D/M 66) and mark the appropriate boxes that correspond to observations/interviews, review of any recent assessment and "other" indicating "Functional Behavioral Assessment."
- 3. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) upon receipt of the signed Assessment Plan form (D/M 66), and obtain the parent/guardian signature. Specify the agency's name, if known. If not, leave the field blank.
- 4. The parent/guardian should initial each applicable statement listed under the Parental Authorization section of form D/M 66.
- 5. It is important to remind the parent/guardian to return forms D/M 66 and D/M 63 to the LEA on the date that it is signed or as soon as possible thereafter.
- 6. When the signed Assessment Plan is received by the LEA, it should be date stamped or return date written at the bottom of form D/M 66.

7. The LEA identifies the Nonpublic Agency (NPA) assessor to complete the assessment within the 60-day timeline.

Referral Procedures

Forward the following completed and signed documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

Cover letter requesting a Functional Behavioral Assessment (FBA) (Note: the director and the NPA determine the maximum number of hours needed to conduct assessment). Please indicate which NPA the LEA is selecting to complete the FBA.

- D/M 66 Assessment Plan form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year referring the student for a behavioral intervention assessment
- Psycho-educational evaluation dated within three years of the referral for a behavioral intervention assessment
- Other assessments (private evaluations, Occupational Therapy (OT), Physical Therapy (PT), etc.)
- Behavior plans (original and revised versions)
- Incident reports
- Discipline reports/log

Timeline for Assessment

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA will develop an Individual Service Agreement (ISA) for the NPA to conduct the assessment. The ISA will be circulated for required signatures by the SELPA and the NPA provider.

Upon receipt of the signed ISA, the SELPA will forward the referral packet to the appropriate NPA to conduct the assessment. The assessment must occur within 60 calendar days from the date the Assessment Plan was received by the LEA.

Upon completion of the assessment, the NPA will send the written report to the director of special education for the LEA and the Program Manager for Resolution Support Services at the SELPA.

The director of special education will reconvene the IEP team to review the report findings and recommendations of the assessment and determine whether or not behavioral intervention supports/services are warranted. The IEP meeting will be scheduled within the 60-day timeline.

If the IEP team agrees that services are not needed, it will be documented in the IEP notes.

Timeline for Services

If the IEP team agrees that services are appropriate, the goals and services will be listed on an Addendum to the IEP including the service code number 535 for behavioral intervention services and/or supervision, the class number for each service, provider code for the NPA (400), projected start date, duration, and frequency. The Addendum should be forwarded to the Program Manager for Resolution Support Services at the SELPA.

Within five business days of receipt of the Addendum to the IEP, the Program Manager for Resolution Support Services at the SELPA will develop an ISA and forward it to the appropriate NPA for signature who will then initiate services.

Behavioral Intervention Supports Only

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for behavioral intervention supports.
- 2. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name, if known. If not, leave the field blank.

Referral Procedures

Forward the following completed documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- Cover letter requesting the addition of Nonpublic Agency (NPA) behavioral intervention supports and the name of the selected NPA
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year referring the student for behavioral intervention supports that includes the NPA on the service line with a start date
- Psycho-educational evaluation dated within three years of the referral for behavioral intervention supports
- Other assessments (private evaluations)
- Behavior plans (original and revised versions)
- Incident reports
- Discipline reports/log

Timeline for Assessment

An assessment is not required.

Timeline for Services

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA will develop an Individual Service Agreement (ISA) for the NPA to begin services. The ISA will be forwarded to the appropriate NPA for signature.

Upon receipt of the signed ISA, the SELPA will forward the referral packet to the appropriate NPA to initiate services. The NPA will not begin services until the agency has a signed ISA for the student.

Behavioral Intervention Assessment & Supports

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for a behavioral intervention assessment.
- 2. Complete the Assessment Plan form (D/M 66) and mark the appropriate boxes that correspond to observations/interviews, review of any recent assessment and "other" indicating "Functional Behavioral Assessment."
- 3. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) upon receipt of the signed Assessment Plan form (D/M 66), and obtain the parent/guardian signature. Specify the agency's name, if known. If not, leave the field blank.
- 4. The parent/guardian should initial each applicable statement listed under the Parental Authorization section of form D/M 63.
- 5. It is important to remind the parent/guardian to return forms D/M 66 and D/M 63 to the LEA on the date that it is signed or as soon as possible thereafter.
- 6. When the signed Assessment Plan is received by the LEA, it should be date stamped or return date written at the bottom of form D/M 66.
- 7. The LEA identifies the Nonpublic Agency (NPA) assessor to complete the assessment within the 60-day timeline.

Referral Procedures

Forward the following completed and signed documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- Cover letter requesting a Functional Behavioral Assessment (FBA) (Note: the director and the NPA determine the maximum number of hours needed to conduct assessment). Please indicate which NPA the LEA is selecting to complete the FBA.
- D/M 66 Assessment Plan form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year referring the student for a behavioral intervention assessment and behavioral intervention supports
- Psycho-educational evaluation dated within three years of the referral for a behavioral intervention assessment and behavioral intervention supports
- Other assessments (private evaluations, Occupational Therapy (OT), Physical Therapy (PT), etc.)
- Incident reports
- Discipline reports

Timeline for Assessment

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA will develop an Individual Service Agreement (ISA) for the NPA to conduct the assessment. The SELPA will forward the ISA to the appropriate NPA for signature.

Upon receipt of the signed ISA, the SELPA will forward the referral packet to the appropriate NPA to conduct the assessment. The assessment must occur within 60 calendar days from the date the Assessment Plan was received by the LEA.

Timeline for Services

Upon completion of the assessment, a report will be sent to the director of special education by either the NPA that conducted the assessment or the Program Manager for Resolution Support Services at the SELPA with a request to schedule an IEP meeting.

The director of special education will reconvene the IEP team to review the report findings and recommendations of the assessment and determine whether or not behavioral intervention supports services are warranted.

If the IEP team agrees that services are not needed, it will be documented in the IEP notes.

If the IEP team agrees that services are appropriate, the services should be listed on an Addendum to the IEP including the NPA, projected start date, duration, and frequency. The Addendum should be forwarded to the Program Manager for Resolution Support Services at the SELPA.

Within five business days of receipt of the Addendum to the IEP, the Program Manager for Resolution Support Services at the SELPA will develop an ISA and forward it to the appropriate NPA for signature who will then determine initiation of services.

Section 5: Nonpublic School

Initial Referral

Nonpublic schools (NPS) provide educational settings and services to students who meet the eligibility criteria for special education and are experiencing behavior difficulties that are too significant to be accommodated within a public-school environment.

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for a change of placement to an NPS setting.
- 2. Complete the Nonpublic School Placement Referral form (D/M 134) and obtain the signatures of the person making the referral and the director of special education. Specify the team's preference for a specific NPS, if applicable.

Referral Procedures

Forward the following completed documents to the attention of the Nonpublic School Coordinator at the SELPA.

- D/M 134 Nonpublic School Placement Referral form
- IEP or IEP Addendum dated within one year of the referral for NPS placement (Annual and Triennial IEP needs to be current)
- Psycho-educational evaluation dated within three years of the referral for NPS placement
- If the last triennial was completed with a Triennial Assessment Determination form (D/M 119), include the last full psycho-educational report
- Any additional information

Timeline for Services

Within ten (10) business days of receipt of the completed referral packet, the Nonpublic School Coordinator at the SELPA will review the packet for completion and forward it to the LEA's NPS of choice.

The NPS will contact the parent and placement will be made within 10 business days.

The NPS will work directly with the LEA to schedule an IEP within 30 days of the student's placement at the school. The placement should be listed on an IEP or IEP Addendum including the NPS, start date, duration, and frequency. The IEP or IEP Addendum should be forwarded to the Nonpublic School Coordinator at the SELPA.

Within five business days of receipt of the Addendum to the IEP, the Nonpublic School Coordinator at the SELPA will develop a Master Contract with the NPS if one does not currently exist and an Individual Service Agreement (ISA). The ISA will be forwarded to the appropriate NPS for signature. The SELPA will enter the NPS placement into the SELPA Management Information System (MIS) database.

Transfer Referral

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Complete the Transfer into LEA form (D/M 52) and obtain the parent/guardian signature.
- 2. Complete the Nonpublic School Placement Referral form (D/M 134) and obtain the signatures of the person making the referral and the director of special education. Specify the team's preference for a specific Nonpublic School (NPS), if applicable.
- 3. Juvenile Hall/Nonpublic School Students If the student's last placement was a local NPS prior to being moved to a juvenile detention center, only complete form D/M 134 upon the student's return to the LEA in lieu of preparing a new transfer packet.

Referral Procedures

Forward the following completed documents to the attention of the Nonpublic School Coordinator at the SELPA.

- D/M 52 Transfer into LEA form
- D/M 134 Nonpublic School Placement Referral form
- IEP or IEP Addendum dated within one year of the transfer referral for NPS placement that documents the previous NPS placement

- Psycho-educational evaluation dated within three years of the transfer referral for NPS placement
- If the last triennial was completed with a Triennial Assessment Determination form (D/M 119), include the last full psycho-educational report
- Any additional information

Timeline for Services

Within 10 business days of receipt of the completed referral packet, the Nonpublic School Coordinator at the SELPA will review the packet for completion and forward it to the LEA's NPS of choice. The NPS will contact the parent and placement will be made within 10 business days.

The NPS will work directly with the LEA to schedule an IEP within 30 days of the student's placement at the school. The placement should be listed on an IEP or IEP Addendum including the NPS, start date, duration, and frequency. The IEP or IEP Addendum should be forwarded to the Nonpublic School Coordinator at the SELPA.

Within five business days of receipt of the Addendum to the IEP, the Nonpublic School Coordinator at the SELPA will develop a Master Contract with the NPS if one does not currently exist and an Individual Service Agreement (ISA). The ISA will be forwarded to the appropriate NPS for signature. The SELPA will enter the NPS placement into the SELPA Management Information System (MIS) database.

Section 6: Occupational Therapy (OT)

Initial Referral

School-based occupational therapy (OT) supports the student's ability to gain access to and make progress in the school curriculum. OT supports a child's engagement and participation in daily occupations, which includes activities in daily living, education, prevocational work, work, play, rest, leisure, and social participation. OT works on mediation (improving sensory and motor foundations of learning and behavior) to help the child succeed in school.

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for an OT assessment.
- 2. Complete the Occupational Therapy Referral form (D/M 120) and obtain the signatures of the person making the referral and the director of special education.
- 3. Complete the Assessment Plan form (D/M 66) and obtain the parent/guardian signature.

- a. The person making the referral should check the box that corresponds to the type of assessment(s) requested.
- b. The parent/guardian should initial each applicable statement listed under the Parental Authorization section of form D/M 66.
- c. It is important that the parent/guardian return the form to the LEA on the date that it is signed or as soon as possible thereafter. When the signed Assessment Plan is received by the LEA, it should be date stamped.
- 4. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name if known. If not, leave the field blank.

Referral Procedures

Forward the following completed documents to the attention of the Program Manager, Due Process at the SELPA.

- D/M 120A Occupational Therapy Referral form
- D/M 66 Assessment Plan form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year of the referral for occupational therapy
- Psycho-educational evaluation dated within three years of the referral for occupational therapy
- Any additional supporting information

Timeline for Assessment

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA, will forward it to a SELPA occupational therapist.

The assessment must occur within 60 calendar days from the date the Assessment Plan was received by the LEA.

Timeline for Services

Upon completion of the OT assessment, a report will be sent to the Director of Special Education by either the occupational therapist that conducted the assessment or the Program Manager for Resolution Support Services at the SELPA with a request to schedule an IEP meeting.

The director of special education will reconvene the IEP team to determine whether or not services are warranted.

If the IEP team agrees that services are not needed, it will be documented in the IEP notes.

If the IEP team agrees that services are appropriate, the services should be listed on an Addendum to the IEP including the projected start date, duration, and frequency. The Addendum should be forwarded to the Program Manager for Resolution Support Services at the SELPA.

Within five business days of receipt of the Addendum to the IEP, the Program Manager for Resolution Support Services at the SELPA will develop an Individual Service Agreement (ISA) for signature and forward it to the occupational therapist or the appropriate Nonpublic Agency (NPA) for signature who will then assign a therapist and determine initiation of services. The SELPA will enter the OT services into the SELPA Management Information System (MIS) database.

Transfer Referral

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Complete the Transfer into LEA form (D/M 52) and obtain the parent/guardian signature.
- 2. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name if known. If not, leave the field blank.
- 3. Complete the Occupational Therapy Referral form (D/M 120A) and obtain the signatures of the person making the referral and the director of special education.

Referral Procedures

Forward the following completed documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- D/M 52 Transfer into LEA form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- D/M 120A Occupational Therapy Referral form
- Current occupational therapy report, if available, that specifies the occupational therapy services the student was receiving and the occupational therapy goals
- IEP or IEP Addendum dated within one year of the transfer referral for occupational therapy that lists occupational therapy services and goals
- Psycho-educational evaluation dated within three years of the transfer referral for occupational therapy

Timeline for Assessment

An assessment is not required for transfer referrals. Assessments are completed at three-year intervals (from the date that the services originally began) unless there are extenuating circumstances that dictate otherwise.

Timeline for Services

Within five business days of receipt of the transfer referral packet, the Program Manager for Resolution Support Services at the SELPA will develop an Individual Service Agreement (ISA) for signature and forward it to the occupational therapist or the appropriate Nonpublic Agency (NPA) for signature who will then assign a therapist and determine initiation of services. The SELPA will enter the OT services into the SELPA Management Information System (MIS) database.

Section 7: Physical Therapy (PT)

Initial Referral

School-based physical therapy (PT) supports the student's ability to gain access to and make progress in the school curriculum. It corrects, facilitates, or adapts to the student's functional performance in motor control and coordination, posture and balance, functional mobility, accessibility, and the use of assistive devices. PT works on compensation (i.e. modifying the environment, tools, or task) to help the child succeed in school.

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for a PT assessment.
- 2. Complete the Physical Therapy Referral form (D/M 120B) and obtain the signatures of the person making the referral and the Director of Special Education.
- 3. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency as the SELPA.
- 4. Complete the Assessment Plan form (D/M 66) and obtain the parent/guardian signature.
 - a. The person making the referral should check the box that corresponds to the type of assessment(s) requested.
 - b. The parent/guardian should initial each applicable statement listed under the Parental Authorization section form D/M 66.

c. It is important that the parent/guardian return the form to the LEA on the date that it is signed or as soon as possible thereafter. When the signed Assessment Plan is received by the LEA, it should be date stamped.

Referral Procedures

Forward the following documents to the attention of the Program Manager, Due Process at the SELPA.

- D/M 120B Physical Therapy Referral form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- D/M 66 Assessment Plan form
- IEP or IEP Addendum dated within one year of the referral for physical therapy
- Psycho-educational evaluation dated within three years of the referral for physical therapy

Timeline for Assessment

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA, will review the packet for completion and forward it to the appropriate physical therapist.

The assessment must occur within 60 calendar days from the date the Assessment Plan was received by the LEA.

Timeline for Services

Upon completion of the PT assessment, a report will be sent to the director of special education by the physical therapist or the Program Manager for Resolution Support Services at the SELPA with a request to schedule an IEP meeting.

The Director of Special education will reconvene the IEP team to determine whether or not PT services are warranted.

If the IEP team agrees that services are not needed, it will be documented in the IEP notes.

If the IEP team agrees that services are appropriate, the service should be listed on an Addendum to the IEP including the projected start date, duration, and frequency. The Addendum should be forwarded to the Program Manager for Resolution Support Services at the SELPA.

Within five (5) business days of receipt of the Addendum to the IEP, the Program Manager for Resolution Support Services at the SELPA will assign a physical therapist and determine initiation of services. The SELPA will enter the PT services into the SELPA Management Information System (MIS) database.

Transfer Referral

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Complete the Transfer into LEA form (D/M 52) and obtain the parent/guardian signature.
- 2. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency as the SELPA.
- 3. Complete the Physical Therapy Referral form (D/M 120B) and obtain the signatures of the person making the referral and the director of special education.

Referral Procedures

Forward the following documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- D/M 52 Transfer into LEA form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- D/M 120B Physical Therapy Referral form
- Current physical therapy report, if available, that specifies the physical therapy services the student was receiving and the physical therapy goals
- IEP or IEP Addendum dated within one year of the transfer referral for physical therapy that lists physical therapy services and goals
- Psycho-educational evaluation dated within three years of the transfer referral for physical therapy

Timeline for Assessment

An assessment is not required for transfer referrals. Assessments are completed at three-year intervals (from the date that the services originally began) unless there are extenuating circumstances that dictate otherwise.

Timeline for Services

PT services for the student will begin immediately upon receipt of the physical therapy transfer referral packet by the SELPA physical therapist. The SELPA will enter the PT services into the SELPA Management Information System (MIS) database.

Section 8: Residential Placement

Initial Referral

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Convene an Individualized Education Program (IEP) meeting to confirm the student is eligible for special education services and determine a need for a referral for mental health evaluation.
- 2. Refer the student to the Desert/Mountain Children's Center (DMCC) for a mental health evaluation to determine eligibility for residential placement. IEP attendees must include the SELPA Nonpublic School Coordinator and a DMCC representative.
- 3. If the student does not meet the baseline criteria for residential placement, the referral process ends.
- 4. If the IEP team determines that the referral is appropriate, the referral process continues.
- 5. Complete the Residential Placement Assessment Referral form (D/M 151).
- 6. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency as the Desert/Mountain Children's Center (DMCC).

Referral Procedures

Forward the following completed documents to the attention of the Nonpublic School Coordinator at the SELPA.

- D/M 63 Authorization for Use and/or Disclosure of Information form
- D/M 151 Residential Placement Assessment Referral form
- IEP or IEP Addendum dated within one year referring the student for an assessment for residential eligibility
- Most current complete annual or triennial IEP
- Psycho-educational evaluation dated within three years from the time the student was identified as eligible for special education and related services
- Any additional information in support of the referral

Timeline for Assessment

Upon receipt of the completed referral:

- The Nonpublic School Coordinator at the SELPA will forward the referral to the DMCC for processing.
- The DMCC will send out an Assessment Plan (D/M 66) to the parent/guardian for consent for assessment.
- Upon receipt of the signed Assessment Plan (D/M 66), the 60-day assessment timeline begins.
- The DMCC will conduct the assessment.
- The DMCC will contact the Nonpublic School Coordinator at the SELPA when the assessment is complete to schedule an IEP.

Timeline for Services

Upon completion of the residential assessment, the Nonpublic School Coordinator at the SELPA will coordinate an IEP team meeting to determine eligibility for residential placement services.

If the IEP team agrees that the student is eligible for and requires residential placement as the least restrictive environment, the DMCC will forward residential placement packets to potential residential treatment centers (RTCs). Upon receipt of responses from the residential facilities, the results will be shared with the student's parent/guardian and a facility will be selected. The student will be enrolled at the selected RTC as soon as possible. Transportation of the student to the RTC is based on the LEA of residence's reimbursement policy.

After the student is placed at the RTC, the LEA of residence will schedule a transfer IEP meeting within 30 days to document the new placement. The placement should be listed on an IEP document, including the NPS, residential placement, start date, duration, and frequency of each service to be provided.

Within five business days of receipt of the Addendum to the IEP, the Nonpublic School Coordinator at the SELPA will develop an Individual Service Agreement (ISA) with the NPS and RTC. If a Master Contract does not exist, one will be developed and an ISA. The SELPA will enter the NPS and RTC placement into the SELPA Management Information System (MIS) database.

Transfer Referral

The local education agency that placed the student at the beginning of the fiscal year is responsible for funding the residential placement for the remainder of the school year, including extended school year (ESY). *EC 56325(c)*

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Complete the Transfer into LEA form (D/M 52) and obtain the parent/guardian signature.
- 2. Confirm the student's current residential placement and educational services through a review of current Individualized Education Program (IEP).
- 3. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency as the Desert/Mountain Children's Center (DMCC).

Referral Procedures

Upon confirmation of prior placement, forward the following completed documents to the attention of the Nonpublic School Coordinator at the SELPA.

- D/M 52 Transfer into LEA form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year that documents the previous residential placement
- Psycho-educational evaluation dated within three years of the referral for residential placement
- Any additional information in support of the referral

Timeline for Services

The new LEA of residence will schedule an IEP team meeting within 30 days of the transfer to document the new placement. The placement should be listed on an IEP or IEP Addendum including the NPS, residential placement, start date, duration, and frequency. The IEP or IEP Addendum should be forwarded to the Nonpublic School Coordinator at the SELPA.

Section 9: Special Health Care Services

Initial Referral

Special health care services are available for students who have special health care needs.

Pre-Referral

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for special health care services.
- 2. Complete the Special Health Care Services Referral form (D/M 148) and obtain the signatures of the person making the referral and the director of special education.
- 3. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name, if known. If not, leave the field blank.

Forward the following documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- D/M 148 Special Health Care Services Referral form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year of the referral for special health care services
- Psycho-educational evaluation dated within three years of the referral for special health care services
- Current Summary of Treatment Plan
 - > Must be signed by physician and parent/guardian
 - Must include diagnosis
 - Must specify special health care need required
 - Must specify medication type and dosage
 - Must specify administration instructions

Any additional supporting information

Timeline for Services

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA will develop an Individual Service Agreement (ISA) and forward it to the appropriate Nonpublic Agency (NPA) for signature.

Upon receipt of the signed ISA, the SELPA will forward the referral packet to the appropriate NPA. The agency will contact the person who signed the referral to coordinate and begin services. The SELPA will enter the services into the SELPA Management Information System (MIS) database.

Transfer Referral

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Complete the Transfer into LEA form (D/M 52) and obtain the parent/guardian signature.
- 2. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name, if known. If not, leave the field blank.
- 3. Complete the Special Health Care Services Referral form (D/M 148) and obtain the signatures of the person making the referral and the director of special education.

Referral Procedures

Forward the following documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- D/M 52 Transfer into LEA form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- D/M 148 Special Health Care Services Referral form
- Current Summary of Treatment Plan if available, that specifies the special health care services the student was receiving
- IEP or IEP Addendum dated within one year of the referral for special health care services that lists the special health care services the student was receiving
- Psycho-educational evaluation dated within three years of the referral for special health care services

Timeline for Services

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA will develop an Individual Service Agreement (ISA) and forward it to the appropriate Nonpublic Agency (NPA) for signature.

Upon receipt of the signed ISA, the SELPA will forward the transfer referral packet to the appropriate NPA. The agency will contact the person who signed the referral to coordinate and begin services. The SELPA will enter the services into the SELPA Management Information System (MIS) database.

Terminology	Acronym
Assistive Technology	AT
Behavioral Health Counseling	BHC
Desert/Mountain Children's Center	DMCC
Individual Services Agreement	ISA
Local Education Agency	LEA
Low Incidence Equipment	LIE
Management Information System	MIS
Nonpublic Agency	NPA
Nonpublic School	NPS
Occupational Therapy	ОТ
Physical Therapy	PT
Residential Treatment Center	RTC
Student Assistance Program	SAP
School-Aged Treatment Services	SATS
Screening Assessment Referral and Treatment	SART
Special Education Local Plan Area	SELPA

Terms and acronyms used in this handbook:

SELPA forms referenced in this handbook:

Form Number	Form Name
D/M 52	Transfer into District
D/M 63	Authorization for Use and/or Disclosure of Information
D/M 66	Assessment Plan
D/M 68A-68P	IEP Forms
D/M 86A	Low Incidence Pre-Approval/Reimbursement
D/M 108	Initial Request for Audiological Evaluations/Services
D/M 108A	Annual Request for Audiological Evaluations/Services
D/M 119	Triennial Assessment Determination Form
D/M 120A	Occupational Therapy Referral
D/M 120B	Physical Therapy Referral
D/M 127	Assistive Technology Assessment Referral
D/M 134	Nonpublic School Placement Referral
D/M 148	Special Health Care Services Referral
D/M 151	Residential Placement Assessment Referral
DMCC 100A	Referral for Behavioral Health Services
DMCC 100B	SART Referral for Behavioral Health Services



SELPA Referral Procedures

This referral handbook was developed by the California Association of Health & Education Linked Professions (CAHELP), a Joint Powers Authority (JPA), to assist participating local education agencies (LEAs) in the Desert/Mountain Special Education Local Plan Area and the Desert/Mountain Charter Special Education Local Plan Area (hereinafter referred to as the SELPA) in the referral processes for special education and related services and behavioral health programs.

Note: <u>All services may not be available in all areas</u>. Please check with the Program Specialist assigned to your LEA with any questions regarding the referral process.

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Section 1: Audiological Assessment

Initial

The SELPA Audiological Program provides students with audiological assessment and services that will assist the student to participate and progress in the general education curriculum.

Pre-Referral

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for an Audiological Assessment.
- 2. Complete the Initial Request for Audiological Evaluations/Services form (D/M 108) and obtain the signatures of the person making the referral and the director of special education.
- 3. Complete the Assessment Plan form (D/M 66) and obtain the parent/guardian signature.
- 4. The person making the referral should check the box that corresponds to the type of assessment(s) requested.
- 5. The parent/guardian should initial each applicable statement listed under the Parental Authorization section of form D/M 66.

- 6. LEAs are encouraged to have assessment plans signed close to the date of their LEA audiology evaluation date and within the required 60-day assessment time frame.
- 7. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name as the SELPA/Pacific Hearing Services. The disclosing agency will vary depending on whether it is a physician, medical center, or audiologist.

Forward the following completed documents to the attention of the Area Director for Desert/Mountain Operations (DMOPS).

D/M 108 Initial Request for Audiological Evaluations/Services form

D/M 66 Assessment Plan form

D/M 63 Authorization for Use and/or Disclosure of Information form

IEP or IEP Addendum dated within one year of the referral for an audiological assessment

LEA's hearing screening form that documents a minimum of two repeated failures on threshold tests or previous audiological assessment reports and/or audiograms for students who have an identified hearing loss. (This does not apply to Desert/Mountain Operations)

Timeline for Assessment

The audiological assessment must occur within 60 calendar days from the date the Assessment Plan was received by the LEA. When the signed Assessment Plan is received by the LEA, it should be date stamped or the date entered in the field at the bottom of the Assessment Plan (D/M 66).

An Audiology Assessment Calendar is published on an annual basis at the beginning of each school year. The calendar lists the scheduled assessment dates and referral due dates for each LEA within the SELPA that participates in the SELPA Audiological Program. The calendar can be found on the SELPA website at <u>www.dmselpa.org</u>.

For students who require services outside of the regularly scheduled LEA visit, services may be coordinated between the SELPA and the LEA. Arrangements may be made for students to be served at the school site, at a nearby LEA, the Desert/Mountain Children's Center (DMCC), or at the service provider's office, whichever is available and appropriate. Please contact the CAHELP Chief Executive Officer at the SELPA for assistance.

Timeline for Services

Upon completion of the audiological assessment, a written report will be sent to the Area Director for Desert/Mountain Operations (DMOPS). DMOPS will electronically send a copy of the cover letter and the report to the LEA director of special education and a copy to the director's secretary and LEA Coordinator for Audiology Services. DMOPS will upload a copy of the cover letter to the student's electronic file. A monthly meeting coordinated with the DHH Itinerant teachers,

DMOPS, and the Audiologist will be held to review all the reports to assist LEAs in determining who may need further assessment and DHH services.

The LEA director of special education should reconvene the IEP team to review the findings and recommendations of the assessment, consider the educational impact, and determine whether audiological services are needed.

If ongoing audiological follow-up is recommended, code 720 should be listed under the Special Education and Related Services section of the IEP form.

If it is decided that classroom amplification equipment is needed, a request for a proposal of the specific equipment should be made to DMOPS or the LEA Coordinator for Audiology Services requests a quote from Pacific Hearing Services.

If a profound hearing loss has been found, the deaf disability code (020) should be listed under the Eligibility section of the IEP form.

If a mild to severe hearing loss has been found, the hard of hearing disability code (030) should be listed under the Eligibility section of the IEP form.

If the disability is due to a hearing loss, the Low Incidence Disability box on the IEP form should be checked.

If the hearing loss is not the primary disability, it may be listed as the secondary disability.

If recommended and agreed upon, classroom amplification equipment should also be noted under Assistive Technology on the IEP form (D/M 68E).

If the student is to receive amplification equipment for the first time, goals should be included for mastering equipment utilization, care, and operation.

Annual

Students who have previously been referred and evaluated for audiological services as part of the SELPA Audiological Program are eligible for annual audiological assessments.

Pre-Referral

Local Education Agency (LEA) Responsibility

LEAs participating in the SELPA Audiological Program may request an annual audiological assessment by following the procedure listed below. It is not necessary that the Individualized Education Program (IEP) team convene for this type of referral.

- 1. Complete the Annual Request for Audiological Evaluations/Services form (D/M 108A). Please DO NOT complete the Initial Request for Audiological Evaluation/Services form (D/M 108) for annual referrals.
 - A. Include information that is related to the school of attendance, program placement, and services the student is currently receiving.

- B. Include behavior and/or academic successes or challenges.
- C. Include information regarding the use and functioning of equipment such as hearing aids and/or FM systems.
- D. Include medical information related to the student's hearing.
- 2. Complete the Assessment Plan form (D/M 66) and obtain the parent/guardian signature.
 - A. The person making the referral should check the box that corresponds to the type of assessment(s) requested. Most often the "other" box is checked followed by the statement, "Audiological assessment to be completed by SELPA contracted audiologist."
 - B. The parent/guardian should initial each applicable statement listed under the Parental Authorization section of form D/M 66.
 - C. LEAs are encouraged to have the assessment plans signed close to the date of their LEA audiology evaluation date and within the required 60-day assessment time frame.
- 3. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name as the SELPA/DMOPS/Pacific Hearing Services. The disclosing agency will vary depending on whether it is a physician, medical center, or audiologist.

Forward the following completed documents to the attention of the Area Director for Desert/Mountain Operations (DMOPS).

D/M 108A Annual Request for Audiological Evaluations/Services form

D/M 66 Assessment Plan form

D/M 63 Authorization for Use and/or Disclosure of Information form (for the current school year)

Timeline for Assessment

The audiological assessment must occur within 60 calendar days from the date the Assessment Plan was received by the LEA. When the signed Assessment Plan is received by the LEA, it should be date stamped or the date entered in the field at the bottom of the Assessment Plan (D/M 66).

An Audiology Assessment Calendar is published on an annual basis at the beginning of each school year. The calendar lists the scheduled assessment dates and referral due dates for each LEA within the SELPA that participates in the Audiological Program. The calendar can be found on the SELPA website at <u>www.dmselpa.org</u>.

For students who require services outside of the regularly scheduled LEA visit, services may be coordinated between the SELPA and the LEA. Arrangements may be made for students to be served at the school site, at a nearby LEA, the Desert/Mountain Children's Center (DMCC) or at the service provider's office, whichever is available and appropriate. Please contact the CAHELP Chief Executive Officer at the SELPA for assistance.

Timeline for Services

Upon completion of the audiological assessment, a written report will be sent to the Area Director for Desert/Mountain Operations (DMOPS). DMOPS will electronically send a copy of the cover letter and the report to the LEA director of special education and a copy to the director's secretary and LEA Coordinator for Audiology Services. DMOPS will upload a copy of the cover letter to the student's electronic file. A monthly meeting coordinated with the DHH Itinerant teachers, DMOPS, and the Audiologist will be held to review all the reports to assist LEAs in determining who may need further assessment and DHH services.

The LEA director of special education should reconvene the IEP team to review the findings and recommendations of the assessment, consider the educational impact, and determine whether audiological services are needed.

- If ongoing audiological follow-up is recommended, code 720 should be listed under the Special Education and Related Services section of the IEP form.
- If it is decided that classroom amplification equipment is needed a request for a proposal of the specific equipment should be made to the SELPA Coordinator for Audiology Services who requests a quote from Pacific Hearing Services.
- If a profound hearing loss has been found, the deaf disability code (020) should be listed under the Eligibility section of the IEP form.
- If a mild to severe hearing loss has been found, the hard of hearing disability code (030) should be listed under the Eligibility section of the IEP form.
- If the disability is due to a hearing loss, the Low Incidence Disability box on the IEP form should be checked.
- If the hearing loss is not the primary disability, it may be listed as the secondary disability.
- If recommended and agreed upon, classroom amplification equipment should also be noted under Assistive Technology on the IEP form (D/M 68E).
- If the student is to receive amplification equipment for the first time, goals should be included for mastering equipment utilization, care, and operation.

Section 2: Assistive Technology/Low Incidence

Assessment for Low Incidence Equipment (LIE)

Assistive Technology refers to a device or service that can be used as a tool by students with disabilities to achieve or maintain function.

The IDEA and California law require that Individualized Education Program (IEP) teams consider whether students need assistive technology devices or services when developing IEPs. Assistive Technology (AT) relates to the tools required to maintain, improve, or increase functional capabilities to bridge the gap between student's performance and the demands of the curriculum. AT devices and services are defined in the IDEA as:

- Any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized that is used to increase, maintain, or improve functional capabilities of a child with a disability.
- Any service that directly assists a child with a disability in the selection, acquisition, or use of an AT device. This includes evaluation; providing for the acquisition of AT equipment; selecting, designing, interventions or services with AT devices; and training or technical assistance for the child, family, and other professionals who work with the child.

Low incidence disability is defined in **California Education Code § 56026.5** as a severe disabling condition with an expected incidence rate of less than one percent of the total statewide enrollment in kindergarten through grade 12. For purposes of this definition, severe disabling conditions are hearing impairments, vision impairments, and severe orthopedic impairments, or any combination thereof. For purposes of this definition, vision impairments do not include disabilities within the function of vision specified in Section 56338.

Pre-Referral

- A. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for an Assistive Technology (AT) Assessment.
- B. Complete the Assistive Technology Assessment Referral form (D/M 127) and obtain the signatures of the person making the referral and the director of special education.
- C. Complete the Assessment Plan form (D/M 66) and obtain the parent/guardian signature.
 - The person making the referral should check the box that corresponds to the type of assessment(s) requested.
 - The parent/guardian should initial each applicable statement listed under the Parental Authorization section of form D/M 66.

D. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name, if known. If not, leave the field blank.

Referral Procedures

Forward the following completed documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- D/M 127 Assistive Technology Assessment Referral form
- D/M 66 Assessment Plan form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year of the referral for an Assistive Technology Assessment
- Psycho-educational evaluation dated within three years of the referral for an Assistive Technology Assessment
- Any additional supporting information

Timeline for Assessment

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA will assign the assessment to an independent assessor who will coordinate the assessment through the contact person named on the referral form (D/M 127).

Timeline for Services

Upon completion of the assessment, a report will be sent to the Director of Special Education by either the agency that conducted the assessment or the Program Manager for Resolution Support Services at the SELPA with a request to schedule an IEP meeting.

The Director of Special Education will reconvene the IEP team to review the report findings and recommendations of the assessment and determine whether or not AT services are warranted.

If the IEP team agrees that services are not needed, it will be documented in the IEP notes.

How to request Low Incidence Funding for Assistive Technology Recommended by Assessment

(1) For students with a documented low incidence disability for whom assistive technology, equipment is recommended after an assessment, use the following procedure for equipment requests other than mobile devices/applications:

- IEP team must note the need for the low incidence equipment on the student's IEP, and link one or more of the student's annual goals to the use of that specialized equipment.
- Complete SELPA Low Incidence Pre-Approval/Reimbursement Request form (D/M 86A). [*NOTE: For Low Incidence Pre-Approval for Mobile Computing Device(s) and/or device applications, use form D/M 86B and follow instructions below.*] Director of Special Education must sign form D/M 86A before the packet is submitted to the SELPA.
- Submit the completed form D/M 86A signed by the Director of Special Education with a copy of the current IEP documenting the student's disability and goal for use of low incidence equipment to the Accounting Technician, SELPA Business Office.
- (2) For students with a documented low incidence disability for whom assistive technology equipment is recommended after an assessment, use the following procedure for requesting a mobile computing device and/or applications for the mobile computing device.

NOTE: Mobile computing device refers to an iPad, Chromebook, Samsung Galaxy Tab, or other computing tablet, with or without an attached/detachable keyboard, that operates with mobile applications and features that are linked to/purchased through an account to which the device is registered, and that are updated through the account (i.e. Apple Store, Google Play Store, Galaxy Store, etc.), rather than traditional hardware operating system built into a desktop or laptop computing system.

• Complete SELPA Low Incidence Pre-Approval Request for Mobile Computing Device (Form D/M 86B). Director of Special Education must sign form D/M 86B before the packet is submitted. The SELPA or the LEA will be responsible for purchasing the mobile computing device and educational device applications that meet criteria as educationally appropriate to the child's functional level., assigning The SELPA will assign the low incidence equipment/ID number, downloading approved device applications, and coordinate coordinating delivery and release of the equipment to the LEA/Student. When the LEA purchases the equipment, this will be indicated on the LIE pre-approval referral form. *NOTE: Entertainment/game applications will not be permitted*.

For protective covers or screen protectors (i.e. Otter Box, Survivor Case, LifeProof, etc.), removable or wireless keyboards/mice, tablet stands, carry cases or other physical accessories for the Mobile Computing Device, use form D/M 86A and submit both forms together. The LEA will purchase and seek reimbursement for accessory items listed on the D/M 86A after approval by SELPA.

Assessment for Non-Low Incidence Equipment

Pre-Referral

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for an Assistive Technology (AT) Assessment.
- 2. Complete the Assistive Technology Assessment Referral form (D/M 127) and obtain the signatures of the person making the referral and the director of special education.
- 3. Complete the Assessment Plan form (D/M 66) and obtain the parent/guardian signature.
- 4. The person making the referral should check the box that corresponds to the type of assessment(s) requested. Write Assistive Technology Assessment on the line for "other."
- 5. The parent/guardian should initial each applicable statement listed under the Parental Authorization section of form D/M 66.
- 6. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name, if known. If not, leave the field blank.

Forward the following completed documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- D/M 127 Assistive Technology Assessment Referral form
- D/M 66 Assessment Plan form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year of the referral for an Assistive Technology Assessment
- Psycho-educational evaluation dated within three years of the referral for an Assistive Technology Assessment
- Any additional supporting information

Timeline for Assessment

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA will determine whether to conduct the assessment using a multi-disciplinary team approach or assign the assessment to an independent assessor who will coordinate the assessment through the contact person named on the referral form (D/M 127). All assessments must be completed within 60) days.

Timeline for Services

Upon completion of the assessment, a report will be sent to the director of special education by either the consultant or agency that conducted the assessment or the Assistive Technology Program Specialist at the SELPA with a request to schedule an IEP meeting.

The director of special education will reconvene the IEP team to review the report findings and recommendations of the assessment and determine whether or not AT services or devices/equipment are warranted.

If the IEP team agrees that services are not needed, it will be documented in the IEP notes or under the IEP Consideration of Special Factors form (D/M 68E page 2) and/or in the Supplementary Aids and Supports form (D/M 68E page 1).

Section 3: Behavioral Health Counseling

SATS

School-Aged Treatment Services (Ages 7 – 21 or Grades 1-12)

The Desert/Mountain Children's Center (DMCC) provides individual, group, and family counseling services for children and youth ages seven to 22. The DMCC accepts Medi-Cal, IEHP, TriCare, Pacific Care, Molina, and cash on a sliding scale for services provided. The goal of the DMCC is to assist clients in developing skills to reach their full potential. Referrals may be made through the child's school, parents, physicians, and/or guardians. The DMCC provides School-Aged Treatment Services (SATS) medication support and management upon referral from the treating therapist to the DMCC medical doctor. SATS are primarily provided at each child's school, but are also offered in the home, clinic, and community as needed. The DMCC also provides Screening, Assessment, Referral, and Treatment (SART) for children birth to six years old as well as Therapeutic Behavioral Services (TBS), and/or Children's Intensive Services (CIS). For more information, please contact the DMCC.

Pre-Referral

Local Education Agency (LEA) Responsibility

Complete the Referral for Behavioral Health Services form (DMCC 100A) with as much detail as possible and obtain the signatures of the parent/guardian and the school administrator.

Referral Procedures

Forward the completed Referral for Behavioral Health Services form (DMCC 100A) to the attention of the Director of the DMCC.

Timeline for Assessment

Upon receipt of the completed Referral for Behavioral Health Services form (DMCC 100A), the DMCC will contact the parent/guardian by letter (up to three times) to schedule the assessment intake meeting. An intervention specialist or behavioral health counselor will be assigned to conduct the assessment. If no response from the parent/guardian is received by the third letter, the referral will be closed.

Timeline for Services

- > If services are not deemed appropriate, the referral will be closed.
- > If services are deemed appropriate, a clinician will be assigned and services will begin.

The DMCC provides a monthly report to the directors of special education. The report includes a list of students who are currently served by the DMCC as well as an update for each referral that is in process.

SART

Screening Assessment Referral and Treatment (Ages 0 - 6)

The Screening Assessment Referral and Treatment (SART) program utilizes a team of highly qualified professionals to screen, assess, refer, and treat a child. San Bernardino County has collaboratively developed a program designed for children birth to six years of age who may have been prenatally exposed to drugs, alcohol, and/or violence. The SART program also addresses concerns with children experiencing behavior problems and difficulties maintaining appropriate behaviors in pre-school settings and the child's home. The SART program offers a comprehensive screening process, assessment, and appropriate referrals to excellent treatment to improve overall functioning of the child. The Desert/Mountain Children's Center (DMCC) provides medication support and management upon referral from the treating therapist to the DMCC medical doctor.

Pre-Referral

Local Education Agency (LEA) Responsibility

Complete the SART Referral for Behavioral Health Services form (DMCC 100B) with as much information as possible and obtain the signatures of the parent/guardian and the school administrator.

Referral Procedures

Forward the completed SART Referral for Behavioral Health Services form (DMCC 100B) to the attention of the Director of the DMCC.

Timeline for Assessment

Upon receipt of the completed SART Referral for Behavioral Health Services form (DMCC 100B), the DMCC will contact the parent/guardian by letter and send the Ages and Stages Questionnaire: Social Emotional in order to gather more information regarding the parent/guardian's concerns. A DMCC Clinical Nurse will be assigned to contact the parent/guardian and provide case management throughout the assessment process.

Timeline for Services

- > If services are not deemed appropriate, the referral will be closed.
- > If services are deemed appropriate, a clinician will be assigned and services will begin.
- The DMCC provides a monthly report to the directors of special education. The report includes a list of students who are currently served by the DMCC as well as an update for each referral that is in process.

SAP

Student Assistance Program

The Desert/Mountain Children's Center (DMCC) Student Assistance Program (SAP) serves students, their families, and the school community. Students who are dealing with non-academic barriers to learning are the primary target for SAP services. Students are referred by staff, parents, or concerned others to the program. Students may also self-refer.

The purpose of SAP is to:

- > To reduce the risk factors, barriers, and stressors of kids, youth, and their families.
- To provide appropriate strategies, interventions, and activities to school staff and families that increase their knowledge of social, emotional, and behavioral issues.
- To increase student awareness of the issues they face daily, including the social emotional choices that impact their lives.
- > To build protective supports for students and their families that include significant connections to others, training, and education.

Pre-Referral

Local Education Agency (LEA) Responsibility

Complete the Referral for Behavioral Health Services form (DMCC 100A) with as much detail as possible and obtain the signatures of the parent/guardian and the school administrator.

Forward the completed Referral for Behavioral Health Services form (DMCC 100A) to the attention of the Director of the DMCC.

Timeline for Assessment

Upon receipt of the completed Referral for Behavioral Health Services form (DMCC 100A), the DMCC will contact the parent/guardian by letter (up to three times) to schedule the assessment intake meeting. An intervention specialist or behavioral health counselor will be assigned to conduct the assessment. If no response from the parent/guardian is received by the third letter, the referral will be closed.

Timeline for Services

- > If services are not deemed appropriate, the referral will be closed.
- > If services are deemed appropriate, a clinician will be assigned and services will begin.
- The DMCC provides a monthly report to the directors of special education. The report includes a list of students who are currently served by the DMCC as well as an update for each referral that is in process.

Section 4: Nonpublic Agency Behavioral Intervention

Behavioral Intervention Assessment Only

Pre-Referral

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for a behavioral intervention assessment.
- 2. Complete the Assessment Plan form (D/M 66) and mark the appropriate boxes that correspond to observations/interviews, review of any recent assessment and "other" indicating "Functional Behavioral Assessment."
- 3. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) upon receipt of the signed Assessment Plan form (D/M 66), and obtain the parent/guardian signature. Specify the agency's name, if known. If not, leave the field blank.
- 4. The parent/guardian should initial each applicable statement listed under the Parental Authorization section of form D/M 66.

- 5. It is important to remind the parent/guardian to return forms D/M 66 and D/M 63 to the LEA on the date that it is signed or as soon as possible thereafter.
- 6. When the signed Assessment Plan is received by the LEA, it should be date stamped or return date written at the bottom of form D/M 66.
- 7. The LEA identifies the Nonpublic Agency (NPA) assessor to complete the assessment within the 60-day timeline.

Forward the following completed and signed documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

Cover letter requesting a Functional Behavioral Assessment (FBA) (Note: the director and the NPA determine the maximum number of hours needed to conduct assessment). Please indicate which NPA the LEA is selecting to complete the FBA.

- D/M 66 Assessment Plan form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year referring the student for a behavioral intervention assessment
- Psycho-educational evaluation dated within three years of the referral for a behavioral intervention assessment
- Other assessments (private evaluations, Occupational Therapy (OT), Physical Therapy (PT), etc.)
- Behavior plans (original and revised versions)
- Incident reports
- Discipline reports/log

Timeline for Assessment

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA will develop an Individual Service Agreement (ISA) for the NPA to conduct the assessment. The ISA will be circulated for required signatures by the SELPA and the NPA provider.

Upon receipt of the signed ISA, the SELPA will forward the referral packet to the appropriate NPA to conduct the assessment. The assessment must occur within 60 calendar days from the date the Assessment Plan was received by the LEA.

Upon completion of the assessment, the NPA will send the written report to the director of special education for the LEA and the Program Manager for Resolution Support Services at the SELPA.

The director of special education will reconvene the IEP team to review the report findings and recommendations of the assessment and determine whether or not behavioral intervention supports/services are warranted. The IEP meeting will be scheduled within the 60-day timeline.

If the IEP team agrees that services are not needed, it will be documented in the IEP notes.

Timeline for Services

If the IEP team agrees that services are appropriate, the goals and services will be listed on an Addendum to the IEP including the service code number 535 for behavioral intervention services and/or supervision, the class number for each service, provider code for the NPA (400), projected start date, duration, and frequency. The Addendum should be forwarded to the Program Manager for Resolution Support Services at the SELPA.

Within five business days of receipt of the Addendum to the IEP, the Program Manager for Resolution Support Services at the SELPA will develop an ISA and forward it to the appropriate NPA for signature who will then initiate services.

Behavioral Intervention Supports Only

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for behavioral intervention supports.
- 2. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name, if known. If not, leave the field blank.

Referral Procedures

Forward the following completed documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- Cover letter requesting the addition of Nonpublic Agency (NPA) behavioral intervention supports and the name of the selected NPA
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year referring the student for behavioral intervention supports that includes the NPA on the service line with a start date
- Psycho-educational evaluation dated within three years of the referral for behavioral intervention supports
- Other assessments (private evaluations)

- Behavior plans (original and revised versions)
- Incident reports
- Discipline reports/log

Timeline for Assessment

An assessment is not required.

Timeline for Services

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA will develop an Individual Service Agreement (ISA) for the NPA to begin services. The ISA will be forwarded to the appropriate NPA for signature.

Upon receipt of the signed ISA, the SELPA will forward the referral packet to the appropriate NPA to initiate services. The NPA will not begin services until the agency has a signed ISA for the student.

Behavioral Intervention Assessment & Supports

<u> Pre-Referral</u>

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for a behavioral intervention assessment.
- 2. Complete the Assessment Plan form (D/M 66) and mark the appropriate boxes that correspond to observations/interviews, review of any recent assessment and "other" indicating "Functional Behavioral Assessment."
- 3. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) upon receipt of the signed Assessment Plan form (D/M 66), and obtain the parent/guardian signature. Specify the agency's name, if known. If not, leave the field blank.
- 4. The parent/guardian should initial each applicable statement listed under the Parental Authorization section of form D/M 63.
- 5. It is important to remind the parent/guardian to return forms D/M 66 and D/M 63 to the LEA on the date that it is signed or as soon as possible thereafter.
- 6. When the signed Assessment Plan is received by the LEA, it should be date stamped or return date written at the bottom of form D/M 66.

7. The LEA identifies the Nonpublic Agency (NPA) assessor to complete the assessment within the 60-day timeline.

Referral Procedures

Forward the following completed and signed documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- Cover letter requesting a Functional Behavioral Assessment (FBA) (Note: the director and the NPA determine the maximum number of hours needed to conduct assessment). Please indicate which NPA the LEA is selecting to complete the FBA.
- D/M 66 Assessment Plan form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year referring the student for a behavioral intervention assessment and behavioral intervention supports
- Psycho-educational evaluation dated within three years of the referral for a behavioral intervention assessment and behavioral intervention supports
- Other assessments (private evaluations, Occupational Therapy (OT), Physical Therapy (PT), etc.)
- Incident reports
- Discipline reports

Timeline for Assessment

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA will develop an Individual Service Agreement (ISA) for the NPA to conduct the assessment. The SELPA will forward the ISA to the appropriate NPA for signature.

Upon receipt of the signed ISA, the SELPA will forward the referral packet to the appropriate NPA to conduct the assessment. The assessment must occur within 60 calendar days from the date the Assessment Plan was received by the LEA.

Timeline for Services

Upon completion of the assessment, a report will be sent to the director of special education by either the NPA that conducted the assessment or the Program Manager for Resolution Support Services at the SELPA with a request to schedule an IEP meeting.

The director of special education will reconvene the IEP team to review the report findings and recommendations of the assessment and determine whether or not behavioral intervention supports services are warranted.

If the IEP team agrees that services are not needed, it will be documented in the IEP notes.

If the IEP team agrees that services are appropriate, the services should be listed on an Addendum to the IEP including the NPA, projected start date, duration, and frequency. The Addendum should be forwarded to the Program Manager for Resolution Support Services at the SELPA.

Within five business days of receipt of the Addendum to the IEP, the Program Manager for Resolution Support Services at the SELPA will develop an ISA and forward it to the appropriate NPA for signature who will then determine initiation of services.

Section 5: Nonpublic School

Initial Referral

Nonpublic schools (NPS) provide educational settings and services to students who meet the eligibility criteria for special education and are experiencing behavior difficulties that are too significant to be accommodated within a public-school environment.

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for a change of placement to an NPS setting.
- 2. Complete the Nonpublic School Placement Referral form (D/M 134) and obtain the signatures of the person making the referral and the director of special education. Specify the team's preference for a specific NPS, if applicable.

Referral Procedures

Forward the following completed documents to the attention of the Nonpublic School Coordinator at the SELPA.

- D/M 134 Nonpublic School Placement Referral form
- IEP or IEP Addendum dated within one year of the referral for NPS placement (Annual and Triennial IEP needs to be current)
- Psycho-educational evaluation dated within three years of the referral for NPS placement
- If the last triennial was completed with a Triennial Assessment Determination form (D/M 119), include the last full psycho-educational report
- Any additional information

Timeline for Services

Within ten (10) business days of receipt of the completed referral packet, the Nonpublic School Coordinator at the SELPA will review the packet for completion and forward it to the LEA's NPS of choice.

The NPS will contact the parent and placement will be made within 10 business days.

The NPS will work directly with the LEA to schedule an IEP within 30 days of the student's placement at the school. The placement should be listed on an IEP or IEP Addendum including the NPS, start date, duration, and frequency. The IEP or IEP Addendum should be forwarded to the Nonpublic School Coordinator at the SELPA.

Within five business days of receipt of the Addendum to the IEP, the Nonpublic School Coordinator at the SELPA will develop a Master Contract with the NPS if one does not currently exist and an Individual Service Agreement (ISA). The ISA will be forwarded to the appropriate NPS for signature. The SELPA will enter the NPS placement into the SELPA Management Information System (MIS) database.

Transfer Referral

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Complete the Transfer into LEA form (D/M 52) and obtain the parent/guardian signature.
- 2. Complete the Nonpublic School Placement Referral form (D/M 134) and obtain the signatures of the person making the referral and the director of special education. Specify the team's preference for a specific Nonpublic School (NPS), if applicable.
- 3. Juvenile Hall/Nonpublic School Students If the student's last placement was a local NPS prior to being moved to a juvenile detention center, only complete form D/M 134 upon the student's return to the LEA in lieu of preparing a new transfer packet.

Referral Procedures

Forward the following completed documents to the attention of the Nonpublic School Coordinator at the SELPA.

- D/M 52 Transfer into LEA form
- D/M 134 Nonpublic School Placement Referral form
- IEP or IEP Addendum dated within one year of the transfer referral for NPS placement that documents the previous NPS placement

- Psycho-educational evaluation dated within three years of the transfer referral for NPS placement
- If the last triennial was completed with a Triennial Assessment Determination form (D/M 119), include the last full psycho-educational report
- Any additional information

Timeline for Services

Within 10 business days of receipt of the completed referral packet, the Nonpublic School Coordinator at the SELPA will review the packet for completion and forward it to the LEA's NPS of choice. The NPS will contact the parent and placement will be made within 10 business days.

The NPS will work directly with the LEA to schedule an IEP within 30 days of the student's placement at the school. The placement should be listed on an IEP or IEP Addendum including the NPS, start date, duration, and frequency. The IEP or IEP Addendum should be forwarded to the Nonpublic School Coordinator at the SELPA.

Within five business days of receipt of the Addendum to the IEP, the Nonpublic School Coordinator at the SELPA will develop a Master Contract with the NPS if one does not currently exist and an Individual Service Agreement (ISA). The ISA will be forwarded to the appropriate NPS for signature. The SELPA will enter the NPS placement into the SELPA Management Information System (MIS) database.

Section 6: Occupational Therapy (OT)

Initial Referral

School-based occupational therapy (OT) supports the student's ability to gain access to and make progress in the school curriculum. OT supports a child's engagement and participation in daily occupations, which includes activities in daily living, education, prevocational work, work, play, rest, leisure, and social participation. OT works on mediation (improving sensory and motor foundations of learning and behavior) to help the child succeed in school.

Pre-Referral

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for an OT assessment.
- 2. Complete the Occupational Therapy Referral form (D/M 120) and obtain the signatures of the person making the referral and the director of special education.
- 3. Complete the Assessment Plan form (D/M 66) and obtain the parent/guardian signature.

- a. The person making the referral should check the box that corresponds to the type of assessment(s) requested.
- b. The parent/guardian should initial each applicable statement listed under the Parental Authorization section of form D/M 66.
- c. It is important that the parent/guardian return the form to the LEA on the date that it is signed or as soon as possible thereafter. When the signed Assessment Plan is received by the LEA, it should be date stamped.
- 4. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name if known. If not, leave the field blank.

Forward the following completed documents to the attention of the Program Manager, Due Process at the SELPA.

- D/M 120A Occupational Therapy Referral form
- D/M 66 Assessment Plan form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year of the referral for occupational therapy
- Psycho-educational evaluation dated within three years of the referral for occupational therapy
- Any additional supporting information

Timeline for Assessment

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA, will forward it to a SELPA occupational therapist.

The assessment must occur within 60 calendar days from the date the Assessment Plan was received by the LEA.

Timeline for Services

Upon completion of the OT assessment, a report will be sent to the Director of Special Education by either the occupational therapist that conducted the assessment or the Program Manager for Resolution Support Services at the SELPA with a request to schedule an IEP meeting.

The director of special education will reconvene the IEP team to determine whether or not services are warranted.

If the IEP team agrees that services are not needed, it will be documented in the IEP notes.

If the IEP team agrees that services are appropriate, the services should be listed on an Addendum to the IEP including the projected start date, duration, and frequency. The Addendum should be forwarded to the Program Manager for Resolution Support Services at the SELPA.

Within five business days of receipt of the Addendum to the IEP, the Program Manager for Resolution Support Services at the SELPA will develop an Individual Service Agreement (ISA) for signature and forward it to the occupational therapist or the appropriate Nonpublic Agency (NPA) for signature who will then assign a therapist and determine initiation of services. The SELPA will enter the OT services into the SELPA Management Information System (MIS) database.

Transfer Referral

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Complete the Transfer into LEA form (D/M 52) and obtain the parent/guardian signature.
- 2. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name if known. If not, leave the field blank.
- 3. Complete the Occupational Therapy Referral form (D/M 120A) and obtain the signatures of the person making the referral and the director of special education.

Referral Procedures

Forward the following completed documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- D/M 52 Transfer into LEA form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- D/M 120A Occupational Therapy Referral form
- Current occupational therapy report, if available, that specifies the occupational therapy services the student was receiving and the occupational therapy goals
- IEP or IEP Addendum dated within one year of the transfer referral for occupational therapy that lists occupational therapy services and goals
- Psycho-educational evaluation dated within three years of the transfer referral for occupational therapy

Timeline for Assessment

An assessment is not required for transfer referrals. Assessments are completed at three-year intervals (from the date that the services originally began) unless there are extenuating circumstances that dictate otherwise.

Timeline for Services

Within five business days of receipt of the transfer referral packet, the Program Manager for Resolution Support Services at the SELPA will develop an Individual Service Agreement (ISA) for signature and forward it to the occupational therapist or the appropriate Nonpublic Agency (NPA) for signature who will then assign a therapist and determine initiation of services. The SELPA will enter the OT services into the SELPA Management Information System (MIS) database.

Section 7: Physical Therapy (PT)

Initial Referral

School-based physical therapy (PT) supports the student's ability to gain access to and make progress in the school curriculum. It corrects, facilitates, or adapts to the student's functional performance in motor control and coordination, posture and balance, functional mobility, accessibility, and the use of assistive devices. PT works on compensation (i.e. modifying the environment, tools, or task) to help the child succeed in school.

Pre-Referral

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for a PT assessment.
- 2. Complete the Physical Therapy Referral form (D/M 120B) and obtain the signatures of the person making the referral and the Director of Special Education.
- 3. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency as the SELPA.
- 4. Complete the Assessment Plan form (D/M 66) and obtain the parent/guardian signature.
 - a. The person making the referral should check the box that corresponds to the type of assessment(s) requested.
 - b. The parent/guardian should initial each applicable statement listed under the Parental Authorization section form D/M 66.

c. It is important that the parent/guardian return the form to the LEA on the date that it is signed or as soon as possible thereafter. When the signed Assessment Plan is received by the LEA, it should be date stamped.

Referral Procedures

Forward the following documents to the attention of the Program Manager, Due Process at the SELPA.

- D/M 120B Physical Therapy Referral form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- D/M 66 Assessment Plan form
- IEP or IEP Addendum dated within one year of the referral for physical therapy
- Psycho-educational evaluation dated within three years of the referral for physical therapy

Timeline for Assessment

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA, will review the packet for completion and forward it to the appropriate physical therapist.

The assessment must occur within 60 calendar days from the date the Assessment Plan was received by the LEA.

Timeline for Services

Upon completion of the PT assessment, a report will be sent to the director of special education by the physical therapist or the Program Manager for Resolution Support Services at the SELPA with a request to schedule an IEP meeting.

The Director of Special education will reconvene the IEP team to determine whether or not PT services are warranted.

If the IEP team agrees that services are not needed, it will be documented in the IEP notes.

If the IEP team agrees that services are appropriate, the service should be listed on an Addendum to the IEP including the projected start date, duration, and frequency. The Addendum should be forwarded to the Program Manager for Resolution Support Services at the SELPA.

Within five (5) business days of receipt of the Addendum to the IEP, the Program Manager for Resolution Support Services at the SELPA will assign a physical therapist and determine initiation of services. The SELPA will enter the PT services into the SELPA Management Information System (MIS) database.

Transfer Referral

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Complete the Transfer into LEA form (D/M 52) and obtain the parent/guardian signature.
- 2. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency as the SELPA.
- 3. Complete the Physical Therapy Referral form (D/M 120B) and obtain the signatures of the person making the referral and the director of special education.

Referral Procedures

Forward the following documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- D/M 52 Transfer into LEA form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- D/M 120B Physical Therapy Referral form
- Current physical therapy report, if available, that specifies the physical therapy services the student was receiving and the physical therapy goals
- IEP or IEP Addendum dated within one year of the transfer referral for physical therapy that lists physical therapy services and goals
- Psycho-educational evaluation dated within three years of the transfer referral for physical therapy

Timeline for Assessment

An assessment is not required for transfer referrals. Assessments are completed at three-year intervals (from the date that the services originally began) unless there are extenuating circumstances that dictate otherwise.

Timeline for Services

PT services for the student will begin immediately upon receipt of the physical therapy transfer referral packet by the SELPA physical therapist. The SELPA will enter the PT services into the SELPA Management Information System (MIS) database.

Section 8: Residential Placement

Initial Referral

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Convene an Individualized Education Program (IEP) meeting to confirm the student is eligible for special education services and determine a need for a referral for mental health evaluation.
- 2. Refer the student to the Desert/Mountain Children's Center (DMCC) for a mental health evaluation to determine eligibility for residential placement. IEP attendees must include the SELPA Nonpublic School Coordinator and a DMCC representative.
- 3. If the student does not meet the baseline criteria for residential placement, the referral process ends.
- 4. If the IEP team determines that the referral is appropriate, the referral process continues.
- 5. Complete the Residential Placement Assessment Referral form (D/M 151).
- 6. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency as the Desert/Mountain Children's Center (DMCC).

Referral Procedures

Forward the following completed documents to the attention of the Nonpublic School Coordinator at the SELPA.

- D/M 63 Authorization for Use and/or Disclosure of Information form
- D/M 151 Residential Placement Assessment Referral form
- IEP or IEP Addendum dated within one year referring the student for an assessment for residential eligibility
- Most current complete annual or triennial IEP
- Psycho-educational evaluation dated within three years from the time the student was identified as eligible for special education and related services
- Any additional information in support of the referral

Timeline for Assessment

Upon receipt of the completed referral:

- The Nonpublic School Coordinator at the SELPA will forward the referral to the DMCC for processing.
- The DMCC will send out an Assessment Plan (D/M 66) to the parent/guardian for consent for assessment.
- Upon receipt of the signed Assessment Plan (D/M 66), the 60-day assessment timeline begins.
- The DMCC will conduct the assessment.
- The DMCC will contact the Nonpublic School Coordinator at the SELPA when the assessment is complete to schedule an IEP.

Timeline for Services

Upon completion of the residential assessment, the Nonpublic School Coordinator at the SELPA will coordinate an IEP team meeting to determine eligibility for residential placement services.

If the IEP team agrees that the student is eligible for and requires residential placement as the least restrictive environment, the DMCC will forward residential placement packets to potential residential treatment centers (RTCs). Upon receipt of responses from the residential facilities, the results will be shared with the student's parent/guardian and a facility will be selected. The student will be enrolled at the selected RTC as soon as possible. Transportation of the student to the RTC is based on the LEA of residence's reimbursement policy.

After the student is placed at the RTC, the LEA of residence will schedule a transfer IEP meeting within 30 days to document the new placement. The placement should be listed on an IEP document, including the NPS, residential placement, start date, duration, and frequency of each service to be provided.

Within five business days of receipt of the Addendum to the IEP, the Nonpublic School Coordinator at the SELPA will develop an Individual Service Agreement (ISA) with the NPS and RTC. If a Master Contract does not exist, one will be developed and an ISA. The SELPA will enter the NPS and RTC placement into the SELPA Management Information System (MIS) database.

Transfer Referral

The local education agency that placed the student at the beginning of the fiscal year is responsible for funding the residential placement for the remainder of the school year, including extended school year (ESY). *EC 56325(c)*

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Complete the Transfer into LEA form (D/M 52) and obtain the parent/guardian signature.
- 2. Confirm the student's current residential placement and educational services through a review of current Individualized Education Program (IEP).
- 3. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency as the Desert/Mountain Children's Center (DMCC).

Referral Procedures

Upon confirmation of prior placement, forward the following completed documents to the attention of the Nonpublic School Coordinator at the SELPA.

- D/M 52 Transfer into LEA form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year that documents the previous residential placement
- Psycho-educational evaluation dated within three years of the referral for residential placement
- Any additional information in support of the referral

Timeline for Services

The new LEA of residence will schedule an IEP team meeting within 30 days of the transfer to document the new placement. The placement should be listed on an IEP or IEP Addendum including the NPS, residential placement, start date, duration, and frequency. The IEP or IEP Addendum should be forwarded to the Nonpublic School Coordinator at the SELPA.

Section 9: Special Health Care Services

Initial Referral

Special health care services are available for students who have special health care needs.

Pre-Referral

- 1. Convene an Individualized Education Program (IEP) meeting to document the team's decision to refer the student for special health care services.
- 2. Complete the Special Health Care Services Referral form (D/M 148) and obtain the signatures of the person making the referral and the director of special education.
- 3. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name, if known. If not, leave the field blank.

Forward the following documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- D/M 148 Special Health Care Services Referral form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- IEP or IEP Addendum dated within one year of the referral for special health care services
- Psycho-educational evaluation dated within three years of the referral for special health care services
- Current Summary of Treatment Plan
 - > Must be signed by physician and parent/guardian
 - Must include diagnosis
 - Must specify special health care need required
 - Must specify medication type and dosage
 - Must specify administration instructions

Any additional supporting information

Timeline for Services

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA will develop an Individual Service Agreement (ISA) and forward it to the appropriate Nonpublic Agency (NPA) for signature.

Upon receipt of the signed ISA, the SELPA will forward the referral packet to the appropriate NPA. The agency will contact the person who signed the referral to coordinate and begin services. The SELPA will enter the services into the SELPA Management Information System (MIS) database.

Transfer Referral

Pre-Referral

Local Education Agency (LEA) Responsibility

- 1. Complete the Transfer into LEA form (D/M 52) and obtain the parent/guardian signature.
- 2. Complete the Authorization for Use and/or Disclosure of Information form (D/M 63) and obtain the parent/guardian signature. Specify the receiving agency's name, if known. If not, leave the field blank.
- 3. Complete the Special Health Care Services Referral form (D/M 148) and obtain the signatures of the person making the referral and the director of special education.

Referral Procedures

Forward the following documents to the attention of the Program Manager for Resolution Support Services at the SELPA.

- D/M 52 Transfer into LEA form
- D/M 63 Authorization for Use and/or Disclosure of Information form
- D/M 148 Special Health Care Services Referral form
- Current Summary of Treatment Plan if available, that specifies the special health care services the student was receiving
- IEP or IEP Addendum dated within one year of the referral for special health care services that lists the special health care services the student was receiving
- Psycho-educational evaluation dated within three years of the referral for special health care services

Timeline for Services

Within five business days of receipt of the completed referral packet, the Program Manager for Resolution Support Services at the SELPA will develop an Individual Service Agreement (ISA) and forward it to the appropriate Nonpublic Agency (NPA) for signature.

Upon receipt of the signed ISA, the SELPA will forward the transfer referral packet to the appropriate NPA. The agency will contact the person who signed the referral to coordinate and begin services. The SELPA will enter the services into the SELPA Management Information System (MIS) database.

Terminology	Acronym
Assistive Technology	AT
Behavioral Health Counseling	BHC
Desert/Mountain Children's Center	DMCC
Individual Services Agreement	ISA
Local Education Agency	LEA
Low Incidence Equipment	LIE
Management Information System	MIS
Nonpublic Agency	NPA
Nonpublic School	NPS
Occupational Therapy	ОТ
Physical Therapy	PT
Residential Treatment Center	RTC
Student Assistance Program	SAP
School-Aged Treatment Services	SATS
Screening Assessment Referral and Treatment	SART
Special Education Local Plan Area	SELPA

Terms and acronyms used in this handbook:

SELPA forms referenced in this handbook:

Form Number	Form Name
D/M 52	Transfer into District
D/M 63	Authorization for Use and/or Disclosure of Information
D/M 66	Assessment Plan
D/M 68A-68P	IEP Forms
D/M 86A	Low Incidence Pre-Approval/Reimbursement
D/M 108	Initial Request for Audiological Evaluations/Services
D/M 108A	Annual Request for Audiological Evaluations/Services
D/M 119	Triennial Assessment Determination Form
D/M 120A	Occupational Therapy Referral
D/M 120B	Physical Therapy Referral
D/M 127	Assistive Technology Assessment Referral
D/M 134	Nonpublic School Placement Referral
D/M 148	Special Health Care Services Referral
D/M 151	Residential Placement Assessment Referral
DMCC 100A	Referral for Behavioral Health Services
DMCC 100B	SART Referral for Behavioral Health Services

6.4 Desert Mountain Operations Update Verbal report, no materials



Desert / Mountain Children's Center 17800 Highway 18 Apple Valley, CA 92307-1219 P 760-552-6700

F 760-946-0819

W www.dmchildrenscenter.org

MEMORANDUM

DATE: January 13, 2021

TO: Special Education Directors

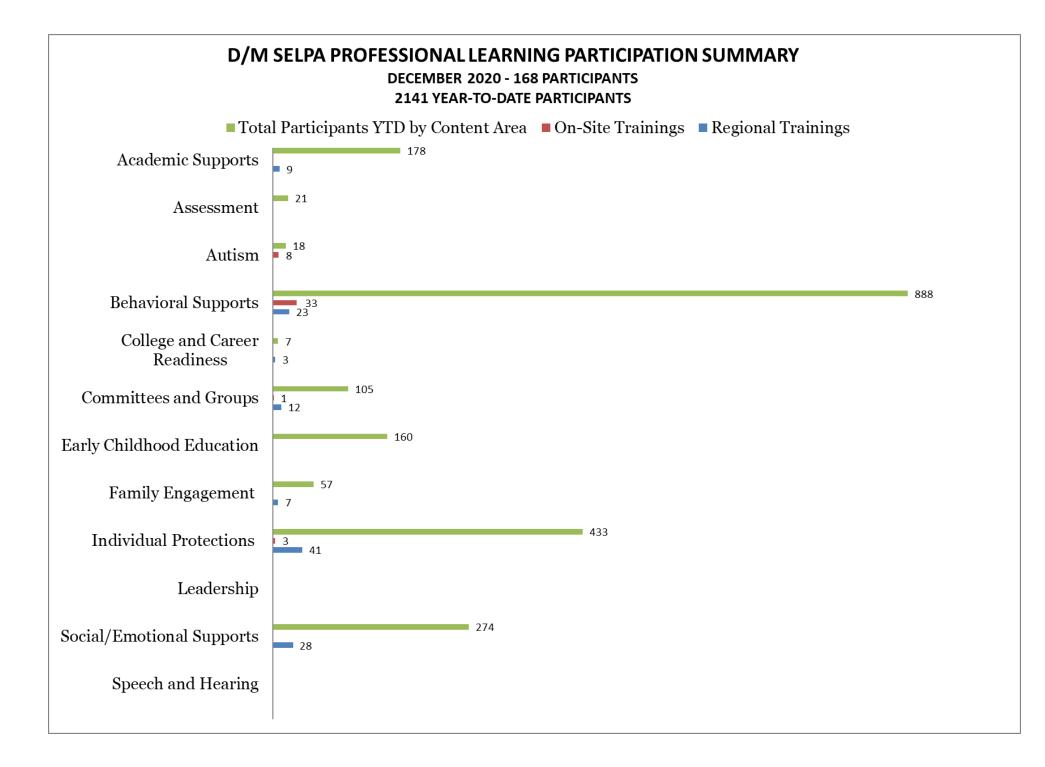
FROM: Linda Llamas, Director

SUBJECT: Desert/Mountain Children's Center Client Reports

Attached are the opened and closed cases for the following services:

- Screening, Assessment, Referral and Treatment (SART)
- Early Identification Intervention Services (EIIS)
- School-Age Treatment Services (SATS)
- Student Assistance Program (SAP)
- Speech and occupational therapy

If you should have any questions, please contact me at (760) 955-3606 or by email at <u>linda.llamas@cahelp.org</u>





Crisis Prevention Institute (CPI) Flex-Blended Learning

Presented By CPI Team Members

Date

Part 1: Complete the on-line CPI module prior to the January 20, 2021 Q & A virtual session from 2:30 to 4:00 p.m.

Part 2: In Person Training-To be determined

Cost \$40 Per Attendee

Registration https://sbcss.k12oms.org/52-195699



CAHELP 17800 Highway 18 Apple Valley, CA 92307

Description

The Non-Violent Crisis Prevention Institute (CPI) course focusing on two-part crisis is а prevention and intervention. With a core philosophy of care, welfare, safety, and security and aligned with positive behavioral supports principles, it gives educators the safely skills and effectively prevent, to disengage, and physically withhold (as a last resort) dangerous situations.

Part 1: The self-paced on-line modules will take 2 - 4 hours, once completed the participants

must print their certificate and bring it to the in-person training.

Part 2: The in-person training, participants should dress safely and must attend the entire course. Upon successfully demonstrating competency of disengagement skills, physical interventions, and passing of a written exam, they will receive CPI certification. The date for this training will be determined based on state and county guidelines.

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Jennifer Holbrook jennifer.holbrook@cahelp.org 760.955.3559

Audience

Special education teachers, general education teachers, paraprofessionals, school psychologists, and administrators.

Special Accommodation

Please submit any special accommodation requests at least fifteen working days prior to the training by notating your request when registering.

This training may be recorded.



www.cahelp.org/ https://sbcss.k12oms.org

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- Hola Language Services Interpreting IEP Meetings Virtually & In Person (ENG/SPA)

Presented By

Leslie Padilla-Williams, Executive Director

Date

February 18 & 19, 2021

Time

Both days will be from 9:00 a.m. - 3:00 p.m.

Audience

(Eng/Spa) General and special education teachers, special education directors, psychologists, and any educational professional participating in IEP meetings.

Description

Hola Language Services will provide a two-day (10 hour) Interpreting IEP Meetings Virtually & In Person (Eng/Spa) workshop that includes the following topics:

- Getting it right: translation vs interpreting.
- Rights to translation and interpretation of NEN or LEP speaking parents in special education settings.
- Preparing to interpret an IEP meeting (Initial, Annual, Triennial).
- Interpreting the first part of the IEP.
- Professional conduct of IEP interpreters.
- Sight-Translation: What is it? How to do it well!
- Online resources and mock IEP practice.



registering.

Location

registering.

Registration

Please register online at:

Virtual training, a link will

be sent to participants after

This training may be recorded.

https://sbcss.k12oms.org/52-197348

Special Accommodations

Please submit any special accommodation

requests at least fifteen working days prior to the training by notating your request when

> CAHELP 17800 Highway 18 Apple Valley, CA 92307



Judith Loera judith.loera@cahelp.org 760.955.3573

Cost:

\$100 per attendee



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DISTRICT													CASE A	ACTIVITY	FOR CUR	RENT YE	AR
	10/11	11/12	12/13	13/14	14/15	15/16	16/17	17/18	18/19	19/20	20/21	Total	D/W	Resolution	Mediation	Settled	Hearing
Adelanto SD	2	0	3	6	5.5	2.5	5	3	3.5	3	1.5	35	0	0	0	1.5	0
Apple Valley USD	1.33	0	0	2	1	1.5	1.5	0	3.5	10	4	24.83	1	1	1	1	0
Baker USD	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Barstow USD	1	0	0	0	0	1	3.5	0	2	0	1	8.5	0	1	0	0	0
Bear Valley USD	0	1	0	0	0	0	1	2	0	0	1	5	0	0	0	1	0
Helendale SD	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0
Hesperia USD	1	5.5	4	3	5	7.5	7	6	7	17.5	5	68.5	0	0	1	4	0
Lucerne Valley USD	4	0	1	2	1	1	2	0	1.5	0	0	12.5	0	0	0	0	0
Needles USD	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Oro Grande SD	0	0	0	0	0	0	0	0	0	2	0	2	0	0	0	0	0
Silver Valley USD	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
Snowline USD	0	2	1	1	5	4.5	6.5	2	8.5	7	1	38.5	0	0	0	1	0
Trona USD	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Victor Elementary SD	1	1	1	4.33	3.33	1.83	2.5	6.5	0	7	1	22.5	0	0	0	1	0
Victor Valley Union High SD	0	2	4	3.33	4.3	7.83	4	4	8.5	6.5	4.5	49	0	1	1	2.5	0
Academy for Academic Excellence	1.33	0	0	4	2	0	1	2	1	1	1	13.33	0	0	0	1	0
CA Charter Academy	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Desert/Mountain OPS	0.34	0.5	1	1.33	0.83	4.33	3	1.5	3	2	0	17.83	0	0	0	0	0
Excelsior Education Center	0	0	0	0	0	0	0	0	0.5	2	0	2.5	0	0	0	0	0
Health Sciences HS & MS	0	0	0	0	0	0	0	0	1	1		2	0	0	0	0	0
													-				
SELPA-WIDE TOTALS	12	13	15	33	27.96	33	37	28	40	*59	20	304	1	3	3	13	0
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Districts all services a series of 50			<u> </u>														

Districts showing a value of .50 above indicates that the district is a co-respondent with another district.

*Number accounts for High Tech High but has exited from CAHELP. Actual count for 2019-20 is 67.

LEA Case Number	Issue(s)	Date Filed	Resolution Scheduled	Mediation Scheduled	Pre-Hearing Conference	Due Process Hearing	Status
1. Apple Valley Case No. 2020070137	 Appropriate services, goals, placement, accommodations Failure to implement IEP as written Denial of Home instruction Failure to timely assess and review evaluations Failure to provide accommodations for cheer tryouts 	0703/20	07/13/20 07/16/20 08/14/20	08/27/20	08/17/2020 09/21/20	08/25 8/27/2020 09/29- 10/01/20	Resolution unsuccessful. Parent demands placement of daughter on cheer team, reimbursement for private/city cheer team participation, compensatory ed, Spanish class letter grade change. Parent agreed to mediation then withdrew. Preparing for hearing. 8/26/20 parent withdrew from mediation. Prepare for hearing. 9/26/20 case dismissed by parent. CLOSED
2. Hesperia USD Case No. 2020070579	 Appropriate placement and program Statutorily appropriate LAS assessment 	07/17/20	7/31/20 08/17/20	09/08/20	10/26/20	11/03- 11/15/20	08/26/20 settlement agreement for DMCC ERMHS, IEE-speech; service increases to speech and occupational therapy. Comp. education: speech, counseling, tutoring. CLOSED
3. VVUHSD Case No. 2020070920	 Appropriate placement and program Failure to make progress Failure to provide ABA aide at parent request Minimal services during COVID 19 	07/29/20	08/11/20		09/11/20	09/22- 09/24/20	08/28/20 settlement agreement for comp. education: tutoring, speech language, occupational therapy. CLOSED
4. Hesperia Case No. 2020070962	 Appropriate program in LAS, Fine Motor, Behavior Statutorial appropriate LAS assessment and psycho ed assessment 	07/30/20	08/07/2020 08/18/20	09/17/20	09/11/20	09/22- 09/24/20 10/20- 10/22/20	08/27/20 settlement agreement for IEEs: speech language, FBA, Psycho-Ed. IEP additions: increase in speech language, occupational therapy. Comp. education: tutoring, speech. CLOSED

LEA Case Number	Issue(s)	Date Filed	Resolution Scheduled	Mediation Scheduled	Pre-Hearing Conference	Due Process Hearing	Status
5. VVUHSD 2020080045	Child Find 1.Severe depression 2. Hospitalized 4x 3. Failing classes	08/05/20	8/18/20		09/14/20	09/22- 09/24/20	Seeking identification as SPED in order to cover residential placement. Student in medical RTC in Whittier. Upon release, VVUHSD to commence assessment. Settlement 08/27/20 - CLOSED
6. Victor Elem SD 2020080331	Child Find 1.Failure to assess	08/12/20	09/02/20		09/28/20	10/06- 10/08/20	Student had 504 in Victor Elem SD; VVUHSD found eligible for special education. Seeking comp. education. Settlement 9/24/20 - CLOSED
7. Adelanto SD & VVUHSD 2020080427	Denial of FAPE 1. Health plan 2. Academic 3. Complete assessment	08/13/20	08/25/20		09/25/20	10/06- 10/08/20	09/28/20 settlement agreement; fund IEE – Psycho ed; IEP to modify goals, health plan, and implementation with parent; comp. education; CLOSED
8. Hesperia USD 2020090471	Denial of FAPE 1. Failure to assess in all areas 2. Failure to offer SLP, ERMHS 3. Failure to provide appropriate SAI 4. Lack of appropriate goals 5. Failure to implement IEP	09/16/20	09/23/20 10/05/20	11/17/20	11/02/20 12/21/20	11/10 12/2020 01/05- 01/07/21	Mediation goal: comp. ed. differences, teacher placement. Settlement agreement 11/18/20: IEP program enrollment, reassigned class to avoid teacher; CLOSED
9. Adelanto 2020090691	Denial of FAPE 1. Inappropriate program & placement 2. Inaccurate MD 3. Failure to provide FBA 4. No services Feb 2020-May 2020	09/22/20	09/29/20 expedited	10/07/20 Expedited 11/19/20 regular		10/20- 10/22/20 Expedited 11/17- 11/19/20 Regular 01/12- 01/14/21	LEA retracting MD; requesting to dismiss expedited status; gathering DLP data for expedited mediation or regular resolution; expedited status dismissed. Proceeding with regular mediation. 11/23/20 settlement agreement: FBA assessment, IEE for ERMHS, 1:1 behavior aide in home, DMCC and VCC intensive; CLOSED

LEA Case Number	Issue(s)	Date Filed	Resolution Scheduled	Mediation Scheduled	Pre-Hearing Conference	Due Process Hearing	Status
10. VVUHSD 2020100043	Denial of FAPE 1. Failed to hold an IEP in February 2019 2. Failed to hold an IEP in February 2020 3. Failed to conduct triennial assessment October 2019	09/22/20	10/14/20 10/15/20 11/04/20	12/03/20	11/13/20 01/22/21	11/24- 11/25/20 02/02-04/21	Child has not been in school since before 2019. Parent refusing placement. Wants full-day SDC class with no class changes. District holds not FAPE.
11. Apple Valley USD 2020100583	Denial of FAPE 1. Substantive concerns for IEPs dated: 10/2018, 10/2019, 03/2020, and 07/2020 2. Home instruction failed to provide FAPE 3. Fall 2019 Triennial timeline 4. Failure to provide parent a copy of IEP 5. Failure to provide accommodations to cheer tryouts 6. Failure to implement IEP during COVID-19	10/16/20	10/28/20	12/17/20	11/30/20 02/08/21	12/08 12/10/20 02/17-18/21	No settlement at resolution. Parent remains angry; filing staff complaints. LEA offering compromises and not accepted. Mediation scheduled.
12. VVUHSD 2020100503	Child Find	10/16/20	10/30/20 11/17/20		11/30/20	12/08- 12/10/20	12/03/20 student awaiting release of psychiatric hold for RTC; placement tolling agreement
13. Hesperia USD 2020110001	Denial of FAPE 1. Failure to conduct triennial assessment Sept 2020 2. Lack of educational benefit a. reading goal b. writing goal c. math goal	10/30/20	11/10/20 11/09/20		12/14/20	12/22- 12/24-20	11/30/20 settlement agreement - Comp. ed; CLOSED

LEA Case Number	Issue(s)	Date Filed	Resolution Scheduled	Mediation Scheduled	Pre-Hearing Conference	Due Process Hearing	Status
14. Academy for Academic Excellence 2020110282	Denial of FAPE 1. Failure to assess comprehensively 2. Failure to provide dyslexia program	11/09/20	11/20/20		12/28/20	01/05-07/21	Preliminary agreement; 12/18/20 settlement agreement – academic ERHMS comp. ed., IEE – dyslexia assessment; CLOSED
15. Snowline JUSD 2020110297	Denial of FAPE 1. Failure to make specific offer of FAPE Denial of parent participation 1. Failure to provide timely records 2. Failure to ensure team members participation	11/09/20	11/16/20		12/28/20	01/05-07/21	Parent seeking reimbursement for tuition at NPS, for summer tutoring expenses, for summer NPS placement, transportation reimbursement for private services; settled 12/01/20; CLOSED
16. Apple Valley USD 2020110631	Denial of FAPE failure to provide: 1. FBA 2. Behavior Plan 3. Appropriate services 4. Ambitious goals 5. Distance learning FAPE Failure to assess: 1. SLP 2. OT 3. ATC 4. PT 5. Psycho-ed triennial	11/19/20	12/04/20	01/13/21	01/04/21	01/12-14/21 03/2-4/21	Settlement demand viewed as excessive. Opposing counsel seeking to amend complaint after IEP of 12/09/20. AVUSD to cross-file.

LEA Case Number	Issue(s)	Date Filed	Resolution Scheduled	Mediation Scheduled	Pre-Hearing Conference	Due Process Hearing	Status
17. Hesperia USD 2020120175	Denial of FAPE 1. Failure to assess in all areas 2. Failure offer meaningful goals 3. Failure to offer appropriate goals 4. Failure to find Autism 5. No FBA 6. Learning loss as a result of COVID-19	12/03/20	12/14/20	01/19/21	01/18/21 03/08/21	01/26-28/21 03/16-18/21	12/04/20 resolution cancelled by mutual agreement.
18. Bear Valley USD 2020120196	Denial of FAPE 1. Child Find 2. Prior knowledge of TBI	12/04/20	12/10/20 Expedited	12/18/20 Expedited	01/11/21 Expedited 01/11/21 Regular	01/20-21/21 Expedited 01/26-28/21 Regular	Parent seeking to overturn expulsion. Settled all claims at mediation - full assessment by LEA, IEE for CAPD, removal of expulsion. CLOSED
19. Barstow USD 2020120631	Denial of FAPE 1. Failure to assess for ERHMS and FBA 2. Goals not reasonably calculated a. math b. reading c. writing 3. Lack of service during COVID-19	12/22/20	01/15/21 Expedited		02/01/21	02/09-11/21	
20. Apple Valley USD 2020120771	Denial of FAPE 1. Goals not reasonably calculated a. reading b. writing c. math 2. Lack of comprehensive assessment 3. Inadequate SAI	12/22/20 Received 01/04/21	01/11/21		02/01/21	02/09-11/21	

Desert /Mountain SELPA Legal Expense Summary As of January 15, 2021

2000-2001	\$39,301.51
2001-2002	\$97,094.90
2002-2003	\$37,695.13
2003-2004	\$100,013.02
2004-2005	\$136,514.09
2005-2006	\$191,605.08
2006-2007	\$140,793.00
2007-2008	\$171,614.04
2008-2009	\$263,390.71
2009-2010	\$114,076.96
2010-2011	\$293,578.50
2011-2012	\$567,958.10
2012-2013	\$321,646.04
2013-2014	\$250,372.65
2014-2015	\$297,277.76
2015-2016	\$204,756.26
2016-2017	\$233,130.03
2017-2018	\$247,459.52
2018-2019	\$314,479.71
2019-2020	\$475,930.79
2020-2021	\$120,111.00
	-

6.8 Office of Administrative Hearings Decisions Verbal report, no materials 6.9 Prevention and Intervention Updates Verbal report, no materials 6.10 Postsecondary Transition Services Manual Verbal report, no materials 6.11 Compliance Update Verbal report, no materials 6.12 Nonpublic School/Nonpublic Agency Update Verbal report, no materials 7.1 Governor's January Budget Verbal report, no materials



Ted Alejandre County Superintendent

MEMORANDUM

Date:January 4, 2021To:Directors of Special EducationFrom:Richard Frederick, Area DirectorSubject:Audiological Service Reports

Attached are the Audiological Service Reports for the month of September 2020 by district.

If you have any questions concerning these reports, please contact Dale Folkens, Ed. D. Principal at (760) 244-6131 ext 247 or via email at <u>dale.folkens@sbcss.net</u>.



Desert/Mountain Special Education Local Plan Area 17800 Highway 18 Apple Valley, CA 92307-1219 P 760-552-6700

- F 760-242-5363
- W www.dmselpa.org

MEMORANDUM

Date January 15, 2021

To: Directors of Special Education

From: Peggy Dunn, Program Manager

Subject: Occupational and Physical Therapy Reports

Attached are the occupational and physical therapy Referral Status, and Current Students Direct Services reports by district.

If you have any questions concerning either report, please contact me at (760) 955-3568 at peggy.dunn@cahelp.org

Desert Mountain SELPA 2020-2021 Non-Public School Placement Report

		J	uly			Aug	ust		S	epte	emb	er		Oct	obe	r	1	Nov	emt	ber	[Dece	emb	er
	District Placed	Residential Placed	LCI/Foster Placed	TOTAL	District Placed	Residential Placed	LCI/Foster Placed	TOTAL	District Placed	Residential Placed	LCI/Foster Placed	TOTAL	District Placed	Residential Placed	LCI/Foster Placed	TOTAL	District Placed	Residential Placed	LCI/Foster Placed	TOTAL	District Placed	Residential Placed	LCI/Foster Placed	TOTAL
Adelanto	6		1	7	5			5	4		1	5	5			5	5			5	5			5
Apple Valley	16	2	11	29	13	2	11	26	18	2	9	29	15	2	13	30	15	2	13	30	15	2	13	30
Baker																								
Barstow	3			3	3			3	4			4	5			5	5			5	5			5
Bear Valley																								
Helendale																								
Hesperia	11	2		13	9	2		11	16	1	1	18	15	1	1	17	15	1	1	17	16	1	1	18
High Tech High																								
Lucerne Valley	1	1		2	1	1		2	1			1	1			1								
Needles																								
Oro Grande																								
Silver Valley																								
Snowline	11		1	12	9		1	10	10		2	12	9		2	11	10		1	11	11		1	12
Trona																								
Victor Elem	16		1	17	11		1	12	8		3	11	10			10	9			9	9			9
VVUHSD	14		4		18				20				20		2		21		2		22	 ! !	2	
TOTALS				100			15		81			103				102				101				104
2019-20 Totals				110				101		8			74			101	75		19					102
2018-19 Totals				84		15			_	15		94				103		12	_				17	111
2017-18 Totals	_		5		30		5				6	55			5	51		17	6		23	-	5	45
2016-17 Totals			15				13	112	_		14			17	14	118	90	19	14				14	125

Upcoming Trainings

Date/Time	Event	Location
1/19/2021 9:00 AM - 10:30 A	WEBIEP AM QUESTION AND ANSWER SESSION	VIRTUAL
1/19/2021 2:00 PM - 3:30 PM	WEBIEP PM QUESTION AND ANSWER SESSION	VIRTUAL
1/20/2021 1:00 PM - 2:30 PM	PHYSICAL THERAPY/OCCUPATIONAL THERAPY/ADAPTED PHYSICAL EDUCATION/ORTHOPEDIC IMPAIRMENT COLLABORATIVE CONFERENCE	WEBINAR
1/21/2021 2:00 PM - 3:30 PM	THE WHAT, WHY, AND HOW OF IEP MEETING NOTES	VIRTUAL
1/23/2021 11:00 A - 12:00 PM	EARLY CHILDHOOD DIRECTORS COLLABORATION	VIRTUAL
1/23/2021 11:00 A - 12:00 PM	EARLY CHILDHOOD DIRECTORS COLLABORATION	VIRTUAL
1/27/2021 8:30 AM - 3:30 PM	CHECK-IN CHECK-OUT INTERVENTION	DMESC
1/28/2021 8:30 AM - 2:30 PM	CREATING A RESPONSIVE CLASSROOM	DMESC
1/28/2021 2:00 PM - 3:30 PM	UNDERSTANDING READING DIFFICULTIES AND DYSLEXIA	VIRTUAL
2/2/2021 1:00 PM - 4:00 PM	ADMINISTERING AN ALTERNATE ENGLISH LANGUAGE PROFICIENCY TEST TO STUDENTS WITH MODERATE TO SEVERE DISABILITIES	VIRTUAL

Upcoming Trainings

Date/Time	Event	Location
2/3/2021 1:00 PM - 3:00 PM	HAPPY TEACHER REVOLUTION	VIRTUAL
2/3/2021 9:00 AM - 10:30 A	WEBIEP AM QUESTION AND ANSWER SESSION	VIRTUAL
2/3/2021 2:00 PM - 3:30 PM	WEBIEP PM QUESTION AND ANSWER SESSION	VIRTUAL
2/4/2021 2:00 PM - 3:30 PM	MEANINGFUL PARENT PARTICIPATION	VIRTUAL
2/4/2021 9:00 AM - 12:00 PM	TRANSITION PLANNING FOR ALL STUDENTS	VIRTUAL
2/10/2021 8:30 AM - 3:30 PM	ARTS INTEGRATION: LEVERAGING THE ART OF LEARNING	DMSELPA
2/11/2021 2:00 PM - 3:30 PM	STRUTURED LITERACY WITH ORTON-GILLINGHAM: FOUNDATIONAL	VIRTUAL
2/12/2021 8:30 AM - 12:30 PM	BULLYING PREVENTION AND INTERVENTION: USING EXPECT RESPECT CURRICULUM	VIRTUAL



Orton-Gillingham Approach

This training prepares a teacher for implementing the Orton-Gillingham Approach in a classroom, small group, or 1:1 setting within a school.

See topics covered below:

- Dyslexia and reading disorders
- The rationale for structured literacy, in particular the OG Approach
- Phonology & phonological awareness •
- The motor component, orthography of English, and the writing process
- Basic phonics for reading and spelling •
- Intermediate phonics for reading and spelling
- The lesson plan and teaching materials •
- General history of the English language and beginning morphology
- Informal assessment and diagnostic-prescriptive teaching
- Accuracy, automaticity, and fluency

Course Requirements:

This class is a mixture of live Zoom sessions and prerecorded webinars. Live sessions will take place daily from 12:00 - 3:30 p.m. Pre-recorded webinars, which you will receive a week before class, will take approximately 20 hours to complete.

Please note you will need a Gmail account to access the course.

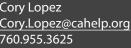
Dates and Times

February 22 & 23, 2021 12:00 - 3:30 p.m. March 1, 2, 8, and 9, 2021 12:00 - 3:30 p.m.



CAHELP 17800 Highway 18 Apple Valley, CA 92307







www.cahelp.org https://sbcss.k12oms.org

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Presented By Nancy Redding, M. Ed., Fellow/AOGPE, Consultant

Location

Online - This training may be recorded.

Audience

K-12 general education teachers and K-12 special education teachers.

Cost

\$300.00 Per Attendee

Registration

Please register online at: https://sbcss.k12oms.org/52-197006

Special Accommodations

Please submit any special accommodation requests at least fifteen working days prior to the training by notating your request when registering.

Structured Literacy What, Why, Who and How?

Presented By

Bonnie Garcia, Program Specialist

Date April 2, 2021

Time 2:00 - 4:00 p.m.

Cost Free to attend

Do your students struggle with literacy?

Do you have struggling readers in your class?

In this course, participants will first be provided with a brief overview related to the reading brain and dyslexia. Then, participants will take a deep dive into structured literacy, an instructional approach used to explicitly, systematically, cumulatively, and diagnostically teach reading.

The term was coined by the International Dyslexia Association to encompass evidence-based approaches (e.g., Orton Gillingham) and programs that are aligned to the Knowledge and Practice Standards for Teachers of Reading. Participants will walk away with an understanding of structured literacy and how to apply it through explicit, multisensory, structured, sequential, comprehensive, and cumulative instruction.



Location

Online/Zoom, a link will be sent to each participant after registering.

Professional Learning Opportunity

This training may be recorded.

Registration

Please register online at: https://sbcss.k12oms.org/52-197418

Audience

General education teachers, special education teachers, speech-language pathologists, and administrators.

Special Accommodations

Please submit any special accommodation requests at least fifteen working days prior to the training by notating your request when registering.



CAHELP 17800 Highway 18 Apple Valley, CA 92307



Cory Lopez Cory.Lopez@cahelp.org 760.955.3625



www.cahelp.org https://sbcss.k12oms.org

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