

Special Circumstance Instructional Assistance (SCIA) Assessment Resource Guide (last edited on 8/24/2018)

This resource provides information on how to systematically conduct a Special Circumstance Instructional Assistance (SCIA) assessment for a student with a disability. A recommendation for a SCIA is a significant programmatic decision and one that should only be made after a comprehensive discussion of other options considered and clear documentation of as to why those options are not appropriate. An emphasis is placed on school team collaboration and the use of data collection, checklist, and forms to determine appropriateness for a SCIA.

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Rationale

Special Circumstance Instructional Assistance (SCIA) is provided for students with disabilities when additional support is necessary for the student to meet his or her goals and objectives. Whenever necessary, additional assistance may be assigned to a school environment or class. Occasionally, a student may require individual support for a designated period of time to address a unique need. By law, services to students with special needs must be delivered in “the least restrictive environment.” When the IEP team is considering SCIA, all aspects of the student’s program must be considered. A SCIA request is made only after other documented site interventions and pre-referral activities, accommodations, and modifications have proven unsuccessful. A student’s educational program must be carefully evaluated to determine when and where the additional support is required. Natural supports and existing staff should be used whenever possible to promote educational benefit in the least restrictive environment. A primary goal for all students with special needs is to encourage, support, and maximize independence. A SCIA request should always be considered a time-limited recommendation that must be periodically reviewed, and specific conditions/goals must be established to fade the use of a SCIA.

Considerations for Special Circumstance

The general areas to be considered for SCIA are:

1. Health/Personal Care Issues
2. Behavior Support
3. Instruction
4. Least Restrictive Environment

IEP teams should identify the need for related services based on appropriate documentation and assessment. The SCIA should be carefully monitored and revisited frequently and reflected in the student’s IEP.

The following statements should be considered for inclusion in the IEP:

- a) The related service is necessary for the student to benefit from his/her special education program;
- b) The program modifications or supports for school personnel are necessary to assist the student; and
- c) The related service will assist the student to:
 - Advance appropriately toward the annual goals;
 - Be involved in and progress in the general curriculum;
 - Participate in extracurricular and other nonacademic activities; and
 - Be educated and participate with other disabled and non-disabled students.

The IEP team must also address the following components as part of the IEP process:

- 1) Establish protocol for reviewing and evaluating the necessity of continuing SCIA.
- 2) Include a statement of the anticipated frequency and duration for the services or modifications.
- 3) If it is determined that additional personnel support is required, the IEP team should periodically review the effectiveness of this additional support. A systematic, written

- plan needs to address how additional personnel support will be monitored.
- 4) For services requiring additional personnel support because of a student's behavioral difficulties, the student's IEP needs to include appropriate goals. In addition, a Behavior Intervention Plan (BIP) should be developed in accordance with Sections 3001 and 3052 in the Title 5 of the California Code of Regulations (CCR). The BIP needs to include a provision describing how and when support, including personnel, will be utilized to implement the plan, and when the plan will be reviewed and modified.
 - 5) When determining the need for additional personnel support due to an instructional need, the IEP team must utilize appropriate assessment information to support this recommendation. The written plan must be developed by a general and/or special education teacher specifying how the additional personnel will be utilized to support the teacher in implementing the student's goals and objectives and what attempts will be made to transition other available classroom resources and supports.
 - 6) When additional support necessary due to a medical need, a specialized health care plan will need to be developed.
 - 7) When SCIA is considered for a specific student, a LEA representative shall be required to participate in the decision-making process of the IEP meeting.

Procedures

Prior to a SCIA assessment, the IEP team should determine if all available natural supports, accommodations, and modifications have been in place with fidelity. A request should only be made after other site interventions have proven to be ineffective. Whenever possible, additional assistance is assigned to a school environment, class, or case manager. Occasionally, a student may require individual support for a designated period of time to address a unique need. Below are nine steps to completing the SCIA assessment process.

Step 1: Pre-referral Activities

Use the SCIA rubric and SCIA Independence Continuum to determine if student is at an independence level 1 or 2. Refer to the pre-referral activities checklist to determine if current activities, accommodations, and modifications related to Least Restrictive Environment, Health, Instruction, and Behavior have been implemented with fidelity and without success as indicated by data.

Step 2: Referral for SCIA

If the pre-referral activities have been implemented and deemed unsuccessful based on data, and students receive a SCIA rubric and SCIA Independence Continuum score of 3 or 4, submit the SCIA request cover page along with the SCIA referral form with supporting documentation. The district will decide to proceed with assessment or provide alternatives.

Step 3: Assessment Plan

If the district moves forward with a SCIA assessment, parent permission must be obtained in writing within 15 days.

Step 4: Parent/Teacher/Student Interview

Interview parents and teachers to identify specific areas of concern. Interview the student as appropriate based on age and level of self-awareness.

Step 5: Environmental Observation/Student Observation

SCIA assessor will observe the natural environment to collect data by examining strategies, materials, modifications, and/or accommodations currently in place to assist the student toward achieving goals and objectives. SCIA assessor will observe the student’s level of response to the current existing supports.

Step 6: SCIA Rubric

Analyze data collected and determine student’s level of independence in the appropriate areas, factoring in time of day, number or prompts needed, and the amount of adult support needed to complete demands when compared to other students in the setting.

Step 7: Develop SCIA Evaluation Report

Organize and summarize assessment findings in a written report. The report should include reason for referral, interview information, observation data, and recommendations based on all the relevant information obtained.

Step 8: Convene IEP Meeting to Discuss Evaluation Results

Within 60 days following the receipt of parent consent to evaluate for SCIA, an IEP meeting shall be convened to review the results of the evaluation and recommendations.

Step 9: SCIA Independence/Fade Plan

If the IEP team determines a need for SCIA, it is written on the IEP with specific goals, monitoring strategies, fading strategies, and review dates. Regardless of the circumstance that may indicate the need for support, it is imperative for every IEP to address the skills that will be taught for SCIA to be faded. The level of support required for the student to advance appropriately toward annual goals need to be defined, including criteria and possible timeline for phasing out SCIA support. If a Behavior Intervention Plan is part of the recommendation, the IEP team must also complete an Independence/Fade Plan in conjunction with the SCIA Independence/Fade Plan and Behavior Intervention Plan Checklist. IEP teams need to also complete the Review of Independence/Fade Plan to determine continued need for SCIA by scheduling future meetings.

South East SELPA SCIA Forms

Form 1: Pre-Referral Flow Chart (p. 7)

This flow chart assists with determining if there is a need to complete the SCIA process, or if other interventions need to be considered for implementation (e.g., Pre-referral activities/accommodations/modifications, Behavior Intervention Plan, etc.).

Form 2: Pre-Referral Rubric (p. 8)

Use this form to determine the student’s current level of need.

Form 3: Special Circumstance Instructional Assistance Independence Continuum (p. 9)

Use this form in conjunction with the pre-referral rubric to determine student’s current level of independence.

Form 4: Pre-Referral Activities/Modifications/Accommodations Checklist (p. 10)
Use this form to determine if activities, modifications, and accommodations have been consistently implemented or if there are any missing supports related to Least Restrictive Environment, Health, Instruction, and Behavior.

Form 5: Special Circumstance Instructional Assistance Request Cover Page
(p. 11-12)

This form serves as a planning guide for the entire SCIA process and must be completed by the IEP Case Manager/Psychologist and updated frequently.

Form 6: Special Circumstance Instructional Assistance Referral (p. 13)

This form is completed by the evaluation team/referring staff. Required documentation of previous and current interventions, as well as the purpose/need for the SCIA must be clearly noted with data demonstrating need.

Form 7: Classroom Adaptations and Modifications Checklist (p. 14)

This form identifies the various adaptations and modifications that are currently being implemented in the classroom. This can be completed by the classroom teacher or a member of the evaluation team and submitted with the Special Circumstance Instructional Assistance Referral packet.

Form 8: Parent Interview (p. 15)

This form is used by the assessor to incorporate parent input and obtain information regarding the student's level of independence and potential need for support in specific areas.

Form 9: Teacher Interview (p. 16)

This form is used by the assessor to incorporate teacher input and obtain information regarding the student's level of independence and potential need for support in specific areas.

Form 10: Student Interview (p. 17)

This form is used by the assessor to incorporate student input and obtain information (as appropriate) regarding the student's level of independence and potential need for support in specific areas.

Form 11: Special Circumstance Instructional Assistance Environmental Observation Evaluation (p. 18-20)

This form assists with identifying needs relating to classroom structure, curriculum, classroom environment and classroom team planning and preparation.

Form 12: Special Circumstance Instructional Assistant Assessment Classroom Observation of Student (p. 21)

This form assists with determining specific times and/or activities when support may be needed.

Form 13: Special Circumstance Instructional Assistance Rubric (p. 22)

This rubric should be filled out by the classroom teacher and include additional documentation identifying the current level of support needed by the student.

Form 14: Special Circumstance Instructional Assistance Behavior Intervention Plan
(p. 23-24)

This form is completed when students may need SCIA support due to behavior(s).

Form 15: Special Circumstance Instructional Assistance Independence Behavior Intervention Plan Checklist (p. 25)

This form must be completed when the SCIA assessment is requested due to behavioral issues and is aligned to support the student's current Behavior Intervention Plan.

Form 16: Special Circumstance Instructional Assistance Independence Fade Plan
(p. 26)

An independent/fade plan (as appropriate) must be included in the IEP to determine how the SCIA will be faded. The plan should include goals, timelines, progress monitoring methods, generalization strategies, and specific criteria for fading SCIA support.

Form 17: Review of Independence/Fade Plan to Determine Continued Need for Special Circumstance Instructional Assistance (p. 27)

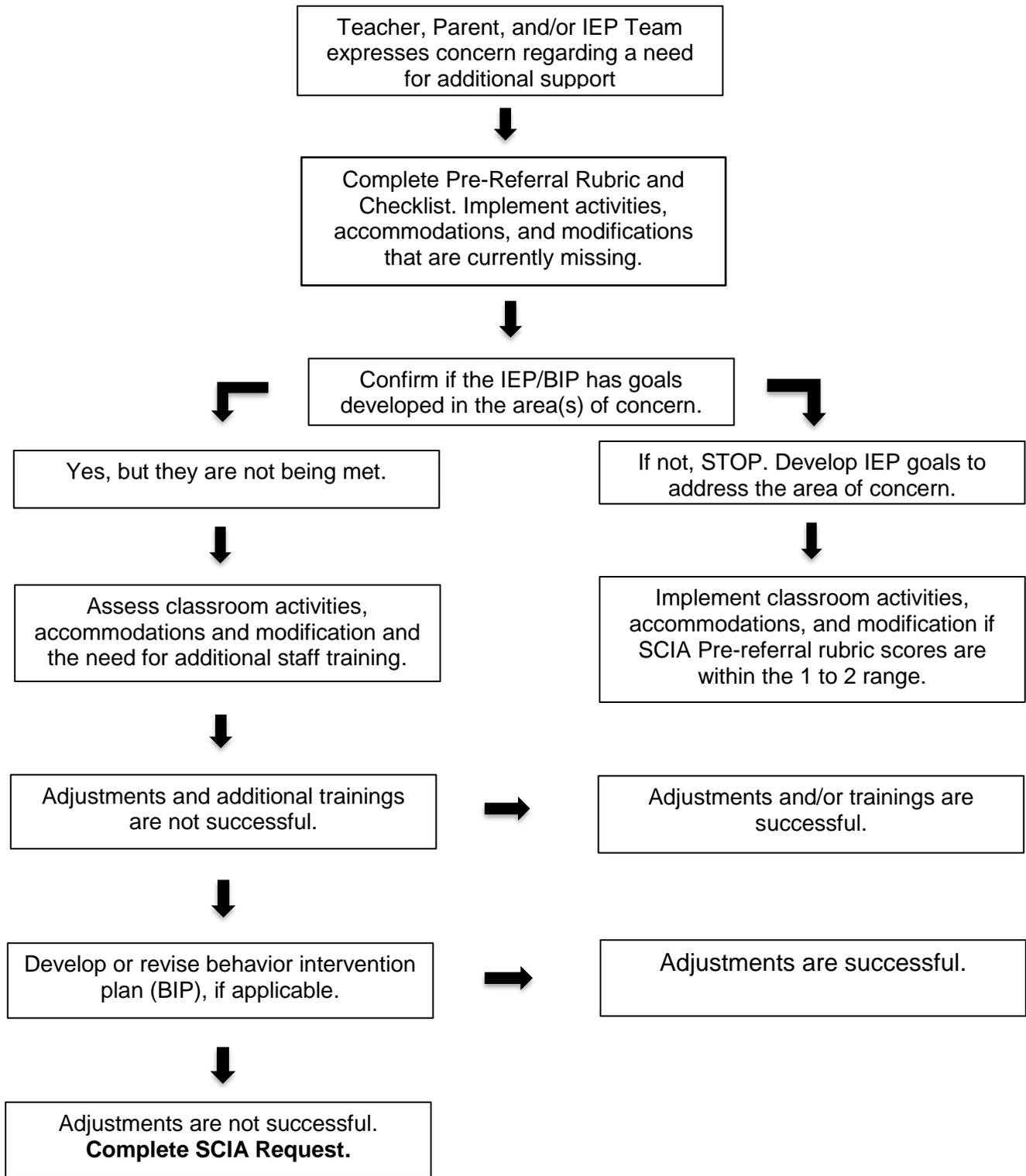
Once a student has been approved for a SCIA and one has been implemented, the evaluation team should continue to observe the student to determine appropriateness and monitor student progress. This form should be completed and reviewed at least every 3-6 months to determine the effectiveness of the SCIA support and/or continued need.

Appendix

Form A: Sample Special Circumstance Instructional Assistance Assessment Evaluation Report (p. 28-30)

Form B: Sample Special Circumstance Instructional Assistance Behavior Intervention Plan (p. 31-33)

Form 1 - Pre-Referral Process Flow Chart



Form 2 - Special Circumstance Instructional Assistance Pre-Referral Rubric

Student Name: _____ DOB: _____ Teacher: _____ Date: _____

School: _____ Rubric Completed by: _____

Health/Personal Care		Behavior		Instruction		Least Restrictive Environment	
0	General good health and developmentally appropriate personal care skills. Health care procedures and/or personal care interventions are not typically required. Independently maintains all age appropriate personal care and/or medical needs.	0	Exhibits age or developmentally appropriate behavior. Interventions are not typically required. Follows directions and handles redirection appropriately. Student independently addresses own behavior needs and required supports are similar to those of same-aged peers.	0	Independently participates fully in individual, small group, and whole class instruction. Accommodations and modifications beyond those routinely provided for the class are not required.	0	Developed IEP goals can be met through partial or full inclusion in general education. Participates in some core curriculum with the general education setting and requires a few accommodations. Independently goes to and successfully participates in assigned general education classes.
1	Mild or occasional health concerns. Allergies or other chronic health concerns. No specialized health care procedure. Medications administered takes less than 10 minutes per day. Needs reminders to complete personal care activities. Requires support with 0-25% of their age appropriate personal care and/or medical needs.	1	Mild or occasional behavior incidents. Follows adult directions but occasional requires additional encouragement and prompts about 0-25% of the day. Occasional difficulties with peers and adults, but behaviors are not typically considered dangerous.	1	Participates in individuals, small group, and whole class instruction at instructional level, but may require additional prompting or reinforcement 0-25% of the time. Requires reminders to stay on task, follow directions, and to remain engaged in learning. Specialized instructional strategies are not required.	1	Developed IEP goals can be met through partial or full inclusion in general education with the use of some accommodations and/or modifications. Needs occasional prompts to participate in general education and/or interact with peers 0-25% of the time. Requires some additional support to finish work and be responsible.
2	Chronic health issues (ear infections, ADD, bee sting allergy). Generic specialized health care procedure and takes medication. Intervention for 10-15 minutes daily. Requires reminders and occasional additional prompts or limited hands-on assistance for washing hands, using the bathroom, wiping mouth, etc. Occasional toileting accidents. Requires support with 26-50% of their age appropriate personal care and/or medical needs.	2	Moderate level of behavior incidents, has problems following directions and behaving appropriately. Adult intervention is required daily, but can be managed adequately with a classroom management plan. May require behavior intervention plan implementation, and adult support 26-50% of the day.	2	Cannot always participate in whole class instruction without modifications. Requires smaller groups and frequent verbal prompts, cues, or reinforcement. On task about 50% of the time with support. Requires frequent verbal prompts to follow directions 26-50% of the time. Specialized instructional strategies are not required.	2	Developed IEP goals can be met your partial or full inclusion in general education with use of accommodations and/or modifications. Participates with visual supervision and occasional verbal prompts. Requires visual shadowing to get to class. Requires adult shadowing for short period of time daily. Requires prompts to participate in general education and/or interact with peers 26-50% of the time.
3 *	Very specialized healthcare procedure and medication. Limited mobility or physical limitations requiring assistance (stander, walker, gait trainer, or wheelchair). Special food prep or feeding. Health related interventions 15 to 45 minutes daily. Frequent physical prompts to participate in personal care. Requires toilet schedule, training, direct help, diapering, etc. Requires support with 51-75% of their age appropriate personal care and/or medical needs.	3 *	Serious level of behavioral incidents. Requires routine adult monitoring and intervention to prevent escalation into dangerous situations. Defiant and prone to physical aggression. Requires a behavioral intervention plan and behavior goals and objectives in the IEP. May require adult support 51-75% of the day to address behavior needs described in BIP.	3 *	Participation in individual, small group, and whole class instruction requires close adult proximity and monitoring about 51-75% of the time 2daily. Requires low student staff ratio and prompts including physical assistance to stay on task. Primarily complies only with 1:1 directions and monitoring. Requires highly specialized strategies that require specific teacher training.	3 *	Developed IEP goals can be met through partial or full inclusion in the general education with frequent use of accommodations and/or modification. Requires adult to monitor success in accessing curriculum. Participates with direct instructional and behavioral support. Requires direct supervision going to and from class. Requires low student staff ratio and multiple prompts, including physical assistance to stay on task 51-75% of the time.
4 *	Specialized healthcare procedures requiring care by specially trained adult (G-tube, tracheotomy, cauterization). Takes medication, requires positioning by bracing multiple times daily. Health related intervention and direct 1:1 assistance at least 45 minutes daily. Direct assistance with most personal care. Requires two-person lift. Direct support required with at least 76% or all personal care and medical needs.	4 *	Severe level of behavioral incidents. Behavior problems with potential for injury to self and others, runs away, and aggressive daily. Analysis of behavior has been completed and the student has a well-developed BIP. Requires constant and immediate supervision and intervention from a specially trained adult to prevent escalation into dangerous situations. Requires 76%-100% adult support daily.		Participation in any setting requires constant 1:1 support. Requires verbal and physical prompting to stay on-task and follow directions 76% or more of the time. Regularly requires specific 1:1 instructional strategies.	4 *	IEP goals can be met through partial or full inclusion in general education with extensive use of accommodations and/or modifications. Requires constant adult supervision to access curriculum. Always requires 1:1 staff in close proximity for direct instruction, safety, mobility, or behavioral monitoring. Requires 1:1 assistance to go to and from class. Requires verbal and physical prompting to stay on-task and follow directions 76% or more of the time.

*Complete and implement missing activities, accommodations, and modifications for scores within the 1-2 range. Proceed with SCIA referral process for scores within the 3-4 range after implementing missing activities, accommodations, and modifications.

Form 3 - Special Circumstance Instructional Assistance Independence Continuum

Level 0 - Independent	Level 1 – Independent with extra teacher awareness	Level 2 – Mostly Independent	Level 3 – Partially Independent	Level 4 – Not Independent
<ul style="list-style-type: none"> -Responds to natural environmental supports as other peers -Gets along with others/seek out friends/socializes at level of peers -Few if any accommodations are needed -Stays on task and requires the same amount of prompting as others -Student can request for help -Proximity to student is average compared to others -Maintains all age-appropriate personal needs 	<ul style="list-style-type: none"> -Responds to natural environmental supports with additional accommodations provided by teacher -Peers can be used as additional support -Some support to understand class assignments -Follows adult direction and may need some prompts and reminders to remain on task a little more than others -Proximity to student is average compared to others with some additional checking in -May require mild healthcare or some reminders to maintain age appropriate personal needs 	<ul style="list-style-type: none"> -Needs assistance or further teaching in following the natural cues in the environment -Requires additional behavior support than others (progress report, behavior charts, etc.) -Difficulty following directions and behaving appropriately, but responds to specific strategies outlined on the accommodations page of IEP or in a Behavior Intervention Plan -Requires some assistance to support critical parts of the day. Proximity closer than others during these times -Requires more direct prompting/reminders than expected in the classroom -Requires specific accommodations or modifications to some tasks and assignments -Social skills may need some facilitating -Mild health related issues addressed by the school nurse 	<ul style="list-style-type: none"> -Serious behavior problems daily – defiant and/or prone to physical aggression (may be harmful to self or others) -FBA completed and requires Behavior Intervention Plan, including behavior goals on IEP with close supervision of plan implementation -Has difficulty participating in groups -Requires low student/staff ratio and needs close adult proximity to stay on task (2-3 feet) -Complies mainly with 1:1 directions -Signing 50-80% of the time -Requires a structured adult facilitated program for socialization -May have specialized health issues or medications; limited mobility; feeding issues; and/or frequent physical prompts and directions for personal care – requires assistance with the bathroom for basic care 	<ul style="list-style-type: none"> -Does not or cannot participate without 1:1 support -Requires constant attention/prompting to complete tasks -Needs full or partial physical prompts -Proximity of student – within one foot -Serious behavior problems – FBA completed and requires Behavior Intervention Plan -Requires specially trained behavior staff -Cognitive abilities and skills require significant modifications to curriculum -May need signing 100% of the time -Requires direct supervision at all times -Rarely or does not interact with others and needs a structured adult facilitated program for social skills and communication -Intensive health needs requiring 1:1 personal care

*Complete and implement missing activities, accommodations, and modifications for scores within the 1-2 range. Proceed with SCIA referral process for scores within the 3-4 range after implementing missing activities, accommodations, and modifications.

Form 4 - Pre-Referral Activities, Accommodations, and Modifications Checklist

Environment	Assignment	Request for Assistance
<ul style="list-style-type: none"> <input type="checkbox"/> Clarify rules <input type="checkbox"/> Positive interaction <input type="checkbox"/> Procedures are taught/established <input type="checkbox"/> Active rule teaching <input type="checkbox"/> Change seating <input type="checkbox"/> Change groups <input type="checkbox"/> Reduce distractions <input type="checkbox"/> Special study area <input type="checkbox"/> Break area <input type="checkbox"/> Peer supports <input type="checkbox"/> Posted visual schedule <input type="checkbox"/> Visual supports <input type="checkbox"/> Use of prompts <input type="checkbox"/> Use of timer <input type="checkbox"/> Active engagement/supervision <input type="checkbox"/> Staff proximity <input type="checkbox"/> Reduce distractions <input type="checkbox"/> Rearrange physical environment <input type="checkbox"/> Materials/supplies clearly labeled <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Shorten <input type="checkbox"/> Leveled/matched to student's instructional level <input type="checkbox"/> Individual contracts <input type="checkbox"/> Extended time <input type="checkbox"/> Daily assignment book <input type="checkbox"/> Check-in/check-out <input type="checkbox"/> Checklist/task analysis <input type="checkbox"/> Start buddy <input type="checkbox"/> Provision of choice <input type="checkbox"/> Output Differentiation <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Conference with parents <input type="checkbox"/> Collaborate with community agencies/professionals <input type="checkbox"/> Confer with other school staff <input type="checkbox"/> Additional staff training <input type="checkbox"/> Behavior Intervention Plan <input type="checkbox"/> Classroom team meeting <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____
Communication	Curriculum/Materials	Teaching Techniques
<ul style="list-style-type: none"> <input type="checkbox"/> Access to communication system <input type="checkbox"/> Predictable means of communication <input type="checkbox"/> Staff prompts communication <input type="checkbox"/> Staff encourages communication <input type="checkbox"/> Classroom community circle/meeting <input type="checkbox"/> Home/school communication (log/email) <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Change instructional materials <input type="checkbox"/> High-interest reading/instructional materials <input type="checkbox"/> Use of computer <input type="checkbox"/> Calculator <input type="checkbox"/> Books on tape <input type="checkbox"/> Copied notes <input type="checkbox"/> Learning games <input type="checkbox"/> Assistive devices <input type="checkbox"/> Technology Devices <input type="checkbox"/> Reinforcers <input type="checkbox"/> Behavior charting <input type="checkbox"/> Reinforcement schedule <input type="checkbox"/> Lesson plan clearly written <input type="checkbox"/> Manipulatives <input type="checkbox"/> Realia <input type="checkbox"/> IEP objectives address deficit areas <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Consistent rules & consequences across staff <input type="checkbox"/> Teach study skills <input type="checkbox"/> Teach social skills <input type="checkbox"/> Teach new behaviors <input type="checkbox"/> Strategies instruction <input type="checkbox"/> Reteach (instruction/assignment) <input type="checkbox"/> Verbal praise <input type="checkbox"/> Frequent feedback <input type="checkbox"/> Frequent check-in <input type="checkbox"/> Eye contact <input type="checkbox"/> Use of multiple modalities (visual, aids, hands-on) <input type="checkbox"/> Small group instruction <input type="checkbox"/> Centers <input type="checkbox"/> Cross-age tutoring <input type="checkbox"/> Pre-correction <input type="checkbox"/> Preview assignments/materials <input type="checkbox"/> Use of prior knowledge <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____

Form 5 - Special Circumstance Instructional Assistance Request Cover Page

Student:	Placement:	Date:
Age:	Sp Ed Teacher:	Primary/Secondary Disability:
DOB:	Gen Ed Teacher:	Current Setting:
School:	Site Administrator:	Contact Phone:
Grade:	Other:	School Psychologist:

I. Interventions Previously Implemented

To Be Completed by IEP Case Manager/Psychologist Prior to Referral

- Prior to considering a SCIA referral, team must exhaust all existing natural supports contained in the IEP and Behavior Intervention Plan (if applicable). _____
Date/Initials
- Complete pre-referral activities and implement necessary/missing components. _____
Date/Initials
- Gather behavioral data (data collection on frequency, duration, and and severity). _____
Date/Initials
- Review BIP implementation data, if appropriate. _____
 BIP – Data and strategies used to increase replacement behaviors. Date/Initials
 Implementation for at least three months with revisions, as needed.
- Gather information from other records, as appropriate. _____
 Academic progress/Interventions and behavioral data Date/Initials
 Student’s schedule (including grades and attendance)
 Psycho-educational reports
 Discipline referral information
 Health records
 Communication competency
 Use of AT/AAC

II. Referral Process

- Complete SCIA referral _____
Date/Initials
- Complete Review of BIP and progress on behavior goals _____
Date/Initials

III. Assessment Process

- Complete SCIA Parent Interview(s) _____
Date/Initials
- Complete SCIA Teacher Interview(s) _____
Date/Initials
- Complete SCIA Student Interview, as appropriate _____
Date/Initials
- Complete SCIA Observation: Environmental considerations _____
Date/Initials
- Complete SCIA classroom observation of student _____
Date/Initials
- Complete SCIA rubric _____

- Complete additional Evaluation(s) per Assessment Plan Date/Initials

- Develop SCIA Evaluation Report and Independence/Fade Plan Date/Initials

IV. IEP Process

- Hold IEP meeting to review results of evaluation Date/Initials

- If SCIA support **IS NOT** recommended Date/Initials

 - Specify natural supports, accommodations, and/or modifications that are effective in student's IEP
 - Add IEP goals and objectives, if appropriate
 - Specify natural supports, accommodations, and/or modifications that are effective in student's IEP
- If SCIA support **IS** recommended Date/Initials

 - Identify IEP Goals and Objectives to be supported by SCIA support
 - Complete IEP Special Factors page regarding Behavior, if appropriate
 - Complete IEP Services page: under Supplementary Aids, Services and Other Supports for School Personnel Check: Intensive Individual Services Include start/end date, frequency and duration, and location of SCIA support
 - Review proposed Independence/Fade Plan and type of documentation that will be collected
 - Set review date within 3 to 6 months to assess continued need of SCIA support
- Complete and send Prior Written Notice to parents

V. SCIA Review

- Select IEP date to review progress on independence goals Date/Initials

- Conduct on-going observation, necessary interview, and progress towards independence Date/Initials

- Review BIP – Analyze and revise, as needed Date/Initials

- Complete SCIA Review to Determine Continued Need for SCIA Supports Date/Initials

- Review Independence/Fade Plan and documentation with parent and IEP team Date/Initials

Form 6 - Special Circumstance Instructional Assistance Referral

Student:	Placement:	Date:
Age:	Sp Ed Teacher:	Primary/Secondary Disability:
DOB:	Gen Ed Teacher:	Current Setting:
School:	Site Administrator:	Contact Phone:
Grade:	Other:	School Psychologist:

Attach the following information:

- IEP goals with the progress toward the goals noted specific to areas of needed support
- Student's BIP (if available)
- Behavioral documentation of noted areas of concern (data collection on frequency, duration, and severity of behavior, logs, charts, narratives)
- Accommodations/modifications Checklist
- Student's daily schedule including related services
- Health records (if necessary)

***Check the areas of intensive need that might indicate SCIA support and indicate the time/period where support may be needed**

Health/Personal Care	Behavior	Instruction	Least Restrictive Environment
<input type="checkbox"/> Health Plan <input type="checkbox"/> Full toilet care <input type="checkbox"/> G-Tube <input type="checkbox"/> Diapers <input type="checkbox"/> Medication <input type="checkbox"/> Toilet training <input type="checkbox"/> Suctioning <input type="checkbox"/> Dressing <input type="checkbox"/> Monitoring <input type="checkbox"/> Food Prep <input type="checkbox"/> Health Status <input type="checkbox"/> Hygiene <input type="checkbox"/> Eating <input type="checkbox"/> Mobility <input type="checkbox"/> Other:	<input type="checkbox"/> Participation in BIP <input type="checkbox"/> Aggressive <input type="checkbox"/> Assaultive <input type="checkbox"/> Non-compliant <input type="checkbox"/> Over-active <input type="checkbox"/> Runs away <input type="checkbox"/> Disruptive classroom behavior <input type="checkbox"/> Other:	<input type="checkbox"/> Physical assistance <input type="checkbox"/> Constant verbal prompts <input type="checkbox"/> TEACHH/DTT <input type="checkbox"/> Assistive Technology <input type="checkbox"/> PECS <input type="checkbox"/> Other:	<input type="checkbox"/> Direct instruction <input type="checkbox"/> Physical support/positioning <input type="checkbox"/> Safety/close supervision (80%+) <input type="checkbox"/> Other:
Time/Period: _____	Time/Period: _____	Time/Period: _____	Time/Period: _____

Previous Interventions and Results: Describe interventions used to support the student in each of the areas marked above. Provide data (include frequency, duration, and location) that documents the success or failure of interventions. Attach additional pages as necessary.

How are existing staff in your classroom or on your site utilized? Student/Staff Ratio: _____

Other specific classroom and/or unique needs:

Request Made by: Case Manager Parent/Guardian Teacher Other:

Staff Making Referral (print name and sign): _____ Date: _____

School Site Administrator (print name and sign): _____ Date: _____

Form 7 – Classroom Adaptations and Modifications Checklist

Environment	Assignment	Request for Assistance
<ul style="list-style-type: none"> <input type="checkbox"/> Clarify rules <input type="checkbox"/> Positive interaction <input type="checkbox"/> Procedures are taught/established <input type="checkbox"/> Active rule teaching <input type="checkbox"/> Change seating <input type="checkbox"/> Change groups <input type="checkbox"/> Reduce distractions <input type="checkbox"/> Special study area <input type="checkbox"/> Break area <input type="checkbox"/> Peer supports <input type="checkbox"/> Posted visual schedule <input type="checkbox"/> Visual supports <input type="checkbox"/> Use of prompts <input type="checkbox"/> Use of timer <input type="checkbox"/> Active engagement/supervision <input type="checkbox"/> Staff proximity <input type="checkbox"/> Reduce distractions <input type="checkbox"/> Rearrange physical environment <input type="checkbox"/> Materials/supplies clearly labeled <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Shorten <input type="checkbox"/> Leveled/matched to student's instructional level <input type="checkbox"/> Individual contracts <input type="checkbox"/> Extended time <input type="checkbox"/> Daily assignment book <input type="checkbox"/> Check-in/check-out <input type="checkbox"/> Checklist/task analysis <input type="checkbox"/> Start buddy <input type="checkbox"/> Provision of choice <input type="checkbox"/> Output Differentiation <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Conference with parents <input type="checkbox"/> Collaborate with community agencies/professionals <input type="checkbox"/> Confer with other school staff <input type="checkbox"/> Additional staff training <input type="checkbox"/> Behavior Intervention Plan <input type="checkbox"/> Classroom team meeting <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____
Communication	Curriculum/Materials	Teaching Techniques
<ul style="list-style-type: none"> <input type="checkbox"/> Access to communication system <input type="checkbox"/> Predictable means of communication <input type="checkbox"/> Staff prompts communication <input type="checkbox"/> Staff encourages communication <input type="checkbox"/> Classroom community circle/meeting <input type="checkbox"/> Home/school communication (log/email) <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Change instructional materials <input type="checkbox"/> High-interest reading/instructional materials <input type="checkbox"/> Use of computer <input type="checkbox"/> Calculator <input type="checkbox"/> Books on tape <input type="checkbox"/> Copied notes <input type="checkbox"/> Learning games <input type="checkbox"/> Assistive devices <input type="checkbox"/> Technology Devices <input type="checkbox"/> Reinforcers <input type="checkbox"/> Behavior charting <input type="checkbox"/> Reinforcement schedule <input type="checkbox"/> Lesson plan clearly written <input type="checkbox"/> Manipulatives <input type="checkbox"/> Realia <input type="checkbox"/> IEP objectives address deficit areas <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Consistent rules & consequences across staff <input type="checkbox"/> Teach study skills <input type="checkbox"/> Teach social skills <input type="checkbox"/> Teach new behaviors <input type="checkbox"/> Strategies instruction <input type="checkbox"/> Reteach (instruction/assignment) <input type="checkbox"/> Verbal praise <input type="checkbox"/> Frequent feedback <input type="checkbox"/> Frequent check-in <input type="checkbox"/> Eye contact <input type="checkbox"/> Use of multiple modalities (visual, aids, hands-on) <input type="checkbox"/> Small group instruction <input type="checkbox"/> Centers <input type="checkbox"/> Cross-age tutoring <input type="checkbox"/> Pre-correction <input type="checkbox"/> Preview assignments/materials <input type="checkbox"/> Use of prior knowledge <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____

Form 8 - Special Circumstance Instructional Assistance Assessment Parent Interview

Domain	Suggested Questions	Notes
Health and Personal Care	<p>1) Based on your experience in the home, which personal care activities would you expect your child to complete independently at school?</p> <p>2) Which, if any, do you believe he or she may need adult support with at school?</p>	
Behavior	<p>1) Based on your experience at home, how independent is your child in</p> <p>a) Staying in a designated area during activities, such as meal time, homework time, or TV time?</p> <p>b) Being mindful of safety during activities, such as playing with peers or crossing the street?</p> <p>c) Completing tasks, such as chores or homework?</p> <p>2) What areas are difficult for your child?</p> <p>3) During which activities do these difficulties occur?</p>	
Instruction	<p>1) What special education service and/or other assistance does your child currently receive?</p> <p>2) When is your child successful during his/her school day? What is working?</p> <p>3) What other school programs, support from other staff, or students does your child benefit from?</p>	
General Questions	<p>1) During which activities is your child most independent and requiring least amount of support?</p> <p>2) During which activities is your child least independent and requiring most amount of support?</p> <p>3) What do you see as next steps for your child, such as, area that you would like to see improve?</p> <p>4) Do you have any safety concerns?</p>	

**Form 9 - Special Circumstance Instructional Assistance Assessment
Teacher Interview**

Domain	Suggested Questions	Notes
Health and Personal Care	1) What time of day/content areas have you observed the student needing more personal care or medically related activities relative to his/her peers?	
Behavior	1) What time of day/content areas have you observed the student need more adult support than his/her peers to demonstrate appropriate behavior? Please be specific.	
Instruction	1) Which content area do you feel the student is most independent in? In this content area, approximately how many more prompts does the student need than his/her peers to participate? 2) Which content area do you feel the student is least independent in? In this content area, approximately how many more prompts does the student need than his/her peers to participate? 3) What assistance does the student currently receive? 4) What skills would you like the student to develop to be more independent? 5) When is the student successful during his/her school day? What is working?	
Least Restrictive Environment	1) If the student participates in general education, about what percentage of the time does the student require adult support to access the curriculum? 2) If the student participates in general education, about what percentage of the time does the student require adult support to interact socially with peers?	
General Questions	1) Is there anything else you would like to share?	

**Form 10 - Special Circumstance Instructional Assistance Assessment
Student Interview**

Domain	Suggested Questions	Notes
Behavior	1) When do you have problems during your school day?	
Instruction	1) What do you like about school? 2) When are you successful? 3) How do school staff members help you during the day? 4) Who else helps you during school? 5) What programs do you participate in that help you? 6) What are some things you would like to learn to help you be more independent?	
General Questions	1) Is there anything else you would like us to know about you?	

Form 11 - Special Circumstance Instructional Assistance Environmental Observation

*Please review visual and physical structure of the classroom, curriculum instruction, data collection, and planning.

Student:	DOB:
School:	Grade:
Observation Setting:	Date: Start/End Times: /
Observer Name:	Observer Position:
Number of Students in Class:	Number of Adults in Class:

A. Classroom

1. Is individual student/classroom schedule and procedures accessible, if needed? Yes No

A. Student use of the schedule:

- Student carries schedule
- Student goes to schedule board
- Student uses transition cards
- Teachers carries and shows the schedule
- Schedule not used at all
- Other: _____

B. Levels of prompt needed for student to follow schedule:

- Independent
- Indirect verbal or gestural prompt
- Physical prompt
- Direct Verbal prompt
- Other

2. Is the entire daily schedule posted on the board and reviewed often? Yes No

Describe:

2a. Is transition between activities quick and smooth? Yes No

Explain:

2b. Does teacher provide ample warning to students that a change is going to happen? Yes No

Explain:

3. Is room organized with work areas defined and materials readily available for instruction? Yes No

Describe:

4. Do students follow established classroom procedures and routines? Yes No

Describe:

B. Curriculum and instructional Planning

1. Check the curriculum domains included in student's program:

<input type="checkbox"/> Academics	<input type="checkbox"/> Motor skills/mobility
<input type="checkbox"/> Behavior	<input type="checkbox"/> Pre-vocational/vocational
<input type="checkbox"/> Communication	<input type="checkbox"/> Self-care
<input type="checkbox"/> Functional Academics	<input type="checkbox"/> Social Skills
<input type="checkbox"/> Health	

2. What curriculum accommodations and/or modifications are being used? How long have they been in use?

3. List equipment or devices used that may relate to the need for assistance (e.g. low incidence equipment, assistive technology devices):

4. Are materials and activities age-appropriate? Yes No

5. Are materials and activities instructionally appropriate? Yes No

6. Describe lessons observed:

C. Classroom Behavior and Safety

1. Describe the behavior management system in the classroom including positive reinforcers and consequences. Is it appropriate for the student or does it need to be modified?

2. Are specific positive behavior supports utilized for the student? Yes No
Describe:

3. Is there appropriate safety equipment in place? Yes No

4. Are appropriate safety and medical procedures being used? Yes No

5. Does it appear appropriate training has been provided to staff? Yes No
Comments:

D. Describe the student's behavior in independent activities.

1. Describe the student's interaction with peers

2. Describe the student's interactions with non-classroom staff in a less structured environment?

3. What activities does the student choose during breaks?

4. What problems are evident?

E. Describe the school day and assistance now provided (Include natural supports such as peers and school staff, volunteers, etc.).

F. What assistance currently exists?

- Behavior management?
- Medical assistance
- Curriculum adaptation and preparation
- Supervision
- Instruction- individual
- Instruction- group
- Other: _____

G. Can current conditions be modified to meet the student’s goals and objectives and/or personal care needs? Yes No **Explain:**

H. Are other types of assistance needed? Describe:

I. Current Data Systems and Collection of Data

1. Has data been collected on student performance? Yes No
2. How often is data collected? Daily Bi-weekly Weekly Monthly
3. How is data summarized? Graphed Written narrative Other: _____
4. What evidence is there for accommodations and/or modifications being used?

J. Are there any other issues that need to be addressed, and/or any additional comments?

Form 12 - Special Circumstance Instructional Assistance Assessment Classroom Observation of Student

Focus behavior(s): _____
 Observed By: _____ Position: _____
 Date: _____ Time (start/end): _____

Time/Subject Matter	Observation Notes
<i>Example:</i> 7:30-8:00 Arrive and breakfast *Observed a student to teacher ratio of 10:2 for bus and 5:1 for breakfast	<i>Example: Student walks hand in hand with an aide from the bus to the breakfast tables. He walks at a slower pace and required 10 prompts and continuous monitoring to continue along the path. He was given maximum assistance to eat. While the other aide was with a small group, student was in a group of about 5 students. When the aide turned to assist another student in the group, he would attempt to stand and walk away. Requires 2:1 to walk from bus and 1:1 for feeding.</i>
Date/Time:	
Environment:	

**Circle the time of day where support is needed and analyze intensity of support needed beyond naturally embedded supports (i.e., specific time of the day, activities, routines, etc.).*

Form 13 - Special Circumstance Instructional Assistance Rubric

Student Name: _____ DOB: _____ Teacher: _____ Date: _____

School: _____ Rubric Completed by: _____

Health/Personal Care		Behavior		Instruction		Least Restrictive Environment	
0	General good health and developmentally appropriate personal care skills. Health care procedures and/or personal care interventions are not typically required. Independently maintains all age appropriate personal care and/or medical needs.	0	Exhibits age or developmentally appropriate behavior. Interventions are not typically required. Follows directions and handles redirection appropriately. Student independently addresses own behavior needs and required supports are similar to those of same-aged peers.	0	Independently participates fully in individual, small group, and whole class instruction. Accommodations and modifications beyond those routinely provided for the class are not required.	0	Developed IEP goals can be met through partial or full inclusion in general education. Participates in some core curriculum with the general education setting and requires a few accommodations. Independently goes to and successfully participates in assigned general education classes.
1	Mild or occasional health concerns. Allergies or other chronic health concerns. No specialized health care procedure. Medications administered takes less than 10 minutes per day. Needs reminders to complete personal care activities. Requires support with 0-25% of their age appropriate personal care and/or medical needs.	1	Mild or occasional behavior incidents. Follows adult directions but occasional requires additional encouragement and prompts about 0-25% of the day. Occasional difficulties with peers and adults, but behaviors are not typically considered dangerous.	1	Participates in individuals, small group, and whole class instruction at instructional level, but may require additional prompting or reinforcement 0-25% of the time. Requires reminders to stay on task, follow directions, and to remain engaged in learning. Specialized instructional strategies are not required.	1	Developed IEP goals can be met through partial or full inclusion in general education with the use of some accommodations and/or modifications. Needs occasional prompts to participate in general education and/or interact with peers 0-25% of the time. Requires some additional support to finish work and be responsible.
2	Chronic health issues (ear infections, ADD, bee sting allergy). Generic specialized health care procedure and takes medication. Intervention for 10-15 minutes daily. Requires reminders and occasional additional prompts or limited hands-on assistance for washing hands, using the bathroom, wiping mouth, etc. Occasional toileting accidents. Requires support with 26-50% of their age appropriate personal care and/or medical needs.	2	Moderate level of behavior incidents, has problems following directions and behaving appropriately. Adult intervention is required daily, but can be managed adequately with a classroom management plan. May require behavior intervention plan implementation, and adult support 26-50% of the day.	2	Cannot always participate in whole class instruction without modifications. Requires smaller groups and frequent verbal prompts, cues, or reinforcement. On task about 50% of the time with support. Requires frequent verbal prompts to follow directions 26-50% of the time. Specialized instructional strategies are not required.	2	Developed IEP goals can be met your partial or full inclusion in general education with use of accommodations and/or modifications. Participates with visual supervision and occasional verbal prompts. Requires visual shadowing to get to class. Requires adult shadowing for short period of time daily. Requires prompts to participate in general education and/or interact with peers 26-50% of the time.
3 *	Very specialized healthcare procedure and medication. Limited mobility or physical limitations requiring assistance (stander, walker, gait trainer, or wheelchair). Special food prep or feeding. Health related interventions 15 to 45 minutes daily. Frequent physical prompts to participate in personal care. Requires toilet schedule, training, direct help, diapering, etc. Requires support with 51-75% of their age appropriate personal care and/or medical needs.	3 *	Serious level of behavioral incidents. Requires routine adult monitoring and intervention to prevent escalation into dangerous situations. Defiant and prone to physical aggression. Requires a behavioral intervention plan and behavior goals and objectives in the IEP. May require adult support 51-75% of the day to address behavior needs described in BIP.	3 *	Participation in individual, small group, and whole class instruction requires close adult proximity and monitoring about 51-75% of the time 2daily. Requires low student staff ratio and prompts including physical assistance to stay on task. Primarily complies only with 1:1 directions and monitoring. Requires highly specialized strategies that require specific teacher training.	3 *	Developed IEP goals can be met through partial or full inclusion in the general education with frequent use of accommodations and/or modification. Requires adult to monitor success in accessing curriculum. Participates with direct instructional and behavioral support. Requires direct supervision going to and from class. Requires low student staff ratio and multiple prompts, including physical assistance to stay on task 51-75% of the time.
4 *	Specialized healthcare procedures requiring care by specially trained adult (G-tube, tracheotomy, cauterization). Takes medication, requires positioning by bracing multiple times daily. Health related intervention and direct 1:1 assistance at least 45 minutes daily. Direct assistance with most personal care. Requires two-person lift. Direct support required with at least 76% or all personal care and medical needs.	4 *	Severe level of behavioral incidents. Behavior problems with potential for injury to self and others, runs away, and aggressive daily. Analysis of behavior has been completed and the student has a well-developed BIP. Requires constant and immediate supervision and intervention from a specially trained adult to prevent escalation into dangerous situations. Requires 76%-100% adult support daily.		Participation in any setting requires constant 1:1 support. Requires verbal and physical prompting to stay on-task and follow directions 76% or more of the time. Regularly requires specific 1:1 instructional strategies.	4 *	IEP goals can be met through partial or full inclusion in general education with extensive use of accommodations and/or modifications. Requires constant adult supervision to access curriculum. Always requires 1:1 staff in close proximity for direct instruction, safety, mobility, or behavioral monitoring. Requires 1:1 assistance to go to and from class. Requires verbal and physical prompting to stay on-task and follow directions 76% or more of the time.

*Attach a copy of documentation indicating frequency and duration over a period of time to determine future considerations of special circumstance instructional assistance.

**Form 14 - SOUTH EAST CONSORTIUM SELPA
Special Circumstance Instructional Assistance
Behavior Intervention Plan**

Student Name: _____ Birthdate: __/__/__ IEP Date: __/__/__ Date of BIP: __/__/__

This Behavior Intervention Plan is based on a Functional Behavior Assessment No Yes

If marked no, Behavior Intervention Plan is based on the following: -

The problem behavior impeding learning is (*describe what it looks like*)

Frequency _____ Intensity _____ Duration _____

reported by _____ and/or observed by _____

PREVENTION, PART I: ENVIRONMENTAL FACTORS AND NECESSARY CHANGES

What are the antecedents for the problem behavior? (Situations in which the behavior is likely to occur: physical setting, social setting, instructional strategies, curriculum and activities, scheduling factors, degree of independence, degree of participation, social interaction, degree of choice, etc.)

What environmental structure and supports are needed to reduce the problem behavior? (Provide specific examples)

ANALYSIS, PART II: FUNCTIONAL FACTORS

Team believes the behavior occurs because:

Access: _____

Avoid: _____

Automatic Reinforcement: _____

Other: _____

FERB, PART III: FUNCTIONALLY EQUIVALENT REPLACEMENT BEHAVIOR

What team believes the student should do INSTEAD of the problem behavior? (*Replacement behavior that meets the same identified function of problem behavior*)

List teaching Strategies/Necessary Curriculum/Materials that are needed (List successive teaching steps for student to learn replacement behavior/s)

List reinforcement procedures needed for 1) establishing, 2) maintaining, and 3) generalizing the replacement behavior(s)?

Selection of reinforcer based on:

RESPONSE TO PROBLEM BEHAVIOR, PART IV: STRATEGIES

Student Behaviors	Staff Response
Student early escalation behaviors may include:	Staff response to early escalation behaviors may include: (e.g. prompting relaxation strategies, offering distractions)
Student behaviors during problem behavior may include:	Staff response during problem behavior may include: (e.g. monitor for safety, one step directions, neutral tone and affect)
Student behaviors during de-escalation may include:	Staff response to promote de-escalation may include: (e.g. model deep breathing, encouragement)
Student behaviors during post incident may include:	Post incident strategies may include: (e.g. offer choices, refrain from discussing consequences)

Behavioral Goal(s) are part of the student's IEP. See Goal(s) numbered:

_____.

Form 15 - Special Circumstance Instructional Assistance Independence Behavior Intervention Plan
Checklist

**Attach a copy of the student's Behavior Intervention Plan to this form.*

Student:	ID #:	Date:
Age: Grade: DOB:	Eligibility:	Gen Ed Teacher:
School:	Sp Ed Teacher:	IEP Manager:

What are the target behaviors in the BIP?

- Yes No The request for SCIA is related to the identified target behaviors in the BIP.
- Yes No All interventions are developmentally appropriate for student.
- Yes No BIP is written with enough clarity and detail for any new staff to understand and implement.
- Yes No All implementers have a copy of the plan.
- Yes No All implementers understand and/or have training in the strategies contained in the plan.
- Yes No Support for the plan provided by the Case Manager is adequate.
- Yes No Student is making progress on the target behaviors. Indicate supporting evidence (e.g., grades, rate of homework completion, duration of on-task behavior, frequency, and quality of social interactions).

Explain: _____

Action(s):

- BIP is appropriate, and no modifications are needed.
- Revise BIP.
- Train support staff. Describe: _____
- Other

Comments:

Form 16 - Special Circumstance Instructional Assistance Independence Fade Plan

This Fade Plan is attached to IEP date: _____

Student:	ID #:	Date:
Age: Grade: DOB:	Eligibility:	Gen Ed Teacher:
School:	Sp Ed Teacher:	IEP Manager:
School Psychologist:		Prepared by:

Behavior Intervention Plan: Yes No

Goal 1:

Procedures: What will be taught so that the student learns the replacement behavior/skills? (Task analysis of skill development)	Arrangements: (Where/When/Materials)
Measurement/Progress Monitoring Method: (Who, how often, and how the data will be collected. If using a data sheet, please attach)	Criteria for fading: (How will the data be evaluated to determine if intervention is working?)
What are the adaptations/accommodations/activities to assist with promoting and sustaining independence? (Generalization procedures, reduction in direct assistance, transfer of control to natural supports/cues and natural reinforcements)	

Data Summary/Review of Independence Level (Recommended every 12 weeks or until SCIA is completely faded)

Baseline (Frequency, percentage, duration, intensity, etc.)	Goal #1	Goal #2	Goal #3	Goal #4
Progress level:				
Recommendation:				

Form 17 - Review of Independence/Fade Plan to Determine Continued Need for Special Circumstance Instructional Assistance

**This form should be completed, and this information should be reviewed at the next IEP meeting (within 3-6 months) to determine the effectiveness of SCIA support.*

Student:	ID #:	Date:
Age: Grade: DOB:	Eligibility:	Gen Ed Teacher:
School:	Sp Ed Teacher:	IEP Manager:

Observational Setting: _____ Observer’s Name/Position or Title _____

Name(s)/Position of SCIA provider(s): _____

Description of current SCI Assistance provided (*time, settings, specific tasks such as health, personal care, behavior, instruction, inclusion/mainstream support*): _____

Observation of student behavior, preferably a range of interactions as noted on original **SCIA Rubric** and **Independence Plan** (*including non-teacher-directed, teacher-directed, structured activities, unstructured activities, within the time frame that support was originally necessary and is currently provided*): _____

Description of results or efforts to increase student independence and progress on goal(s): _____

Current status per teacher/support staff/student/data collection: _____

Recommendations for increasing generalization (e.g., change time, or tasks; move to less structured settings; additional opportunity for student independence; staff training, etc.): _____

Comments/Additional Recommendations: _____

**Appendix Form A - Special Circumstance Instructional Assistance Assessment
Evaluation Report and Independence/Fade Plan Sample**

Student:	ID #:	Date:
Age: Grade: DOB:	Eligibility:	Gen Ed Teacher:
School:	Sp Ed Teacher:	IEP Manager:
Evaluation Report Prepared By:		

I. Reason for Referral and Rating from SCIA Rubric

Mr. Smith requested additional assistance for Leslie due to her distractibility and difficulty keeping up in the general education classroom.

II. Background Information and Educational Setting (summarize special education and related services history; educational history, including academic progress/assessments and progress on IEP goals; results of previous evaluations, if applicable; previous interventions and outcomes; educationally relevant health, developmental, and medical findings; review of BIP; and disciplinary referral information).

Leslie has received special education and related services as a student with Autism since kindergarten. Currently, she receives support in a RSP setting for 40% of each school day. Leslie receives Speech and Language services two times a week for 30 minutes to address pragmatic skills. She also receives consultation from the Occupational Therapist ten times per year to address her fine motor delay and sensory integration. Leslie’s general education homework is modified. Reading comprehension, written language, and math goals are addressed in RSP using small groups and direct instruction.

A review of her IEP written on January 26, 2016 indicates that Leslie has made substantial progress on her self-help goal (i.e., feeding) and sensory integration goals. She has made partial progress on the following goals: reading comprehension, communication (i.e., pragmatics), and behavior (i.e., verbal outbursts and homework completion). She has made minimal progress on the following goals: written language, math (i.e., problem solving), fine motor, and behavior (i.e., on-task).

Leslie’s latest report card indicated B’s and C’s in all subjects. She receives appropriate accommodations so that she can access the general education curriculum. Leslie scored Below Standards on the English/Language Arts and Math portions of the October SBAC Interim Assessments.

A Behavior Intervention Plan was written at the end of last school year (05/15/16) and implemented for a short time before the end of the school year. Ms. Keyser continues to implement the BIP in the RSP classroom. Mr. Smith has not yet been trained in implementing the BIP in the general education classroom. The BIP targets on-task behavior and distractibility.

A review of Leslie’s discipline file indicated only two office referrals since beginning school at Central School in Kindergarten. Leslie’s most recent Psycho-Educational Report (triennial evaluation in 2nd grade) indicated that she continues to qualify for special education services as a student with Autism. She demonstrates delays in the following areas: academics, fine motor, communication, self-help, and behavior. Please refer to report for additional information. Leslie was diagnosed with Asperger’s Syndrome in July before beginning kindergarten.

III. Evaluation Procedures (include information regarding administration of tests in primary language of student by qualified personnel; validity of the evaluation; validity of tests for the purpose for which they were used).

- Review of records, including IEPs and BIP
- Interviews with Parent(s), Teachers, and Student
- Observations
- Behavior Assessment System for Children (BASC)
- Vineland Adaptive Behavior Scales

Test results are a valid indication of Leslie’s present functioning based on the structure of this one-on-one setting and Leslie’s interest in the tasks. There are no known cultural, environmental, or economic factors negatively influencing this evaluation. Leslie’s primary language is English. Her ethnicity is identified as Asian and White. Racial, and ethnic background were considered prior to selection and interpretation of evaluation procedures and measures. Additionally, assessment instruments are considered valid and reliable based on the norm-referenced groups for each standardized test administered. However, all assessment procedures measure a limited sample of a person’s total repertoire.

IV. Summary of Interviews and Observations (summarize results of observations over different settings where the child is displaying the problem behaviors/health concerns/academic concerns to determine where and when support is needed).

Interviews and observations indicated that Leslie is most successful in the RSP classroom where instruction is at her academic level and she receives more support in a smaller group setting. Leslie herself is keenly aware that she is less successful in the general education classroom.

Leslie is distractible in general, but her distractibility becomes more obvious and disruptive in the general education classroom. In the RSP classroom, a more intensive behavior management system is in place in which Leslie can earn points for on-task behavior and asking for help. This system supports her use of appropriate behaviors. Mr. Smith indicates that he needs additional support with Leslie as he is “running out of ideas.”

Leslie was observed to be on-task during structured activities such as reading a chapter with a peer buddy and performing her role in a small collaborative group in the general education classroom as the “materials manager.” When instruction or tasks became less structured, Leslie appeared to become confused about what she was supposed to be doing and was either quietly off-task or disruptive. Her disruptions came in the form of off-topic questions or comments to her peer group. Leslie did not appear to know how to ask for help when she did not know what to do. She received negative attention from peers for disrupting the collaborative group.

A review of the rubric indicated No Concerns in Health/Personal Care. Moderate concerns were noted in Behavior (e.g., has problems following directions and behaving appropriately without a BIP). Significant concerns were noted in the following areas: Instruction (e.g., difficulty participating in a large group and requires low student/staff ratio).

V. Summary of Standardized and/or Curriculum-Based Assessments (if applicable)

N/A

VI. Recommendations (include information regarding the need for specialized services, materials, and equipment; indicate if the student’s needs can be met in the regular education classroom with the current level of support)

Mr. Smith and Ms. Keyser work together to modify the general education curriculum for Leslie; however, both have reported that this is a challenging task. Leslie does benefit from access to the general education curriculum, but due to her delayed reading comprehension abilities, it is often difficult for her to benefit from the activities in the general education classroom without significant support. In the RSP classroom, Leslie thrives under the guidance of Ms. Keyser and Ms. Petry. She works well in small groups, has shown progress, and enjoys her time in RSP. Leslie does not demonstrate the level of distractibility or off-task behavior in RSP that is observable in the general education classroom. When offered tasks at her instructional level, with support made available as needed, Leslie’s on-task behavior increases significantly.

It is therefore the recommendation of this evaluator that Leslie requires additional support in the general education environment to focus on her increasing time on task, to work on the development of her ability to ask for help when needed, and to participate independently in the general education environment. Leslie does not require additional support in the RSP setting to make progress towards her IEP goals and Objectives. She also does not require additional support during recess or lunch, once she has chosen her meal. Finally, it is recommended that Mr. Smith receive training in and implement the Behavior Intervention Plan that has been developed.

Time/Subject Area	Support Needed (Ratio, equipment, materials, etc.)	Does support require additional staff? (please check)
8:00 - 9:20 General Education	Arrive, put away backpack, circle time, and self-help skills	<input type="checkbox"/>
8:20 - 9:00 General Education	Center rotations, including OT and Speech	<input type="checkbox"/>
9:00 - 10:00 RSP	Language Arts activities, small group, adult support 1:1	<input type="checkbox"/>
10:00 - 10:30 RSP	Whole group technology/sensory tools, 2:1 adult support	<input type="checkbox"/>
10:30 - 11:00 RSP	Math lesson and activities, 2:1 support	<input type="checkbox"/>
11:00 - 11:30	Lunch Recess 3:1 adult support	<input type="checkbox"/>
12:00 -12:45 General Education	Science Volunteer adult support/buddy reading	<input type="checkbox"/>
12:45 - 1:00 General Education	Recess 3:1 adult support	<input type="checkbox"/>
1:00 - 2:00 General Education	Social Studies peer support as reading buddy	<input type="checkbox"/>
2:00 - 2:20 General Education	Get ready to leave, pack, get homework	<input type="checkbox"/>

VII. Independence/Fade Plan (The Independence/Fade Plan is written to specifically address the needs of the student, current supports, schedule for assistance, and details for implementing and fading the support).

GOALS <i>(What are the replacement behaviors and/or academic goals for the</i>	Baselines
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<i>student?)</i>	
By December 2017, Leslie will demonstrate on task behavior for 10 consecutive minutes independently on 4 of 5 trials in the general education setting as measured by teacher data.	10 consecutive minutes on 1 of 5 trials in the general education setting

VIII. Steps to Independence/Fade Plan (Describe the activities or environments where the replacement behaviors should occur).

1) Procedures: (What will be taught so the student learns the replacement behavior/skills? *Use task analysis of skill development.	1a) Arrangements: (Where/when/materials)	1b) Level of support: (Description of how and who support changes as student independence increases) Prompting; type; frequency; proximity of personnel; role of teacher/IA
Leslie should be able to complete small group and independent work during timed activity centers in the special ed. setting. In the general ed. setting, she will be given points on a daily data sheet by the SCIA support staff every ten minutes for on task behavior and following directions during independent work time. She will receive bonus points for asking for help using her “help card” and for turning in homework. Points awarded will be converted to Leslie receiving time for preferred activities (i.e., puzzles, working with a friend) within the general ed. setting as agreed by the general and special ed. teachers.	Positive reinforcements will be determined between the special ed. and general ed. teachers and Leslie. A “help card” will be placed at Leslie’s desk. Daily time interval data sheets will be used to monitor on-task behaviors during independent work. A timer will be used to keep track of time intervals.	The SCIA support staff will document time intervals and prompt and reinforce desired behavior. She will share behavioral data with the general ed. teacher to determine earned positive reinforcements.
2) Measurement/Progress Monitoring Method:	2a) Decision Rule: (How will the data be evaluated to determine if intervention is working?)	
	Data will be collected weekly and reviewed to measure the frequency that Leslie exhibits on-task behaviors within 10-minute intervals during independent time in the general ed. setting.	
3) What are the adaptations/accommodations that will be used to promote and sustain independence?:	2b) Criteria for fading and a description of the level of SCI support:	
The SCIA support staff will monitor Leslie’s on-task behavior during independent work using the daily data collection sheets.	<p>1. Leslie will demonstrate on-task behaviors for 10 consecutive minutes independently 2 out of 5 trials in the general ed. setting over a two week period as measured by teacher data. SCIA support staff will remain in close proximity, documenting on-task behaviors during independent work and using verbal, visual, and gestural prompts as necessary.</p> <p>2. Leslie will demonstrate on-task behaviors for 10 consecutive minutes independently on 3 out of 5 trials in the general ed. setting over a two week period as measured by teacher data. SCIA support staff will begin to fade proximity and function more like a classroom aide when Leslie is successful. She will continue to document on-task behaviors during independent work and use verbal, visual, and gestural prompts as necessary.</p> <p>3. Leslie will demonstrate on-task behaviors to 10 consecutive minutes independently on 4 out of 5 trials in the general ed. setting over a two week period as measured by teacher data. SCIA support staff will fade proximity and function more like a classroom aide when Leslie is successful.</p>	
<ul style="list-style-type: none"> • Help card will be available • Use of verbal, visual, and gestural prompts • Begin to increase length of timer interval for documenting on-task behaviors • Maintain positive reinforcements 		

Submitted by: _____

This plan will use a least-to-most prompting procedure: a) Visual prompt (task analysis), gestural prompt, verbal prompt, partial physical prompt (light tap on the elbow), and physical assistance.

Each Monday, staff will review the task analysis on how to eat independently, and have RP engage in the role-play to demonstrate each individual step. Staff will provide RP with specific feedback and encouragement to engage in behaviors. RP will be reminded daily of expected behavior while referencing the task analysis visual 5 minutes before lunch time.

Fading Plan:

RP currently requires up to an average of 40 verbal or full physical prompts during lunch time to partially eat his lunch.

Month 1: The aide will provide verbal and/or physical prompting 100% of the time to establish and maintain the replacement behavior.

Month 2: The aide will reduce the number of full physical prompts to no more than 30 daily.

Month 3: Reduce the number of full physical prompts to no more than 20 daily, and transferring the prompts to regular staff by having regular staff implement the prompts.

*The team will reconvene and discuss level of support if the number of full physical prompts exceed 20 daily for five consecutive days, or if student is successfully meeting the fading targets.

List reinforcement procedures needed for 1) establishing, 2) maintaining, and 3) generalizing the replacement behavior(s)?

If RP feeds himself independently (no physical assistance) when verbally or gesturally prompted to eat his food, RP will be provided with specific praise (“Nice job eating lunch.”; “That’s a great bite!”) and a preferred edible (e.g., casein/gluten free preferred snack) will be provided immediately.

If RP does not respond to the verbal prompt within 1 minute and needs to be physically assisted to feed himself, staff would still provide a specific praise (“Nice bite.”), but no edible reinforcer.

If RP throws the food or utensil, use the next more intrusive prompt level (physical assistance) to show him the steps required to eat his food. No reward or praise should be given if he throws his food or utensil. RP should be encouraged to try again.

Selection of reinforcer based on: Parent input

RESPONSE TO PROBLEM BEHAVIOR, PART IV: STRATEGIES

Student Behaviors	Staff Response
<p>Student early escalation behaviors may include:</p> <p>RP scans the cafeteria and begins to play with his food with a fork, picking at it. RP will also look or stare at his neighbor’s food.</p>	<p>Staff response to early escalation behaviors may include: <i>(e.g. prompting relaxation strategies, offering distractions)</i></p> <p>Remind RP verbally to eat his food (“RP, please eat your food.”) and wait about 1 minute. After 1 minute, remind RP of reinforcer and use full physical assistance to show him what is expected while verbalizing the steps to expected behavior. Immediately praise RP for any expected behaviors or close approximations to the alternative behavior.</p>
<p>Student behaviors during problem behavior may include:</p> <p>RP throws his food and utensils and gets up from his seat and begins to run away from the area.</p>	<p>Staff response during problem behavior may include: <i>(e.g. monitor for safety, one step directions, neutral tone and affect)</i></p> <p>Using a neutral tone of voice, remind RP verbally of earning reward for eating his food. Verbally tell other students nearby to give him space.</p>
<p>Student behaviors during de-escalation may include:</p>	<p>Staff response to promote de-escalation may include: <i>(e.g.</i></p>

<p>RP returns and joins the class. RP may eat some of his food if the class is still in the cafeteria.</p>	<p><i>model deep breathing, encouragement</i></p> <p>Praise RP for all appropriate behaviors (e.g., "Thank you for joining us.").</p>
<p>Student behaviors during post incident may include:</p> <p>RP is calm and following staff directions, re-engaging in instruction or completing some work.</p>	<p>Post incident strategies may include: <i>(e.g. offer choices, refrain from discussing consequences)</i></p> <p>Staff will avoid discussing the incident in length. Staff will remind student of reinforcer if he is able to eat his food and refrain from leaving the area. Staff will model for the student how to eat independently and review the individual steps. Staff will have the student demonstrate each step through a role-play and correct any errors by providing specific feedback. Student will be redirected to the next activity.</p>

Behavioral Goal(s) are part of the student's IEP. See Goal(s) numbered: 1 and 2.