



Committee on Special Education

A Procedural Manual for Teacher's Aides in Special Education

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Table of Contents

Professionalism	3
Role of Teachers and Teacher's Aides	4
Working with Students with Health and Physical Needs	7
Characteristics and Instructional Strategies for Specific Disabilities.....	9
Accommodations and Modifications	16
Student Communication.....	17
Positive Behavioral Strategies and Supports	19
Strategies for Facilitating Student Independence	21
Inclusion Solutions.....	22
Suggested Questions about your Job Responsibilities.....	23
Common Terms and Definitions/Special Education Acronyms.....	24

Professionalism

- Present yourself as a positive role model for students.
- Represent GVCS in a positive manner.
- Consistently follow your schedule.
- Share relevant information with supervising teacher to facilitate problem solving, program planning, and student progress.
- If you have questions, seek answers and/or input.
- Discuss a student's progress or educational program only with the teachers who are responsible for that student's instruction.
- Discuss confidential school and student issues only with appropriate school personnel.
- Maintain a positive attitude.
- Refrain from talking about a student in the community.
- Understand and follow school policies and procedures.
- Maintain appropriate dress as advised by your administration. Be mindful of wearing safe shoes to perform duties (For example: lifting students and supporting in physical education class).
- Communication with parents is the teacher's responsibility. Refer parent inquiries regarding student progress to the student's teacher.
- Maintain student dignity by being discreet about students' physical needs.
- Refrain from discussing information about students in front of other students.
- Maintain a professional relationship with students at all times.
- Be flexible and willing to assist when and where needed.
- Seek opportunities for professional growth such as reading journal articles, attending available training sessions, and/or participating in staff development.
- Focus on what a student **CAN DO** rather than what he/she cannot do.

Role of Teachers and Teacher's Aides

I. Instruction

<i>Teacher's Role</i>	<i>Teacher's Aide Role</i>	
<p>*Determines appropriate objectives for individual students.</p> <p>*Develops and implements Individual Education Plans (IEP), which include goals, accommodations, and modifications.</p> <p>*Plans weekly schedules, lessons, room arrangement, learning centers, and activities for the entire class, as well as modifications and accommodations for students with IEP's.</p> <p>*Teaches lessons to the entire class, small groups, and individual students.</p> <p>*Administers and scores assessments.</p> <p>*Determines the appropriate use of assistive technology to meet the needs of students.</p> <p>*Develops data collection tools and collects data on student progress.</p> <p>*Develop, model, and/or provide detailed instruction on preparing instructional materials.</p>	<p>*Follows schedule and implements plans designed by teacher.</p> <p>*Implements student IEP goals, accommodations, and modifications as directed by the teacher.</p> <p>*Provides direct, individual assistance to student(s) so that they can participate, as independently as possible, in the least restrictive environment.</p> <p>*Implements student IEP goals, accommodations, and modifications as directed by the teacher.</p> <p>*Administers informal assessments under the direction of the teacher.</p> <p>*Facilitates the use of assistive technology.</p> <p>*Collects data on student progress as designated by the teacher.</p>	<p>*Provides assistance to individual students on completing follow-up or reinforcement activities.</p> <p>*Supports a student or small group of students during instruction.</p> <p>*Prepare instructional materials based on a model and/or detailed instructions provided by a teacher.</p> <p>*Assist with organization of student work samples and materials, as directed by the teacher.</p>

*Develop an organization system to manage student work samples and materials.		
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II. Behavior and Social Support

<i>Teacher's Role</i>	<i>Teacher's Aide Role</i>
<p>*Observes behavior and implements Behavior Intervention Plans and strategies for the entire class and for individual students.</p> <p>*Facilitates appropriate social interactions between students.</p> <p>*Develops data collection tools and collects data on student behavior.</p>	<p>*Implements and supports behavior plans and strategies under teacher direction.</p> <p>*Facilitates appropriate social interactions between students.</p> <p>*Collects data on classroom behavior as designated by the teacher.</p>

III. Communication

<i>Teacher's Role</i>	<i>Teacher's Aide Role</i>
<p>*Communicates with administrators, related service providers, general education teachers, and appropriate staff regarding student progress.</p> <p>*Communicates with parents regarding student progress.</p>	<p>*Communicates with case manager or teacher regarding student progress.</p>

IV. Personal Care

<i>Teacher's Role</i>	<i>Teacher's Aide Role</i>
*Provides personal assistance to students, as needed, to address mobility, positioning, personal care, daily activities, and utilizing the restroom.	*Provide personal assistance to students, as needed, to address mobility, positioning, personal care, daily activities, and utilizing the restroom.

These are intended only as examples of the various types of job duties to be performed. The omission of specific duties does not exclude them from the position if the work is a similar or related to the position. Duties may be assigned by the building principal.

Working with Students with Health and Physical Needs

Health and Safety Practices

- Seek training from the school nurse on Universal Precautions.
- Practice universal precautions at all times to protect yourself and others.
- Wear gloves when coming into contact with bodily fluids. (Changing diapers, feeding, wiping noses, etc.)
- Use proper handwashing techniques to protect yourself and others, before and after assisting with feeding, or when coming into contact with bodily fluids. Wash with soap and water for at least 15 seconds.
- Seek input and training from the school nurse concerning the health procedures for specific students.
- Clean materials and items mouthed by students only with a safe cleaner.
- Call for a custodian to clean blood, vomit, urine, and bowel spills.
- Follow the proper disposal of diapers recommended by your school nurse and custodians.
- Place soiled clothes in a double lined plastic bag and seal tightly.
- Alert nurse of any skin breakdown or rash noted during diapering.

Self-Care Strategies

- Always be discreet when assisting with the self-care needs of students. Carry diapers and supplies to the bathroom in a bag.
- Provide supervision of self-care skills as needed yet allow for privacy when appropriate.
- Discuss IEP goals related to self-care skills with teacher and reinforce throughout the school day.
- Independence should be encouraged and taught while assisting a student with self-care skills. Allow the student to do as much as possible while completing self-care tasks. It will take longer in the beginning; however, it will pay off as the student becomes more independent!
- Occupational therapists may provide guidance on toileting, feeding, and dressing strategies.

Mobility

- Seek training from the Physical Therapist, Occupational Therapists, and/or Special Education Teacher concerning lifting and positioning for specific students.
- Encourage independence of students.
- Be aware of evacuation plan for students using walkers/crutches or wheelchairs.

Medical Issues - Students with medical issues have an individualized health care plan. Discuss the specifics of the plan with the special educator and school nurse prior to working with the student. The protocols for specific students may vary.

- **Seizures – General Guidelines** - The protocols for specific students may vary. Consult with the special educator and nurse prior to working with the students.
 - Determine who is prone to have seizures.
 - Discuss the following with the nurse/special educator: the typical nature, length of time of seizures, and protocol to follow for particular students.
 - Stay calm!
 - Take note of the time that the seizure started, clear area/protect from injury, do not leave student unattended, do not try to restrict motor movements of the seizure, do not place anything in student's mouth, and call for the nurse if necessary.
 - If student falls to the floor, position student on his side.
 - Observe and be prepared to describe the pattern of the seizure, i.e. what part of the body was affected, type of movement, and length of seizure.
 - When the seizure is over, allow the student to rest. Document the nature and length of time of the seizure, report to special educator and/or nurse as directed.
- **Allergies- General Guidelines-** The symptoms and protocols for specific students may vary. Consult with the special educator and nurse prior to working with the students.
 - **Allergic Reactions**
 - ✎ Become aware of symptoms of allergies such as respiratory problems, swelling of face, lips or tongue, rashes on the skin, hives, or vomiting, and report to the school nurse.
 - ✎ Become aware of procedures for students in need of an Epi Pen. The school nurse will provide instruction.
 - **Food Allergies**
 - ✎ Become aware of the food allergies of students you are feeding or are assisting with feeding. This information may be obtained from the school nurse.
 - ✎ Become aware of symptoms of food allergies such as respiratory problems, swelling of face, lips or tongue, rashes on the skin, hives, or vomiting, and report to the school nurse immediately.
 - **Latex Allergies**
 - ✎ Wear non-latex gloves for students with latex allergies. Latex may be included in gloves, band-aides, balloons, rubber bands, paint, glue, and erasers.

Characteristics and Instructional Strategies for Specific Disabilities

***Educational disabilities include Autism, Deaf-Blindness, Emotional Disturbance, Hearing Impairment, Learning Disability, Intellectual Disability, Multiple Disabilities, Orthopedic Impairment, Speech or Language Impairment, Traumatic Brain Injury, or Visual Impairment (Including Blindness). This is a general list of characteristics and instructional strategies of the most common disabilities that may or may not apply to all students with each disability. Please seek input from the teachers you work with to discover additional information that will assist you in meeting the unique needs of our students.*

Other Health Impairment

(Includes Attention Deficit Hyperactive Disorder)

Other Health Impairment means having limited strength, vitality or alertness, which includes a heightened alertness to environmental stimuli. This results in limited alertness with respect to the educational environment, which is due to chronic or acute health problems. ADHD is a neurobiological disorder. Children with ADHD typically have developmentally inappropriate behavior, including hyperactivity, inattention, and impulsivity and occur in several settings such as home, school, and extra-curricular activities.

General Characteristics may include:

- Hyperactivity
- Distractibility
- Inattention
- Impulsivity
- Social skills deficit
- Difficulty focusing
- Poor organization of materials and thoughts
- Fails to give attention to detail and makes careless mistakes
- Varied perception of time (difficult tasks may seem like they take a very long time while preferred tasks maintain their attention for longer periods of time)
- Difficulty following through with directions and completing assignments
- Difficulty with problem solving

Instructional Strategies:

- Minimize distractions
- Provide uncluttered workspace
- Provide structure and routine
- Provide organizational tools and strategies
- Provide visual and graphic organizers
- Break tasks into smaller segments
- Highlight important ideas
- Color coding
- Use of timers and providing reminders of remaining time to complete an assignment

- Modified instruction
- Set behavioral expectations
- Provide structured breaks between assignments
- Allow for movement opportunities
- Active learning
- Use of fidget objects and wiggle cushions

Autism

A developmental disability that significantly affects verbal and nonverbal communication and social interaction.

General Characteristics May Include:

- Verbal and nonverbal communication deficit
- Narrow interests with stereotyped behaviors
- Resistance to environmental change and daily routines
- Engage in repetitive activities (repeating a phrase/story or performing same motor task over and over)
- Literal and concrete thinker
- Unusual responses to sensory experiences
- Varying levels of intelligence and ability
- Difficulty with social interaction skills
- Motor difficulties

Instructional Strategies:

- Obtain the student's attention before giving a direction or talking with the student.
- Provide structure, consistency, and routine.
- Allow enough time for the student to respond.
- Reduce amount of talking to the student.
- Provide choices for students when possible.
- Use visual supports (objects, photos, picture, symbols, gestures, or sign language) to increase understanding.
- Prepare students for transitions and changes in schedule or routine (ex. use of a picture schedule or visual timer).
- Avoid using idioms, words with double meanings, and sarcasm.
- Allow the use of sensory objects when appropriate.

Emotional Disturbance (ED)

Characterized by one or more of the following: a student's inability to learn that cannot be explained by intellectual, sensory, or health factors; an inability to build or maintain satisfactory interpersonal relationships; inappropriate types of behavior or feelings under normal circumstances; general pervasive mood of unhappiness or depression or a tendency to develop physical symptoms of fear associated with personal or school problems.

General Characteristics May Include:

- Inappropriate types of behavior or feelings
- Uncooperative
- Resists authority
- Poor coping skills
- Poor social skills
- Poor self-control
- Aggressive behavior
- Anxiety
- Withdrawn
- Low Self-Esteem
- Difficulty with social skills and interacting with peers and adults

Instructional Strategies:

- Set clear rules, boundaries, and expectations.
- Learn what might trigger a student's behavior and work with the student to prevent or deescalate the behaviors.
- Avoid power struggles.
- Provide choices of two things you want them to do.
- Encourage the use of self-control strategies (ex. deep breathing, counting backwards)
- Consistently follow the behavior plan or behavior strategies recommended by the teacher.
- NEVER use physical restraint unless you have completed Crisis Prevention Intervention (CPI) training.
- Refrain from "rehashing past behavior."

Deafness

Students have a wide range of hearing loss. The term deafness implies that a person has a very severe hearing impairment and relies primarily on lip reading or sign language for communication.

General Characteristics May Include:

- Language and speech delay
- Different voice characteristics
- May misunderstand information presented
- Difficulty understanding concepts that are not concrete
- Takes things literally

Instructional Strategies:

- Use of visuals
- Gain the student's attention before speaking
- Face the student when talking
- Speak clearly and at a normal pace

- Be sure the student is seated close to the speaker
- Allow time for the student to respond

Intellectual Disability

A significant overall delay in thinking, communicating, and performing daily life skills.

General Characteristics May Include:

- Requiring more time and repetition to learn things
- May have difficulties with fine and gross motor
- Delayed academic skills
- May have delayed speech and language
- Adult assistance or supervision for activities of daily living (toileting, dressing, feeding)

Instructional Strategies:

- Multi-sensory approach (sandpaper letters, gross motor activities, etc.)
- Use of visual supports (objects, photos, picture, symbols, gestures, or sign language) to increase understanding
- Scaffolding (identify what they know and build on previously learned skills)
- Provide structure and establish routines
- Modeling (showing them how to complete a task, providing model of completed task)
- Allow extra time for response
- Break tasks/assignments into down into smaller segments
- Need assistance or supervision for activities of daily living
- Use redirection and frequent positive reinforcement
- Modified and/or alternative curriculum

Orthopedic Impairment

Physical (motor) difficulties in mobility, writing, and or sitting.

General Characteristics May Include:

- Limited movement and functioning of arms and/or legs
- Involuntary movements (cannot control)
- May need assistance with activities of daily living (toileting, dressing, feeding, etc.)

Instructional Strategies:

- Remove or accommodate barriers for student
- Allow students to be as independent as possible
- Speak to the person on their level (sit down if they are in a wheelchair)
- Allow enough time for student to respond, complete activities
- Ensure proper positioning for access and comfort prior to instruction

Learning Disability (SLD)

A disorder in one or more basic psychological processes involved in understanding or using language, spoken or written, that may manifest itself ability to listen, think, speak, read, spell, or do mathematical calculations.

General Characteristics May Include:

- Have difficulty in one or more academic area, yet may be strong in other areas
- Difficulty processing information either visually or through spoken language
- Average or above average intelligence
- Distractible
- Easily frustrated
- Inattention
- Social skills deficit

Instructional Strategies:

- Use the student's strengths to work on difficult areas.
- Chunking (ex. breaking assignments down into smaller, more manageable tasks)
- Allow extra time for response
- Graphic organizers
- Visual organizers
- Use of strategies (Example: COPS Capitalization, Overall Appearance, Punctuation, Spelling)
- Multi-sensory approach (sandpaper letters, gross motor activities, etc.)
- Scaffolding (Identify what they know and build on previously learned skills)
- Color coding
- Use of timers and providing reminders of remaining time to complete an assignment
- Modified instruction

Speech/Language Impairment

Difficulty in understanding or expressing language, stuttering, or using unusual voice characteristics.

General Characteristics May Include:

- Delay in language concepts (sentence length, vocabulary)
- Poor pragmatic (social language)
- Difficulty understanding when speaking

Instructional Strategies:

- Model good speech and language

- Allow students to communicate as independently as possible utilizing their mode(s) of communication (verbal, sign language, picture symbols, augmentative communication device/voice output device, computer, etc.).
- Ask student to repeat if you did not understand or express in a different way.
- Allow enough time for student to respond.
- Use visual supports (objects, photos, picture, symbols, gestures, or sign language) to increase understanding.

Traumatic Brain Injury (TBI)

An injury to the brain that adversely affects a student's educational performance.

General Characteristics May Include:

- Impairment may be in one or more of the following areas: cognition, language, memory, attention, reasoning, abstract thinking, judgment, problem solving, motor abilities, processing, and speech
- May need assistance with activities of daily living (toileting, dressing, feeding)
- Anxiety of coping with the loss of skills prior to injury

Instructional Strategies:

- Use simple and concrete language, but maintain high expectations
- Repetition of skills
- Modeling
- Break tasks/assignments into down into smaller segments

Visual Impairment

An impairment in vision which adversely affects a student's educational performance. A visual impairment includes partial sight and blindness.

General Characteristics May Include:

- May tire easily visually
- Sensitivity to light
- May have difficulty finding materials
- Difficulty with mobility
- Poor depth perception

Instructional Strategies:

- Close proximity to teacher and instructional materials
- Enlarged print

- Multi-Sensory (hearing, touch)
- Assistive Tech devices (talking calculators, dome magnifier)
- Light boards
- Organized workspace
- Reduce glare
- Use pens or markers vs. pencil
- Slant boards
- Contrast of color/use of contrasting backgrounds

Deaf-Blindness

Deaf-Blindness includes concomitant hearing and visual impairments, the combination of which causes severe communication and other developmental and educational needs that cannot be accommodated in special education programs solely for students with deafness or students with blindness.

Multiple Disabilities

Multiple -Disabilities means concomitant impairments (such as intellectual disability-blindness, intellectual disability-orthopedic impairment, etc.), the combination of which cause such severe educational needs that they cannot be accommodated in a special education program solely for one of the impairments. The term does not include Deaf-Blindness.

Hearing Impairment


Hearing Impairment means an impairment in hearing, whether permanent or fluctuating, that adversely affects the child's educational performance. This is not included under the definition of deafness in this section.

Accommodations and Modifications

Accommodations and modifications are types of adaptations that are made to the environment, curriculum, instruction, or assessment practices in order for students with disabilities to be successful learners and to participate actively with other students in the general education classroom and in school-wide activities. Specific accommodations and modifications are identified and approved for students by the CSE Committee. The special education teacher will share the specific accommodations and modifications for each student to be successful. As an aide, you will assist in providing the appropriate accommodations and modifications in academic settings.

***Accommodations change how a student learns while a modification changes what a student is expected to learn.**

Student Communication

Types of Communication	Strategies	Materials and Resources
<p>Verbal</p> <p><i>*This student communicates through oral language independently.</i></p>	<p>*Provide simple, clear, directions.</p>	
<p>Verbal with Prompting</p> <p><i>*This student communicates in simple words or short phrases. The child will need prompts to generate language.</i></p>	<p>*Use visuals, gestures, or sign language.</p> <p>*Provide simple and concise language.</p>	
<p>Sign Language</p> <p><i>*This student may use sign language expressively and/or receptively to assist with comprehension.</i></p>	<p>*Consult with the special educator, speech therapist, or Teacher of the Deaf/ASL Interpreter for direction to assist student.</p> <p>*Sign language is sometimes used as a strategy to increase receptive language (understanding).</p>	
<p>Augmentative Communication/Assistive Technology</p> <p><i>*This student has limited, unintelligible, or no verbal communication. The student utilizes the voice output devices for expressive communication.</i></p>	<p>*Model use of the device in the beginning.</p> <p>*Provide opportunities for the students to use the device for responding.</p> <p>*Make sure the device is available to the student at all appropriate times.</p>	

Keys to Effective Communication:

- Maintain close proximity and use a low volume when communicating with students.
- Provide clear and simply stated directions of what you expect the child to do instead of telling them what you don't want them to do.
- Repeat back to the student what you think they are saying to clarify what the student means.
- Some children may require a model, picture, or sign of the action paired with the verbal direction.
- Use age-appropriate language when speaking with students. Encourage students to use age-appropriate language.
- Allow students time to communicate independently using their mode(s) of communication.
- Allow for extra processing and response time.

For example:

Instead of saying:	Say/Model	Reinforce
"No yelling!"	<ul style="list-style-type: none">• "Use a calm voice."• "Use an inside voice."	<ul style="list-style-type: none">• "Please speak in a low voice while talking. Now I can listen, you are using a quiet voice."• "Nice job using your inside voice."
"Don't run!"	<ul style="list-style-type: none">• "We walk in the hallway."• "Use walking feet."• "Walk please."	<ul style="list-style-type: none">• "I like the way you're walking." "Thanks for walking!"
"Stop calling out!"	<ul style="list-style-type: none">• "Raise your hand." "When you raise your hand, the teacher will answer your question."	<ul style="list-style-type: none">• "Thank you for raising your hand."• "I like the way you raised your hand to share your ideas."

Positive Behavioral Strategies and Supports

- Behavior is a means of communication. Consider what the student is trying to tell you with the behavior. Is she hungry? Is he frustrated? Is he trying to get attention? Is she trying to escape the demand? Is he sick?
- Behind most behaviors exists a skill deficit.
 - Language and social difficulties
 - Sensory processing difficulties
 - Academic and writing skill deficits
 - Difficulties managing stress and anxiety
 - Attention difficulties
 - Difficulties handling transition and change
 - Difficulties with self-esteem
 - Organizational difficulties
- Consistently implement classroom and individual student behavior plans created by the teacher and/or CSE Committee.
- Remind students of expectations prior to the transition of an activity.
- Be cognizant of triggers/antecedents (what happens prior to the behavior occurring) that may lead to inappropriate behavior.
- Communicate with the teacher regarding student behaviors within a reasonable time frame.
- Encourage, expect, and reinforce age-appropriate behavior, even with students with lower cognitive abilities.
- Be proactive when assisting with behavior management. Provide structure and routine in an environment that is conducive to learning.
- When communicating with students, state directions and expectations in a simple, explicit, and positive manner. Tell the students what they are supposed to do. For instance, instead of saying “Don’t run,” say “Please walk in the halls.”
- Offer students choices to avoid a power struggle. Rather than say “Don’t tap your pencil,” state “Would you rather put your pencil in your pencil case or in your desk?”
- Provide and encourage association with appropriate peer role models.

- Avoid overreacting to inappropriate behavior. Some students may be reinforced by negative attention, which may increase inappropriate behaviors.
- When possible, ignore attention seeking behaviors that are not disruptive to the classroom.
- Diffuse stressful situations for students through redirection and distraction when appropriate.
- Provide positive reinforcement. Avoid focusing on punitive consequences or loss of privileges.
- When offering positive reinforcement, state what you like about the behavior. Rather than just saying say “good job,” state “I like the way you raised your hand to participate.”
- Avoid discussing incidents of behavior that occurred in the past.
- Physical intervention is used as a last resort. This intervention is utilized only by those trained in Crisis Prevention Intervention. Must complete documentation if physical intervention is used.
- Avoid personalizing student behavior and language.
- Focus on the positive!

Strategies for Facilitating Student Independence

- Increasing learner independence is the instructional goal for every student! Encourage students to be independent rather than dependent.
- Encourage and allow students to make choices and decisions.
- Encourage students to complete activity as independently as possible prior to offering support.
- Allow student work to be authentic.
- Allow students to make mistakes and experience natural consequences unless there is a safety issue.
- When appropriate, sit or stand at a distance from the student who requires additional adult support.

Inclusion Solutions

Research supports students with disabilities learn best with their typical peers in the general classroom with accommodations and modifications. Our goal, in alignment with federal and state law, is for students to be included in the general education classroom to the fullest extent possible.

Tips for Supporting Students in the General Education Classroom

- Implement the appropriate accommodations, modifications, and lesson plans provided by the special education teacher for specific students.
- Become familiar with the content of the unit/course. Ask the teacher for clarification about the material when needed.
- Provide students with opportunities to ask questions and respond utilizing their mode(s) of communication (verbal, sign language, picture symbols, and assistive technology).
- Implement the classroom and/or individual behavior plan when the student is in the general education setting.
- Provide feedback and data to the teachers related to academic progress, work habits, and behavior.
- Encourage students to become as independent as possible when following classroom routines.
- Avoid hovering over the student you are supporting. Facilitate student independence by varying the amount of support, monitoring, and prompting based on the need and independence level of the student.
- Assist with other students who need help, on occasion, not singling out the students who receive special education services.
- Be mindful of the volume of your voice in the general education classroom so as you provide direction; it does not distract other students.
- Communicate with teachers about a plan to remove the student from the general education classroom if he is distracting students or needs a break. Discuss ahead of time with the teacher the expectations if a student needs to be removed from the classroom. Where should we go? What alternative activity should the student engage in? How long the student should be removed from the classroom? What are the criteria for the student to return to the classroom? Who do I call for help?
- Encourage students to interact with peers and develop peer relationships.
 - When working with students with limited cognition, social skills, or verbal ability, get to know the interests of your student and classmates to share common interests with each other.
 - Select appropriate peer role models to work with or assist a student with a task, when appropriate.

Suggested Questions about your Job Responsibilities

- Who are the students I will be supporting?
- What are the schedules of students I am supporting?
- What is my schedule?
- Are there student medical issues that I need to know prior to working with individual students?
- What are the school-wide and classroom behavior systems?
- Does a student have a Behavior Intervention Plan? If so, what are the target behaviors, rewards, and consequences?
- What are the safety considerations for individual students?
- How does the student communicate? What strategies are effective in communicating with the student?
- Can we discuss the IEP Snapshot (summary of IEP goals, objectives, accommodations, and modifications)?
- How will we communicate about instructional plans for the students I support?
- How will we communicate about student progress?
- When will we meet to discuss student successes and concerns?
- What strategies and techniques are effective when working with particular students?
- What level of prompting does a student need to complete assignments?
- What can I do to help facilitate student independence?
- What can I do to assist with facilitating peer relationships?
- What level of supervision/support does the student need for the activity?

Common Terms and Definitions/Special Education

Acronyms

Adapted Physical Education (APE) – A related service for children who exhibit delays in motor development in addition to or in place of physical education including modifications of activities so students may participate more fully in physical education class.

Assistive Technology (AT) – Any item, piece of equipment, or product, which is used to increase, maintain, or improve functional capabilities of students with disabilities.

Behavior Intervention Plan (BIP) – A plan including target behaviors, behavioral strategies, positive reinforcement, and consequences for student behaviors. The plan is designed to teach students to demonstrate appropriate behavior and social skills.

Extended School Year Services (ESY) – Special education and related services provided during the summer. The purpose of ESY is to prevent a child with a disability from losing previously learned skills. The IEP team approves ESY goals for the student to work on. Not all students receiving special education services qualify to receive ESY.

Fine Motor – Motor skills related to the small muscle groups such as handwriting, using both hands to complete tasks, and buttoning.

Gross Motor – Motor skills related to the large muscle groups such as walking, sitting, and jumping.

Individual Education Program (IEP) – An Individualized Education Program (IEP) is the educational program that has been designed to meet that child's unique needs. Each child who receives special education and related services has an IEP. The IEP is developed by teachers, parents, school administrators, related services personnel, and students (when age appropriate). It includes educational goals and objectives, modifications and accommodations, documents progress, and defines the services and placement of the student.

Least Restrictive Environment (LRE) – The educational placement that is close as possible to the general education environment that permits a child to receive the most educational benefit while participating in a regular educational environment to the maximum extent appropriate.

Occupational Therapist (OT) – Works with students to improve fine motor skills and meaningful activities of daily life such as self-care skills, education, recreation, or work.

Physical Therapist (PT) – Works with students to improve gross motor skills (large muscle groups) and mobility.

Special Education – Specialized instruction to fit the unique learning strengths and needs of students with disabilities. A major goal of special education is to teach the skills and knowledge the child needs to be as independent as possible. Special education programs focus on academics and include therapies and related services.

Speech and Language Therapist – Provides therapy to help a student develop or improve articulation (pronunciation), communication skills, pragmatics (social skills), and oral-motor skills.

Common Acronyms:

ADHD	Attention Deficit Disorder
ASD	Autism Spectrum Disorder
AT	Assistive Technology
APE	Adaptive Physical Education
ASL	American Sign Language
BIP	Behavior Intervention Plan
CP	Cerebral Palsy
ED	Emotional Disturbance
ESY	Extended School Year
IEP	Individual Education Program
LRE	Least Restrictive Environment
PT	Physical Therapy
RTI	Response to Intervention