



**ONE CLASSROOM™**  
INCLUSIVE CATHOLIC EDUCATION

# Manual for the Inclusion of Children with Disabilities in Catholic Schools

Created in March of 2020  
By M. Colleen Mooney, M.A.



## Acknowledgements

This manual is a labor of love, created with guidance of many people.

Tony and LeeAnn Armitage, founders of the One Classroom Foundation, were the driving force in creating this document. Without their passion for inclusion and extraordinary love for all of God's children, this manual would not have been possible.

Gratitude also belongs to Bridget Harr, Dr. Katy Schierding, Dr. Michael Boyle, Tom Mooney, and Pat and Peggy Sly who live and breathe inclusion. Their advice, time, and perspectives were invaluable in creating this document.

A special thanks goes to Dr. Stephanie Mahfood at Webster University for opening my eyes to inclusion and all of its possibilities.

## Dedication

First and foremost, this manual is dedicated to Jesus Christ. We are nothing without Him and are grateful for the guidance He has given us in living out His will through inclusion.

Secondly, we dedicate this manual to Christopher and Johnny, who are created perfectly by God. Their lives are a gift beyond value. They have helped us see the world the way God intended, finding joy in the simple pleasures of His creations.



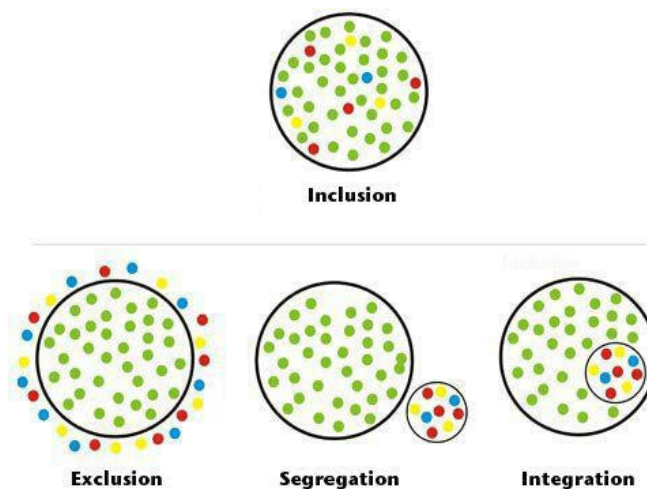
## Preface

Inclusive education is educating individuals with physical or intellectual disabilities in the general educational classroom, shoulder to shoulder, with their same-age peers. Whatever individualized needs a student may have are addressed in the classroom and not by segregating the student from their peer environment.

Students are educated in the context of an "inclusive service delivery model" that may include curriculum modifications, support from the special education teacher, peer supports, a paraprofessional, and classroom teacher. Ultimately inclusive education is about providing a differentiated education that "meets the child where they are" and not asking a child to adapt to a system. The expectation is not that the student necessarily maintains the same academic pace as typical peers, rather that the student maintains progress towards their individual potential.

A large body of research demonstrates that children educated in inclusive environments achieve higher academic gains and achieve more success after high school. There have been no studies since the 1970's showing better outcomes for students with significant disabilities when they are educated in separate classrooms. Research also demonstrates that typical peers also experience improved academic outcomes and social development.

This manual has been written to guide parishes, teachers, administrators, and parents in the process and ministry of inclusion. As Catholics, we are called to include all of God's children in our schools and community. It has been asked of us by the US Council of Catholic Bishops as early as 1978, by Pope Francis, and through the actions of our savior, Jesus Christ. The gospels and the example of our Lord Jesus Christ provide clear and unequivocal instruction to provide for the disabled and disadvantaged. Again and again our Lord Jesus Christ demonstrates His love and a direct, personal, physical commitment to care for the sick, the lame, and those less fortunate. Inspired by the Holy Spirit, One Classroom supports our Catholic schools and Christ's church to provide education for children with disabilities.



## Quick Start Guide

Getting your school ready for inclusion is not a quick process, but there are some basic things to know before getting started. Many of these things you are already doing in your school. This list is a good starting point in order to discover which chapters of the manual you can skip over and which to dive deeper into.

1. Pray. Inclusion requires a lot of help from our savior, Jesus Christ. Let Him and the Holy Spirit guide you through this process.
2. Understand what inclusion is. Inclusion is educating children with disabilities side by side with typically developing peers. Special education teachers collaborate with general education teachers to benefit all of the students in the classroom.
3. You need a leader. Someone in your building with special education experience, from your staff or community, needs to lead the charge on getting systems in place that will benefit all students. The principal and pastor need to be supportive of this initiative.
4. Become experts in communication. Being transparent on the process of inclusion with all parishioners, parents, teachers, and staff is imperative. Let people know that inclusion is a ministry to benefit *all* stakeholders. Listen to concerns and show empathy and grace. Provide staff with the training they are asking for.
5. Identify children who are struggling. This is done through the Care Team process described in chapter 10 for existing students or through admissions as discussed in chapter 6.
6. Document what the struggles are for a student. Show your teachers what data needs to be collected on a student and brought to Care Team in order for the meetings to be efficient and successful. See chapters 10 and 20.
7. Figure out the level of support necessary to meet each child's needs. See chapters 10, 11, 14, and 18.
8. Establish what personnel is needed. Now that you know the children in your building and what their needs are, the principal needs to staff accordingly. See chapters 8 and 15 for more information.
9. Get outside help when you need it. There are resources within One Classroom and your community who can get your school on the right track.

# Table of Contents

1. Where to begin
2. Leadership
3. Collaboration and communication within a school
4. Communication, grace, and empathy towards parents
5. Health and safety
6. Admissions
7. The Economics of Inclusion In Catholic Schools
8. Human resources needed for inclusion
9. Beginning and end of the year procedures
10. Care team/ RTI
11. Goal setting/ student plans
12. Faith formation
13. School-wide initiatives
14. What classroom teachers need to know
15. Decision making for related services
16. Paraprofessional training and collaboration
17. Behavior management
18. Accommodations and modifications
19. Peer relationships and problem solving
20. Taking data
21. Universal Design for Learning
22. General information on common disabilities
23. Appendix (hard copies of forms, links are in each chapter)
24. References

## Appendix

- A. Sample letter to parishioners about inclusion
- B. Letter overcoming concerns about inclusion
- C. School-wide implementation checklist
- D. School-wide collaboration scorecard
- E. Daily communication sample
- F. Sample individual health plan
- G. Classroom teacher pre-referral checklist
- H. Sample parent permission letter for Care Team
- I. Authorization for release of records
- J. Care Team meeting planner
- K. Student information sheet
- L. Caseload responsibilities
- M. End of the year checklist
- N. End of the year parent letter
- O. Sample standards based report card
- P. Sample narrative report card
- Q. Sample individual learning plan
- R. Para-educator Expectations Discussion List
- S. Paraprofessional Preferences Survey
- T. Nine types of modifications and adaptations
- U. Inclusion Pro Forma Estimates

# Chapter 1

## Where to begin



### This chapter will offer:

- How do I develop buy-in with my pastor, principal, teachers, or parents in my school?
- What are we qualified to handle?
- What are the four steps to inclusion?
- Why should we do this in our parish?
- Where are the children?
- Inclusion in action
- Forms

### Introduction

**For I know the plans I have for you,” declares the LORD, “plans to prosper you and not to harm you, plans to give you hope and a future.**

Jeremiah 29:11

Catholic schools tend to know that including children with disabilities is the “right thing to do,” however, most don’t know where to begin. The task can seem overwhelming and daunting, filled with worry over other stakeholders like current students, parents, and teachers. Empathy and understanding needs to be in place for everyone involved. Change can be hard, however with proper planning and a leap of faith, children with disabilities can be included in our Catholic schools, reaping the benefits of inclusion academically, socially, and spiritually. The question needs to change from “Why should we include students with disabilities?” to “Why would we *not* include students with disabilities?”

### Did you know...?

- The US Council of Catholic bishops issued a *mandate* in 1978 on people with disabilities and how financial concerns should never be a reason not to include someone with disabilities in our parishes, churches or schools.
- There is strong evidence to support that *typically developing* peers benefit academically and socially from being in an inclusive classroom due to there being peer models and experts in academic areas in supporting other students with disabilities (Gupta, S., Henninger, W., & Vinh, M., 2014).



- Exposing typically-developing children to people with disabilities from a young age normalizes the diversity of all of God’s children and leads to a more pro-life attitude into adulthood.
- A research study from 2013 of more than 1,300 students between the ages of 6 and 9 years old within 180 school districts found that there is a strong positive correlation between the amount of time a child with disabilities spends in general education and achievement in math and reading (Cosier, M., Causton-Theoharis, J., & Theoharis, G. 2013).

## **How do I develop buy-in with my pastor, principal, teachers, or parents in my school?**

Keep the work of inclusion focused on Christ and emphasize that this is a life issue. Create events to share your message of faith and inclusion within your parish like seminars, professional development, lunches, bus trips to inclusive Catholic schools, and coffee chats. The most powerful way to get the message across is to let people see it for themselves. If they can’t visit an inclusive school, show videos. Remember that knowledge helps people overcome fears and inspires to action.

Identify early on the influencers in your parish, and make them early adopters. An early adopter is any parish member, teacher, pastor, administrator, or friend who believes in the ministry of inclusion. A few key people on board can help a message of inclusion spread rapidly and positively. Creating awareness and posing the question of, “Why *aren’t* we doing this?” plants the first seeds, because unless inclusion affects a person directly, it probably wouldn’t occur to them to do it. Give people a specific task to get them involved. This could be anything from requesting a contact to asking someone to take notes at the upcoming inclusion team meeting.

Don’t forget your Parish School of Religion (PSR) program because there may be families in that program that wish they could attend the parish school but because of a child with a disability, they attend public school. Speak with the parish CRE/ DRE to see if he or she is aware of any families of children attending PSR that have disabilities. These families might be praying for an opportunity for their children to attend Catholic schools.

## **What are we qualified to handle?**

Before answering this question, careful inventory needs to be taken of current parishioners, teachers, staff members, and parents to develop a toolbox of specialists that can help implement inclusion in the parish school. Are there parishioners with a background in systems development, special education, related service providers like speech, marketing, or being a parish influencer? Looking for these specialists and early adopters in the first phase of implementation will be helpful in positively developing buy-in for the parish as a whole but also in saving money and streamlining the process.

Funding should also be explored in the early phase of implementation in order to head off any roadblocks down the line. Grants through the archdiocese, the Special Education Foundation, One Classroom, and others foundations are a good starting point, with a goal of at least 3 avenues explored. Also federal and state funding through IDEA and the local school district

should be considered. However, parishes need to begin with their own financial situation and examine the ministry of what they are doing, keeping in mind that inclusion gets less expensive with time and is mandated by our US Council of Catholic Bishops.

## **What are the four steps to inclusion?**

Meeting the needs of all of your learners, whether their disability is mild or significant, can be accomplished in four steps. Meeting the needs of children with mild disabilities will come naturally after putting specific systems in place to include all of the children in your parish. This will lead to more students in your school, and in turn, more tuition dollars to sustain it.

These steps are:

1. **Identifying** children who are struggling
2. **Documenting** what the struggles are
3. Figuring out the **level of support** necessary to meet that child's needs
4. Establishing what **personnel** is needed

Step one can be established through the Care Team process which is further explored in chapter 10. This is a way for teachers to identify students who are struggling in any domain and brainstorm solutions as a team to help that child.

Step two is gathering the data and information about a child that would be helpful to the Care Team in order to make the best decisions to help. This might be test scores, attendance records, homework completion rates, or office referrals. Data must be gathered before a child can be brought to the Care Team in order for informed decisions to be made. See chapter 20 on Taking Data for more information.

Step three is figuring out what level of support each child needs, based on data. This could mean having a resource teacher/ learning consultant pushing in for math class, pulling a child out for reading, providing a paraprofessional, or any other solution to give each child what he or she needs. See chapter 10 on Care Team/ RTI for more information on levels of support.

The final step is deciding what personnel the school needs in order to meet the needs of their student population. This is based on the needs of your students each year. See chapter 8 for more information on Human Resources Needed for Inclusion.

## **Why should we do this in our parish school?**

The public school approach to inclusion and to providing for children with special needs is based on a "system" approach. The system is a vast infrastructure that requires funding to maintain itself. The services the system provides are based on federal funding. Without supporting the system first, there are no services. The child with special needs becomes the vehicle by which funding is achieved. When using a medical model, the focus is on the child's deficiencies and diagnosis as a means to capture funding. The system approach focuses on deficiencies and not capabilities, with the goal of getting funding and "fixing" the student before they enter society.

Private schools have the flexibility of not having funding dependent on a diagnosis. In this context the child comes first. People don't belong in "systems", they belong to themselves, families, and communities. All children have strengths and less so deficiencies. Instead of servicing someone in a system, the focus shifts to how to support students in their peer environment and to live good lives within the community. Systems aren't all bad, but they tend to be wired for their own self-interest at the expense of the person. So instead of a person fitting into a system, private schools have the opportunity to ensure their resources adapt to the needs of a person.

## **Where are the children? Numbers and facts**

- The archdiocese of St. Louis includes 107 elementary schools, serving 23,000 children (source: archstl.org)
- About 1 in 70 children worldwide have significant disabilities
- This results in about 328 children with significant needs in the St. Louis area that are not being served by their home parish
- An average Catholic family has 3 children. This means that when we say no to a child with a significant disability, the school typically loses the other children in the family as well. In the St. Louis area alone, theoretically, there are almost 1,000 children attending public schools whose parents would prefer them in Catholic schools.
- About 1 in 7 children have a diagnosed learning challenge. Are they being included in your school?

## **Inclusion in action**

Matt and Katie have two children, Michael and Sarah. Michael is in preschool and is on the autism spectrum. His parents have taken a leap of faith and enrolled him in their local, parish preschool. They had several meetings with the inclusion leadership team within the parish before making the decision, and though they are very nervous, they know what they are doing for Michael and the other people in the school is an important ministry and are willing to be patient and help the school learn and grow. Neither Matt and Katie or the school feel completely “ready” to take this leap of faith, but they know they are called to do so and will be guided by the Holy Spirit along the way.

On Michael's first day of preschool, his parents drop him off and say a prayer that all goes well. They are nervous and a bit teary as many preschool parents can be, but the weight of this drop off seems heavier than most. When Michael arrives in the classroom, he immediately gravitates towards the blocks. At the block center he encounters another preschooler named Liam. Initially Liam and Michael have limited interactions, especially given Michael's limited social skills due to his autism. However, the teachers notice Michael's strength in building and interest in blocks and use that to teach Michael social skills as he builds. When Michael needs a block, the teachers model and encourage proper language to ask Liam for a block. Because this is Liam's first time in school as well, this becomes his norm, and he doesn't see Michael any differently than the other children.

Every morning Michael and Liam head for the block center. Each week, Michael's vocabulary and social skills are building with peer modeling and help from his teachers. Also each week,

Liam's confidence and leadership skills are building as he unknowingly becomes a peer model for Michael. Michael's parents are breathing easier seeing him blossom and develop the social skills they had been praying for. A weight is being lifted from their shoulders.

At the school Christmas party in December, Matt and Katie approach Liam's parents to tell them what a difference Liam has made in their lives and in Michael's. Surprisingly to them, Liam's mom voiced how concerned they were about Liam starting school because of his lack of self-confidence and what a difference they have seen since becoming friends with Michael and unknowingly being a leader. Hearing the word "friend" used to describe their son is almost too much for Matt and Katie, as any parent of a child with a disability would understand. The impact Michael has made on his family's life has been significant and vast, but to hear about the impact he is making on the lives of others is a gift to his parents, knowing that their seemingly small ministry is making such a big difference.

## **Forms**

- Letter sent to parishioners to explain the ministry of inclusion (appendix A)  
<https://documentcloud.adobe.com/link/track?uri=urn%3Aaaid%3Ascds%3AUS%3A17257da9-ce1a-4881-ba08-f089227fd946>
- Overcoming concerns (One Classroom letter) (appendix B)  
<https://documentcloud.adobe.com/link/track?uri=urn%3Aaaid%3Ascds%3AUS%3A3b55e642-0f1d-4638-9faf-aaa52c3a4a23>

## Chapter 2 Leadership



### **This chapter will offer:**

- Who is leading the special committee on inclusion and what is his/her role?
- What are appropriate team roles and responsibilities?
- How do we develop policy?
- Inclusion in action
- Further reading

### **Introduction**

**Where there is no guidance, a people falls, but in an abundance of counselors there is safety.**

Proverbs 11:14

An effective leader will be the person who can delegate and implement an inclusion plan for the school. Without a leader, the plan will stall, and children will get lost in the process. A leader in the ministry of inclusion is imperative to make inclusion a reality in our schools.

### **Did you know...?**

- Research shows that the most successful inclusive Catholic schools have one effective leader trained in special education
- According to the National Catholic Educational Association, the number of students with disabilities in Catholic schools across the country has increased by almost 20,000 over the past three years

### **Who is leading the special committee on inclusion and what is his or her role?**

The *team leader* initially is the person leading the path towards inclusion. This might be an administrator, pastor, or parent who sees inclusion as a ministry of the church and gathers others to spread the message. The number one job of this person is to spread awareness throughout the community and provide learning opportunities for all. As others get on board and a parish is ready to get started, this role might shift to the learning consultant/ resource teacher who is trained in special education to ensure that the needs of the child are at the forefront. A parish school needs to assign this role explicitly in order to ensure success. The leader is responsible for

assessing the needs of the child and school, figuring out how to meet those needs, and delegating tasks appropriately to other team members or staff.

Throughout this manual, you will see the terms “learning consultant/ resource teacher” used interchangeably, though really they serve different purposes. A learning consultant is traditionally used to consult with teachers in order to help them serve their students better. A resource teacher is traditionally more hands on with students, pulling out or pushing in as needed, and communicating with parents and teachers directly. It is the opinion of the author that the resource teacher model is most effective in delivering what students need directly, while taking most of the load off of classroom teachers. However, in the St. Louis area, learning consultants are most common which is why we include the term in this manual.

## **What are appropriate team roles and responsibilities?**

When a parish decides to explore the path to inclusion, a special team needs to be established solely for the purpose of inclusion. The team should include the pastor, principal, learning consultants/ resource teachers, at least 2 classroom teachers, an outside inclusion specialist, and several parents/ parish members who are influential and involved. It is important to include these early adopters in all progress and updates so that information can be spread to parishioners accurately and in a timely manner. Word of intent should be spread at masses and other parish events to build excitement and ministry.

The team should meet at least monthly in the year leading up to welcoming students with disabilities, with their strategy carefully mapped out. All meetings should include an agenda with new business, old business, follow up, role assignments, and action items. Each meeting should include a learning opportunity with guest speakers or school visits made into a priority.

A forward plan should be developed and broken into weekly or monthly benchmarks to keep the team on task and moving ahead. Policies should also be created at this point clearly defining how the team will work together including scope, boundaries, and alignment for all stakeholders. All concerns should be addressed at the beginning stages of implementation in order to clearly and consistently communicate with other parish members.

Empathy and faith need to be at the forefront of every meeting. Keeping in mind that change can be difficult and using the Holy Spirit to guide us; the team needs to be cognizant of the feelings of all stakeholders. Inclusion is a new concept to many of the stakeholders involved. People need time to process what it means to them. All thoughts should be addressed thoughtfully and with care, treating everyone in a Christ-like manner.

## **How do we develop policy?**

Policies in several domains will need to be created so that everyone is on the same page and is treated fairly.

1. The first policy that should be in place is on classroom supports and professional development. Training for peer mentors, paraprofessionals, teachers, lunch staff, and any staff member who will be in contact with students should happen regularly and with

fidelity. Training should be based on student needs. The inclusion team leader should be regularly taking needs assessments from staff members to figure out what kind of instructional supports are needed, and training should be scheduled at least monthly.

2. The next policy that needs to be developed is a statement addressing the admission of students with disabilities and how the school is able to serve them. A clear admissions policy will need to be created with the input of all stakeholders on the special inclusion team. The policy should address current and prospective students, what supports are available, and forms needed such as evaluations or medical information. Parent role in the admissions policy also needs to be clearly defined. What are the parent's expectations of the school? Will the school consider accepting students from outside of the parish? From non-active parishioners? Does the school require testing through the local school district or will they do their own evaluations? What about current students who are struggling? Is there a policy in place for existing students? All of these things should be thoughtfully and prayerfully considered, keeping in mind staff abilities, parent expectations, and resources.
3. A third policy to consider is a student's individualized learning plan. Learning plans should be strength based with long and short term learning goals. It is up to the school as to how to get data on goals and how often to report data to parents. The advantage of Catholic schools is that these decisions should be based on the needs of the child and not a rigid law. See the chapter on goal setting for more information.

## **Inclusion in Action**

Jill is a learning consultant in her parish school. She has been in this position for 5 years and loves her job, but is growing frustrated seeing children and families slowly trickle away to the public school system, especially in the transition from preschool to kindergarten. Jill is passionate about her faith and inclusion but feels her hands are tied because she can't do it alone.

Paula and Mark are parents to one of the children whose needs are too great for the parish school and were asked to leave after preschool. However, Paula and Mark are not giving up and are looking for others with the same mindset.

Jill is crushed to see another family leave and reaches out to Paula and Mark. Together they decide to start planting the seeds of inclusion. They begin by gathering early adopters from the parish to spread the message of "Why not?" These early adopters are friends, parish influencers, fellow teachers, and neighbors who, when hearing the message of inclusion, start believing in the ministry.

Jill, Paula, and Mark attend parish events to spread their message purposefully and gracefully. They get their pastor on board to talk about inclusion at masses. When there is a lull in events, they create their own get togethers. When many seeds have been planted, they organize a bus trip to several Catholic schools that are doing inclusion well.

The morning of the bus trip, there is nervous energy. No one knows what to expect. Thirty people show up, including the pastor and school principal. "Come, Holy Spirit," is the prayer that Jill, Paula, and Mark pray constantly throughout the morning. When the bus arrives at the first school, they are greeted by an enthusiastic principal who admittedly was not on board with

inclusion until he witnessed it himself. He didn't know the first thing about special education or how to pay for it and was scared to jump in. He took a leap of faith and was glad he did. As they enter the school, the energy immediately relaxes. The first classroom they saw included a little boy with Down Syndrome, sitting at a desk side by side with his peers during a reading lesson. There was nothing complicated about it. He was just another boy in the classroom. Tears filled the eyes of most of the visitors with the realization that this was not a complex issue, this little boy with Down Syndrome was not viewed differently by his peers. He was just a little boy. They stood witnessing in silence for several minutes. It all made sense.

After seeing two other schools with similar stories, the bus ride home was quiet and reflective. Seeing is believing, though blind faith is what we are called to do.

The next week, Jill, Mark, and Paula were called in for a meeting with the school principal and pastor. They were now believers. It was time to get started!

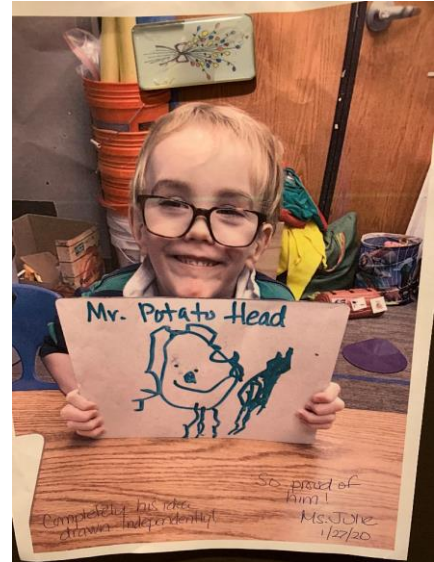
### **Further reading**

See Dr. Michael Boyle's book, *Ensuring a Place at the Table: Serving Students with Disabilities in Catholic Schools*, chapter 5, for further reading on policies. For the full reference, see the reference section at the end of the manual.



# Chapter 3

## Collaboration and Communication Strategies within a School



### This chapter will offer:

- Why is communication and collaboration essential to the success of the students?
- What are effective ways to communicate within a building?
- How do we collaborate and who should be involved?
- Inclusion in action
- Forms

### Introduction

“Two are better than one; because they have a good reward for their labor.”

Ecclesiastes 4:9

When working with children with significant learning needs, we need to keep in mind that in order to serve them properly, there should be several staff members or volunteers contributing their expertise and strengths for the success of the child and all children in the classroom. About 20% of our students have some sort of learning difference, and *general education teachers have not been trained to teach these students*. That means that without collaboration, we are only teaching 80% of our students.

### Did you know...?

- Collaboration among teachers “emerged as a response to the reauthorization of the Individuals with Disabilities Education Act (2004) and Every Student Succeeds Act (2015), which call for quality teaching and encourage inclusive education” (Alsarawi, 2019).
- Lack of time is cited as the biggest obstacle to collaboration amongst teachers and staff (Alsarawi, 2019).
- Most general education teachers have only received one semester long course in teaching exceptional children, covering gifted education to special education in a few short weeks.

## **Why is communication and collaboration essential to the success of students?**

“In this day and age there is simply too much for any one educator to know in order to effectively meet the needs of all his or her students” (Friend, 2002.) It is crucial to draw upon the strengths of those in your building and parish in order to more effectively teach our students. We should realize that our students, teachers and staff have gifts beyond the job they are paid to do. Use these gifts to benefit all. Teaching has historically been a territorial and isolating profession, with one teacher responsible for meeting the needs of every child in the class, but the reality is that when teachers have an approach that requires students and parents to adapt to their methods, we are not teaching the entire class of students. The goal of your school is not to teach 80% of your class, it is to teach everyone.

Collaboration among educators and staff needs to become the norm in school buildings and not looked upon as a failure but instead as a way of reaching all students. Is there a teacher in the building who went to Williamsburg this summer on vacation? Have he or she share those experiences with the 5th grade studying American history. Does your custodian play in a band on the weekends? Have him play his instrument during lunch. Administrators should be building collaboration time into the schedule because when we are teaching diverse learners from all corners of the educational spectrum, collaboration is a necessity.

## **What are effective ways to communicate within a building?**

1. **Lesson plan sharing** - Sometimes teachers get territorial with lessons and ideas that they have created, and rightly so when so much time goes into something, however some of the most effective schools keep an electronic database or file folders of lessons that teachers have used for various learning goals or adaptations and modifications for lessons that are required. Credit is given on the lesson to the creator of it, but files are available to the entire staff in a database, teachers’ lounge, or common area.
2. **Apps** like Group Me allow text-like messages to be sent to a predetermined group. This might be effective for beginning of the day updates for paras, special education teachers, related service providers, and classroom teachers to communicate quickly about a particular child like, “Heads up, Johnny has a bad cold today and is really sleepy.”
3. **Email** - Email might be effective for classroom teachers sending weekly lesson plans to paras and special education teachers to help with modifications and to know what is coming that week. Be cautious when using email for sensitive matters because tone can get misconstrued. Save harder conversations for face to face meetings.
4. **Regularly scheduled collaboration meetings** - These meetings should be scheduled weekly to go over what is working and what is not, upcoming schedule changes or big events, lesson planning, and goal updates.
5. **Professional development** - Professional development meetings should always build in time to collaborate with other teachers. Groups should be mixed up to share thoughts and strengths, even if it is just a 15 minute check in about that month’s topic.
6. **Book clubs** - Book clubs can be done at lunch time, professional development meetings, or over email. Reading a book together is a great way to start conversations and help people share.

7. **Co-teaching** - Co-teaching is one of the greatest untapped resources in Catholic education. Having two teachers in a classroom with different personalities and skill sets can all but ensure that all students are being reached. We can take advantage of dwindling class sizes in Catholic schools by combining classes or even grade levels to reach all learners for particular lessons. While it is not always financially feasible to have two teachers in a classroom, it is possible to combine 2 classes of students together for a lesson or to bring in the learning consultant/ resource teacher to teach with with classroom teacher. This means planning together and executing the lesson together, letting each teacher share his or her strengths in order to teach 100% of the students, not just 80%.

## **How do we collaborate and who should be involved?**

The key person in making collaboration possible is the principal (Friend, 2002). The principal is in charge of scheduling and school climate, both of which are important for collaboration. If teachers tend to keep to themselves or small groups, initiatives can be created to encourage working together like lunch hour book clubs reading books about collaboration, developing committees to make school wide decisions with problem solving training worked in, or bringing in a consultant on a professional development day.

Being that lack of time is the biggest obstacle in collaboration, principals need to make planning time a priority and schedule it in for teachers at least weekly. The principal can cover a class or schedule someone who can so that teachers and specialists can meet and learn from each other. At these meetings, a *leader* should be chosen in advance to write the agenda and send it out along with relevant materials ahead of the meeting in order to make the best use of time. Another role should be a *time-keeper* who keeps track of times on the agenda and also brings the group back together if they get off topic. A *wrangler* is another role that should be pre-assigned to follow up on items that need further review.

When collaborating about a specific student, anyone relevant to the situation should be involved. This might be a Care Team issue or just problem solving about how to adapt a particular lesson. Collaboration does not need to be formal all the time, just chatting with another teacher in the hallway who does a really good job with behavior management about how to get your class to line up in a timely manner is a way to collaborate. The keys to collaboration are communication, climate, and time.

When discussing collaboration, parents should not be left out. Parents are critical in getting to know a child and how he or she learns best. Parent communication is discussed in another chapter, but it needs to be reemphasized here just how important it is to keep parents in the loop and part of the team.

## **Inclusion in action**

Mrs. McGrath is in her third year of teaching second grade at a Catholic school. Her class consisted of 24 students ranging in abilities from gifted to having a child with an intellectual disability. She believes in inclusion and collaboration, especially with partnering with parents, but her communication tends to be unscheduled and informal.

Jennifer is a parent to one of the children in Mrs. McGrath's class. Her son has an intellectual disability and needs collaboration from the resource teacher, a speech- language pathologist, and occupational therapist. Jennifer is growing frustrated because they only have two formal meetings a year to discuss her son's goals. She feels like there is no follow up in between and that too many people are involved. She voices her concerns to the principal.

The principal listens carefully to Jennifer's concerns and realizes that more explicit and scheduled meetings need to happen, with a leader to run the show. The principal calls Mrs. McGrath in for a meeting along with the rest of the team that is helping Jennifer's son. The principal will cover Mrs. McGrath's class during quiet reading time once a week so that the team can collaborate about how to best teach Jennifer's son and others who need extra help. These are not Care Team meetings that are used for early intervention, these are meetings to help specific, struggling students that are ongoing. These meetings allow for time to adapt lessons and get the whole team on the same page as far as goals and scope and sequence. He also gave the team their first agenda and related materials, as well as guidance on how to work together as a group. He assigned Mrs. McGrath to be the team leader, the resource teacher to be timekeeper assigned to keep the group on task and on time, and the speech-language therapist to be the wrangler to nudge people who have agreed to follow up on any relevant agenda items. The principal knows that the team all has the best interests of the students at heart, they just needed guidance in execution.

After a month of regular meetings and collaboration, the team is functioning much more effectively and has been able to help Jennifer's son as well as several others meet goals that were set. Jennifer and other parents are receiving weekly updates and follow-up, and the whole team is much happier knowing what he or she is responsible for. All it took was to have a small chunk of time devoted to collaborating each week and a leader to take charge.

## **Forms**

- This checklist can be used to check your school's progress. If you are "missing" or falling short on any items you should continually try to improve. (appendix C)  
[School-wide implementation phase 1](#)
- The next section of the checklist works similarly to the above, except it focuses on collaboration and communication within your parish and school. (appendix C)  
[School-wide collaboration scorecard](#)

# Chapter 4

## Communication, Grace, and Empathy Towards Parents



### **This chapter will offer:**

- How do I communicate effectively with parents?
- What might this look like in my classroom or school?
- Inclusion in action
- Forms
- Further reading

### **Introduction**

**“I did then what I knew how to do. Now that I know better, I do better.”**

Maya Angelou

Parents are one of the greatest assets that teachers have. Knowing how to communicate effectively and with grace can mean the difference between a good school year and a challenging one for the child. In order to serve all of our students, we need to team with parents in order to gain knowledge and create empathy in knowing where they are on the journey of having a child with a disability, where they have been, and where they want to go.

### **Did you know...?**

- Many children with genetic or chromosomal disorders also have many health issues that take priority for the family.
- It is normal for parents of children with disabilities to go through the stages of grief after their child is diagnosed and throughout his or her life.
- Parents of children with disabilities often feel more isolated than parents of typically developing children.
- If you see the family of a child with a disability missing from mass or parish activities, it might be due to isolation, embarrassment, or feeling a lack of belonging. Welcome that family back and allow grace for a child not behaving in the same manner a typically developing child might behave.

## **How do I communicate with parents?**

The best way to decide how to communicate with a child's parents is to ask the parents. Some prefer a daily log back and forth each day, while to others that is overwhelming. Some parents want only information on social interactions, some want math performance data, and others have health concerns. For example, for a child with intestinal issues, those parents might want daily communication on toileting and nothing else. Several options for communication should be presented as aligned with a child's goals and needs, and parents should have the final say in what works best for their family.

With today's advanced in technology, there are many communication options through apps. *Whatever apps or forms of communication are used for the rest of the child's class should be used for the child with a disability as well.* Sometimes that is enough, but often more information is needed. Apps like Class Dojo and Google Classroom make communication easy for large groups and also allow for personalization and one on one communication. A simple binder with print outs of the daily schedule, filled in with details and specifics of the day can be helpful to keep home and school consistent as well. Keeping things consistent makes the home to school / school to home transitions run more smoothly for all.

Each child should have an individualized plan with his or her specific goals and benchmarks over the course of the year. When this plan is created, it should also be noted how often the teachers will report to the parents on progress towards the goals and also in what manner. Will it be emailed? Will there be a meeting? Ask for parent input because sometimes hearing information and data about a child can be difficult for a parent to hear, even if good progress is being made. For a larger goal with several benchmarks, those benchmarks should be spread throughout the year, with updates given to parents as data is taken. Teachers should not wait until a mid-year or end of year meeting to report on whether or not a child is making progress. This should be done at least monthly, depending on the benchmark and its value to the child and his or her parents.

When any information is communicated to a parent about a child, it needs to be remembered that this child is a gift from God, who made him or her perfectly in His image, and that these parents have heard a lot about their child's challenges, which never gets easier to hear. Give information with grace and empathy, always communicating the good as well. Let the parents know that you see the whole child, and what a gift he or she is!

## **What might this look like in my classroom or school?**

There are different types of information that need to be reported to parents, and roles should be clear as to who is in charge of communicating what. Ultimately, it is the learning consultant or resource teacher who is considered the "team leader" for a particular child. This means it is his or her job to assign communication tasks accordingly. For example, if a paraprofessional is working with a child daily, the learning consultant or resource teacher should train the para as to what manner and how often the parents would like communication. Daily tasks, social skills, behavior charts, and basic reports of the day can all be handled by a para. However, any major issues or parent questions should be directed back to the learning consultant or resource teacher. Data on academic tasks or goals related to a child's individual plan should be reported by the learning consultant or resource teacher so that parents can ask any relevant questions and

get immediate answers. Classroom teachers should report to parents as often as they would any other child in their room. Hopefully this is often and with fidelity, but *all* classroom communication should go to *all* students in the class.

## **Inclusion in action**

The Smith family has 4 children, with the oldest three attending their local Catholic, parish school. Their youngest daughter, Kelly, was born with Down Syndrome and has been a part of the First Steps program through their local school district but is now ready for preschool. The Smiths would really like for Kelly to attend the local Catholic school but are scared about approaching the principal or pastor. This has been on their minds since Kelly was born and has weighed heavily. Since Kelly was born, the Smiths have only attended mass sporadically and have avoided parish events because Kelly has a difficult time sitting still and quietly and can not yet understand consequences. The Smiths feel isolated at times and wish someone would reach out.

Adding to their stress, Kelly is sick often and has been hospitalized several times for heart issues and seizures. Because of the severity of Kelly's health at times, the Smith family seems to act aloof to other people, only because they have the gift of perspective. Her occupational therapist has wondered sometimes why Kelly's parents aren't more consistent with putting on her SPIO, which is a compression vest to help with body awareness and sensory issues, not understanding that what a SPIO can do for Kelly is small potatoes compared to higher priority issues, like simply keeping her alive.

Before Kelly can attend preschool, she has to do testing through First Steps in cognitive abilities, motor skills, social and emotional skills, and adaptive behavior. Kelly's parents already know she is behind but are pleased with her progress. They see her as the beautiful little girl made perfectly in God's image, not for her disabilities. However, they have to sit through a meeting with several professionals to hear exactly how far behind she is and what she "should" be doing at her age. Even the most confident and loving parents get shaken by hearing information like this, and Kelly's parents are no exception. Because Kelly has tested so poorly, the Smiths decide to put Kelly in her local public school to receive services. The Smiths other children are upset at this news and ask to go to school with Kelly as well. The local Catholic school just lost 4 children (and 4 tuitions) because no one reached out to the Smiths who were allowed to feel isolated from their own church family.

## **Forms**

- Beach center family/ professional partnership scale  
This tool can be used to help families discover gaps in collaboration with school professionals and related service providers.  
<https://beachcenter.lsi.ku.edu/sites/default/files/2019-10/3.%20Beach%20Center%20Family-Professional%20Partnership%20Scale-With%20Edit.pdf>
- Daily communication samples and visual schedule sample (appendix E)  
<https://documentcloud.adobe.com/link/track?uri=urn%3Aaaid%3Ausc%3AUS%3A4f2842b2-5f43-4c34-864d-0a9679af1c34>

## **Further reading**

The Beach Center on Disability at the University of Kansas

[www.beachcenter.org](http://www.beachcenter.org)



# Chapter 5

## Health and Safety



### **This chapter will offer:**

- What do we need to think about for school wide drills?
- What should we know about abuse?
- How do we develop a plan for children with medical needs?
- Inclusion in action
- Forms
- Further reading

### **Introduction**

**“Do small things with great love.”**

Saint Teresa of Calcutta

There is a lot to think about when planning for the health and safety of students in our schools. This should be a top priority before the child ever sets foot inside your door. Does he or she have medical needs like epilepsy, allergies, asthma, or heart conditions that might affect day to day functioning? Are there emergency medications that should follow the child wherever he or she might go? How will that be done and who is responsible for it? What about natural disasters?

An easy question to answer is, “Who in the building should be trained to help a child with health or safety needs?” The answer is everyone. All staff should be aware and trained to help a child in a life threatening situation.

### **Did you know...?**

- One in three children with a disability are victims of some type of abuse
- One in ten neurotypical children are victims of some type of abuse
- Children with disabilities are almost three and a half times as likely to be abused than typical developing peers
- Fire and other safety drills often do not include students with disabilities, leaving them vulnerable to harm

(Davis, 2011)

## **What do we need to think about for school wide drills?**

A starting point in thinking about the safety of students with disabilities are natural disasters. Schools are required to have drills for tornadoes, fire, earthquakes, and intruders, but these sporadic drills will not be enough for most children with significant needs. For some children, loud noises and presumed chaos will cause panic, hiding, or eloping. These are events that need to be planned for, rehearsed, and revisited often. Social stories, videos, rehearsals, and skills assessments can all be helpful in these situations.

Here are some questions to consider when planning the day to day events for a child with disabilities. Can the child:

- Maintain silence?
- Follow directions very quickly?
- Maintain a position/location?
- Manage feelings of stress/frustration without acting out?
- Manage changes to schedule?
- Go without medications or medical support for several hours?
- Navigate the school quickly?
- Be part of a large crowd?
- Follow multi step directions quickly?
- Process directions quickly?
- Handle the sensory output from flashing lights or loud noise?

Chances are that most children with significant needs will not be able to do most of the things on this list, so a careful plan needs to be implemented to make sure these needs are being addressed, modified, accommodated, or remedied.

## **What should we know about abuse?**

Children with different types of disabilities are more vulnerable to different types of abuse. For example, children with emotional or behavior disorders are more likely to be physically abused, while children with speech and language disorders are more prone to neglect. Children with intellectual disabilities are more at risk for all three of the main types of abuse; neglect, physical, and sexual (Davis, 2011). Teachers and administrators are among many of the mandated reporters that are required by law in Missouri to report suspected abuse to authorities. Suspected abuse should be reported to local law enforcement or child protective services. Because of this and in order to keep our children safe, we need to be aware of the signs of abuse, especially for children that are non-verbal or don't communicate often.

Physical abuse can often be seen through marks on the body, bruises, broken bones, head injuries, etc. Other types of abuse usually manifest in behavior changes. This might be a normally outgoing child who seems to withdraw, toileting accidents for a child who normally does not have issues in that area or acting out or frightened in a way that is not normal for the child. Careful observation and documentation should be kept. However, keep in mind that many children with disabilities have other health concerns that can cause fragile bones, frequent bruising, or balance issues that might cause falls or injury. Get to know the child well and his or her health concerns. Communicate with the family often. Protecting God's Children is a training program that every adult in your school building should have taken in order to have contact with

any child. Safeguard your staff, volunteers, and children by making sure that more than one adult is in a room with a single child or keeping doors open if possible. Next to getting your students into heaven, keeping them safe is your number one job.

## **How do we develop a plan for children with medical needs?**

Most children with genetic or chromosomal disorders also have health issues that come with the given disorder. These could range from balance issues to heart conditions, with each bringing its own set of challenges to prepare for. Some medical conditions require emergency medication like Diastat for epilepsy or an inhaler for asthma. The important thing to keep in mind is that before the child begins at your school, you have received a complete medical history from parents and/or doctors so that a plan can be developed to keep the child safe.

If rescue medication is needed, you will need proper authorization to dispense it. This requires release forms. You will also need a plan of where to keep the rescue medication and who is trained to administer it. Long answer short, the medication should follow the child, and anyone who works with the child should be trained on how to use it. Many schools use a red backpack or fanny pack that is handed to each adult working with the child as the day goes on. The bag would contain action plans and medication as well as a communication device like a phone or walkie talkie to call for help. All plans should be in writing and signed by the child's doctor and parents to ensure that all stakeholders are on the same page.

Other medical concerns like orthopedic issues or low endurance should also be addressed and communicated. Teachers, paras, and related service providers need to be kept up to date on anything that will affect day to day functioning of a child. Accommodations or modifications should be made to help the student be successful. These issues and solutions should be addressed in a child's learning plan or separate medical plan.

## **Inclusion in action**

Patrick is a sixth grade boy with Down Syndrome. He loves being around peers, hearing stories, and playing kickball. One thing Patrick doesn't love is loud noise. Patrick's parents have known this from a young age and have shielded him as best as possible, but it doesn't always work. At school, Patrick does not attend assemblies because the noise from the whole school sets him into a panic, screaming and lashing out. Patrick's teachers are very accommodating to this need, but they are concerned because in the case of an emergency, it would be difficult for Patrick to stay safe because of the panic that sets in, along with his age and size.

The teachers at Patrick's school call his parents in for a meeting to brainstorm how best to keep him safe in the event of a natural disaster or intruder. The meeting is collaborative between all parties in order to come up with solutions that would work best for Patrick. The biggest initial concern is the noise that occurs with the drills or emergency events. Patrick's mom mentions that during fire drills at home, they have noise cancelling headphones that they put on as soon as possible after the sirens alarm. She said that it is a struggle getting them on, but as soon as they do, Patrick calms down. The group decided to keep a pair of headphones in the red emergency bag that Patrick's paraprofessional keeps with her at all times that has his inhaler and other emergency medicine, but they know they need a better long term plan as well.

The team is still concerned because getting Patrick to put the headphones on will be a struggle, and in certain situations, Patrick will need to be silent or exit the building immediately. So Patrick's teacher decides to write a social story for Patrick on each drill, with real photos from the school, displaying what exactly Patrick will do in each situation. It reads like a story book, and they read it everyday. Patrick loves seeing familiar photos of his school. She also gets recordings of any alarms that might sound, indicating an emergency, and plays them for Patrick with the social stories at a soft volume, gradually getting louder as weeks progress and as Patrick allows. As Patrick gets more comfortable with the sounds, the teacher decides to take a video of Patrick demonstrating each type of drill necessary, without sound. As Patrick gets more comfortable with the videos, she again adds the alarm sounds at gradually increasing volumes, as tolerated by Patrick. The next step is to have Patrick practice the drills without peers, then with a few peers, and finally with the school.

Patrick is now able to follow emergency procedures properly and safely with his peers. He even attends school-wide assemblies, with the option of his headphones, that he now does not always need.

## **Forms**

- Sample health and safety action plan for individual student (appendix F)  
[Sample individual health form](#)
- Social story for fire drills  
[https://kidmunicate.com/wp-content/uploads/2016/10/Social\\_Stories\\_Fire\\_Drills\\_1.pdf](https://kidmunicate.com/wp-content/uploads/2016/10/Social_Stories_Fire_Drills_1.pdf)

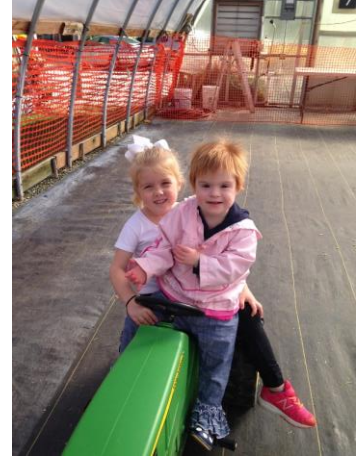
## **Further reading**

Pacer Center: Champions for Children with Disabilities  
<https://www.pacer.org/health/samplehealthplans.asp>

Everything you need to know about creating an Individual Health Plan video  
<https://youtu.be/7sKqOtIBYrU>

# Chapter 6

## Admissions



### **This chapter will offer:**

- What should we include in an admissions policy for new students with disabilities?
- How do we handle current students who are struggling?
- Inclusion in action
- Forms
- Further reading

### **Introduction**

**“Choose this day whom you will serve, but as for me and my house, we will serve the Lord.”**

Based on James 24:15

Establishing clear policies within your school about the process of accepting students with disabilities will provide an environment with less stress and clear expectations for all, knowing that every child will be considered fairly and individually as a child of God, made perfectly in His likeness.

### **Did you know...?**

- About 13% of public school students have disabilities, whereas in private schools only 4% of the student population has disabilities
- A study from 2006 showed that only 5.6% of Catholic high schools in the US serve students with intellectual disabilities
- Beginning in the early 1900s to 1960s, Catholic dioceses and religious orders began to establish *segregated* schools for students with specific disabilities.
- By the mid-1960s, over 70 *segregated* Catholic schools were in operation across the United States, with one in nearly every Catholic diocese

(Burke & Griffin, 2016)

## **What should we include in an admissions policy on for new students with disabilities?**

In thinking about an admissions policy for students with disabilities, it is important to note that as a Catholic school, we already know that we are called to accept all of God's children. The USCCB has mandated that we include people with disabilities in all aspects of our parish. Canon law states that, "it is the pastor's obligation to allow for catechetical formation for persons with disabilities." (Canon 773). Our Lord, Jesus Christ, told us to "Love our neighbor as ourselves." Expect miracles and let the Holy Spirit guide us. The point of an admissions policy is really to gather all of your resources and put procedures together in order to figure out how to best serve students with disabilities. This is done by getting to know the expectations of parents and learning how the child learns best. It is the responsibility of the specialized Inclusion Team created at the beginning steps of exploring inclusion to come up with a plan for admissions before they are faced with a child wanting to be included in his or her home parish.

Other things to consider...

- Is the family active and tithing?
- Do they live within parish boundaries?
- Do they have siblings in the school?
- What is the family's expectations for their child and the school?

These are all important considerations in that inclusion is a community act. We are including all children within the parish as one body. When considering inclusion for active, tithing parishioners, we know that the family is visible within the parish and already has the grace of the community behind them. The children we are welcoming are already part of the group and should not be considered part of a separate "program." They are God's children and belong with the rest of God's children in their home school.

### **Step By Step**

Once these factors are explored, the school can move forward in looking at each child individually as to how to best serve him or her in the school. Once a family has been identified as active parish members, the process can commence. The first step at this point should be meeting with the child's parents. This is a time to get to know the parent's expectations for their child and the school and hear about the child's strengths and goals. This is not a time to dive too deep into learning or medical challenges.

The second step would be to have the principal, learning consultant or resource teacher, and classroom teacher observe the child in his or her current learning or home environment. Proper permission would need to be given. This provides an opportunity to get to know the child as the person he or she was made by God to be, observe how he or she learns best, speak to current teachers or caregivers, and identify any concerns that might come up as far as having the child in your school. First and foremost though, is getting to know the child.

The next step would be to gather any existing academic data, medical needs, or other service plans and goals from the parents. It is important not to jump into this step first in order to give you time to see the child first in action. Keep in mind that many IEPs and evaluations are not

written in a positive light and information is sometimes exaggerated in order to get as many services as possible for the child. IEPs generate money for school districts and are not always student centered. Remembering the child as a person first will make this step less daunting.

After gathering all of this information, it is time to meet with the child's parents again presenting what your school can offer. **The only time educating a child in your parish school might not be appropriate is if you can not meet health or safety concerns.** Don't be afraid to see how far we can go in accepting the gift of inclusion. We can do great things together with God on our side. See the following video link to view how inclusion can work for a child with significant disabilities and health needs.

[Including Isaac](#)

## **How do we handle current students who are struggling?**

Best practices show that the Care Team model is the most effective way to reach struggling students in your school. This is a different path than the admissions policy just discussed on admitting students with known disabilities. This pathway is more for children without identified disabilities when they started at your school but might have a mild, identifiable disability now, or maybe they are just struggling in some domain. This usually pertains to children with ADHD or diagnosed learning disabilities who typically are not identified until around third grade or a child having behavior issues because of trauma at home.

A Care Team should be started in your school if you don't have one already. This should consist of the learning consultants/ resource teachers, a classroom teacher or two, principal, and maybe a counselor if you have one. Use whatever combination of people that makes the most sense for your school community. Other people can be brought in as needed based on a child's specific needs like a school nurse. Care Team meetings should be scheduled weekly to discuss the needs of children who are struggling, to come up with ways to help him or her. See the chapter on Care Team for more details.

## **Inclusion in action**

Dr. Burns is the new principal of a suburban, Catholic school. He is excited to start this new adventure, moving from a classroom teacher to administrator. As a teacher last year, he was made aware of a family within the parish who has a child named Henry with a rare genetic disorder that causes intellectual disability and other issues. The family has 2 other children in the school and asked last year for their youngest to be included in the kindergarten class this fall. The pastor and former principal handed it off to Dr. Burns to decide if they will be a part of this exciting ministry.

The first thing Dr. Burns is going to do is meet with Henry's parents to talk about Henry's strengths and their goals for him. He needs to make sure they are all on the same page about what the school is capable of providing and ensuring that it aligns with Henry's abilities and goals. After meeting with Henry's parents, Dr. Burns, the school learning consultant/ resource teacher, and a classroom teacher will get permission to observe Henry in his current preschool and talk to his current teachers about how he learns best. They will get to know Henry as a learner and little boy. After getting to know him better, Dr. Burns will gather any educational

data about Henry like a current IEP, evaluations, medical information, or service plans. For a new family, Dr. Burns would check that Henry's family is an active, tithing member of the parish, but since he knows the family already, this step is not needed. After gathering all of the information and discussing with the learning consultant/ resource teacher what the school can offer Henry, the parents are called back in to go over everything the school can provide for Henry. Dr. Burns has a great meeting with Henry's parents, and both parties conclude that this is the right place for him.

Because Dr. Burns methodically and carefully explored the expectations of Henry's parents and got to know Henry personally before looking at his evaluations, he was able to make a faith-filled decision to join the ministry of inclusion and provide Henry with an individualized, Catholic education with his siblings and peers. Dr. Burns is making a difference in the lives of Henry and his family as well as every other person who walks through the school doors.

## **Forms**

- Sample admissions policies  
[One Classroom Enrollment Policy Survey](#)
- Release of records form (appendix I)  
[Authorization for release of records](#)

## **Further reading**

See the following link to view the Catholic church's position on Pastor obligation to provide religious instruction to a person with a disability.

[Canon Law 773](#)



# Chapter 7

## The Economics of Inclusion in Catholic Schools



### **This chapter will offer:**

- What are the drivers of costs?
- What are the drivers of revenue?
- How does the dollar and cents play out over time?
- Avenues to funding inclusion?
- What are some examples of funding models?
- What is the parish's role in funding?
- References/ further reading

### **Introduction**

**Each of us is the result of a thought of God. Each of us is willed. Each of us is loved. Each of us is necessary.**

Pope Benedict XVI

Many Catholic schools are constrained financially, enrollment is decreasing, tuition is increasing. Many public schools are doing a better job teaching children with disabilities and so we are losing students and families. However, inclusion will help all of the children in the school learn better, attracting more students and more tuition dollars. Taking a leap of faith will pay off for your school, and our children are worth it.

### **Did you know...?**

- Research indicates that a majority of general education students test the same or better on standardized tests when they are educated in the same classroom environment as their disabled peers.
- It is less expensive to hire a paraprofessional to help in the classroom than it is to staff a self-contained classroom.

- According to the Inclusive Schools Network, “After over 25 years of working directly with schools and school districts in implementing inclusive practices, we have found that they typically already have sufficient resources available – they are just not being used effectively and efficiently. This leads us to **carefully re-examine how we are currently using the resources we have**; our certified special education teachers, paraeducators, related service personnel, reading and math specialists, and others. It is not unusual to find we are trying to apply 1960-style solutions to today’s needs in our schools.”

## Processes and Systems

From a “costs” perspective becoming “inclusive” manifests in two basic ways, the adoption of processes and systems and the addition of specialized human resources. What is true for both is that they impact the education of not just the newly included students with more significant special needs, but all students in the building. The results of the investment must be measured at the system level, and not incrementally at the level of students with disabilities. Becoming inclusive is about becoming a better school for all students.

As discussed in this manual, here are just a few examples of some of the processes and systems typical of well-run inclusive schools:

PBIS: Positive Behavior Supports and Interventions, or PBIS, is a three-tiered model of behavioral support that was derived from Applied Behavior Analysis, or ABA. PBIS is a school-wide initiative that engages all staff in focusing on positive behavior and being proactive to prevent behavior challenges.

UDL: Universal Design for Learning is a “research-based set of principles to guide the design of learning environments that are accessible and effective for *all*” (cast.org, 2018). UDL makes curriculum more accessible to all learners by allowing them to access and present learning in different ways.

Peer Supports: Peer supports refers to using peers in classrooms to facilitate learning, friendships, or social skills. Peer supports are used reciprocally and are viewed as a partnership between students.

Care Team/RTI: RTI is a multi-tiered system of support (MTSS) that can help learners at different levels. These initiatives cover behavior, social interactions, early intervention, and teaching methodology.

While the list above is only partial, what is apparent is that these processes apply to all students in the building. Close to 35% of catholic families have a child with a diagnosed learning challenge. By focusing only on the kids in the “middle” parochial schools are losing their ability to meet the needs of every child in a family. Ultimately the techniques employed to be successful with a child with disabilities are essentially the same as for meeting the needs of all learners.

## **Specialized Human Resources**

Specialized human resources, with skills in the area of special needs, are the second area of investment.

About 14% of students have a mild or moderate diagnosed learning challenge. Parochial schools do a reasonable job of enrolling these students. However, about 1 student in 70 has a more significant special need and these students are essentially absent from most parochial schools. GENERALLY, if a school becomes inclusive, students with these disabilities tend to access the schools early, before 3<sup>rd</sup> grade, and the youngest students, typically 4<sup>th</sup> grade or earlier, need the most direct support. As students mature they develop more functional independence and are better supported by maturing peer students.

A school would add a special education leader if one isn't already on staff, and as needed, a combination of volunteer and full or part-time para-professionals to provide direct support to children with these disabilities depending on the number and level of support required. All of these roles work directly with the children with these disabilities and with children with mild to moderate learning challenges, and with typically developing students. In a school of about 45 students per grade or a total enrollment of 400 students including a smaller pre-school and kindergarten, you would expect 56 students with diagnosed learning challenges of which 6-7 have more significant needs.

## **Economics, Dollars and Cents**

Processes and systems consume dollars spent on professional development, typically over the first 3 or 4 years, and specialized human resources are an ongoing expense with modest fluctuations should the number, or level of need of a child, change year to year. Economically speaking, the object of these investments is to include children with disabilities, encourage additional enrollments from siblings, neighbors and any student in need of a good education, and to improve the retention of students already enrolled. Appendix U is a guide that provides a simple way of looking at the progression of costs and revenues related to inclusive education and the enrollment and retention thresholds needed to “pay” for inclusion. The assumptions in this guide, such as employee costs or tuition, are taken directly from One Classroom's experience with schools and the grant requests we review.

The guide can be boiled down to the following key relationship: Inclusion not only accommodates the children with disabilities, but encourages enrollment of these children's siblings, and with the improvement in school performance, results in retaining at more children per grade, and enrolling more children per grade. Aside from the children with disabilities and their siblings, if a school is able to improve the number of students per grade by just .5 students the school breaks even and if they can add just 1 more students per grade inclusion generates positive cash flow. Real life experience tells us these required gains in enrollment are quite modest to the improvement in enrollment a school achieves as it is better able to meet the needs of its community.

## Fundraising and Resources

Inclusion in Catholic schools is growing in parish communities across the country. In many cases inclusion programs are isolated to a single parish, in others they are diocese wide initiatives. We have observed as many different approaches to funding as there are programs. One Classroom's granting activity is designed to help schools as they take those first steps in the early years. One Classroom is a fundraising organization, you may not be, you may need to learn to be.

Some parishes are fully self-sufficient, while others need incremental funding. Well run inclusion programs, properly understood and factoring in increased enrollment and retention, are self-sufficient. That being said many parishes may need seed or ongoing supplemental funding. Ideally, parish funding initiatives should be embraced and led by the pastor. Here are examples of incremental funding that your parish might consider:

1. *Parish-wide Stewardship:* Most parishes will initiate, perhaps annually or at some other frequency, a special fundraiser to support the inclusion of children with disabilities. It can be as elaborate as a big fundraising dinner and auction, or as modest as a bake sale. The true value of this approach is building a stronger community in Christ's name and weaving a new strand of grace into the permanent fabric of the parish. Community stewardship, and not tuition increases, are a more sustainable model for Catholic school viability.
2. *Generous Parishioners:* Many parishes are blessed with generous and capable individuals and families that welcome the opportunity to give. Be a beggar for Jesus and ask for their help. As a rule of thumb, funding sources for organizations such as One Classroom usually looks like the list below, and your support profile might look the same:
  - a. Generous individuals: 70%
  - b. General donors: 10%
  - c. Events: 10%
  - d. Granting organizations: 10%
3. *Tuition Increases:* We would not suggest tuition increases as a source of incremental funding. Parishes must commit themselves to attracting more students and families and using tuition increases as a means to welcome more children has the opposite effect. Our schools need to compete for more families and tuition increases rarely achieve this goal.
4. *Volunteers:* Too often our schools fail to leverage the many potential human resources available within the parish community. Most parishes have individuals with specific skills related to the education of children with special needs, perhaps a therapist, or even an experienced special education administrator. Some of the best "para-educators" are regular parishioners with a special talent in working with children with special needs. If you're a school employee, don't be a stranger in the parish you serve. Engage with the community and ask for qualified resources and volunteers.
5. *Grants:* There are many sources of funding from philanthropic organizations, such as One Classroom or a local Knights of Columbus chapter. We have also found local family

foundations to be of particular impact. Ask for a volunteer or volunteers from your parish community with experience in grant writing and charge them with the task of identifying sources and applying for grants.

6. *Roman Catholic Foundation of Eastern Missouri*: Your parish may establish a fund with the RCFOEM and encourage donations to it. Furthermore, many generous Catholics have established funds with the RCFOEM, or can be encouraged to do so, with your inclusion program being a beneficiary of these funds in a manner that yields annual contributions.
7. *Title 1*: Chances are your school has someone on staff with familiarity with how to apply for Title 1 funding. Depending on your community, your needs, and how you might use the funds, your schools may qualify for Title 1 funds. A good practice is to assign someone at the school to undertake this inquiry and process and report to the principal or pastor their progress.
8. *Shared Services*: In general, students with special needs in the St. Louis diocese may be eligible for shared services (such as physical, speech, or occupational therapy) through the SNAP program. The downside is these services may only be available in a public school requiring the student to physically visit the public school during the week. However, and depending on your county and the location of your school, some public schools will cooperate with their catholic school counterparts and provide such services. The individuals on staff at your school supporting the inclusion program should familiarize themselves with these programs and build relationships with appropriate points of contact in the public school system.

## **References/ further reading**

The Inclusive Schools Network (2013)  
[myth-the-high-cost-of-inclusion](#)

Special School District of St. Louis County (For SNAP):  
<https://www.ssdmo.org/site/Default.aspx?PageID=214>

# Chapter 8

## Human Resources Needed for Inclusion



### **This chapter will offer:**

- What human resources do I need?
- How do I leverage and find human resources?
- Inclusion in action
- Forms

### **Introduction**

**“I alone can not change the world, but I can cast a stone across the water to create many ripples.”**

Saint Teresa of Calcutta

The ministry of inclusion is fueled by a team of people and powered by God. Finding and retaining human resources to join your team is a key element to success. Getting creative with resources will help keep costs low and quality high.

### **Did you know...?**

- The number of special education teachers has dropped 17% nationally in the past ten years
- The current national ratio of students requiring special education services to qualified special education teachers is 17:1. The recommended ratio is an average of about 5:1
- Most teachers who go into special education choose that path because of a loved one with a disability

(Samuels and Harwin, 2018)

### **What human resources do I need?**

In order to make inclusion successful in Catholic schools, certain human resources are needed. The two most important people are going to be your administrator or pastor and your special education leader. You need this leadership to figure out the most cost effective way to fund the ministry of inclusion and to develop the systems and roles necessary to keep inclusion running smoothly.

The other roles are going to be dependent on the needs of your parish and the students in the school. This would include how many paraprofessionals and special education teachers are needed, any related services that you are capable of offering, how much and what kind of professional development is needed for classroom teachers, and the role of well-wishers/cheerleaders among your parishioners who are willing to lend a hand and spread the word. These roles will vary year to year based on the number of students you are serving and their needs. Just be sure that the human resources you gather offer the right level and type of support, based on your student population. Be flexible and creative when hiring. Some of these roles can and should overlap. They include but are not limited to:

- Special education leader
- Administration/ human resources leader
- Paraprofessionals
- Special education teachers
- Classroom teachers
- Related service providers
- Well wishers/ cheerleaders
- Professional development presenters

### **How do I leverage and find human resources?**

- **Mass** - Get pastors on board and ask them to talk about inclusion and recruit volunteers.
- **Universities** - Speak with a local university asking for special education students to do a practicum or service hours at your school.
- **Offer a niche** - Why would someone choose to work at my school over another? What is your school mission and how can you make people want to be a part of it?
- **Recruitment** - Actively recruit people that have skills you need. Tell them about your mission and why you are participating in the ministry of inclusion. Be accurate in your description of what you are looking for.
- **Stewardship** - Parishes have committees for stewardship. Go to their meetings and ask them to help in your mission. Be specific in your ask and follow through.
- **Word of mouth / advertising** - Spread the word of open positions thoughtfully. Start with an informal word of mouth throughout key parishioners and expand from there.
- **Clear expectations and training** - All staff should be trained and you should have a protocol for doing so. Make sure the expectations of the job match the description under which you hired someone or asked them to volunteer.
- **Create community** - This includes within a parish and amongst teachers in your building. Do they feel heard? Is there a sense of belonging? The vibe from your school will spread into your parish and vice versa. Make your building a place where people want to work and visit. Keep an open door policy for parents.
- **Buddies/ mentors** - Do my teachers have support from other staff? Even experienced teachers need to learn the ins and outs of a building. Don't ignore your current school climate and get that under control first before adding staff for inclusion.

### **Inclusion in Action**

All Saints Academy is a Catholic elementary school made up of 5 local parishes that combined when numbers began to dwindle. They serve preschool-8th grade students at 3 different

campuses. In the past several years, they have lost many students with mild disabilities because they have not met the children's needs in the classroom. Mr. Ward is the lead principal, and he is wanting to change this.

Mr. Ward has a great staff, but he knows if he wants to boost his special education program, he is going to need to bring in some experts. He begins by looking at the resources he already has. He already has a learning consultant who travels to all three buildings, as well as several teaching assistants who could transition to paras if needed. He went back through his HR files on each teacher and had forgotten that there are 4 teachers in the academy with special education backgrounds.

He talks to the pastors of each parish about his plans to retain the students they already have and attract more with a revamped special education program focusing on inclusion. They are all on board and agree to speak about this new ministry at Sunday masses.

Mr. Ward begins getting emails after church that Sunday of people wanting to help. A lot of the people have grown children, some with disabilities who wish that their child could have attended Catholic school.

Mr. Ward also reached out to the local Catholic university's education department to see if any of their special education students would be willing to help in exchange for credit towards classes.

Mr. Ward got people excited about inclusion. He made it seem as if there was no option *not* to be inclusive. He made it a ministry and stewardship program within the parishes. The question was never, "Why would we do that?" It was always, "What God-given skills do you have to make this happen?"

## **Forms**

Here is a sample parish stewardship/ volunteer form that can be adapted to fit your school/ parish needs.

<https://www.stjohnwc.org/stewardship-form.html>



# Chapter 9

## Beginning and End of Year Procedures



### **This chapter will offer:**

- What do I need to do at the beginning of the year to be ready to include all students?
- What do I need to do at the end of the year to make the transition to the next year run smoothly?
- Inclusion in action
- Forms

### **Introduction**

**Prepare your work outside; get everything ready for yourself in the field, and after that build your house.**

Proverbs 24:27

A few simple steps at the beginning and end of each school year can lead you to a more productive and less stressful year to come. The chapter in the manual titled, “Where to Begin,” will give you specifics on how to begin including all of God’s children in your school. This chapter is focused on the specific tasks necessary to ensure that every students’ needs are being met.

### **Did you know...?**

- Using a shared electronic calendar for key stakeholders in the school, with color coded tasks for each participant can prevent miscommunication and lapsed deadlines.
- Providing checklists for stakeholders to check off at the beginning and end of each year can clarify tasks and assure completion.

### **What do I need to do at the beginning of the year to be ready to include all students?**

- Create a master calendar either electronically or on paper, posted in a common area where all relevant stakeholders can view and edit. Color code the calendar for each relevant stakeholder so that tasks and expectations are assigned.
- The calendar needs to have a “keeper” assigned to add updates and changes as needed. It would make the most sense to have the administrator as the keeper because he or she is probably in charge of professional development and meetings, but if it makes more sense

in your building for your learning consultant or resource teacher to be in charge of the calendar, that is fine too. Just be sure that this role is assigned.

- Create a separate log or incorporate into the master calendar a running record with brief notes on every meeting, professional development training, grand deadline, phone call, etc, that pertains to inclusion.
- Map out professional development topics at least through first semester and put them on your master calendar. Adjust as needed based on staff and student needs.
- Add any grant or funding deadlines to the master calendar, color coded for the person responsible for the application.
- Develop your Care Team and have a meeting to set expectations for the year.
- Set up training for any teachers, paras, or other staff for health and safety issues and specific disabilities of students. This should be scheduled before the students begin school.
- Meet with parents of students with significant needs to set the tone of partnership and goals for the year.
- Assign case managers to all students with significant disabilities. Case managers should be a resource teacher, classroom teacher, or specialist who will have a vested interest in a specific child. The case manager will be in charge of parent updates, collecting data, setting up meetings, scheduling services, working with the local school district if necessary, and any other specific needs of the student. See the attachment titled, “Caseload Responsibilities” in the Forms section of this chapter.
- Give classroom teachers all relevant information about children in their classrooms like student cards from previous teachers, and set up a meeting with teachers and case managers to discuss specific accommodations and modifications needed in the classroom.

## **What do I need to do at the end of the year to make the transition to the next year run smoothly?**

- Have each teacher fill out a student card on every child in their classroom with information such as interventions that worked, strengths, interests, goals, etc. Keep this card in each child’s file.
- Review and update individualized student plans with parents for the following year. Put the plans in student files for the following year.
- Use relevant staff for input on class lists for the following year
- Collect any items loaned out throughout the year like assistive technology or sensory items.
- Make a list of items needed for the following year and approach administrators about ordering. Follow through when appropriate.
- Have teachers send administrators input on professional development that is needed for the following year.
- Follow up with the local school district on services offered during the summer.
- Give parents tips for summer enrichment, addressing the specific needs of the student.
- Look into any financial or grants needed for the following year.
- Review calendar and running record from the previous year and make adjustments for the following year.

## **Inclusion in action**

Dr. Cook is the principal at All Saints K-8 Catholic school. She has done an excellent job including a diverse population of students in her school with all types of learning needs. She has been including all students in her school since she started there three years ago. One of the biggest lessons she has learned in the process of the ministry of inclusion is planning and preparedness.

During her first year at All Saints, Dr. Cook and her staff welcomed two students with Down Syndrome and one with Autism Spectrum Disorder. She worked hard on buy-in with staff and parishioners and developed a team to implement all of the systems necessary for that first year. What Dr. Cook didn't do was keep a calendar and running record of each meeting, professional development, grant deadline, or other relevant event to inclusion. This meant that during her second year, she felt as though she had to start from scratch, recreating much of the work that had already been done.

Dr. Cook learned her lesson and began using a large wall calendar, color coded for different staff members, to keep track of upcoming events. At the bottom of each page, she wrote short notes about the events like, "professional development on RTI went well but was too late in the year." This will remind her at the end of the year to move professional development on RTI earlier in the year the following school year. Keeping careful notes that take a few seconds of time has saved Dr. Cook and her staff hours of work for the next year.

## **Forms**

- Caseload responsibilities (appendix L)  
<https://documentcloud.adobe.com/link/track?uri=urn%3Aaaid%3Ascgs%3AUS%3A3c0a67e8-b6a3-4bb4-a534-37b59a27468b>
- End of year checklist (appendix M)  
<https://documentcloud.adobe.com/link/track?uri=urn%3Aaaid%3Ascgs%3AUS%3A984eb49e-3f62-49dd-83fe-38940f85c700>
- End of year parent letter (appendix N)  
<https://documentcloud.adobe.com/link/track?uri=urn%3Aaaid%3Ascgs%3AUS%3A80b4baaa-1269-40ff-bd9e-060d644e4fbb>
- Sample student card  
<https://documentcloud.adobe.com/link/track?uri=urn%3Aaaid%3Ascgs%3AUS%3Ad51323ff-cd3b-4534-adaa-2827397d9342>
- The Autism Helper has great resources for creating a master schedule.  
<http://theautismhelper.com/focus-on-five-creating-a-classroom-master-schedule/>

# Chapter 10

## Care Team / RTI:

### How to help struggling students in your school



#### **This chapter will offer...**

- What is RTI?
- What is Care Team?
- What does a Care Team meeting look like?
- Inclusion in action
- Forms
- Further reading

#### **Introduction**

**But if anyone has the world's goods and sees his brother in need, yet closes his heart against him, how does God's love abide in him? Little children, let us not love in word or talk but in deed and in truth.**

1 John 3: 17-18

Being able to recognize and intervene for struggling students will help the overall climate and academic performance of students. Not all students who struggle have a diagnosed disability, but we should be able to adapt and change for every child in our school. We are a community developed to help all children, regardless of label.

#### **Did you know?**

- In a 2018 study, researchers examined the effects of labeling a child with a disability. Findings indicated that students with disabilities performed more than 3 years below typically developing peers. When a child is labeled, the educational pathway changes, demonstrating that students with disabilities are either not fully included in the general education curriculum or that expectations are lowered (Gilmour, Fuchs, and Webby, 2018).

#### **What is RTI?**

RTI stands for Response to Intervention. It is a multi-tiered system of support (MTSS) that can be adjusted to the level needed for each student. It is a fancy way of saying that teachers should start helping struggling students sooner rather than later. It is a way for teachers to intervene

systematically to help a struggling child in the classroom before asking the Care Team to assist. It is a multi-tiered approach to helping students who are experiencing learning, social, or behavior needs. RTI is designed to fill in learning gaps for children who need it, in any domain. This might be for a child struggling in math or with specific behaviors, whether they have a diagnosed disability or not. It is a means to help all children succeed. This is important in the context of Catholic schools because we are losing a lot of these children to the public school system who is willing to do the work (and collect the money) that these children generate when diagnosed with a mild to moderate disability that might not be apparent to an outsider. We can serve these children better in Catholic schools by going through this process faster and in a more child-centered way, involving parents and recognizing them as their child's primary teacher, as taught in the catechism of the Catholic Church.

There are four critical components to RTI in order to make it successful according to the RTI Action Network, which is a program of the National Center for Learning Disabilities (2019).

1. *High-quality, scientifically based classroom instruction.* All students receive high-quality, research-based instruction in the general education classroom. A Google search for Evidence Based Practices or EBP in education will bring up strategies to try.
2. *Ongoing student assessment.* Students are monitored often to assist in adjusting instruction according to the child's needs.
3. *Tiered instruction.* This means that instruction is differentiated based on a child's needs. This can range from whole class to small group, to individual.
4. *Parent involvement.* Schools implementing RTI should call on parents to give input into their child's progress, the instruction and interventions used, the staff who are delivering the instruction, and the academic, social, or behavioral goals for their child.

If you picture RTI at a triangle, the bottom section should cover about 80-85% of your students. This is tier 1. These children are successful with the high quality, whole class instruction that your teachers are giving day to day in the regular classroom.

The middle section, or tier 2 of the triangle, would include about 10-15% of your students. These are children who need more intense supports like small group enrichment and explicit instruction. This can be done through push in or pull out, depending on a child's needs and ability to attend. Intensity will vary across group size, frequency, and duration of intervention. A child should only be in tier two for 1-2 grading periods with the goal of catching up and returning to tier 1. If a child is remaining in tier 2, he or she should be considered for tier 3 supports.

The top section of the triangle, or tier 3, is for about 5% of your children. This is intensive one on one individualized instruction to try to fill in the gaps in learning. Tier 3 supports can include anything and everything under the sun to help a child succeed.

See the following link to use Intervention Central's academic intervention planner tool.  
[Academic intervention planner](#)

Keep in mind that an RTI-type model can also be used for students meeting learning goals more quickly and who need more enrichment and acceleration. These students can be pulled out into a shared space with struggling learners to emphasize that all students are created equally and deserve individualized attention to meet all needs. See the following video for further explanation:

<https://youtu.be/BHOaQcX5gX0>

## **What is Care Team?**

A Care Team is a group of people, usually consisting of learning consultants/ resource teachers, a classroom teacher or two, and possibly the counselor and principal, who get together weekly to brainstorm ways to help students who are struggling academically, emotionally, socially, or at home.

A student is usually “care teamed” after a teacher or other relevant staff member has tried several other interventions to help solve the problem and needs further help. This would be done after the RTI process, if applicable.

Care Team is *not* a route to asking a child to leave the school. Catholic schools take care of all of our children. Care Team is only used to put our heads together in order to help a child succeed, as is the goal for every student in Catholic schools. It lends the opportunity for educators to use the tools in their toolboxes and stretch their minds in order to help a child reach his or her goals. If Care Team is not successful, look to outside sources like experts in the parish community, for help. Then keep trying. We don’t give up on our children.

See the following checklist for classroom teachers to complete before referring a child to Care Team. (appendix G)

[Classroom teacher prereferral checklist](#)

## **What does a Care Team meeting look like?**

A typical meeting would look like this... A staff member (typically a teacher) will “care team” a child who is struggling, putting him on the list of children to discuss at that week’s meeting. Before a child is “care teamed,” the teacher should have tried several individualized interventions to help the child, recording data on each (RTI). If these interventions were not successful, parent permission should be asked to “care team” the child. At the meeting, the teacher will report any concerns to the Care Team, along with the interventions tried and formal or informal data like test scores for academic issues or an ABC chart for behavior issues.

The Care Team will brainstorm solutions with the classroom teacher and offer more individualized supports for the specific child’s needs. This might include some pull out services for academic struggles with the learning consultant or resource teacher, or doing a functional behavior assessment for behavior issues, in order to figure out the function of the behavior and develop preventative measures.

The leader of the Care Team or classroom teacher who referred the child will contact the parents and update them on what the team is going to do. Roles should be established and clear. Parent permission is sent home if needed.

Approximately two weeks later or at another designated time, a follow up is done to see if the child is making progress or if the plan needs to be changed. The child is monitored using data and reviewed monthly here after until the team decided extra services are no longer needed. A decision might also need to be made on whether the child needs a formal evaluation to see if he or she has a learning disability or other difference. This is hard on the child and family, so weigh the benefits and downsides carefully.

When thinking about having a child formally evaluated, there are several things to consider. First, do we really need a label on the child in order to help him or her? The benefit of a Catholic school is that we are able to help children immediately without the red tape or financial game that the public school system offers. If a school district can offer services to a child that your school just can not offer, then getting an evaluation might be a necessary next step. However, if your school is trying interventions for a child, and he or she is making good progress, labeling the child would provide no benefit and only emotional harm. There is also strong evidence that when teachers see a label on a child, the expectations of performance are lowered. This also goes back to parent expectations for their child. What are their goals? Be sure to revisit these conversations often.

If it is decided by the Care Team and parents that a formal academic evaluation is needed, there are other options besides the local school district. Local universities usually offer testing by graduate students for a very reduced rate. Keep in mind that any evaluation is just a snapshot of a child's being and are often manipulated for a desired outcome. Some parents have been groomed to think that putting a label on their child will help him or her receive accommodations or special privileges. This is not what evaluations are designed for and anyone using them in this way is affecting the system for those who really need it.

Another thing to keep in mind is that some differences like autism can have an educational diagnosis for school purposes only *or* a medical diagnosis. If a child has a medical diagnosis, his or her insurance company will typically pay for related services like occupational therapy or ABA. Remember this is a parent decision and is based on their goals for their child. Suggesting getting a medical diagnosis to parents can be sticky and needs to be handled with grace. Anytime a child is "labeled" can be difficult for parents, so the school needs to thoughtfully and prayerfully examine how to approach this aspect of a child's education.

## **Inclusion in action**

Brendan is the oldest child to Mark and Kalleen. He has attended Catholic school since preschool and is now in third grade. When Kalleen went in for Brendan's first quarter conference, she was shocked to find out that Brendan was struggling in school. He wasn't getting homework in on time, his desk was messy and disorganized, and he seemed very distracted all the time. Kalleen knew school was growing increasingly more difficult for Brendan but figured that was normal for his age. Brendan's teacher suggested that he have a formal evaluation done to figure out what was going on.

The whole conference really caught Kalleen off guard. She had no idea Brendan wasn't getting work done or was such a mess at school. It was now late October, and a quarter of the school year had past. The more she reflected on this, the angrier she got.

There was nothing "wrong" with Brendan. He was made perfectly in God's image. School and parents should be partners in a child's education. Kalleen asked for another meeting with Brendan's teacher.

They met after school the next week, and Kalleen shared that she really wanted to be involved in her son's education. She asked what the teacher had adapted or tried in order to help Brendan stay organized and engaged. The teacher responded that she runs her classroom a certain way, and it is up to the children to adapt. While this was the thinking many years ago, we now know that this is not the most effective way to reach all learners. When teachers are unwilling to change, they are failing a good percentage of the class. A teacher's job is not to teach 80% of the children, it is to teach *all* of the children. Kalleen gently explained this and asked if they could come up with some things for the teacher to try. She reluctantly agreed and put some strategies in place.

It took several weeks of adjusting on the part of the teacher and Brendan, but by Thanksgiving they had found their groove. Brendan was learning and successful, and the teacher noted that other students were improving as well. He didn't need a label or extensive testing, just an understanding and flexible teacher. If Brendan's teacher was trained in RTI, she would have had some strategies in her toolbox and would have realized that it is part of her job to change her style to fit the needs of the student, not vice versa. Also, if the school had a Care Team, the teacher would have had other educators to brainstorm with before the first quarter was over and Brendan wouldn't have lost all that time.

## Forms

- Sample parent letter about care team (appendix H)  
[Sample parent letter granting Care Team permission](#)
- Sample care team plan of action (appendix J)  
[Care Team meeting planner](#)

## Further reading

See the following links for resources on what RTI is, data recording, and interventions to try.

[RTI Network](#)

[Intervention Central](#)



# Chapter 11

## Goal Setting, Report Cards, and Student Plans



### **This chapter will offer:**

- How do I set long term and short term goals for my students using a strength based approach?
- What are my options for modified report cards?
- How do I grade students with disabilities?
- How do I write an individualized learning plan?
- Inclusion in action
- Forms
- Further reading

### **Introduction**

May he give you the desire of your heart and make all your plans succeed.

Psalm 20:4

Setting specific goals for your students with disabilities is a good way to keep yourself accountable and moving the child forward. Adapting a report card to reflect these goals and accomplishments in a meaningful way will demonstrate a child's accomplishments and keep him or her on the path to success.

### **Did you know...?**

Strength based learning is based on 5 principles:

1. Measuring strengths of teachers and students
2. Individualizing learning based on strengths
3. Networking with friends and families to discover a child's strengths
4. Deliberate application of strengths in and out of the classroom
5. Intentional development of strengths

(Lopez and Louis, 2009)

## **How do I set long term and short term goals for my students using a strength based approach?**

A strength based approach uses a student's abilities to work on weaknesses. This means playing off of his or her interests, strengths, and preferences to build up weaker skills. One way to make sure a student's goals are aligned with his or her strengths and family goals is to use a technique called Mapping. Mapping stresses the involvement of the student and his or her family and focuses on the goals and strengths of the student. The people involved in the Mapping process are usually the same ones who would be involved in writing a student's individualized learning plan, with the meeting led by the school's special education representative, or an outside expert practitioner as needed. The meeting would be set up so that everyone has access to a white board or large sheets of paper, usually with tables in a U shape around the board. The meeting is a brainstorming session used in order to develop individual student goals. The Map session begins with the question of "What is the child's story?" followed by "Who is...?" This is an opportunity for parents to share information about the child, where he or she is coming from, and give some understanding and context. The next question to explore is, "What is the child's dream and nightmare?" If a child is old enough or able, he or she should be involved in this process as much as possible. Continue to prod for elaboration, especially if the student is selling himself short on dreams. After looking at the story, who the child is, dreams, and nightmares, some needs should start to come to the forefront. How can we help the child avoid his nightmares and follow his dreams? How can we use those God given gifts to help? A list of needs can now be established based on where that child would like to go. These needs can be turned into goals with short term benchmarks.

Because we are in Catholic schools, the Mapping process will have a faith component to it. It is impossible to tell a child's story or mention his or her gifts without including God. All of our strengths are a gift from God and should be seen accordingly.

## **What are my options for modified report cards?**

Because we are in Catholic schools, we have the freedom to create report cards that are best suited to our students. For children with significant disabilities, some options include standards-based report cards, narrative report cards, or modified report cards with checklists.

Standards-based report cards will list the standards or goals that a child is expected to learn over the course of a grading period. For some students, these will be grade level standards based on state or Common Core standards. For those with disabilities, these standards might be a mix of below grade level standards based on the level of where the student is achieving. These report cards would need to be created by the classroom or special education teacher. It could be as simple as a checklist of skills or a sliding scale such as exceeds standard, achieves standard, developing standard, or needs improvement. Items included on the report card should align with ILP goals set for the student.

Another option is a narrative. This would be a good option for students with more significant disabilities. A narrative would be a paragraph or so for each subject area, again aligning with ILP goals. There might be a section for each subject area that the child participates in, with strengths and areas where the child is still developing skills. Narratives should be as specific as

possible, with a focus on the child's achievements since the last grading period. ILP goals are yearly goals, but benchmarks and updates on goals should be a part of the report card.

For children with moderate disabilities, a modified report card might work. This would take a typical grade level report card and make small changes to it to adapt it for a specific child. It might include notes for modified curriculum areas, if not all subjects are modified, or skills related to ILP goals.

It is important to note that report card time should not be the only time that a parent is updated on a child's progress. Communication should be ongoing, and information on report cards should never be a surprise.

## **How do I grade students with disabilities?**

There are several options when grading students with disabilities. These options depend on a child's skill level and ability. Nicole Eredics from The Inclusive Class has several suggestions for grading, found on her website, [theinclusiveclass.com](http://theinclusiveclass.com) (2019).

- Communicate achievement standards and grading systems with students at the beginning of the school year.
- Use a variety of ways to get a comprehensive understanding of student progress through the use of:
  - a) Daily assignments
  - b) Multiple formats of quizzes/tests such as multiple choice, Yes/No answers, cloze technique, long answer, and long answer responses
  - c) Performance assessments based on portfolios, demonstrations, projects and presentations
  - d) Student self-assessment
  - e) Observation of student learning and growth
  - f) Checklists
  - g) Rubrics
- Use grading adaptations when giving traditional assessments to students on modified programs. [Dennis Munk, Ph.D. from the University of Kansas provides an extraordinary resource for teachers that describes adapted grading.](#) Below are some of his suggestions for teachers:
  - a) Prioritize assignments that will cover most of the material
  - b) Incorporate progress on IEP objectives
  - c) Grade on processes used to complete work
  - d) Grade student effort, changing weights, and scales
  - e) Assess progress made over time

When you are grading a child with a disability, you are grading him or her on what he or she is capable of after removing the barriers to learning. This means that a child with a learning disability in math might get a better grade than a child who does not have a learning disability after the playing field has been leveled. That is ok. A child on a modified curriculum that is below grade level can still get an A. That is ok as well. It should be noted on a child's report card

if work is modified or if adaptations are made, but otherwise, let the child earn the grades that he or she will earn after removing barriers and teaching to his or her level.

## **How do I write an individualized learning plan?**

In public schools, a child's individualized goals based on his or her disability is called an Individualized Education Plan, or IEP. These plans are part of a federal law designed to make sure that students with disabilities have access to a free, appropriate, public education (FAPE). The reality of these plans is that they are deficit-based. They focus on what a child can not do in order to create a pathway for where he or she needs to be. For a parent of a child with a disability, these meetings are emotionally and physically exhausting, if not traumatizing. There is a place for an IEP and the original intent was good, but they have become less student-centered and more service and money centered as time has goes on. In Catholic schools, we have the freedom to design and call those plans whatever we would like and implement them freely. Some schools call them a plan based on the name of the school like "Annunciation Plan." For the purpose of this manual, we will call them Individualized Learning Plans or ILP, but your school can name them whatever you would like.

For an IEP, the requirements are very specific according to federal law, and benchmarks are not required for most students. This section covers essential elements for a Catholic school, not IEP components required by law. Remember that an IEP is a legal document that can only be made by the local school district. For students in Catholic schools, it is called an Individualized Service Plan or ISP that does not include classroom placement or minutes of services. These plans are typically used for students in private schools who are only using the local school district to receive related services like PT or OT. It is a family's decision as to whether or not they decide to pursue testing and the IEP process through the local school district. While labels are not always necessary to help a student progress, some families prefer to get the disability label in order to receive free services from their public school district. Children with disabilities are entitled to special education and related services under the Individuals with Disabilities in Education Act (IDEA), though their services are usually given after school at a public school location.

The purpose of an ILP is to set specific goals for a student, along with benchmarks along the way. The ILP goals last one year, with benchmarks varying accordingly, depending on the goal. Some goals require more benchmarks than others. The annual goals should be made in several domains, depending on the child's disability. Goals should be observable and measurable and realistic for each child. Keep in mind that small gains are still gains. For a child with more significant disabilities, the gains will be small and goals will be set in smaller increments. Celebrate all gains, large or small, and be sure to calibrate a child's goals with his or her abilities. Break up larger goals into very small parts, and be grateful for small victories!

The ILP should also include accommodations or modifications the child needs to access curriculum. All accommodations and modifications should be spelled out clearly in a child's plan for the sake of consistency. Some domains to think about when creating accommodations or modifications are time, level of support, difficulty, participation, curriculum, size, or input/output.

- Time adaptations might include allowing extra time for test completion or tasks, or changing a child’s schedule to allow for the peak performance.
- Level of support might include using a paraprofessional, peer support, small group, or individualized support.
- Difficulty would be matching the skill level of the child to the work. For example, using a calculator for math.
- Participation adaptations include things like allowing a child not to participate in certain activities that might be too overstimulating, like a child with Autism who is overloaded by noise being able to opt out of band class.
- Curriculum adaptations include any changes that are made to the curriculum. Is a child in 5th grade but doing 2nd grade math?
- Size adaptations change the number of problems on a page, how many spelling words to learn, etc.
- Input and output allow for modifications in how instruction is given to the child, like providing more visuals, seeing videos, etc, while also allowing changes in how the child demonstrates his or her knowledge to the teacher. If you are practicing Universal Design for Learning (UDL), this is something you are already doing for all students. See chapter 21 for more information on UDL.

If a child needs any assistive technology or is receiving any related services through the school, like OT, PT, or speech, this should be included as well. However, if your school is not able to provide related services, this should not be in the plan. This would be in the plan completed by the local school district if the family decides to go that route.

If a child is 15 or older, a transition plan should be included in the ILP. This should spell out plans for the child after high school and how he or she is going to get there. For example, if the child with moderate to significant disabilities is hoping to work at a restaurant, skills like using a cash register or counting money should be included in the plan. If he or she wants to live independently, learning to follow a recipe and do laundry might be included.

Don’t lose focus of the fact that you are a Catholic school, so putting faith-based goals in an ILP would be appropriate. If it is a sacrament year, goals related to the sacraments would be expected. Small goals like genuflecting or making the sign of the cross might be other options, but make sure goals align to a student’s ability.

## **Inclusion in action**

Luke is an 8th grade boy who has an emotional/ behavior disorder. He is in his parish, Catholic school and is about to transition to a Catholic high school. His 8th grade team who helped develop his individualized service plan want to make sure that Luke starts high school on the right foot, with all of the support he needs. They decide that Mapping would be the best way to create a strength-based plan that Luke can self-advocate for.

The team gathered together along with Luke and his mom at a large U-shaped table facing a white board. It was important to the team for Luke to be in on the meeting to develop his self-determination skills. The special education representative for Luke’s school leads the meeting. She begins by asking Luke and his mom what his story is. Luke’s mom shares how

Luke has always been “different” and that starting in kindergarten, his teachers would call her complaining about his behavior, and essentially she felt blamed and guilty. She described the impact it had on Luke when his father was sent to jail and how she feels like she never has time for Luke or his younger siblings.

The next topic was “Who is Luke?” Luke began with some negative traits but was quickly redirected to his true feelings and gifts. His strong emotional outbursts were rooted in a deep sensitivity and empathy for others. His problems sustaining attention in a classroom allowed him to hyper-focus on details. His lack of organization in his brain allowed for more creativity in his work. He just needed an outlet.

When asked about Luke’s nightmare, he said, “Jail.” He just wanted to avoid the same fate as his father. They discussed Luke’s poor choices in friends and alcohol abuse in a caring conversation.

At first, Luke’s dream only included working at McDonalds, but after a little prodding and talking about his strengths, he expanded those dreams to art and fashion design, or maybe as a therapist himself one day.

The final step for Luke’s Map was to take a moment to look at everything that had been written on the white board and establish what Luke needs to reach his goals. Some of these needs included increasing Luke’s self esteem and expanding his endurance for non-preferred tasks. The team also made note to sign Luke up for as many art classes as he can take in high school. They took Luke’s need for increasing self-esteem and endurance in non-preferred tasks and turned them into measurable goals with benchmarks along the way. They added check-in/ check-out to his list of accommodations to increase accountability and personal responsibility.

Luke and his mom felt good about the goals that were established, and Luke felt ownership in them. Luke’s mom didn’t feel as “beat up” as she had in deficit based meetings that she attended in the past. Everyone left the meeting feeling uplifted and on the right path, knowing that Luke has gifts from God and that they were going to help Luke realized God’s plan for him.

## **Forms (to be added later)**

- Sample standards based report card (appendix O)  
<https://documentcloud.adobe.com/link/track?uri=urn%3Aaaid%3Ascgs%3AUS%3A0da97f5e-1ec6-42a8-8de1-d7b45618fd12>
- Sample goals and individualized learning plan (appendix Q)  
<https://documentcloud.adobe.com/link/track?uri=urn%3Aaaid%3Ascgs%3AUS%3A261bd666-d91e-43ac-bd4b-21c8cdb51ec3>
- Sample narrative report card (appendix P)  
<https://documentcloud.adobe.com/link/track?uri=urn%3Aaaid%3Ascgs%3AUS%3Af62a6dad-dc1e-4b60-8e19-24156aa9710a>
- Sample MAP – This website further explains the MAP process and includes any forms you might need.  
<https://www.transitioncoalition.org/wp-content/originalSiteAssets/files/docs/makingdreamshappen1258858219.pdf>

## **Further reading**

Nicole Eredics operates *The Inclusive Class* website which is full of useful information for classroom and special education teachers.

<http://www.theinclusiveclass.com/>

# Chapter 12

## Faith Formation and Sacraments for Children with Disabilities



### **This chapter will offer:**

- What does the church say about sacraments for people with disabilities?
- Is faith formation different for children with disabilities?
- How can I advocate for my child at my church?
- Inclusion in action
- Further reading

### **Introduction**

**“It is said, justifiably so, that disabled people are humanity’s privileged witnesses. They can teach everyone about the love that saves us; they can become heralds of a new world, no longer dominated by force, violence and aggression, but by love, solidarity and acceptance, a new world transfigured by the light of Christ, the Son of God who became incarnate, who was crucified and rose for us.”**

Pope John Paul II

Those who are blessed to have a person in their life with a disability, know that the love that abounds is the most selfless, God-like love that can be achieved on earth. Giving the gift of the Catholic faith and witnessing it without tarnish is a blessing that should be valued and shared.

### **Did you know...?**

- **Blessed Margaret of Castello** was blind and unable to walk. She was cast off by her wealthy parents and lived the rest of her life on the streets. Today she is the patron of the poor, disabled, and unwanted.
- **St. Germaine Cousin** suffered from physical impairments, including boils and a swollen hand. She was mistreated by her family, lived a holy life and is now canonized.
- **St. Joseph of Cupertino**, a terrible student who was sickly, inattentive, and distracted, is the patron of those with intellectual disabilities.
- **St. Francis de Sales** is the patron of the deaf and those who are hard of hearing due to his holy ministry with deaf people.
- **St. Lucy** is venerated as the patron of the blind and those with vision problems.



## **What does the church say about sacraments for people with disabilities?**

The United States Conference of Catholic Bishops has declared, “Disability alone does not disqualify a person from receiving the sacraments. Cases of doubt should be resolved in favor of the right of the baptized person to receive the sacrament.” The following presents some general guidelines sacraments typically received by school-age children.

**Baptism** - According to our Code of Canon Law (865), any child or adult can be Baptised, regardless of disability with the permission of one parent.

**Reconciliation** - “Only those who have the use of reason are capable of committing serious sin. Nevertheless, even young children and persons with mental disabilities often are conscious of committing acts that are sinful to some degree and may experience a sense of guilt and sorrow. As long as the individual is capable of having a sense of contrition for having committed sin, even if he or she cannot describe the sin precisely in words, the person may receive sacramental absolution. Those with profound intellectual disabilities, who cannot experience even minimal contrition, may be invited to participate in penitential services with the rest of the community to the extent of their ability. In the case of individuals with poor communication skills, sorrow for sin is to be accepted even if this repentance is expressed through some gesture rather than verbally. In posing questions and in the assignment of penances the confessor is to proceed with prudence and discretion, mindful that he is at once judge and healer, minister of justice as well as of mercy.” (*Guidelines for the Celebration of the Sacraments with Persons with Disabilities*, 23, 25)

**Holy Communion** - The criterion for receiving Holy Communion are the same for a child with a disability as they would be for a typically developing child. However, the existence of a disability should not prevent a child from receiving Holy Communion. Careful preparation and care need to be taken to help a child distinguish the Body of Christ from normal food. This understanding can be shown through words, gestures, or any other mannerism that would demonstrate knowledge. Pastors should work closely with parents on developing understanding of the Body of Christ for the child. Cases of uncertainty or doubt should always be resolved on the side of the baptised person to receive the sacrament. Also keep in mind that just a small portion of the Body of Christ counts as receiving the sacrament. The child does not need to consume the entire host.

**Confirmation** - “Persons who because of developmental or mental disabilities may never attain the use of reason are to be encouraged either directly or, if necessary, through their parents or guardian, to receive the sacrament of confirmation at the appropriate time.” (*Guidelines for the Celebration of the Sacraments with Persons with Disabilities*, 16)

## **Is faith formation different for children with disabilities?**

The goal of faith formation is the same for all children, regardless of ability, however the manner of teaching might be different. The United States Council of Catholic Bishops described the six

foundational tasks for a catechist, regardless of the child he or she is teaching. These six tasks are:

1. Promotion of knowledge of the Faith
2. Promotion of liturgical worship and participation in the sacramental life of the Church
3. Integration of moral formation into a Christian way of life
4. Teaching to pray in Christ, with Christ, and in communion with the Church
5. Initiation into the life of the local church community and active participation in the life of the Church
6. Promotion of a missionary spirit to witness to Christ in society

Just like in the regular classroom, our job is to teach all children about our faith. This might look different for children of varying abilities, but the goal is always the same. Modifications and accommodations will be needed for children with disabilities in the same way that adaptations are used for any other type of knowledge.

If you are teaching a child with a disability in PSR, it might be helpful to see the child's IEP to learn what accommodations or modifications he or she is receiving in the classroom. ***However, you can not require the family to give you the IEP. This is against the law.*** You can ask to see it, but it is up to the family to decide if they want to share it. The best thing you can do is to provide a welcoming, inclusive environment so that parents feel comfortable sharing helpful information. Your PSR program is not complete unless you are reaching all of the children in your parish who do not attend Catholic schools.

## **How can I advocate for my child at my church?**

The best way to advocate for your child at church is to bring your child to church. Let him or her be visible in the parish in a manner best suited for the child and your family. Do what is right for your child and don't give him or her more than they can handle. Start small, and be grateful for small victories. Talk to your pastor about your child so he has some understanding for the situation, especially at mass when your child's behavior might look different than another child of the same age. Some general tips for children with disabilities are as follows:

- Sit in a place that best suits the child. This might be up front so he or she can see, on the end to allow for breaks, or in a less crowded area or separate room.
- Use a visual schedule of the parts of the mass to help time pass.
- Bring headphones if noise is an issue.
- Prepare the child ahead of time for the mass and allow for extra time in learning.
- Role-play the mass ahead of time. Go to church when it is empty.
- Be patient. Give your child and yourself some grace. Know when your child has had enough. It is ok to leave early for the sake of your child and other parishioners.

## **Inclusion in action**

Grace is an eight year old girl with Down Syndrome who attends her local Catholic school. She is in second grade and getting ready to receive her first sacrament of Reconciliation. Grace has difficulty speaking but can understand a lot. Her teachers have been working closely with Grace's parents and the pastor, Father Evans, to ensure that Grace is ready to go to confession.

Grace is included in all of the preparations that her peers are doing, as well as getting some separate one on one time. Because of her limited language, Grace's teacher developed a visual schedule of what happens during Reconciliation. She also made laminated cards with various sins shown in picture form for Grace to point to during the sacrament. When it comes time to say her Act of Contrition, Grace has a card with the words on it that she will follow along to while the priest says it.

Grace and her teacher spent time role playing what will happen at confession, first in her classroom with peers, then in the church, and finally in the confessional. The first time Grace went into the confessional, she did not like the door closed, so her teacher tried gradually closing the door each time they rehearsed until they settled on having it open about 6 inches. Father Evans practiced with Grace her final two rehearsals and was kept informed on all of Grace's accommodations and modifications.

Finally the night of Grace's first Reconciliation was here. Grace went first and all went smoothly. All the preparation paid off, and Grace is forgiven!

## **Further reading**

Guidelines for the Celebration of the Sacraments with Persons with Disabilities

<http://www.usccb.org/beliefs-and-teachings/how-we-teach/catechesis/upload/guidelines-for-sacraments-disabilities.pdf>

Pastoral Statement of U.S. Catholic Bishops on Persons with Disabilities

<http://www.ncpd.org/views-news-policy/policy/church/bishops/pastoral/>

# Chapter 13 Schoolwide Initiatives: PBIS, Peer Supports, UDL, RTI/ Care Team



## **This chapter will offer:**

- What school-wide initiatives should we explore?
- How do we begin a school-wide initiative?
- Inclusion in action
- Further reading

## **Introduction**

**For the body is not one member, but many.**

1 Corinthians 12:14

Successful inclusion starts with the leadership of the administrator and pastor. Inclusion is not meant to happen in one classroom, it happens in an entire school, spreading the message of love and acceptance to more than just one group of children. By setting up school-wide initiatives, you are helping your entire building feel successful, helping those with disabilities succeed along with every other child.

## **Did you know...?**

There are 7 factors needed to successfully implement school wide initiatives:

1. Creating a shared vision
2. Developing an action plan
3. Teaching new skills
4. Providing adequate resources
5. Determining motivators
6. Keeping the fidelity of the program
7. Sustained implementation

(Davis-Perry, D., 2019)

## **What school-wide initiatives should we explore?**

A lot of the school-wide initiatives to explore for your school are mentioned in other chapters in this manual. See chapters 10, 17, and 21 for further reading on Care Team, Positive Behavior Supports, and Universal Design for Learning. Of course, inclusion is the number one priority of school-wide initiatives, but implementing other programs can help in your ministry of inclusion. PBIS or other virtue-based behavior program, UDL, peer supports, and Care Team/RTI are examined as important initiatives to begin in an inclusive school. RTI is a multi-tiered system of support (MTSS) that can help learners at different levels. These initiatives cover behavior, social interactions, early intervention, and teaching methodology. These are just a sampling of school-wide initiatives that cover a broad base, but there are other initiatives that can be school-created as well.

## **How do we begin a school-wide initiative?**

Strong leadership from the administrator can make implementation of an initiative go smoothly. Leaders need to make decisions on what initiatives would be best for the school and involve relevant stakeholders like teachers in implementation. Developing a committee to promote buy-in, training, shared vision, and ownership would be a good first step. The committee can research the initiative and train teachers, saving time and cost. Bring in an outside expert when necessary for more complicated or foreign initiatives.

The whole staff should be trained on the initiative from the committee or experts. This will require an action plan. Use book clubs, professional development meetings, or informal lunchtime gatherings to train staff. Trainings should be broken down into benchmarks and timelines that are carefully aligned and mapped out from the get go.

Teach the new skills explicitly and systematically, allowing time for rehearsal and exploration on the part of stakeholders. Build in time for teachers to practice any new skills needed and observe other teachers if necessary. Seeing something in action is very powerful.

Provide all the resources that teachers will need. Be creative. Be open to answering questions and finding answers. Remember to allow for empathy and grace as teachers are learning something new.

Determine what the motivators are for the stakeholders, mostly the teachers. Why are we adding to a seemingly full plate? What will this initiative take off of teacher's plates in the long run? Don't ignore motivating factors for teachers, otherwise the initiative may fail.

Keep the fidelity of the program. Make sure it is consistent and that everyone is trained and comfortable, even after the initial implementation phase. Have check-ins for accountability from stakeholders at all phases.

## **Inclusion in action**

Mr. George has been teaching in Catholic schools most of his 20 year career. As each year passes, he gets more and more frustrated at the students entering his classroom. They are harder to engage and motivate, and parents seem less supportive than ever. He is starting to get bitter,

and it is showing in his teaching. All he feels that he does is react to behavior issues and that he never has time to teach.

Dr. O'Reilly is in his first year as principal of the school where Mr. George teaches. He has noticed Mr. George and others struggling and has decided to put some school-wide initiatives in place to re-energize the teachers. He starts with PBIS and UDL. He knows that PBIS will help with student behavior and UDL will encourage more authentic learning, along with engagement which will lead to better behavior as well.

Dr. O'Reilly really wants the teachers on board with the plan, so he develops a committee for both. He puts Mr. George in charge of the UDL committee. At first he is skeptical of the concept, but as he learns more and sees it in action at another school, he is willing to try.

Professional development time is devoted to both initiatives along with book clubs and teacher mentors within the building who are trained first and can help train others and help with buy-in. The biggest motivator for the teachers is better behavior from the students, and they see this when they visit another school. Dr. O'Reilly provides support in any way he can and makes sure the programs are developed with fidelity and consistency.

Several months after starting both programs, Mr. George is a believer. He sees more engagement from students and better behavior. He can now admit that his teaching style was a little boring and is happy to share what he's doing in the classroom with other teachers.

## **Further reading**

Here is the link to the UDL guidelines that offer a set of concrete suggestions that can be applied to any discipline or domain to ensure that all learners can access and participate in meaningful, challenging learning opportunities. See more in chapters 10, 17, 19, and 21.

<http://udlguidelines.cast.org>

# Chapter 14

## What General Education Teachers Need to Know and How to Train Them



### **This chapter will offer:**

- What do our classroom teachers need to know to effectively include children with disabilities?
- How do I train teachers?
- What resources will I need?
- Inclusion in action
- Further reading

### **Introduction**

**Lord, teach me what I cannot see.**

Job 34:32

We don't know what we don't know. General education teachers are trained completely differently than special education teachers. To be fair to our children and our teachers, we need to prepare classroom teachers for how to best serve our children in the ministry of inclusion.

### **Did you know...?**

- A research study done in 2012 on children with autism compared the amount of time children were spending on educational tasks in a general education classroom vs a self-contained classroom. The study showed that children in inclusive gen ed classrooms were engaged 91% of the time and only 60% in the self contained classroom (Kurth & Mastergeorger, 2012).
- A study in 2007 found that general education teachers in a teacher preparation program reported taking an average of 1.5 classes on special education, compared to about 11 classes for special education teachers (Cameron & Cook, 2007).

### **How do I train teachers?**

Help your teachers understand that they are most likely already doing things in their classrooms that are inclusive. They are already adapting lessons for children with varying needs because no two children learn in the same way. Encourage this mindset and build upon it.

### **From outside sources...**

1. The best way for teachers to learn about inclusive classrooms is to let them see one. Allow time for them to observe at inclusive Catholic schools and see best practices in action. Chances are when they see an inclusive classroom in action, they will think, “I can do that!” or even better, “I already do that!”
2. Allow time and resources for professional development at least monthly and at summer meetings leading up to the school year. Let teachers give input into what kinds of things they feel they need to learn in order to be the best teachers they can.
3. Think outside of the box in terms of professional development. Professional development does not need to cost money in order to be good. Do you have a parishioner with a gift in special education who can volunteer an afternoon of his or her time to train teachers in a certain domain? Is a particular teacher in your building talented in behavior management, taking data, or parent communication? Could he or she give a presentation to the rest of the staff? Are there parents within your community who could help? What about your local university? They might have staff or graduate students who would be willing to help.
4. Schedule professional development into your yearly calendar in advance and let teachers know about it in order to build excitement.
5. Send your teachers resources about professional development topics in advance so they aren't going into it blind. Background information helps all students learn, including adults.
6. Call in an expert. When you are beginning the process of inclusion or struggling with it, you need an expert to help guide the way. Experts can be recommended through One Classroom.

### **From within your own building...**

7. Form book clubs within your staff. Make them optional but attractive. Offer treats, lunch, or other incentives like raffling off 30 minutes of extra planning time for attending. Choose the books based on teacher input and need. Choose a leader to facilitate discussions.
8. Be supportive and reinforce teacher strengths. Be explicit in your expectations of teachers but know that everyone has limits. Place children in classrooms mindfully and build off the strengths of the teachers in your building.
9. Teachers should collaborate with and mentor each other. Even if you only have one section of each grade level, teachers can collaborate across grade levels. Find a mentor in an inclusive classroom in another school if necessary for each teacher beginning the journey of inclusion so that he or she has someone to troubleshoot with and share victories.
10. Allow time for teachers to collaborate and learn. Build it into the schedule and find coverage for classrooms so that teachers can work together.

## **What do our classroom teachers need to know to effectively include children with disabilities?**



Other chapters in this manual cover most of these topics but further professional development will be needed. This is a broad list of skills that will help your teachers feel more confident and be more effective with all learners. Keep in mind that in giving classroom teachers these skills, they are not just helping a small population of children with disabilities, these are skills that will benefit *all* students.

**\*Add page and chapter numbers when available**

- What does inclusion look like?
- Communication and empathy for parents
- Collaboration with other teachers and paraprofessionals
- How to modify/ adapt a lesson plan
- How to take data on a behavior or skill
- Behavior management/ PBIS
- Universal Design for Learning (UDL)
- RTI
- Health and safety
- Peer supports

## **What resources will I need?**

The best resource you can use is other Catholic schools that are successfully inclusive. Form a camaraderie with another school and share resources. A lot can be learned in hearing from another school and their experiences. And after you have successfully become an inclusive school, offer your expertise to others.

Experts in the field of special education will be another key piece to successfully training classroom teachers. You might have experts within your own building, but if not, check your parish community and parents.

Subscribe to websites that can send newsletters, book recommendations, or other valuable information. Pass this information on to your staff. See the Resources section for some suggestions. [Theinclusiveclass.com](http://theinclusiveclass.com) is an amazing website with tips and tricks for inclusion as well as a free, online database of modified lessons.

A final resource that sometimes gets overlooked is empathy and grace for your teachers. Inclusion might not be a concept that was ever on their radar before, depending on how long your teachers have been in the classroom. It might seem scary or overwhelming to many. Preparation is the key to lessening that anxiety.

## **Inclusion in action**

Mrs. Byrd is a 5th grade teacher in a Catholic school. She has been teaching for almost 20 years and has a lot of experience. Because of this experience, she is very valuable in many ways, but like many teachers, she is also a little locked into her method of doing things. She expects the children to adapt to her, not vice versa.

This year, Mrs. Byrd has a diverse group of learners that includes 3 children with ADHD, 2 with learning disabilities, and one child on the autism spectrum. She is beginning to struggle in

reaching all of her students and is getting burned out and frustrated. Before her negativity spreads to other staff, the principal steps in to help her feel more prepared.

The principal, Mr. Boyle, realizes that Mrs. Byrd's frustration is probably rooted in a lack of knowledge as to how to reach all of the students in her class. Classroom dynamics and children are a lot different now than they were when she received teacher training. Inclusion is also a new concept to her, and she has been very vocal about her opinions against it. Mr. Boyle knows that in order to help Mrs. Byrd, he needs to begin with allowing her empathy and grace, then helping her gain the skills she needs to feel more successful.

He starts by having a meeting with Mrs. Byrd to discuss her strengths and feelings. He is careful, however, to maintain that inclusion is a purposeful part of our mission as Catholics and will not let the conversation veer into a venting session. He asks what her struggles are in the classroom, focusing on her needs and not placing blame on the children or parents. They have a good conversation, directed carefully by Mr. Boyle, about what areas Mrs. Byrd needs support in and what he can do to help her. They decide that her biggest gap is in understanding the needs of her students who learn differently. She has no grasp on how her diverse learners can also have sensory needs that prevent them from learning or behaving properly. She knows nothing about how a person's brain with ADHD functions and that most people with ADHD have average to high IQs.

Mr. Boyle develops a plan to help Mrs. Byrd. He starts by getting her an afternoon sub so that she can see some top teachers in the area practice inclusion. Mrs. Byrd comes back re-energized and ready to learn more. Mr. Boyle asks one of the teachers she observed to become a mentor of sorts to Mrs. Byrd. They exchange email addresses and exchange ideas and troubleshoot together. Mr. Boyle starts sending out electronic resources like [understood.org](http://understood.org) that Mrs. Byrd can easily access on her own when needed. He also books several experts in the areas that Mrs. Byrd and other teachers are needing help with to come to their monthly professional development meetings. He shares the topics and dates with all of the staff to build excitement and re-energize them. He also develops an inclusion team made up of staff members to help him identify needs, resources, and train teachers.

Mrs. Byrd and other staff members slowly get more comfortable with more training and understanding of people with disabilities. Mrs. Byrd ends up mentoring a teacher in another school the following year and heading up her school's inclusion team. She finally understands the ministry of inclusion.

## **Further reading**

See Nicole Eredics website, *The Inclusive Class*, for classroom tips and tricks on inclusion.  
<http://www.theinclusiveclass.com/>

Understood.org has resources for classroom teachers to gain a better understanding on disabilities, as well as tips for how to manage children with differences.  
<https://www.understood.org/>

# Chapter 15

## Decision Making for Related Services



### **This chapter will offer:**

- What are related services?
- What are the options for providing related services?
- Inclusion in action
- Further reading

### **Introduction**

**“There is nothing small in the service of God.”**

Saint Francis De Sales

Many children with disabilities require related services to help them learn and function within a school environment. In the public school system, related services are required if a child needs them. For Catholic schools, providing related services can be expensive but can also be a great selling feature for your school if you get creative. Many parents choose public schools because bringing a child to related services after school can make for a long day and daunting task, especially for children with disabilities who might have reduced endurance.

### **Did you know...?**

- According to the Iris Center at Vanderbilt University, speech and language pathologists are the most used related service provider at 29% of all service providers (2019)
- According to Chalkbeat.org, in 2016-2017, 73% of students with disabilities received related services of some kind (2017).

### **What are related services?**

Related services are any service related to a child’s disability that can help him or her succeed. These include but are not limited to:

1. Occupational Therapy (OT) - An OT will help with task related issues like school work. They can specialize in several areas but are seen in schools for things like pencil grip and fine motor skills, sensory issues, and self regulation skills.

2. Physical Therapy (PT) - A PT can help with general motor functioning. They are typically seen in schools for help with walking, jumping, balance, or any other motor issue pertaining to a child.
3. Speech and/ or Language - A speech/ language therapist (SLP) sees students for issues with speech like how sounds and words are pronounced, tongue placement, etc. They also see students who need help for language skills like understanding the meaning of words in expressive or receptive language.
4. Applied Behavior Analysis (ABA) - A BCBA is a person trained in ABA who helps students decrease behaviors that are harmful or not helpful and increase helpful behaviors.
5. Special reading services such as Wilson - Wilson is a common reading program used for students with Dyslexia. It requires special training but is not the only option for Dyslexia or learning disabilities in reading. Another reading support program is Fountas and Pinnell. It is especially helpful for English language learners and students needed social skills support. Guided Reading is another specialized reading program to consider when choosing a program that meets the needs of your specific population.
6. Psychological Services - Counselors can help with trauma or other issues manifesting in the classroom. They can also be used for executive functioning lessons, social skills, and self-regulation. Programs like Zones of Regulation are easy to teach and can benefit *all* children.
7. Audiology - Audiology can test hearing and provide appropriate recommendations. Hearing tests are free for all students through the local school district.
8. Social Work - Social workers can help with social skills or in finding services for students or families in need. Do not ignore the need for social skills training in our children with and without disabilities. This should be incorporated into regular curriculum.
9. Executive functioning training - Executive functioning skills should be taught to *all* students explicitly and reinforced for our children with disabilities. These skills can be taught by a special education teacher or someone similarly trained. They should be embedded into your curriculum and used daily.

## **What are the options for providing related services?**

There are several options for related services. The first option is to go through the local school district for an evaluation and have an Individualized Service Plan (ISP) made. If eligible, the child can receive related services for free, though in most cases he or she would be receiving services after school at a public school location, or spending part of the day at Catholic school and part of the day at public school. However, going through the public evaluation system is a stressful and time consuming process that requires a diagnosed disability.

Another option for services is private pay for the families that need it. There are several organizations that have related service providers who go into schools to provide services. The downfall here is that it is expensive for individual families and does not support the full mission of inclusion being a parish-wide ministry when we leave the financial burden on a few people.

Thinking outside of the box can help in getting students the services they need. Do you have parishioners who can volunteer? Retired speech or language teachers? Can you find a way

through parish-wide fundraising to hire a service provider that would serve the needs of several students in your building? Remember that services provided can overlap so an OT can provide some of the same services as a PT, depending on a child's goals. Can you ask your reading specialist or special education representative to get Wilson trained? Besides being the right thing to do in order to help your students, providing related services is an excellent selling feature for your school.

In order to access services through a provider, an evaluation would need to be done for the child. This process might be recommended through your school's Care Team by a teacher who has noticed some issues. Parents can also request evaluations on their own if they suspect a problem.

## **Inclusion in action**

Danny is a preschool boy with Down Syndrome. He has been attending his local Catholic school, but traveling to other places three days a week after school for PT, OT, and speech has become exhausting for him and his mother. His family is paying tuition at school, plus the extra cost of related services after school. They aren't sure how much longer they can keep this pace and cost before needing to switch to the public school where Danny could get services for free within the school day. Danny's parents go to the principal to help.

Mrs. Summit has been the principal of the school for years and started the inclusion ministry three years ago at the request of another family. She prides herself on how inclusive her school is, but she admits she never considered the burden of related services on a family. She had no idea how time consuming it is, especially for families with other children as well. She knows that Danny needs these services, especially at his young age to hopefully prevent greater issues down the road. Mrs. Summit sets up a meeting with the pastor to brainstorm how they can help.

Father McCormick is happy to meet, though he doesn't know much about related services. Mrs. Summit fills him in on the situation, and they start to come up with solutions for Danny. As they talk, they realize that there are about 20 kids within the building who receive services after school for speech and language issues. Most of the students are in the younger grades and will hopefully graduate out of this service with age. If they could find an SLP to come in just 2 days a week, all of those students could receive services within the school day. The school lost 3 students last year to the public system because of a lack of related services. Tuition dollars from those 3 students would have covered the salary of an SLP 2 days a week. Father McCormick decides to allocate the extra money for an SLP in hopes that it will help with retention numbers next year.

He also mentions that he recently baptized the baby of a parishioner who used to be an OT at a local public school. She is now staying home with her baby but might welcome the opportunity to volunteer an hour a two a week using her OT skills. He reaches out to her, and she happily agrees to help.

Father McCormick and Mrs. Summit fill in Danny's parents on what they are able to do. Danny's parents are over the moon that Danny can go home after school two more days a week and still get his services. They are also ecstatic to not have to pay for private services in

speech and OT. Though they haven't found a solution for Danny's PT yet, Mrs. Summit suggested that the PT come to the school in order to save time and travel. Though Danny's parents would still have to pay for the PT, it would help tremendously with the time commitment.

Word spreads of Danny's related services, and the school did not lose a single student to the public schools the following year. In fact, they gained 5 more students who are siblings to students in the school but have attended public school in order to get services. This more than makes up for any extra cost of the service providers, and the school is carrying out the ministry of inclusion successfully!

### **Further reading**

The following link has resources on deciding what related services would be helpful to a student, as well as other resources to improve educational outcomes for all students.

<https://iris.peabody.vanderbilt.edu/module/rs/cresource/q1/p01/>

# Chapter 16

## Paraprofessional Training and Collaboration



### **This chapter will offer:**

- What is a paraprofessional?
- How do I train a paraprofessional?
- What might this look like in a classroom?
- Inclusion in action
- Forms

### **Introduction**

**Not by the way of eye-service, as people-pleasers, but as servants of Christ, doing the will of God from the heart.**

Ephesians 6:6

Paraprofessionals, or paras, are crucial to the success of students with disabilities in the classroom. Paras work one on one with students who have disabilities by providing instructional support, social support, and safety. They are the eyes and ears of the teachers and the ones who implement day to day routines like toileting, eating, and class work, as instructed by teachers or learning consultants. Paras ensure that the needs of his or her students are met in and out of the classroom and help facilitate peer relationships. Without paras, inclusion of students with disabilities in our Catholic schools would not be possible.

### **Did you know...?**

- The typical paraprofessional is a 44 year old woman
- 29% of paraprofessionals have a high school diploma
- 38% have some college
- 32% have an associates degree or higher, mostly unrelated to education

(McGrath, Johns, and Mathur, 2010)

## What is a paraprofessional?

A paraprofessional is a person who provides educational services to a student or students in a support staff role. They are to support the mission of the school and empower students with self-determination and the love of Jesus Christ. Paraprofessionals do not need to be certified teachers, though a special education background is helpful. The best quality for a para to possess is a willingness to learn. Paras can be parent volunteers or other parishioners who have been well trained by a school's special education staff. Paraprofessionals can support students by following the guidance of teachers in:

- Offering individual support to a student during a lesson
- Managing behaviors while the teacher is instructing
- Taking data on a particular student
- Working with a small group of students
- Providing modifications and adaptations as instructed by the teacher
- Assist in social development
- Assist in implementing a child's individual learning plan
- Collaborating with teachers and staff to provide updates and input
- Maintaining confidentiality of the student
- Creating visual schedules and supports
- Filling in a daily parent log to be sent back and forth each day, as approved by the learning consultant or resource teacher
- Assisting with student communication systems
- Facilitating peer relationships
- Remembering that each child is made perfectly in God's image and respecting the dignity and privacy of all students
- Assisting with faith formation

## How do I train a paraprofessional?

It is the role of the learning consultant or resource teacher to manage and train paraprofessionals and to include the classroom teacher in all team meetings regarding a specific child. Assuming all team members will naturally mesh together without setting any norms or explanation of each member's role on the team will only lead to conflict.

The **team leader** should be the learning consultant or resource teacher who is trained to teach children with disabilities. It is his or her role to be proactive and create open channels of communication with teachers and paraprofessionals to promote community and demonstrate the value of all members. The team leader should frequently show appreciation and positive feedback to team members, ask for opinions when troubleshooting, create professional development opportunities, and receive input of any kind. The team leader is in charge of managing and training paraprofessionals while keeping other stakeholders like administrators, pastors, other service providers, and parents up to date on specific students and their goals. Specifically, team leaders should do the following...

1. **Set expectations before the year begins.** This should be done in a meeting with teachers and paraprofessionals before the school year begins. In this meeting, expectations and roles of all team members will be discussed and posted. All team members should receive and sign a copy.



2. **Post a schedule for paraprofessionals and give them a copy each week.** This should include special events in the school, any pull out times for a child and where he or she is to go, team meetings, breaks, and duties. This will be helpful for each paraprofessional but will also be crucial in case a para is absent.
3. **Meet every week with the paraprofessionals and teachers.** Bring treats! Use this time to problem solve, answer questions, and provide training. Training ideas include functions of behavior, taking data, adaptations and modifications, levels of prompting, or topics specific to the disabilities of the children in your building. Keep records of each meeting and have all people in attendance sign it.
4. **Model and create open communication.** Keep your relationships professional and respectful with the goal being on the success of each child. Allow for occasional anonymous feedback through surveys or suggestion boxes. Get comfortable receiving and giving feedback.
5. **Understand the skill base of your paraprofessionals.** Each para will have a different background and experience level. Play to each paraprofessional's strengths and provide professional development regularly in weekly meetings. Communicate regularly to discover the strengths and comfort level of your paraprofessionals and allow for grace and learning.
6. **Give paraprofessionals a space in the building.** They should all have their own spot for their belongings and a place to go for breaks and lunch.
7. **Build community.** Celebrate small and large victories of the children paras work with, celebrate birthdays, and reinforce excellent work.

## **What might this look like in a classroom?**

The role of the paraprofessional will vary based on a student's needs and the environment. For example, at recess a child needing social support might need explicit instruction and modelling by a paraprofessional of how to approach another child and ask to play. In the classroom, a child who needs significant modifications and explicit instruction in math class might sit at a table with the paraprofessional working on a lesson with different objectives than his or her peer, as instructed by the learning consultant or resource teacher. For a child who needs more assistance in unstructured time and transitions but is an excellent reader, the paraprofessional might be assisting the general education teacher with small reading groups but allowing his or her assigned child space to be part of the class in a meaningful way, so as not to create dependence or inhibit peer interactions. Paraprofessionals should be "invisible" heroes to our children with disabilities, jumping in to help all children when needed and never making it apparent exactly which child or children he or she is there for. Paras used to be referred to as "shadows" when the philosophy was to act as a shadow to children, never leaving their sides, but research has shown that all children need space to learn and develop self-determination skills.

It is crucial for the learning consultant or resource teacher to communicate with paraprofessionals about each child and when to step away. Paraprofessionals should be there to support a child when needed but also to foster independence and self-confidence to do things on his or her own.

## **Inclusion in action**

Johnny is starting kindergarten at his local parish Catholic school, where his three older siblings attend. He has developmental delays, orthopedic issues, and epilepsy. Despite his challenges, he is a joyful, curious boy who loves trucks and trains and playing outside. Johnny's school and

parents have decided that he needs a paraprofessional to be with him during the school day to give him one on one support in academics, social awareness, and physical issues like lack of endurance and sensitivity to heat.

There is another child in the school, Tom, who needs a one on one paraprofessional as well. The team has decided it would be best to have Johnny and Tom switch paras every other day, so as not to allow them to form a dependence on a particular adult and to encourage their self-determination skills.

Before Johnny and Tom start the school year, the learning consultant or resource teacher leads a meeting with Johnny and Tom's general education teachers, both paras, and any other support staff that will be working with the boys. To begin the meeting, all participants fill out an informal survey about what his or her strengths and experiences are, areas they'd like to improve on, how they communicate best, and how they would prefer to receive feedback. Also on the survey are things like when each person's birthday is, favorite treats, and other fun items to use to build community. Next, the responsibilities of each person are discussed and written, then signed by all participants. The learning consultant creates a weekly schedule for each child with daily activities as well as the general education teacher's schedule of subjects so that each para knows where to be in advance, as well as what his or her responsibilities are in each area. The learning plans of both boys are discussed, using a strengths-based approach, and specific goals and benchmarks are looked at and broken down.

Every week, the team meets to discuss what is working and what is not based on Johnny and Tom's needs. Because the team established norms and roles at the beginning of the year, the learning consultant or resource teacher is able to communicate with each team member in a way that works for him or her in a respectful and private way. That leaves time at the weekly meetings to work on professional development, where each boy is in terms of his personal goals and benchmarks, and to troubleshoot together to solve problems before they get too big.

## Forms

- Beginning of the year para survey/ preferences sheet (Appendix R)  
<https://documentcloud.adobe.com/link/track?uri=urn%3Aaaid%3Aacds%3AUS%3A2e45fa78-b8dc-43b5-81d8-cd71499f5051>
- Paraeducator expectations checklist (Appendix S)  
<https://documentcloud.adobe.com/link/track?uri=urn%3Aaaid%3Aacds%3AUS%3A540781bf-c8fa-4e89-97b2-497f290c2ad3>
- The website, The Autism Helper has great examples of schedules for paraprofessionals, as well as other resources.  
<http://theautismhelper.com/paraprofessional-schedule/>

# Chapter 17 Behavior Management



## **This chapter will offer:**

- Is behavior management different for children with disabilities?
- What are Positive Behavior Interventions and Supports (PBIS)?
- Is there a Catholic alternative to PBIS?
- What are the 4 main functions of behavior and how can I use them to prevent behavior issues?
- What are some tips and tricks for my classroom?
- Inclusion in action
- Forms
- Further reading

## **Introduction**

**For the Lord sees not as man sees: man looks on the outward appearance, but the Lord looks on the heart.**

1 Samuel 16:7

How to prevent and manage challenging behaviors is arguably the hardest part about being a teacher, especially when a child has a disability or can't communicate in a matter that we are used to. By understanding that behavior is a means of communication, we can help decode the messages that our students are sending and meet the needs of all learners.

## **Did you know...?**

- PBIS is an evidenced-based practice for preventing and responding to challenging behavior
- PBIS incorporates the entire school, classrooms, and families
- PBIS supports the mission of the Catholic church in that it respects each child as having worth and dignity and that we are all made uniquely by God

## **Is behavior management different for children with disabilities?**

The short answer to this is yes. Children with disabilities might need more explicit instruction and more time to learn desirable behaviors, just as they would for any other subject area. Also keep in mind that many children with disabilities have other health or sensory issues that affect general behavior. This is not an excuse for poor behavior, but it should help keep things in perspective that in the grand scheme of things, it might be more important to teach a student with

Down Syndrome how to interact effectively with peers than it would be to try to make him sit perfectly still in a traditional classroom chair for a 45 minute lesson.

However, most children, typically developing or not, are not acting up just to bother their teachers. Disability or not, children are communicating a message with their behavior. It is your job to figure out what that message is. One thing is clear, all children need clear expectations. Expectations can be different for different children, but all children need rules. Rules make children feel safe and cared for, and that is something everyone needs.

## **What are Positive Behavior Interventions and Supports (PBIS)?**

Positive Behavior Supports and Interventions, or PBIS, is a three-tiered model of behavioral support that was derived from Applied Behavior Analysis, or ABA. PBIS is a school-wide initiative that engages all staff in focusing on positive behavior and being proactive to prevent behavior challenges.

PBIS should be implemented by the administrator of the school. Because this is a school-wide system, it needs to be started and managed at the top and trickled down into the school community. PBIS can ideally be implemented with training from an outside source, but it can also be started through research, using key elements gathered through PBIS.org, books, or other sources. The key to PBIS is to keep the focus on positive behavior, school-wide consistency, and family involvement.

Tier 1 will address the needs of about 80% of the students in your school. This includes the following:

- Setting school-wide expectations that are practiced and explicitly taught
- Aligning classroom expectations to school-wide rules and explicitly teaching and practicing
- Incentivizing positive behaviors across the building
- Defining what behaviors are unacceptable and being consistent throughout the building so as not to confuse students
- Engaging parents in encouraging school rules from home

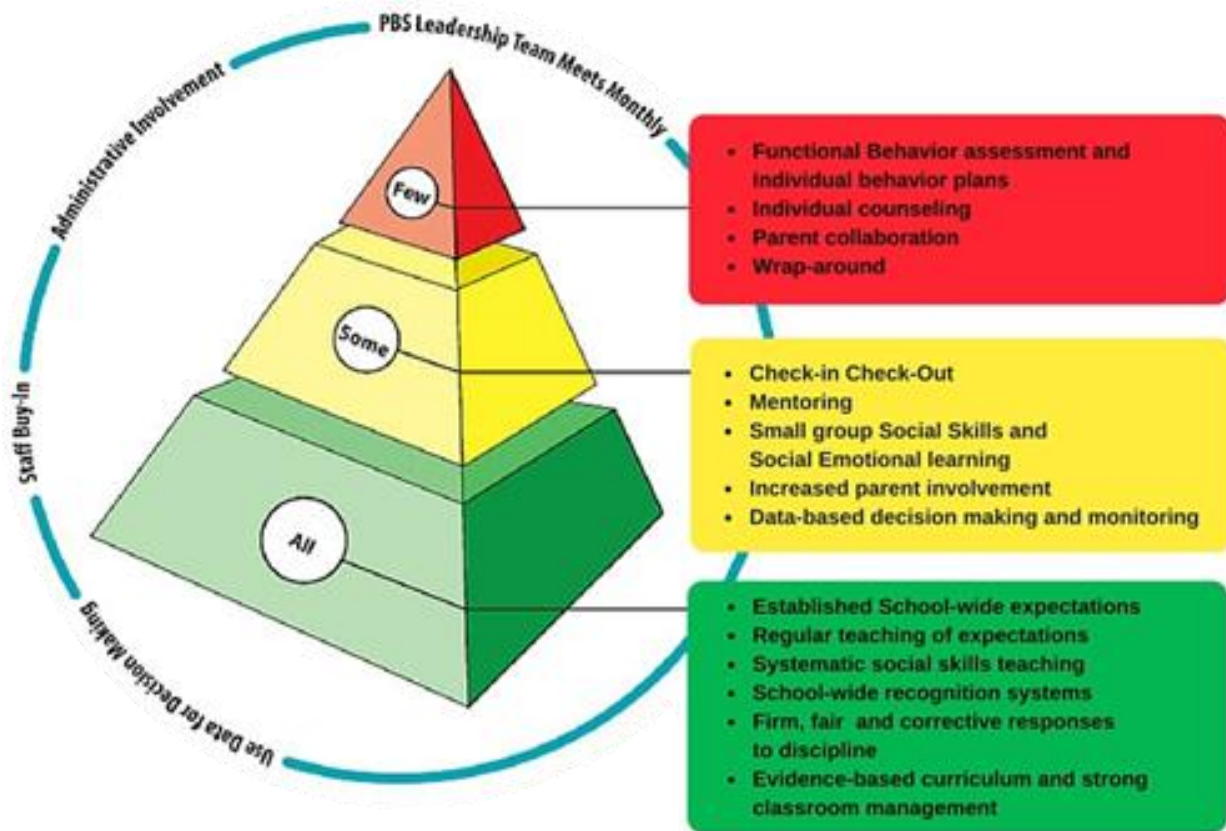
Tier 2 will address about 15% of your school for students who exhibit at-risk behavior. This includes:

- Teaching positive behavior in a more individualized way through self-regulation and social skills training
- Increasing adult presence and trying to catch a student doing the *right* thing to reinforce positive behavior
- Increasing access to academic support if the behavior is related to frustration
- Using data to figure out why a child is acting a certain way in order to prevent challenging behavior in the future

Tier 3 addressed the final 5% of your building, including students who need individual support plans for behavior issues. This includes:

- Using Functional Behavior Assessments (FBA) to examine the challenging behavior in order to prevent it in the future

- Creating an individualized plan centered on the student's needs



## Is there a Catholic alternative to PBIS?

Virtue Based Restorative Discipline, or VBRD, is a school-wide behavior support system that is used in many Catholic schools. It provides the same function as PBIS, focusing on the positive and helping to teach students alternatives to negative behavior. VBRD takes Catholic virtues and incorporates the teachings of the church into its approach to discipline and encouraging each child to be the best that he or she can be.

## What are the 4 main functions of behavior and how can I use them to prevent behavior issues?

The four main functions of behavior, or “Why is he/she doing that?” are:

1. Escape
2. Sensory
3. Access to tangibles
4. Attention

In a perfect world, you will have someone in your building who is special education certified and can do a Functional Behavior Assessment (FBA) on a child that is tier 3 and needing individualized behavior supports. If you don't have someone in your building, reach out to parishioners or other community members and ask for an FBA. An FBA will involve having someone take data on specific behaviors, looking for clues like what is happening immediately before or after the behavior occurs, what time of day, the location, the subject area, frequency of behavior, duration, etc., in order to figure out the function of the behavior. Once the function is determined, steps can be taken to fill that child's need before the challenging behavior occurs, thus preventing it.

For example, a child who is constantly wanting a drink or bathroom break might be wanting to escape. This could be because academic content is too difficult or not challenging enough. Steps can then be taken to modify the work appropriately so the child is not learning out of his or her zone of proximal development.

Another child who is constantly wanting to leave to room might be experiencing sensory overload. This is common for children with ADHD, autism, and intellectual disabilities. The noise, sights, smells, and movement of a classroom might be too much for that child's nervous system to handle. If a child is experiencing sensory issues, a plan can be developed to get his or her sensory needs met before overload happens. Small breaks can be scheduled, headphones can be used, or the child can work in a quiet corner of the room.

A child who is yelling out or "class clown" might be seeking attention. Usually social skills training and more peer interactions can help prevent this. Also, checking in with an adult buddy first thing in the morning and before going home to talk about the day can help fill a child's need for attention and prevent unwanted behavior.

If a child is throwing a fit in order to get iPad time or something similar, the function of that behavior might be access to tangibles. If we know that iPad time is a preferred activity for a child, it should be built into a visual schedule to incentivize less-desirable tasks. If the child can see that it is coming, that will reduce the need to have a tantrum.

These are just a few examples of how figuring out the function of a behavior can help prevent the challenging behavior from occurring. There is a lot of good that can come out of an FBA, so if you have a child who is struggling, please bring in an expert to help. Sometimes really simple fixes make a huge difference.

## **What are some tips and tricks for my classroom?**

You will notice from this list that most of the items are things that *you* can change in your classroom. By making simple changes, the behavior of others will change around you. You can not punish a behavior out of a child. This is especially true for children with disabilities. The behavior will simply manifest in a different way. Start by looking at behavior as communication and be your own classroom detective. Treat each child with dignity and grace. It is usually the children that are most challenging that need the most love.

- Remove temptation. If you know that Johnny and George talk too much together, they shouldn't sit next to each other. Better yet, incentivize it. Tell Johnny and George that if they can accomplish x, y, and z that they can work together on the next partner assignment.
- Be prepared. If you are pulling a small group, have a cup of sharpened pencils on the work space and any other supplies needed. You don't need to prove a point to the child with ADHD who can barely remember his name during transition times and the over-stimulation of a classroom.
- Praise. Every child should receive a 4:1 ratio of positive to negative comments from the teacher. Catch kids being good, and be specific. A comment like, "Claire, I love how you pushed your chair in!" is much more specific than, "Good job lining up," to the whole class.
- Watch your transition time. Transitions to and from specials, changing subjects, lunch, library, etc. are the most challenging to all students but especially to those with disabilities. A five minute and one minute warning should be given before transitioning. Some children, especially those with ADHD or autism should get their own personal warning of a transition coming. Extra time should be taken to practice transitions, and expectations should be clear and in writing. Some children should have their own visual copy of expectations if they are struggling. Make sure you are organized and keep transitions short. Transitions are not a time for teachers to check email or look at papers. Full attention should be given to reduce the stress on all.
- Give choices where you can. Tell the class what needs to be accomplished in the next 45 minutes of social studies time and let them vote on the order of activities. Give choices in how they can demonstrate their knowledge to you. Let them show off their strengths. One child might be able to write and sing a song about the 50 states, while another might prefer to type a report on the computer.
- Break up difficult tasks with simpler ones. If a child is working on adding fractions, intersperse answers that don't require simplifying or finding common denominators with some that do.
- Move, Work, Breath. When initiating difficult tasks, help cut down on frustration by letting the class get up and move for a minute or two, then work a little bit, then do some deep breathing to decompress. Your productivity time will increase and challenging behaviors will decrease if you use this method.
- Make sure your activities are meaningful. Don't assign busywork or work that is too hard or too easy.
- Use reinforcement to teach positive behaviors. Remember that reinforcement has to be reinforcing to that specific child and immediate.
- Make expectations clear. Practice expectations, post them, refer to them often.
- Teach replacement behaviors. If a child is being distracting to others by tapping his pencil on the desk, teach him to tap his leg instead.
- If a child is struggling with a specific behavioral expectation, break it down into small chunks and teach it as you would an academic lesson.
- Pick your battles. If a child is safely sitting on his chair but with his feet folded underneath him instead of on the floor, ignore it. Many children focus better when their body is in motion. Direct your attention to safety issues and things that are distracting to others.

- Pray, “Come Holy Spirit,” when you are feeling at the end of your rope. This will give you a second to calm your nervous system and let the Holy Spirit take over.

## **Inclusion in action**

Steven is a 12 year old boy with Down Syndrome. He attends his local parish school but has recently begun acting out at school, refusing to do his work. The teacher goes to the school Care Team to help, and the team decides that their special education resource teacher, Mrs. Burns, should do a Functional Behavior Assessment on Steven to get to the root of the problem.

Mrs. Burns begins by gathering relevant information about Steven. She collects school records, his individualized instructional plan, his interests, strengths, and family background. Her next step is to interview Stephen’s teacher and family members to find out when they are seeing the challenging behaviors. She also inquires about any recent health issues or changes in medication. After reviewing the information she has gathered, Mrs. Burns concluded that the behavior of concern was task avoidance. She shared this with Stephen’s parents, teachers, and administrators in order to come up with what Stephen’s target behaviors should be that were observable and measurable.

Next Mrs. Burns started collecting data on Stephen’s behavior. As more data was collected, it emerged that Steven’s avoidance was only happening at school during certain times of the day, mostly during math, which was his most challenging subject area. Mrs. Burns carefully observed in math and discovered that Steven did not have a way to ask for help. She created a laminated index card with the word “help” on it. She taught Steven to turn the card over, displaying the word “help” whenever he was feeling frustrated, and a teacher would come help him. This small change caused a big difference in Steven’s behavior and productivity.

## **Forms**

- The University of Kansas has resources and data collection sheets to do a functional behavior assessment. Blank sheets are included.  
[http://www.specialconnections.ku.edu/?q=behavior\\_plans/functional\\_behavior\\_assessment/teacher\\_tools](http://www.specialconnections.ku.edu/?q=behavior_plans/functional_behavior_assessment/teacher_tools)

## **Further reading**

Positive behavior supports and interventions

<https://www.pbis.org/>

Virtue based restorative discipline

<http://www.virtuebase.org/>



# Chapter 18

## Accommodations and Modifications



### **This chapter will offer:**

- What are accommodations and modifications?
- How do I do it?
- When should I accommodate or modify?
- Inclusion in action
- Forms
- Further reading

### **Introduction**

**Bear one another's burdens, and so fulfill the law of Christ.**

Galatians 6:2

Being able to know when and how to provide adaptations for a child is imperative to good teaching. Making assignments more challenging for students who need more enrichment and adapting the learning outcomes for those who have different learning goals will help all children be more successful in school.

### **Did you know...?**

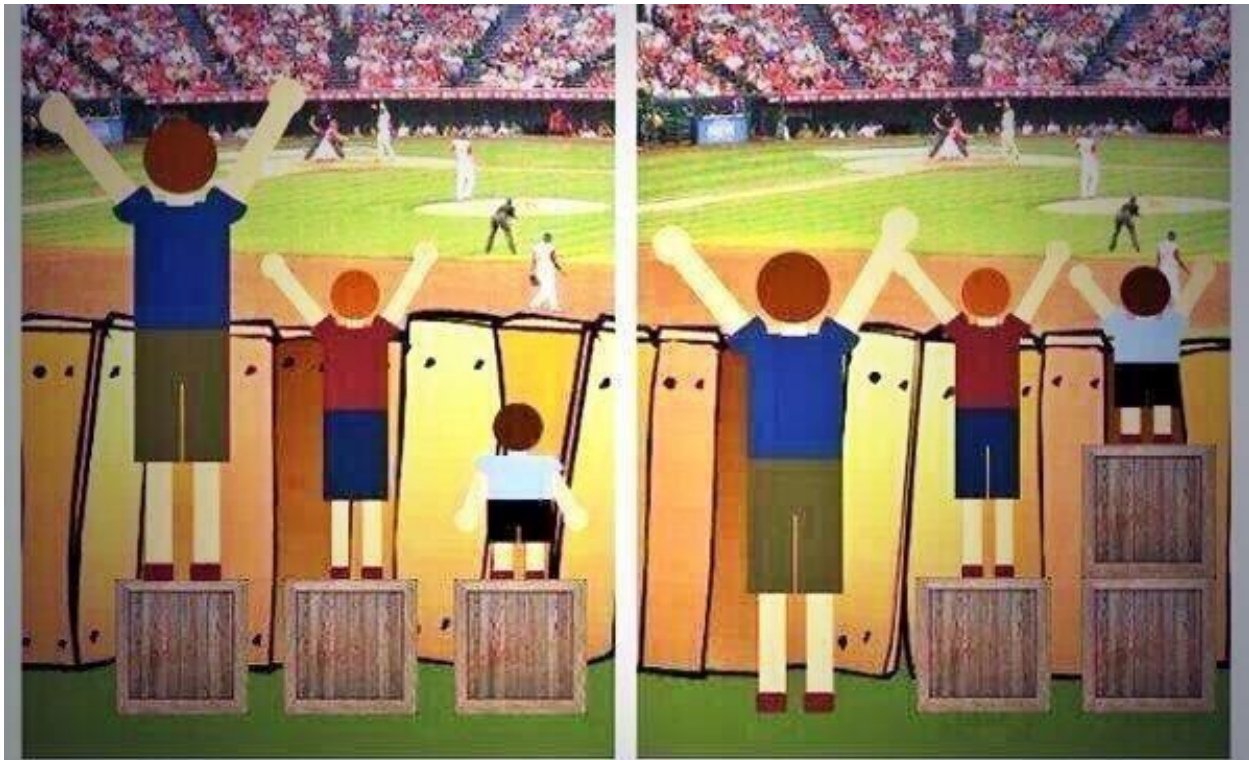
- Accommodations change *how* the child learns material. For example, a child with dyslexia might listen to an audio book for his or her book report instead of reading it, but the learning outcomes have not changed.
- Modifications change *what* the child is expected to learn/ produce. For example, if most students are expected to label the 7 continents, a modified version might be to learn 2.
- Providing accommodations and modifications can also benefit gifted learners. Once a teacher knows how to modify a curriculum for students with disabilities, he or she can also modify a curriculum for gifted learners.

### **What are accommodations and modifications?**

Accommodations and modifications are adaptations that are made in lessons to remove barriers to learning. They level the playing field for learners. Accommodations change *how* the child

learns curriculum, while modifications change *what* the child is going to learn/produce. Accommodations and modifications are usually found in the following domains:

- Scheduling - giving extra time or breaking up tasks/ tests
- Setting - working one on one or in a quiet space
- Materials - providing teacher notes or audiobooks
- Instruction - reducing the reading level of an assignment
- Student response - allowing a child to type or orally give answers



Fair and equal are not the same, as demonstrated by this picture. The picture on the left is equal, but it isn't fair to the child who is smaller. He can't help his size, as it was determined by God. The picture on the right demonstrates what is fair. The smallest boy should have the tallest boxes to stand on. We are levelling the playing field, as we do when we provide accommodations and modifications. See the following link for more information on the differences between the two:

[the-difference-between-accommodations-and-modifications](#)

## How do I do it?

The first step in modifying or accommodating is to look at the individual student. What are his or her specific needs? Some students will have accommodations that are necessary throughout the school day. Things like copies of teacher notes, sitting away from distractions, alternative seating, etc. will be ongoing. Modifying lessons might vary slightly depending on a child's strengths and abilities.

Identify the learning target of the lesson. Is this an appropriate target for all of my students? If it is, proceed making accommodations as needed, but if it is not, it needs to be modified. Work

backwards from the target or expected outcome. What do I want my students to know? These goals might come from your school's individual curriculum, Common Core Standards, state standards, or a child's individualized learning plan. Once you know where you are going, you can work backwards to adapt. How is he or she going to demonstrate the knowledge? Break it down step by step to get there. Teach explicitly and build on previous knowledge. Keep in mind when modifying a lesson that the overall concept should remain as close as possible to the rest of the class. For example, if a third grade class is learning multiplication but you have a student who is not ready for that, change the multiplication signs to addition. He or she is still doing the same sheet and feeling included, but the signs are different. For vocabulary notes, when the rest of a fifth grade class is writing notes and meaning for vocabulary words, a child who needs it can be given a copy of the notes but draw or find a picture to represent the meaning.

Here are some more ways to modify from The Inclusive Class:

- Tracing
- Matching
- Fill in the Blank
- Word Banks
- Multiple Choice
- Illustrating
- Highlighting
- Reduced work

There are many lesson plan templates for teachers to use. As you are planning, keep in mind all of your learners. Many templates have a place to include any modifications or adaptations at the bottom. If not, it can easily be added. All lessons have some degree of differentiation; this is just taking it one step farther. Keep in mind that you are not the only teacher adapting a lesson. Work as a team, collect a lesson plan database within your building, and ask for help when you need it.

The following video gives more information on accommodations and modifications.

<https://youtu.be/tuKdIxm6QE>

## **When should I accommodate or modify?**

Lessons should be adapted whenever it is in the best interest of the student. In the public school system, a child has to have an IEP and diagnosed disability in order to get modifications or accommodations. In Catholic schools, we can help children immediately without the red tape and delay of the evaluation process. Keep in mind that schools have certain graduation requirements that are required as far as curriculum, so modifications should only be used when necessary and faded over time if possible. For children with more significant disabilities this won't be possible, and that's ok. Always keep the best interests of the child and parent goals at the forefront of decision making. Remember to keep parents in the loop about accommodations or modifications. Parents should know if their child is on a modified curriculum or having work accommodated, and they should be a part of the discussion as to how to best serve the child.

## **Inclusion in action**

William is a fifth grade student attending his parish Catholic school. William has ADHD and is on the Autism spectrum. William has a high IQ but has difficulty attending in class and gets overstimulated easily. William is used to academics coming easily to him, but fifth grade math has been challenging for him.

During math time, William will move his desk away from other students. He refuses to come to the board. He begins to rock in his chair and stim if things get too intense. (Stimming is a repetitive behavior used by people with developmental disorders like autism.) The teacher is frustrated because she keeps coming to him to help, and he shuts down. The more she tries to help, the more frustrated William becomes. She decided to get help from her school's Care Team.

The Care Team decides to have their special education expert, Mrs. Lindell, observe math class, as well as the time immediately preceding it. She comes in for a few days and notices some patterns. They discuss her observations at the next Care Team meeting and come up with a plan. Mrs. Lindell observes that math is the last subject of the day after switching for science and social studies. Transitions are not easy for most students with disabilities, including William. She also notices that when William is moving his desk away, he is also covering his ears. She theorizes that he is getting overstimulated and is trying to provide his own accommodation. When the teacher continues to come at William to try to help, that is only further stimulating him. The lessons are designed in a way that William has to simultaneously learn a new skill, block out classroom noise, and take notes. This is all too much for him.

With the help of William's parents, the Care Team and Mrs. Lindell decide on some accommodations and modifications for William. They are careful when creating these that William's dignity is at the forefront. William, like most children, doesn't like to feel different. The team needs to create ways to help him but also keeping it discreet and respectful. The first thing they do is switch math time with science/ social studies so that it is right after lunch when William has had time to decompress. This is a whole class change that will benefit everyone. The next accommodation they make is to give William a copy of the teacher's notes in advance to avoid the multi-tasking element that doesn't work for his brain. They decide to do this by downloading the notes to William's Chromebook in advance so that he does not stand out from other students. Every student uses their Chromebook to take notes, William's will just be pre-loaded. The next accommodation they allow for William is to move his desk away from others and allow him to pace within a given, marked area in order to calm himself when needed. He can also wear noise cancelling headphones during independent work time. These accommodations are voluntary for William to do when he feels like he needs it. After math class, William is allowed a three minute break outside in the quiet to do his self-regulation exercises and get ready for his next subject. His teacher will let him step out unnoticed by the other children during this transition time with a simple thumbs up gesture as their mutual symbol. One modification they make for William in the short term is to cut down on the number of problems on a page for William to do. They know he catches on fast, so there is no reason for him to get overwhelmed visually. With time and as he gets his confidence back, this modification will fade.

After a few weeks on William's new plan, math is going much more smoothly. The teacher even noticed that the other students perform better with the schedule change, and she has been doing self-regulation exercises as a whole class after math as well, which leads to a more productive end of the day.

## Forms

- The following link provides 9 types of accommodations and modifications (appendix T)  
<https://documentcloud.adobe.com/link/track?uri=urn%3Aaaid%3Ascde%3AUS%3A21c4b8b7-102e-41d7-93cd-d2dd123c1788>
- See the following link for a sample accommodations and modifications list  
<https://adayinourshoes.com/wp-content/uploads/IEP-Accommodations-and-Strategies-printable.pdf>

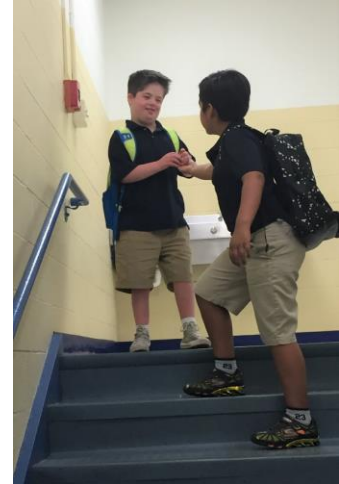
## Further reading

The St Louis Learning Disabilities Association has more information on accommodations and modifications.

[www.ldastl.org](http://www.ldastl.org)

# Chapter 19

## Peer Relationships and Problem Solving



### **This chapter will offer:**

- How do I use peer supports in my classroom?
- How do I encourage peer relationships?
- How do I prevent or handle bullying?
- Inclusion in action
- Further reading

### **Introduction**

**Our desire is not that others might be relieved while you are hard pressed, but that there might be equality. At the present time your plenty will supply what they need, so that in turn their plenty will supply what you need. The goal is equality.**

2 Corinthians 8:13-15

Everyone wants a friend. As humans, we have an innate desire to feel loved and accepted. This is true for everyone, even those with disabilities. We all have gifts to share. In Catholic schools, all students should be given the opportunity to support and be supported. This is an important value of our Catholic faith.

### **Did you know...?**

- Perceived differences are one of the biggest barriers in friendships between children with disabilities and typically developing children (Salend, 1999).
- Proximity and extracurriculars are main factors in developing friendships in school. Is your school inclusive *after* school?
- Paraeducators can help facilitate friendships but also be a barrier to peer relationships as well (Rossetti and Goessling, 2010).
- Children with disabilities are 2-3 times more likely to be bullied than typically developing peers

### **How do I use peer supports in my classroom?**

Peer supports refers to any time you are using peers in your classroom to facilitate learning, friendships, or social skills. Peer supports should be used reciprocally because everyone has

gifts to share. They should not be viewed as one student doing something solely for the sake of another. Peer supports should be viewed as a partnership. There are several ways to use the children in your classroom to help each other academically or socially. The key is to set expectations before activities and to teach the skills required when working together like communication, listening, and problem solving. At the elementary level, peer supports would look differently than in high school. Elementary students can help others complete small tasks like ripping a page out of a workbook, walking with a buddy to the nurse, doing a classroom job together. At the high school level, students can actually earn credits in being peer tutors or mentors; taking notes for others, helping them study for a test, or teaching content. The opportunities really expand with age.

**Academically:** Every person has gifts to share. Recognize those gifts in all of your students and allow students to share with each other. This is often overlooked in upper grades after Show and Tell has faded away, but make time in your day to share. This can be during a morning meeting, incorporated into prayer, or folded into lesson plans. Play off of the strengths of your students, not their labels.

- Have a strong reader read books to a struggling reader.
- Let a student explain a concept in his or her own words to someone who doesn't understand.
- Allow a student to bring a souvenir from a trip he or she took and turn it into a geography lesson.
- Cross grade levels. Send peer tutors to other grades to help with class work.
- Let students work together on some projects or assignments. Make the focus of the project on the working together part, not the academics.

**Socially:**

- Pair a talkative child with a child who has difficulty opening up. Teach the talker how to pause and listen while teaching the shy child how to open up. Also teach them how to respect the other person's need for quiet or speaking up.
- Role play social skills. Read a story about a specific social skill then break into groups to have the children practice the skill.
- Have weekly social goals like, "Play with someone you've never played with at recess this week."
- Have buddies in other grades. Sit with buddies at mass, make rosaries together, earn recess together. There is a reason that oldest or only children usually struggle the most with social skills.
- Respect that some students are not going to like working with others or that they may have a harder time doing so. That's ok. Make sure you build in some quiet, alone time into your day to ensure those needs are being met as well. Also realize that some students with disabilities are going to have smaller thresholds for working with peers. Set realistic expectations and make sure to give them an out when you see them start to struggle. Something like, "***First***, glue one more leaf on your group project to help your friends, ***then*** we will take a break." Work those breaks in *before* a meltdown happens. *First, then* statements can be helpful in these situations. A timer counting down during an undesirable task can also help so that the student can see that this is not forever and there is an endpoint.



## How do I encourage peer relationships?

- **Foster communication.** Often times students with disabilities have trouble communicating. Share their communication system with the class. Show the students how to use communication devices, sign language, or however a child communicates best.
- **Focus on how we are alike.** Students often shy away from others because of perceived differences. Sometimes they need an adult to point out similarities and commonalities. A small nudge like, “Hey Paul, did you know that George plays Minecraft too?” can help conversations start and friendships to form.
- **If a child has a paraprofessional, train the para to back off when needed.** Our children with disabilities can miss out on those social opportunities like passing a note or whispering a joke in class because other children don’t want to do those things when an adult is sitting next to them. Paras should support a student when needed then fade back, especially during social opportunities. However, paras can also facilitate friendships and conversation starters. It is ok to prompt a child to be social when needed, just don’t take over the conversation. When training paras, go over different social situations and remind them that they are not mom, they are there to support when needed and back away.
- **Allow for proximity.** Many of us might recall that our best friends growing up were the ones who lived down the street or sat next to us in school. Make sure our students with disabilities are sitting next to peers without an adult in the middle and allow for proximity to take over.
- **Believe that the student would be a great friend.** He or she is not a charity case. He or she is a child of God who has a lot to offer the classroom and the world. Be aware of how you speak about the child to other students, teachers, and parents. Would I speak this way about a typically developing child?
- **Teach students empathy and understanding.** It is ok to explicitly talk about a child’s disability to peers. Teach typically developing students how to best interact with a child with disabilities just as you would teach social skills to the child with disabilities. Let them know that differences are nothing to be afraid of. Be aware of your own tone and attitudes when having these discussions.
- **Foster a cooperative environment.** Our world requires us to work together with different people. Start teaching this skill early and explicitly. Allow and encourage time for collaboration but don’t expect children to know the skills required in working with others without instruction. Teach these skills like you would any other lesson.

## How do I prevent or handle bullying?

The good news about being inclusive is that inclusion naturally aims at preventing bullying. Because we are including people with differences, we are showing our students that we are all valuable and deserve a place in the classroom and our schools. Inclusion lends itself to prevent bullying vs traditional classrooms which intervene after the fact. This is not to say that bullying will never occur. It will. However, intervening immediately can make a world of difference.



The best way to deal with bullying is to prevent it from happening. By helping your students develop strong relationships and understanding, you are encouraging a bond. But is this bond school wide? Don't overlook the fact that most of the students in your school probably won't have a child with a significant disability in their classroom. Are you sharing the gift of inclusion with those children as well? Do you have buddies in different grade levels? How often do other grades get to interact? Make sure your entire school is inclusive, not just a few classrooms.

In all likelihood, bullying will occur at some point. Action should be taken immediately to stop the behavior.

1. According to [stopbullying.gov](http://stopbullying.gov), having a peer intervene when a child is getting picked on is the most effective way to stop the behavior. Teach your children how to speak up for others. This skill should be taught explicitly like any other lesson, then role-played and practiced. We are lucky to be in Catholic schools and have the teachings of Jesus Christ to back us up. Cultivating leaders who can do this effectively and letting that leadership naturally spread, will do wonders for your school community.
2. Teach your children how to speak up for themselves in the best way they can. This is a lesson that all children need to be taught and practiced but especially our most vulnerable.
3. Take bullying seriously. If a child is telling you that someone is picking on them, look them in the eye and tell them that you are sorry to hear that and that you will help them. This is not an easy task especially in younger grades when tattling happens often, but children need to be heard. Follow through on investigating the claim and follow up with the child. He or she needs to feel supported and heard.
4. When handling bullying, be sure you are not punishing the victim. For example, if a child is being picked on at lunch, don't make the victim move seats, make the student who is bullying move seats instead.
5. Help the child who is bullying to understand the feelings and situation of the victim. Bullying is not always done out of aggression, sometimes it is done for lack of knowledge.
6. Know that victims of bullying sometimes bully others themselves. This is especially true for students with ADHD and poor impulse control. Bullying is often done out of pain. Get the help of a counselor or well trained adult to meet with students who are bullied or who are bullies. Bullying usually has deep roots.
7. If you are a parent who suspects bullying, notify pertinent school staff immediately. Document any instances in writing. Offer to volunteer at the school to get a feel for the situation if you don't feel it's being resolved.
8. If you are an administrator, look for Social/ Emotional Learning (SEL) programs and teach them school wide. These are programs aimed at all kids to teach emotional regulation, decision making, and empathy among other topics. If you don't have a school counselor, any teacher can teach the skills.

## **Inclusion in action**

Matthew is a third grade boy with Autism Spectrum Disorder (ASD) who attends his parish school. He does well in school academically but has trouble relating to other students. His school pulls him out of class once a week for 30 minutes of social skills training, and it is going

well. Matthew's classmates treat him well and have grown up with him in the class, since he started at the school in preschool. They view him as any other student and a part of the class.

Recently Matthew's teacher notices that in mass, Matthew is getting overwhelmed and starts stimming; flapping his hands or making subtle noises. This is getting unwanted attention from some children in other grade levels, causing them to laugh or point at Matthew which only exacerbates Matthew's anxiety causing his stimming to worsen. Matthew's teacher goes to the principal to help problem solve the situation before Matthew is further picked on.

The teacher and principal realize that while Matthew's class views him as just one of the boys, the rest of the school has not had the same exposure to him and sees his behavior as odd. They come up with a plan to make sure the entire school is inclusive and sees all children as a gift from God.

They start by leading discussions in each grade at an age appropriate level about disabilities and differences. They find that once children are aware of the limitations of others, they are much more understanding. Next they start cross-age buddies once a week, where two grade levels get together to do something curriculum related and each child has a buddy in the other grade who helps with the assignment and is just another person to know in the hallway. They also start having school wide assemblies, recognizing the accomplishments of peers in other grades and building the whole school community. The principal builds a climate encouraging more collaboration among students and looking at the school community as a family of children of God. Slowly, things begin to change.

Several months later the school was at mass to celebrate a Holy Day. Matthew was now seated next to his 6th grade buddy. As Matthew started to get anxious and his hands started to flap, instead of laughing, Matthew's buddy gently laid his hand on Matthew's shoulder to let him know he was there for him. Matthew was able to calm himself and finish the mass.

## **Further reading**

- The following website helps kids understand what bullying is and how to stop it.  
<https://www.stopbullying.gov/>
- Ability Path is an online resource for parents of children with disabilities. Social skills and peer relationships are discussed.  
<https://abilitypath.org/>

# Chapter 20

## Taking Data: What kind, How often, and What do I do with it?



### **This chapter will offer:**

- What should I be taking data on and how do I do it?
- How often should I be collecting data on my students?
- What do I do with my data?
- Inclusion in action
- Forms

### **Introduction**

**Teach me knowledge and good judgement, for I trust your commands.**

Psalm 119:66

*Special education is all about taking data and adapting instruction accordingly to help a child reach larger goals.*

Good teachers are taking data all the time, either formally or informally. We are constantly observing behaviors, knowledge, social skills, and content whether realizing it or not. This chapter will give teachers more tools for gathering data in order to help all learners.

### **Did you know...?**

- Data can be taken formally or informally.
- Data should be taken often on any learning, social, or behavioral goal.
- Data should align with student goals, benchmarks, and learning outcomes.

### **What should I be taking data on and how do I do it?**

Data should be taken on any area that we are reporting progress on a child including goals, benchmarks, progress reports, or report cards. Data is taken on typically developing children all the time through their student work and transferred to a report card. For students with disabilities, more data is necessary to support learning goals and move the child forward. Start by looking at a child's individual learning plan. There should be several goals and benchmarks on the plan that require data. These goals and benchmarks might be academic goals, behavior, or

social goals, but they all require data. For example, a child might have a short term social goal like,

“During unstructured play time and allowing one verbal prompt, Johnny will interact with peers appropriately through maintaining personal space and a respectful voice an average of 80% of the time over a two week period.”

To take data on this goal, the teacher or para would observe Johnny during unstructured play time (like recess) and take data on the two markers of that goal: personal space and respectful voice. A frequency data chart could be used to mark any times that Johnny did not use personal space and respectful voice after his one verbal reminder. If recess is once a day, Johnny would need to maintain his goal 8/10 recess times in the two week period specified.

Don't forget that we are in Catholic schools, so faith based goals and data can be taken as well. Basic skills like making the sign of the cross or genuflecting would be easy to incorporate into goals and data collection.

## **How often should I be collecting data on my students?**

Data collection is dependent on the goals and benchmarks of the child. For year long goals, data would be collected several times a month across domains if applicable. For example, on a behavior goal, data should be collected in different classrooms or settings at different times of the day. Academic goals tend to be the easiest to collect data on because that is what teachers do for all students when grading student work. Data should be collected for children with disabilities at least as often as on typically developing peers.

Collecting data should be a collaborative effort led by the special education representative in the school. Paras, classroom teachers, or learning consultants/ resource teachers can all collect data. Make sure to keep fidelity on data collection by carefully spelling out what the behavior is that you are looking for, and practice collecting data in advance if it is a subjective skill. For example, if you are collecting data on a particular social skill, the specific skill needs to be decided in advance with examples and non-examples of what to look for. If you are collecting data on greeting peers, what counts as a greeting? Does a wave count or does it need to be verbal?

## **What do I do with my data?**

Data should be gathered to check progress on goals. If data shows that a goal is accomplished, the goal can be changed or replaced for a new goal at the next ILP meeting. If data shows the goal has not been achieved, it should be left on the plan or adapted. If you leave it on the plan as is, that means that the child is on the right track to reaching the goal; he or she just needs more time. If you are adapting or changing the goal, that means that the goal as written is not achievable for the child within the given amount of time. It might need to be simplified or broken down into smaller steps to make it attainable. For example, if the goal was about a child brushing his or her teeth and progress is not being made, the goal might need to be broken down further into squeezing toothpaste. Once this is accomplished, the goal can be bumped back up.

Data on short term goals or benchmarks should be used to adapt how a student is taught in order to reach long term goals. If short term data is showing that a child is not making progress, the teacher should change how information is being presented or gathered in order to achieve progress towards the goal. *Special education is all about taking data and adapting instruction accordingly to help a child reach larger goals.*

Data should also be reported to parents periodically. Data should not just be given during report card time or at an annual meeting. Not every piece of data should be given to parents, but they should be updated on goals at least monthly.

Data can also be used for report cards. See the section on Goal Setting, Report Cards, and Student Plans in chapter 11 for more information.

## **Inclusion in action**

Miss Kelly is a second year teacher in a Catholic school. She teaches a diverse group of second graders, including one non-verbal child with a rare eye condition named Natalie and 3 with ADHD. Miss Kelly works hard to meet the needs of all of her students but Natalie is really challenging for her. Because Natalie is non-verbal, Miss Kelly is having a hard time figuring out Natalie's needs. Natalie is becoming increasingly disruptive each day, so Miss Kelly decides to take data on Natalie's behavior to try to figure out patterns.

She begins by defining the behavior she will be keeping track of. She clearly defines what the behavior looks like, along with what it doesn't look, in order to keep consistency.

Next she starts simply taking a frequency tally on the behaviors. She puts a piece of masking tape on the back of her hand and anytime Natalie exhibits the defined behavior, Miss Kelly makes a tally mark. She does this for several days (at least 3 is a rule of thumb) to make sure she has accurate data. Her data is consistent but isn't showing a pattern so she decides to mix it up.

This time she makes a daily schedule and records frequency across each day to see if time of day was a factor. She did this for three days and notices that most of the incidences are happening during science class. For science class, they have been going to the lab each day. Miss Kelly decided to hone in on this.

For her final data element, she created an Antecedent, Behavior, Consequence (ABC) chart to be used during science class. She notices that the behaviors occur only when Natalie is seated in her desk in the lab. When they move to lab tables, Natalie is fine. Miss Kelly takes careful note of Natalie's desk and realized that it is right next to the window. Miss Kelly knows about Natalie's eye condition but decides to talk to Natalie's mom about it again in case she missed something. Through the course of the conversation, Natalie's mom mentions how they recently installed blackout shades on her room because Natalie is so sensitive to light. Miss Kelly knows that Natalie always wears sunglasses when they go outside, but she didn't equate it with the window. The next day she moves Natalie's seat in the science lab away from the windows. Her behaviors decrease significantly. Miss Kelly is glad to have such a simple solution based on her data and investigations that makes such a huge impact on Natalie's learning.

## Forms

- ABC data collection sheet  
<https://idph.iowa.gov/Portals/1/Files/ACBI/ABC Data Sheet.pdf>
- This school district site has links to various data collection sheets for any purpose.  
<https://www.earlywood.org/Page/556>

# Chapter 21

## Universal Design for Learning (UDL)



### **This chapter will offer:**

- What is UDL?
- What does it look like in my classroom?
- Inclusion in action
- Forms
- Further reading

### **Introduction**

**“An education in the fullness of humanity should be the defining feature of Catholic schools.”**

**Pope Francis**

The profiles of our learners are changing. Children are not the same as they were a generation ago. Parenting has changed, environments have changed. That is ok. As Catholic schools, we need to keep up with our changing families and adapt our teaching to fit the needs of all learners. Universal Design for Learning is a way of teaching that is research-based and proven to help *all learners* succeed. This is not a program for children with disabilities, it is a way of teaching for *all* that will benefit your gifted learners, typically developing students, and those with disabilities. We can not talk about inclusion without mentioning UDL.

### **Did you know...?**

- Universal Design for Learning, or UDL, protects the dignity of each child because accommodations and modifications are the norm within the classroom to reach all learners. No one child is “different” or singled out.
- Reactive behavior management becomes a non-issue because students are engaged and learning at an appropriate level.

### **What is UDL?**

Universal Design for Learning was based off of Universal Design for architecture that promoted accessibility in buildings built after the passage of the Americans with Disabilities Act, or

ADA. UDL is a “research-based set of principles to guide the design of learning environments that are accessible and effective for *all*” (cast.org, 2018). UDL makes curriculum more accessible to all learners by allowing them to access and present learning in different ways. There are three parts to UDL:

1. Provide multiple means of engagement.
2. Provide multiple means of representation.
3. Provide multiple means of expression.

Multiple means of engagement refers to how you are recruiting interest. This is the “*Why*” of learning. Relate the lesson to an interest or relevant topic to the students, offer them choices in their learning method, and make the learning goals clear. Let them choose the order of activities. Use more than one or two senses in engagement. Set clear expectations for learning outcomes and behavior so that everyone feels safe.

Multiple means of representation is the “*What*” of learning. This means presenting the information in different ways. Are you allowing for movement? Auditory learners? Visual learners? Hands on? Technology? Use background knowledge and student strengths to build on prior skills of each learner.

Multiple means of expression is the “*How*” of learning. Using technology, movement, and playing off of student’s interests and strengths will all help in engaging students in what they are learning. Allow for students to show off what they learned in different ways. Some might choose to type a report on the computer, some might want to write and perform a play, some might want to express their knowledge through art. Create a rubric for what you want your students to learn and allow them to demonstrate their mastery in a manner of their choosing. Help students along the way with goal setting and mapping out their plan if a project is more than one class period. Build executive functioning skills in wherever you can.

The following visual from Understood.org can help in lesson planning using UDL.

[https://assets.ctfassets.net/p0qf7j048i0q/3vzjvQAnt6xj0l080yVqXg/6e51e59e0b5b5eadd5e1c40ed135facd/Getting\\_started\\_with\\_universal\\_design\\_for\\_learning\\_UDL\\_Understood\\_1\\_.pdf](https://assets.ctfassets.net/p0qf7j048i0q/3vzjvQAnt6xj0l080yVqXg/6e51e59e0b5b5eadd5e1c40ed135facd/Getting_started_with_universal_design_for_learning_UDL_Understood_1_.pdf)

## **What does it look like in my classroom?**

You will know a UDL classroom when you see it. Learning goals will be displayed prominently on the board and adapted and posted for necessary students. Learning is individualized for each student or group. You will see different students doing different things. Some might be on computers, some might be working in a small group with the teacher on explicit instruction, some might be acting something out, but all students will be using his or her strengths to demonstrate knowledge. The teacher will be conferencing with each student, checking on progress and guiding learning. Children will be in flexible seating to meet his or her sensory needs.

One of the questions asked when describing UDL is, “Why can’t they all just write a report? Don’t all students need to know how to do that?” The answer is that it depends on the learning goal. If actually writing a 5 paragraph informative essay is the learning goal, then the



students would need to write a report. However, some students might type the report, some might write, and some might have an adapted learning goal of *organizing* a 5 paragraph essay in which case they could do an audio recording or graphic organizer. Advanced learners might have an adapted goal of writing a 5 paragraph comparative analysis of two things instead of just one.

The manner in which students learn how to write the report might look slightly different as well. Some students can fill out a graphic organizer on their own and make an outline from it, while other learners might need those steps broken down further and taught explicitly in a small group setting.

The point of UDL is individualization and playing to each child's strengths. This will help with engagement of all learners and greater learning outcomes. Accommodations and modifications become the norm in order for all students to succeed.

## **Inclusion in action**

Mrs. McGregor has been teaching in a Catholic school for 5 years. Her school is very traditional and has encouraged practices that work well for about 80% of her students, but she has noticed that many learners are falling through the cracks. She has a couple of gifted students that are bored, and a few students with disabilities that can't keep up with the traditional style of Catholic schools. Parents are starting to complain, and her school loses a few students every year to the public school system who can better fit their needs.

She remembers learning about Universal Design for Learning in her college courses and decides to talk to her principal about it. Dr. DeSoto has been the principal of the school for 25 years and is very well respected within the community, however some parents are wishing he would update the school's practices that have been in place for decades.

Dr. DeSoto agrees to come observe a lesson taught by Mrs. McGregor using the characteristics of UDL. He is not familiar with UDL and frankly is not interested in re-inventing the wheel at this point in his career.

Dr. DeSoto visits Mrs. McGregor's 5<sup>th</sup> grade class during a social studies lesson on colonial life. The students have been learning about the different colonies and regions for a couple of weeks using several methods including videos, books, group learning, and individual research.

Mrs. McGregor posts the lesson goal on the board for all to see. She revisits it at the end of the lesson as well. Some students have their own lesson goals adapted from the goal of the rest of the class. For example, when the class lesson goal was, "Describe a typical day for a child living in the Virginia colony," an advanced learner who already achieved this goal might have an adapted goal of, "How does the life of a child in colonial Virginia compare to the life of a child in England living at the same time?" For a child with a disability, his or her learning goal might be, "What did a child eat in colonial Virginia?"

After an introduction to the lesson and learning goals, the children were set for discovery. Some worked in groups and some on their own. Children who needed more explicit instruction were taught in a small group by a para in the room to work through the steps in a guided way to meet their needs. All children had a choice in how they were going to demonstrate their knowledge of the lesson goal. Some chose to make a PowerPoint in a group. Some chose to paint a picture with audio captioning to explain it. Some chose to type a report, and others chose to act it out in story-form. All of the students were learning, but they were able to show it in a way that brought out their individual strengths. This made the lesson more engaging. Dr. DeSoto was amazed that every child in the room was on task and interested in what he or she was doing. Behavior management wasn't really an issue because everyone was busy and working at an appropriate level.

Some students were on the floor, some were at desks, some asked to go to the library to work, but they were all learning how they learn best. Mrs. McGregor was busy conferencing with each student or group, keeping them on track and asking leading questions.

Dr. DeSoto was so impressed with the lesson and how engaging it was that he asked Mrs. McGregor to teach the elements of UDL to the rest of the staff and brought in outside professionals for summer staff development. Retention rates improved at the school in the years to come, and they attracted some new students who are gifted and not being served well in the public school system.

## **Forms**

- The UDL Project has links to lesson planning templates and scoring guides.  
<https://www.theudlproject.com/udl-tools---all-grades.html>
- UDL lesson plan flowchart  
<https://documentcloud.adobe.com/link/track?uri=urn%3Aaaid%3Ascds%3AUS%3A6dcaa3f-8b49-461d-9b55-4a137a381f6d>

## **Further reading**

- Cast has amazing resources and descriptions on UDL for teachers.  
<http://www.cast.org/>
- The following video describes UDL in action.  
<https://youtu.be/B7qYJY62X2s>

# Chapter 22

## General Information on Common Disabilities



### **This chapter will offer:**

- What are the common disability categories we see in school?
- What are some tips and tricks for common disabilities?
- Inclusion in Action
- Further reading

### **Introduction**

**“Don’t get upset with your imperfections. Surrender to the Power of God’s Love, which is greater than our weakness.”**

Saint Francis de Sales

We all have gifts. Though some of our children struggle academically, they are given other gifts. It is our job to figure out what those gifts are and to develop them appropriately. All of us are made in God’s image, perfectly. Let’s embrace who God made our children to be and to help them live out His plan.

### **Did you know...?**

- Students with disabilities are more than twice as likely to be suspended as children without a diagnosed disability
- Students with diagnosed learning disabilities are three times as likely to drop out of high school
- 33% of classroom teachers still equate mild disabilities like learning disabilities and ADHD with laziness

Adapted from [nclld.org/StateofLD](http://nclld.org/StateofLD)

### **What are the common disability categories we see in school?**

The Individuals with Disabilities Act (IDEA) recognizes thirteen categories of disabilities for students in the classroom. Every child served under this law in a public school or using services through the public system while attending private schools must fit into one of these thirteen categories. However, in Catholic schools, we can provide extra help for every child who is struggling, whether he or she has a diagnosed disability or not. Currently, about 1 out of every 10 children will have a mild disability and 1 out of 70 will have a more significant disability. Keep

in mind that not every child who is struggling will have a disability even if evaluated. Our job is not to focus on the label, but instead to help the child succeed using his or her gifts. The thirteen categories under IDEA are:

1. **Specific learning disability** - This covers learning disabilities in any area, typically diagnosed by a discrepancy between a child's IQ and performance in a given area. Dyslexia or a learning disability in math would fall under this category, among others.
2. **Other health impairment (OHI)** - This diagnosis is given when a medical diagnosis is impacting a child's success in the classroom, and he or she requires accommodations.
3. **Autism spectrum disorder (ASD)** - This is a developmental disability affecting social skills and communication. Sometimes behavior is affected. An autism diagnosis can be medical or educational. If a child has a medical diagnosis, extra resources like OT are usually available.
4. **Emotional disturbance** - This area covers most mental health issues like anxiety, depression, bipolar disorder, etc., though some of these are covered under OHI as well. The Missouri Department of Elementary and Secondary Education defines emotional disturbance as "a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance:
  - An inability to learn that cannot be explained by intellectual, sensory, or health factors
  - An inability to build or maintain satisfactory interpersonal relationships with peers and teachers
  - Inappropriate types of behavior or feelings under normal circumstances
  - A general pervasive mood of unhappiness or depression
  - A tendency to develop physical symptoms or fears associated with personal or social problems"
5. **Speech or language impairment** - This includes children who have difficulty with speech sounds, like stuttering, or understanding language, either expressively or receptively.
6. **Visual impairment or blindness** - This covers any vision issue that is not corrected by glasses or contacts that would require accommodations or modifications.
7. **Deafness** - This category is for children who can not hear at all, even with hearing aids. This falls under the "hearing impairment" category for an educational diagnosis.
8. **Hearing impairment** - This refers to a hearing loss but not total deafness.
9. **Deaf-blindness** - This is for children with severe losses in hearing and vision that requires specialized services.
10. **Orthopedic impairment** - This category is for children with impairments in their bodies. Cerebral palsy sometimes falls into this category. In a school, sometimes these diagnoses overlap with OHI.
11. **Intellectual disability** - This is for children with a below average IQ (usually around 70) who also struggle with adaptive behavior in day to day skills. Down Syndrome usually falls under this category.
12. **Traumatic brain injury (TBI)** - TBI is caused by some sort of accident or trauma, and its impact can be mild to severe. A child's IQ would have to be affected for a school diagnosis.
13. **Multiple disabilities** - This category is for children that fall under several categories and will need specialized support.

Young children can be given the label “**developmental delay**” before an accurate IQ can be assessed. However, this label will expire early in elementary school, depending on your state, and testing will need to be re-done to see if the child can continue to qualify for special education services under a different category.

Again, these categories only apply if parents decide to have their child go through the formal evaluation process in their home school district or private testing. This is not a requirement for children attending Catholic schools, however, if parents decide they want their child to receive services through the public system, they would be required to go through formal testing and labelling into one of the categories above.

## **What are some tips and tricks for common disabilities?**

### **Intellectual or Developmental Disabilities**

As with most disabilities, there is a broad spectrum of people with intellectual disabilities. All of these people are capable of learning. Most people with this type of disability have a genetic or chromosomal disorder like Down Syndrome. Keep in mind that children with genetic or chromosomal disorders also tend to have many health issues as well, so if parents seem aloof or distant about a child’s education, especially a young child, it might be because they are dealing with more serious health issues.

#### **Characteristics in the classroom**

- Benefit from explicit instruction
- Need structured environments
- Require extra time for transitions
- Self-determination is an important skill to be taught
- Social skills and social judgement should not be ignored
- Social and psychological needs are similar to typical peers, with a need for friendship, acceptance, and hobbies
- Adaptive behavior skills should be taught explicitly
- These learners benefit from visual and auditory cues
- Play off of the child’s strengths. They all have them.

### **Learning Disabilities**

This refers to learners with a typical learning capacity but are falling behind in a specific academic domain like reading, written expression, spelling, handwriting, or math. Learning disabilities are diagnosed differently by state, but Missouri still uses the discrepancy model where there needs to be a 22 point difference between a child’s IQ and achievement on a specific subject area when formally evaluated. Most states are turning to the RTI method of diagnosis which is described in chapter 10.

#### **Characteristics in the Classroom**

- Learning disabilities often go with other conditions like ADHD
- Cognition difficulties with long term, short term, or working memory are common
- Explicit, intensive instruction works best
- Scaffold new information on top of old to make connections
- Provide information visually and auditorily

- Provide graphic organizers, notes, or any other visual to connect information
- Play off of the child's strengths. They all have them.

## **Emotional or Behavior Disorders**

Emotional or Behavior Disorders are diagnosed by a mental health professional for children that have mental health issues affecting their day to day functioning and ability to learn. The specific definition has varied over time because a child's behavior is dependent on social context and age, which can be subjective.

### **Characteristics in the Classroom**

- Using a Functional Behavior Assessment described in chapter 17 is the best way identify solutions for the classroom
- All children have behavior or mood changes at various points, but children with this type of disorder have severe symptoms over an extended period of time
- There is a strong stigma with this label, so it should be done with care
- Teachers and paras that work with these students need to be cognizant of their own stress levels and switch off accordingly
- Many of these disorders are caused by trauma and call for professional psychiatric care
- Externalized behaviors manifest in aggressive behavior while internalized behavior manifests in depression or anxiety
- Problem behaviors usually manifest early, so early intervention is key
- Many students with internalized behaviors do best in small groups or quiet areas, while students with externalized behaviors can crave more social interaction but require very explicit instructions and expectations. However, social anxieties are common.
- Transitions can be especially tricky for this group and should be handled with care
- Social skills should be taught explicitly but slowly as this is typically an area of weakness

Intervention Central's website has steps a teacher can take to diffuse and calm an agitated student before a situation escalates.

1. Create a safe setting - If a situation is happening in front of other students, do your best to calmly get the agitated student to a safer place to protect his or her dignity. Also make it protocol to never have an adult alone with a child with a closed door.
2. Limit the number of adults involved - If there is more than one adult available, pick the adult with the most rapport and experience in de-escalation. The other adult should focus on the rest of the class. Call for a second adult if needed.
3. Provide adequate personal space - This would be at least 2 arm's lengths. If a student is still asking you to "back off," take a step further back.
4. Do not block escape routes - Do not position yourself between the student and the door. This will trigger a fight or flight response for an agitated student.
5. Show accepting body language - Keep your body language calm, standing at a slight angle from the student. Keep your hands open and visible, knees soft, and arms uncrossed.
6. Keep verbal interactions respectful - Strive to appear calm. Don't reprimand or use anger or sarcasm.
7. Use simple, direct language - A student in distress is not processing clearly and will not understand loads of information. Keep your vocabulary simple and sentences short. Allow for extra processing time. Use gentle repetition and plenty of wait time.

8. Coach the student to take responsibility for moderating behavior - Once you have established enough rapport, use a positive, assertive tone. Say something like, “John, it’s hard for me to follow what you’re saying when you raise your voice. If you sit down and calmly explain, I think I can help.”
9. Reassure the student and frame an outcome goal - For example, “You’re not in trouble. I’m just trying to hear your side of the story.”
10. Identify a student’s wants and feelings - Use active listening and open ended questions to better understand how a student is feeling.
11. Identify points of agreement - Find something that you agree with the student on in terms of the situation. This could be about the situation, about a principle expressed, or even an agreement to disagree.

### **Learners with Difficulty in Attention**

Attention Deficit/ Hyperactivity Disorder, or ADHD, is a common disability that sometimes presents on its own but often comes with sensory, learning, or social/ emotional issues as well. There are three types that each present differently: impulsive, inattentive (most common in girls), or combined. Most children diagnosed have the combined type.

#### **Characteristics in the Classroom**

- Low frustration tolerance
- Temper issues
- Mood instability
- Poor self esteem
- Appearing lazy
- Social issues
- Appearing bossy
- Low patience threshold
- Difficulty with working memory
- Appearing not to care about school because it is difficult
- Poor executive functioning skills
- Easily overwhelmed visually by an assignment that appears visually long
- They may appear not to be paying attention when they might be able to concentrate better by looking at the ground or wall, etc., because everything else is too overwhelming. They might also focus better when they are in motion.

### **Autism Spectrum Disorder or Sensory Processing Issues**

Autism Spectrum Disorder, or ASD, is usually characterized by difficulty in communication, social skills, or sensory issues. ASD has a broad spectrum of how it manifests and each person’s abilities.

#### **Characteristics in the Classroom**

- Communication and social skill deficits should be addressed and taught explicitly
- Finding the best way for the child to communicate is imperative
- Often an OT is called in to help with sensory issues
- Some children with ASD have dietary restrictions
- Humor is not easily understood and is often taken literally

- Often the thoughts or feelings of others is not a consideration for a child with ASD, and they will need help understanding empathy
- Visual cues are beneficial for social situations or emotions
- Peer relationships are difficult
- Routines are helpful, and warning time for transitions should be given

For more information on these and other common disabilities, visit the St. Louis Learning Disabilities Association at <https://ldastl.org/resources/>

## **Inclusion in Action**

Maggie is a second grader with ADHD and a learning disability in math. She attends her local Catholic school with her three brothers. She is a creative girl who loves crafts and is a talented artist. However, her teacher, Mrs. Byrd, is growing increasingly frustrated with Maggie's lack of manners. Mrs. Byrd believes firmly that children should be respectful at all times to adults, especially teachers, and Maggie refuses to give eye contact when Mrs. Byrd is speaking to her.

Mrs. Byrd decides to Care Team Maggie, thinking that she has some sort of behavior problem and was looking for support from the principal to come up with harsher consequences for her disrespect.

At the Care Team meeting, the school resource teacher, Ms Schilley, was also present. She listened carefully to Mrs. Byrd's complaints about Maggie. Ms Schilley asked Mrs. Byrd if she ever asked Maggie why she wasn't giving eye contact. Mrs. Byrd said she hadn't because it didn't matter. It was rude, so the reason didn't matter to her. Ms Schilley went on to ask if this occurred all the time or mostly during lessons. Mrs. Byrd responded that Maggie is fine in casual conversation, but during lessons when she asks for "All eyes on me," Maggie continues to look down. Ms Schilly hypothesized that because of Maggie's ADHD, it might be too visually overwhelming for Maggie to look at the teacher during lessons because she will be distracted by Mrs. Byrd's face, her clothing, and whatever is around her. It is actually a myth that students with ADHD can't focus... the problem is that they focus on *everything*, and that is really distracting. This is actually a positive coping mechanism that Maggie has developed in order to focus better.

After learning why Maggie wasn't making eye contact, Mrs. Byrd felt terrible. Maggie wasn't being disrespectful, she was simply trying to concentrate. She began commending Maggie on her ability to help herself focus, and Maggie felt good knowing she was self-advocating and doing her best to learn.

## **Further reading**

How to calm the agitated student: tools for effective behavior management  
[www.Interventioncentral.org/behavior\\_calm\\_agitated\\_student](http://www.Interventioncentral.org/behavior_calm_agitated_student)

St Louis Learning Disability Association  
[www.ldastl.org](http://www.ldastl.org)



## Appendix

### A. Sample letter sent to parishioners to explain the ministry of inclusion

February 14, 2020

Dear Parents,

At (school name) we have a strong commitment to, and a long tradition of, doing our best to serve the unique needs of each of our students. This is not to say that we are always successful in this endeavor. It is to say, though, that we do try . . . very hard. Our teachers at every grade level, and in every subject area, continuously strive to differentiate and adjust their teaching methods to effectively meet the needs of each student, whether that student is excelling or struggling. One testimony to this commitment is the fact that (school name) has had a Learning Consultant on our staff for the last (number of) years. The Learning Consultant's number one responsibility is to assist teachers in devising effective ways to meet the unique needs of each and every one of our students. During the (time frame), Father (name) and I were approached by the parents of three of our school families, each of which have a child with Down syndrome. These parents told us how important it would be, and what it would mean to them to have ALL their children experience our school community. At the same time they began telling us about a foundation, called *One Classroom-Inclusive Catholic Education*, that might be able to help us bring their children with Down syndrome into our school. *One Classroom* is a 501 (C) 3 organization dedicated to creating inclusive Catholic educational opportunities for children with special needs, like Down syndrome, in the St. Louis Archdiocese. You may have read about One Classroom in the St. Louis Review last year. In the fall of 2015, One Classroom helped initiate a pilot program at Mary Queen of Peace School in Webster Groves. After a successful launch, this program is serving four students with Down syndrome, and is now well into its fifth year. A few years ago, (school name) had looked into the possibility of including students with Down syndrome in our school, but, at that time, we did not have knowledge about how to get started nor did we have access to experts who could show us the way to serve these students successfully. *One Classroom*, having accepted (school name) as another pilot program, will provide guidance, expertise, and even some financial assistance as we begin our own inclusion program for the 2020-2021 school year.

Inclusion is educating individuals with disabilities in the general classroom, shoulder to shoulder, with their grade level peers. Whatever individualized needs a student may have are addressed in the classroom, and not by segregating the students from their peer environment. Students with special needs are educated in the context of an “inclusive service delivery model” that may include curriculum modifications, support from the general education teacher, peer students, a teaching aid, or specialized teacher. The expectation is not that the student necessarily maintains the same academic pace as typical peers, rather that the student maintains progress towards his or her own personal and individual potential. A large body of research demonstrates that children educated in inclusive environments achieve higher academic gains and achieve more success after high school. Research also demonstrates that typical peers experience improved academic outcomes and social development. If any parish school would be able to introduce such a pilot program, we believe (school name) is the place. Our school has an exceptionally competent school faculty and caring and supportive school parents. Additionally, (parish name) consists of generous and active parishioners. Ours is a school that could make Catholic education a reality for some Catholic students with disability whose families are already using our school. We believe including these three students with special needs, who happen to be siblings of current students, would be a huge benefit to the rest of our student body. All our children could better learn to love all people if they learned this first-hand in their own Catholic school. This program will surely benefit our brothers and sisters in Christ with disability, as well as bless our own current students. Periodically, we will keep you informed as we prepare to implement this new dimension in education at (school name).

B. Letter to parishioners overcoming concerns about inclusion



**Overcoming Concerns**

**Concern Over Academic Gap:** Focus should not be on the academic gap between special needs student and typical peers, focus should be on special needs student's progress towards their own potential.

**Concern that special needs student is “too delayed”:** All students with special needs are “delayed.” This concern stems from lack of familiarity with special needs people and the miss-perception that the special needs student should keep pace with typical peers.

**Concern special needs student will be disruptive:** Special needs students aren't usually any more disruptive than any other student. This concern stems from not understanding how special needs students communicate or not understanding their behaviors. The specialized teaching resources have the correct training and experience to understand behaviors, manage behaviors and promote development.

**Parish School requires support of special education office of Archdiocese in the form of vote of confidence and specialized resources:** Doing something new can be scary, but it shouldn't stop us from trying. One Classroom has met with our Archbishop and received his support and has an ongoing relationship with the Superintendent and the Catholic Board of Education. There is enthusiastic support from Kurt and his office and we are blessed to enjoy support for inclusive education.

**Concern it sets bad precedence and uncertainty over what to do if another parent comes along:** We can predict how many students with severe or significant special needs might enroll in a school, it is typically 1 per 70 students. It is also typical that the children that enroll start in the earlier grades because students in established programs usually don't switch. This means inclusion programs tend to expand gradually. Ultimately every school must determine how far and fast their program grows. Fortunately, there are many expert resources to help a new school manage the growth of a program.

A vital understanding is that inclusive education means the entire school community, from parents, to teachers, to administrators, to students are stakeholders and contribute. Leveraging these existing stakeholders means a program is truly inclusive, benefits all students, and becomes very efficient.

The goal is not to resource an entirely separate and independent infrastructure. The best approach is to communicate broadly in your parish, create awareness, work with professionals to dispel fears and create sound estimates. The many parishes that have embraced inclusion clearly demonstrate that communities respond to the opportunity and support inclusion. That is a precedence to be thankful for.

**Concern it will lead to a financial burden:** Resources, financial and professional, are an important component. “Dump and hope” is not a sound strategy and the goal must always be to do what is best for each child. As schools become inclusive they learn to provide a better education for all students. Academic performance, socialization and faith formation improve for all children. Inclusive schools typically experience increased enrollment and student retention. These benefits mean the school has increased tuition revenues that offset the cost of the inclusion program. Most importantly however, inclusion is mostly about using existing teaching resources. This is made possible through training and experience. Inclusive education is much more cost effective than separate special education

A private catholic school can implement inclusive education at a very reasonable cost. The Kansas City F.I.R.E program for example estimates average total cost per child at \$6,000 per year for the 70+ children they assist. This cost is offset by tuition payments and improved enrollment and retention. Some children need more resources, some less, and the resource requirement will change as the student and school matures.

**Concern it will consume limited human resources:** If a school undertaking inclusion doesn't have experienced staff then it is typical that a school might add a para-professional and seek outside expert consultation. Overtime, as teachers are trained and gain experience, the school develops the institutional capability to be inclusive and a child with special needs doesn't consume any more resources than any other child. In fact, the new skills of the teachers mean all students will receive a better and differentiated education.

**Concern Gen Ed teachers will push back:** Some teachers will have fear, some will leap at the chance to be inclusive, and most fall somewhere in between. It is important that any teacher knows that they are fully supported and part of a team. No teacher should ever feel "alone" as a school becomes inclusive. The pastor, principal, learning consultant, teachers, students and parent are all stakeholders. By taking a team approach, supporting your teachers with training and high-touch support, any school and teacher can be successful. As a school considers inclusion, leaders should identify early adopters among their staff and cultivate their support and participation. By taking a team approach, starting with the right people, and by providing sufficient support, any school can successfully become inclusive. Success breeds success.

**Concern Gen Ed teachers aren't qualified:** A special education background isn't necessary to be successful at inclusion. What is critical is training and adequate support as a teacher develops the skills to be inclusive. Fortunately, there are many teachers and schools that have made the transition and we can learn from them. The ingredients needed to be successful are a desire to become a better teacher and openness to trying something new.

**Concern this isn't the best educational option for Student:** There are over forty years of studies that say otherwise. Since 1970 there are countless peer reviewed studies that demonstrate that inclusive education is superior to segregated or self-contained environments. Inclusive educational clearly demonstrates superior results for special needs students regardless of the extent of special needs.

Sometimes a principal at a catholic school may not think their school can offer what is "best" for the child. Actually, the freedom catholic schools have to adapt and change and innovate mean they can implement better inclusive programs than their public school counterparts, and quickly. The quality of special education varies widely from one public school to another. The harsh reality for most families is that "best" doesn't exist in the public schools and their children eventually spend most of their

time in resource rooms.

**Inclusion might work for some kids..... but what about, you know, “really” disabled kids?** In a segregated setting the peer environment can be “negative” relative to a typical peer environment. Individuals with special needs respond to their peer environments and socialization opportunities. Inclusive educational has clearly demonstrated superior results for special needs students regardless of the extent of special needs. Typically, only students with medical needs or communication needs that suggest an acute health or safety concern may not be best served in a typical peer environment. We are all created in the image and likeness of God. We are all more alike than different.



**Truly I tell you, whatever you did for the least of these brothers and sisters of mine, you did for me.**

**~Matthew 25**

### C. School-wide implementation checklist

The following checklist can be used to check your school’s progress.

<b>School-wide Implementation Checklist - Phase 1</b>	
<b>Planning team schedule</b>	Planning team meets at least monthly in the year leading up to welcoming children with disabilities.
<b>Planning team participants</b>	Planning team participants include pastor, principal, learning consultants or resource teachers, at least 2 classroom teachers, an outside inclusion specialist, and several parish liaisons and parents. Early adopters have been identified within the parish and school community and are included in progress and updates. Everyone has a positive attitude and is ready to serve.
<b>Planning team strategy</b>	The planning team is strategic and tactical in all meetings with an agenda sent out prior to meetings including at least new business, action items, follow up, and roles, including a team leader. Learning more about inclusion is an apparent priority with school visits scheduled, guest speakers, or other evidence of learning.
<b>Forward plan</b>	A forward plan has been created and broken into weekly or monthly benchmarks with roles of each planning team member clearly stated.
<b>Toolbox of specialists</b>	The planning team has been working to develop a toolbox of volunteer specialists from their parish or community to help with each component of implementation. This might include experts in systems, inclusion, marketing, related services, or specific types of disabilities. Specialists have been identified and asked to participate with a specific plan, task, and role.
<b>Reflection on resources</b>	The planning team has spent time reflecting on whether they have the right people in place to include students with disabilities, if they have someone in their building certified and trained in special education, and what roadblocks they still have. Careful thought has been put into admissions policies for children with disabilities based on what the school can handle, knowing that each child is different and allowing for flexibility. Resources from within each parish have been identified and put to use, especially the change-makers. Empathy is given for all stakeholders involved in the process.
<b>Faith formation</b>	The planning team makes faith formation the forefront of their journey on inclusion, calling on God’s help and grace to prayerfully discern the path to take and are willing to take a leap of faith knowing that the focus is always on Christ. The team understands the ministry and meaning behind the work they are undertaking.
<b>Funding</b>	The school has thoughtfully and thoroughly investigated at least three ways to financially sustain inclusion using funds from within, grants, foundations, or federal/ state funds.
<b>Creating awareness</b>	Early adopters and influencers from the parish have been brought in to meetings with the purpose of inspiring all stakeholders to action. All team members are clear in their message and how to spread it. Pastor support is evident and inclusion in our schools is spoken about at masses or parish events.

<b>Policy</b>	The scope, boundaries, and alignment from stakeholders has been clearly defined with how the team will work together. All possible concerns and objectives have been addressed as a team before implementation.
<b>Admissions</b>	A clear admissions policy has been created with the input of all stakeholders on the team. The policy addresses current and prospective students, supports available, forms needed from current and prospective students such as evaluations or medical information. Clear expectations are created on any adaptations or modifications offered on initial evaluations. Parent role in the admissions policy is also clearly defined.

### School-wide Collaboration and Communication Checklist

<b>Stakeholder roles</b>	Roles and expectations are clearly laid out at the beginning of the school year for all stakeholders, including teachers, parents, paras, administrators, learning consultants / resource teachers, and other school staff. These expectations are written out and signed off on. Roles are student centered and can be modified as needed through proper channels. All stakeholders understand the ministry of their work and are flexible in what they take on.
<b>Curriculum modifications &amp; adaptations</b>	All curricular accommodations and/ or modifications are individualized and carefully thought out based on a child's strengths and goals on his or her learning plan, meeting the student where they are. They are appropriate in removing barriers for students to achieve the learning target. Accommodations and/or modifications are clearly communicated to relevant staff and followed consistently.
<b>Professional development</b>	Professional development happens at least monthly on a school wide level and is thoughtfully mapped out in terms of student and staff needs. Outside professionals are used and opportunities are differentiated for staff based on needs.
<b>Peer supports</b>	Peer supports are incorporated into school wide activities and mission. They are reciprocal in nature, lending opportunities for each child to demonstrate his or her strengths.
<b>Learning plans</b>	Learning plans are made for students needing extra support, based on a system clearly established by the inclusion leadership team. A clear system is established including who is involved in writing the plan, parent input, how often to update plans, and how the data will be collected in order to establish student goals. Benchmarks towards the goals are included and the plan is strength based, focusing on what the child does well in relation to where he or she needs to be.
<b>Parent concerns</b>	Parents are involved and updated on their child's life daily in some capacity that works for all parties, based on parent needs. Concerns are addressed immediately, involving only those who need to be involved. A system has been established in advance mapping out who a parent is to go to in case of a concern. Roles are clearly established within the school as to who is communicating with the parents and in what capacity. Parents are also included in all school and classroom communications that the rest of the class receives.
<b>Data sharing</b>	A clear system has been established as chosen by the inclusion leadership team to collect and report on data in relation to a child's specific goals and



	<p>benchmarks. The system includes what type of data will be reported, how it will be recorded and shared, with whom to share, and how often data is taken.</p>
<b>Health and safety</b>	<p>Systems are in place to ensure the health and safety of all students, especially those with medical needs. This might include having a nurse or specialist come in to train all staff on how to use certain medications, how to respond to emergency situations, how to administer medication, etc. Accommodations and procedures are in place for students needing physical assistance. Procedures have been created for any issue specific to a student like toileting or personal care and approved by the team and parents. Every possible scenario has been examined and planned for with the help of a medical professional if necessary and taking into account policy of the archdiocese. The entire staff is trained and ready.</p>
<b>Scheduling</b>	<p>Weekly meetings are built in to the schedule for paras, learning consultants or resource teachers, and classroom teachers to discuss lesson plans (push in/pull out, based on lessons and student needs), para schedules and expectations, special events, and any outside services a child is receiving. .</p>
<b>Long term planning</b>	<p>A school wide, long term planning calendar is created with major school events, school wide testing, field trips, grant or financial application due dates, team meetings, team member vacations, learning plan meetings, etc. The calendar is updated regularly by a specific person whose role is clearly defined in advance and accessed by all stakeholders on a regular basis.</p>

## School-wide Implementation Checklist - Phase 2

<b>Third party assistance</b>	<p>Evidence of a third party inclusion specialist is clear, including:</p> <ul style="list-style-type: none"> <li>● Long and short term goals</li> <li>● Log of school visits</li> <li>● Record of school implementing advice of specialist</li> <li>● Data collection on systematic changes in school</li> </ul>
<b>Role definition</b>	<p>Roles of each stakeholder have been clearly established, written out, and signed by all parties including at least pastor, principal, teacher, and parents. Training plans for all stakeholders have also been clearly laid out into short and long term goals.</p>
<b>School and parent alignment</b>	<p>Schools have a clear and written plan for admission or referral for existing students through a Care Team approach including:</p> <ul style="list-style-type: none"> <li>● admission testing and evaluations</li> <li>● services the school can offer</li> <li>● how to receive other services</li> <li>● paperwork required</li> <li>● observations of the child in school</li> <li>● parent interviews</li> <li>● teacher interview</li> </ul> <p>After all information is gathered, a meeting is held with all stakeholders to create a plan for the student complete with goals and benchmarks, accommodations and/ or modifications, and what the school can offer the specific child.</p>
<b>Communication plan</b>	<p>A plan has been established for all stakeholders including</p> <ul style="list-style-type: none"> <li>● how and how often to communicate student data to parents</li> <li>● chain of command for problem solving</li> <li>● who the case manager of each child will be with expectations of that role clearly established</li> <li>● daily communication for parents by the paraprofessional</li> <li>● how often to have a larger stakeholder meeting to review policies and procedures of the school's inclusion program as a whole</li> </ul>
<b>Paraprofessional training</b>	<p>Paraprofessionals are systematically trained on the disabilities specific to the children in the school, health issues to be aware of, parent communication, behavior management, chain of command, and crisis intervention before beginning work with any child. Training and professional development continues every week in meetings with the learning consultant or resource teacher on relevant issues to the children at the school..</p>
<b>School mission and philosophy support school goals</b>	<p>The mission or philosophy of the school is written or edited in such a way as to make known the school's goal of including all children with several, specific goals or benchmarks to support.</p>
<b>Teacher training</b>	<p>Teachers are systematically trained on the disabilities specific to the children in their classroom, health issues to be aware of, parent communication, behavior management, chain of command, and crisis intervention before beginning work with any child. Training and professional development</p>

	continues every week in meetings with the learning consultant or resource teacher on relevant issues to the children at the school.
<b>Pilot program</b>	A pilot program is set to rollout with 1-2 children. The parents of these children are willing to learn and help develop the program alongside the teachers and other implementers.

### Lesson Planning and Execution Checklist - Classroom

<b>Accommodations and modifications</b>	All accommodations and/ or modifications are individualized and appropriate to remove barriers for students to achieve the learning target. Accommodations and/or modifications are clearly communicated to relevant staff and followed consistently.
<b>Teacher planning</b>	Lessons are planned out and executed in a thoughtful and meaningful way, with a tiered approach to reach all learners.
<b>Teacher or learning consultant/ para communication</b>	Teachers or learning consultant and paraprofessionals meet at least one time a week to check in on student goals and adjust as needed. Daily lessons, schedules, and adaptations are clearly communicated to paraprofessionals each day. Teachers are available for troubleshooting and training as needed.
<b>Multisensory lessons (UDL)</b>	Lessons include using three or more senses, with choices for students in engagement to suit each learner best.
<b>Opportunities for choice (UDL)</b>	Choice is embedded in the lesson in regards to how the child learns the lesson objective as well as how he or she presents the knowledge.
<b>Opportunities for movement and engagement (UDL)</b>	Lessons are made relevant using multiple means of engagement. Learning goals are clearly established. Students are given opportunities for movement at several points in the lesson.
<b>Learning strategies and content taught</b>	Learning strategies are taught side by side with curricular content in a way that flows with the lesson and maximizes time.
<b>Visual supports</b>	Visuals are given in the form of pictures, words, symbols, and/ or whatever forms are most appropriate for the child. Visual s are individualized and referred to often whenever appropriate for routines, transition, instructions, etc.
<b>Data Collection</b>	Data collection is taken at least weekly on each child's individualized goals and is communicated to relevant staff and parents. A clear and easy system for data collection and communication has been established.
<b>Social interactions</b>	Social interactions and group work are encouraged at appropriate times throughout the day, including all students in an organic way. Social skills and collaboration are taught explicitly in advance.
<b>Friendships and Community</b>	All students are included on all class postings, eg. Job lists, learning groups, etc. Building community is an obvious priority.
<b>Peer supports</b>	Peer supports are incorporated into daily routines. Peer supports are reciprocal in nature.
<b>Faith formation</b>	Catholic faith formation is at the forefront of the classroom. Faith formation is incorporated organically into every area of the day for every student.

### Behavior Management Checklist - Classroom

<b>Rules</b>	3-5 classroom rules are posted and referred to. Rules are connected to school wide rules or mission and are positively written and age appropriate.
--------------	---

<b>Routines</b>	Routines are evident in the behavior of the students. No student seems “lost” and everyone has a place and a task. Teacher reminds students of routines and posts them as necessary for reference. Some students have individualized visuals.
<b>Schedule</b>	Daily schedule is posted visually and referred to verbally. Any changes in the daily schedule are discussed or emphasized so there are no surprises. Some students have their own visual of the schedule.
<b>Praise</b>	Praise is given meaningfully and often, with a 4:1 ratio of positive to negative for any given student. Praise is specific.
<b>Consistency</b>	Teachers, assistants, paraprofessionals, and specialists all follow the same set of rules and expectations, allowing for specifics according to subject area with any changes posted visually and reminding the children verbally.
<b>Positive behavior supports</b>	Appropriate behaviors are taught as a replacement to undesirable behaviors. Examples and non examples are shown and rehearsed.
<b>Teacher action</b>	The teacher is moving around the room to manage proximity control and gage appropriate behaviors or issues in a timely manner, respecting each child’s dignity and privacy.
Transitions	Downtime is minimized, time spent on activities is age and ability appropriate. All students are given appropriate warning on an approaching transition, with certain students receiving a one on one warning as well.

D. Sample daily communication form

Johnny's Day

I played with...
I worked with my... PT      pull out      push in Notes:
OT      pull out      push in Notes:
SLP      pull out      push in Notes:
Diaper change? Wet      Dirty
Notes:

E. Sample health plan

*Sample Individual Health Plan*

Name: \_\_\_\_\_ Date of Last Revision: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Address/Phone/Parents : \_\_\_\_\_  
\_\_\_\_\_

Primary Doctor: \_\_\_\_\_  
Address/Phone: \_\_\_\_\_  
\_\_\_\_\_

Principal Diagnosis: \_\_\_\_\_  
\_\_\_\_\_

Problem List:	Consultants/Hospital/Phone/Date Last Seen:
1. _____	_____
2. _____	_____
3. _____	_____

**Hospital Admissions in the last 12 months**  
Reason/Outcome/Discharge Date:  
1. \_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_

**Current Medications:**  
Dosage/Frequency/Method of Administration/Reason for taking/Prescribed by/Date started/effectiveness/side effects

1. \_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
\_\_\_\_\_

**Allergies:**  
\_\_\_\_\_  
\_\_\_\_\_

**Equipment:**  
Type of equipment/company providing equipment/date prescribed/new equipment needed  
\_\_\_\_\_  
\_\_\_\_\_

F. Classroom teacher prereferral checklist

**Pre-referral Checklist for Classroom Teachers**

Before suggesting that a child needs a referral to the school Care Team, the classroom teacher should complete the following list:

- Have I observed the specific behavior or skill in question and have records of observations or class work? These may be in the form of logs, notes, checklists, student work records, or any other relevant format.
- Have I assembled samples of the student's work relevant to the behavior or skill in question, including samples of the work done by a neuro-typical student in my class for comparison?
- Have I had at least one informal conversation with a colleague at my school to brainstorm ideas that might solve the problem?
- Have I had regular contact with the student's parent(s) in regard to the skill or behavior in question after a positive relationship with them was established?
- Have I collaborated with the child's parent(s) about any changes in home life, vision, hearing, sleep habits, and diet to ensure that none of these is the cause of the problem?
- Have I documented at least three pre-referral interventions that have been tried with this student? Did I apply them consistently for a reasonable period of time before referring this child to the Care Team?
- When possible, did I speak to a teacher who taught this child last year to see if a similar problem existed and to gain ideas of what has worked in the past?
- Have I read the information in the child's permanent folder to see if there is anything relevant to the situation contained there?
- After all of the above has been accomplished, did I receive permission from the child's parent(s) to refer him or her to Care Team?

G. Sample parent permission letter for Care Team

{School letterhead}

Date of Notice/Invitation:

Dear \_\_\_\_\_,

As your child's classroom teacher mentioned, our school has a Care Team whose purpose is to review the educational needs and progress of any student who may require additional support, as well as to recommend strategies to teachers. Your child has been referred for further evaluation by his or her teacher to the Care Team. The team has been asked to review your child's individual needs to determine if additional supports are necessary.

A Care Team meeting is scheduled on \_\_\_\_\_{date/ time}. At this meeting, the team will review existing data to come up with a plan that works best for your child. It is most important for you to know that the conversations of the Care Team are completely confidential and solely designed to help classroom teachers implement strategies that will help your child be successful. Please sign the following, granting your permission to discuss your child's needs at the Care Team meeting. We will notify you by phone within 24 hours of the meeting to share the team's suggestions. If you have any questions, please feel free to contact me.

Sincerely,

{Name}

{Title}

{Telephone number and email}

\_\_\_\_\_

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Phone #: \_\_\_\_\_

I give permission for my child, \_\_\_\_\_, to be referred to Care Team.

Parent/Guardian signature \_\_\_\_\_



H. Authorization for release of school records

## Authorization for Release of Information and Records

Student (full name): \_\_\_\_\_

Date of birth:

Current school

I hereby give my permission for the release of information and records indicated below. This permission remains valid until it is revoked through parental note.

Obtain Information from: (School)

Release Information to: (prospective school)

Student's district of residence:

Student information and records as follows. Include all that are applicable:

- Cumulative File
- Psychological or  
Multi-Factored  
Evaluation(s)
- Individualized  
Education Plan(s)  
or Services Plan(s)
- Standardized  
Testing Results

I attest to the fact that I am the legal guardian of the above named student and authorize to release the specified information and records.

Parent signature and date

\_\_\_\_\_

I. Care Team meeting planner

Care Team Meeting Planner

Date:

Student name:	Grade:	Teacher:
---------------	--------	----------

1. Was parent permission granted? Y N
2. Did the teacher fill out the prereferral checklist and bring data requested? Y N
3. Is there enough data to define the problem? Y N
4. Define the problem explicitly, providing only facts.

---



---



---

5. Summarize the data. Check any item below that evidence shows where the student's primary difficulty is coming from.

- Attention
- Behavior
- Lack of attendance at school
- Speech or language
- Medical, vision, or hearing
- Limited English language proficiency
- Unspecified slow progress

6. Intervention suggested (strategies, accommodations, modifications)

Date	Action plan	Progress monitoring	Person responsible	Review date

J. Student information sheet

Student information sheet

Name:

Language Arts	high	medium	low	sped support?	Y/N
Math	high	medium	low	sped support?	Y/N
Science	high	medium	low	sped support?	Y/N
Social Studies	high	medium	low	sped support?	Y/N
Behavior	great	good	needs help	BIP?	<input checked="" type="checkbox"/> Y/N

Photo

504	Y/N
Learning plan	Y/N
Health/ allergy	Y/N
ELL	Y/N
Do not place student with:	
Notes on back?	Y/N
See me?	Y/N

## K. Caseload responsibilities

### **Caseload Responsibilities**

Each case manager is responsible for the following:

Beginning of the Year:

- Meet with teachers to go over learning plans prior to the first day of school. Classroom teachers and specialists should all have copies of plans. Make them copies and deliver.
- Meet with parents to review learning plans and adjust if needed.
- Create your schedule with classroom teachers. Give copies to the office.
- Print a copy of your schedule and hang it outside your door without student names.
- Provide sensory materials and/or assistive technology to students and/or teachers.
- Check each child's cumulative folder and request updated information if needed.
- Make sure students receiving services through SSD have everything they need in place.

Mid-year:

- Continue to monitor student progress and take data on goals monthly.
- Provide parents with data on progress at least quarterly.
- Check in with teachers regularly on student goals.
- File copies of data in student's cumulative folder.
- Attend resource meetings, SSD, and CARE team meetings as necessary.
- Attend parent/ teacher conferences.
- Check up on student report cards. If a child is getting Ds or Fs, review with Care Team.

End of the Year:

- Review learning plans with parents and make changes as needed.
- Assist in scheduling for next year as needed.
- Assist in class lists as needed.
- Check with SSD if any incoming students are coming next year.
- Collect sensory tools and assistive technology.
- Place orders for next year.

Adapted from the ICD handbook, written by Dr. Katy Schierding

## L. End of the year checklist

### End of the Year Checkout:

- All plans have been updated with parent input and checked.
- All plans are printed and sent home.
- All data is submitted into each child's cumulative folder.
- All sensory materials have been returned to the correct place.
- List of items to be ordered for next year have been turned in.
- List of training topics you would like for next year have been turned in.
- All assistive technology has been turned in.
- Input was given on each child's placement for next year.
- Student information cards for next year's teacher have been filled out.

M. End of the year parent letter

Date

Dear Mr. and Mrs. \_\_\_\_\_,

As the school year ends, I'd like to take this opportunity to express how proud I am of \_\_\_\_\_ . He/ she has made great progress. I look forward to seeing this progress continue next year. I've attached a copy of your child's learning plan for next year, as we discussed. The plan consists of goals, services, and accommodations or modifications needed specifically for your child. When developing this plan, we took into consideration teacher input, progress on current goals, your input, as well as data and observations. Please read it over and contact me if you have any questions.

Have a wonderful summer, and I look forward to working with your child again in August!

Sincerely,

Adapted from the ICD handbook, created by Dr. Katy Schierding

## N. Sample Standards based report card

Sample Standards-based Report Card (would need to be adjusted to fit each child's specific goals and grade level)

Student:

Grade:

Date:

Teacher:

Special education teacher:

1 – most of the time      2 – some of the time      3 – not yet      4 – n/a

### Spiritual Goals:

- Attend mass
- Make the sign of the cross
- Genuflect

Comments:

### Academic Goals:

- Follow 2 step directions
- Point to the correct picture when given three choices and one verbal prompt
- Sort by color
- Identify basic body parts

Comments:

### Social/ emotional Goals:

- Shares toys with classmates
- Can respond appropriately with yes or no
- Can appropriately ask for help

Comments:

### Motor Skills Goals:

- Can scribble within a boundary line
- Can kick a ball
- Can successfully go up and down stairs

Comments:

### Adaptive Skills Goals:

- Washes hands independently
- Can put a coat on and off independently
- Appropriately wipes his/her own face after meals

Comments:

### Executive Functioning Skills Goals:

- Can transition from play to work with a five and one minute warning without crying
- Can attend to a lesson for 5 minutes
- Can put papers in appropriate color folder with one verbal prompt

Comments:

## O. Sample Narrative Report Card

Sample Narrative Report Card (headings and content should align with individual student goals)

Name:

Date:

Teacher:

### Faith Formation

Johnny is doing a great job with his faith formation! He has a goal of learning to genuflect with no prompts before entering a pew, and he is accomplishing that 85% of the time. He still needs prompting on making the sign of the cross at the end of a prayer, but he can do it unprompted before a prayer 80% of the time. He enjoys going to mass if he has his headphones and visual schedule. With these supports, he is able to attend mass for about 20 minutes before needing a break, which is amazing! This time last year, he could only attend mass for an average of 7 minutes without needing a break. Way to go, Johnny!

### Citizenship

Johnny is a friend to all! He is kind and shows concern for others. He is respectful to adults, yet able to voice his displeasure appropriately. Johnny is working on moving from parallel play interacting more with his peers. He is making great progress!

### Reading

Johnny is able to identify all 26 letters of the alphabet when given choices of three at a time. We are so proud of this accomplishment! Our next step is to identify letters out of 5, then 10 choices. He can spell his name orally and write 3 out of the 4 letters in "John." He loves to "read" books to his teacher by making up words to stories as he goes along. This is an excellent first step to literacy!

### Math

Johnny is working on counting to ten consistently and identifying numbers. He is able to use one to one correspondence to count objects up to three. He is highly motivated by counting M&Ms, so we expect his counting to continue to improve! Math is not Johnny's favorite subject, but he voices that appropriately. Using a visual picture timer and schedule has helped increase his endurance.



Q. Sample Individualized Learning Plan

**Sample Individualized Learning Plan**

Student:

Date:

Grade:

Case Manager:

**Meeting Participants and Role:**

- 1.
- 2.
- 3.
- 4.
- 5.

**Student Strengths:**

**Present Level: (include relevant academic, social/ emotional, and functional performance)**

**Summary of Previous Testing:**

**Measurable Goals with Benchmarks (annual goals related to the services provided):**

**Services Provided:**

Service	Frequency	Location	Provider

**Accommodations and/or Modifications (circle all that apply):**

Assignments:

1. Directions given verbally and visually
2. Directions read aloud
3. Multi-step directions separated, numbered, and highlighted
4. Calculator permitted
5. Reduce pencil/ paper tasks
6. Provide class notes and completed study guides
7. Notes and study guides provided after student attempt
8. Student can type assignments
9. Student can record answers
10. Shorten assignment
11. Lower difficulty of assignments
12. Chunking assignments
13. Assistance in filling out daily planner
14. Afternoon backpack check
15. Specific organization time
16. Avoid penalizing for spelling errors
17. Adapt worksheets or packets
18. Teacher check-over before turning in assignments or tests
19. Additional time for assignments
20. Do not call on student to read aloud during class
21. Provide samples of finished products
22. Help with timetable on long assignments
23. Other: \_\_\_\_\_

Environment:

1. Preferential seating
2. Seat student next to peer buddy

3. Private space to work
4. Other: \_\_\_\_\_

Assessments:

1. Extended time
2. Small group
3. Type answers
4. Have teacher or device record answers verbally
5. Tests read to student
6. Calculator permitted
7. Adapt format for length or content
8. Test broken into several periods/ days
9. Individual testing
10. Teacher check-over before turning in
11. Other: \_\_\_\_\_

Other:

1. Nonverbal communication or sign to reinforce positive choices
2. Nonverbal communication or sign to remind student to refocus
3. Allow for physical movement/ breaks, especially during challenging work
4. Allow for a fidget item/ strategy
5. Allow for sensory item
6. Peer buddy to encourage social skills
7. Social skills training in special education classroom
8. Explicit executive functioning training in special education classroom
9. Extra set of books at home
10. Extra warnings before transitions
11. Behavior intervention plan
12. Alternative format on materials (large print, audio, digital, Braille, etc.)
13. Other: \_\_\_\_\_

## R. Paraeducator Expectations Discussion List

### Paraeducator Expectations Discussion

The intent of this tool is to start a conversation between supervising teachers and paraprofessionals regarding expectations for job duties throughout the year. Paraprofessionals should be trained in processes and skills according to this list, at minimum.

- Collaboration processes between teachers and staff
- Chain of command for issues and conflict management
- Relationship building between staff
- Professional development topics needed
- Where and how to keep track of paraeducator training sessions
- How to review student files
- Crisis plans in place
- Processes for student arrivals and departures
- Daily schedules of students
- Hotline procedures
- Confidentiality
- Knowledge of school rules, policies, and procedures
- Substitute procedures
- Pertinent computer systems
- Processes for prioritizing student assignments
- Understanding when and how to modify or accommodate
- Process for adapting and changing based on the needs of the student
- How to use school voicemail and email systems
- How and when to communicate with parents and when to refer to the special ed teacher
- How to maintain a positive attitude
- Participation in team meetings
- Process for participating in designing of lessons
- Peer supports
- Participation in Learning Plan meetings
- Supervision of students
- Student motivators
- Universal supports to encourage/ maintain
- Toolbox of behavior supports
- Behavior intervention plans (BIP)
- Implementing with fidelity
- Creating instructional material
- How to observe/ collect data
- Assisting students in the classroom
- Providing feedback for students

## S. Paraprofessional Preferences Survey

### Paraprofessional Preferences Survey

The following list provides some of the duties that you might be asked to perform as a paraprofessional, *besides* working one on one with a student. Please rank them in order of preference, with 1 being your most preferred task.

- Making copies
- Prepping projects (cutting, gluing, etc.)
- Collecting data
- Setting up centers
- Running a center
- Tidying up
- Bulletin boards
- Working with a small group
- Escorting students
- Daily parent communication sheets

Check anything on this list that you feel is a personal **strength**.

- Deescalating behavior
- Collecting data
- Building rapport with students
- Helping a student break down big tasks into smaller chunks
- Assisting students in reaching their goals
- Consistency in routine and expectations
- Providing praise and positive reinforcement
- Collaborating with other staff

Check anything on this list that you'd like **more training on**.

- Deescalating behavior
- Collecting data
- Building rapport with students
- Helping a student break down big tasks into smaller chunks
- Assisting students in reaching their goals
- Consistency in routine and expectations
- Providing praise and positive reinforcement
- Collaborating with other staff

When is your birthday? \_\_\_\_\_

What is your favorite candy or treat? \_\_\_\_\_

Do you have a favorite drink from Starbucks? \_\_\_\_\_

T. Nine types of accommodations and modification

9 Types of Adaptations and Modifications

<p style="text-align: center;"><b>Size</b></p> <p>Adapt the number of items that the learner is expected to learn or complete.</p> <p>For example: Reduce the number of social studies terms a learner must learn at any one time.</p>	<p style="text-align: center;"><b>Time</b></p> <p>Adapt the time allotted and allowed for learning, task completion, or testing.</p> <p>For example: Individualize a timeline for completing a task; pace learning differently (increase or decrease) for some learners.</p>	<p style="text-align: center;"><b>Level of Support</b></p> <p>Increase the amount of personal assistance with a specific learner.</p> <p>For example: Assign peer buddies, teaching assistants, peer tutors, or cross-age tutors.</p>
<p style="text-align: center;"><b>Input</b></p> <p>Adapt the way instruction is delivered to the learner.</p> <p>For example: Use different visual aids, plan more concrete example, provide hands-on activities, place students in cooperative groups.</p>	<p style="text-align: center;"><b>Difficulty</b></p> <p>Adapt the skill level, problem type, or the rules on how the learner may approach the work</p> <p>For example: Allow the use of a calculator to figure math problems; simplify task directions; change rules to accommodate learner needs.</p>	<p style="text-align: center;"><b>Output</b></p> <p>Adapt how the student can respond to instruction.</p> <p>For example: Instead of answering questions in writing, allow a verbal response, use a communication book, allow students to show knowledge with hands on materials.</p>
<p style="text-align: center;"><b>Participation</b></p> <p>Adapt the extent to which a learner is actively involved in the task.</p> <p>For example: In geography, have a student hold the globe, while others point out locations.</p>	<p style="text-align: center;"><b>Alternate Goals</b></p> <p>Adapt the goals or outcome expectations while using the same materials.</p> <p>For example: In social studies, expect a student to be able to locate just the state while others learn to locate capitals as well.</p>	<p style="text-align: center;"><b>Substitute Curriculum</b></p> <p>Provide different instruction and materials to meet a student's individual goals.</p> <p>For example: During a language test one student is learning computer skill in the computer lab.</p>

U. Inclusion Pro Forma Estimates

	Inclusion Pro Forma	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Tuition :		\$ 4,500									
Staff Training		(\$5,000)	(\$5,000)	(\$5,000)	(\$5,000)	(\$2,000)	(\$2,000)	(\$2,000)	(\$2,000)	(\$2,000)	(\$2,000)
Additional Staffing		(\$30,000)	(\$30,000)	(\$30,000)	(\$30,000)	(\$30,000)	(\$30,000)	(\$30,000)	(\$30,000)	(\$30,000)	(\$30,000)
Special Education Leader / Para Professional 1								(\$24,000)	(\$24,000)	(\$24,000)	(\$24,000)
Para Professional 2											
Para Professional 3: Volunteer				X	X	X	X	X	X	X	X
Para Professional 4: Volunteer											
Total Costs		(\$35,000)	(\$35,000)	(\$35,000)	(\$35,000)	(\$32,000)	(\$32,000)	(\$56,000)	(\$56,000)	(\$56,000)	(\$56,000)
Number of Children with SSN		1	1	2	2	3	3	4	4	5	6
New Enrollment, Siblings, close family relations		1	1	2	2	3	3	4	4	5	6
Increase in enrollment, school wide, due to attracting more students			1	2	3	4	5	6	7	8	9
Improved retention, school wide, due to improved systems and processes			1	2	3	4	5	6	7	8	9
School Wide Net Increase in Students		2	4	8	10	14	16	20	22	26	30
Additional Tuition Revenues		\$9,000	\$18,000	\$36,000	\$45,000	\$63,000	\$72,000	\$90,000	\$99,000	\$117,000	\$135,000
Net Cash Flow		(\$26,000)	(\$17,000)	\$1,000	\$10,000	\$31,000	\$40,000	\$34,000	\$43,000	\$61,000	\$79,000

## References

Alsarawi, A. (2019). A process, framework, and set of tools for facilitating co-planning among co-teachers. *International Journal of Whole Schooling*, 15(2), 1-23.

Archdiocese of Phoenix. (2017). Catechesis for Children with Disabilities: A handbook for parish leaders.

[Disabilities-Handbook-final-version-WORD.pdf](#)

Boyle, M. (2018). *Ensuring a Place at the Table: Serving Students with Disabilities in Catholic Schools*. Arlington, VA: NCEA.

Burke, M. M., & Griffin, M. M. (2016). Students with Developmental Disabilities in Catholic Schools: Examples in Primary and Secondary Settings. *Journal of Catholic Education*, 19 (3).

Cameron, D. & Cook, B. (2007). Attitudes of preservice teachers enrolled in an infusion preparation program regarding planning and accommodations for included students with mental retardation. *Education and Training in Developmental Disabilities*. 42 (3), 353-363.

Canon Law 773

CAST (2018). Universal Design for Learning Guidelines version 2.2. Retrieved from <http://udlguidelines.cast.org>

Cosier, M., Causton-Theoharis, J., & Theoharis, G. (2013). Does Access Matter? Time in General Education and Achievement for Students With Disabilities. *Remedial and Special Education*, 34(6), 323–332. <https://doi.org/10.1177/0741932513485448>

Davis, L. (2011). Abuse of children with intellectual disabilities. Retrieved from [Child Abuse.pdf](#)

Davis-Perry, D. (2019). Factors for sustained institutionalization of schoolwide initiatives. *William and Mary School of Education*. Retrieved from: <https://education.wm.edu/centers/ttac/resources/articles/instructconsultteams/factorsforinitiatives/index.php>

Emberly, D. & Clarke, L. (2017). How to Keep Students with Disabilities Safe in Lockdowns, Evacuations, and Other School Crises. Retrieved from [keeping-students-with-disabilities-safe-in-lockdowns-evacuations-and-other-school-crises](#)

Friend, M. (2002). An interview with Dr. Marilyn Friend. *Intervention in School and Clinic*, 37 (4), 223-228

Gilmour, A., Fuchs, D., & Wehby, J. (2018). Are Students With Disabilities Accessing the Curriculum? A Meta-Analysis of the Reading Achievement Gap Between Students With and Without Disabilities. Retrieved from <https://doi.org/10.1177/0014402918795830>



Gupta, S., Henninger, W., & Vinh, M. (2014). How do children benefit from inclusion? *First Steps to Preschool Inclusion: How to Jumpstart Your Program-wide Plan*, 33-57.

Inclusion Evolution: 7 new research studies to help you win the fight for inclusion (2019). Retrieved from [7-new-research-studies-to-help-you-win-the-fight-for-inclusion](#)

Keyes, M. & Owens-Johnson, L. (2003). Developing person-centered IEPs. *Intervention in School and Clinic*. 38:3 (145-152).

Kurth, J. & Mastergeorger, A. (2012). Impact of setting and instructional context for adolescents with autism. *Journal of Special Education*. 46 (1), 26-48.

Lopez, S. & Louis, M. (2009). The principles of strength based education. *The Journal of College and Character*. 10:4.

McGrath, M., Johns, B., & Mathur, S. (2010). Empowered or overpowered? Strategies for working effectively with paraprofessionals. *Beyond Behavior*(winter), 2-6.

National Conference of Catholic Bishops. (1978). Pastoral Statement of U.S. Catholic Bishops on People with Disabilities. Washington, DC.

NCLD's "State of Learning Disabilities" (2017)  
Retrieved from [nclld.org/StateofLD](http://nclld.org/StateofLD)

Peterson, K. (2009). Tough love: the challenges of raising special needs children. *U.S. Catholic: Faith in Real Life*. 74 (4). [www.uscatholic.org](http://www.uscatholic.org)

Raymond, E. (2017). *Learners with Mild Disabilities: A Characteristics Approach* (5th ed.) New York, New York: Pearson Education.

Rossetti, Z. & Goessling, D. (2010). Paraeducators' roles in facilitating friendships between secondary students with and without autism spectrum disorders or developmental disabilities. *Teaching Exceptional Children*, 42 (6) 64-70.

Salend, S. (1999). Facilitating friendships among diverse students. *Intervention in School and Clinic*, 35 (1) 9-15.

Samuels, C. & Harwin, A. (2018). Shortage of classroom educators leads to special pressure. *Education Week*. Retrieved from [shortage-of-special-educators-adds-to-classroom.html](#)

Wheeler, J. & Richey, D. (2019). *Behavior Management: Principles and Practices of Positive Behavior Supports*. Pearson; New York.

Zimmerman, A. (2017).  
[More-students-with-disabilities-got-required-services-last-year-but-large-gaps-remain](#)  
Retrieved from: [chalkbeat.org](http://chalkbeat.org)

