

Discipline: Go Directly to Jail, Do Not Pass Go, Do Not Collect \$200

Example 1.

High school male, has an IEP, LD in written language. Above average student, popular, athletic. Has not had any behavior issues other than very minor incidents. Brings a gun to school. Admits he brought gun on a dare (\$50 bet) from an older brother who had issues when he was in school. He says his actions were “stupid.” Was suspended for 10 days, administration wants to expel the student. IEP team meets to discuss behavior. IEP does not include a Positive Behavior Intervention Plan (PBIP).

Is a Manifestation Determination (MD) necessary? Does student need an FBA? Is the IEP appropriate? What is appropriate discipline for this student?

Example 2.

High school male, tested for eligibility 2 years ago, not eligible. Committed a series of behavior that add up to 10 days earlier in the school year. Now he got into a fight and will be suspended for another 10 days. The behaviors are similar and suggest a pattern of behavior. Parent requests that he be tested again for special education eligibility.

Must the school evaluate the student? What are the school’s options here? Where will the student be placed? What about MD?

Example 3.

ED (Emotional Disturbance) student, elementary school. She is also ADHD (on medication) and has a history of impulsive behavior. She has an IEP which includes a BIP which is mostly a listing of consequences for inappropriate behavior. The IEP calls for “enhanced supervision” for which the school offers a paraeducator in the student’s classroom assisting wherever needed. She has had several in-school suspensions (ISS), 10 days of out-of-school suspension (OSS) and now damaged some property in the classroom. She is up for an additional 5 days of OSS.

Must school do an MD? If the BIP is not appropriate, is the IEP appropriate? Can the school remove this student? Is she a danger to self or others? Who makes that call?

Example 4.

Middle school student, on an IEP for speech services only. Student has a history of annoying behavior in class, very bright kid, at times seems bored. Bugs the teacher one last time – teacher asks principal to suspend the student for 6 days and she agrees to the suspension. IEP does not include a PBIP. She has not been suspended before this.

Must the school do an MD? What services must the school offer this girl? Should the IEP team address behavior in the girl’s IEP?

Example 5.

High school student, OHI (Other Health Impaired - ADHD, not medicated), he brings drugs to school (prescription drugs – Grampa’s Viagra) with the intent of selling them to buddies. Has an IEP to deal with his impulsive behavior, includes a PBIP. School is planning on expulsion for

the remainder of the school year – 3 quarters. Past IEPs have not been successful in changing his behavior – there have been numerous IEP meetings that have been contentious. The current IEP has shown some promise in changing behavior but results have been sketchy. The school did an FBA 2 years ago which resulted in changes in his PBIP.

How about MD? Does this student need an updated FBA? Can the school expel this student? Can the school remove this student even if the MD says there is a relationship between behavior and disabilities? If so, what does an Interim Alternative Educational Setting (IAES) mean with regard to services for this student?

Example 6.

Student has a 504 plan which provides some minor accommodations for his disability which is a physical impairment. He has not been a behavior problem. He violates a school rule which calls for expulsion.

Must the school do an MD? What are the school's responsibility toward this student?

Example 7.

Student in middle school is OHI (severe depression – school leaned toward ED label but yielded to resistance of parent to their child having an ED label. The student's physician hinted at school phobia.). She hasn't come to school in 3 weeks. School policy is to expel students after missing 15 instructional days in a semester. The school has not received any communication from either the parent or the girl's doctor. Her IEP does not contain a PBIP. It does provide for some modifications in work required. She is an above average student.

Must the school do an MD? Is her IEP appropriate? Does the school need to do an FBA?

Example 8.

High school male, not in special education, never referred for a comprehensive educational evaluation, has a history of behavior problems, has a juvenile probation officer. Some school personnel and other agency people believe he is conduct disorder. He has been suspended several times (OSS) and just now received another OSS suspension. This will bring his OSS total to 14 days. The parent has requested a comprehensive evaluation.

Must the school evaluate the student? Does this request trigger the protections of the Individuals with Disabilities Education Act (IDEA)? Where can the school place this student? What is the school's response if he is determined eligible?

Example 9.

High school girl, very serious ED student. Has a long history of violence toward self and others. Has had several institutional placements, usually short-term. Currently in a self-contained ED classroom. IEP contains a PBIP and an aversive treatment plan. After school attacks another student, does serious harm to the student. Other student's parents file charges. Next day, girl damages school property and threatens to harm others including some of the teaching staff. She is suspended for 10 days and school officials plan to remove her for 45 days to an IAES.

Must the school do an MD? How about an FBA? How does the school remove this student to an IAES? Is the IEP appropriate?

Example 10.

Moderately to severely cognitively delayed boy, 12 years old, brings a gun (22 caliber pistol, no ammunition) to school. He likes to pretend he is James Bond. He has no history whatsoever of violence. School has a zero tolerance policy for weapons. School suspends for a day and the resource officer pushes for an expulsion.

Must the school do an MD? Does this student understand the consequences of his action? Did his disability impair his ability to control his actions? What should the school do with this student?

Asking for Trouble! Mistakes Parents Make

1. Seeing the special education process as war
2. Uncritically trusting school personnel
3. Waiting too long to respond to concerns then expecting an immediate cure
4. Failing to provide information about their student when there are specific concerns that need addressing
5. Wanting a "popular" program for their student when one offered by the school provides FAPE
6. Micro-managing their student's program in every detail
7. Focusing on minutiae – missing the Big Picture
8. Not consenting to evaluations
9. Getting insufficient I EEs – using unqualified evaluators
10. Not sharing evaluation results with schools
11. Not responding in a timely fashion to proposed I EPs
12. Failing to document steps taken

Asking for Due Process! Mistakes Schools Make

1. Not allowing parents or parents' representatives to view programs
2. Failing to communicate or coordinate with outside professionals working with the student, including other evaluators
3. Failing to respond in writing to parents (Written Notice)
4. Failing to respond to parents when problems arise
5. Patronizing/antagonizing/insulting parents; personalizing issues; blaming parents for problems
6. Focusing on minutiae – sweating the small stuff
7. Making procedural errors
8. Writing IEPs that are sloppy
9. Failing to implement an IEP
10. Failing to review and, if necessary, revise an IEP that hasn't worked
11. Failing/refusing to provide additional services to avoid more restrictive placements (read: "more costly")
12. Failing to utilize outside professionals to help solve problems

13. Losing track of kids placed out of district
14. Not following procedures related to suspension/expulsion
15. Not training regular education administrators on special education responsibilities

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