



**NEW HAMPSHIRE STATE DEPARTMENT
OF EDUCATION
BUREAU OF SPECIAL EDUCATION
PRESENTATIONS**

**NHASEA Summer Summit
Tuesday, July 29, 2014**

AGENDA

9:00-9:05- Introductions

9:05-9:25- *Understanding the Status of Special Education in NH* presented by Santina Thibedeau

9:25-9:45- *NH AIM* presented by Stacey Welch

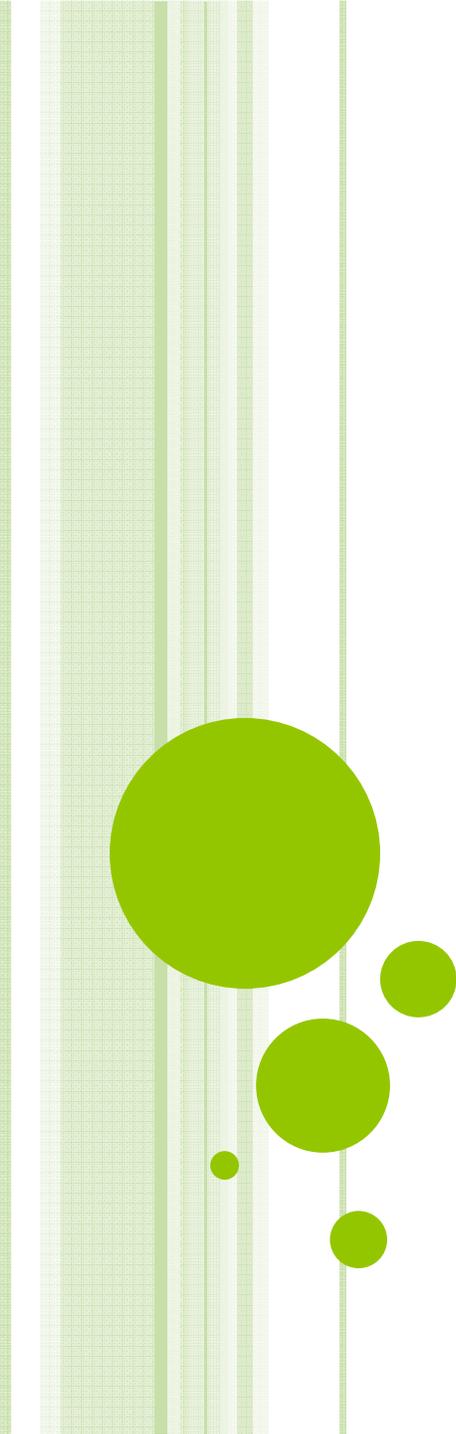
9:45-10:00- *Sample Model Form for Written Prior Notice* presented by Lori Noordergraaf

10:00-10:25- *SEE-Change: Sustaining Early Engagement for Change & The New State Performance Plan (SPP)* presented by Ruth Littlefield

10:25-10:40- *Written Notification Regarding Use of Public Benefits or Insurance* presented by Bridget Brown

10:40-11:00- *Safe Schools/Healthy Students* presented by Mary Steady and Stacey Lazzar





UNDERSTANDING SPECIAL EDUCATION IN NH

Presented *by* Santina Thibedeau

Total Student Enrollment Trends

Year	Special Education Total Student Enrollment	% Change	District Fall Total Student Enrollment	% Change
		<i>from prev. year</i>	<i>as of Oct. 1st</i>	<i>from prev. year</i>
2000	30,077			
2001	30,270	0.64%	206,847	
2002	30,981	2.35%	207,671	0.40%
2003	31,311	1.07%	207,417	-0.12%
2004	31,675	1.16%	206,852	-0.27%
2005	31,782	0.34%	205,767	-0.52%
2006	31,399	-1.21%	203,572	-1.07%
2007	32,274	2.79%	200,772	-1.38%
2008	30,156	-6.56%	197,956	-1.40%
2009	30,210	0.18%	197,160	-0.40%
2010	29,920	-0.96%	194,022	-1.59%
2011	29,422	-1.66%	190,805	-1.66%
2012	29,329	-0.32%	187,963	-1.49%
2013	29,011	-1.08%	185,320	-1.41%

Special Education Total

NEW HAMPSHIRE DEPARTMENT OF EDUCATION STATEWIDE CENSUS BY DISABILITY
Summary of the Special Education child count from 2000 through 2013
Ages 3 - 21 years old.

YEAR	AUT	D-B	DD	DF	ED	HI	MD	MR/ID	OHI	ORT	SLD	SP	TBI	VI	TOTAL
2000	397	5	1009	76	2554	225	419	1010	3747	172	13342	6898	62	161	30077
2001	474	6	1329	77	2561	234	384	996	4009	158	13229	6604	54	155	30270
2002	568	3	1650	70	2701	233	395	963	4183	158	13395	6456	59	147	30981
2003	667	5	1816	73	2687	218	411	982	4474	146	13391	6238	60	143	31311
2004	799	6	1966	69	2672	212	392	955	4767	120	13382	6136	60	139	31675
2005	905	6	2098	73	2580	213	393	934	4812	107	13272	6190	64	135	31782
2006	1060	4	2110	70	2519	214	385	895	4843	105	13000	6014	53	127	31399
2007	1320	6	2310	60	2683	221	407	924	5190	115	12984	5856	65	133	32274
2008	1427	4	2180	*	2363	262	419	823	4982	107	11990	5418	58	123	30156
2009	1593	5	2411	*	2352	258	397	831	5098	98	11620	5364	55	128	30210
2010	1727	6	2412	*	2294	251	401	822	5038	102	11266	5433	58	110	29920
2011	1943	8	2592	*	2268	250	403	789	5072	90	10743	5076	66	122	29422
2012	2191	9	2709	*	2196	237	406	764	5251	84	10365	4931	69	117	29329
2013	2419	9	2871	*	2138	228	408	748	5237	64	9943	4753	74	119	29011

DISPLAY DATA PUBLISHED YEAR 2013

Data Display: New Hampshire

Identification of Children with Disabilities

STUDENT ENROLLMENT, AGES 6 THROUGH 21				
Student Category	State		Nation	
	Students (#)	Students (%)	Students (#)	Students (%)
<i>All students</i>	179,644		45,056,472	
<i>Children with disabilities (IDEA)</i>	26,264	14.6	5,789,884	12.9

Explanatory Note: The number and percentage of total students enrolled in public schools in the state and nation as of October 1, 2010 (or the closest day to October 1) for all grade levels from grade 1 through grade 12, as well as ungraded. The number and percentage of children with disabilities (IDEA) in the state and nation as of the state-designated child count date (between October 1 and December 1, 2011). Children with disabilities (IDEA) are served under the Individuals with Disabilities Education Act (IDEA). Data reported for IDEA 2011 Child Count and the 2010-11 Common Core of Data (CCD). National data represent the US and Outlying Areas. (Data Sources: <http://www.ideadata.org> and <http://nces.ed.gov/ccd/elsi/>).



Data Display: NEW HAMPSHIRE

Publication Year 2014

Identification of Children with Disabilities

STUDENT ENROLLMENT, AGES 6 THROUGH 21

Student Category	State Students (#)	State Students (%)	Nation Students (#)	Nation Students (%)
All students	176,757		44,960,222	
Children with disabilities (IDEA)	26,102	14.8	5,823,844	13.0

Explanatory Note: The number of total students enrolled in public schools in the state and nation as of October 1, 2011 (or the closest day to October 1) for all grade levels from grade 1 through grade 12, as well as ungraded. The number and percentage of children with disabilities (IDEA) in the state and nation as of the state-designated child count date (between October 1 and December 1, 2012). Children with disabilities (IDEA) are served by the Individuals with Disabilities Education Act (IDEA). Data reported for IDEA 2012 Child Count and the SY 2011-12 Common Core of Data (CCD). National IDEA Child Count data represent the US, Outlying Areas, and Freely Associated States and the national CCD data represent the US and Outlying Areas.



FEDERAL TRENDS

This is the first year of the U.S. Department of Education's new evaluation system which takes both compliance and outcomes for students with disabilities into account

Results Driven Accountability Initiative (RDA)

RDA initiative rates states on 50% compliance and 50% on outcomes

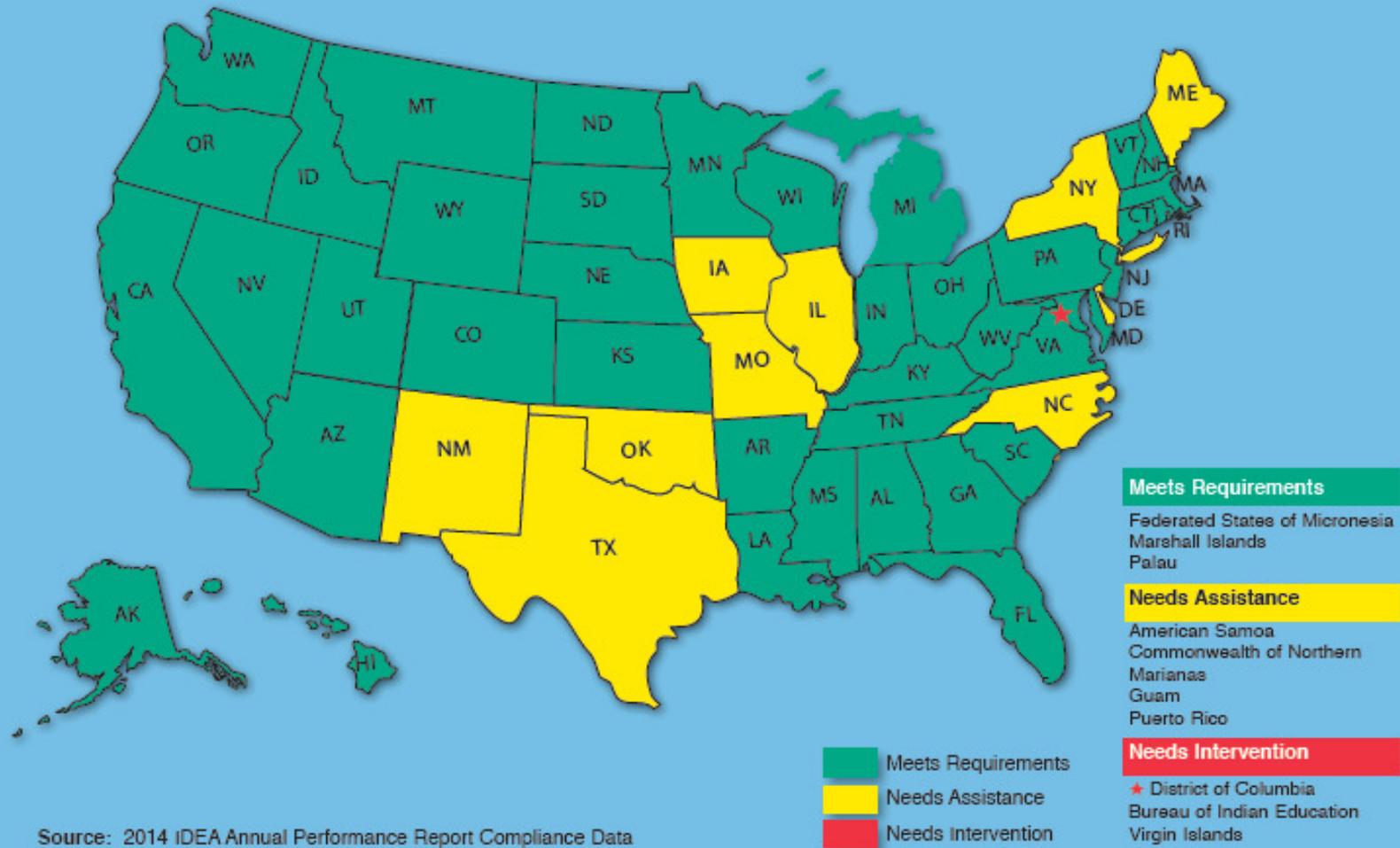


U.S. DEPARTMENT OF EDUCATION'S
OFFICE OF SPECIAL EDUCATION PROGRAMS
(OSEP)
STATE DETERMINATION RATING SYSTEM

- Meets Requirement
- Needs Assistance
- Needs Intervention
- Needs Substantial Intervention

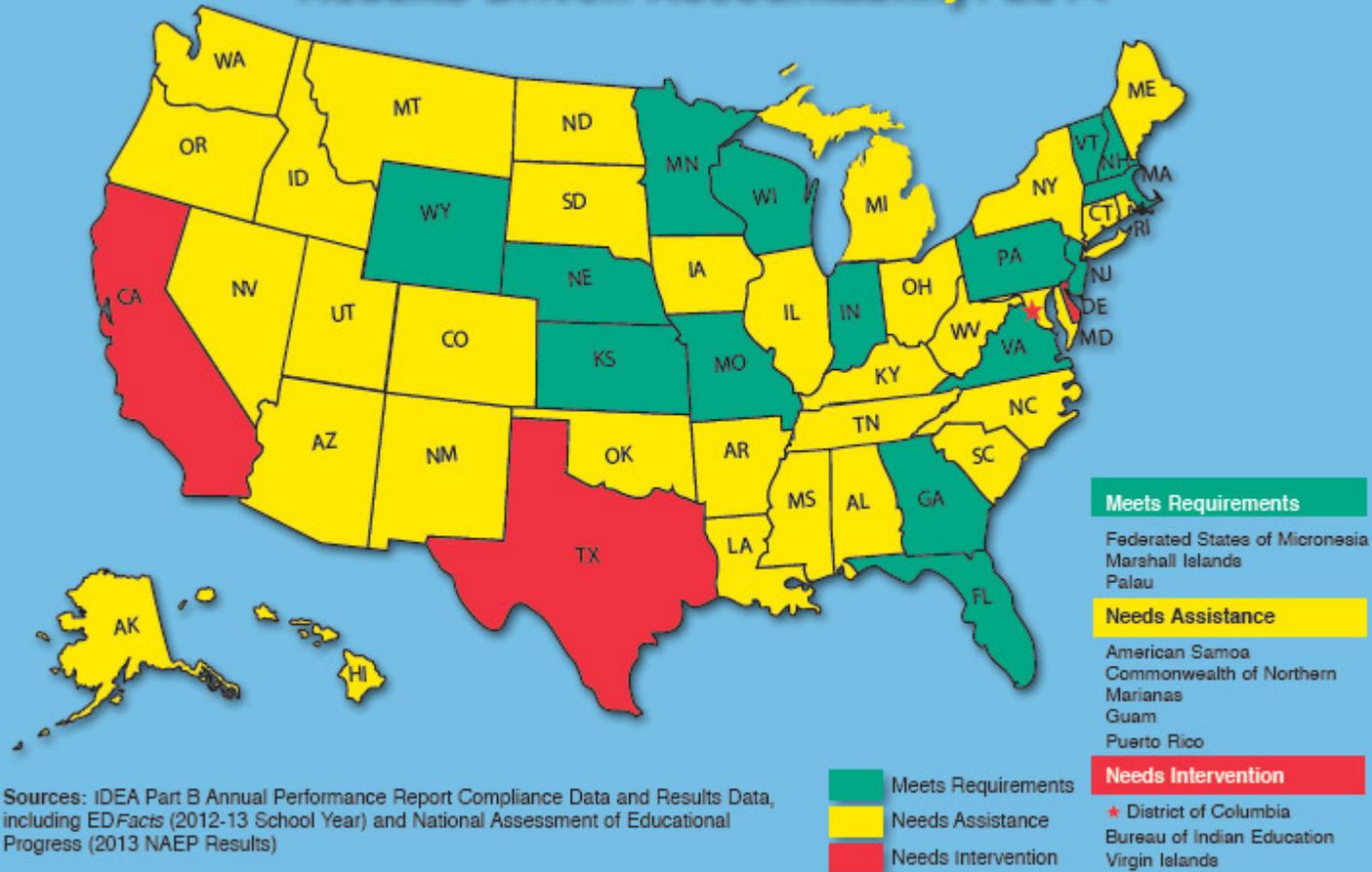


IDEA State Compliance Only: 2014



Source: 2014 IDEA Annual Performance Report Compliance Data

IDEA State Determinations Under Results Driven Accountability: 2014



WHAT OUTCOMES ARE USED IN RDA?
READING AND MATH COMPONENT ELEMENTS

- Percentage of 4th and 8th Grade Children with Disabilities Participating in **Regular Statewide Assessment**
- Proficiency Gap for 4th and 8th Grade Children with Disabilities on **Regular Statewide Assessments**



WHAT OUTCOMES ARE USED IN RDA? READING AND MATH COMPONENT ELEMENTS

- Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the **National Assessment of Education Progress**
- Percentage of 4th Grade Children with Disabilities Excluded from Testing on the **National Assessment of Education Progress**
- Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the **National Assessment of Education Progress**
- Percentage of 8th Grade Children with Disabilities Excluded from Testing on the **National Assessment of Education Progress**



WHAT OUTCOMES ARE USED IN RDA?

- Graduation Component Elements
 - (Placeholder for FFY 2013)



WHAT COMPLIANCE COMPONENTS ARE USED IN RDA?

- **Indicator 4B.** Rates of suspension and expulsion:
 - Percent of districts that have: (a) a significant discrepancy, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.



WHAT COMPLIANCE COMPONENTS ARE USED IN RDA?

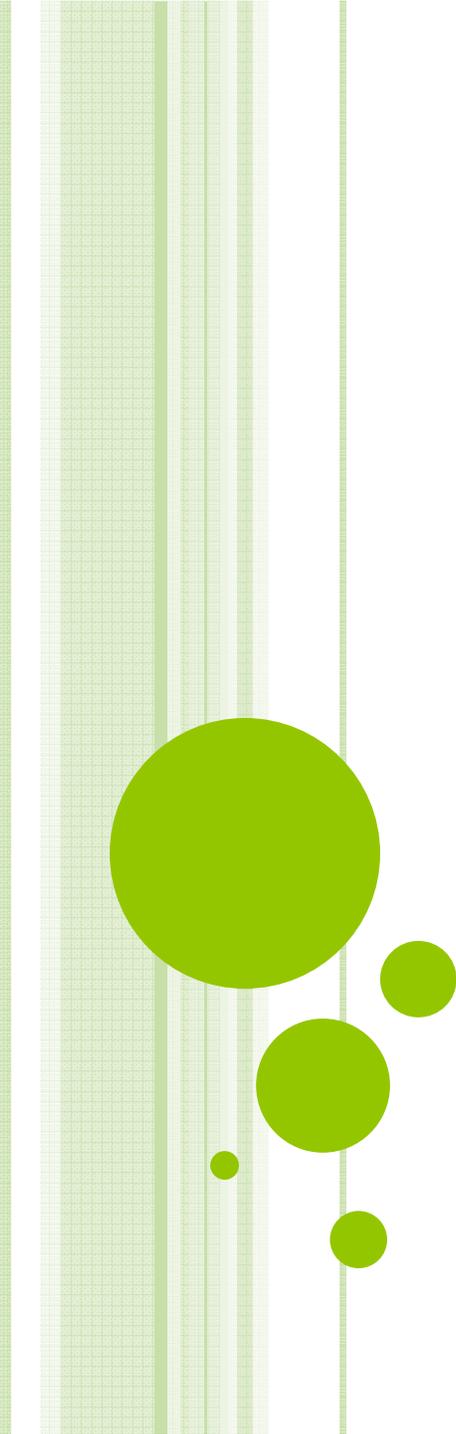
- **Indicator 9.** Percent of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification
 - **Indicator 10.** Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.
 - **Indicator 11.** Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe within which the evaluation must be conducted, within that timeframe.
 - **Indicator 12.** Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.
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- **Indicator 13.** Percent of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority.



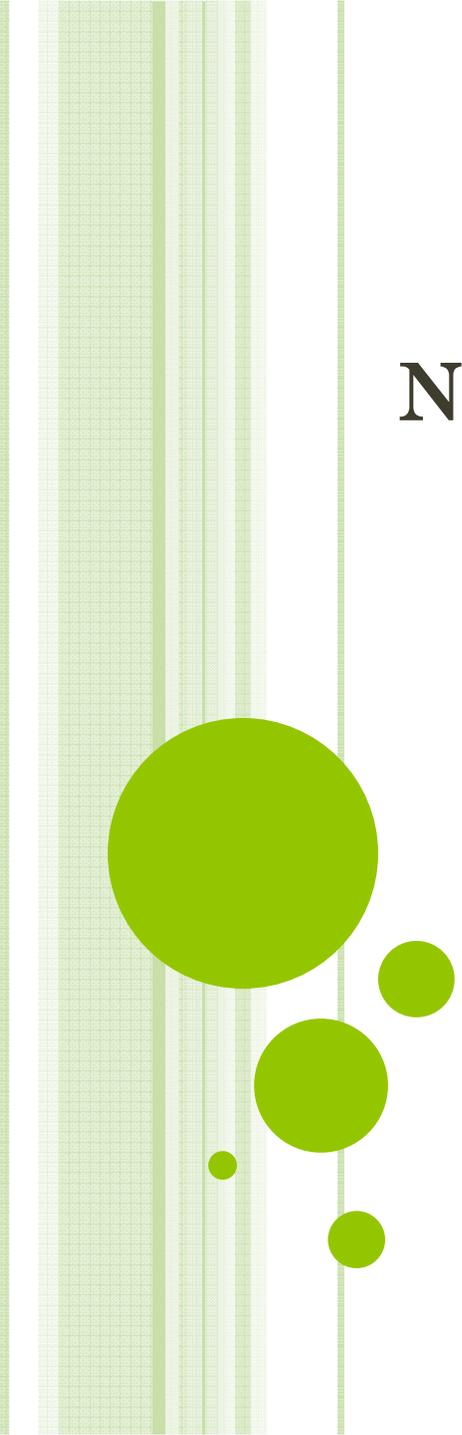
- **Indicator 15.** General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.
- **Indicator 20.** State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.





NEW HAMPSHIRE ACCESSIBLE INSTRUCTIONAL MATERIAL

Presented *by* Stacey Welch

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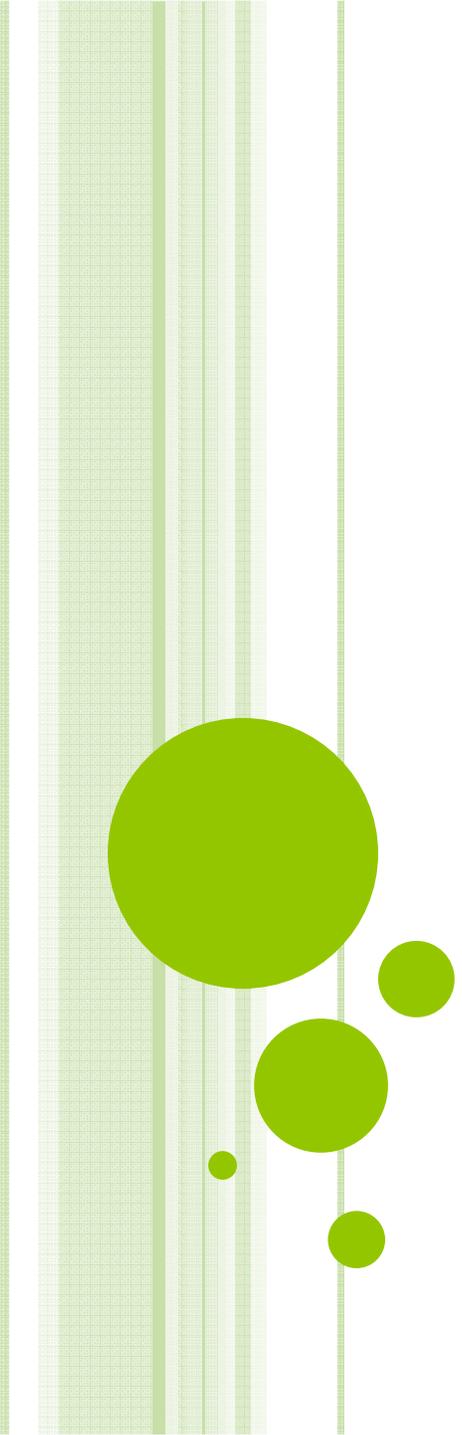
NH AIM

NHAIM serves as a resource to educators, parents, students , accessible media producers, and others to ensure that students with print disabilities access educational materials in a timely manner in compliance with the National Accessible Instructional Standard National Instructional Materials Access Standard (NIMAS) under IDEA 300.172 .

NHAIM

- NHAIM - New Hampshire Accessible Instructional Materials
http://www.education.nh.gov/instruction/special_ed/nhaim.htm
- The New Hampshire Accessible Instructional Materials (NHAIM) Online Inventory System is now available at
<https://my.doe.nh.gov/myNHDOE/Login/Login.aspx>
- The New Hampshire Department of Education, Bureau of Special Education is providing training on the NHAIM Inventory Online System:
 - Thursday, August 21, 2014 ~ NHDOE, Room 15, 1:00pm-3:00pm
 - Tuesday, September 23, 2014 ~ NHDOE, Room 15, 9:00am-11:00am
 - Please register with Stacey Welch: Stacey.Welch@doe.nh.gov / 603-271-0818, one week prior to the requested training session
- NH AIM 2014 -2015 Project
 - NHAIM Quality Indicator Self Assessment Tool conversations using about BOOK Share Christina Cohen National AIM Center Joy Zabala & Chuck Hitchcock National AIM
 - NHAIM Trainings AIM Navigator /AIM Explorer /AIM Implementation Guide /NH PALM Initiative
 - NHAIM Town Hall meeting with Joy Zabala Thursday September 4 , 2014
- National AIM Center <http://aim.cast.org/>





**WRITTEN PRIOR NOTICE
IN THE
SPECIAL EDUCATION PROCESS**

Presented by Lori Noordergraaf

A BRIEF HISTORY

- Special Education Compliance Monitoring
- Inconsistencies with Written Prior Notice content and use
- Guidance



REGULATIONS

IDEA

CFR 34 300.503

(a) *Notice.* Written notice that meets the requirements of paragraph (b) of this section must be given to the parents of a child with a disability a **reasonable time** before the public agency—

NH Rules

Ed 1120.03

(a) Parent(s) of a child with a disability shall be notified in writing within a reasonable time, but not less than **14 days**, before the LEA proposes to initiate or change, or refuses to initiate or change, the referral, evaluation, determination of eligibility, IEP, or educational placement of the child or the provision of FAPE to the child.



REGULATIONS (CONTINUED)

IDEA

CFR 34 300.503 (b) ...

(1) Proposes to initiate or change the identification, evaluation, or educational placement of the child or the provision of FAPE to the child; or

(2) Refuses to initiate or change the identification, evaluation, or educational placement of the child or the provision of FAPE to the child.

NH Rules

Ed 1109.06 (b)(3) The LEA, upon a written request for an IEP team meeting by the parent, guardian, or adult student shall:

(3) Provide the parent, guardian, or adult student with written prior notice detailing why the LEA refuses to convene the IEP team that the parent, guardian, or adult student has requested.



REGULATIONS (CONTINUED)

IDEA

CFR 34 300.503

(b) **Content of notice.** The notice required under paragraph (a) of this section must include—

- (1) A description of the action proposed or refused by the agency;
- (2) An explanation of why the agency proposes or refuses to take the action;
- (3) A description of each evaluation procedure, assessment, record, or report the agency used as a basis for the proposed or refused action;
- (4) A statement that the parents of a child with a disability have protection under the procedural safeguards of this part and, if this notice is not an initial referral for evaluation, the means by which a copy of a description of the procedural safeguards can be obtained;
- (5) Sources for parents to contact to obtain assistance in understanding the provisions of this part;
- (6) A description of other options that the IEP Team considered and the reasons why those options were rejected; and
- (7) A description of other factors that are relevant to the agency's proposal or refusal.

(c) Notice in understandable language

NH Rules

Ed 1120.03

(b) The notice shall comply with 34 CFR 300.503 through **300.504**.

CFR 34 300.504 Procedural Safeguards Notice.

*...(c) Contents. The procedural safeguards notice must include a full explanation of all of the procedural safeguards available under ...300.503, ...relating to—
...(2) Prior written notice;...*



WRITTEN PRIOR NOTICE

Child's Name: _____ SASID #: _____ Date: _____

The purpose of this form is to inform you when the School District proposes to initiate or change, or refuses to initiate or change, the referral, evaluation, determination or change in eligibility, individualized education program (IEP), educational placement, the provision of a Free Appropriate Public Education (FAPE) for your child, or is refusing to hold a meeting of the IEP team in response to a parental request to do so.

1. Description of the action being proposed or refused by the school district:

2. Explanation of why the school district proposes or refuses to take this action:

3. A description of each evaluation procedure, assessment, record, or report used as a basis in making this decision (the proposed or refused action):

4. A description of other options the IEP Team considered and why those options were rejected:

5. A description of other factors which are relevant to the school district's proposal or refusal:

As the parent of a child with a disability, you have protections under the NH Procedural Safeguards of the Federal special education law, the Individuals with Disabilities Education Act (IDEA). You have been given a copy of the Procedural Safeguards Handbook at least annually, and may obtain an additional copy at any time by requesting one from the school district's Special Education Office.

Sources for parents to contact to obtain assistance in understanding the content of this written prior notice are listed below:

Method and date of delivery: _____



WRITTEN PRIOR NOTICE (WPN) Guide

Purpose of a WPN:

A Written Prior Notice (WPN) is written notification that is provided to parents to explain a change that has been proposed or refused by the district, as the result of a team meeting, but which has not yet been implemented. It helps ensure that the parents are included in and aware of the decisions that impact their child. It also helps ensure that there is careful consideration of all factors relevant to the proposed/refused actions before any changes are implemented. This notice must be provided to parents no less than 14 calendar days before the action being proposed or refused may be put into place. Throughout this document “School District” is being used to refer to the public agency which is making the proposal or refusal.

When to use a WPN:

You must have a WPN each time there is a change/action proposed or change/action refused by the district. Some examples of when to use a WPN are:

- For a referral
- An evaluation (initial evaluation and reevaluation)
- Determination of eligibility, initial eligibility, or change in the category of identification
- The provision of FAPE
- An IEP
- Changes to special education programs and/or services
- Educational placement
- Graduation from high school with a regular high school diploma
- Termination of services
- A refusal to hold a meeting of the IEP team in response to a parent request to do so

Basically, you should use a WPN any time there is a proposed change/action or an action/change that is being refused. If you are unsure as to whether a WPN is needed, you should err on the side of caution and complete one; it’s better to have one when it’s not needed, than to not have one and need it.

How to fill out WPN (explanation):

Each section of the WPN asks for either a “description” or an “explanation”. What is written should be a few sentences either describing or explaining. This is a form that should be carefully thought out and filled in with details and explanations. It should be detailed enough to be read by a parent, or another team member who may not have been able to attend a meeting, so that they can completely understand the decisions that were made, know why the team made those decisions, and what the basis for the decisions were. The information contained in the WPN should be completed in a language that is understandable to the parent.

Remember—The WPN should be filled out carefully and thoughtfully. It should be a “stand alone” document that contains enough descriptions and explanations for someone who knows nothing about the situation to be able to have a clear understanding of the decision, reasons for the decision, and how the team arrived at the decision. It needs to be delivered to parents within 14 calendar days, and prior to consent. Parental consent cannot be obtained without the requisite WPN. Parents must have the WPN before districts ask for their consent. If you are not asking for consent at the end of a meeting, you do not have to provide the WPN by the end of the meeting.

TRAINING

- The New Hampshire Department of Education, Bureau of Special Education has also created a training module with input from the Stakeholders group.
- The training module will be available on line for those who are interested in a more in depth training on Written Prior Notice.



THANK YOU



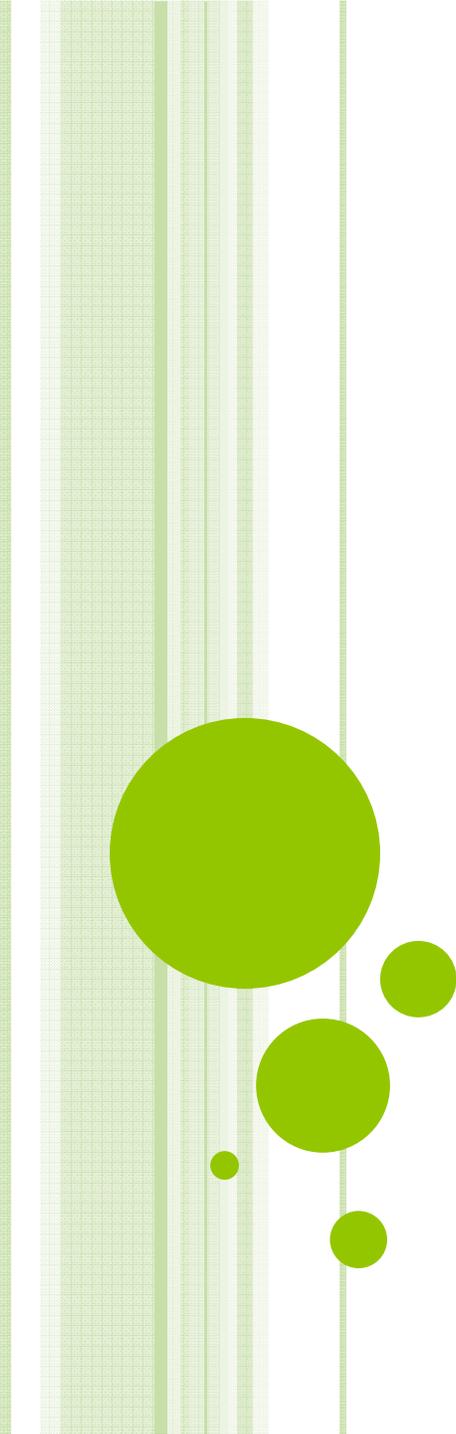
References:

- Virginia Department of Education, Office of Dispute Resolution and Administrative Services (ODARS), Guidance on Prior Written Notice in the Special Education Process, May 2013
- New York Special Education, Examples to Include in Prior Written Notice (Notice of Recommendation), December 2013
- New Hampshire Parent Information Center, Prior Written Notice, Disability Brochure #28
- New Hampshire Rules for the Education of Children with Disabilities June 30, 2008 (Amended December 1, 2010; Amended May 15, 2014)
- Federal Register/ Vol.71, No.156/Monday, August 14, 2006/ Rules and Regulations

Thanks to:

- ✓ Mary Steady for doing the background research and for her work on the model form and training Module
- ✓ The stakeholders group for their input and participation in this process



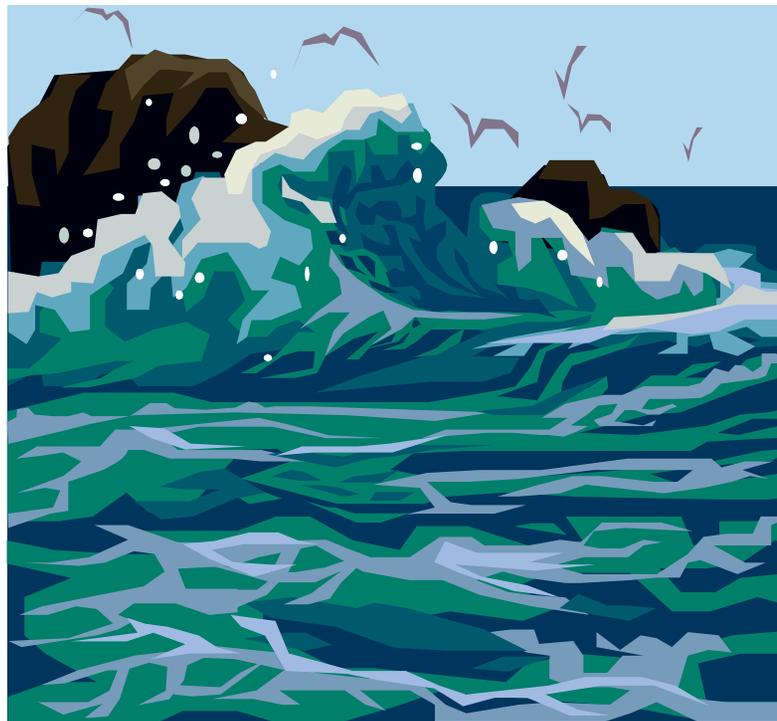


SEE-CHANGE: SUSTAINING EARLY ENGAGEMENT FOR CHANGE

Presented *by* Ruth Littlefield

SEE-CHANGE

Sustainable **E**arly **E**ngagement for **C**hange



SEE-CHANGE

- NH: 1 of 2 States selected to participate
- 2 Years of Intensive TA from the federally-funded Early Childhood TA Center (ECTA Center)
- Implementation, Scale-up and Sustainability of Evidenced-Based Practices to Improve Child Outcomes
- Birth through Age 5; Children at risk for or who have delays or disabilities



SEE-CHANGE

- What are the Evidenced-Based Practices?
 - Division of Early Childhood (DEC) of the Council for Exceptional Children (CEC) Recommended Practices in Early Intervention and Special Education 2014 (spring 2014)
 - Linked to improving child engagement with adults, peers and tasks



DEC RECOMMENDED PRACTICE AREAS

- **Environment**
- **Family**
- **Instruction**
- **Interaction**
- **Other Practice Areas:**
 - Leadership
 - Assessment
 - Teaming and Collaboration
 - Transition



EXAMPLES OF SELECTED PRACTICES

○ Environmental Practices

- Practitioners work with the family and other adults to modify and adapt the physical, social, and temporal environments to promote each child's access to and participation in learning experiences. (E3)¹

○ Instructional Practices

- Practitioners use systematic instructional strategies with fidelity to teach skills and to promote child engagement and learning. (INS6)
- Practitioners use explicit feedback and consequences to increase child engagement, play, and skills. (INS7)



VISION:

New Hampshire children ages birth through five who are at risk for or who have delays or disabilities, will demonstrate increased engagement with adults, peers and tasks in natural environments and regular early childhood settings. Through a cross-sector, professional development approach based on adult learning strategies, practitioners who work with children ages birth through five who are at risk for or who have delays or disabilities, will implement, with fidelity, evidenced based practices that are linked to child engagement. Through a partnership with ECTA, the State will capitalize on the momentum of work already being done towards this goal, and will be able to integrate and scale up the Evidenced-Based Practices (DEC) more efficiently.



SEE-CHANGE

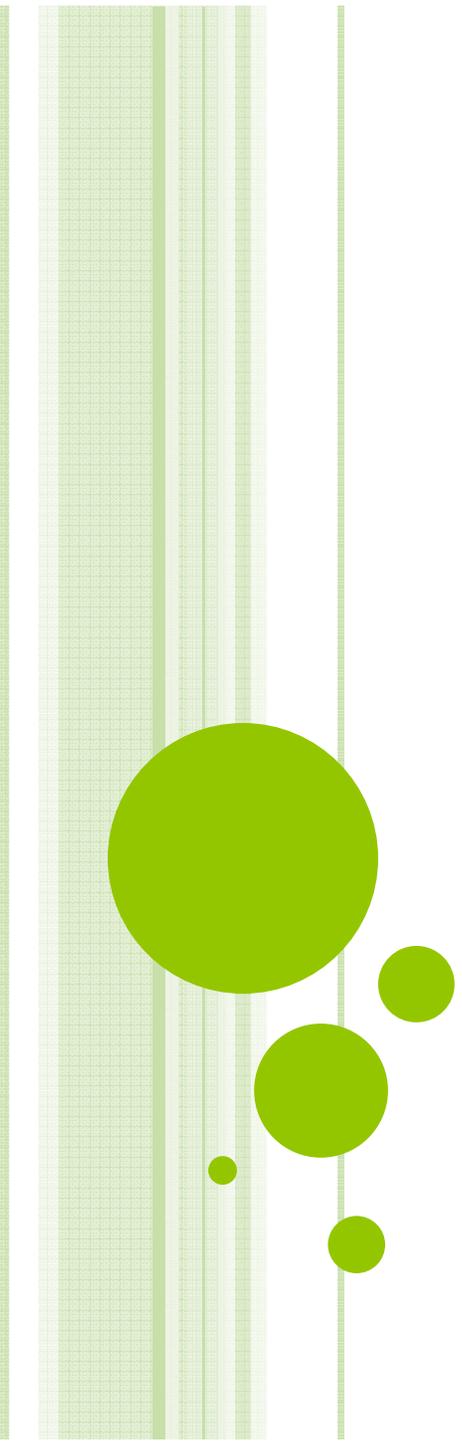
- State Leadership Team
- ECTA Partners
- Master Cadre TA Members
- Implementation Sites
 - Demonstration Sites (implement with fidelity)
- Trainings: 3 days in November; 2 days in December or January



IMPLEMENTATION SITES

- Application released in late August
- Selections in September
- Both birth to 3 (natural settings) and 3-5 (regular early childhood programs)
- Public and Community-Based
- Commitment of Administrative Team
- Representative of the State (rural/urban, program size, geographic location)
- Final Decisions: State Leadership Team



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THE NEW STATE PERFORMANCE PLAN (SPP)

Presented *by* Ruth Littlefield



STATE PERFORMANCE PLAN: ANNUAL PERFORMANCE REPORTS FFY 2013-2018

- Combined SPP/APR
- Due February 2, 2015: based on FFY 2013
 - (July 1, 2013-June 30, 2014)
- Introduction regarding State's systems
 - General Supervision System
 - Technical Assistance System
 - Professional Development System
 - Stakeholder Involvement
 - Reporting to the Public



STATE PERFORMANCE PLAN: ANNUAL PERFORMANCE REPORTS FFY 2013-2018

Indicators	
1. Graduation	2. Drop Out
3. State Assessment	4. Suspension/Expulsion 4(B) 0%
5. School Age LRE	6. Preschool LRE
7. Child Outcomes	8. Parent Involvement
9/10. Disproportionate Representation (0%)	11. Initial Evaluations (100%)
12. Early Transitions (100%)	13. Secondary Transitions (100%)
14. Post School Outcomes	15. Resolution Sessions
16. Mediations	17. State Systemic Improvement Plan (SSIP)

SPP/APR (INDICATORS 1-16)

- Stakeholder Input
- Analyze Data
- Set Baseline Data
- Establish Targets (unless compliance)
 - Draw on targets for all students when available
- Report on progress annually (APR)
- Publically Report on District Performance



STAKEHOLDERS

- Critical participants in improving results for children with disabilities
- **Stakeholder Input:** ongoing; across all components (analysis, target setting, theory of action, etc.)
 - State Advisory Committee on the Education of Students/Children with Disabilities (SAC)
 - Interagency Coordinating Council (ICC)
 - Other opportunities for broad input



INDICATOR 17: STATE SYSTEMIC IMPROVEMENT PLAN (SSIP)

○ MEASUREMENT:

- **comprehensive, ambitious, yet achievable**
- **multi-year plan**
- **for improving results** for children with disabilities.

○ “It is of the utmost importance to improve results for children with disabilities by improving educational services, including special education and related services.”

- Part B SPP/APR Indicator/Measurement Table: OVERVIEW OF THE THREE PHASES OF THE SSIP



Phase III:
 • Evaluate progress annually
 • Adjust plan as needed

Phase I:
 • Initiate Data analysis
 • Conduct Infrastructure analysis (Implementation Framework)
 • Identify focus area



Phase III

Phase I

Phase I and II

Phase I and II:
 • Search/evaluate evidence based solutions (Exploration Phase)
 • Develop Theory of Action
 • Develop and implement plan for improvement (Implementation Framework)

Phase I:
 • Conduct root cause analysis to identify contributing factor(s)
 • Identify systemic barriers for improvement for contributing factors

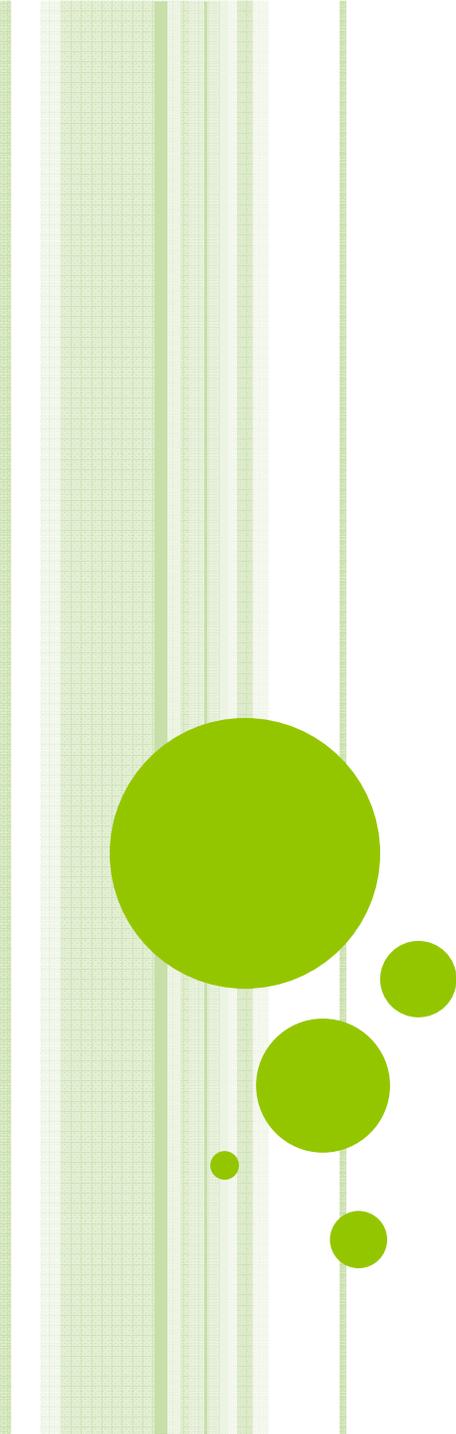
Source: Western Regional Resource Center

INDICATOR 17: SSIP

Phase I: Analysis

- **Data Analysis;**
- Analysis of State **Infrastructure** to Support Improvement and Build Capacity;
- **State-identified Measurable Result(s)** for Children with Disabilities (SiMR);
- Selection of Coherent **Improvement Strategies**; and
- **Theory of Action.**





**WRITTEN NOTIFICATION
REGARDING THE USE OF PUBLIC
BENEFITS OR INSURANCE**

Presented *by* Bridget Brown

CHANGE IN FEDERAL REQUIREMENTS

- On February 14, 2013, the Office of Special Education and Rehabilitative Services (OSERS) published the final regulations under the Individuals with Disabilities Education Act (IDEA) to amend 34 CFR 300.154(d) governing the use of public benefits or insurance.



- 34 CFR 300.154(d)(2)(v) included a new requirement for public agencies to provide written notification to a child's parents before accessing a child's or parent's public benefits or insurance (e.g. Medicaid) for the first time and annually thereafter.



CHANGES TO NH RULES

- New Rules, in response to the federal requirement change, were adopted into law on May 14, 2014.
- The Bureau of Special Education FY'14 Memo #34, dated May 28, 2014, provides guidance for the amended New Hampshire Rules.



ED 1120.08(A)(2)

- Ed 1120.08(a)(2)

(a) When accessing public insurance the LEA:

(2) shall provide annual notification pursuant to 34 CFR 300.154(d)(2)(v). The annual notification includes a withdrawal of consent provision. The withdrawal of consent provision terminates the LEA's authority to access the child's state public benefits or insurance program. This withdrawal of consent provision is effective upon the LEA's receipt of the parent's signed withdrawal.



REQUIREMENTS FOR WRITTEN ANNUAL NOTIFICATION

- Parents/guardians must receive the notification before the school district seeks to use the child's Medicaid for the first time and before it obtains consent to use those benefits for the first time.
- A statement that parents have the right to withdraw their consent to disclosure of their child's personally identifiable information to the public benefits or insurance program (e.g. Medicaid) at any time.
- A statement of the public agency's continuing obligation to ensure that all required services are provided at no cost to the parent even if the parent withdraws his or her consent or refuses to consent.
- A statement that must include the parent's understanding and agreement that the school district may use the parent's or child's public benefits or insurance to pay for special education and related services under IDEA.
- A withdrawal of consent provision which if utilized by the parent, terminates the LEA's authority to access the child's state public benefits or insurance program.



MODEL FORM

WRITTEN NOTIFICATION REGARDING USE OF PUBLIC BENEFITS OR INSURANCE

Dear Parent or Guardian,

You are receiving this written notification to give you information about your rights and protections under the federal special education law, the Individuals with Disabilities Education Act (IDEA), regarding the use of your or your child's public benefit or insurance. In New Hampshire, "public benefit or insurance" is Medicaid, which is provided through the state's Medicaid to Schools program, including Medicaid programs provided through a managed care organization. Through the Medicaid to Schools Program, NH school districts statewide receive millions of dollars each year that would otherwise have to come from state or local funding sources.

IDEA funds pay a portion of your child's special education and related services. Funds from a public benefits or insurance program, which in NH is Medicaid, also may be used by your school district to help pay for special education and related services based on your child's IEP, but only if you choose to provide your consent. Your school district cannot access your child's Medicaid benefits if it would result in a cost to you, such as a decrease in your benefits or an increase in your premiums.

The school district is responsible for ensuring that your child receives all of the services in his/her IEP, regardless of whether you give consent for the school district to use your or your child's public insurance or benefits. If you do not give consent, or withdraw your consent after you have given it, your child's services will not be affected; all of the services in your child's IEP will continue to be provided. You are also not required to apply for or enroll in Medicaid for your child to receive special education services.

WHEN WRITTEN NOTIFICATION MUST BE PROVIDED

Before your school district can ask you to provide your consent to access your child's Medicaid for the first time, it must provide you with this notification of the rights and protections available to you under IDEA.

- IDEA requires that you be provided with this notice before the school district seeks to use your child's Medicaid for the first time.
- Before it obtains your consent to use those benefits for the first time; and
- Annually thereafter.

This written notification must be written, in a language understandable to the general public and in your native language or in another mode of communication you use, unless it is clearly not feasible to do so.

PARENTAL CONSENT

Before your school district can use your or your child's public benefits or insurance for the first time to pay for special education and related services under IDEA, it must obtain your signed and dated written consent. Your school district will provide you with a consent form for you to sign and date. Your school district is only required to obtain your consent one time.

The consent requirement has two parts:

- 1.) Consent for disclosure of your child's personally identifiable information to the state agency responsible for administering Medicaid.
 - To access your child's Medicaid, certain personally identifiable information will be disclosed for billing purposes by the school district to the state Medicaid agency or Medicaid billing agent. Under federal law, your written consent is required before the school district can disclose personally identifiable information (such as your child's name, address, student number, IEP, or evaluation results) from your child's education records to a party other than your school district, with some exceptions. Your initial consent, for the use of your child's Medicaid, allows your school district to disclose the personally

identifiable information, required for Medicaid reimbursement, to the state Medicaid agency or Medicaid billing agent.

2.) A statement to access your child's Medicaid;

- Your consent to allow the school district to use your child's Medicaid will not cost you anything, and it will not have a negative impact on any other medically necessary services your child may receive through the Medicaid system. There are specific protections regarding the use of Medicaid:
 - o The school district must obtain written parental consent before it can use your child's Medicaid for the first time.
 - o Your school district cannot access (use) your child's Medicaid if that use would:
 - o Decrease available lifetime coverage or any other Medicaid benefit;
 - o Result in the family paying for medically necessary services (whether provided in school or other setting) that would otherwise be covered by the child's Medicaid.
 - o Increase premiums (where applicable) or lead to the discontinuation of benefits or insurance; or
 - o Risk loss of eligibility for home and community-based waivers, based on aggregate health-related expenditures.

WITHDRAWAL OF CONSENT

If you provided your consent for your school district to disclose your child's personally identifiable information to the State agency that is responsible for administering your child's Medicaid, you have the right under federal law to withdraw that consent at any time.

If you do not want your school district to continue to bill your or your child's public benefits or insurance program for special education and related services under IDEA, you would need to withdraw your consent that allows the school district to access your child's Medicaid benefits. By withdrawing your consent you are terminating the school district's authority to access the child's state public benefits or insurance program. This withdrawal of consent is effective upon the school district's receipt of your signed withdrawal.

Complete the section below ONLY if parent/guardian is withdrawing consent to access to the child's Medicaid

WITHDRAWAL OF CONSENT

Student Name: _____ Date of Birth _____/_____/_____

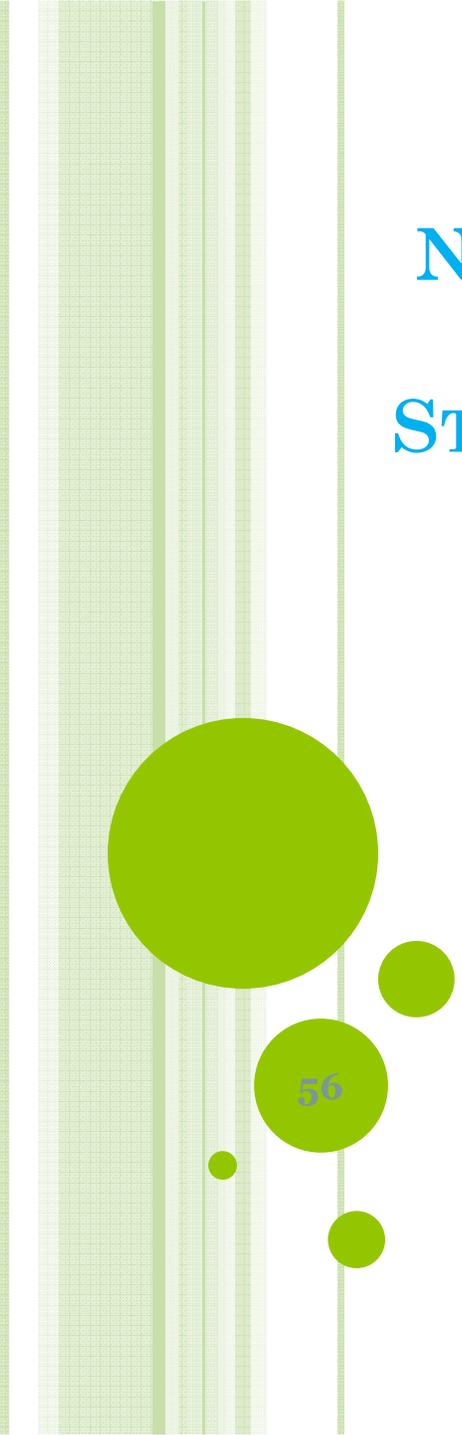
Medicaid ID Number _____

As the parent/guardian of the above student, I withdraw my consent to allow the school district to access the child's Medicaid. I understand that this means that the school district will no longer be able to use my child's Medicaid to help pay for my child's special education and related services. This withdrawal of consent is effective upon the school district's receipt of the parent/guardian's signed *Withdrawal of Consent* form.

Parent's Signature

Today's Date

Original to student's file—copy to parent/guardian



NH COMMUNITIES FOR CHILDREN: SAFE SCHOOLS AND HEALTHY STUDENTS STATE PLANNING GRANT

**NH Department of Education(NHDOE)
Bureau of Special Education
Office of Safe Schools and Healthy Students**

Presentation *by* Mary Steady & Stacey Lazzar

SAFE SCHOOLS & HEALTHY STUDENTS STATE PLANNING GRANT

- During the summer of 2013 the U.S. Department of Health and Human Services' Substance Abuse and Mental Health Services Administration (SAMHSA) released the Safe Schools and Healthy Students State Planning Grant Request for Applications (RFA)
- The NH Department of Education (NHDOE), in conjunction with the NH Department of Health and Human Services' Bureau of Behavioral Health (BBH), the Laconia, Concord, and Rochester School Districts, submitted an application for this RFA titled *NH Communities for Children*.



SAMHSA RFA BACKGROUND

Since 1999, the US Department of Health and Human Services, Education, and Justice have collaborated on the SS/HS Initiative. This grant program provided funding to local education agencies (LEAs) that worked in partnership with local law enforcement and juvenile justice, social service and mental health agencies, and other community organizations to plan and implement comprehensive and coordinated programs, policies, and services delivery systems that promoted the mental health of students, enhanced academic achievement, prevented violence and substance use, and created safe and respectful school climates.

This is the first funding opportunity for SS/HS in four years and was prompted by the shootings that occurred in Sandyhook, CT.



SAMHSA'S EXPLANATION OF RFA

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SAMHSA's Intent

The purpose of the SS/HS State Program is to create safe and supportive schools and communities by bringing the SS/HS model to scale at the state/tribe level by building partnerships among educational, behavioral health, and criminal/justice systems.

○ SAMHA's Expectation

By implementing this program, SAMHSA expects to achieve an increase in the number of children and youth who have access to behavioral health services; a decrease in the number of students who abuse substances; an increase in supports for early childhood development; improvements in school climate; and a reduction in the number of students who are exposed to violence.

SAFE SCHOOLS/HEALTHY STUDENTS GRANT RFA REQUIREMENTS

- SAMHSA required two state agencies to partner together for the submission of this grant, with a lead agency and a co-lead agency overseeing the work.
- SAMSHA required that each state select three (3), and no more or no less than 3, Local Education Agencies (LEAs) to partner with for the life of the grant.
- The 3 LEAs had to be selected prior to grant submission and the selection had to be based on student and community populations and district-wide data linked to the SS/HS elements.



CRITERIA USED TO SELECT THREE (3) LOCAL EDUCATION AGENCIES

- Population Demographics (Concord & Laconia have the 2nd and 3rd largest refugee populations in NH)
- Free and Reduced School Lunch Eligibility Data
- Median Household Income Data
- Persons below the poverty line Data
- Gaps in Early Childhood Programs
- Gaps in Promoting Mental, Emotional & Behavioral Health
- Gaps in Connecting Family, Schools & Communities
- PBIS readiness in LEA schools
- Youth Risk Behavior Survey Results
- School Suspension Data
- Bullying and Harassment Data

APPLICATION PROCESS DETAILS

SAMHSA awarded \$56.9 million to seven (7) states over four years in FY 13 to support Safe Schools/Healthy Students

SS/HS Grant Awardees

1. New Hampshire
2. Connecticut
3. Nevada
4. Ohio
5. Pennsylvania
6. Michigan
7. Wisconsin

- All US States and Tribal Nations were eligible to apply
- SAMHSA received thirty-three (33) applications across the country, including NH's grant proposal
- SAMHSA awarded seven (7) states a Safe Schools & Healthy Students State Planning Grant

NH'S SAFE SCHOOLS/HEALTHY STUDENTS GRANT AWARD

New Hampshire's Department of Education (NHDOE) was awarded a four-year grant, beginning on October 1, 2013 for a total amount of \$8.6 million over the life of the grant.

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Annually:

- 25% of the funding will be distributed to each of the three (3) LEAs = 75% total
- 10% will fund the required outside evaluator for the project
- 15% of the funding will go to the NHDOE and NH DHHS' Bureau of Behavioral Health



SAFE SCHOOLS/HEALTHY STUDENTS FIVE ELEMENTS

Addressing each of the following elements in the grant was a requirement:

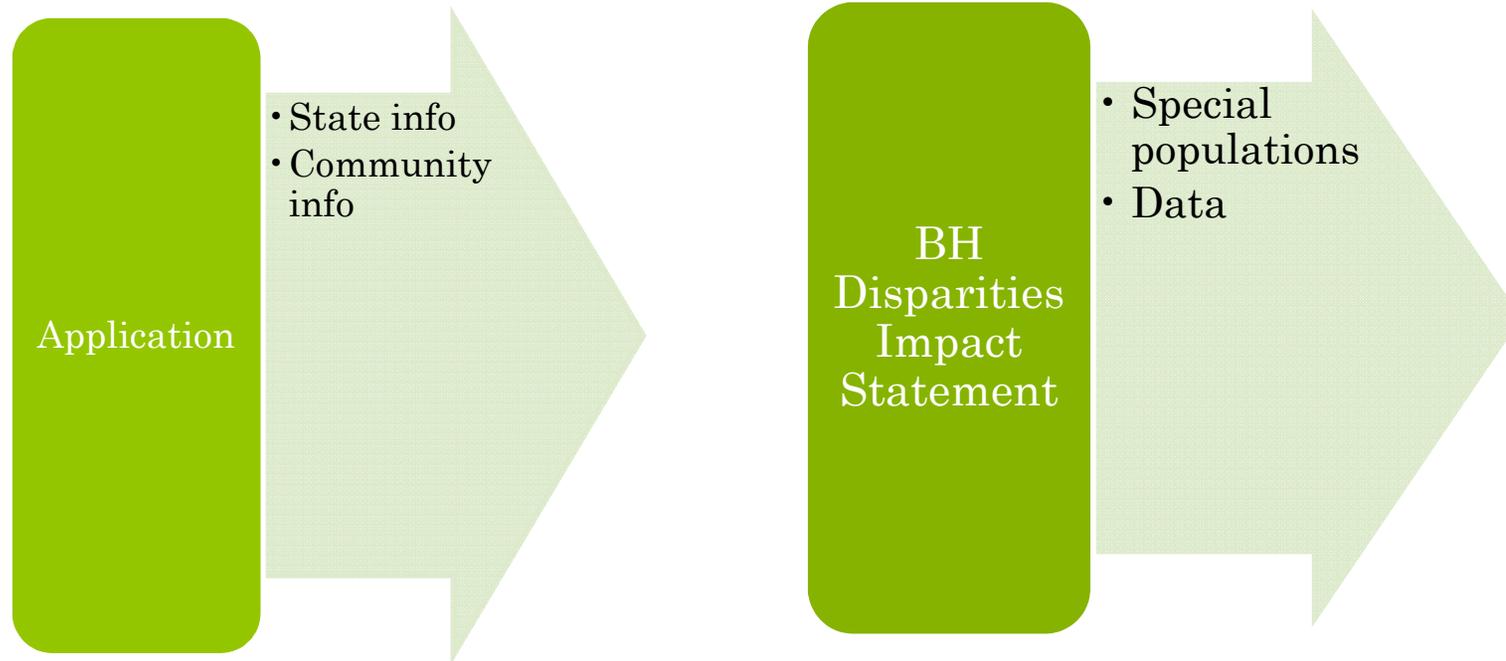
1. Promoting Early Social and Emotional Learning and Development
2. Promoting Mental, Emotional, and Behavioral Health
3. Connecting Families, Schools, and Communities
4. Preventing Behavioral Health Problems (including Substance Use)
5. Creating Safe and Violence Free Schools



5 PHASES



PHASE 1- ASSESSMENT-COMPLETED



COMPLETED



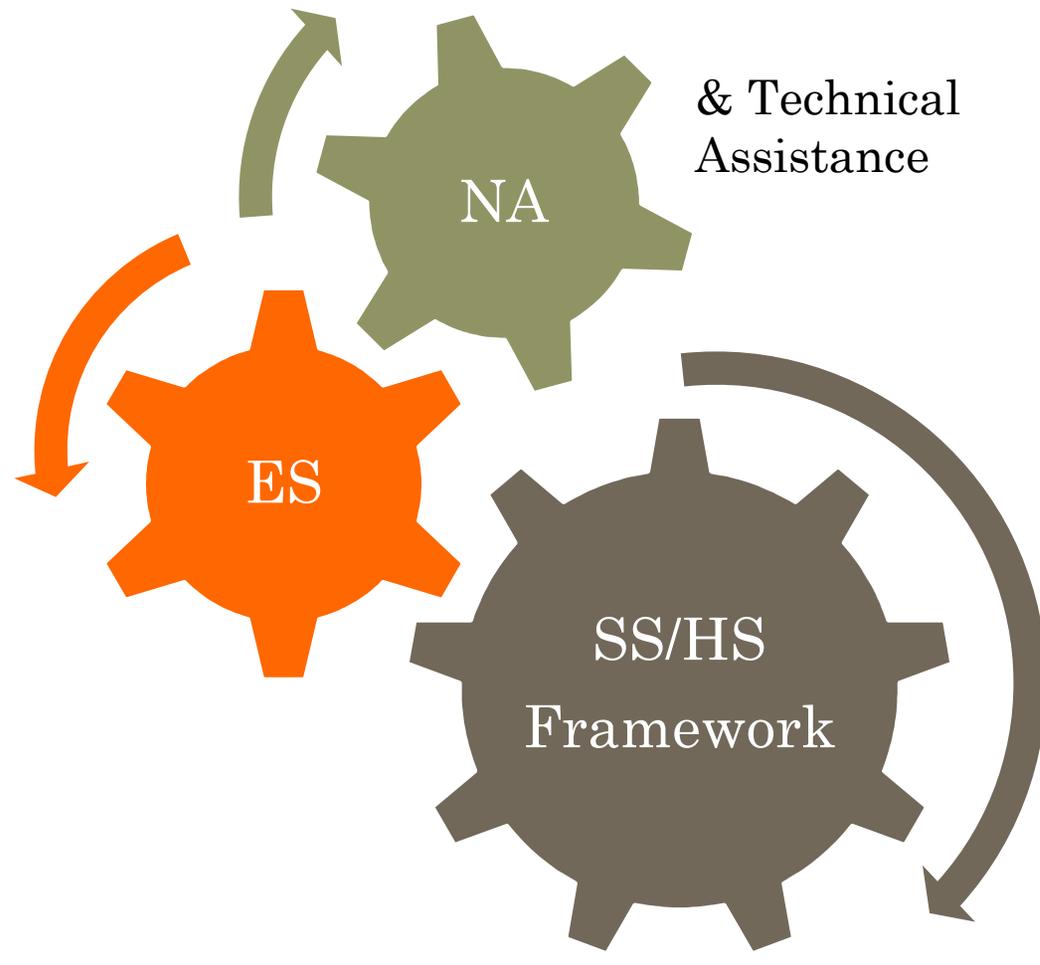
- Risk & protective factors
- Baseline Data
- Gap Analysis



- Existing Resources, funding & Services
- Contextual Factors



PHASE 2- USING THE SS/HS FRAMEWORK



WHAT IS THE SS/HS FRAMEWORK?

- The framework is a planning process that is used to accomplish systemic change and integration through SS/HS initiative.
 - It is a grid that helps identify strategies and services in all 5 Elements that are related to 5 strategic approaches and 7 guiding principles



PHASE 3- DEVELOPMENT OF
COMPREHENSIVE PLAN

SS/HS Framework

Comprehensive Plan

Evaluation

Narrative

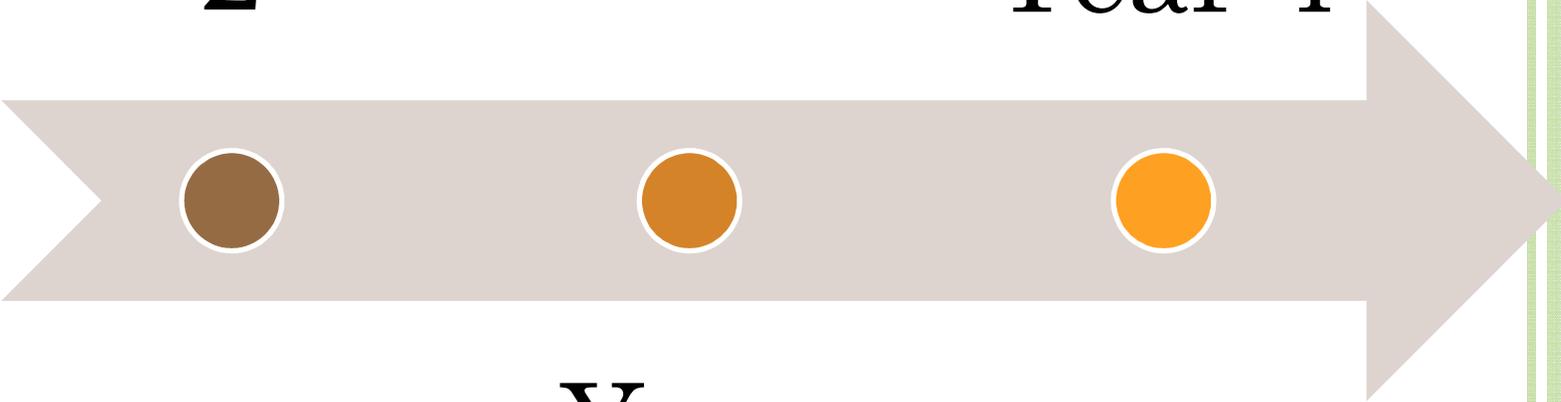
Logic
Model

Evaluation
Plan

PHASE 4- IMPLEMENTATION

Year
2

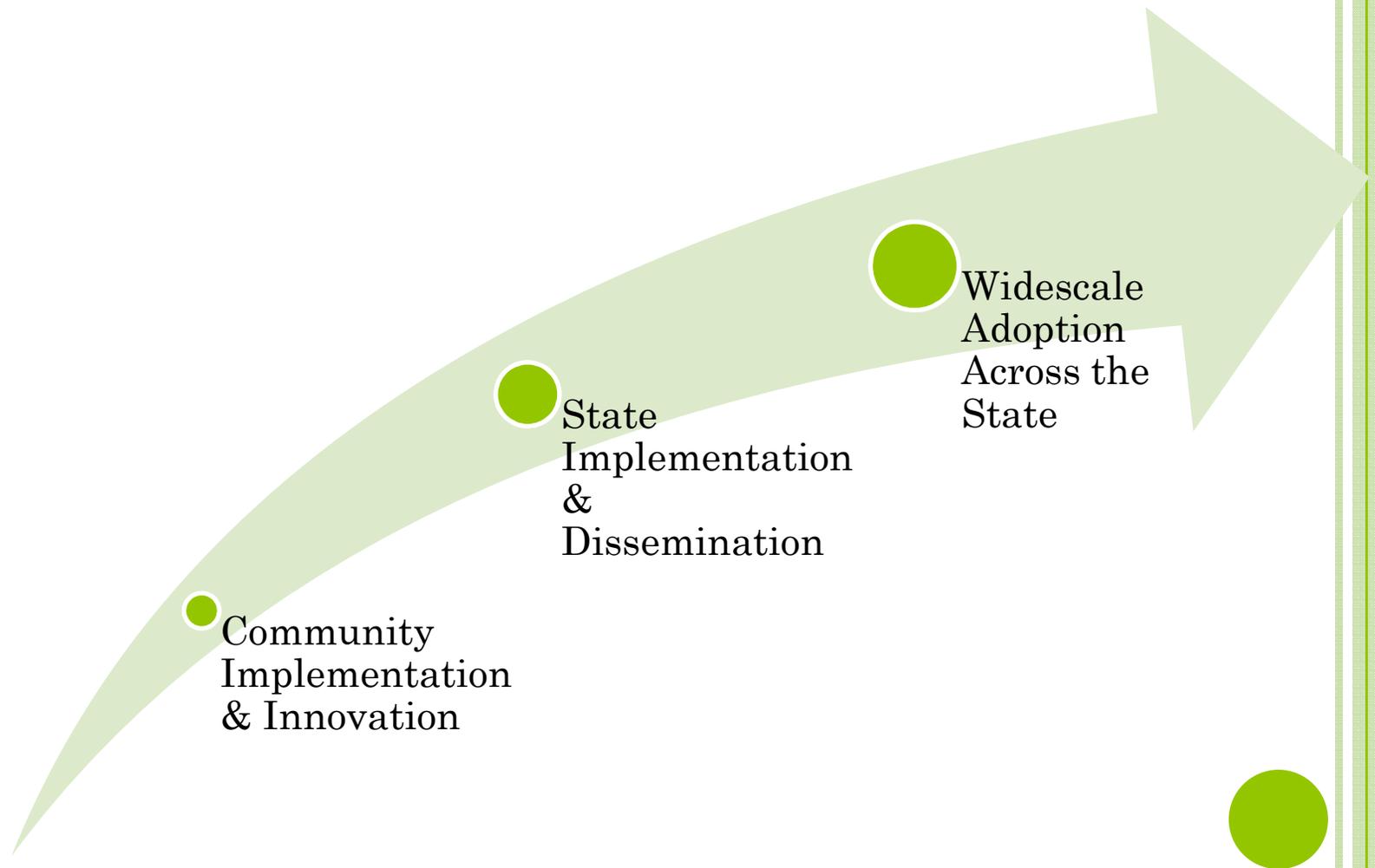
Year 4

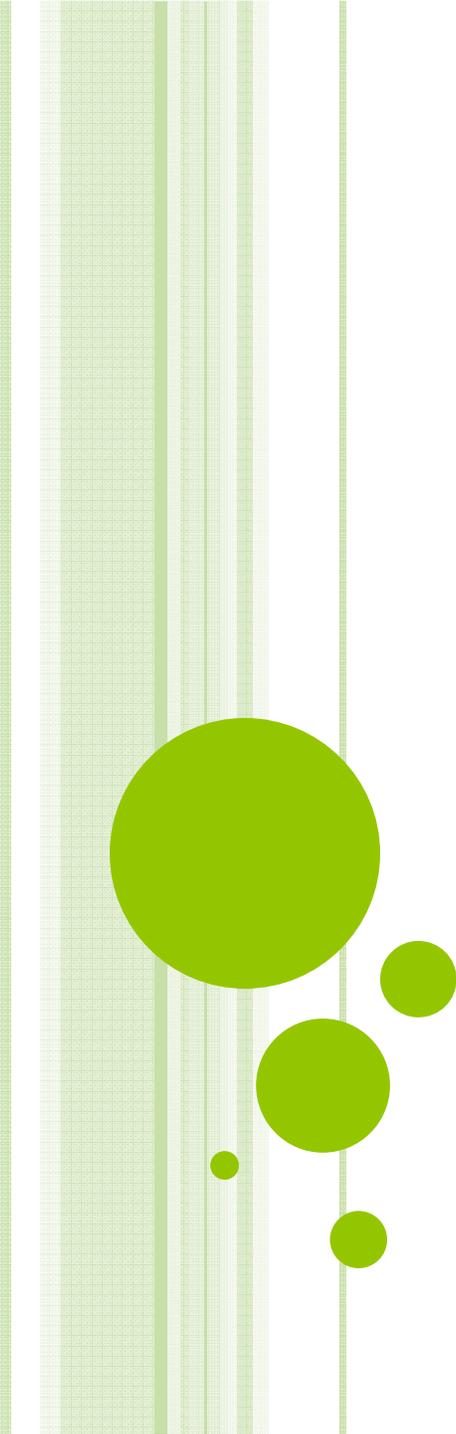


Year
3



PHASE 5- STATE EXPANSION AND SUSTAINABILITY





**CONCORD SCHOOL DISTRICT
SS/HS INITIATIVE**

PROCESS AND COMMUNITY

“We are caught in an inescapable network of mutuality, tied in a single garment of destiny. Whatever affects one directly, affects all directly.”

~Martin Luther King Jr.



PROCESS AND COMMUNITY

Concord's Community Management Team (CMT) is comprised of 35 stakeholders committed to being partners in change



COMMUNITY MANAGEMENT TEAM

Concord School District

Riverbend Community Mental Health Center

Lutheran Social Services

NAMI NH

DJJS

DCYF

Boys and Girls Club of Greater Concord

Capital Region Community Prevention Coalition

Child and Family Services

Community Bridges

Second Start

Concord Police Department

Bill White and Associates

Mill Brook/Broken Ground PTA

UNH's Institute on Disability



THE NEEDS AND GAPS

What have we learned about the Concord Community?

Community partners are energized to work together to achieve safer schools and community and to promote the well-being of all children, youth, and families in Concord.



ELEMENT 1: PROMOTING EARLY CHILDHOOD SOCIAL AND EMOTIONAL LEARNING DEVELOPMENT

NEEDS: A universal screening tool and method for information sharing between school and community partners

Activities: Hire Early Childhood Coordinator;
Implement a universal screening tool



ELEMENT 2: PROMOTING MENTAL, EMOTIONAL AND BEHAVIORAL HEALTH

NEED: More school based mental health services

Activity: build capacity through a partnership with
Riverbend Community Mental Health Center



ELEMENT 3: CONNECTING FAMILIES, SCHOOLS AND COMMUNITIES

NEED: A linkage between school, home and community resources

Activities: Develop a Family and Community Liaison position; create a sustainable resource repository for families



ELEMENT 4: PREVENTING BEHAVIORAL HEALTH PROBLEMS, INCLUDING SUBSTANCE ABUSE

NEED: Substance abuse prevention and early intervention services in schools

Activities: Implement Project SUCCESS at middle and high schools; hire a Substance Abuse Prevention (SAP) Coordinator



ELEMENT 5: CREATING SAFE AND VIOLENCE-FREE SCHOOLS

GAP: PBIS frameworks are not implemented in all schools in Concord.

Activity: Enhance Tier 2 and Tier 3 interventions at middle and high schools by collaborating with UNH's Institute on Disability and Bill White and Associates



THANK YOU

