INTRODUCTION

Schools must have policies and procedures in effect to ensure that all children with exceptionalities (those who have disabilities and those who are gifted) and who are in need of special education and related services are identified, located, and evaluated. This includes children who attend public or private schools, who are home schooled; are highly mobile including migrant and homeless, or are wards of the State. The child find requirement for schools applies to children ages birth through 21. Child find in Kansas involves a screening process for children from birth to age 5, and a general education intervention process for children from kindergarten through age 21. Schools in conjunction with parents use these processes to locate, evaluate, and identify children who may need special education and related services. Children in need of special education services should be identified as young as possible, and also as soon as possible after the concern is noted. This includes children who are suspected of having a disability even though they are advancing from grade to grade (K.A.R. 91-40-7(a); 34 C.F.R. 300.111(a), (c)). The earliest possible identification of educational or behavioral concerns will diminish the impact of the concerns on the child’s education.

As an agency, the Kansas State Department of Education (KSDE) encourages the use of a multi-tiered system of supports for all children, encompassing school-wide support for both academic and behavioral competency. This is further emphasized in Kansas special education regulations which, in most cases, require the use of general education interventions (GEI), prior to referring any child in kindergarten through grade 12 for an initial evaluation. GEI requires schools to have data-based documentation of the interventions and strategies implemented for each child.

Some schools conduct GEI through a school-wide approach of providing multi-tiered levels of intervention to support children to achieve more successfully. In recent years, this kind of a systemic approach has been referred to as a multi-tiered system of supports (MTSS). The practices utilized in MTSS are based on providing high-quality instruction and intervention matched to child need; monitoring progress frequently to make decisions about change in instruction or goals; and applying child response data to important educational decisions (Response to Intervention: Policy Considerations and implementation. National Association of State Directors of Special Education, 2005). In Kansas, this set of principles and practices are encompassed within Kansas Multi-tiered System of Support (Kansas MTSS).

Other schools accomplish conducting GEI through an individual child problem solving approach, often referred to as student improvement teams (SIT, SAT, TAT, Care Team, etc.) or problem solving teams. The individual problem solving approach to GEI is consistent with past guidance provided by the State.

Either approach (school-wide or individual problem-solving) may be used as schools seek to provide early intervention for children in need of additional supports to be successful.

This chapter includes information on the following topics:

A. Public Notice for Child Find
B. Screening for Children from Birth to Age 5
C. General Education Intervention for Children from Kindergarten through Age 21
D. Data Collection and Documentation for General Education Intervention
E. Referral for Initial Evaluation
F. Early Intervening Services
A. PUBLIC NOTICE FOR CHILD FIND

The first step in the child find process is to provide information to the public concerning the availability of special education services for exceptional children, including procedures for accessing these services. This public notice is usually provided at the beginning of the school year and must be repeated annually. Copies of the information from child find activities must be kept on file as documentation for implementing policies and procedures. (K.A.R. 91-40-7(d)).

The public notice may be provided through a variety of methods. Informational materials could be distributed to all schools in the area, including private schools, other agencies and to professionals who would likely encounter children with a possible need for special education. Schools may publish yearly notices in local newspapers, provide pamphlets, furnish information on the Internet, broadcast announcements on radio or television and provide information at parent-teacher conferences. Suggested methods to accomplish public notice include:

- Newspaper articles or ads,
- Radio, TV, or cable announcements,
- Community newspaper notices
- School handbook and calendar
- Letters to all patrons in the district
- Post in child care programs
- Post in health departments or doctors’ offices
- Post in grocery stores, department stores, and other public places

Additional information about public notice as it relates to confidentiality requirements is included in Chapter 9. A sample public notice about child find may be found at http://www.ksde.org/Default.aspx?tabid=544.

B. SCREENING FOR CHILDREN FROM BIRTH TO AGE 5

Kansas regulations (K.A.R. 91-40-7(b)) require each school district to implement screening procedures that meet the following requirements:

- For children younger than five years of age, observations, instruments, measures, and techniques that disclose any potential disabilities or developmental delays that indicate a need for evaluation, including hearing and vision screening
- Implement procedures ensuring the early identification and assessment of disabilities in children.

Screening for children from birth to age 5 are developmental screenings and must include observations, instruments, measures, and techniques that address potential developmental delays or disabilities in the areas of communication, cognitive development, social-emotional development, self-help/adaptive behavior, and/or physical development. This requirement also extends to hearing and vision screenings, which must be available on an equal basis to all children in public and all private schools within the district’s boundaries (K.S.A. 72-6228 and 72-6251 through -6268). If the results of the screening indicate a potential developmental delay or disability, the screening team makes the referral for initial evaluation.

Mass screening of all children is not required, but screening is to be available for any child for whom there is a concern about an area of development including communication, cognitive development, social-emotional development, self-help/adaptive behavior, and/or physical development; and hearing and vision. It is recommended that a child should not have to wait more than 30 calendar days for a screening. Young children's needs must be identified as soon as possible, so that early intervention may be provided. Screening is considered to be a short test of the developmental areas to assist in determining if a child is learning basic skills when they should and whether the child should be referred for an initial evaluation. There are screening procedures that require minimal staff and time to complete. Screening should be equally available to all children in public and private schools within the school district's boundaries. For preschool age children, the district of residence of each preschool child is responsible for child find (locate, evaluate and identify) even though the child may be attending a preschool or other childcare program outside the district of residence.

Part B’s child find requirements begin at birth, therefore they overlap with Part C’s child find requirements. Schools should work with their local Part C Infant-Toddler Network for child find activities for children from birth through 2 years to ensure that all children have access to screening in a timely manner. Each local Infant-Toddler Network is to have a local interagency coordinating council and this is a way for the local school district and the local Infant-Toddler Network to develop collaborative efforts for child find in their community.
Children who are transitioning from the Part C Infant and Toddler program are not required to participate in a Part B screening process at age 3. For children receiving Part C services who may need an initial evaluation to determine eligibility for Part B special education services, the Part C Infant-Toddler Program may make a referral to the school district. The referral is to be made at least 90 calendar days prior to the child’s third birthday and according to the school’s policy for making a referral for an initial evaluation. For additional information about the Part C to Part B referral timeline see, http://ectacenter.org/~pdfs/topics/transition/timeline_flowchart APR indicators 09-12 OSEP approved.pdf, and the Kansas Early Childhood Transition (SPP Indicators C8/B12), Part C to B Frequently Asked Questions at https://www ksde org/Portals/0/SES/KIAS/indicators/Ind12-FAQ KS.pdf.

Schools must maintain documentation on results of screening and must ensure that the collection and use of data under the child find requirements are subject to confidentiality requirements under the Family Educational Rights and Privacy Act (FERPA) (K.A.R. 91-40-7(e); K.A.R. 91-40-50).

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<td>(a) Each board shall adopt and implement policies and procedures to identify, locate, and evaluate all children with exceptionalities residing in its jurisdiction, including children with exceptionalities who meet any of the following criteria:</td>
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<td>(1) Attend private schools;</td>
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<td>(2) Are highly mobile, including migrant and homeless children; or</td>
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<td>(3) Are suspected of being children with disabilities even though they are advancing from grade to grade.</td>
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<td>(b) Each board’s policies and procedures under this regulation shall include age-appropriate screening procedures that meet the following requirements:</td>
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<td>(1) For children younger than five years of age, observations, instruments, measures, and techniques that disclose any potential disabilities or developmental delays that indicate a need for evaluation, including hearing and vision screening;</td>
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<td>(2) For children from ages five through 21, observations, instruments, measures, and techniques that disclose any potential exceptionality and indicate a need for evaluation, including hearing and vision screening as required by state law; and</td>
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<td>(3) Implementation of procedures ensuring the early identification and assessment of disabilities in children.</td>
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<td>(c) Each board, at least annually, shall provide information to the public concerning the availability of special education services for exceptional children, including child find activities conducted by the board.</td>
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<td>(d) Each agency shall ensure that the collection and use of data under this regulation are subject to the confidentiality requirements of K.A.R. 91-40-50 and amendments thereto.</td>
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C. GENERAL EDUCATION INTERVENTION (GEI) FOR CHILDREN FROM KINDERGARTEN THROUGH AGE 21

For children in kindergarten through age 21, Kansas screening laws require that schools utilize observations, instruments, measures, and techniques that disclose any potential exceptionality and indicate a need for evaluation, including hearing and vision screening, and age-appropriate assessments for school-aged children designed to identify possible physical, intellectual, social or emotional, language, or perceptual differences. Screening must be available for children in public schools, private schools, or for children who are homeschooled. For children of school age attending a private elementary or secondary school, the district in which the private school is located is responsible for child find for children who are residents and non-residents of the district who may be attending the private school (K.S.A. 72-3410(a)(1); 34 C.F.R. 300.313(a)).

In Kansas, this screening is conducted, in part, through the required implementation of general education intervention (GEI). The purpose of GEI is to intervene early for any child who is presenting academic or behavioral concerns. This early intervention leads to a better understanding of the supports children need in order to be successful in the general education curriculum and school setting. Additionally, the data collected during GEI assists school personnel in determining which children may be children with potential exceptionalities who need to move into initial evaluation for special education. Collaboration between special education and general education staff is an important part of the general education intervention process. Both special education and general education personnel must be involved in this building-level, school-wide activity (K.A.R. 91-40-7(c)), however, some services provided by special education staff may not be fully reimbursable. For complete information about reimbursable activities, review the current Special Education Reimbursement Guide at http://www ksde org/Default aspx?tabid=538.

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<th>K.A.R. 91-40-7(c)</th>
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<td>(c) Any board may refer a child who is enrolled in public school for an evaluation if one of the following conditions is met:</td>
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<td>(1) School personnel have data-based documentation which indicates that general education interventions and strategies would be inadequate to address the areas of concern for the child.</td>
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<tr>
<td>(2) School personnel have data-based documentation that indicates that prior to, or as a part of the referral, the following were met;</td>
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<td>A. The child was provided appropriate instruction in regular education settings that was delivered by qualified personnel;</td>
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B. The child’s academic achievement was repeatedly assessed at reasonable intervals which reflected formal assessment of the child’s progress during instruction;  
C. The assessment results were provided to the child’s parents; and  
D. The assessment results indicate an evaluation is appropriate.

(3) The parent of the child requests and gives written consent for, an evaluation of the child, and the board agrees that an evaluation of the child is appropriate

1. Conducting GEI

The Every Student Succeeds Act (ESSA) and the Individuals with Disabilities Education Act (IDEA) place a strong emphasis on using evidence-based instruction and interventions, as appropriate, for children in general education. ESSA defines evidence-based as "an activity, strategy, or intervention that—

(i) demonstrates a statistically significant effect on improving student outcomes or other relevant outcomes based on—

(I) strong evidence from at least 1 well-designed and well-implemented experimental study;  
(II) moderate evidence from at least 1 well-designed and well-implemented quasi-experimental study; or  
(III) promising evidence from at least 1 well-designed and well-implemented correlational study with statistical controls for selection bias; or

(ii)(I) demonstrates a rationale based on high-quality research findings or positive evaluation that such activity, strategy, or intervention is likely to improve student outcomes or other relevant outcomes; and

(II) includes ongoing efforts to examine the effects of such activity, strategy, or intervention. “ (20 U.S.C. 7801(21)).

These practices and programs apply to all schools and all children in general education. Kansas’ requirement to implement GEI supports this emphasis on providing the intensity of instructional support in proportion to the presenting needs of children through methods of analyzing child data, implementing scientifically research-based interventions, and monitoring child progress.

The GEI process should continue until a successful intervention is determined. However, when it is evident that the child's needs require resources beyond those available in general education, and the team suspects the child is a child with an exceptionality (disability or giftedness) the child must be referred for an initial special education evaluation. At any time during GEI, the team responsible for planning and implementing the interventions may make three decisions:

a) Continue the intervention and monitor child progress  
b) Change or modify the intervention and monitor child progress  
c) Refer the child for an initial special education evaluation.

It should be made clear here that the process of continually designing and re-designing supports for children is one that does not end until the child is successful. Even when the decision has been made to move from GEI into an initial evaluation, the intervention process should not stop. Rather, it becomes part of the evaluation process.

Kansas regulations provide additional information, which describes when a school may refer a child for an initial evaluation:

a) School personnel have data-based documentation which indicates that general education interventions and strategies would be inadequate to address the areas of concern for the child.  
b) School personnel have data-based documentation that indicates that prior to, or as a part of the referral, the following were met:  
   i. the child was provided appropriate instruction in regular education settings that was delivered by qualified personnel;  
   ii. the child’s academic achievement was repeatedly assessed at reasonable intervals which reflected formal assessment of the child’s progress during instruction;  
   iii. the assessment results were provided to the child’s parents; and  
   iv. the assessment results indicate an evaluation is appropriate. (K.A.R. 91-40-7(c))

c) The parent of the child requests and gives consent for an evaluation and the school agrees that an evaluation would be appropriate.

As indicated previously, GEI may be carried out through a school-wide approach of providing a multi-tiered system of scientifically, evidence-based interventions for all children (e.g. MTSS) or through an individual child problem solving
approach. Regardless of the approach used, the focus should be on designing supports for children who need additional assistance in order to be successful in the general education curriculum and environment.

The following provides a brief comparison of the two approaches (i.e. school-wide multi-tiered system of supports or individual child problem-solving) that may be used to conduct GEI, and ultimately, yield the data that may be used to make the decisions as to whether or not a child should be moved on to an initial evaluation.

## General Education Interventions (GEI)

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<td><strong>Child Find:</strong> Procedures ensuring the early identification of students enrolled in public school including screening and intervention for students ages five through 21.</td>
<td>• Intervene early for each student who is presenting academic or behavioral concerns. • Utilizes observations, instruments, measures and techniques that may disclose any potential exceptionality.</td>
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<td><strong>General Education Interventions:</strong> Except in rare cases, interventions and strategies are implemented to support each student’s presenting academic or behavioral concerns, and only when the student’s progress indicates a potential exceptionality should the student be moved into initial evaluation for special education.</td>
<td>• School personnel have data-based documentation which indicate an evaluation is appropriate, or • School personnel have data-based documentation that general education interventions and strategies would be inadequate to address the areas of concern for the child.</td>
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<td><strong>Data-based Documentation of General Education Interventions:</strong> Includes specific data as evidence the student’s needs are beyond what general education can provide and an evaluation is appropriate.</td>
<td><strong>Specific Documentation:</strong> • that appropriate instruction was provided to the student, • what educational interventions and strategies have been implemented, • the results of repeated assessments of achievement which reflect the formal assessment of the student’s progress during instruction, • that parents have been provided the results • the results indicate an evaluation is appropriate</td>
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<td><strong>Documentation when using School-Wide (MTSS) approach to General Education Interventions:</strong> In Kansas, schools may use either a school-wide multi-tiered model of support or an individual student problem-solving approach to carry out GEI. Schools utilizing the school-wide approach need to ensure that additional parent notification occurred.</td>
<td>Documents that parents were notified about: • the State’s policies regarding the amount and nature of student performance data that would be collected and the general education services that would be provided, • the strategies for increasing the student’s rate of learning, and • the parents’ right to request an evaluation. It is recommended that schools utilizing a schoolwide approach publish information about their system. Some ways to accomplish this additional requirement might include providing information to parents through methods such as: • Brochures that describe the school’s system of supports • School or student handbooks • Annual child find notifications</td>
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### 2. School-Wide Multi-Tier System of Supports Approach to GEI

The law allows schools to use a process that assesses a child’s response to scientific, evidence-based intervention to determine whether the child is making sufficient progress to meet age or State-approved grade-level standards. Kansas
encourages schools to use a school-wide, multi-tiered model of support for all children including both academic and behavioral concerns. In Kansas, this is supported through Kansas Multi-Tier System of Supports (Kansas MTSS) which includes both academic and behavior supports. The following briefly explains the multi-tiered aspect of the school-wide approach.

**Tier 1**: All children receive a core instructional program that uses a scientifically validated curriculum that is provided for all students. Schools choose curricula that have evidence of producing adequate levels of achievement (i.e., evidence-based) and instruction is differentiated within the core to meet a broad range of student needs. Therefore, interventions are provided via the general curriculum. Universal screening of all children to monitor progress and to identify children who may need additional support is conducted. Approximately eighty percent of children in the school will be successful in the general curriculum.

**Tier 2**: Those children who do not respond to the core instructional procedures will receive targeted group interventions in addition to core instruction. More frequent measures of progress monitoring are used to collect child progress data. Approximately fifteen percent of children in the school will need targeted (supplemental) support.

**Tier 3**: A few children receive intensive, individualized interventions. These are in addition to the supports provided in Tier 1. Interventions will be more intensive and delivered in more substantial blocks of time. Approximately five percent of children in the school will need this kind of intensive support.

The graphic below depicts MTSS.

![MTSS Graphic]

Within a MTSS depicted above, children will receive GEI as a part of the system in place for all students. Data collected at each tier should guide school personnel as to the next steps to take based on the child’s response to interventions tried. At least by the time a child is ready to access the more intensive supports of Tier 3, the school should employ the use of individualized problem solving to design the intensive individualized support the child will receive as well as a plan to monitor the child’s progress and document the child’s response to the scientifically research-based interventions. The approach of individual child problem solving is therefore a component of the larger school-wide system, or it may stand alone as a method to conduct GEI as outlined below.

### 3. Individual Problem Solving Approach to GEI

This process is typically carried out through building level problem-solving teams. These teams function with the intent to provide support to any child who may be experiencing difficulty (academic or behavior) and to work to improve the overall achievement of all children in the school. Typically, these teams facilitate the problem-solving process which results in the development of an intervention plan which documents the child’s area of concern, the interventions implemented, the data reflecting the child’s response to the intervention, and the recommendations as a result of the child’s response to the intervention.

The problem solving conducted by these teams may vary, however, there should be at least four basic steps common to the process used by schools. All steps should include parent involvement – not just informing parents, but also including them in decision-making whenever possible. Additionally, parents must be provided with copies of the child data collected as interventions are tried and monitored for children.
The following outlines the four basic steps of problem solving and briefly indicates what happens at each step.

**STEP 1. Problem Identification**
- Precisely define the problem
- Measure the skill or behavior in the natural setting to establish baseline performance.
- Estimate the severity of the problem (use age norms or compare to peers)
- Establish expectations for the child

**STEP 2. Problem Analysis**
- Analyze antecedent, situational, and consequent conditions
- Use ICEL components (instruction, curriculum, environment, learner) to analyze the problem
- Collect additional data as needed to understand the cause of the problem.

**STEP 3. Develop and Implement an Intervention Plan**
- Formulate a plan that uses scientific research based interventions designed to target the cause of the presenting problem.
- Establish intervention goals
- Develop a plan for monitoring progress, which specifies the child data to be collected, and the schedule for collecting it. Decide how the data will be displayed (e.g. chart/graph) to facilitate evaluation.
- Implement the plan with treatment integrity and frequent monitoring of progress

**STEP 4. Evaluate and Revise Plan**
- Review progress-monitoring data to determine if enough progress has been made by repeating Step 1.
- If expectations have not been met, repeat Step 2 to further analyze the problem.
- Revise current intervention or select a new intervention including components of Step 3

**D. DATA COLLECTION AND DOCUMENTATION FOR GENERAL EDUCATION INTERVENTIONS**

GEI has been a requirement in Kansas since 2000, however, with the most recent reauthorization of IDEA and the subsequent Kansas regulations, the requirements for GEI were strengthened. With the exception of a parent request for evaluation and school agreement that an evaluation is appropriate, before a child may be referred for a special education evaluation, school personnel are now required to have data-based documentation that:

1. general education interventions and strategies would be inadequate to address the areas of concern for the child,

or

2. the child was provided appropriate instruction in regular education settings that was delivered by qualified personnel;

and

3. the child’s academic achievement was repeatedly assessed at reasonable intervals which reflected formal assessment of the child’s progress during instruction. (K.A.R. 91-40-7(c))

In either case, there must be data-based documentation that provides a basis for determining that a special education evaluation is warranted.

It should be rare that documentation would indicate that GEI and strategies would be inadequate to address the areas of concern for the child. This would most likely occur in an instance where a child with an obvious disability has for whatever reason not been identified previously. Another example might be for a child who has recently sustained a Traumatic Brain Injury. Of course, in situations such as these it would be inappropriate to delay further evaluation to determine the child’s need for special education. In these cases, the data used for documentation that GEI would be inadequate to address the needs of the child might come from medical records, previous school records, observations, parent and teacher reports, etc. However, in cases such as this, even though it is appropriate to move directly to evaluation, it is recommended that GEI and strategies occur as part of the child’s special education evaluation so that the team may collect data to determine what the best instructional approach for the child might be.
In most cases, school personnel will be documenting data from the GEI and strategies that have been tried. Schools must have data-based documentation that: (1) appropriate instruction was provided to the child, (2) the child was provided appropriate instruction delivered by qualified personnel in regular education settings; (3) the child’s academic achievement was repeatedly assessed at reasonable intervals which reflected formal assessment of the child’s progress during instruction; and (4) the instructional strategies used and the student-centered data collected. The data to document that appropriate instruction was provided to the child may include evidence that the school’s curriculum has a solid research base and that it contains, for example in reading, the essential components of comprehensive literacy instruction as defined in the Every Student Succeeds Act.

Additionally, data could include the extent to which instruction has been delivered by qualified teachers. Other data may include evidence that the child has regularly attended school in order to access instruction. The data to document the educational interventions and strategies that have been implemented may include records such as intervention plans that indicate the interventions and strategies selected and implemented for a given child. The requirement to provide data-based documentation of the repeated assessments of child progress during instruction (i.e. progress monitoring) is perhaps the most important of all. Progress monitoring data is used to evaluate the effectiveness of the intervention; to determine the intensity of interventions and resources needed to support child learning; and provides a basis for school personnel to make decisions during intervention. Documentation of progress monitoring may include charts/graphs or records of other systematic data collection. This documentation must also include evidence parents were provided with the results of the assessment of child progress and that those results indicate that an evaluation is appropriate.

Additional documentation is required for schools that utilize a school-wide multi-tiered system of supports approach to providing GEI. In addition to the data described above, the school must document that the child’s parents were notified about:

- The State’s policies regarding the amount and nature of child performance data that would be collected and the general education services that would be provided;
- Strategies for increasing the child’s rate of learning; and
- The parents’ right to request an evaluation (K.A.R. 91-40-10(f)(2); 34 C.F.R. 300.311(a)(7)(iii)).

Although this documentation is required only if the child goes on for an initial evaluation and the child is subsequently placed as having a learning disability, schools should be aware of this so that it may be attended to. It is recommended to any school that utilizes a school-wide approach that they publish information about their system. This not only provides a way for the school to discuss its multi-tiered system of supports for all children, but also insures that documentation requirements may be met should some children go on for evaluation and placement as having a learning disability. Some ways to accomplish this additional requirement might include providing information to parents through methods such as:

- School or student handbooks
- Annual child find notifications
- Brochures about the school’s RtI system

In addition to the broad dissemination required for all schools using a school-wide multi-tiered system of supports approach, schools may also choose to establish guidelines in their school system regarding how and when information will be shared more specifically with parents of children receiving supplemental support (i.e., Tier 2, Tier 3, etc.). It is important that parents be invited to fully participate in the intervention process for their child. This practice of involving parents from the beginning when additional interventions are necessary provides a way for the school and the parent to establish a foundation upon which to face future decisions that may arise.


(f) if the child has participated in a process that assesses the child’s response to scientific, research-based intervention, the evaluation report shall also address the following matters:

1. The instructional strategies used and the student-centered data collected; and
2. The documentation that the child’s parents were notified about the following:
   - (A) The state’s policies regarding the amount and nature of student performance data that would be collected and the general education services that would be provided;
   - (B) strategies for increasing the child’s rate of learning; and
   - (C) the parents’ right to request an evaluation.
E. REFERRAL FOR INITIAL EVALUATION

Screening and GEI are child find activities, and either process may result in the determination that an initial evaluation for special education is needed. Most decisions to move forward into initial evaluation will come as a result of these processes. However, there are instances when requests for evaluation may be made by parents or by adult students. The following describes the procedures to be used when such requests occur:

1. Referral from Parents: Parents have requested an evaluation. The request may be oral or written. The school may set a policy as to how a referral is to be made. The school must respond to the request within a reasonable period of time, which has been interpreted by the Kansas State Department of Education (KSDE) as being no more than 15 school days, unless there are unusual circumstances. The building principal or person designated to respond to parent requests for evaluations, should explain to the parents the following:

   (a) A GEI process that precedes an initial evaluation is available to assist in determining the specific concerns and needs of their child. This includes the right of the parents to participate in the GEI process. Parents may elect to withdraw their request for an evaluation and have their child participate in GEI. If a parent withdraws a request for an evaluation, it is important that the school has documentation of that withdrawal.

   (b) The parents may request the initial evaluation be conducted without waiting for general education interventions to conclude; in that case, the general education intervention process may be conducted as part of the initial evaluation.

   (c) The school may refuse to conduct the evaluation. Under that circumstance, a Prior Written Notice would explain why the school refuses to conduct the evaluation.

2. Self-referral from an adult student: A student 18 years of age or older has requested an evaluation. The school must respond to the request within a reasonable period of time which has been interpreted by KSDE as being no more than 15 school days, unless there are unusual circumstances. The building principal, or person designated to respond to student requests for evaluations, should explain the following to the student:

   (a) A GEI process that precedes an initial evaluation is available to assist in determining the specific concerns and needs of the student. The student may elect to withdraw the student’s request for an evaluation and participate in GEI. If the student withdraws a request for an evaluation, it is important that the school has documentation of that withdrawal.

   (b) The student may request the initial evaluation be conducted without waiting for general education interventions to conclude; the general education intervention process may be conducted as part of the initial evaluation.

   (c) The school may refuse to conduct the evaluation. Under that circumstance, a Prior Written Notice would explain why the school refuses to conduct the evaluation.

Regardless of how the decision to move forward with an initial evaluation is made, it is crucial that the school have a process which will insure that all data collected prior to the evaluation (i.e., data collected as part of screening, or GEI) is provided to the evaluation team. This insures the evaluation team has a basis for understanding what additional data may need to be collected as the initial evaluation process goes forward. Chapter 3 details all of the procedures and requirements that must be met at the time the child moves into the initial evaluation.

F. EARLY INTERVENCING SERVICES

The U.S. Department of Education states that the use of some Part B funds for early intervening services has the potential to benefit special education, as well as the education of other children, by reducing academic and behavioral problems in the regular education environment and reducing the number of referrals to special education that could have been avoided by relatively simple regular education interventions (Federal Register, August 14, 2006, pp. 46626-27). These early intervening services are not the same as “early intervention” services under the Part C, Infant-Toddler program, or child find activities, and are not available for preschool children ages 3 and 4, or 5 year olds not in kindergarten.

The district may set aside up to 15% of its Part B funds to carry out a variety of activities including:

1. Professional development (which may be provided by entities other than the district) for teachers and other school staff to enable such personnel to deliver scientifically-based academic and behavioral interventions, including scientifically-based literacy instruction, and, where appropriate, instruction on the use of adaptive and instructional software; and
2. Providing educational and behavioral evaluations, services and supports, including scientifically based literacy instruction.

For additional information on utilizing Part B funds for early intervening services in Kansas Statute 72-3409 and Appendix D to Federal Regulations, August 14, 2006.

K.S.A. 72-3409. State and federal funds; distribution and allocation

(c) (1) Each board may use up to 15% of the amount it receives each year under the federal law to develop and implement coordinated, early intervening services for students in kindergarten through grade 12, with a particular emphasis on students in kindergarten through grade 3, who have not been identified as needing special education or related services but who appear to need additional academic and behavioral support to succeed in a general education environment.

(2) In implementing coordinated, early intervening services under this subsection, a board may carry out activities that include:

(A) Providing professional development for teachers and other school staff to enable such personnel to deliver scientifically based academic instruction and behavioral interventions, including scientifically based literacy instruction and, where appropriate, instruction on the use of adaptive and instructional software; and

(B) providing educational and behavioral evaluations, services and supports, including scientifically based literacy instruction.

(3) Each board that develops and maintains coordinated, early intervening services under this subsection shall annually report to the department:

(A) The number of students served under this subsection; and

(B) the number of students served under this subsection who subsequently receive special education and related services under this title during the 2-year period preceding each report.

QUESTIONS AND ANSWERS ABOUT SCREENING AND GENERAL EDUCATION INTERVENTION (CHILD FIND)

1. Who is responsible for child find?

The Kansas State Department of Education (KSDE) has policies and procedures in place to ensure that all children with exceptionalities residing in the state, including children with exceptionalities attending public or private schools, are home schooled; are highly mobile, including migrant and homeless; or are wards of the state, and who are in need of special education and related services are identified, located, and evaluated. Local school districts are required to conduct ongoing public notice, screening, general education interventions, and evaluation to ensure that Kansas children from birth to age 5 with disabilities, and children from kindergarten through age 21 with exceptionalities are identified appropriately. For children of school age attending a private elementary or secondary school, the district in which the private school is located is responsible for child find for children who are residents and non-residents of the district who may be attending the private school. For preschoolers, the school district where the child resides is responsible for child find, even if the child attends preschool or child care in another district. This responsibility to conduct child find efforts for children from birth through age 2 is shared with the Part C Infant-Toddler program.

2. May special education staff participate in the general education intervention process, without jeopardizing their special education funding?

Questions often arise about who can work with a student to provide what type of support at what point in the general education intervention (GEI) process and how that fits with funding restrictions. It is the responsibility of both general and special educators to carry out GEI. Further, because child find is required by special education law and GEI is Kansas’ method of conducting child find for school age children, it is expected that special educators will, in part, support carrying out GEI. This may include special educators providing such things as assisting in collecting student data, participating in the analyses of data to determine next steps, and the provision of interventions; however, there are parameters with regard to funding. Those parameters are outlined in the Special Education Reimbursement Guide for State Categorical Aid at http://www.ksde.org/Default.aspx?tabid=538.

3. How does an intervention plan developed during general education interventions differ from other plans?

The general education intervention plan contains information that documents a student’s area(s) of concern, the scientific, evidence-based intervention(s) to be tried, the data to be collected to monitor the effectiveness of the intervention(s), and the impact of the intervention(s). It should include data that demonstrate that the child was provided appropriate instruction in general education settings, delivered by qualified personnel; and data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction. (See additional details about specific documentation in Section D of this chapter.) Additionally, it also provides documentation of the student’s progress in the general education curriculum.
and documents the extent of the involvement of special education resources in developing, implementing, and monitoring the intervention(s). This information becomes part of the data used to determine eligibility for special education if the student is referred for an initial evaluation. The general education intervention plan is to be provided to the child’s parents but parental consent is not required.

4. What is the timeline for the general education intervention process?

There is no rule of thumb for a timeline. The area(s) of concern and the nature of the interventions attempted will be the determining factors. The team will develop a plan that includes a timeline appropriate for each student. If it appears that the child’s needs require interventions that involve intense or sustained resources beyond those available in the general education environment, and if the team suspects the child may have an exceptionality, the team must make a referral for an initial evaluation.

5. Are there situations when the general education intervention process for children K-12 would not be used?

Usually, the general education intervention (GEI) process occurs prior to a student being referred for an initial evaluation. However, under some circumstances, it would not be necessary to begin with the general education intervention process before referring the student for an initial evaluation. This would most likely occur in an instance where a student with an obvious disability has not been identified previously. Another example might be for a student who has recently sustained a Traumatic Brain Injury. Of course, in situations such as these it would be inappropriate to delay further evaluation to determine the student’s need for special education. In these kinds of cases, the data used for documentation that GEI would be inadequate to address the needs of the student might come from medical records, previous school records, observations, parent and teacher reports, etc. However, in cases such as this, even though it is appropriate to move directly to evaluation, it is recommended that GEI and strategies occur as part of the student’s special education evaluation so that the team may collect data to determine what the best instructional approach for the student might be.

6. What happens to the information gathered about the child after the child find activities have been conducted?

If either the screening or general education intervention process is used to make a referral for an initial evaluation, the information may become part of the data used to determine eligibility during the initial evaluation process. However, screening information may not be the only information used to determine eligibility. Thus, it becomes part of the student’s record, regardless of whether the student is eligible or not. Likewise, even if the screening or general education intervention process did not result in a referral for an initial evaluation, the information would be retained for documentation in the event that future issues arise. For example, if a student is later suspended or expelled and the parents assert that the student should have been receiving special education services because the student has a disability, this information would be very helpful for the school to have. What decisions were made in the past, and upon what basis? These records might avert potential lawsuits.

Because the screening information is maintained by the school district and contains personally identifiable information about the child, it is confidential and must be kept in a secure location, according to Family Educational Rights and Privacy Act (FERPA) requirements. See Chapter 9 for additional details.

7. At what point does the screening of a school age child through GEI become an evaluation for special education, which signals the protections of procedural safeguards and due process?

Federal requirements indicate that the screening of a student to determine appropriate instructional strategies for curriculum implementation shall not be considered to be an evaluation for eligibility for special education and related services (34 C.F.R. 300.302). Further explanation in comments to the federal regulations indicates that screening refers to a process that a teacher or specialist uses to determine appropriate instructional strategies. The comments go on to describe screening as typically being a relatively simple and quick process that is used to determine strategies to more effectively teach children. This would include examples of such things as universal screening and progress monitoring tools (e.g. DIBELS, etc.) that yield information teachers may use to more appropriately select interventions tailored to a student’s area of academic need, observations of children in various environments from which analyses of behavior patterns may occur in order to direct staff to appropriate intervention selection, and diagnostic tools which assist school personnel in a deeper understanding of the student’s presenting concern so that more effective interventions may be selected. It should be made very clear here that the latitude given by this...
regulation is NOT to be interpreted as a way to circumvent other regulations pertaining to evaluation. The difference between screening and evaluation is the intent of the activities. If the intent of the activities is to determine instructional strategies, that constitutes screening. It is clear in the regulation and subsequent comments that the ONLY activities that may be considered screening are those activities which result directly in information to be used solely for the purpose of designing instructional strategies. At any point that the intent changes to seek to determine if the student is a child with an exceptionality or if the student is in need of special education, that is evaluation and all due process protections come into play. At that point, parents must be contacted to seek consent for initial evaluation.