



AREA COOPERATIVE FOR EDUCATIONAL SUPPORT

December 2019

ACES Mission

ACES is committed to providing a full continuum of special education and at-risk services for students in member districts from pre-school through 12th grade, as well as, to build the capacity of the educators and school systems in addressing the issues that interfere with educational outcomes.

ACES Vision

ACES will strive to be a comprehensive program of services for students whose behavioral difficulties and academic issues interfere with their educational performance. The key to this service provision is the active collaboration amongst educators, parents, students and the community.

Important Due Dates

- ◆ **12/15/2019:** December Child Count due in Core Data
- ◆ **12/31/2019:** Audit Submissions Due for Tiered Monitoring
- ◆ **01/01/2020:** Semi Annual Certifications for staff paid with federal funds.
- ◆ **01/01/2020:** Cohort 3-Begin prepping for Finance Self-Assessment
- ◆ **01/31/2020-**LEAs in Cohort 3 submit Special Education Finance Self-Assessments

Guides for completion of the about referenced special education processes
[special-education-finance-resources](#)

DESE Due Dates can be found here:
[Sped Due Dates](#)

Upcoming Trainings

- New Special Education Teacher Cohort Meetings:** (NMWSU Campus CIE 1402)
 - 9:00AM-3:00PM
 - January 23, 2020
 - March 19, 2020
 - CPI Full Foundation Training:** (NMWSU Campus CIE 1402)
 - Spring training TBA
 - CPI Refresher Training: TBA**
 - ◆ **NWMO LASE Meetings:** (Northwest Tech School-New Commons)
 - 9:00AM-3:00PM
 - ✓ February 20, 2020
 - ✓ April 2, 2020
- Please see the ACES Training List 2019-2020 for additional trainings offered.

Monthly To Do List

- ◆ Continue giving MAP-A assessment through the Instructionally Embedded Windows in the DLM system.
- ◆ Submit ICAP in IMACS (Cohort 2)-due December 31st
Written public comments on the proposed changes are being solicited beginning December 9, 2019, and should be directed as follows no later than the close of business on January 14, 2020, to:
Special Education Compliance Department of Elementary and Secondary Education
 P. O. Box 480
 Jefferson City, MO 65102-0480
 Fax: 573-751-3910
 Email: Idea.Comments@dese.mo.gov
Public hearings will be held by webinar on:
Tuesday, December 17, 2019 1:30-2:30 p.m.
<https://dese.mo.gov/communications/webinar/part-b-state-plan-public-hearing>

Tiered Monitoring Cohort

2019-2020		
Maintain Cohort 1	CAP Cohort 2	Self-Assessment Cohort 3
West Nodaway	Jefferson	Avenue City
Fairfax		Craig
King City	North Nodaway	Mound City
Nodaway Holt	South Holt	North Andrew
Pattonsburg	Tarkio	Northeast Nodaway
Stanberry	Union Star	Rock Port
	Worth County	South Nodaway

This month, I wanted to address some key factors to consider before completing the review of existing data on a student in the area of fine motor skills. Often times, we hear from teachers, "I have some concerns with their fine motor skills, just not sure when to make a referral." In talking to our occupational therapists who are contracted through ACES to provide those related therapy services in the ACES districts, what they are seeing is an increase in the referrals for OT evaluations.

An estimated 40% of students, who are referred for an OT evaluation, do not meet the qualifications for OT related services under Part B of the Individuals with Disabilities Education Act (IDEA). School-based occupational therapy is designed to enhance the student's ability to fully access and be successful in the learning environment. Related services are those services necessary for the student to make progress toward the identified instructional goals. The legal duty to provide a related service arises only when without the service, the child's educational program would become less than appropriate, i.e., when the child would not benefit from his educational program without these services.

A child must be eligible for special education before being considered for OT services in the schools under IDEA. Eligibility for special education does not mean automatic eligibility for related services, including OT. The final determination is made by the multidisciplinary team in collaboration with the OT evaluation. Suggestions: Handwriting concern? Seek guidance from the OT or COTA (assistant) before the Review of Existing Data is finalized by showing student written work samples from varying days. Unable to complete tasks such as zipping/unzipping backpack, can't tie shoes, button buttons, etc.-seek guidance from the OT or COTA before the Review of Existing Data is finalized by asking opinion from the OT to determine appropriateness of task due to age/other factors of student. Behavior problems or Sensory Problems and when to know the difference? Knowing the difference between the two by consulting with the OT about the student before the Review of Existing Data is finalized. If it is a sensory problem or concern-OT can give some sensory interventions to try before referring for evaluation. I hope this information helps in determining the need for a referral for occupational therapy. Have a Merry Christmas!

ACES Board Meeting Schedule

ACES Board

Meeting Schedule

(NMWSU Campus CIE 1402)

February 25, 2020 11:00 a.m.

April 23, 2020 11:00 a.m.

Location:

CIE (Center for Innovation and Entrepreneurship)
1402 N College Drive
Maryville, MO 64468

ACES

1212A S. Main Street
Maryville, MO 64468
660.582.3768

Director

Cindy Naber
cindy.naber@mndcty.org
660-254-6134

Office Manager

Emmy Brown
Emmy.brown@mndcty.org
660-582-3768

Educational Diagnostician

madison.douglas@mndcty.org
660-582-3768

Social Workers

Behavior Interventionist

Jody Renfro
Jody.renfro@mndcty.org
660-582-3768

ACES Monthly Data Report

November Statistics

- ◆ Diagnostic Assessments: 37
- ◆ Behavior/Adaptive Assessments Completed: 7
- ◆ Behavior Interventionist Agency Consultation Visits: 18
- ◆ School Social Worker Visits: 7
- ◆ Director Visits: 4
- ◆ Director Trainings Conducted: 4

Compliance Corner

- ◆ Please review the process for requesting testing or Behavior Intervention services. <http://areacooperative.weebly.com>
- ◆ Compliance updates will be given in the newsletter, and at each LASE meeting, so don't miss them!
- ◆ Be sure to know what Cohort your district is in, and stay tuned for Cohort training updates. I have included the listing on the front of the newsletter.
- ◆ Please don't hesitate to contact the ACES Director or RPDC Lauren Struthers if you have questions or need Compliance advice!

MYTH VS FACT

Myth: When a parent requests an IEE the LEA does not need to follow any specific procedures.

Fact: If a parent or legal guardian request an IEE at public expense, the school district must, without unnecessary delay, provide the IEE at public expense, or request a due process hearing to show that its evaluation of the student was appropriate. Upon request for an IEE, each school district must provide to a parent information about where an IEE may be obtained and the school district's criteria for IEEs. (34 CFR § 300.502(a)(2)) 3)

Myth: An LEA must comply with every parent request for an IEE at public expense.

Fact: If a parent requests an independent educational evaluation at public expense, the public agency must, without unnecessary delay, either— file a due process complaint to request a hearing to show that its evaluation is appropriate; or ensure that an independent educational evaluation is provided at public expense. (34 CFR § 300.502 (b)(2)(i)(ii)) The parent can obtain an IEE at their own expense at any time during their student's school career.

Myth: The LEA can require a parent to put in writing the reasons why they object to the public evaluation before providing an IEE at public expense.

Fact: The LEA may ask the parents for the reasons why they object to the LEA's evaluation, however, the LEA cannot require the parent to provide an explanation. (Missouri State Plan for Special Education, Regulation V)

Mental Health Tidbit from NAMI (National Alliance on Mental Illness)

<https://www.nami.org/Learn-More/Know-the-Warning-Signs>

Mental Health Tidbit

Know the Warning Signs

Trying to tell the difference between what expected behaviors are and what might be the signs of a mental illness isn't always easy. There's no easy test that can let someone know if there is mental illness or if actions and thoughts might be typical behaviors of a person or the result of a physical illness.

Each illness has its own symptoms, but common signs of mental illness in adults and adolescents can include the following:

- Excessive worrying or fear
- Feeling excessively sad or low
- Confused thinking or problems concentrating and learning
- Extreme mood changes, including uncontrollable “highs” or feelings of euphoria
- Prolonged or strong feelings of irritability or anger
- Avoiding friends and social activities
- Difficulties understanding or relating to other people
- Changes in sleeping habits or feeling tired and low energy
- Changes in eating habits such as increased hunger or lack of appetite
- Changes in sex drive
- Difficulty perceiving reality (delusions or hallucinations, in which a person experiences and senses things that don't exist in objective reality)
- Inability to perceive changes in one's own feelings, behavior or personality (“lack of insight” or anosognosia)
- Abuse of substances like alcohol or drugs
- Multiple physical ailments without obvious causes (such as headaches, stomach aches, vague and ongoing “aches and pains”)
- Thinking about suicide
- Inability to carry out daily activities or handle daily problems and stress
- An intense fear of weight gain or concern with appearance

Mental health conditions can also begin to develop in young children. Because they're still learning how to identify and talk about thoughts and emotions, their most obvious symptoms are behavioral.

Symptoms in children may include the following:

- Changes in school performance
- Excessive worry or anxiety, for instance fighting to avoid bed or school
- Hyperactive behavior
- Frequent nightmares
- Frequent disobedience or aggression
- Frequent temper tantrums