



# AREA COOPERATIVE FOR EDUCATIONAL SUPPORT

November 2017

## 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 12<sup>th</sup> 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

DESE Due Dates can be found here:

- ◆ **11/30/2017:** High Need Fund Application due
- ◆ **11/30/2017:** Readers for the Blind Application due
- ◆ **12/01/2017:** December Child Count due in Core Data
- ◆ **01/01/2018:** Semi Annual Certifications for staff paid with federal funds.
- ◆ **01/31/2018:** Cohort 1-Begin prepping for Finance Self-Assessment

<https://dese.mo.gov/sites/default/files/sef-CalendarFY18.pdf>

## Upcoming Trainings

- ◆ **Paraprofessional Training:** (NMWSU Campus CIE 1402) 9:00AM-3:00PM February 7th, 2018
- ◆ **New Special Education Teacher Cohort Meetings:** (NMWSU Campus CIE 1402) 9:00AM-3:00PM November 9th, 2017 January 11th, 2018 March 15th, 2018
- ◆ **CPI Training: Recertification:** Contact Cindy Naber to schedule
- ◆ **LASE Meetings:** (Maryville R-2 Administration Building) 9:00AM-3:00PM November 30, 2017 January 25, 2018 March 8, 2018
- ◆ **Students with Challenging Behaviors & Data Management:** (Maryville R-2 Administration Building) 9:00AM-3:00PM November 29, 2017

## Monthly To Do List

- ◆ Continue giving MAP-A assessment through the Instructionally Embedded Windows in the DLM system.
- ◆ Review Special Education Self-Assessment Special Education Program Review Report. Please contact me if you would like support in navigating the CAP's.
- ◆ Submit CAP in IMACS (Cohort 3)-due November 1st
- ◆ Submit ICAP in IMACS (Cohort 3)-due December 31st
- ◆ Begin gathering data for December 1 Child Count

## Tiered Monitoring Cohort

2017-2018		
Self-Assessment	Maintain	CAP
Cohort 1	Cohort 2	Cohort 3
	Jefferson	Avenue City
Fairfax	Maryville	Craig
King City	North Nodaway	Mound City
Nodaway Holt	South Holt	North Andrew
Pattonsburg	Tarkio	Northeast Nodaway
Stanberry	Union Star	Rock Port
West Nodaway	Worth County	South Nodaway

### Director's Desk

Happy November everyone! November is one of my favorite months; because we really start to see the seasons change. The trees are filled with the fall colors, wood smoke is in the air, and the fields are busy as the farmers reap their harvests. In our school districts, teachers and administrators are also busy as quarter one has come to a close and parent/teacher conferences are completed. In my experience as an educator, parents always have that expectation for their child to be an 'A/B' student. They tend to set the blame on the school/faculty when their child is not meeting their personal expectations they have placed on them. As a parent, I hold high expectations for my own children, but the reality is not all students are going to academically excel. There is nothing wrong with being an average student. Perhaps academics are not their priority and the student is just doing what he/she has to do to be eligible for extracurricular activities. Another thought, maybe the student is rebelling against the parent that pressures them to excel, perhaps grades are the only control that student has in his/her life. Whatever the case, after first quarter, ACES staff members tend to see more parent referrals for special education. A parent referral does trigger the "parent referral process" for special education; within 5 days of the parent request they are presented with the Procedural Safeguards, this is IDEA procedure. Here is the point I really want to address, the LEA then determines if there is a reason to suspect a disability. This process involves talking to the child's teachers about classroom performance, reviewing the cumulative folder of past performance, looking at state and district assessments etc. You are not completing a formal 'Review of Existing Data,' but just reviewing information looking for a reason to suspect a disability. If there is no reason to suspect a disability, you provide the parent with a Notice of Action Refused, within 30 calendar days of the parent referral. I think school districts comply in the parent referral for special education evaluation, even when they have no reason to suspect a disability. The parent is upset over first quarter progress, and is looking for a reason or outlet for the less than acceptable grades. Perhaps they want accommodations or modifications so their child can meet their personal expectations on that grade card. Whatever the case, please review each individual student referral carefully, looking for a reason to suspect a disability before going forward with the special education process. Being labeled with a disability is not a prize or something to be handed out without adequate eligibility determination. Please see the related article related to special education statistics in the United States.

## ACES Board Meeting Schedule

### ACES Board

#### Meeting Schedule

(NMWSU Campus CIE 1402)

Jan 25, 2018 10:30 a.m.

April 24, 2018 10:30 a.m.

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

naber@maryviller2.com

660-254-6134

### Office Manager

Nita Poppa

poppa@maryviller2.com

### Educational Diagnostician

Jodie Kurtz

kurtz@maryviller2.com

### Social Workers

Debbie Griffith-Fujinami

fujinami@maryviller2.com

660.254.6133

Brittnie Morgan

morgan@maryviller2.com

660.254.6136

### School Psychologist

Haley Humes

hhumes@maryviller2.com

660.254.6135

## ACES Monthly Data Report

### October Statistics

- ◆ Diagnostic Assessments: 38
- ◆ School Psychologist Behavior Visits: 20
- ◆ School Psychologist Consultation: 1
- ◆ School Social Worker Visits: 36
- ◆ Director Visits: 9
- ◆ Director Consults: 17
- ◆ Director Trainings Conducted: 4

## Compliance Corner

- ◆ Cohort 3: On-Site Training under Tiered Monitoring Training and IMACS at the following link-  
<https://dese.mo.gov/specialeducation/compliance/tiered-monitoring-imals-faqs>
- ◆ Please don't hesitate to contact the ACES Director or your DESE Compliance Consultant Susan Borgemeyer at [borgmeyersk@umkc.edu](mailto:borgmeyersk@umkc.edu) if you have questions or need Compliance advice!

*Tell me and I forget. Teach me and I remember. Involve me and I learn.*

*-Ben Franklin*

### Number of U.S. Students in Special Education Ticks Upward

By Christina A. Samuels

April 19, 2016

After years of steady decline, the nationwide count of school-age students covered under the Individuals with Disabilities Education Act has shown an upswing since the 2011-12 school year based on the most recently available federal data, driven by rapid growth in such disability categories as autism. The count of students ages 6-21 with disabilities fell to a low of 5.67 million in fall 2011, but had risen to 5.83 million by fall 2014, the most recent year for which statistics are available.

"What we're seeing is that about half of that population are kids with pretty severe disabilities, major behavior issues, medical issues; they're probably some of the most complicated issues that school divisions face," said Eisenberg, who is president of the National Association of State Directors of Special Education. "The cost associated with educating kids with disabilities has significantly increased."

#### Tallying the Numbers

Nationwide, the number of 6- to 21-year-old students classified as having autism rose 165 percent between the 2005-06 and 2014-15 school years, based on a count of nearly all states. (Wyoming did not report numbers for 2014-15.)

Students with "other health impairments"—a category that can include attention deficit hyperactivity disorder, health issues such as epilepsy or mobility impairments, or mental-health issues such as bipolar disorder—increased by about 51 percent over that same 10-year span.

Those two categories now account for a little more than 1 in 5 school-age children covered under the IDEA nationwide.

But the disability categories that have typically included the most children have largely been on a decade long decline. They include students with specific learning disabilities, speech and language impairments, behavioral and emotional disturbances, and intellectual disabilities.

Students with specific learning disabilities such as dyslexia have been, and remain, the largest group of those covered under the IDEA. But in 2005-06, they made up 45 percent of all students in the special education child-count data. By 2014-15, that proportion had dropped to about 39 percent.

### Mental Health Tidbits

#### Sleep Facts for teens from [sleepfoundation.org](http://sleepfoundation.org)

- 1) Sleep is vital to your well-being, as important as the air you breathe, the water you drink and the food you eat. It can even help you to eat better and manage the stress of being a teen.
- 2) Biological sleep patterns shift toward later times for both sleeping and waking during adolescence -- meaning it is natural to not be able to fall asleep before 11:00 pm.
- 3) Teens need about 8 to 10 hours of sleep each night to function best. Most teens do not get enough sleep — one study found that only 15% reported sleeping 8 1/2 hours on school nights.
- 4) Teens tend to have irregular sleep patterns across the week — they typically stay up late and sleep in late on the weekends, which can affect their biological clocks and hurt the quality of their sleep.
- 5) Many teens suffer from treatable sleep disorders, such as narcolepsy, insomnia, restless legs syndrome or sleep apnea.