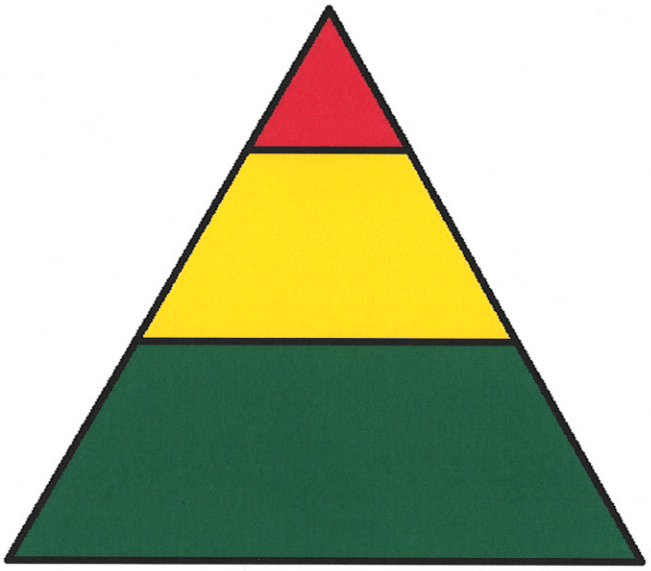
Pitt County Schools

Problem-Solving Manual



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Vision and Mission **2**
MTSS Defined 2
Core, Supplemental, and Intensive levels of support 2
Problem Solving Teams (PST) **3**
Duties of the PST 3
Definitions and Duties of the Individualized Education Program (IEP) 4
Directives and Procedures **4**
Creating Teams 4
Where to Start 4
Data-Based Decision Making **5**
Core Supports **6**
Evaluating Core Supports **7**
Supplemental Supports **8**
Evaluating Supplemental Supports **8**
Moving Between Levels **9**
Essential Questions 9
Intensive Supports **10**
Evaluating Intensive Supports **10**
Suspecting a Disability? **11**
What are the Disabling Categories **12**
Role of the PST **12**
Parents and Problem Solving 13
Parent Requests **13**
Supplemental Forms and Appendices **15**
Essential Questions to ask during Problem Solving 15
Quick Glance "Tip Sheet" for PSTs 16
Notification of Intervention (English) 18
Notification of Intervention (Spanish) 19
Parent/Teacher Conference Notes (English) 20
Parent/Teacher Conference Notes (Spanish) 21
Individual Problem Solving Team Screening Notification (English) 22
Individual Problem Solving Team Screening Notification (Spanish) 23
Pitt County Schools Social Developmental History (English) 24
Pitt County Schools Social Developmental History (Spanish) 29
Vision, Hearing, Health Screening 34
Observation Form 35

VISION AND MISSION

North Carolina Department of Public Instruction (NCDPI)

Vision: Every NC Pre-K - 12 public education system implements and sustains all components of a multi-tiered system of support to ensure college, career, and community readiness for all students.

Mission: NCDPI will prepare and support LEAs to implement a multi-tiered system of support for total school improvement by providing professional development, coaching and technical assistance, research and evaluation, and communication and visibility that results in college, career, and community readiness for all students.

Belief: We believe that NC MTSS is the most effective and efficient approach to improving district, school, and student outcomes, thereby ensuring a sound basic education for ALL.

Pitt County Schools

Mission Statement: Pitt County Schools will ensure that all students are provided a rigorous and personalized education that prepares them for the ever-changing challenges of the 21st century.

Vision Statement: Pitt County Schools—a system of excellence partnering with family and community to prepare students to function effectively in a rapidly changing world by developing global citizens through academic excellence.

MULTI-TIERED SYSTEMS OF SUPPORT (MTSS)

NC MTSS Implementation Guide

MTSS is a multi-tiered framework that promotes school improvement through engaging, research-based academic and behavioral practices.

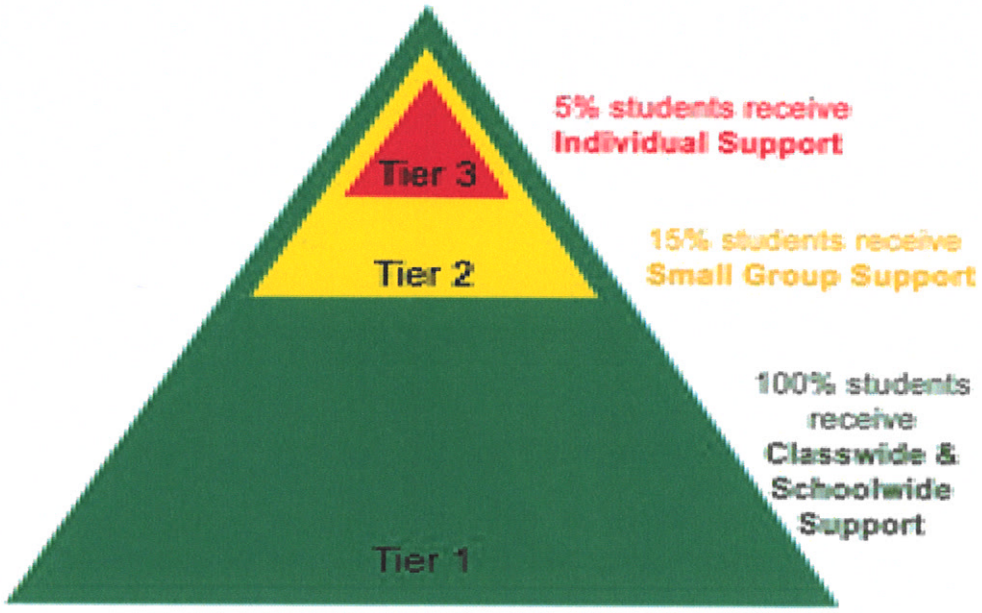
We believe that all children can grow and learn in an environment that fosters understanding and provides effective instruction tailored to meet each learner's needs—academically, behaviorally, and emotionally.

School-based teams use multiple student data points and a structured problem-solving model to improve student's learning outcomes. Schools provide educational support to all students at increasing intensity (core, supplemental, and intensive) based on their individual needs. The goal is to prevent problems and intervene early so that all students can be successful.

- **Core Supports:** This level includes a high-quality curriculum and instruction in the classroom that all children receive. It has supports such as school-wide positive behavioral interventions and supports (PBIS), breakfast/nutrition programs, and break-out learning groups.

- **Supplemental Supports:** When students are experiencing difficulties at school despite core supports, they may have supplemental supports added to their day. These supports include additional targeted, supplemental instruction for small groups of students who need more specific skill support.

- **Intensive Supports:** When a student is not making progress despite core and supplemental supports, they begin to receive intensive supports and interventions customized to meet their individual needs.



Note: The problem-solving team must consider whether a student's lack of progress results from a suspected disability. If a disability is suspected, the student must be referred to the IEP team and interventions must continue concurrently while the issue of the suspected disability is resolved.

A parent has the right to request, in writing, an evaluation for special education at any time. If the parent makes this request, the student must be referred to the IEP team while interventions continue.

Parents must be notified, in writing, regarding a student's response to intervention at each level (tier). The parent notification of intervention must be used and a copy retained in the student's cumulative folder.

PROBLEM-SOLVING TEAM (PST)

"Problem Solving Team" is an umbrella term often used to describe groups of individuals that meet to analyze data and determine solutions to problems or areas of concerns within the school environment.

In a MTSS, there can be multiple problem-solving teams. Professional Learning Communities, Intervention Teams, and Student Support Teams are all examples of teams that generally meet to discuss school-wide areas of concern related to the environment, instruction, and curriculum for all students or groups of students.

Specialized teams, such as the Individualized Education Program (IEP) Team, are also problem-solving teams; however, its purpose is initiated for individual students who are suspected of a disability or who have already been identified with a disability and are coordinated according to the regulatory requirements of the IDEA.

Duties of the Problem-Solving Team (PST) include:

- Assisting teachers in individualizing instruction to meet the needs of all students
- Assisting in developing intervention strategies to be used by teachers
- Meeting minimally twice a month to monitor and review student progress

- Monitoring, collecting data, and evaluating the efficacy of intervention strategies
- Providing an efficient data analysis of students' response to intervention
- Promoting a constructive, problem-solving process among teachers
- Assist in helping teachers increase teacher skills in differentiating instruction and addressing all students' academic and behavioral issues

Definition of and Duties of the IEP Team:
This is the problem-solving team to which a student is referred when a disability is suspected, or a parent requests a formal evaluation. This team will:

- Engage in the problem-solving necessary to determine if a formal evaluation for special education and related services will occur and
- Ensure that the appropriate procedures and documentation are completed in compliance with federal regulations and state policies.

Implementing interventions before a referral to the IEP Team is not required if a disability has been suspected by the parent or school staff or a parent or teacher has requested a formal evaluation in writing. However, interventions may need to be implemented concurrently with the formal evaluation timeline to provide the IEP Team a required comprehensive evaluation component when eligibility for special education and related services will be determined.

DIRECTIVES AND PROCEDURES

Pitt County Schools has set implementation guidelines for the entire district on how MTSS and Problem Solving processes should be developed and implemented. There are guidelines for team creation, identifying the specific group and individual needs, data collection, progress monitoring, and decision-making.

Create the Team
Each school creates its own PST in the following manner:

- There are typically 5-7 team members. The Problem Solving Team can consist of an administrator, a counselor, an EC teacher, a school psychologist, reading/math specialists, a behavioral specialist, grade level or departmental chairs, instructional coaches, and related service providers as needed. This is not an exhaustive list. The members may vary from school to school depending on the need.
- Each team has a Chairperson or Facilitator. Because the PST is considered a general education team, an EC teacher should not be the chair.
- The PST is required to meet minimally bi-monthly. However, the team often meets more frequently.
- Roles should be assigned to help manage the meeting. Suggestions include Timekeeper, Notetaker, Facilitator, Case Manager, and Fidelity Monitor.

Where to Start
Problem-solving begins with the classroom teacher identifying groups of students having similar difficulties (for example, "Looking at my classroom data, I see I have four students who are having a hard time progressing in math.") or an individual student who is having difficulties which place their progress in the bottom 10-20% of the class.

The appropriate problem-solving school team then needs to ask itself:

- Why are these students having a difficult time progressing?
- What is the *specific* problem and why is it occurring?
- What are we going to do about it?

To determine this, the team needs to look at data.

Data-Based Decisions

The most crucial part of identifying students' needs is utilizing current and existing data.
Without data, everything is guesswork. Data provides quantitative information to inform decision-making. With data, teams can pinpoint missing skills to create supplemental and intensive interventions which are more likely to help the student be successful.

What is Data?

Data is the information used to determine the progress a student is making on instructional materials provided throughout a student's day.
Data is always obtained from multiple measures and sources. This may include, but is not limited to, diagnostic programs/curriculum-based assessment measures, screeners, and behavioral check-in charts.

There are many points of data the team may find in their school. Examples include IReady, San Diego Quick Assessments, Read Theory, and Unique Learning. This list consists of some of the potential data to be considered, but it is not an exhaustive list, and data to be considered may vary from case to case.

Drilling Down

Data helps guide the team toward specific areas of difficulty. For our hypothetical math students, it's not just that they "can't do math." Using data and probes, the team realizes that the four students didn't master two-digit addition and could not master skills built upon it.

Intervention Selection

- It starts with baseline data—what can the student do, what should the student be doing based on class/grade level.
- Intervene based on specific areas of concern.
- Remember, there must be interventions in **each** area for which there are concerns.
- It is recommended to provide the intervention in the specific area at least 3x week (and recommended assess 2x week; see progress monitoring)

What does problem-solving look like?

Step 1: Define the problem by determining the difference between what is expected and what is occurring. Ask, "What specifically do we want students to know and be able to do when compared to what they currently know and can do?" When engaged in problem-solving at the individual student level, the team should strive for accuracy by asking, "What exactly is the problem?"

Step 2: Analyze the problem using data to determine why the issue is occurring. Generate hypotheses (reasons why students are not meeting performance goals) founded in evidence-based content area knowledge, alterable variables, and instructionally relevant domains. Gather assessment data to determine valid/non-valid hypotheses. Link validated hypotheses to instruction/intervention so that hypotheses will lead to evidence-based instructional decisions. Ask, "Why is/are the desired goal(s) not occurring? What are the

barriers to the student(s) doing and knowing what is expected?" Design or select instruction to directly reduce and eliminate those barriers.

The problem-solving team should ask the following Five Essential Questions each time progress monitoring data is discussed for groups of students:

- Has our problem-solving shifted from overall instruction, environment, and curriculum for groups of students to individual, student-centered concerns?
- Are there any individual students that are consistently not making progress with interventions?
- Are there any individual students that are unlikely to achieve grade-level standards by the end of the school year?
- Does the data indicate that a disability may cause a consistent lack of progress with an intervention?
- Does the individual student's progress in the general curriculum have characteristics typically associated with a disability?

Step 3: Develop and implement a plan driven by the team's problem analysis results by establishing a performance goal for the group of students or the individual student and developing an intervention plan to achieve the goal. Plan development should include how the student's or group of students' progress will be monitored and how implementation integrity will be supported. Ask, "What are we going to do?"

Step 4: Measure response to instruction/interventions by using data gathered from progress monitoring at agreed-upon intervals to evaluate the effectiveness of the intervention plan based on the students' or group of students' response to the intervention. Progress monitoring data should directly reflect the targeted skill(s). Ask, "Is it working? If not, how will the instruction/intervention plan be adjusted to better support the student's or group of students' progress?" Team discussion centers on how to maintain or better enable learning for the student(s).

Other Basic Requirements: Part of the problem-solving process includes obtaining the following pieces of data at the supplemental or intensive level of support.

- Vision and Hearing Screenings
- Social Developmental History
- Observation Across Settings

Core Supports

Core support (sometimes referred to as Tier I) includes general academic, behavioral, and social-emotional instruction and support designed and differentiated for all students. Core academic instruction should be aligned with the North Carolina Standard Course of Study (NCSCOS). Core behavioral and social-emotional instruction should be aligned with locally developed expectations.

The delivery of instruction at this level should include evidence-based, whole group, small group strategies, and differentiated instruction based on the learners in the group and the teacher's expertise.

Even though the state and behavioral expectations have established academic standards that a district may develop, Core instruction will most likely vary in intensity from school to school, even within a district. This is because Core instruction is based on local needs. Some schools may require more time and focus in Core to ensure all students meet and/or exceed state proficiency levels and locally developed behavioral and social-emotional expectations.

In an effective Core (Tier I), 80% of students meet and/or exceed state and locally developed standards with Core instruction alone (i.e., with no additional supports). Suppose more than 20% of students need additional support. In that case, Core's effectiveness should be examined and the School Leadership Team should evaluate all data using a structured problem-solving model to determine any needed changes.

How do we know if Core Supports are adequate or not?

When teams begin to examine student responsiveness to Core supports, it is important to consider the following:

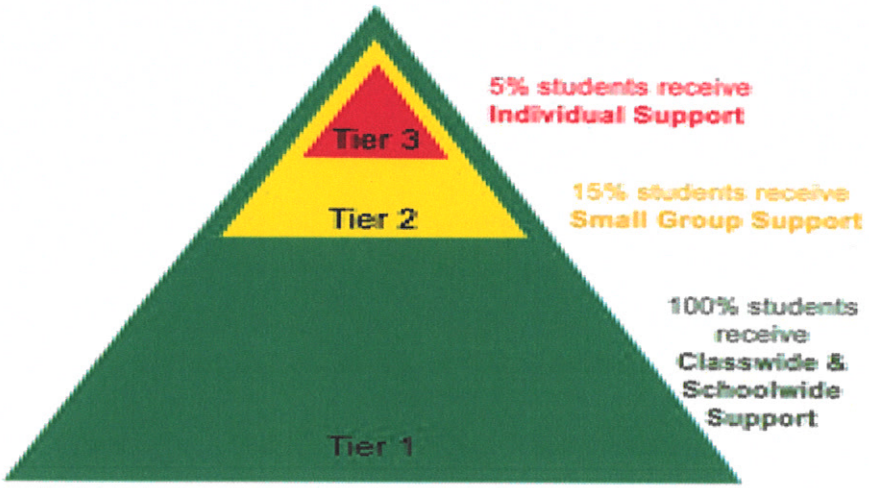
- Are students provided with well-designed, well-delivered, evidence-based core instruction?
- How often does the school-based leadership team problem solve Core to determine the effectiveness of academic, behavioral, and social-emotional supports?
- What assessment tools or processes are used to identify instructional needs and the students' response to instruction?
- What percentage of all students achieve standards/benchmarks/behavioral expectations (approximately 80 percent or more) with core supports alone?
- What percentage of students in subgroups achieve standards/benchmarks/behavioral expectations (approximately 80 percent or more) with core supports alone?
- How are parents and students involved or engaged in supporting effective Core supports?
- What are the decision rules to determine if the student(s) will require supplemental and more intensive, individualized intervention/support?

Evaluating Core Supports

At first, it may seem that evaluating core supports would be complex. However, there are broad data points available that reflect the broad nature of core supports that classrooms and grade levels can be compared against.

Note: The problem-solving team must consider whether a student's lack of progress results from a suspected disability. If a disability is suspected, the student must be referred to the IEP team and interventions must continue concurrently while the issue of the suspected disability is resolved.

A parent has the right to request, in writing, an evaluation for special education at any time. If the parent makes this request, the student must be referred to the IEP team while interventions continue.
Parents must be notified, in writing, regarding a student's response to intervention at each level (tier). The parent notification of intervention must be used and a copy retained in the student's cumulative folder.



Supplemental Supports

Supplemental support (sometimes referred to as Tier 2), targets students not making adequate progress in the core curriculum. Students are provided small-group, supplemental instruction in addition to the time allotted for core instruction.

Tier 2 includes instruction, strategies, and programs designed to supplement, enhance and support the core curriculum.

Teachers monitor student progress frequently using multiple assessments, curriculum-based measurement, running records, fluency, and behavioral data.

The potential impact of each of the following variables is addressed when intensifying intervention supports:

- Increased instructional time
- Smaller group size
- Increased opportunities to respond with feedback
- Increased explicitness of instruction
- Changing intervention program
- Changing intervention skill focus

How do we know if the supplemental supports/interventions are working?

Evaluating Supplemental Supports

To determine if the interventions are working, data is collected through measures that can specifically determine if each student is making progress or not.

- As noted previously, it is recommended the intervention is provided at least 3 times per week and it is recommended monitoring is conducted 2 times per week to provide the team with at least 2 data

points per week (the more, the better). These progress monitoring points measure the skill improvement against the baseline data before the start of the intervention.

- All groups receiving supplemental instruction in each grade level are monitored. This is often done by the grade-level teacher PLC.
- *Remember, MTSS is not a "pathway to special education" or testing.*
- The purpose of core, supplemental, and intensive supports is *to determine and provide the student's support level to be successful in the general education curriculum.*
- Progress monitoring is completed by both the individual qualified staff providing the supplemental instruction and a broader problem-solving team.
- When interpreting progress monitoring data, current research indicates that length of time of intervention rather than the number of data points is the primary method of determining when to assess a student's response. Data point rules are used to see if they made progress or not, but these decisions cannot be made if they have not been given enough time to make progress. A general rule of thumb (although each case will differ) is to monitor for a minimum of ten weeks and calculate the trend line with at least 7-10 data points to determine student response.

One student may never need more than core supports, while another may always need supplemental or intensive supports to be successful.

Moving Between Levels

When the problem-solving team meets to determine a student's progress (response or lack of response to intervention), there are several possible outcomes.

There are three possible outcomes in supplemental supports:

- A student may gain the necessary skill to be successful and return to only receiving core supports.
- A student may do great with supplemental support, but when the team tries to ease those supports, the student struggles again; therefore, the student may need supplemental support. Or,
- A student may not make adequate progress and need to move to the most intensive level of support.

The problem-solving team should ask the following Five Essential Questions each time progress monitoring data is discussed for groups of students:

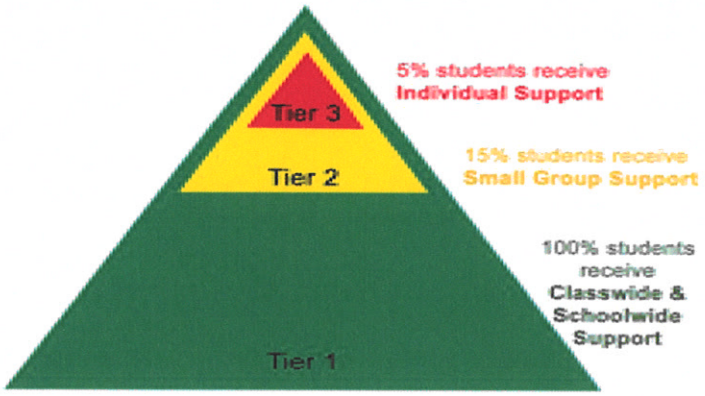
- Has our problem-solving shifted from overall instruction, environment, and curriculum for groups of students to individual, student-centered concerns?
- Are there any individual students that are consistently not making progress with interventions?
- Are there any individual students that are unlikely to achieve grade-level standards by the end of the school year?
- Does the data indicate that a disability may cause a consistent lack of progress with an intervention?
- Does the individual student's progress in the general curriculum have characteristics typically associated with a disability?

Once the team has determined by the progress monitoring data that the student is not making adequate progress and that they have been addressing the appropriate skill deficit(s), if they do not suspect a disability, they will typically move to implement a more intensive level of intervention.

Note: The problem-solving team must consider whether a student's lack of progress results from a suspected disability. If a disability is suspected, the student must be referred to the IEP team and interventions must continue concurrently while the issue of the suspected disability is resolved.

A parent has the right to request, in writing, an evaluation for special education at any time. If the parent makes this request, the student must be referred to the IEP team while interventions continue.

Parents must be notified, in writing, regarding a student's response to intervention at each level (tier). The parent notification of intervention must be used and a copy retained in the student's cumulative folder.



Intensive Supports

Intensive support (sometimes referred to as Tier 3) targets students not making adequate progress at the core or supplemental levels. Students are typically provided instruction or intervention individually with the instructor at the intensive level. It is recommended that vision, hearing, social-developmental history, and observational data be collected. Parents should be notified of screenings (see supplemental forms pg. 22).

The potential impact of each of the following variables is addressed when intensifying intervention supports:

- Increased instructional time
- Smaller group size
- Increased opportunities to respond with feedback
- Increased explicitness of instruction
- Changing intervention program
- Changing intervention skill focus

How do we know if the intensive supports/interventions are working?

Evaluating Intensive Supports

To determine if the interventions are working, data is collected through measures that can specifically determine if each student is making progress or not.

- As noted previously, it is recommended the intervention is provided at least 3 times per week and it is recommended monitoring is conducted 2 times per week to provide the team with at least 2 data points per week (the more, the better). These progress monitoring points measure the skill improvement against the baseline data before the start of the intervention.
- When interpreting progress monitoring data, current research indicates that length of time of intervention rather than several data points be the primary method of determining when to assess a student's response. Data point rules are used to see if they made progress or not, but these decisions cannot be made if they have not been given enough time to make progress. A general rule of thumb (although each individual case will differ) is to monitor for a minimum of ten weeks and calculate the trend line with at least 7-10 data points to determine student response.

Once the team has determined by the progress monitoring data that the student is not making adequate progress and that they have been addressing the appropriate skill deficit(s), if they do not suspect a disability, they will typically move to implement a more intensive level of intervention.
The intensive support is completed by both the individual qualified staff who provide supplemental instruction and a broader problem-solving team.

Intensive supports should be monitored using tools to monitor the specific skills. However, general outcome measures should be utilized as well to determine if the student's skills are generalizing and improving global skills.

Remember, MTSS is not a "pathway to special education." MTSS employs a systems approach to using data-driven problem-solving to maximize growth for all. The belief is that a MTSS is the most effective and efficient approach to improving district, school, and student outcomes, thereby ensuring a sound basic education for all. Nothing in the MTSS definition, vision, mission, or belief creates a structure that must be adhered to before suspecting a disability or referring a student for an evaluation for special education and related services.

The purpose of core, supplemental, and intensive supports is to determine and provide the student's support level to be successful in the general education curriculum.

Note: The problem-solving team must consider whether a student's lack of progress results from a suspected disability. If a disability is suspected, the student must be referred to the IEP team and interventions must continue concurrently while the issue of the suspected disability is resolved.

A parent has the right to request, in writing, an evaluation for special education at any time. If the parent makes this request, the student must be referred to the IEP team while interventions continue.
Parents must be notified, in writing, regarding a student's response to intervention at each level (tier). The parent notification of intervention must be used and a copy retained in the student's cumulative folder.

What is the legal mandate about suspecting a disability?
Child Find is the safeguard and mandate put in place to identify children with disabilities. Therefore, the problem-solving team must consider whether the student's lack of progress results from a suspected disability.

Depending on the team's responses to the Five Essential Questions on the Moving Between Levels (page 9) the team may suspect a disability. If a disability is suspected, the student must be referred to the IEP Team and interventions must continue concurrently while the issue of a suspected disability is resolved.

Other Child Find Responsibilities
If a parent verbally requests an evaluation (also known as a referral to special education), the staff should advise the parent to make the request in writing and send it to the appropriate contact person at their child's school. Upon receipt of the letter, the contact person shall request the EC personnel to schedule an IEP team meeting to discuss the parent request. This begins the regulatory/procedural timeline associated with initial referrals/evaluations.

It is important to note that interventions are not required for all eligibility categories. Emotional Disability, Intellectual Disability, Other Health Impairment, Specific Learning Disabilities, and Traumatic Brain Injury are

the only disability categories that specifically require interventions. However, those interventions are required as part of the evaluation procedures. A MTSS or RtI is only referenced explicitly within the Policies for Specific Learning Disabilities. This is because the MTSS or RtI intervention data now serves as the assessment data for determining if a student has a specific learning disability.

What is a Disability?

There are 14 disabling conditions in education for which a student may be identified to qualify for IEP or 504 Supports. For further guidance, consult with NCDPI's Policy and with your school psychologist.

What are the disability categories that a problem-solving team or parent can suspect?

When considering whether a disability is suspected, the team should have a clear suspicion of an area of disability. This suspicion is based on data points and an understanding of the 14 disabling conditions under which a student may receive specially designed instruction or 504 supports.
Policies Governing Services for Children with Disabilities (Amended August 2020)

Educational Disability Categories

- Autism Spectrum Disorder
- Deaf and Blind
- Deafness
- Developmental Delay
- Hearing Impairment
- Intellectual Disability
- Multiple Disabilities
- Orthopedic Impairment
- Other Health Impairment
- Serious Emotional Disability
- Specific Learning Disability
- Speech/Language Impairment
- Traumatic Brain Injury
- Visual Impairment

The category of Specific Learning Disability has sub-areas: oral expression, listening comprehension, basic reading, reading fluency, reading comprehension, math calculation, math problem solving, written expression.

This student isn't making progress with our support, and/or we suspect a disability; now what do we do?

Role of the Problem-Solving Team

As discussed earlier, PST's analyze groups of students and their responses to the environment, instruction, and curriculum and then implement appropriate supports.
If the problem-solving team's intent starts focusing inward on the individual learner, the team has reached a point where it must raise the question of whether or not a disability is suspected (see Five Essential Questions). If yes, the appropriate problem-solving team may participate as an IEP Team member.

If a student has not made adequate progress after an appropriate time, a referral for an evaluation must be made by the local education agency. Interventions and screenings for instructional purposes may not be used to delay or deny an evaluation.

Role of the IEP Team

It is important to note that *a referral does not mean that the IEP team has an obligation to evaluate*. However, if the problem-solving team suspects, then they have an *obligation to refer*. This ensures that the procedural requirements are met and the proper problem-solving team—the IEP Team—determines the next course of action.

Note: Interventions may run concurrently with the evaluation conducted with the 90-day timeline. As well, if the IEP team determines an evaluation is not warranted based on the available data, interventions should continue and/or be updated to match the student's needs.

How do we involve parents and guardians?

Parents and Problem Solving

Parents/guardians are important partners in the problem-solving process. Therefore, communication between school and home is essential. Thus, the school team must take steps and and be aware of regulations to protect parents' rights.

- Parents or guardians must be notified, in writing, regarding the student's response to intervention at each level beyond Core.
- The "Parent Notification of Intervention" Letter must be used. A copy of the "Parent Notification of Intervention" Letter must be retained in the student's cumulative file. See appendices for copies of the required notification in both English and Spanish.
- The "Parent Notification of Intervention" Letter must be sent each time the intensity of intervention *increases*—from the core to supplemental and supplemental to intensive.
- "Parent Notification of Intervention" Letter must also be sent each time the student successfully responds to intervention—moving from intensive to supplemental and supplemental to the core.

In Pitt County, these notifications and other progress monitoring are sent out at the beginning of the school year in PK-12 and anytime a student moves from one level (tier) of support to another. The problem-solving teams are responsible for creating these notifications. Each school should have a protocol for ensuring these notifications are distributed.

We received a parent letter requesting testing for their child. What do we do next?

Parent Letters Requesting Evaluation

- Each school should establish a protocol with their EC Contact for receiving and acting upon parent letters.
- Administration should include at the Beginning of the Year in the first schoolwide faculty meeting the next steps for receiving a formal parent request for testing their student(s). Additionally, this information should also be placed in the Faculty handbook that further explains the steps and legal requirements when a parent requests an evaluation.

- Faculty members (principal, regular and special education teachers) should be made aware that the receipt of a letter begins a 90-day timeline. They should know to whom to give the letters and that the matter is urgent due to the 90 timeline.
- When a request for testing is received, the PST member responsible for moving the letter forward should mark the date the school received the letter, initial it, make a copy for their records, and give the original to the Special Education contact so that an IEP initial referral can be scheduled.

- The Problem-Solving Chair should consider making a plan with EC Contact to notify them when a letter is received.
- Interventions occur concurrently with the evaluations conducted during the 90-day timeline.

A parent has the right to request, in writing, an evaluation for special education at any time. If the parent makes this request, the student must be referred to the IEP team while interventions continue. Parents must be notified, in writing, regarding a student's response to intervention at each level (tier). The parent notification of intervention must be used and a copy retained in the student's cumulative folder.

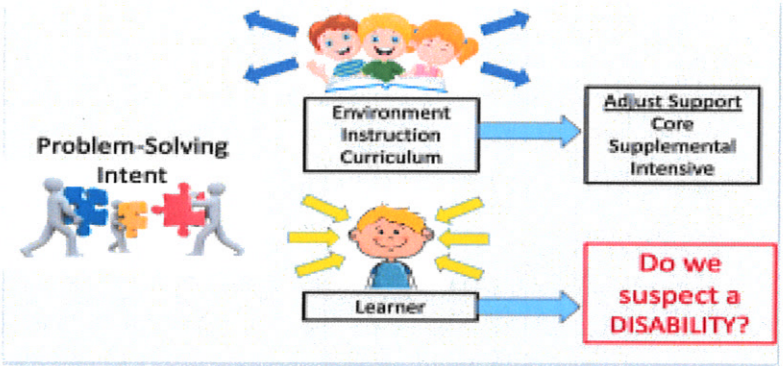
SUPPLEMENTAL MATERIALS AND APPENDICES

Essential Questions to Ask During Problem-Solving

Is a Disability Suspected? [1]

1. Has our problem-solving shifted from overall instruction, environment, and curriculum for groups of students to *individual*, student-centered concerns?
2. Are there any individual students that are consistently not making progress with interventions?
3. Are there any individual students that are unlikely to achieve grade-level standards by the end of the school year?
4. Does the data indicate that a disability causes a consistent lack of progress with an intervention?
5. Does the individual student's progress in the general curriculum have characteristics typically associated with a disability?

> *[**Tip**: Depending on the cumulative responses[2] to these questions, the problem-solving team may have a basis of suspecting a disability and, if a disability is suspected, should refer to the IEP Team.]*



[1] The problem-solving team should ask the following questions at each time progress monitoring data is discussed for groups of students *(in addition to previously established problem-solving protocol).* [2] Note: These are critical questions for problem-solving a suspected disability; however, other essential questions are possible, and responses should always be based on data.

Quick Glance "Tip Sheet" for Problem Solving Team Meetings

Before the First Meeting INTENSIVE

- Review information from tier 2 with referring teacher
- Ensure intervention documentation for tier 2 is complete
- Ensure that regular parent communication has been made by the teacher and documented on the parent conference log
- Ensure that the Parent Notification of Intervention Letter has been sent home
- Send the vision/health/hearing screening form to school nurse (vision) and speech/language clinician (hearing)*
- Send home parent notification of screenings and social/developmental history to parent
- Schedule tier 3 meeting

First PST Meeting

- Review all available data (universal screeners, probes, observational data, social development history, vision & hearing)
- Ask the five essential questions:
    - Has our problem-solving shifted from overall instruction, environment, and curriculum for groups of students to individual, student-centered concerns?
    - Are there any individual students that are consistently not making progress with interventions?
    - Are there any individual students that are unlikely to achieve grade level standards by the end of the school year?
    - Does the data indicate that the consistent lack of progress with intervention may be caused by a disability?
    - Does the individual student's progress in the general curriculum have characteristics typically associated with a disability?
- Identify the problem
- Choose research based measurable interventions and set goals
- Ask teacher to collect baseline data
- Send Parent Notification of Intervention Letter to inform parent of tier change

Second PST Meeting Review (after 3-4 weeks)

- Review Problem, Goal, and Interventions
- Review progress monitoring data and available screening data; i.e. observations, social developmental history, vision & hearing
- Ask the five essential questions:
    - Has our problem-solving shifted from overall instruction, environment, and curriculum for groups of students to individual, student-centered concerns?
    - Are there any individual students that are consistently not making progress with interventions?
    - Are there any individual students that are unlikely to achieve grade level standards by the end of the school year?
    - Does the data indicate that the consistent lack of progress with intervention may be caused by a disability?
    - Does the individual student's progress in the general curriculum have characteristics typically associated with a disability?
- Make a data-based decision
    - Move student to Tier 2 for supplemental instruction, Student has Met Measurable Goal
    - Continue Tier 3 Intervention(s), Student Making Progress Toward Measurable Goal

- Adjust and/or Add Interventions, Student Making Limited Progress Toward Measurable Goal
- Refer for Further Evaluation, Student Not Progressing Toward Measurable Goal
  - If referral to IEP team is being considered,the following documents are recommended to be included in the referral:
    - Vision/Hearing current within a year
    - Observation current within a year
    - Social Developmental History within a year
    - Any medical diagnosis
    - Data
- Refer to Section 504 Team, Student Making Limited Progress Toward Measurable Goal with the assistance of accommodations
  - If referral to 504 team, share student PST documentation with 504 Contact

- Schedule next meeting depending on data based decision (3-4 weeks)

Third PST Meeting 3rd Review Meeting

- Review Problem, Goal, and Interventions
- Review progress monitoring data and available screening data; i.e. observations, social developmental history, vision & hearing
- Ensure that all screenings are completed* and collected and that progress monitoring data is complete and included
- Ask the five essential questions:
  - Has our problem-solving shifted from overall instruction, environment, and curriculum for groups of students to individual, student-centered concerns?
  - Are there any individual students that are consistently not making progress with interventions?
  - Are there any individual students that are unlikely to achieve grade level standards by the end of the school year?
  - Does the data indicate that the consistent lack of progress with intervention may be caused by a disability?
  - Does the individual student's progress in the general curriculum have characteristics typically associated with a disability?
- Make a data-based decision:
  - Move student to Tier 2 for supplemental instruction, Student has Met Measurable Goal
  - Continue Tier 3 Intervention(s), Student Making Progress Toward Measurable Goal
  - Adjust and/or Add Interventions, Student Making Limited Progress Toward Measurable Goal
  - Refer for Further Evaluation, Student Not Progressing Toward Measurable Goal
    - If referral to IEP team is being considered,the following documents are recommended to be included in the referral:
      - Vision/Hearing current within a year
      - Observation current within a year
      - Social Developmental History within a year
      - Any medical diagnosis
      - Data
  - Refer to Section 504 Team, Student Making Limited Progress Toward Measurable Goal with the assistance of accommodations
    - If referral to 504 team, share student PST documentation with 504 Contact

Parent/Guardian Notification of Intervention
[Date]

Dear Parent/Guardian: [name]

A multi-tiered system of support (MTSS) is a framework which promotes school improvement through engaging, research-based academic and behavioral practices. All students are part of an MTSS and receive Core (Tier I) instructional supports.

As part of an MTSS and upon review of progress monitoring data, problem-solving teams identify groups of students that need additional support(s) with grade level standards in reading, math, behavior or social emotional learning. These supports are sometimes organized by tiers and are described as interventions.

This letter provides written notification of: (1) the amount and nature of student performance data that will be collected and general education services that will be provided; (2) strategies for increasing the student's rate of learning; (3) and your right to request an evaluation if you suspect your student's difficulties are because of a disability.[1]

Currently, [Student] will be receiving supports through:

Supplemental Interventions (Tier II)	Intensive Interventions (Tier III)
Reading	Reading
Math	Math
Behavior	Behavior
Social and Emotional Learning	Social and Emotional Learning

Student Performance Data to be Collected:

[insert details regarding grade level standards and progress monitoring data tools with expected benchmarks, this could be information from ECATS: MTSS Module]

General Education Services (Intervention Support) being Provided:

[insert details regarding methodology – small group, tutoring, etc. and the frequency in which services will be provided]

Strategies for Increasing the Rate of Learning:

[insert details regarding adjustments (interventions) to instruction, curriculum, and/or environment, this could also include information from ECATS: MTSS Module – Intervention Plan]

We are available to meet with you to discuss these interventions. If you have additional concerns, please let us know so that we can arrange for a parent/teacher conference.
Sincerely,

[1] For more information regarding Child Find or services for students suspected of a disability, please review the district's website at: https://www.pitt.k12.nc.us/Page/111

Copy filed in Student's Cumulative Folder

Notificación de Intervención para Padres/ Tutor Legal
[Date]

Estimado Padre y/o Tutor Legal: [name]

Un Sistema de apoyo de Varios Niveles (MTSS por sus siglas en inglés) es un marco de referencia que promueve la mejora en las escuelas, a través y enfocándose en prácticas basadas en la investigación académica y las practicas conductuales (de comportamiento). Todos los estudiantes son parte de un MTSS y reciben Apoyo Instruccional Básico (Nivel 1).

Como parte de un MTSS y ya transcurrida una revisión de la data del progreso monitoreado, entonces equipos de resolución de problemas identifican a grupos de estudiantes que necesiten apoyo adicional con los estándares de cada nivel de grado en las áreas de lectura, matemáticas, aprendizaje de comportamiento, y aprendizaje social y emocional. Este apoyo, en ocasiones está organizado por niveles y los mismos se describen como una intervención(es).

Este documento proporciona notificación por escrito de: (1) La cantidad y naturaleza de la información de rendimiento estudiantil que será recopilada y los servicios de educación general que se proporcionaran; (2) las estrategias para incrementar la tasa de aprendizaje del estudiante; (3) y su derecho a solicitar una evaluación si usted sospecha que las dificultades de su estudiante son debidas a una discapacidad.[2]

Actualmente, [Student] estará recibiendo apoyo a través de:

Intervenciones Suplementarias (Nivel II)	**Intervenciones Intensivas (Nivel III)**
Lectura	Lectura
Matemáticas	Matemáticas
Comportamiento	Comportamiento
Aprendizaje Emocional y Social	Aprendizaje Emocional y Social

Data de Rendimiento Estudiantil que será Recopilada:

[insert details regarding grade level standards and progress monitoring data tools with expected benchmarks, this could be information from ECATS: MTSS Module]

Servicios de Educación General (Apoyo en la Intervención) que se están proporcionando:

[insert details regarding methodology – small group, tutoring, etc. and the frequency in which services will be provided]

Estrategias para Incrementar la Tasa de Aprendizaje:

[insert details regarding adjustments (interventions) to instruction, curriculum, and/or environment, this could also include information from ECATS: MTSS Module – Intervention Plan]
Estamos disponibles para reunirnos con usted para discutir estas intervenciones. Si usted tiene inquietudes y/o preocupaciones adicionales, háganoslo saber, para que podamos organizar una conferencia entre padres y maestros.
Atentamente,

[2] For more information regarding Child Find or services for students suspected of a disability, please review the district's website at: https://www.pitt.k12.nc.us/Page/111
Copy filed in Student's Cumulative Folder

Parent/Teacher Conference Notes

Student's Full Name	
Date of Conference	

Purpose of Conference:

Describe the Student's Progress Using Current Performance Data:

Describe the Parent's Concerns, if any:

Description of Performance Data to be Collected:

General Education Services being Provided:

Strategies to Increase the Student's Rate of Learning:

Other Relevant Information:

Signatures of Conference Participants:

_____ _____

Parent/Guardian ***Date***

_____ _____

Teacher ***Date***

_____ _____

[Role of Others/Edit as appropriate] ***Date***

Apuntes de Conferencia de Padres y Maestros

Nombre Completo del Estudiante	
Fecha de Conferencia	

Propósito de la Conferencia:

Describir el Progreso del Estudiante Utilizando la Data de Rendimiento Actual:

Describa las Preocupaciones e Inquietudes de los Padres, si hay algunas:

Descripción de la Data de Rendimiento que se Recopilara:

Servicios de Educación General que se están Proporcionando:

Estrategias para Incrementar la Tasa de Aprendizaje del Estudiante:

Alguna otra información relevante:

Firmas de los Participantes en la Conferencia:

_____ _____
Padre y/o Encargado ***Fecha***

_____ _____
Maestra ***Fecha***

_____ _____
[Role/Edit as appropriate] ***Fecha***

Individual Problem-Solving Team Screening Notification

Referral Information						
Student Name:		Date of Referral:		Referring Teacher(s):		Parent/Guardian Name:

As we have previously discussed, your child is currently experiencing difficulty in the following areas:_____. It has been recommended that the Problem Solving Team (PST) obtain screening information on your child and if needed, offer suggestions as to how we can best serve him/her in our school. The Problem-Solving Team at our school will work collaboratively to create strategies and interventions that may help your child to be more successful at school (see Parent Notification of Intervention).

We may need further information about your child, including concerns you may have about your child at home or at school, strengths that you see in your child, and developmental information. During this process, members of the Problem-Solving Team may also observe your child in classroom settings to help us to identify and implement strategies. This problem-solving process may include one or more of the following:

- Informal reading, math, and/or written languages diagnostics/evaluations
- Review of formal assessment information
- Vision and hearing screenings
- Classroom observations
- Parent Conferences
- Use of various instructional interventions
- Review of school records/inform

During this process, we will keep you informed as we work with the Problem-Solving Team. If you have any questions, please call the school.

Sincerely,

Problem Solving Chair

Method of Delivery:
Date of Delivery:

Notificación de la evaluación del equipo de resolución de problemas individual

Información sobre la remisión						
Nombre del estudiante:		Fecha de la remisión:		Maestro (s) que		remite: Nombre del padre / tutor:

Como hemos discutido anteriormente, su hijo actualmente tiene dificultades en las siguientes áreas: _____. Se ha recomendado que el Equipo de Resolución de Problemas (PST) obtenga información sobre la evaluación de su hijo y, si es necesario, ofrezca sugerencias sobre cómo podemos servirle mejor en nuestra escuela. El equipo de resolución de problemas de nuestra escuela trabajará en colaboración para crear estrategias e intervenciones que puedan ayudar a su hijo a tener más éxito en la escuela (consulte la Notificación de intervención para los padres).

Es posible que necesitemos más información sobre su hijo, incluyendo las preocupaciones que pueda tener sobre su hijo en casa o en la escuela, las fortalezas que ve en su hijo e información sobre el desarrollo. Durante este proceso, los miembros del equipo de resolución de problemas también pueden observar a su hijo en el salón de clases para ayudarnos a identificar e implementar estrategias. Este proceso de resolución de problemas puede incluir uno o más de los siguientes:

- Diagnósticos / evaluaciones informales de lectura, matemáticas y / o lenguaje escrito
- Revisión de información de evaluación formal
- Exámenes de la vista y audición
- Observaciones en su salón de clases
- Conferencias con los padres
- Uso de intervenciones educativas
- Revisión de registros escolares / informar

Durante este proceso, lo mantendremos informado mientras trabajamos con el equipo de resolución de problemas. Si tiene alguna pregunta, llame a la escuela.

Atentamente,

Silla de resolución de problemas
Método de entrega:
Fecha de entrega:

Pitt County Schools Social Developmental History

Demographic Information	
Student Name:	Date of Birth:
Person Completing Form:	Relationship to Student:
Student's address:	Phone:
To whom does the student live? Both Parents Mom Dad Other Guardian Foster Parent Group Home	
If the student does NOT live with parents, have parental rights been legally terminated? Yes No	
If a parent is not in the home, how often does the student see them? Daily Weekly Monthly Yearly Never	
Primary language spoken in the home: _____ Primary language used by the student: _____	

Family History					
Is there any immediate family (parents, siblings, grandparents) history of:					
	Anxiety disorder		ADHD		Autism Spectrum Disorder
	Bipolar Disorder		Conduct Disorder		Depression
	Drug or Alcohol abuse		Schizophrenia		Other:
Is there any family history of intellectual disability? Yes No Relationship to student: mom dad grandparent brother sister Other: _____					
Has the student experienced any of the following?					
	Separation or Divorce of parents		Marriage/Remarriage of parents		
	Death of an immediate family member		Chronic illness/life-threatening injury of self or family		
	Placed in foster care		Physical abuse or neglect of themselves		
	Witnessed abuse of a family member		Emotional abuse or neglect of themselves		
	Student involvement in legal/law enforcement issues		Parent involvement in legal/law enforcement issues		
	Homelessness		Student/family involvement with DSS		
	Been significantly impacted by a natural disaster		Witnessed violence (shooting, robbery, etc)		

Health Information
Please list any diagnosed physical or genetic conditions for your child:
Please list any diagnosed mental health conditions for your child:
Does your child receive any mental health/therapy services? Yes No
Please list any daily, prescribed medications your child takes:
Has the child ever suffered a serious head injury? Yes No If so, were they unconscious as a result? Yes No Are there any lasting side effects? Yes No

Has the child experienced any of the following:					
	Frequent ear infections		Frequent stomach aches		Weight problems (under/over)
	Frequent colds		Lead poisoning		Self-harm (cutting, etc)
	Excessive high temperatures		Meningitis		Attempted suicide
	Asthma		Seizures		Eating disorder
	Allergies		Injured in car accident		Born addicted to any substances

What time does the student typically go to bed? _____ How many hours of sleep do they typically get? _____ Do they sleep through the night? Yes No Do they have trouble falling asleep? Yes No
How much screen time (phone, tv, video game system/pc) does the student have daily? _____
Does the student need: glasses hearing aids not applicable
Does the student have access to adequate nutrition and housing? Yes No

Developmental Information: Birth to Age 3 Between birth and age 3, were any of the following areas a concern?					
Physical Development					
	Sitting		Crawling		Walking
	Catching/throwing a ball		Running		Coloring/drawing
Communication Development					

	Spoke first word		Spoke sentences		Appropriate eye contact w/others
	Looks up/orients to their name		Taking turns in conversation		Has their own language/jargon
	Repeats words or phrases to an unusual degree		Repeats questions instead of answering them		
Daily Living Skills/Behaviors					
	Feeding self		Dressing self		Toilet training
	Changes in routine seem to be stressful.		Not easily calmed		Gets upset very quickly and you can't see the reason why
	Frequent tantrums for no reason you can see		Over or under reacts to sensory stimuli		
Social Skills					
	Prefers to be alone/play alone		Notices when others are sad or happy, etc		Does better in a structured setting than a social setting
	Talks about a variety of topics in conversation with others				

Had the child's pediatrician expressed any concerns with their development? Yes No
Had you consulted with the child's pediatrician about any of these concerns? Yes No

Social/Emotional Skills and Behaviors: Present Day					
Please check any that are a FREQUENT concern WHEN COMPARED to same-age peers					
	Frequent tantrums		Verbal aggression		Withdrawn/Moody
	Impulsive to a concerning level		Excessively disorganized		Overly sensitive/Cries easily
	Avoids difficult tasks/Gives up easily		Difficulty following directions		Physical aggression
	Difficulty making friends		Fearful/anxious		Ritualistic behaviors
	Difficulty with adult relationships		Excessive daydreaming		Doesn't work independently
	Wants to play/be alone		Short attention span		Over active
	Able to express wants/needs				

Education Information	
Did the student attend preschool? Yes No	Did the student attend kindergarten? Yes No
Was the student ever homeschooled? Yes No If so, what curriculum was used? _____ What was registered name of the school? _____	
Has the student repeated a grade? Yes No Have they skipped a grade? Yes No If so, what grade? _____	
Has the student been frequently absent (more than 10 days per year) from school? Yes No	
Has the student switched schools in the past? (ie., moved from one elementary school to another) Yes No	

Has the student previously had any of the following:					
	An IEP/special education		A 504 plan		A behavior plan
	Gifted services		School-based intervention		Private tutoring
	Private speech services		Private physical therapy		Private occupational therapy

Strengths and Needs Everyone has both strengths and needs!
What do you most enjoy about your child?
What do you find most difficult about raising your child?
What do you find works well at home to address any of these concerns?
Does the student appear to be concerned about their performance in school? Yes No

Hobbies/Activities					
Check all activities in which this child participates in with the family or community:					
	Movies or Television		Meals		Conversations
	Visits with relatives		Shopping		Church
	Video games		Board or other games		Trips

Pitt County Schools Social Developmental History (Spanish)

Demographic Information	
Nombre de Estudiante:	Fecha de Nacimiento:
Persona Llenando Formulario:	Relación al Estudiante:
Direcion del Estudiante	Telefono:
Con quien vive el estudiante? Los dos padres Mama Papa Otro Tutor Padres de Crianza Hogar Comunitario	
Si el estudiante esta en cuidado de crianza, se han terminado los derechos de los padres? Si No N/A	
Si un padre no esta en casa, con qué frecuencia los ve el estudiante? Diario Semanal Mensual Anual Nunca	
Lenguaje primordial que se usa en casa: _____ Lenguaje primordial que usa el estudiante: _____	

Historia Familiar					
¿Existe algún antecedente familiar inmediato (padres, hermanos, abuelos) de:					
	Trastorno de ansiedad		Desorden hiperactivo y deficit de atención		Desorden del espectro autista
	Trastorno bipolar		Desorden de conducta		Depresion
	Abuso de drogas o alcohol		Esquizofrenia		Otro:
¿Hay antecedentes familiares de discapacidad intelectual? Sí No Relación con el estudiante: Mamá Papá Abuelo Hermano Hermana Otro: _____					

¿Ha experimentado el estudiante alguno de los siguientes?			
	Separación o divorcio de padres		Matrimonio/Nuevo matrimonio de los padres
	Muerte de familiar inmediato		Enfermedad crónica/lesiones personales o familiares que ponen en peligro su vida
	Colocado en cuidado de crianza		Abuso físico o negligencia de sí mismos
	Presencia de abuso de un miembro de la familia		Abuso emocional o descuido de sí mismos
	Participación del estudiante en asuntos legales/policiales		Participación de los padres en asuntos legales/policiales
	Indigencia		Participación del estudiante/familia con DSS
	Ha sido afectado significativamente por un desastre natural		Violencia presenciada (tiroteo, robo, etc.)

Información de Salud
Nombre las afecciones físicas o genéticas diagnosticadas para su hijo:
Nombre las condiciones de salud mental diagnosticadas para su hijo:
¿Recibe su hijo algún servicio de salud/terapia mental? Sí No
Nombre los medicamentos recetados que toma su hijo diario:
¿Ha sufrido el niño alguna vez una lesión grave en la cabeza? Sí No Si es así, ¿estaban inconscientes como resultado? Sí No ¿Hay efectos secundarios duraderos? Sí No

¿Ha experimentado el niño alguno de los siguientes:					
	Infecciones frecuentes del oído		Dolores de estómago frecuentes		Problemas de peso (por debajo/por encima)
	Resfriados frecuentes		Envenenamiento por plomo		Autolesión (cortarse, etc.)
	Temperaturas excesivamente altas		Meningitis		Intento de suicidio
	Asma		Convulsiones		Desorden alimenticio
	Alergias		Lesionado en accidente automovilístico		Nacido adicto a cualquier sustancia

¿A qué hora suele acostarse el estudiante? _____ ¿Cuántas horas suelen dormir? _____ ¿Duermen toda la noche? Sí No ¿Tienen problemas para dormir? Sí No
¿Cuánto tiempo frente a la pantalla (teléfono, televisión, sistema de videojuegos / computadora) tiene el estudiante diariamente? _____
¿Necesita el estudiante?: anteojos Audífonos no aplica
¿Tiene el estudiante acceso a una alimentación y una vivienda adecuadas? Sí No

Información sobre el desarrollo: desde el nacimiento hasta los 3 años Entre el nacimiento y los 3 años, ¿alguna de las siguientes áreas fue motivo de preocupación?					
Desarrollo fisico					
	Sentarse		Gateo		Caminar
	Atrapar/lanzar una pelota		Correr		Pintar/dibujar
Desarrollo de la comunicación					
	Habló la primera palabra		Habló oraciones		Contacto visual apropiado con otros

	Busca/se orienta a su nombre		Turnos en la conversación		Tiene su propio idioma/jerga
	Repite palabras o frases en un grado inusual		Repite preguntas en lugar de responderlas		
Habilidades/comportamientos de la vida diaria					
	Auto alimentarse		Vestirse solo		Entrenamiento de Baño
	Los cambios en la rutina parecen ser estresantes.		No se calma fácilmente		Se molesta muy rápido y no ve el motivo
	Berrinches frecuentes sin motivo aparente		Más o menos reacciona a los estímulos sensoriales.		
Habilidades sociales					
	Prefiere estar solo/jugar solo		Se da cuenta cuando los demás están tristes o felices, etc.		Funciona mejor en un entorno estructurado que en un entorno social
	Habla sobre una variedad de temas en conversaciones con otros.				

¿El pediatra del niño expresó alguna inquietud sobre su desarrollo? Sí No ¿Ha consultado con el pediatra del niño sobre alguna de estas preocupaciones? Sí No

Habilidades y comportamientos sociales/emocionales: actualidad					
Marque cualquiera que sea una preocupación FRECUENTE EN COMPARACIÓN con compañeros de la misma edad					
	Rabietas frecuentes		Agresión verbal		Retirado/se molesta facilmente
	Impulsivo a un nivel preocupante		Excesivamente desorganizado		Demasiado sensible/Llora fácilmente
	Evita tareas difíciles/Se rinde fácilmente		Dificultad para seguir instrucciones		Agresión física
	Dificultad para hacer amigos		Temeroso/ansioso		Comportamientos ritualistas
	Dificultad con las relaciones adultas		Soñar despierto excesivo		No funciona de forma independiente
	Quiere jugar/estar solo		Periodo de atención corto		Hiperactiva
	Capaz de expresar deseos/necesidades				

Información sobre Educación

¿Asistió el estudiante a la escuela preescolar? Sí No	¿Asistió el estudiante al jardín de infantes? Sí No

¿El estudiante alguna vez fue educado en casa? Sí No
Si es así, ¿qué plan de estudios se utilizó? _____
¿Cuál fue el nombre registrado de la escuela? _____

¿Ha repetido el alumno algún grado? Sí No ¿Se han saltado un grado? Sí No Si es así, ¿qué grado? _____

¿El estudiante ha estado ausente con frecuencia (más de 10 días por año) de la escuela? Sí No

¿El estudiante ha cambiado de escuela en el pasado? (es decir, se mudó de una escuela primaria a otra) Sí No

¿El estudiante ha tenido anteriormente alguno de los siguientes:

	Un IEP/educación especial		Un plan 504		Un plan de comportamiento
	Servicios para superdotados		Intervención escolar		Tutoría privada
	Servicios de habla/lenguaje privados		Fisioterapia privada		Terapia ocupacional privada

Fuerzas y Necesidades ¡Todos tienen fuerzas y necesidades!
¿Qué es lo que más disfrutas de tu hijo?
¿Qué le resulta más difícil de criar a su hijo?
¿Qué le parece que funciona bien en casa para abordar cualquiera de estas preocupaciones?
¿El estudiante parece estar preocupado por su desempeño en la escuela? Sí No

Pasatiempos / Actividades					
Marque todas las actividades en las que este niño participa con la familia o comunidad:					
	Películas o televisión		Comidas		Conversaciones
	Visitas con familiares		Compras		Iglesia
	Videojuegos		Juegos de mesa u otros		Excursiones
	Leyendo		Fuera de juego		Juego interior
Otro:					
¿El estudiante participa en algún club de la escuela?					

¿Cuál es la golosina favorita del estudiante?

Comentarios Adicionales

VISION, HEARING, HEALTH SCREENING

Student: _____ School: _____ DOB:_____

***HEARING SCREENING:** Date:_____ Signature of Person Collecting Screening: _____

_____dB (Intensity Level) _____HZ (Frequencies)
Pass/Fail (Circle results) Instrument used: audiometer____ other(specify)_____
Follow-up if screening failed: _____
_____
_____

****VISION SCREENING:** Date: _____ Signature of Person Conducting Screening: _____

FAR R20/_____ L20/_____ Both 20/_____ Instrument Used: Eye Chart____ Other (specify): _____
NEAR R20/_____ L20/_____ Both 20/_____ Instrument Used: Eye Chart____ Other (specify): _____
Near:____ Pass____Fail Far ____ Pass____Fail

Follow-up if screening failed: _____
_____
_____

*****HEALTH SCREENING:** Date:_____ Signature of Person Collecting Screening: _____

HEIGHT: _____Feet ____Inches
WEIGHT: _____Pounds
Medication(s): _____

Health Problems: _____
_____
_____

Check Purpose:
___ PST Referral
___ EC Referral: Change in Identification
___ EC Referral: Adding Secondary Disability
___ EC Referral: Initial/Out-of-State Transfer
___ Other:

OBSERVATION DATA

Two observations in different settings are required as part of the EC evaluation. It is recommended these observations be completed when a student begins receiving intensive interventions. Observations may also be required if a student's area of EC eligibility is changed or if a secondary disability is added. **Observations must be completed by a licensed professional staff member who is not the student's teacher.**

Student Name _____ Grade _____

Observer_____ Position_____ Date_____

Class Observed_____ Teacher _____

Activity Observed: ___ One-to-One ___ Small Group ____ Independent ___ Large Group
___ Transition ___ Lunch ____ Outside Play ___ P.E.
___ General Ed Class ___ EC Class

Student Behaviors:

___ Attentive
___ Talks out of turn
___ Easily distracted
___ Overactive, restless
___ Immature behaviors
___ Withdrawn
___ Works independently
___ Disruptive
___ Trouble finding place
___ Disorganized work habits
___ Careless, doesn't complete tasks
___ Constantly out of seat
___ Contributes to class discussion
___ Short attention
___ Displays leadership ability
___ Easily frustrated
___ Aggressive
___ Obscene language
___ Repetitive behaviors
___ Avoids eye contact
___ Demands excessive attention
___ Daydreams
___ Avoids groups
___ Does not follow directions
___ Unusual language
___ Speech problems
___ Other

Additional comments addressing/summarizing students academic needs (strengths/weaknesses), behavioral skills (strengths/weaknesses) and functional skills, (including any apparent functions of behavior observed, i.e., gain attention, avoids work, etc.)

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