ParaEducators are an integral part of the educational team. The title of your job helps to identify the role of the paraeducator as an active member of the educational team. The prefix “para” is defined as “being beside, nearby, or along with/side.” This is coupled with the word “educator” which is defined as “one who develops or trains the mind, capabilities, or character of another by instruction or study.” The educator within the structure of the classroom is the teacher. Therefore, as ParaEducators, you work beside or along with the teachers. In addition, to providing instruction to students, teachers are also responsible for managing the classrooms. Final decisions regarding the overall instruction of the classroom, methods utilized, and management of the classroom belong to the teacher. The role of the paraeducator is to assist the teacher in these areas.

Likewise, ParaEducators are expected to conduct themselves in a manner worthy of the profession. As paraeducators in the classroom, you are often closer to students than anyone else. You must be aware of the examples that you set. A secondary function in the classroom is to be a role model for students. Constantly be aware of your behavior and what it conveys to students.

Many times our students perceive us as another teacher in the classroom. The nature of the paraeducator’s role provides more opportunities to spend an increased amount of time with some students. Because of this, many times you are the recipients of a tremendous amount of privileged information. This information must be held to high standards of confidentiality. However, if information pertains to abuse or neglect of the child, then paraeducators should follow procedures set up by building supervisors/principals.

As paraeducators your duties are often similar to those of teachers. Therefore, your code of ethics is similar. Your code of ethics should be based upon respect for others and a belief in human dignity. Respect should extend to yourselves, the students, special education and general education teachers, parents, administration, and other staff members.

Three ethical standards for ParaEducators are:

1. **Confidentiality.** ParaEducators respect student and school confidentiality. You should discuss a student’s performance only with staff members serving the student with the teacher’s approval. Questions presented by parents or other staff members should be directed to the teacher.

2. **Staff Relations.** ParaEducators must support the teaching methods, strategies, and materials utilized by the teacher in the presence of students, parents, or others. Questions or concerns regarding these should be discussed privately with the teacher.

3. **Assigned Responsibilities.** ParaEducators should follow methods of instruction and behavior management consistent with the teacher. Any other methods must be discussed with and approved by the teacher.
The primary consideration in answering questions about students with special needs is a respect for confidentiality.

Remember, all students look to adults as examples. The best way to encourage interaction and understanding between students with disabilities and their non-disabled peers is to model respect, tolerance, patience, and acceptance.
MY ROLES AND RESPONSIBILITIES

ParaEducators work as part of the educational team, in a supportive means. Your role is not teacher, but assistant. However, in order to be a close working team, our duties may sometimes overlap with the duties of the teacher. As we discussed earlier, the overall instructional decisions are to be made by the teacher. But to establish optimum performance as a team, a specific time should be set aside for teachers and paraeducators to discuss students’ needs and to plan strategies.

Planning Sessions may include:

1. Information sharing- background on the students, expectations, and procedures for students’ achievements.
2. Defining the teaching task-establishing clear objectives and developing specific lesson plans.
3. Continuous planning-based on evaluation of student achievements and newly defined needs.

Tips for ParaEducators:

1. Communicate with your teacher on a daily basis. This is essential in order to build a program which addresses the diverse needs of students with disabilities.
2. Offer suggestions and ideas.
3. Remember that final decisions are up to the teacher.
4. Give feedback to the teacher regarding student progress and problems.
5. Contribute to special class projects and special interest centers.
6. Ask Questions. If you don’t, others will just assume you know the answers.
7. Work as a team member. Offer to do something to help equalize the workload.
8. Be familiar with the academic approach of the teacher.
9. Become familiar with the needs of the children in the classroom.
10. Be familiar with academic materials and equipment used in the classroom.
11. Be sensitive to the feelings of children.
12. Support and respect children and adults at all times.
13. Demonstrate consistency when enforcing rules and implementing rewards and consequences.
14. Offer any practical assistance that the teacher deems necessary for the success of the program.
15. Assist substitute teachers with daily routine and specific needs of the students.
It is very important to become familiar with the students you will work with, including their likes and dislikes, their strengths and weaknesses, their areas of difficulty, and their special needs. This knowledge will assist in the development of a healthy relationship with students. The more you understand about students, the more effective you can be in working with them. You should observe how and when the teacher helps a student with an issue to better learn preferred learning styles and methods to address them.

ParaEducators should be aware of the organization of the classroom and the daily routine in which they are expected to operate. Being familiar with the building and surroundings, and school policy is necessary.

Team work between the teacher and paraeducator is crucial. Therefore, paraeducators need to develop a thorough understanding of the teacher’s methods and strategies regarding instruction and classroom management. Effective discipline is consistent. Therefore, all parties need to know proper implementation of strategies and methods for discipline.

Take the initiative as the paraeducator to ask questions to clarify unclear procedures. Do not allow situations to continue that perpetuate misunderstanding. Clear communication is a necessity.

It is extremely important that paraeducators maintain confidentiality. It’s not just best practice.....It’s the LAW! Failing to maintain confidentiality puts both the paraeducator and the school in a liability situation. Confidentiality is a guaranteed right to students and parents under FERPA, Article 7 and IDEA. To ensure that we are observing standards of confidentiality, discuss student progress or needs only with staff who work with the child. As paraeducators it is not our right or responsibility to meet with parents or staff to discuss student progress. This is the role of the teacher. As paraeducators we are particularly susceptible to temptations that breech confidentiality. Because you are members of the communities in which you work, you know many parents and students on a more personal level. It is very easy to get caught in the confidentiality trap. When approached by acquaintances or friends in the community, always be aware of confidentiality regarding our students and our school.

As paraeducators, you act in a supportive role. Duties may encompass a broad range that includes activities related to the maintenance of organization in the classroom assistance with assessment, reinforcement and management of behavior, and data recording. Clerical duties may also be expected to assist in preparation of materials, operation of equipment, supervision of non-instructional activities, and assisting students with personal care. Flexibility regarding the duties of paraeducators is necessary in order to provide the best support for the unique needs of students with disabilities in our classrooms. ParaEducators may also be required to attend in-service and professional development opportunities to enhance knowledge of strategies and methods.
REMEMBER THE THREE Rs.

Re-teach  any material the student does not understand or need extra help with.

Review  to be sure the student understands and retains previously taught material.

Re-enforce  daily what students know and learn.

ParaEducators in the General Education Classroom should:

• Support the use of individual student programs
• Work with a variety of students who may have diverse learning needs
• Provide support, suggestions, and feedback regarding the strategies & instruction that have been implemented
• Become a team member for some planning and evaluating of individual student programs
• Provide all students with opportunities for positive learning and interpersonal experiences
• Provide a variety of supports to both students and teachers
CONFIDENTIALITY

As paraeducators you are members of an educational team. Educational team members share considerable information about individual students and situations related to performance in educational settings. Access to student information is necessary for team members to provide special instruction and to support the educational progress of students with disabilities. It is essential that each team member respect confidentiality standards. Failing to observe confidentiality is not only disrespectful, but it is illegal.

All information about students and/or employees is treated with the strictest confidence. Disclosure of confidential information gained through employment is an act of prohibited conduct subject to formal disciplinary action. Maintaining confidentiality is a very serious responsibility held by all professionals, including paraeducators.

CONFIDENTIALITY GUIDELINES

1) Questions from parents regarding their children should be directed to the teacher.

2) Never discuss information about a student with parents of another student or any other individuals uninvolved in the delivery of educational services.

3) Never discuss information about a student with other students. Refrain from making statements about students in the presence of other students. Students tend to hear everything even if that is not our intent.

4) Become familiar with confidentiality policies specific to your school and your supervising teacher.

5) Follow proper procedure to view student files.

6) Never discuss information about a student in a public place such as: the teachers lounge, hallway, grocery store, etc.

7) When you talk about your job never use student names, specific information about students, or any other identifiable information.

8) Maintain personal notes regarding student educational performance/behavior in a folder in a secured location.

9) If you are unsure about the need for confidentiality of certain information, then don’t share it. When in doubt, it is best to say nothing.

10) Direct specific questions about students from staff members or other building personnel to the teacher.
### Family Educational Rights and Privacy Act (FERPA)

This federal law applies to all students in schools that receive federal funds, not just students with disabilities. It gives parents of children under age 18 and students over age 18 the right to see and amend the educational record. FERPA protects the information contained in the record from disclosure to any unauthorized persons. Educational records are any type of records directly related to the student, which are kept by a school or a person acting on behalf of the school. These include, but are not limited to: paper files, computer data, or other forms of records. However, private notes made and kept by one person and not shown or shared with anyone else are not considered educational records.

### Individuals with Disabilities Education Improvement Act (IDEIA) (2004)

The federal law IDEIA is the primary law governing special education. It requires schools to:

1. Locate, identify, and evaluate children with disabilities.
2. Provide a free, appropriate, public education (FAPE) in the least restrictive environment (LRE), to all children whose disabilities meet eligibility standards set by the state; and
3. Hold an annual case conference to develop an individualized education program (IEP) for each child.

IDEIA also requires the school to protect the confidentiality of “personally identifiable information” information by which a student’s identity could reasonably be determined, that is obtained or used in connection with the students special education. Each state is required by IDEIA to develop procedures for the implementation of IDEIA.

### Article 7 - Indiana’s Special Education Rule

Article 7 contains Indiana’s special education procedures. Under Article 7, each school must have a written confidentiality policy and procedure to ensure the protection of personally identifiable information. Article 7 also establishes procedures for parents to review and amend educational records.
CONFIDENTIALITY DOs AND DON’Ts

<table>
<thead>
<tr>
<th>CONFIDENTIAL STUDENT INFORMATION SHARING DOs</th>
<th>CONFIDENTIAL STUDENT INFORMATION SHARING DON’Ts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Do treat all information regarding students with respect.</td>
<td>1. Do not discuss confidential student information in public places (grocery store) or in educational settings (teacher’s lounge, hallway) where information may be inadvertently disclosed.</td>
</tr>
<tr>
<td>2. Do share information regarding student academic, behavioral, or family situation only with staff that have academic or supervisory responsibility for the student.</td>
<td>2. Do not discuss student academic, behavioral, or family situations with anyone who does not have academic or supervisory responsibility for the student.</td>
</tr>
<tr>
<td>3. Do discuss confidential student information in educational settings that are private enough that confidential information is not inadvertently disclosed.</td>
<td>3. Do not leave confidential student information where those without legitimate educational purpose may see it.</td>
</tr>
<tr>
<td>4. When in doubt as to whether to disclose information, do refrain from sharing the information and ask a supervisor or an administrator.</td>
<td></td>
</tr>
<tr>
<td>5. Do store confidential student information in a secure place.</td>
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</tbody>
</table>
Special Education ParaEducator
Mild Disabilities

Primary Role:

Assist and support professional staff in a variety of instructional and related school activities. Specific duties that are assigned to a ParaEducator are dependent on the age, the child’s disability, and supportive services required for the child to benefit from special education. The list cannot cover all tasks since some services are specific only to an individual child.

Position Responsibilities:

1. Maintain the high level of ethical behavior that is expected of all staff.

2. Maintain confidentiality of information about students and staff.

3. Provide support for students as planned by professional staff.

4. Maintain a professional relationship with staff. Ask for assistance and/or specific guidance when unsure of specific directives.

5. Participate in in-service and training.

6. Assist substitute teachers by providing necessary information on classroom routine and special student needs in the regular teacher’s absence.

7. Model appropriate interaction skills, social skills, and conflict management in the school.

8. Provide short-term coverage for professional and ParaEducator peers.

9. Perform other duties as assigned by principal or teacher.

10. Communicate and work collaboratively with general education teachers, administrators, and other special education service providers/consultants.

11. Follow team-prescribed procedures for academics, social, communication, and behavioral intervention plans.

12. Demonstrates punctuality.

13. Assist in emergency evacuation or protection of students as assigned.

14. Assist in supervision of students at restrooms, in cafeteria, in community, or on the playground as directed by teacher and/or principal.
15. Teach language/vocabulary development.

16. Discuss with student social or academic problems.

17. Assist a student with an assignment from a general education classroom.

18. Assist students in maintaining homework logs and organizing student notebooks.

19. Adapt curriculum and modify assignments for students attending general education classes under teacher directive.

20. Write dictated stories/information provided by students.

21. Reinforce proper speech articulation for individual students as directed by speech pathologists.

22. Carry out procedures for behavior modification as outlined in students’ IEP or as directed by the classroom teacher. This may require observation and recording of student behavior and/or physically restraining a student in therapeutic holds only after restraint training.

23. Assist the teacher in daily planning.

24. Set-up and operate audio-visual equipment, computers, and assistive technology devices for instructional purposes.

25. Attend general education classes with special education students in order to facilitate learning. This may require the need to adapt and modify the assignments under teacher directive.

26. Assist with classroom organization and classroom management as directed.

27. Escort students to regular classroom activities, therapy sessions, lunchroom, restroom, buses, etc. under the direction of the teacher.

28. Assist students, individually or in groups, with lesson assignments, social skills, vocational skills, daily living skills, etc. to present or reinforce learning concepts by using a variety of methods and techniques, while adapting instructions and work to meet individual student needs.

29. Administer and grade examinations.

30. Assist with clerical duties. These may include, but are not limited to, taking attendance, lunch counts, making copies, setting up bulletin boards, grading papers, recording grades, field trip forms, correspondence forms, and data collection.

31. Assist with developing/creating learning aids, centers, and/or materials.
Special Education ParaEducator
Severe Disabilities

Primary Role:

Assist and support professional staff in a variety of instructional and related school activities. Specific duties that are assigned to a ParaEducator are dependent on the age, the child’s disability, and supportive services required for the child to benefit from special education. The list cannot cover all tasks since some services are specific only to an individual child.

Position Responsibilities:

1. Maintain high level of ethical behavior that is expected of all staff.

2. Maintain confidentiality of information about students and staff.

3. Provide support for students as planned by professional staff.

4. Maintain a professional relationship with staff. Ask for assistance and/or specific guidance when unsure of specific directives.

5. Discuss assigned teaching area with classroom teacher to coordinate instructional efforts.

6. Participate in in-service and training.

7. Provide short-term coverage for professional and ParaEducator peers.

8. Perform other duties as assigned by principal or teacher.

9. Demonstrate punctuality.

10. Assist in emergency evacuation or protection of students as assigned.

11. Assist in supervision of students at restrooms, in cafeteria, in community, or on the playground as directed by teacher and/or principal.

12. Provide supervision and instruction for students in Community Based Instruction, on public transportation, on job sites, and recreational activities.

13. Assist substitute teachers by providing necessary information on classroom routine and special student needs in the regular teacher’s absence.

14. Model appropriate interaction skills, social skills, and conflict management in the school.
15. Assist students in functional living skills including hygiene, operating appliances, and other home-living activities.

16. Instruct students in language development and alternate communication systems.

17. Assist students with adaptive devices as needed.

18. Assist students in the development of fine- and gross-motor skills.

19. Adapt curriculum and modify assignments for students attending general education classes under teacher directive.

20. Write down dictated stories/information provided by students.

21. Reinforce proper speech articulation for individual students as directed by speech pathologists.

22. Assist students, individually or in groups, with lesson assignments, social skills, vocational skills, daily living skills, etc. to present or reinforce learning concepts by utilizing a variety of methods and techniques, while adapting instructions and work to meet individual student needs.

23. Attend general education classes with special education students in order to facilitate learning. This may require the need to adapt and modify the assignments under teacher directive.

24. Follow team prescribed procedures for academics, social, communication, and behavioral intervention plans.

25. Assist with classroom organization and classroom management as directed.

26. Communicate and work collaboratively with general education teachers, administrates, and other special education service providers/consultants.

27. Escort students to regular classroom activities, therapy sessions, lunchroom, restroom, buses, etc. under the direction of the teacher.

28. Record behavioral and academic data on individual students.

29. Carry out procedures for behavior modification as outlined in the students’ IEP or as directed by the classroom teacher. This may require observation and recording of student behavior and/or physically restraining student in therapeutic holds only after restraint training.

30. Participate in lifting and transferring of students.

31. Assist with getting students on and off the bus.
32. Assist in all related service including occupational therapy, physical therapy, catheterization, feeding tube, etc. of individual students when needed.

33. Attend to toileting, feeding, and personal hygiene needs of student as needed (e.g., changing diapers, dress, cleaning up).

34. Assist with clerical duties. These may include, but are not limited to, taking attendance, lunch counts, making copies, setting up bulletin boards, grade papers, record grades, field trip forms, correspondence forms, and data collection.

35. Assist with developing/creating learning aids, centers, and/or materials.

36. Assist the teacher in daily planning.

37. Set-up and operate audio-visual equipment, computers, and assistive technology devices for instructional purposes.
What is special education?

Special education is specially designed instruction, provided at no cost to the parent or student, that meets the unique educational needs of the student.

What laws govern special education?

The federal law which supports special education for children with disabilities ages 3-21 is called the Individuals with Disabilities Education Improvement Act (IDEIA). Article 7 is the rule which governs special education in the state of Indiana. Both laws ensure the provision of:
- free and appropriate public education;
- education in the least restrictive environment;
- related and supportive services to assist the student; and
- assessment to determine initial eligibility; and each three years thereafter.

Who is eligible for special education?

Special education must be provided to children ages 3-21 who:
- have been evaluated & identified as having unique learning needs;
- have been determined, through evaluation, to have one or more of the 13 disabilities covered by Article 7; and
- have a disability that requires special education.

What is the first step in obtaining special education and related services?

Before a student may receive special education services, an educational evaluation must be conducted to determine the student’s strengths and unique needs.

How does a student receive an evaluation?

1. The school or parent may initiate a request to evaluate the student. Parents must be notified in writing, and must give written consent before a student is evaluated for the first time.

2. If the evaluation results, in conjunction with the case conference committee, determine that the child meets the definition of one or more of the Article 7 disabilities and needs special education; then the student’s Individualized Education Program (IEP) is designed.

What happens after evaluation?

When the educational evaluation is completed, a case conference committee meeting will be held. The committee, including the parents, will:
- determine eligibility for special education. If the student is eligible:
- develop an individualized education program; and
- determine the appropriate education services.
What is an Individualized education Program (IEP)?

An Individualized Education Program (IEP) is a plan written by the case conference committee which includes:

- the teacher, parent(s) or guardian(s), and any individual involved in education;
- a description of the student’s present level of performance. This may include information concerning academic achievement, social adaptation, pre-vocational and vocational skills, sensory and motor skills, self-help skills, and speech and language skills;
- annual goals, including short-term instructional objectives, to be accomplished in a specified time period;
- the specific special education and related services to be provided;
- a description of how the student’s progress will be measured;
- a statement of when services are to begin and how long they are expected to last;
- the proposed placement which reflects the least restrictive environment (LRE);
- the extent to which the student will participate in general education, including non-instructional, non-academic, and extra-curricular activities; and
- for students age 14 or entering the freshman year of high school, a statement of necessary transition services.

The school must give written notice of the proposed placement or denial of placement which includes a copy of the written report of the case conference committee meeting and a copy of the IEP. The IEP must be in place and the parent must have given written consent before special education services can begin.

How is the IEP implemented?

The IEP document is not a file document, but a vital element in the teaching, learning and accountability process. Implementation includes:

- ongoing collaboration between general education and special education staff regarding curriculum, instructional materials, instructional delivery, behavior management, and grading;
- provision of the least restrictive environment;
- monitoring and support across all environments by the teacher of record.

What is Inclusion?

Inclusion is a system of service delivery in which all children are educated in the general education environment. Some characteristics of an inclusive program are:

- collaborative lesson planning among general education and special education staff;
- collaborative or team teaching approaches to instruction;
- the provision of special education services and/or related services in the general education setting;
- provisions of adaptations & accommodations in the general education setting;
- tiering or differentiating instruction to cater to a diverse group of students.
STRATEGIES FOR ANSWERING STUDENT QUESTIONS ABOUT STUDENTS WITH DISABILITIES IN THE INCLUSIVE SETTING

1) Try to divert conversation to a specific behavior, condition, or characteristic instead of the child with the disability.

2) Make sure questions are answered. Don’t pass along wrong or unnecessary information. The more you know, the better prepared you will be when questions arise.

3) Don’t alarm students by giving too much detail or description of disabilities or disabling conditions.

4) Encourage students to offer help and support, but emphasize the importance of independence for students with disabilities.

5) Refrain from sharing any information with students that would infringe upon the confidentiality rights of the child with a disability.

6) If you are unsure how to address the questions presented by students, then approach the supervising teacher or an administrator.

7) Choose your words carefully when asking students to offer assistance to a child with a disability. Instead of saying, “Will you take him?” say “Would you like to go with...?” This implies an more equilateral relationship between the students.

RESPONDING TO COMMENTS OR QUESTIONS

<table>
<thead>
<tr>
<th>Student Comments/Questions</th>
<th>Possible Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is wrong with him/her?</td>
<td>He/she is different from you in some ways, but alike in some others.</td>
</tr>
<tr>
<td>Why does she get the easy work. That’s not fair!</td>
<td>What is fair, when everybody gets the same thing at the same time or when everybody gets what he/she needs? It is fair because _______ is working on what he/she needs and you are working on what you need. What you need, you will have too.</td>
</tr>
<tr>
<td>He/she looks funny.</td>
<td>You’re not used to being around someone who looks different. We all look different in one way or another. Did you know that __________ sometimes causes a person to look different?</td>
</tr>
<tr>
<td>He/she sounds funny.</td>
<td>You are having a hard time understanding _____; some people talk differently. Maybe you could try really hard to listen and you might understand.</td>
</tr>
<tr>
<td>How does he/she eat?</td>
<td>He/she eats the same as you, but may need a little extra help.</td>
</tr>
</tbody>
</table>
ARTICLE 7 AREAS OF ELIGIBILITY

Autism (ASD)

Autism Spectrum Disorder (ASD) is a group of developmental disabilities characterized by deficits in social interaction, communication skills, and learning. Autism is classified as a spectrum due to the varying behaviors and abilities that accompany the disorder. Individuals with ASD differ greatly in their actions and abilities. Even individuals diagnosed with ASD differ greatly from one another. Conditions included under the term Autism Spectrum Disorder include: autistic disorder, pervasive developmental disorder-not otherwise specified, and Asperger Syndrome. These three conditions display many of the same characteristic, but differ in nature and severity.

Characteristics:

Abnormal or impaired social interaction skills

- impaired use of nonverbal behaviors to regulate social interaction (body language, facial expression, eye-to-eye gaze)
- failure to develop peer relationships appropriate to developmental level
- lack of spontaneous seeking to share enjoyment
- lack of social/emotional reciprocity
- lack of awareness of others

Abnormal or impaired communication skills

- delay in or total lack of development of spoken language
- for speaking individuals, the ability to initiate or sustain conversation, abnormalities in pitch, intonation, rate, rhythm, stress, immature grammatical structures, and/or stereotyped, repetitive, or idiosyncratic use of language

Markedly restricted repertoire of activities and interests and other behavioral characteristics

- circumscribed interests
- unusual preoccupations
- repetitive use of objects
- compulsions or rituals
- unusual sensory interests
- repetitive motor mannerisms

Teaching Techniques and Classroom Adaptations

- provide consistency
- provide opportunities for success
• express information on a concrete level
• provide supports to ensure wants and needs are understood (communication system)
• provide choices and teach student to make choices
• provide a predictable, structured environment (picture/visual schedules)
• control the environment as much as possible to decrease environmental stimuli
• provide instructional supports (visual instructions, picture cards, models, connections to previous skills,
• plan for and teach transition (Today is Monday, we have gym at 2:00. In 15 minutes we have gym.)
• Teach and facilitate social skills (communicating feelings, following rules, self-regulation, and calming techniques)
• use social stories to teach social skills

Emotional Disability (ED)

A student with an emotional disability has:

• an inability to build or maintain satisfactory interpersonal relationships;
• inappropriate behavior or feelings; or
• an inability to learn which cannot be explained by other factors, any of which adversely affects educational performance.

Characteristics

• poor attendance
• not accepted by others
• not happy
• difficulty expressing thoughts
• daydreams
• looks for trouble (has a chip on shoulder)
• disrupts class
• aggressive
• low self esteem
• sometimes withdrawn/isolates self

Teaching Techniques and Classroom Adaptations

• use direct behavior management
• plan ahead for what to do when unacceptable behaviors happen
• compliment the student on appropriate behaviors (be genuine, if faking it the student will know and likely respond in a negative way)
• build student confidence
• adapt assignments or give alternate assignments
• use humor to lighten situations (laugh with student not at the student)
  start each day or maybe even period with a clean slate (don’t hold grudges)
  remain calm (don’t take student comments personally or engage in power struggles)
• may need to follow a Behavior Intervention Plan

**Specific Learning Disability (SLD)**

A student with a specific learning disability has average to above average intelligence, but has difficulty working at or reaching grade level potential. Often referred to as the “hidden disability” because it is not visible to the eye and it’s origin is even more difficult to understand. The problems and solutions for individual students vary greatly. Educators need to try multiple strategies until success is achieved.

Characteristics:

- learns at a slower pace
- poor reading skills
- difficulty taking in/processing information
- long or short term memory problems
- poor study skills
- poor problem-solving skills

**Teaching Techniques and Classroom Adaptations**

- may require changes in instructional methods and materials
- allow extra time to complete tasks
- adapt classroom routine to meet student needs
- locate and utilize support people for student
- point out student strengths
- gear instruction toward student strengths
- encourage student to use his/her strengths
- use an assignment book
- record class notes
- provide a note-taker (peer or use a copy of teacher notes)
- provide encouragement and praise for tasks well-done
- read out loud or with taped materials

**Cognitive Disabilities (CD)**

A Cognitive disability is classified as an IQ at or below 70 with most evaluative instruments. A student with a mental disability will also demonstrate deficits in areas of adaptive behavior such as: socialization, communication, and daily living skills. Degree of disability is categorized in three areas: mild cognitive disability (MiCD), moderate Cognitive disability (MoCD), or severe cognitive disability (SCD).
Characteristics

- delayed social skills
- delayed communication skills
- under-developed daily living/survival skills
- low academic skills
- immature in comparison to peers
- slow to process information
- slow completion of tasks
- poor or delayed self-care/help skills
- heightened behavior difficulties (sometimes, not always)

Teaching Techniques and Classroom Adaptations

- assign tasks in short, simple steps
- chunk material (present student with only small parts of a larger assignment in stages until the whole assignment is complete)
- repeat rules often
- restate directions
- present directions/materials in a variety of modes (verbal, written, auditory, pictures)
- allow for longer response time
- demonstrate tasks as opposed to “telling” tasks
- encourage and point out areas of strength
- encourage independence
- provide assignments written as opposed to long assignments that must be copied from the board
- use mnemonic devices/memory games
- point out patterns/tricks to remember
- rationalize learning material, make it real

Sensory Impairments/ Deaf or Hard of Hearing

A student with a hearing impairment has a hearing loss that may be mild or severe, unilateral or bilateral, permanent or fluctuating.

Characteristics

- may or may not wear hearing aids
- possible delayed language skills
- may use sign language
- deficits in reading and writing
- poor social skills
- difficulty regulating voice (may talk loudly or softly)
- makes unintentional noises
- may have cochlear implant
Teaching Techniques and Classroom Adaptations

- preferential seating
- reduce background noise
- require student to wear hearing aids unless otherwise instructed
- teach advocacy to student in taking care of his/her equipment
- gain attention of student prior to initiating conversation
- face student when speaking (don’t give direction as you’re walking around the room or have your back to the student)
- use complete, simple sentences
- use visual aids
- encourage and foster interaction with peers
- use sign language
- repeat words/information

Sensory Impairments/Blind or Low Vision

A student has a vision loss either by partial sightedness or complete blindness that adversely effects the educational student performance.

Characteristics

- rub eyes
- may lose place while reading
- hold objects too close or too far away
- eye or head pain
- letter reversals or confusion

Teaching Techniques and Classroom Adaptations

- adequate space for materials
- use large print
- enlarge materials/assignments
- use audio tapes
- use Braille
- use raised line paper for writing
- encourage hands-on lessons
- give clear and detailed instructions
- allow additional time to complete tasks
- practice evacuation drills regularly

Deaf-blind

Combination of hearing and vision impairments which severely impacts communication, development, and education.
Characteristics

• mild to severe hearing and vision loss
• inconsistent response to environment/stimuli
• share many of the same characteristics of vision and hearing impairments, but these may be heightened due to the presence of both deficits

Teaching Techniques and Classroom Adaptations

• present information to appeal to other heightened senses such as tactile/kinesthetic, smell, taste
• offer a variety or experiences to encourage use of other sensory abilities
• maintain physical classroom arrangement that is simple for individual to maneuver, keep changes to a minimum
• participate in training or professional development to learn more specific strategies for addressing dual sensory impairments

Developmental Delay

A Developmental Delay is characterized by a significant delay in 2 or more developmental areas that adversely affect daily life or educational performance of children ages 3-5, not enrolled in kindergarten. Developmental areas include: gross and fine motor development, cognitive development, receptive or expressive language development, social or emotional development, and self-help or adaptive development.

Characteristics

• Gross and Fine Motor Delays
  • difficulty with large muscle movement such as running, skipping, walking, jumping
  • difficulty with small muscle movement such gripping, buttoning, zipping, opening containers, etc.

• Cognitive Development
  • low reading readiness skills
  • low math readiness skills

• Receptive or Expressive Language
  • unable to convey wants/ needs
  • unable to understand wants/needs of others
  • poor articulation, language, voice, or fluency
• Social or Emotional Development

• unable to appropriately interact with same-age peers
• does not participate in play with/beside same-age peers
• demonstrates poor behavior management skills

• Self-help or Adaptive Development

• inability/delayed ability to dress, feed, toilet
• engage in social situations
• communicate at age-appropriate level

Teaching Techniques and Classroom Adaptations

• expose to appropriate modeling of behavior
• plan activities that involve various modes of learning (visual, auditory, tactile, kinesthetic)
• plan activities that involve movement
• use manipulatives/concrete objects whenever possible
• establish a schedule/routine
• use guided play during play time to assist with socialization
• expose to a variety of environments
• may require specialized services with Speech & Language Pathologist, Occupational Physical Therapist, or Physical Therapist depending on the needs of individual students

Orthopedic Impairment

An Orthopedic Impairment is characterized by a physically disabling condition that seriously impairs locomotion or motor function and adversely effects educational performance. Physically disabling conditions include, but are not limited to: Cerebral Palsy, amputations, burns, and fractures, muscular disability, spina bifida, and arthritis.

Characteristics

• frequent absences for some students due to nature of the illness
• impaired fine or gross motor skills
• may tire easily
• require frequent opportunities for rest

Teaching Strategies & Classroom Adaptations

• activity-based/hands on experiences
• exercise (may include implementation of exercise plan provided by OT, PT or a physician, depending on the degree of student need)
• establish and maintain a daily routine/schedule
• encourage/practice daily communication (although students may be limited in their ability to express thoughts verbally, they have a lot to communicate)
• may have a Health Care Plan to follow
• look for alternative activities to pencil/paper tasks
• provide additional time for response
• provide additional time for completion of tasks
• be informed about specific medical conditions
• observe status of health, report concerns to the teacher

Multiple Disabilities

A Multiple Disability is characterized by the existence of two or more disabilities, when combined so severely impact the educational performance of the student, special education services for only one impairment is not sufficient to accommodate the needs of the student.

Characteristics

• needs vary greatly depending on the nature of the disabilities of the child

Instructional Strategies and Classroom Adaptations

• strategies vary depending on the nature of the disabilities
• review strategies previously mentioned in other disability areas that are compatible with student needs
• participate in professional development opportunities to learn information pertaining to medical conditions
• a Health Care Plan may need to be followed, depending on the specific needs of the student

Other Health Impairment

An Other Health Impairment is characterized by chronic or acute health problems that limit strength, vitality, or alertness and adversely affect the educational performance of the student. Some health problems include, but are not limited to: diabetes, heart disease, and ADHD.

Characteristics

• vary greatly depending on the medical condition of the student

Instructional Strategies and Classroom Adaptations

• strategies may vary depending on the medical condition of the student
• may require special diets/regiments or restrictions
• may be limited to certain types of physical activity
• a Health Care Plan may need to be followed, depending on the specific needs of the student
• participate in professional development opportunities to learn information pertaining to medical conditions
• review strategies in other disability areas that are compatible with student needs
Language or Speech Disorder

A Language or Speech Disorder is characterized by an impairment in articulation, language, fluency, or voice that adversely affects the student’s educational performance.

Characteristics

- Articulation deficits
  - incorrect production of speech sounds
  - omissions of letters/sounds
  - distortions of letters/sounds
  - substitution of one letter/sound for another
  - additions of letters/sounds

- Language deficits
  - difficulty processing language
  - weak work retrieval skills
  - poor phonology skills
  - poor morphology skills
  - poor syntax
  - difficulty utilizing semantics
  - low pragmatic skills

- Fluency deficits
  - frequent and markedly noticeable disrupted rate of speech
  - frequent and markedly noticeable disrupted rhythm of speech

- Voice deficits
  - Abnormal voice pitch
  - Abnormal voice intensity
  - Abnormal voice resonance
  - Abnormal voice quality

Teaching Strategies and Classroom Adaptations

- repetition
- provision of appropriate communication models
- reminders to slow down or think about using “good speech”
- require students to use proper speech (tailor expectations to what is attainable for the individual child)
- correct errors (in a kind manner that does not compromise the student’s dignity)
- present information in various modes (visual, auditory, tactile, kinesthetic) particularly for language/processing disorders
• augmentative communication devices/systems may be required for severe communication deficits such as: gestures, sign language, picture communication board/book, or electronic devices

Traumatic Brain Injury

A Traumatic Brain Injury is characterized by an acquired injury to the brain by an external physical force, resulting in total or partial functional disability and/or psycho-social impairment that adversely affects the educational performance of the student.

Characteristics may vary depending on the degree and location of the brain injury

• Characteristics of Frontal Lobe Damage
  • poor/impaired judgement
  • motor control deficits
  • inability to think abstractly
  • impaired articulation
  • heightened emotions
  • poor impulse control
  • lack of motivation

• Characteristics of Parietal Lobe Damage
  • difficulty reading
  • poor memory
  • difficulty understanding language
  • inability to interpret spatial relationships
  • difficulty hearing
  • limited/impaired vision
  • difficulty interpreting sensations/feeling

• Characteristics of Damage to the Cerebellum
  • impaired balance
  • impaired coordination

• Characteristics of Damage to the Brainstem
  • difficulty breathing
  • inability to control facial movement/expression
  • irregular heart rate
Teaching Techniques and Classroom Adaptations

- maintain structured surroundings
- stay calm
- speak in simple sentences
- avoid sudden changes
- praise efforts
- encourage and praise self-control
- demonstrate consistency/predictability
- find out about approaches used at home or with medical personnel and develop consistency among settings
- build an awareness of possible sensory issues (bright lights, touch on the arm may be painful, taste/smell of food)
- monitor medication (follow school policy)
- observe changes and report to the teacher
- provide verbal cues to direct to a task (inform ahead of time, if possible)
- frequent prompting to move from one step to the next when doing a task
- verbal or written reminders or cues to slow down/think before acting
- additional time to complete tasks
- chunk material
- teach problem-solving strategies to deal with difficulty/change in routine
- practice skills in a variety of settings (students may experience difficulty in generalizing information from one setting to another)
- use pathfinding (writing down/mapping information to help make connections form one period to the next)
- encourage use of a memory book (keep aligned with what is being used at home)
INSTRUCTIONAL STRATEGIES

One of the primary responsibilities of paraeducators is to support the instruction for students. This task poses many challenges. To be an effective supporter of student instruction requires planning, organization, and knowledge of expected learning outcomes of each student. Although the teacher makes decisions such as grouping, instructional materials, and teaching strategies, your feedback is crucial to the success of classroom instruction.

Methods of instructional support may vary throughout the day depending on the subject matter, setting of instruction, and the expected student outcomes. Your style of instructional support will also be altered by group size. The dynamics of large group vs. small group instruction differ in the support required, as well as individual instruction.

Here are some tips to help you to effectively use your time with students:

• Find out the time schedules for small group instruction and the specific role you will play as the paraeducator.
• Have materials ready and available for use
• Know where supplies are stored and procedures for how/when to get them
• Be familiar with the format of the lesson. (remember lesson planning is the responsibility of the teacher, but you may be required to follow lesson plans)
• Know daily assignments and student homework expectations
• Communicate with the teacher regarding student progress

Effective Instructional Strategies

1. Plan for difference among students.
2. Ensure adequate practice time for repetition in order to master skills.
3. Gain and maintain student attention.
4. Engage students in active learning when possible.
5. Check frequently for understanding.
6. Maintain an interesting pace for instruction.
7. Give immediate feedback to students (kudos, good job, did you think about this)
8. Use prompts and cues to redirect student attention to task.
9. Vary methods to practice skills (use the chalkboard, games, pencil/paper, drills)
10. Model positive interaction.
11. Recognize appropriate behaviors.
12. Praise often.
13. Maintain organization to minimize off task time.
14. Check for understanding when giving directions.
15. Offer a sequence of steps to finish assignments.
16. Use graphic organizers.
17. Help students keep track of assignments
18. Model organizational skills for students.
Although paraeducators are not responsible for writing lesson plans, being prepared to follow a lesson plan is important. As a supporter in the classroom, it is necessary to know the sequence of proper lesson planning and presentation.

**Lesson Plan Sequence**

1. Motivate student interest in upcoming lesson.
   - capture student attention
   - pull in prior learning
   - pull in real life experiences

2. Preview what will be taught/Review if following up on previously taught concept.
   - share the goal of the lesson with students
   - provide a rationale for learning the concept

3. Deliver direct instruction.
   - introduce the actual concept
   - provide explanation
   - provide examples
   - involve students actively
   - guide the instruction, but don’t monopolize it

4. Guided Practice
   - provide examples for students to work on
   - oversee and assist students during this time
   - ask them questions
   - answer their questions
   - give feedback and encouragement

5. Evaluation
   - assign homework, task to students to demonstrate their understanding of the concept
   - offer feedback to students regarding assignments

As paraeducators presenting lessons or supporting the academic instruction delivered by teachers in the classroom, the need will arise for modifications and accommodations of materials. It is important to remember that accommodations and modifications are addressed through the Individualized Education Program (IEP) for each student who receives special education services. Appropriate accommodations and modifications are a legal requirement of the IEP. This does not mean you should never explore other accommodations or modifications that may assist the student. However, it is required that students receive accommodations and modifications addressed on the IEP. When administering standardized testing, no accommodations or modifications can be offered to students with disabilities that have not been identified on the IEP.
as necessary for them to progress in the daily curriculum. Even then, accommodations and modifications can only be implemented on specified portions of standardized tests. Therefore, if you notice certain strategies that tend to help particular students, then share them with the teacher. It may be appropriate for these accommodations and modifications to included in the IEP. As the paraeducator, you should be aware of the accommodations and modifications required on the IEPs for the students you serve. If you do not have this information, talk with the teacher to obtain it. And remember, you are part of an educational team. Therefore, possible accommodations need to be discussed with the teachers instructing the students. Also keep in mind that accommodations and modifications are intended to “level the playing field,” not to give students with disabilities undue advantage over non-disabled peers. Select accommodations and modifications on basis of academic need to avoid creating unhealthy, enabling crutches for students with disabilities.

**Accommodations and Modifications to Support Student Instruction**

*Strategies to support students with written tests:*

1. Give extra time to complete
2. Re-read directions, gives examples
3. Review notes and book information
4. Read tests out loud
5. Reword/Summarize questions
6. Answer orally
7. Provide open book test
8. Allow use of class notes
9. Provide formulas or diagrams to help with problems
10. Provide a word bank or vocabulary list
11. Dictate Answers
12. Work in a cooperative group
13. Allow second chance for correct answers
14. Alter layout of the test to provide more space
15. Chunk test (present only one part of the test at a time)
16. Chunk matching items into smaller groups (break 20 matching items into 4 groups of 5 words)
17. Delete options on multiple choice
18. Provide a break time

*Strategies to Support Students with Note-taking:*

1. Provide a peer note-taker
2. Provide a partial outline in advance for student to fill in during the lecture
3. Tape record lessons/lectures
4. Encourage students to listen, then give short summary
5. Correlate notes with textbook pages
Strategies to Support Students with Completion of Study Guides or Worksheets

1. Provide page numbers for the answers
2. Present questions in the order material was presented
3. Highlight or underline key words, phrases, concepts
4. Provide a word bank or vocabulary list
5. Present materials/handouts in small groups (don’t give study guides for entire grading period at one time)
6. Create study groups
7. Assign a peer helper
8. Work in a cooperative group and alternate turns to find all information

Strategies to Support Students with Textbook Use

1. Read information to the student
2. Assign Buddy Reading
3. Provide audio tapes or computer programs
4. Provide or direct student to visual cues
5. Provide summaries or outlines
6. Provide a parallel text on a lower reading level
7. Present preview questions before reading material
8. Tap into student’s prior knowledge of the subject matter
9. Use study guides
10. Highlight/underline important information (make sure this is approved by building administrator, as certain books may be set aside for highlighting purposes)
11. Teach students to read chapter introductions and end of chapter reviews
12. Use spot checking at the end of each section to determine level of comprehension
13. Teach students to use glossary, index, charts, graphs, and table of contents to locate needed information

Strategies to Support Students with Organization of Notebook

1. Check assignment book daily
2. Number all pages
3. Separate notebook to correlate with subjects
4. Encourage use of one large notebook with dividers
5. Use color coding to organize subjects, week, month, etc.
6. File pages immediately after completion/return
7. Hole punch completed pages to avoid loss
8. Assign notebook buddies to keep each other on track
Strategies to Support Students with Organization of Materials

1. Develop self-checking system
2. Copy assignments from the board
3. Put multi-piece projects in an envelope
4. Keep extra materials handy
5. Provide non-verbal cues to promote self-checking/monitoring
6. Use post-it notes to mark assignments
7. Have student restate the materials that are needed.

Strategies to Support Students with Completion of Homework

1. Reduce amount of work
2. Allow extra time to complete work
3. Reinforce time lines to student
4. Use a timer
5. Mark due dates on a calendar
6. Write a schedule or plan to complete longer assignments/projects
7. Break up large assignments into several due dates
8. Create a checklist

Strategies to Support Students with Staying on Task

1. Reduce distractions
2. Reward on task behavior
3. Shorten task
4. Chunk tasks (present one part at a time)
5. Provide checklist for sequence of tasks to complete
6. Keep work space clean
7. Vary activities
8. Provide cubical/isolated area to complete tasks (not to punish, but as a positive, preventative strategy to eliminate distractions for the student

Strategies for Supporting Students with Reading Written Material

1. Provide highlighted material
2. Use taped materials
3. Decrease amount of material present
4. Assign reading helper
5. Present same information in different forms (audio, video, picture, written)
6. Allow extra time
7. Summarize main ideas
8. Allow practice time for oral reading
9. Use study guides
10. Provide preview questions
11. Point out picture clues and context clues
12. Ask questions during reading
13. Control introduction of new ideas until student demonstrates understanding of material already presented
14. Pre-teach vocabulary
15. Put main ideas on index cards in order of concept introduction
16. Role play, demonstrate, make concepts concrete
17. Relate concepts to student experiences or things familiar to student

**Strategies to Support Students Who are Slow Starters or Have Low Interest**

1. Relate information to previous experiences
2. Relate information to a real life issue
3. Maintain proximity to student
4. Offer cues to student to prepare them for upcoming lesson
5. Present small tasks, rather than one large task
6. Offer verbal praise for compliance to task
7. Have materials available & ready to eliminate down time
8. Sequence tasks from easiest to most difficult
9. Clearly state and restate directions
10. Check-in often to monitor progress
11. Provide a checklist of assignment steps
12. Provide a peer helper
13. Ask off task student to be a helper for another student

Remember, there is no one way that is right or wrong when approaching problems. If one strategy is not effective, then try another. It will take time to learn about students and what strategies work best for them. Remember, doing tasks for students does not help them in the long run. As paraeducators, we need to provide tools for students to use. As students build confidence, many times supports can be reduced.
BEHAVIOR MANAGEMENT

Managing classroom behavior is a duty that sometimes presents challenges to paraeducators. As a support person in the classroom, the paraeducator follows the lead of the teacher in the classroom. It is the responsibility of the paraeducator to assist in the implementation of the behavior management system determined appropriate by the case conference committee. Successful behavior management requires consistency. The element of consistency must be present within the adults in the classroom. All implementors of behavior management and discipline must understand the components of the system and consistently implement them. In addition, we must be consistent from day to day. The expectations that existed yesterday should be the expectations for today. Consistency is also important when we think about dealing with various students. The system needs to be consistent among students. However, there may be some students who require additional supports to manage behavior. Students with these extensive needs should have a Behavior Intervention Plan.

Behavior is best managed when students are given the responsibility for their own behavior. Therefore, we need to empower students by giving them the tools they need to be behaviorally successful. Students do not always enter the school building understanding the difference between right and wrong. We may have to help students develop this knowledge. When students gain control over their own behavior, their self-esteem and motivation tend to increase.

Behavior Management Techniques

1. Provide students with personal space.
2. Set limits
3. Offer choices.
4. Spend more time listening than speaking
5. Consistency
6. Read student body language
7. Observe student body language
8. Reinforce good choices
9. Implement fair judgement
10. Redirect the student
11. Implement realistic consequences
12. Avoid threatening student with consequences that are too harsh or impossible to implement

Many times discipline issues in the classroom are the result of issues beyond the specific behaviors of students. All behaviors displayed by students have a purpose or a function. If we think about student behavior some very important facts surface.
Research indicates that:

1. Discipline problems arise primarily from:
   - boredom
   - lack of interest
   - forced group behavior
   - lack of trust
   - desire to gain attention
   - poor self concept

2. Discipline problems are reduced when:
   - behavior boundaries are clear
   - behavior boundaries are consistent
   - shared decision-making is implemented
   - students are provided with options
   - instruction occurs to teach appropriate/replacement behaviors
   - trust is established within the classroom and all members feel safe
   - consequences for behavior are known ahead of time
   - consequences are appropriate in nature (not too permissive and not too strict)

Additional Tips for ParaEducators

1. Maintain a good sense of humor. Sometimes smiling or laughing with (not at) the student will diffuse a potentially explosive situation.
2. Be consistent. If students know outcomes this eliminates begging as an option to change the outcome.
3. Give students choices and a way out of negative situations. Engaging in power struggles will lead to your demise and creates a “lose, lose” situation.
4. It’s not personal. Negative comments are not a personal attack on you. Remove your emotions from the situation.
5. Be proactive and active, but not reactive.
6. Leave grudges by the wayside. Students participate in special education because they have unique needs, it is our job to help them learn appropriate behaviors.
7. Avoid humiliation as a means to detour behavior. Students will lose respect for you as a professional and it will be difficult to win them back.
8. Model appropriate behavior.
9. Always follow through on promises, rewards, or consequences
10. Use a quiet, calm voice. Screaming only causes situations to escalate.
11. Always have alternatives. Even the best of plans can flop.
12. Clearly state expectations.
13. Offer expectations that are realistic.
SUCCESSFUL STRATEGIES FOR GUIDING BEHAVIOR

1. Set reasonable and clear rules and limits.
   • share rules with the students
   • share consequences with the students
   • share rewards with the students

2. Consistency
   • rules are the same for all
   • teacher & paraeducator are unified
   • adult response to behaviors are consistent from one student to another

3. Reminding
   • offer frequent reminders of rules/expectations

4. Prepare the physical space
   • eliminate crowding
   • provide safe environment
   • provide quiet spaces

5. Recognize and address problems before they occur.
   • offer a menu of choices
   • provide structure
   • intervene prior to escalation of behavior

6. Distract or redirect the student
   • change the focus
   • direct student attention to something else

7. Ignore behaviors
   • some behaviors occurs because student is seeking attention
   • works well with harmless, annoying behavior

8. Use humor
   • changes the mood
   • changes the focus
   • helps to defuse the situation

9. Talk out/express feeling
   • help students identify emotions
   • help students express feelings
   • help students develop appropriate strategies for dealing with feelings
10. Compromise with student
   • empowers the student
   • encourage give and take
   • set limits, you can’t compromise on all issues

11. Model appropriate behavior
   • handle situations daily as you expect students to handle them
   • practice how to react to various situations

12. Problem solving
   • suggest ways the student can better handle a situation
   • guide discussion, allow the student to arrive at solutions

13. Allow time to cool off
   • remove yourself from the situation
   • give the student personal space
   • time will vary that each student needs to cool off

14. Notice positive behaviors
   • praise accomplishments
   • praise appropriate behaviors
   • be genuine

15. Patience
   • it takes time for new behaviors to replace old ones
   • behaviors sometimes get worse before they improve
   • a lot of repetition and practice required

16. Restitution
   • student is responsible for his/her behavior

*STRUCTURE THE ENVIRONMENT DON’T TRY TO CONTROL THE CHILD.*
As paraeducators, you will likely be involved in the documentation of behavior. When teachers and staff complete Functional Behavioral Assessments and Behavioral Intervention Plans to address reoccurring inappropriate behaviors, documentation becomes very important. It is crucial to identifying antecedents of student behaviors. Antecedents are the circumstances that occur just prior to behavior. Knowing antecedents of behavior offers much insight to changing behaviors. Documentation of student behaviors needs to be thorough.

Here are some methods of documentation:

1. Narratives
   - anecdotal records
   - chronological log
   - description of behavior after occurrence
   - journals

2. Time Sampling
   - chart behaviors
   - tally number of times behavior occurs
   - helps to pinpoint specifically when the behavior is occurring

3. Event Sampling
   - plan a specific activity
   - control variable of situation
   - structure the environment
   - observe the social interaction
   - document observations

4. Shadow study
   - involves numerous personnel
   - input from numerous staff
   - student observed in many different settings
   - student observed by many different staff

When defining behaviors, information must be:

- specific
- concrete
- behavior driven, not focusing on feelings
- objectively reported
DEFINING STUDENT BEHAVIOR

<table>
<thead>
<tr>
<th>Instead of saying..................</th>
<th>Say .........................</th>
</tr>
</thead>
<tbody>
<tr>
<td>Darby is disruptive.</td>
<td>Darby hums, gurgles, and makes popping noises during classroom discussion.</td>
</tr>
<tr>
<td>Marv is mean.</td>
<td>Marv hits other students when he is standing in line. Marv kicks other students as he walks to his seat.</td>
</tr>
<tr>
<td>Amy is aggressive.</td>
<td>Amy hits the wall and throws her books when it is time to do Math.</td>
</tr>
<tr>
<td>Daisy is disrespectful.</td>
<td>Daisy tells the teacher no when asked to get out her materials. During work time Daisy rocks in her chair and does not complete her assignment.</td>
</tr>
<tr>
<td>Rudy is rowdy.</td>
<td>Rudy throws spit wads when the teacher is working with other students during reading group.</td>
</tr>
</tbody>
</table>

“WH” Questions to ask when thinking about behavior:

What happened immediately before (antecedent) the behavior?
What happened immediately following (consequence) the behavior?
What makes the behavior worse?
What makes the behavior better?
What was the student doing (describe behavior)?
What was said by adults and other students?
Who was involved?
Where did the behavior occur?
Where did the student go immediately following the behavior?
When (specifically) did the behavior occur?
# BEHAVIORAL CONSIDERATIONS

<table>
<thead>
<tr>
<th>Environmental Considerations:</th>
<th>Adult Interaction Considerations:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the environment organized?</td>
<td>Does the personality of the adult(s) in the classroom clash with that of the student?</td>
</tr>
<tr>
<td>Is the environment consistent?</td>
<td>Are behavioral expectations clear and appropriate?</td>
</tr>
<tr>
<td>Are materials age-appropriate?</td>
<td>Are both verbal and non-verbal cues used with the student?</td>
</tr>
<tr>
<td>Is environment over stimulating?</td>
<td></td>
</tr>
<tr>
<td>Is environment under stimulating?</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Physical Considerations:</th>
<th>Emotional Considerations:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the student hungry?</td>
<td>What is the student’s typical temperament?</td>
</tr>
<tr>
<td>Is the student tired?</td>
<td>What is the student’s learning style?</td>
</tr>
<tr>
<td>Is the student ill/not feeling well?</td>
<td>Is the student able to regulate his/her behavior?</td>
</tr>
<tr>
<td>Is the student worried?</td>
<td>Do any emotional stressors exist in any areas of the student’s life?</td>
</tr>
<tr>
<td>Is the student anxious?</td>
<td></td>
</tr>
<tr>
<td>Is the student physically and/or mentally able to perform?</td>
<td></td>
</tr>
<tr>
<td>Has the student undergone medication changes?</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Family Considerations:</th>
<th>Classroom/Climate Considerations:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has the family been actively involved in addressing behavior?</td>
<td>Is autonomy encouraged?</td>
</tr>
<tr>
<td>How does the family deal with behavior at home?</td>
<td>Is it individualized?</td>
</tr>
<tr>
<td>Is something occurring at home/in community to trigger the behavior?</td>
<td>Is it open and accepting?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Is it safe/non-threatening?</th>
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<tbody>
<tr>
<td></td>
<td>Is the student valued?</td>
</tr>
</tbody>
</table>
SPECIAL EDUCATION TERMINOLOGY

Annual Case Conference - *Annual Case Conference* is the annual meeting of the case conference committee which is conducted to review and revise a student’s individualized education plan.

Assistive Technology - *Assistive Technology* is any item, piece of equipment or product system used to increase, maintain, or improve functional capabilities of individuals with disabilities.

Behavioral Intervention Plan - *The Behavioral Intervention Plan* is a written document completed by the case conference committee & incorporated as part of the Individualized Education Program. It identifies ways in which the students environment will be altered to address behavioral needs, as well as identifying positive behavioral strategies & skills that will be taught to change the behavior.

Case Conference Committee - *The Case Conference Committee* is a group of individuals which includes public agency personnel, parents, and other parties involved with the student. The committee:
- determines eligibility for special education services.
- develops, reviews, and revises the individualized education plan.
- determines appropriate educational placement.

Community-Based Instruction - *Community-Based Instruction* refers to instruction which occurs in the realistic/natural setting in which the skill is actually utilized. The focus assists to prepare students for independence in domestic, vocational, recreational, leisure and community environments.

Consultation Services - *Consultation services* are services which include, but are not limited to, working with general &special education teachers to:
- develop & implement the Individualized Education Plan.
- develop curriculum.
- assist with instructional or behavior management techniques.
- identify, adapt, & utilize materials, equipment, & instructional aids.
Due Process Hearing - *Due Process Hearing* means a proceeding initiated by the parent or the local/state educational agency to resolve a dispute regarding:
- Identification/eligibility of student for services.
- Appropriateness of the education evaluation.
- Appropriateness of the student’s proposed/current level of services.
- Any other dispute affecting the Free Appropriate Public education of the student.

Eligibility - *Eligibility* refers to criteria established to determine if a child is in need of special education services.

Functional Behavior Assessment - *Functional Behavior Assessment* refers to the systematic collection/analysis of data which will vary in length and scope depending on the severity of the student’s behavior. Results & analysis of data is used to develop the Behavioral Intervention Plan.

Homebound Instruction - *Homebound instruction* means that instruction is provided at an alternative location for students who are unable to attend school. Homebound instruction may be provided at the student’s home, a hospital, or another site in person or by any other technology systems.

Home School - *Home School* refers to the local, community school that a child would attend if not receiving special education services.

Individualized Education Program - *The Individualized Education Program* is the written document developed by the case conference committee which addresses the following:
- present level of performance in non-academic & academic areas.
- annual goals.
- short-term objectives.
- specific special education placement & related services.
- extent to which the student will participate in general education & extra-curricular activities.
- projected date & duration of services.
• objective evaluation procedures to measure whether objectives are being met.
• school year/semester in which the student will be re-evaluated.
• transition services for students age 14 or freshman year of high school.

Inclusion - *Inclusion* is a term used to describe a general education setting in which both students with & without disabilities are educated. It involves taking the services to the child, as opposed to removing the child for services.

Initial Referral - *An Initial Referral* is the initiation of an educational evaluation for a child who is not currently receiving any special education services. A timeline of 60 instructional days is established for evaluation, conferencing and consideration for special education eligibility and placement.

Least Restrictive Environment - *Least Restrictive Environment* refers to the maximum extent appropriate by which students with disabilities are to be educated with non-disabled peers. Students are to be educated in the home school unless otherwise specified by the Individualized Education Plan. Removal from the general education classroom occurs only when documentation supports unsatisfactory achievement in the general education setting with supplementary aids.

Mainstreaming - *Mainstreaming* is a term used to describe the selection of general education classes in which a student with disabilities will participate. It is a term associated with more traditional forms of special education service delivery.

Manifestation Determination - *Manifestation Determination* is an evaluative process conducted by the case conference committee to determine if the student’s behavior is caused by the student’s disability, deficiencies in the Individualized Education Plan, program, or placement.
Mediation - *Mediation* is a voluntary process in which the parent and the public agency attempt to resolve a dispute which has arisen in the case conference committee meeting. Mediation is considered an option when a dispute involves:

- Identification/ eligibility of a student.
- Appropriateness of the educational evaluation.
- Appropriateness of the student’s proposed/current level of services/placement.
- Any other dispute affecting the Free Appropriate Public Education of a student.
- Reimbursement of provisions for the above.

Paraprofessional - *Paraprofessional* is an individual who works under supervision & direction of a licensed teacher to assist in areas which relate to personal, social, & instructional needs.

Procedural Safeguards - *Procedural Safeguards* are also referred to as *Parent Rights*. These are issued both verbally and in writing when the child is evaluated, at the case conference, or when there is a change of placement.

Reevaluation - *Reevaluation* must be considered every 36 months. The case conference committee may determine upon review of information/data that an evaluation does not meet the educational needs of the student.

Related Services - *Related Services* are those which are supplementary or complimentary to the instructional program and a required in order for the child to benefit from special education.

Teacher of Record - *Teacher of Record* is the special education teacher to whom the student with a disability is assigned. The teacher of record must be appropriately licensed in the area in which the student is eligible. The duties for teacher of record are as follows:

- Monitor the implementation of the Individualized Education Plan.
- Provide direct/indirect services.
• Serve as a consultant to other service providers.
• Participate in case conference meetings.

Teacher of Service - *Teacher of service* is the teacher providing services to the student with a disability.

Statewide & District Assessments- *Statewide & District Assessments* refer to those formalized assessments which are required of all students in the state or local educational agency. Student with disabilities are required to participate in these assessments unless otherwise indicated in the Individualized Education Plan. Students with disabilities may be provided with test accommodations through the I.E.P., but are subject to rules imposed by program manuals issued by the Department of Education. If it has been determined by the case conference committee that statewide/district assessments are not appropriate, then an alternative assessment must be used to measure the student’s achievement.

Transition Plan - *A Transition Plan* is a written document developed by the case conference committee to address desired post-secondary outcomes which include:

• Community Living.
• Employment, Post-Secondary Education & Training.
• Transition activities to occur during the secondary years of education.
• Linking of school personnel, parents and other agencies.
• Conducting individual assessments/observations of the student.
• Counseling/Crisis Intervention.
• Parent Counseling/Training.
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>ACR</td>
<td>Annual Case Review</td>
</tr>
<tr>
<td>ADD</td>
<td>Attention Deficit Disorder</td>
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<tr>
<td>ADHD</td>
<td>Attention Deficit Hyperactivity Disorder</td>
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<tr>
<td>APE</td>
<td>Adaptive Physical Education</td>
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<tr>
<td>ARC</td>
<td>Association for Retarded Citizens</td>
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<tr>
<td>ASD</td>
<td>Autism Spectrum Disorder</td>
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<tr>
<td>ASHA</td>
<td>American Speech Language Hearing Association</td>
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<tr>
<td>CASE</td>
<td>Council of Administrators of Special Education</td>
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<tr>
<td>CCC</td>
<td>Case Conference Committee</td>
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<tr>
<td>CD</td>
<td>Communication Disorder</td>
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<tr>
<td>CEC</td>
<td>Council for Exceptional Children</td>
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<tr>
<td>CF</td>
<td>Cystic Fibrosis</td>
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<tr>
<td>CHINS</td>
<td>Child in Need of Services</td>
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<tr>
<td>CMHC</td>
<td>Community Mental Health Center</td>
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<tr>
<td>CP</td>
<td>Cerebral Palsy</td>
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<tr>
<td>DB</td>
<td>Deaf-Blind</td>
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<tr>
<td>DD</td>
<td>Developmental Delay</td>
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<tr>
<td>DMH</td>
<td>Department/Division of Mental Health</td>
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<tr>
<td>DOE</td>
<td>Department of Education</td>
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<tr>
<td>DPW</td>
<td>Department of Public Welfare</td>
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<tr>
<td>DSE</td>
<td>Director of Special Education</td>
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<tr>
<td>DSI</td>
<td>Dual Sensory Impairment</td>
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<tr>
<td>ECSE</td>
<td>Early Childhood Special Education</td>
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<tr>
<td>ED</td>
<td>Emotional Disability</td>
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<tr>
<td>ESP</td>
<td>Educational Surrogate Parent</td>
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<tr>
<td>ESY</td>
<td>Extended School Year</td>
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<tr>
<td>FAPE</td>
<td>Free Appropriate Public Education</td>
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<tr>
<td>FERPA</td>
<td>Family educational Rights and Privacy Act</td>
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<tr>
<td>HI</td>
<td>Hearing Impairment</td>
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<tr>
<td>ICASE</td>
<td>Indiana Council of Administrators of Special Education</td>
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<tr>
<td>IDEA</td>
<td>Indiana with Disabilities Education Act</td>
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<tr>
<td>IEP</td>
<td>Individualized Education Program</td>
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<tr>
<td>IFCEC</td>
<td>Indiana Federation Council for Exceptional Children</td>
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<tr>
<td>IFSP</td>
<td>Individualized Family Service Plan</td>
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<td>IHO</td>
<td>Independent Hearing Officer</td>
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<tr>
<td>INSOURCE</td>
<td>Indiana Resource Center for Families with Special Needs</td>
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<tr>
<td>IQ</td>
<td>Intelligent Quotient</td>
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<td>IRS</td>
<td>Indiana Rehabilitative Services</td>
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<tr>
<td>ISB</td>
<td>Indiana School for the Blind</td>
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<tr>
<td>ISD</td>
<td>Indiana School for the Deaf</td>
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<td>ISEAS</td>
<td>Indiana Special Education Administrator’s Services</td>
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<td>ISTEP</td>
<td>Indiana Statewide testing for Education Progress</td>
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<tr>
<td>Acronym</td>
<td>Full Form</td>
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<tr>
<td>ITP</td>
<td>Individual Transition Plan</td>
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<tr>
<td>LD</td>
<td>Learning Disability</td>
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<tr>
<td>LEA</td>
<td>Local Educational Agency</td>
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<tr>
<td>LRE</td>
<td>Least restrictive Environment</td>
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<tr>
<td>MD</td>
<td>Multiple Disability</td>
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<tr>
<td>MIMD</td>
<td>Mild Mental Disability</td>
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<tr>
<td>MOMD</td>
<td>Moderate Mental Disability</td>
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<tr>
<td>OCR</td>
<td>Office of Civil Rights</td>
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<tr>
<td>OHI</td>
<td>Other Health Impairment</td>
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<tr>
<td>OI</td>
<td>Orthopedic Impairment</td>
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<td>OSEP</td>
<td>Office of Special Education Programs</td>
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<tr>
<td>OT</td>
<td>Occupational Therapy</td>
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<td>OVR</td>
<td>Office of Vocational Rehabilitation</td>
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<td>PAC</td>
<td>Parent Advisory Committee</td>
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<tr>
<td>PE</td>
<td>Physical Education</td>
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<tr>
<td>PT</td>
<td>Physical Therapy</td>
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<tr>
<td>ROM</td>
<td>Range of Motion</td>
</tr>
<tr>
<td>SEA</td>
<td>State Education Agency</td>
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<tr>
<td>SLP</td>
<td>Speech and Language Pathologist</td>
</tr>
<tr>
<td>SMD</td>
<td>Severe Mental Disability</td>
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<tr>
<td>SSI</td>
<td>Supplemental Security Income</td>
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<tr>
<td>TBI</td>
<td>Traumatic Brain Injury</td>
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<tr>
<td>TDD</td>
<td>Telephone Device for the Deaf</td>
</tr>
<tr>
<td>TOR</td>
<td>Teacher of Record</td>
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<tr>
<td>TOS</td>
<td>Teacher of Service</td>
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<tr>
<td>VI</td>
<td>Visual Impairment</td>
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MONITORING AND SELF-REFLECTION

A necessary element for growth for any professional, including paraeducators, is the ability to reflect on our performance. Reflection provides us with valuable information. It should be our desire to enhance our skills regardless of our experience level. The expectations for professionals, particularly in the field of education, constantly change. We must demonstrate flexibility in order to adapt to the constant changes that are necessary.

The next section of your handbook provides a tool for paraeducators to assist with the monitoring and self-reflection process. The contents of this section contain knowledge and skill “common core indicators” that the Council for Exceptional Children (CEC) has identified as important for accountability of paraeducators. In addition, those indicators have been presented in a format that will allow you to evaluate your own performance in each area. We have also provided a section for supervisor input. Although this is not a requirement, it may be a helpful tool for communication between you and your teacher. Most buildings have a specific format that is used for your formal observations and evaluations. Perhaps, this could be an additional tool to use in this process.