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Informative Paper

Clearing the air on special education: Informing parents as a critical first step

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The history of special education has been a long, arduous movement. From its inception, special education has met with misunderstanding, especially by parents. Special education is alsocontinuing to expand with new strategies and approaches. Again, parents may not be fully aware of these changes and options available to them. This paper looks at the relevant information interms of legislation and techniques in the field. Further, it offers the reader an action plan for a better understanding of the process.

Key words*:* ADA, EAHCA, ESEA, ESEAD, FAPE, IDEA,NCLB, PARC, RTI

INTRODUCTION

Prior to the middle of the 20th century, educational programs for students with disabilities were localized inconsistent and voluntary (Downing, 2007). Federal legalization created a standard for special education. However, parents of students with special needs still believed educators do not value their input when creating an individual education plan (IEP) (Fish, 2008). Improving communication between parents and educators is the first step to creating a productive educational environment (White, 2014). However, professional's use of educational jargon and parents' lack of familiarity with school system create unnecessary barriers to providing an effective education (Smith, 2001). Parents who become knowledgeable on special education law are more likely to develop an effective IEP and acquiring the services necessary for their child's success (Fish, 2006).
Parents should know the Individuals with Disabilities Act (IDEA) of 2004 outlines safeguards to encourage parental involvement in the IEP process. Parents also need to understand IDEA promotes a model called,response to intervention (RTI) (Nai-Cheng, 2014). RTI is a relatively new approach to evaluating teacher effectiveness and student success (Brown-Chidsey & Steege, 2010).

Rhyne (2007) argues standardized test do not distinguish a child that learns at a slower pace versus a child who is receiving inappropriate instruction. However, RTIeffectivelyevaluate teacher instruction and monitorthe students' adequate yearly progress, as mandated by the NCLB and IDEA legislation (Rhyne, 2007).

Developing an understanding of the current legislation requires a review of the litigation that lead to the Individuals with Disabilities Education Act of 2004 and its precursor PL 94-142, The Education for all Handicapped Children Act.

Given the importance of understanding the law for parents as it pertains to their special education educating their child, this paper will examine the development of special education services, identify areas of parental concern, and discuss possible waysto remedy pitfalls in the special education process as a critical first step.

To begin, it may be important to understand the laws

*Corresponding author. E-**mail**: semich@rmu.edu and other legislation both past and current that has relevance to parents with special education children.

Establishing Educational Rights for Students with Disabilities

The first court case to secure educational rights for students with disabilities occurred in 1954 when the “separate but equal” practices of segregated schools were struck down by the Supreme Court. Oliver Brown filed a law suit against the Board of Education of Topeka Kansas (Chinn, 2004; Downing, 2007). In Brown vs. Board of Education, the Supreme Court met to decide whether or not Board of Education of Topeka Kansas violated Oliver Brown’s rights under the Equal Protection Clause in Fourteenth Amendment. The Supreme Court ultimately decided that if two schools were separated they could not be equal. Thus, the Equal Protection Clause prohibits the operation of separate public schools for whites and black. Although this case was inspired by racial inequalities, it was also the first court case to impact children with disabilities because at this time students with special needs were also placed in schools separate from their peers (Thomas, Cambron-McCabe& McCarthy, 2009). In this case, the Supreme Court ruled education must be made available to all on equal terms. This decision served as the basis for the admission to public schools for a number of previously limited or excluded populations, including previously excluded on the basis of race, sex, national origin and disability (Thomas et al., 2009). The next legislation regarding special education occurred in 1965, with the authorization of the Elementary and Secondary Education Act (Tillman &Scheurich, 2013).

Secondary Education Act of 1965

The Elementary and Secondary Education Act (ESEA) was the first large scale federal legalization aimed towards creating equal educational opportunities for all American students. The ESEA offered government funding of public education for economically disadvantaged students. Federal funds from the ESEA were allocated to improve school resources, such as library books, access to materials, etc. in low income communities (Tillman & Scheurich, 2013). Over time the focus shifted from school inputs (what schools could provide) to school outputs (what skills students leave with). To comply with federal legalization schools began adopting minimum competency test to ensure students acquired the ability to read and do basic math. Although somewhat narrow in focus, the ESEAD set a precedent for Congress and federal administrative influence in public school policies and practice through funding laws (S. Thomas *et al*., 2009).

Federal involvement regarding educating children with disabilities would come a short time later. In the early 1970’s two landmark Federal class action suits ensured equal access to education for all students, which includes students with disabilities (Downing, 2007).

Federal Class Action Suits in the 1970’s

Before two critical law suits: Pennsylvania Association for Retarded Citizens (PARC) V. the Commonwealth of Pennsylvania (1971) and Mills vs. Board of Education (1972), many of the country's students with disabilities were excluded from public education or segregated in self-contained special education classrooms (Chinn, 2004). Chinn (2004) explains, until this time availability of services was determined by the nature and degree of the disability. Many children with severe learning disabilities were institutionalized in state schools for the mentally retarded.

Consequently, PARC brought suit againstCommonwealth’s Secretary of Education, Secretary of Public Welfare, the Board of Education, and 13 school districts for the failure to provide children with mental retardation with apublic supported education (Chinn, 2004). Furthermore, PARC argued that the state violated the student’s right under the Equal Protection Clause under the Fourteenth Amendment, as upheld by Brown vs. Board of education. There were four critical arguments brought before the district court. First, all children with mental retardation are capable of learning. Second, education cannot be narrowly defined as only the provision of academic learning. It must also include non-academic learning such as self-help skills. Third, as per Brown v. Board of Education, the Commonwealth of Pennsylvania as a public supported educational system, could not deny children with mental retardation the same access to public education that typically developing children receive. Lastly, PARC contended, that with early intervention, students with mental retardation could achieve a greater amount of learning (Chinn, 2004). The court decided children between the ages of 6 and 21 are to be provided free public education. The court also indicated children with mental retardation and other disabilities should be educated in programs most like those provided to peers without disabilities (Chinn, 2004). Within a calendar year, findings in PARC vs. the Commonwealth of Pennsylvania were expanded in Mills vs. Board of Education (Downing, 2007).The case of Mills vs. Board of Education was filed in a district court in Washington D.C. The suit was brought by parents of seven children on behalf of all 18,000 out-of-school children with disabilities in the District of Columbia (Chinn, 2004). Similar to PARC, Mills contended the Board of Education violated the aforementioned children’s right to Due Process under the Fourteenth Amendments by excluding them from education without due process. The court found in favor of Mills, mandating that the school district provide all children with disabilities a publicly supported education. The court also outlined due process procedures for labeling and placing children with disabilities into a school placement (Chinn, 2004).

The PARC and Mills cases lead to over 40 federal cases across the country. The outcomes of these cases were consistent with the PARC and Mills cases. Consequently, to avoid further law suits, some states passed litigation mandating public education for children with disabilities (Chinn, 2004).

Significant Acts of Congress in the 1970's

Shortly their after the barrage of court cases, inspired by the PARC and Mills decision, Congress took action. Again to avoid additional law suits with similar outcomes Congress made federal legislative changes. The first of many changes came in Section 504 of the Rehabilitation Act of 1972. The objective of this law was to provide consistency in services delivered to across the country to individuals with any physical or mental impairment that substantially limits one more major life activities (Chinn, 2004; Zirkel, 2012).

Section 504 of the Rehabilitation Act of 1973. This portion of the Rehabilitation Act prohibits discrimination against persons with disabilities in programs receiving federal funds (Downing, 2007). Section 504 of the Rehabilitation Act states: No otherwise qualified disabled in the United Sates shall, solely by thereason of his handicap, be excluded from the participation in, be deniedthe benefits of, or be subject to discrimination under any program or activity receiving federal financial assistance. ("Rehabilitation Act of 1973, Section 504, 29 U.S.C Section 794,")Zirkel (2012) states, provision Section 504 of the Rehabilitation Act often receives insufficient attention, primarily due to the power and broad implications from the statement "any program or activity receiving Federal financial assistance." ("Rehabilitation Act of 1973, Section 504, 29 U.S.C Section 794,") This phrase not only applies to school districts for their direct operations, but also impacts other state education agencies. The language in provision Section 504 has a further reach than the current Individuals with Disabilities Education Act (Zirkel, 2012). In fact, Section 504 of the Rehabilitation Act served as a stepping stone in the creation of the Americans with Disabilities Act of 1990 as well as the Individuals with Disabilities Act of 2004 (Zirkel, 2012). The first version of what is now known as the Individuals with Disabilities Act was passed as the Education for All Handicapped Children Act (EAHCA) in 1975 (S. Thomas et al., 2009).

Education for All Handicapped Children Act (EAHCA) PL 94-142. Passed in 1975, the EAHCA marked the first key federal legislation specifically relevant for students with autism spectrum disorders (Lord & McGee, 2001). This landmark legislation assured access to public education for all children, including those with mental or physical disability. Prior to passing EAHCA children who did not "fit" into schools were often excluded. With the passing of EAHCA schools now are required to provide services that "fit" the abilities of the children (Keogh, 2007). More specifically, the EAHCA ensures all students regardless of disability receive a free appropriate education in a least restrictive environment (Schuster, 1985). Additionally, children with a disability are required to have an individual education plan that includes learning goals and objectives (Schuster, 1985).

The EAHCA was a critical step providing quality education for all students. However, this legislation, lacked specific goals for students, methods for teachers, and resources for school districts to provide an effective education. Further complicating these issues were the inconsistent practices from state to state (Chinn, 2004; Lord & McGee, 2001).

Amendments to the EAHCA

Although the EAHCA ensured the right to quality education for students with special needs, a number of amendments were necessary to address how educators are to address the needs of students with learning disabilities (Short, Simeonson, & Huntington, 1990).Public Law 99-457. In October of 1986 congress passed Public Law 99-457, an amendment to the Education of Handicapped Act. This amendment would establish a national agenda for additional and broader services for younger children with special needs and their families (Short et al., 1990). The P.L. 99-457 added two mandates to the EAHCA. First, public schools must provide services to children between the ages of 3 – 5 years. Services include timely multidisciplinary assessments, placement in the least restrictive environment, and due process in case of parental dissatisfaction. Additionally, schools are required to develop an Individualized Education Plan, when appropriate and desired by parents (Short et al., 1990). Secondly, the new legislation included a state grant programs for children ages 0 – 36 months (Part H). This provision required early intervention programs to develop an Individual Family Service Plan (IFSP). This document is similar to an IEP. However, the IFSP include goals for the parents and other family members, in addition to student goals.

The 1990 Amendments of EAHCAbecame the first version of the Individuals with Disability Education Act. This language in this legislation reflected the need to put people first. Instead of using the terminology, "handicapped children" the act was renamed the Individuals with Disabilities Education Act (IDEA) (Downing, 2007). IDEA also stated, educators are responsible for formalizing transition plans for students who required alternative placement. The new transition plan requires an Individual Education Plan (IEP) specific to all students who are 16 years of age or younger. The IEP is to be completed before a child can pursue an education in an alternative placement (Downing, 2007). This amendment also included expanding the definition of disabling conditions to include traumatic brain injury an autism as separate categories. However, the terms, 'child with disability and 'autism' would not be clarified until the

Individuals with Disabilities Education Act of 1997 (Lord & McGee, 2001).

The Individuals with Disability Education Act of 1997.

In IDEA 1997, the terms 'child with disability' and 'autism' were clearly defined (Lord & McGee, 2001). These definitions establishing that children diagnosed with autism (and other disabilities) qualify for services under IDEA (Lord & McGee, 2001) This legislation defines a 'child with disability' as a child withmental retardation, hearing impairments (including deafness) speech or language impairments, visual impairments (including blindness), serious emotional disturbances (hereinafter referred to as 'emotional disturbances', orthopedic impairments, autism, traumatic brain injury, other health impairments or specific learning disabilities and who, by reason thereof, needs special education and related services. (Individuals with Disability Education Act Amendments, 1997)

Additionally, the provision further defines autism as a: developmental disability significantly affecting verbal and nonverbalcommunication and social interaction, generally evident before the age of three that adversely affects a child's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines and unusual responses to sensory experiences.(Individuals with Disability Education Act Amendments(1997)

Additionally, the IDEA Amendments of 1997 focused on free appropriate public education (FAPE) and least restrictive environment (Downing, 2007). The two concepts reflect the belief that special education can in a large part does not require a separate place for learning. Rather the learning can occur in the same environment with a different set of support and/or curriculum (Downing, 2007). Lord and McGee (2001), identifies six major principals affirmed in the IDEA of 97.

First, all children with disabilities must be provided a free and appropriate public education. Regardless of degree of impairment or manifestation of behavior, children with a disability and/or autism spectrum disorders cannot be denied educational services. Secondly, all children are entitled to a nondiscriminatory evaluation. Each student must receive a culturally competent evaluation by personal with experience with said evaluation. The third principle is unique aspect of this amendment. It requires an individualized education plan, with student specific goals and objects. Furthermore, the individualized education plan must be completed before a student can be placed into an alternative placement. Fourth, as much as possible, children with disabilities must be educated with children without disabilities. This principle is often called the least restrictive environment. The fifth principle lines itself with due process which is covered under the Fourteenth Amendment. Due process is a set of legal procedures to ensure the fairness of educational decisions and the accountability of both professionals and parents in making those decisions. Consequently, if parents are unhappy with the schools educational plan for their child they have a process to ensure their child's needs are being met by the school. This process can include an individual evaluation from a qualified examiner outside of school, a due process hearing, and parents can take other options (like reopening an IEP) to voice their interest and concerns. Lastly, parents are to be included in the development of their child's individual educational plan (Lord & McGee, 2001).

This legislation clarified guidelines for providing education as well as identifying who this covered under IDEA of 1997 (Lord & McGee, 2001). However, the next wave of legislation in 2001 set an unprecedented increase in the role of the federal government in education (Yell, Drasgow, & Lowrey, 2005).

The No-Child-Left-Behind-Act of 2001

The No Child Left Behind (NCLB) Act, increased the accountability for states by requiring high academic standards for all children (Daniel, 2008; Downing, 2007). Generally speaking, the NCLB Act of 2001 was designed to improve schools by mandating accountability for results; emphasis on doing what works based on scientific research; expanding parental options; and expand local control and flexibility (Yell et al., 2005).

The legislation promotes high quality education in all public schools within the United States. Furthermore, NCLB ensures every public school achieves important learning goals while being educated in safe classrooms by highly competent teachers (Yell *et al*., 2005).

However, some fear these academic standards are unrealistic for students with disabilities (Heward, 2003). The standards are set with the assumption all students can achieve high levels of learning if they receive high expectations, clearly defined standards, and effective teaching to support achievement (Daniel, 2008). Students with disabilities are included in the NCLB Act. Thus, they are expected to meet the same high academic standards as non-disabled children. This expectation caries even more weight for special educators. Special educators must balance the expectation of standard-based reform and the obligation to provide individualized educational plans for students with special needs (Voltz & Collins, 2010). The 2004 reauthorization of the Individuals with disabilities Education Act marked law makers attempt to mitigate the apparent conflict within the NCLB and the previous IDEA legislation (Downing, 2007)

The IDEA of 2004

A major focus of the IDEA was to a line previous IDEA legislation with the educational goals of the No Child Left Behind Act of 2001 (Downing, 2007). The IDEAof 2004 legislation echoes NCLB’s need for responsive, appropriate, inclusive and high-quality services within an environment of accountability and positive results(Trohanis, 2008).

Under IDEA of 2004 practitioners in special education are responsible for documenting progress towards achievement in three outcomes (VanDerHeyden & Snyder, 2006). First, students should develop positive social-emotional skills to promote healthy relationships. Second, students should acquire and apply early language, communication and literacy skills in an educational environment. Third, students must make progress towards developing appropriate behaviors to communicate their needs. In addition to measuring and monitoring academic progress, educators are responsible for helping children adapt socially acceptable behaviors, as opposed to maladaptive behaviors such as aggression (Bruder, 2010; VanDerHeyden & Snyder, 2006). A great deal of criticism ensued due to this list of educational standards.

Criticism around IDEA

Some fear these academic standards are unrealistic for students with disabilities (Heward, 2003). The standards are set with the assumption all students can achieve high levels of learning if they receive high expectations, clearly defined standards, and effective teaching to support achievement (Daniel, 2008). Students with disabilities are included in the NCLB Act. Thus, they are expected to meet the same high academic standards as non-disabled children.

The movement's emphasis on content, or what is learned, not the process by which students with disabilities learn (Daniel, 2008). The new definition of FAPE is unrealistically into the IEPs of students with disabilities. Daniel (2008) explains this emphasis requires educators to abide by a far to ridged content. Making tailoring materials to fit the needs of the student difficult. This focus on proficiency takes away from providing meaningful instruction in the interest of providing a FAPE. Once a child is enrolled in early childhood intervention an individualized and comprehensive program is developed in the form or an individualized family service plan (IFSP) for infants and toddlers or an individualized education program (IEP) for preschoolers. The IFSP is an instrumental document developed by educators to represent professional and family collaboration and communication for children covered under Part C of the IDEA of 2004 (Trohanis, 2008). The IFSP includes child’s evaluation results, state eligibility, and establish outcomes with suggested recommendations to achieve the desired outcomes (Pizur-Barnekow, Patrick, Rhyner, Folk, & Anderson, 2010). The IFSP should be the cornerstone of early intervention services and serve as a roadmap that identifies intervention priorities as well as addressing family concerns, strengths, and needs in regards. Ideally, the IFSP documentation function as a point of reference for the family and educators by outlining program goals and objectives in a clear concise manor (Pizur-Barnekow *et al.*, 2010).

An IEP is a similar document, but falls under the protection of Part B of the IDEA of 2004. Part B is the federal legislation that requires states to provide free and appropriate public education for children with disabilities between the ages of three to five (Trohanis, 2008). Additionally, the IEP focuses on the student’s academic goals and in class behavior as opposed to family goals, which are the primary focus of the IFSP (Pizur-Barnekow *et al*., 2010).

Regardless if the Intervention plan is in the form of an IEP or an IFSP plan, once the intervention begins, educators are legally obligated to measure and monitor ongoing progress. Data must include child and family service implementation plan, learning opportunities, intervention strategies, and developmental and behavioral progress (Bruder, 2010). The family, school district and organization providing services are all responsible for learning outcomes (Bruder, 2010). The Individuals with Disabilities Act (IDEA) in 2004 supports a model, called response to intervention (RTI), to evaluate adequate progress and what interventions should be provided to students. The RTI model is the recommended way to measure AYP and monitor FAPE (Colker, 2013).

Response to Intervention

The RTI model resembles a triangle with three sections representing the three levels, or tiers, of instruction. Each tier begins with an assessment to identify students’ who are inadequately responsive. An unresponsive learner might require intervention at the next, more intensive layer in the system (Fuchs & Fuchs, 2006). The first, bottom most, tier represents the general education curriculum. About 80 % of students are able to be successful with Tier 1 instruction alone. The remaining 20 % of students will require Tier 2 level of instruction. Tier 2 interventions include small group supplemental instruction, which is added to the general curriculum. Approximately 15 % of the students will be successful with Tier 1 plus Tier 2 interventions. Tier 3 is for the remaining 5 % of students who do not meet educational goals with Tier 1 plus Tier 2 interventions (Brown-Chidsey & Steege, 2010). Tier 3 activities include comprehensive evaluation to identify whether a student has a specific disability and/or meets the criteria for special education. Students in Tier 3, receive intensive instruction daily, sometimes supplanting portions of their Tier 1 or Tier 2 instruction. In this model Tier 3 also serves as a time to closely monitor instruction, and gather necessary information to make data based-decisions for developing an Individual education plan (IEP).

The IEP specifies what instruction the student needs across all three tiers of intervention (Brown-Chidsey & Steege, 2010). The rate of progress determines whether or not the instruction is delivered at the appropriate level of difficultly for the student. In other words, monitoring the rate of student response helps an educator discern if the student should be able to move more quickly or if the progress is truly a result of underlining disabilities (Rhyne, 2007). Furthermore, the RTI model requires evidence-based curricula and an ongoing formative schedule of assessment revealing performance and learning information (Kubina & Yurich, 2012).

These aforementioned listings of laws, legislation, and educational models (RTI) certainly have a significant impact on children with disabilities. Furthermore, they serve an important role also to parents who are responsible for helping plan and implement special programs for their special needs students. The legislation may stay the same, however, the approaches taken by educational institutions to enact these may vary. Parents must have the opportunity to weigh and consider what is in the best interest to their children.

Past practice has indicated that many times parents are informed of a meeting without a thorough understanding of all available options. Informational and preplanning meeting should be a part of the fabric of informing parents. Often, parents are more concerned with the disability and remediation needed to address the disability. However, giving parents a sense history of special education coupled with an action planthat addresses IDEA and RTI would be the most logical approach and would minimize the questions at the IEP meeting.

Creating an Action Plan for Parents

The special education should be thought of as a five step process (Katz, n.d.). The first step is identifying the need. The second step is the formal assessment for the individual identified as having a need. The third step is creating an individual educational plan based on the assessment and any information the parent can provide. The fourth step occurs during the first IEP meeting. At this meeting placement, accommodation and special services are discussed. The fifth step accounts for the annual and triennial reviews and as well asprogress meetings. Using this model the following section will highlight details every parent should know and what they should do during each step in the process.

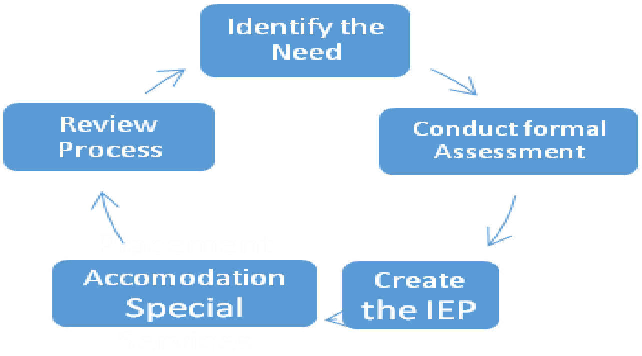

Figure 1: Model of Action Plan

Step One: Identifying the Need

The process for identifying students under the Individuals with Disabilities Education Act (IDEA) consist of two overlapping concepts: child find and eligibility determination. First, under IDEA all schools are required to locate, identify and evaluate all children with disabilities (Martin & Zirkel, 2012). By law, the parent or school district can request an evaluation for a students suspected of having a disability (Cohen, 2009). If a parent suspects their child has special needs they can help by making a list of concerns. Anecdotal evidence provided by parents and teachers are considered when students are referred for an evaluation (Burns, 2006). Prior to a request for an individual evaluation parent input is extremely important. A parent can help during this part of the process by providing information regarding the child's academic history, prior evaluations, or information on the effectiveness of any previous academic or behavioral interventions.

Secondly, Federal Law mandates a "reasonable period of time" to evaluate a student and determine whether a student has a disability. A determination must be made within 60 days of receiving parental consent for the evaluation, or within the timeframe established by the state (Burns, 2006).

Step Two: The Formal Assessment

The assessment period seen as a problem-solving process that involves collecting information about the student.The formal assessment not only determines eligibility for services it also highlights the academic and behavioral strengths and needs of the student (Peirangelo & Giuliani, 2008). Additionally, the assessment includes the educational needs, classroom performance, beginning levels of performance and effective services and accommodations specific to the student.

Parental involvement is critical in this step for two reasons. Parents are the foremost expert on their children. If parents disagree on the evaluation of their child they have the right to seek out an independent evaluation. Secondly, providing an information on previous interventions can help educators provide create aneffective individual educational plan. Under the Individuals with Disabilities Education Act, the school district has 30 days from the documentation of a disability to complete an individual educational plan (Burns, 2006).

Step Three: The Individual Educational Plan (IEP)

Every child who is eligible for special education have an IEP (Cohen, 2009). The IEP team includes a team of individuals including, special educators, at least one general educators, and the parents (Cohen, 2009). The IEP includes description of the special education program the student will receive, individualized behavioral objectivesand measurable annual goals and measurable annual goals and objectives (Drasgow, Yell, & Robinson, 2001).

Following the meeting, a student's parents should be given a copy of the IEP, and the person who conducted the meeting should contact them to ensure that they understood the process (Yell, Katsiyannis, Ennis, & Losinski, 2013). Unfortunately, most parents perceive the IEP meeting as a transfer of information, in which educators read an IEP to the parents. Instead the IEP meeting should be a conversation between parents and school officials where concerns of both parties are addressed (Yell, *et al*, 2013). Parents should view the IEP meeting as a time to discuss goals and objectives for their children with educators, as equals in the special education process (Fish, 2008). In addition to creating goals, educators are responsible for monitoring student progress. The NCLB and IDEA acts encourage educators relay on a model called response to intervention (RTI) (D. Fuchs & L. Fuchs, 2006). Parents should know RTI measures the progress of the student (in the response) and the effort of the teacher (intervention). This method of collecting information helps the teacher decide if the student is capable of moving to more advanced material or if instruction should be changed in the hopes of making better progress (Rhyne, 2007). Unfortunately, the language used within the RTI framework is often novel to parents. Parents should be encouraged to ask questions regarding any jargon used by educators.Additionally, parents and educators should openly discuss the most appropriate placement for the student.

Step Four: Placement, Accommodation and Special Services

Once a child is identified as having a disability parents must work with the IEP tam to choose the most appropriate educational program. Within the school district, the options typically range from exclusionary models, such as a separate school or self-contained classroom, to a full inclusion setting (Hess, Molina, & Kozleski, 2006). The IEP team should work together to determine placement. Placement decisions are made after the team has developed the student's goals and services in the IEP (Yell et al 2013). Placement requires what the law calls consensus, which means that a strong majority of the team members must agree (Katz, n.d.). If a parent disagrees with the placement of their child they can request a due process meeting (Cohen, 2009). After the initial IEP meeting, the team will meet at least once a year to review annual progress.

Step Five: Annual and Triennial Reviews and Progress Meetings

The IEP is the cornerstone of the special educational process. In addition to providing a framework for instructional design and delivery, the IEP should state how individual progress is measured (Phillips, 2008). Educators are required to report student progress, as outlined in the IEP during each grading period. However, a placement that uses response to intervention framework, can provide parents with a more accurate measure of student performance. Instead of being overwhelmed by RTI jargon, parents should be encouraged to know academic progress is constantly being recorded. This record of progress is in addition to the annual IEP goals. At a minimum the IEP should provide annual goals that are updated before the start of the school year. Additionally, a triennial review is conducted when the IEP team determines there is a needa needfor further testing or if the child should continue to receive special education or related service (Phillips, 2008).

CONCLUSION

In summation, educating parents in terms of legislative information and providing these parents with a clearly defined action plan holds school districts to a much level higher level of responsibility and accountability. Informed parents are much better prepared to make decisions about their children with disabilities. Special education law advocates not only for the child, but for the parent. The role of parents in their child’s educational treatment has changed over the years. Most notably, the legislation continues to empowerment parents by emphasizing their right to weigh in on educational decisions affecting their child (Yell. *et al*, 2013).

As noted earlier, The Individuals with Disabilities Education Act has endured name changes, different titles and amendments (Zirkel, 2012). Litigation regarding providing free appropriate public education drastically improved since *Brown v. Board of Education*. The role of parents in their child’s education has also improved with a renewed emphasis on empowerment and decision making (Hess, Molina, &Kozleski,2006).

As Lord and McGee (2001) state, the difficulty in finding the most appropriate education interventions are the differences in assumptions about what is possible. Educators should not be presumptuous when creating educational and behavioral objectives for students with special needs. As per law, and perhaps common sense, educators should work with the individuals that know the children the best, their parents (Yell et al., 2013).

Presently, IDEA of 2004 (IDEA) is the primer legislation ensuring services to children with disabilities throughout the nation and recommend constant measuring and monitoring student progress through the response to intervention (RTI) model.Thus, growth models such as RTI should be used to evaluate instruction. Good instruction includes constant monitoring of student progress, which can help an educator discern if the student should be able to move more quickly or if the progress is truly a result of their disability (Rhyne, 2007). Again, Response to Intervention (RTI) is based on high-quality instruction, frequent assessment and data-based decision making (Brown-Chidsey & Steege, 2010). Quality measured by the specificity and sensitivity of instruction. The RTI model supports the assertion that all children deserve effective instruction that leads to the development of functional skills. Frequent assessment yields measurable progress regardless of skill level. Data-based instruction drives the pace of curriculum (Brown-Chidsey&Steege, 2010). TheRTI model asserts all students, given proper instruction can learn (Johnson & Street, 2012). Most importantly, parents need to understand they have a right to understand and participate in the IEP process to ensure their child is receiving a free and appropriate education. Parental knowledge of the special education process and participation in the IEP process increases the likelihood of student success (Smith, 2001).

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