

**MINUTES**  
**June 3, 2014 Meeting**  
**Indiana State Advisory Council (SAC)**  
**on the Education of Children with Disabilities**  
H. Dean Evans Community and Education Center  
8550 Woodfield Crossing Blvd.  
Indianapolis, IN, 46240

**Council Members:**

**Present**  
**(Yes/No)**

<b>Tiffany Ball</b> , parent representative	Y
<b>Sirilla Blackmon</b> , Division of Mental Health & Addiction, FSSA	Y
<b>Becky Bowman</b> , Indiana Department of Education	Y
<b>Keith Briner</b> , Indiana State Department of Health	Y
<b>Rich Burden</b> , IN*SOURCE and parent representative	Y
<b>Annette Castillo</b> , parent representative	N
<b>Michael Dalrymple</b> , Indiana School for the Blind and Visually Impaired	N
<b>Kim Dodson</b> , ARC of Indiana	Y
<b>Dr. Karol Farrell</b> , MSD of Washington Township	N
<b>Gina Fleming</b> , Archdiocese of Indianapolis	N
<b>Carol Guess</b> , parent representative	Y
<b>James Hammond III</b> , Indiana Assoc of Rehabilitation Facilities/INARF	N
<b>Kylee Hope</b> , Division of Disability & Rehabilitation Services, FSSA	N
<b>Jan Huffman</b> , Parent Representative	Y
<b>Lisa Kovacs</b> , Hands & Voices International and parent representative	Y
<b>John Nally</b> , Indiana Department of Corrections	Y
<b>Danny O’Neill</b> , parent representative	Y
<b>Patty Reed</b> , About Special Kids and parent representative	N
<b>Dr. Sharon Johnson-Shirley</b> , Lake Ridge Schools	Y
<b>Dr. Anita Silverman</b> , Department of Child Services	Y
<b>Kristi Tesmer</b> , parent representative	Y
<b>Lucy Witte</b> , Indiana School for the Deaf Board	Y

**Also Present:**

**Tracy Brunner, IDOE**

**Call to Order**

In the absence of Chair Karol Farrell, SAC Vice Chair Lisa Kovacs called the meeting to order at 9:35 a.m. Fifteen of twenty-two members were present.

**Informational Items**

State Director of Special Education Becky Bowman gave slide presentations to update the council regarding Indiana’s Alternate Assessment and new academic standards. Becky responded to members’ comments and questions throughout this presentation then gave a Due Process update. Members received handouts summarizing data on hearing and appeals, complaints and mediations, which were compiled by the Due Process staff at the IDOE Office of Special Education. Becky then moved on to a brief overview of the new federal Special Education compliance indicator that U.S. DOE refers to as the State Systemic Improvement Plan (SSIP). The requirement for this state-specific indicator is part of the federal emphasis on results driven accountability. In discussion that followed, Rich Burden briefly described the first SSIP Stakeholders Meeting, which is the mechanism for the State to gather input on selection and monitoring of the “SSIP” which will become part of

Indiana’s Part B State Performance Plan and Annual Performance Report. Lisa Kovacs offered to compile and share council member input for Rich to share at future meetings.

Kim Dodson, SAC Legislative Committee Chair and Member of the State Seclusion and Restraint Commission, presented an update on the work of the commission and discussed the process currently under way to collect public comments on a proposed rule the commission helped to draft. Discussion ensued regarding typical classroom experiences with seclusion and restraint as well as timelines and budgets for statewide training necessary to implement the new rule when it is finalized. Kim responded to questions and offered to share with the Commission comments or concerns from State Advisory Council members.

**Discussion Items**

Noting that council members submitted no comments about the draft Bylaws discussed at the March council meeting, Acting State Advisory Council Chair Lisa Kovacs explained that because Indiana statute IC 20-35-3-1 governs appointments and recommendations for replacement of members as well as the composition, purview and duties of the Council, the Council is not required to establish a set of Bylaws as a governance document. She asked if members preferred to explore the possibility of adopting a brief Operating Procedures document instead of Bylaws. Following general discussion, Lisa called for a vote to express the will of the council on this issue. Tiffany Ball moved and Kim Dodson seconded that the council review and vote on suggested Operating Procedures at an upcoming meeting. The motion passed. Becky Bowman offered to prepare a suggested draft. Through round robin discussion, council members reached consensus that, at a minimum, the operating procedures should also include a copy of the state statute governing the SAC and a list of current members with their statutorily defined role on the advisory council.

**Action Items**

Anita Silverman moved and Tiffany Ball seconded to approve the minutes of the March 21, 2014 meeting. The motion passed. In brief discussion members agreed that, in the future, minutes posted on IDOE’s web site should be accompanied by copies of handouts and other documents discussed at the meeting.

**Recommendations and Concerns of the Council Members**

Dr. Silverman voiced concern about increases in over-identification of children in need of special education services, citing examples that have come to her attention in recent years. Sharon Johnson-Shirley urged fellow council members to submit public comments on the latest proposed changes to Indiana’s Rules for Educator Preparation and Accountability (aka “REPA”). Dr. Shirley also expressed concern about limitations on the use and distribution of specific state education grants. Council members also held a brief discussion about the potential impacts on Special Education of recent national trends in education. In response to comments about mechanisms to advocate for children with disabilities, Lisa Kovacs described her experiences comparing notes with parents and colleagues from other states and the differences she sees in the culture surrounding parent involvement in education policy making in Indiana.

**Public Comment**

There were no public comments.

**Adjournment**

The meeting adjourned at 11:45 a.m.



# RESULTS DRIVEN ACCOUNTABILITY State Systemic Improvement Plan

State Advisory Council  
June 3, 2014

Slide 1

## BACKGROUND

### OSEP VISION REVISION

To create a balance between  
the focus on improved results and  
functional outcomes for students  
with disabilities  
while considering compliance as it  
relates to those results and outcomes

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Slide 2



“We have to expect the very best from our students—and tell the truth about student performance—so that we can give all students the supports and services they need. The best way to do that is by focusing on results.”

U.S. DOE Secretary Arne Duncan

*RDA Press Release, March 2, 2012*

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## Results Driven Accountability

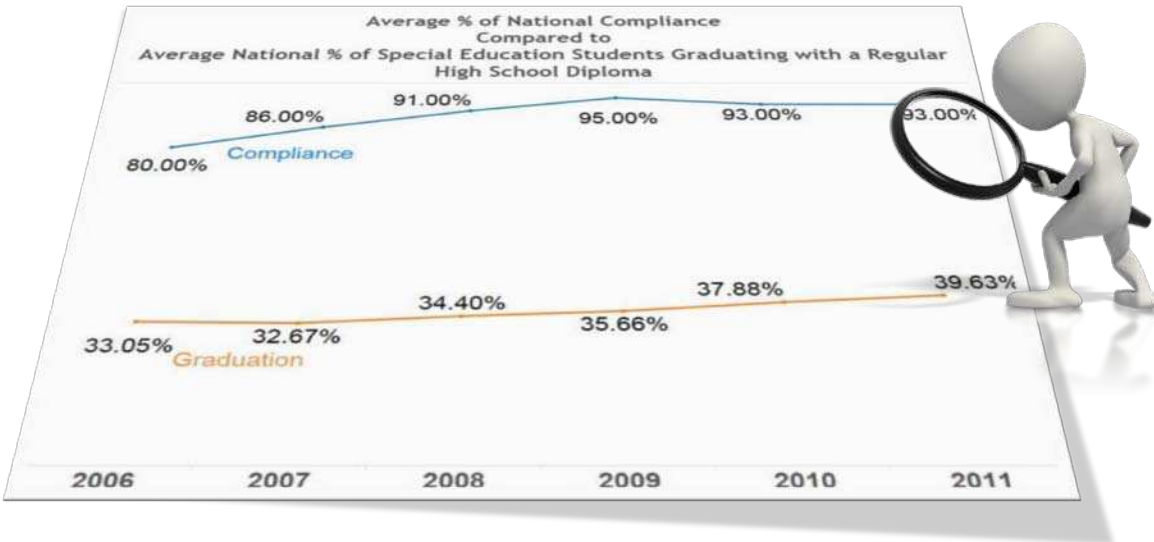
The Office of Special Education Programs (OSEP) at the U.S. DOE has changed focus

- In the past, the focus was to ensure that States meet IDEA program procedural requirements
- States monitored LEAs on various indicators
  - Results (Indiana sets the target)
  - Compliance (the target is either 100% or 0%)

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## How Well is Compliance Impacting Outcomes?



Slide 5

## Results Driven Accountability

- OSEP has repurposed one of the indicators
  - State Systemic Improvement Plan
- OSEP vision for RDA:

**All components of an accountability system will be aligned in a manner that best supports States in improving results for infants, toddlers, children and youth with disabilities and their families**

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## Components of RDA

- State Performance Plan/Annual Performance Report (SPP/APR) measures results and compliance
- Differentiated monitoring and technical assistance supports improvement in LEA, but especially low performing LEAs
- Determinations reflect State performance on results as well as compliance

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## State Systemic Improvement Plan

- The SSIP is a comprehensive, multi-year State Systemic Improvement Plan that will consist of three phases:
- **Phase I** – (due as part of April 1, 2015 SPP/APR)
  - Data analysis/Root cause analysis
  - Identification of the Focus for Improvement
    - State Identified Measurable Result (SIMR)
  - Infrastructure to Support Improvement and Build Capacity
  - Theory of Action

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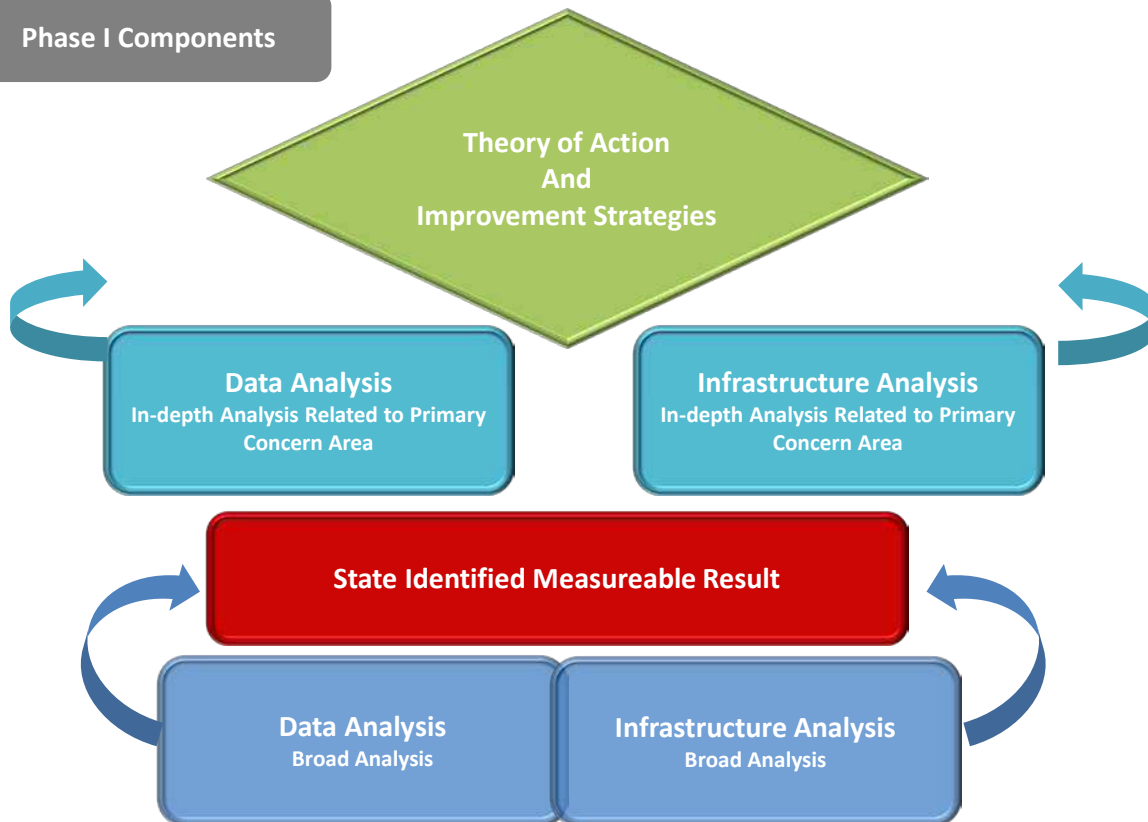
# State Systemic Improvement Plan

- **Phase II** - (due with Feb. 1, 2016 SPP/APR)
  - Infrastructure Development
  - Support LEA Implementation of Evidence-Based Practices; and
  - Evaluation Plan
- **Phase III** – (due with Feb. 1, 2017 SPP/APR)
  - Results of Ongoing Evaluation and Revisions to the SPP

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## Phase I Components



*Big Ideas • Long Standing Issues • Assumptions*

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# SSIP: Stakeholder Involvement

Stakeholder involvement is an expectation in the development of the SSIP. Benefits :

- leads to informed decision-making as stakeholders often possess a wealth of information which can benefit the work
- introduces a range of ideas, experiences and expertise
- reduces the likelihood of conflicts which can harm the implementation and success
- contributes to the transparency of actions
- builds trust between the state and others which can lead to long-term collaborative relationships

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Sandy Schmitz (Facilitator)	NCRRRC
Lisa Kovaks	Special education advisory council
Rich Burden	INSource
Steve Warnhoff	ICASE
Terri Miller (Alternate)	
Kelly Andrews	Principal Association
Tracy Zachary	Teacher
Raimeka Graham	Teacher
Beth Snoeberger	Teacher
Sarah Moore	Teacher
Cory Howard	Teacher
Christine Gesse	Teacher
Megan Schroeder	Teacher
Michele Walker	IDOE Assessment
Karen Stein	IDOE Assessment
Becky Bowman	IDOE Special Education
Nancy Zemaitis	IDOE Special Education
Kristan Sievers-Coffer	IDOE Special Education
Becky Reed	IDOE Special Education
Deb Daily	Accountability
Amy Howie	Project Success
Heather Baker	IDOE Outreach Coordinator
Cindy Hurst	IDOE Title I

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## SSIP: Stakeholder Involvement

- Stakeholder group met May 15, 2014
- Agenda
  - Overview of the SSIP components & timeline
  - Analysis of assessment data (IMAST/ISTEP)
    - Students 'Pass/Pass+; Did not pass; undetermined
  - Small group discussion of the statewide data
    - Any hypotheses, questions, differences that need further investigation
- Group to continue to meet

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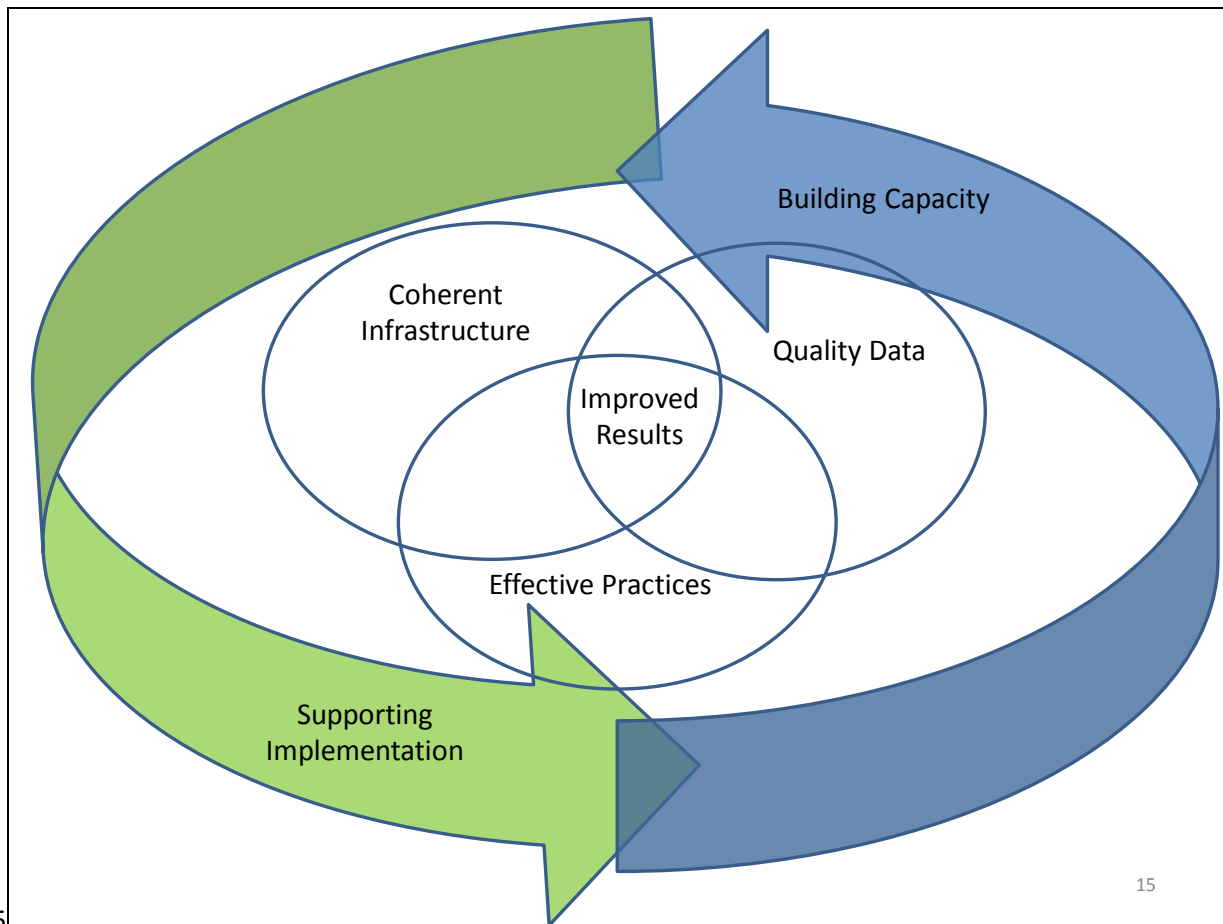
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## NEXT STEPS

- Continue to refine data collection/analysis
- Identification of the Focus for Improvement
  - State Identified Measurable Result (SIMR)
- Identification of infrastructure to support improvement and build capacity
- Develop Theory of Action

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## OSEP Visit: SSIP Implementation

- Indiana was first state to have an on-site OSEP team visit to discuss SSIP activities
  - Two week notice
  - April 23-25, 2014
- Indiana provided feedback both to OSEP and neighboring states
  - OSEP ‘provision of technical assistance –vs- compliance monitoring’

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## FY 2013 and 2014 Hearing Decisions

During FY 2013 and 2014, a total of eight hearing decisions were rendered by IHOs. A summary of each is provided below. Because three of these decisions involved the same student and school corporation, those three decisions are grouped together rather than chronologically.

### **HR-017-2013; HR-007-2014; and HR-018-2014**

These three hearings involved a student with a complex medical history that created a highly unique array of cognitive, academic, and physical issues.

HR-017-2013. In the first hearing, the parents challenged the appropriateness of the school's evaluation; the appropriateness of the IEP; parental participation in the CCC; and whether the IEP offered by the school provided for a FAPE in the LRE that sufficiently met the needs of the student. The student was evaluated by [REDACTED] Special Services in 2007, and completed one year in the school's early childhood program and was then homeschooled by the mother, a licensed special education teacher. In May, 2012, the mother contacted the director about enrolling the student. The school conducted an educational evaluation and convened a CCC meeting. The student was found eligible for special education under the primary classification of Blind/Low Vision with secondary classifications of Orthopedic Impairment and Other Health Impaired. Because of low academic skills the CCC placed him in second grade even though he was old enough for third grade. Due to fatigue he would attend only half-days and would be in the general education classroom 80% of the time with 90 minutes per month of services from a blind/low vision teacher, 45 minutes per day of indirect services for math and language arts, 30 minutes per day of indirect support in the special education classroom for language arts, 30 minutes per reporting period of indirect support by the blind/low vision specialist to provide consultation to teachers, 10 minutes of nursing services three times per day to assist with toileting, and transportation. Accommodations and limited assistive technology were also provided for in the IEP.

The student attended two half days in August, 2012. School staff had not received any training concerning the student's specific needs, had not reviewed or received a copy of the student's IEP, and refused to accommodate his needs. The bus driver didn't know how to get the student's wheelchair on the lift. The mother asked to accompany her child to school so she could help school personnel learn about the student's needs and to facilitate the student's transition to school. The principal refused. The parents subsequently enrolled their child in a private school.

The IHO found the school's evaluation insufficient and incomplete as it omitted important information about the student that the CCC should have had before developing his IEP. The IEP did not meet the student's unique needs, and it was not reasonably calculated to confer educational benefit, resulting in a denial of a FAPE. The IEP did not provide for an appropriate placement in the LRE that would sufficiently meet the student's unique needs and afford him a FAPE. The school was ordered to pay the Student's tuition at the private placement for the 2012-2013 school year. The school was also directed to reconvene the CCC after it received assessment data from the private school. The school could reevaluate the student if it so desired. If the CCC determined the school could devise an appropriate IEP, the school was to involve the private school staff and the student's mother in facilitating the transition.

HR-007-2014. In the spring of 2013, the school provided notice to the parents of its intent to reevaluate the student. The school contracted with a private psychologist to conduct the evaluation. The private psychologist concluded that the classification of Traumatic Brain Injury rather than Specific Learning Disability provided a more accurate reflection of the bases and nature of the student's broad academic issues and made recommendations to the CCC. The parents requested an IEE. The school requested a hearing to demonstrate that its evaluation was appropriate. After hearing, the IHO concluded that the school's educational evaluation was appropriate and provided reliable information about the student's cognitive, academic, developmental functioning and status and other educationally relevant information about the student to facilitate the CCC in determining specific methods and services necessary to meet the student's unique array of needs and devise an educational plan reasonably calculated to provide the student with a FAPE.

HR-018-2014. The third hearing arose out of the parents' challenge to the proposed IEP that would place the student back in the public school. The IHO found in favor of the school, determining that the school devised an IEP that was reasonably calculated to confer an education benefit to the student and that the IEP provided for a FAPE in the LRE. Although the IHO found in favor of the school, because it had been six months since the IEP had been developed, the IHO ordered the school to convene a CCC to update the IEP, modify the dates for the plan to transition the student from the private placement, update present levels of performance and goals, and access student records and conduct classroom observations of the student at the private school. The parents were ordered to provide the required consents for obtaining information from the private school and obtain the most recent progress reports and legible samples of the student's work. (Some of the parents' objections to the proposed IEP were that the present levels of performance were not accurate and goals were included that the student had already mastered. However, the parents and private school failed to provide information to the school as to how the student was performing in the private school, refused to allow the school access to progress reports, and refused to let the school conduct classroom observations. The IHO, therefore, ordered the parents to cooperate in getting the required information for the school.) The parents have appealed this decision.

### **HR-004-2013**

The parents requested a hearing challenging the appropriateness of the student's IEP, specifically concerning the use of a safe room when the student's behavior warranted, and whether staff were appropriately trained to handle the student's behavior. The IHO found that the IEP was appropriate and that staff had been adequately trained. The paraprofessional was certified in the required Non-violent Crisis Intervention Training Program.

### **HR-014-2013**

Ten issues were identified for hearing: whether the school developed an appropriate IEP; whether the school implemented an appropriate IEP; whether the school identified needed services of OT, PT and Speech; whether the school implemented needed services of OT, PT and Speech; whether the school conducted an FBA; whether the school developed a BIP; whether the school provided the parents with timely notice of the CCC meeting to enable the parents to participate in developing the IEP; whether the school inappropriately disciplined the student for

behaviors that were a manifestation of his disability; whether the school failed to identify additional education needs of the student that would require ESY services; and whether the school provided the student with a FAPE.

The student had at least one TBI as a toddler. After that injury the student began having behavioral outbursts and attention difficult. The student was later diagnosed with a malignant brain tumor and underwent surgical removal of the tumor and was treated with chemotherapy and radiation. This resulted in an escalation of “impulse control disorder” and caused oppositional defiant disorder, learning disabilities, memory and organization challenges, and difficulty dealing with anger, irritability, impulse, focus and concentration. The IHO found that the school failed to provide the student with a FAPE. The school was not responsive to the needs of the student, had not evaluated the student from 2007 through 2012, and failed to develop IEPs that were reasonably calculated to offer meaningful educational benefit to the student. The school also failed to implement the IEPs that were developed during the 2010-2011 and 2011-2012 school years. The school failed to identify or implement appropriate PT and Speech services, but did provide appropriate OT services. While the school conducted an FBA, it was inadequate and not appropriate. The BIP developed as a result of the FBA was also inadequate and ineffective. The school did provide timely prior written notice of the CCC meetings, but failed to timely respond to the parents’ request for a residential placement and reimbursement for their costs for the summer and residential placement. The school did not provide written notice pursuant to 511 IAC 7-42-7 of its refusal to place the student in a residential placement. The school did inappropriately discipline the student by changing his educational placement without following appropriate procedures. The school also failed to provide any ESY services although the student continued to struggle with IEP goals, meeting only one goal over the past two years.

The IHO ordered the student placed in a residential setting for up to two years, or less if the residential treatment facility recommends discharge earlier and the CCC agrees. The school was ordered to collaborate with the facility to plan for the student’s transition to home, community and school upon discharge and to provide for wraparound and related services to the extent identified. The school was ordered to reimburse the parents for the IEE, and also to evaluate the student upon the student’s return to the school. The school was also required to reimburse the parents for the costs of private services for the student during the summer of 2012 and August 20, 2012 through March 2013.

### **HR-032-2013**

The parent presented two issues for hearing. (1) Whether the school’s proposed placement was appropriate given the student’s disability. (2) If not, whether two other identified nonpublic schools were appropriate. During the course of the hearing the parent withdrew the second issue as the parent determined that neither of the nonpublic schools was appropriate. The student participates in the general education curriculum, taking mostly honors classes, and receives services and accommodations in the resource room. The student was recently evaluated and the psychologist indicated the student’s IEP met the needs of the student. The IHO found that the school designed an IEP that met the needs of the student and allowed the student to progress and benefit educationally.

### **HR-046-2013**

The parent identified 8 issues (a through h) in her request for hearing, originally naming the IDOE as a respondent. The IDOE moved to dismiss issues (a) and (h). Issue (a) was whether the teacher was HQ. The IDEA regulations and Article 7 both state that there is no cause of action as to whether a teacher is HQ. Issue (h) involved allegations of violation of a variety of laws other than the IDEA and Article 7. IHOs only have jurisdiction under the IDEA and Article 7. The IHO dismissed issues (a) and (h), and dismissed the IDOE as a party as none of the other issues involved the IDOE.

The IHO identified nine issues for hearing:

1. Did the school fail to comply with the settlement agreement?
2. Did the school fail to implement a provision of the student's IEP by allowing access to a separate setting?
3. Did the school fail to implement the IEP by removing reading milestones?
4. Did the school fail to implement the IEP in 2012-2013?
5. Did the school fail to appropriately license and train teachers and staff in 2011-2012?
6. Did the school fail to appropriately license and train teachers and staff in 2012-2013?
7. Did the school fail to allow the parent equal participation in the CCC process and did the school fail to consider parental input in 2011-2012?
8. Did the school fail to allow the parent equal participation in the CCC process and did the school fail to consider parental input in 2012-2013?
9. Did the school fail to provide public records and educational information per the written request of the parent?

The IHO found in favor of the school on all issues, answering each issue above in the negative.

### **HR-008-2014**

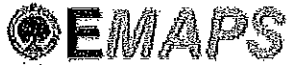
Nine issues were identified for hearing, summarized below:

1. Whether, during the two years prior to the hearing request, the school failed to develop IEPs that were appropriate and met the needs of the student.
2. If the student's current IEP does not meet the needs of the student, what program, services and placement are appropriate?
3. Whether the school failed to perform evaluations needed by the student, including an FBA and OT and AT assessments recommended in the psychological evaluation.
4. Whether the school failed to provide prior written notice to parental requests for a full day of school services, compensatory services to remediate the student's shortened school day, private placement, counseling services, and additional support services and accommodations for the student's emotional disability.
5. Whether the school failed to properly implement the student's BIP.
6. Whether the school's disciplinary procedures constituted a change in placement and, if so, whether the school complied with procedures regarding manifestation determinations.
7. Whether the school provided staff appropriately trained to deal with the student's emotional and behavioral difficulties.
8. Whether the complex of the school's actions or failures to act resulted in a denial of a FAPE.
9. If so, whether and to what extent is the student entitled to compensatory education services?

The student has significant psychological issues and has been identified as a student with an emotional disability, language or speech impairment, and other health impairment. The student's IEP contained significant amounts of unnecessary, out-dated, inaccurate, confusing, and conflicting information. The student was hospitalized twice in 2013, the second time for 45 days after which the parent's insurance carrier refused further coverage. There was no evidence the school provided any programming for the student on his social skills goal or functional skills goal. His IEP indicated that no program modifications were needed to enable the student to be involved in and make progress in the general education curriculum, but the fifth grade progress reports indicated the grades he received were based upon a modified curriculum. Progress reports for fourth grade had not been provided.

On March 2, 2012, the student's 6 ½ hour instructional day was reduced to two hours, which included 20-30 minutes checking in with the Positive Behavior Intervention Specialist, Lunch, Recess, Specials, and in 5<sup>th</sup> grade, regular visits to "hang out" with the principal. No programming or services were provided to assist the student in reaching his behavior goals. The school failed to respond to the parent's repeated requests for additional support and services.

The IHO determined the school failed to develop an appropriate IEP for the student during the 2011-2012 and 2012-2013 school years and did not provide an appropriate placement for the student. The student needs placement in a therapeutic residential facility that can program for his clinical, behavioral, and education needs, and those of his parents, across environments, and in a manner that maximizes the student's ability to participate in a full instructional day. The school did not fail in its duty to conduct an FBA or AT evaluation, but did fail to assess the student's OT needs. The school failed to provide prior written notice to parental requests for a full day of services, compensatory educational services to remediate the effects of the shortened school day, alternative classroom placements, counseling services, and additional school support services. The school failed to review and revise the student's IEP and BIP during the 2012-2013 school year and did not appropriately respond to the student's behavioral difficulties. The school suspended the student and sent the student home early in excess of 10 instructional days without adequately documenting the early dismissals or complying with 511 IAC 7-44-5, resulting in a change of placement, and failed to conduct a manifestation determination. The school did not have staff appropriately trained to deal with the complexities of the student's co-morbid clinical, behavioral, and educational difficulties. The school's actions and failures to act resulted in a denial of a FAPE to the student. The student is entitled to two years of compensatory education services in a private facility qualified to deal with his needs.



ED Facts Metadata and Process System

## Indiana

### IDEA Part B - Dispute Resolution School Year: 2012-13

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#### Section A: Written, Signed Complaints

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<b>1. Total number of written signed complaints filed.</b>	<b>133</b>
1.1 Complaints with reports issued.	92
1.1.a Reports with findings of noncompliance.	71
1.1.b Reports within timelines.	92
1.1.c Reports within extended timelines.	0
1.2 Complaints pending.	0
1.2.a Complaints pending a due process hearing.	0
1.3 Complaints withdrawn or dismissed.	41

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#### Section B: Mediation Requests

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<b>2. Total number of mediation requests received through all dispute resolution processes.</b>	<b>52</b>
2.1 Mediations held.	42
2.1.a Mediations held related to due process complaints.	10
2.1.a.i Mediation agreements related to due process complaints.	6
2.1.b Mediations held not related to due process complaints.	32
2.1.b.i Mediation agreements not related to due process complaints.	26
2.2 Mediations pending.	0
2.3 Mediations withdrawn or not held.	10

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#### Section C: Due Process Complaints

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<b>3. Total number of due process complaints filed.</b>	<b>65</b>
3.1 Resolution meetings.	45
Written settlement agreements reached through resolution	



3.1.a	meetings.	33
3.2	Hearings fully adjudicated.	5
3.2.a	Decisions within timeline (include expedited).	2
3.2.b	Decisions within extended timeline.	3
3.3	Due process complaints pending.	1
3.4	Due process complaints withdrawn or dismissed (including resolved without a hearing).	59

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#### Section D: Expedited Due Process Complaints (Related to Disciplinary Decision)

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4.	<b>Total number of expedited due process complaints filed.</b>	<b>13</b>
4.1	Expedited resolution meetings.	9
4.1.a	Expedited written settlement agreements.	4
4.2	Expedited hearings fully adjudicated.	4
4.2.a	Change of placement ordered.	0
4.3	Expedited due process complaints pending.	0
4.4	Expedited due process complaints withdrawn or dismissed.	9

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**Comment:**

**Additional Comment:**

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This report shows the most recent data that was entered by Indiana. These data were generated on 10/16/2013.

EDFacts OMB Number: 1875 - 0240

EDFacts Form Expires: 02/29/2016

## IN\*SOURCE Trainings Are Provided At No Charge

[insource@insource.org](mailto:insource@insource.org)



**Date of Training:** 6/17/14

**Title/Description:** "Bullying Prevention, Everyone's Responsibility-What Parents Can Do!" - This webinar is designed for parents to explore the dynamics of bullying and to learn what they can do to help children address this issue. The workshop focuses on students with disabilities and includes a brief review of the applicable laws and available resources. Topics include: types of bullying, who are bullies, why children are bullies, the roles school play, law and policies, and bullying prevention strategies. Please register online by Monday, June 16, 2014. Please note that if fewer than 3 registrations are received, the workshop may be cancelled. The workshop is free and open to the public. Presented by Cathy Boswell and Toni Modglin, IN\*SOURCE Regional Program Specialists.

**Location:** Online

**Time:** 10:00 a.m. EDT / 9:00 a.m. CDT

**Contact Person:** [Cathy Boswell](#) - (219) 552-1992 or [Toni Modglin](#) - (219) 256-5020

**Notes:** Open to the public.

**Cost:** IN\*SOURCE trainings are provided at no charge.

[Sign Up For This Class Now!](#)

**Date of Training:** 6/21/14

**Title/Description:** "Special Education 101" - This workshop provides a brief overview of the special education process with an emphasis on the parent's role in the process, dispute resolution options for parents, and the importance of building good relationships. Please register online (see below) by Friday, June 20, 2014. If fewer than 3 registrations are received, this training may be cancelled.

Presented by Karen Rusk, IN\*SOURCE Regional Program Specialist.

**Location:** Mooresville Public Library, 220 West Harrison Street, Mooresville, IN.

**Time:** 1:00 p.m. EDT

**Contact Person:** [Karen Rusk](#) - (317) 210-3171

**Notes:** Open to the public.

[Sign Up For This Class Now!](#)

ISHN Annual School Health Conference 2014, Indianapolis Marriott North

Program Schedule

		Session 1	Session 2	Session 3	Session 4	Session 5
Tuesday, June 24	7:00A-12:00PM	Registration				
	9:00-9:15A	Welcome: Superintendent of Schools Glenda Ritz				
	9:15-10:15A	Toxic Stress in Children With Special Health Care Needs Speaker: Nancy Swigonski, MD, MPH				
	10:15-10:45A	Break - Visit with Exhibitors				
	10:45-12:00P	Grab n' Go: Making the Case for School Breakfast	Asthma Management Plan & Asthma Care Coordination Improve Health and Education Outcomes	Promoting Physical Activity & Education in Schools	Treating Student's Health Status with Educational Metrics: The Impossibility of School Health Delivery Models Using School Issues as the Driver	Medicaid Reimbursement Opportunities in Schools
	12:00 PM	Lunch/Governor & Cheri Daniels School Health Award Presentation Presenter: Governor Daniels				
	12:30-1:30P	Lunch Presentation Healthy School Meals: Lessons Learned & Making the Most of All Stakeholders Speakers: Tracy Fox, MPH, ED; Megan Lott, MPH, RD				
	1:40-4:40 P	School Health Index Training (Restricted to ISDH Grantees)				
	1:40-2:55 P	Smarter Snacks for Schools	Prenatal Support Group Study for Pregnant Teens	Legislative Issues Impacting School Health	Keeping Indiana Kids Protected From Vaccine-Preventable Diseases	School Health Initiatives in Action: The HEROES Initiative
	3:15-4:15 P	Adolescent Addiction Treatment: Who, When and Where to Refer Speaker: Leslie Hulvershorn, M.D.				
4:30-6 PM	Social Networking Hour-Visit with Exhibitors					
Wednesday, June 25	7:00-9:00A	Breakfast with Exhibitors				
	9-10:15A	The Affordable Care Act: Impacting Outreach & Enrollment Efforts to Children & Families Through Schools Speaker: Donna Cohen Ross				
	10:15-10:45A	Break - Visit with Exhibitors				
	10:15-12:15P	Shared Use Agreement (Geared to ISDH Grantees)				
	10:45-12:00P	Enhancing Healthy Food Choices in Children: Farm to School Program	Sexting & Texting: Safe Social Media	The Winding Road to a Mobile School-Based Clinic	School Wellness Policies: New USDA Wellness Policy Requirements for Schools	Fuel Up to Play 60: Wellness Impact Report & Best Practices
	12:00-1:15P	Lunch				
	1:15-2:30P	Models From Across the US: Connecting Kids to Coverage in Schools Speakers: Donna Cohen-Ross Jeni Appleby, Marilyn Self, Deanna White				
2:40-3:55P	Increasing Physical Activity in the Classroom: Project Stretch & Go!	Indiana School Nurse Legislative Update for 2014-2015	Preventing Flu In Schools: How to Implement School-Located Influenza Clinics	School Outreach That Works: Grant Winners Drill Down	Responding to Teen Dating Violence	

