# CHAPTER 2: SPECIAL EDUCATION PROFESSIONALS AND PLACEMENTS

## SPECIAL EDUCATION TEACHERS

Special Education Teachers in the United States are required, at minimum, to have a bachelor's degree as well as a state issued teaching license. Most states have identified special education as a high need area and that need is expected to grow over the next ten years as many professionals in the field reach retirement age (Bureau of Labor Statistics, 2024). In some states teacher certification is specific to each area of disability and in others the certification is cross-categorical and aligned with the level of support a learner will need. Pre-service teachers in special education can expect to take coursework in learner differences, assessment and adaptation of instruction to meet those differences, and positive behavior support. A full-time supervised practicum in a special education classroom, typically for a semester or portion of a semester, will also be required.

#### **PARAPROFESSIONALS**

Paraprofessionals, sometimes called teacher aides or teaching assistants, are often the unsung heroes of the special education classroom. The prefix "para" in the context of paraprofessional means alongside. these staff members work alongside teachers and provide support where needed. Paraprofessionals are not required to have a teaching license and, therefore, must work under the direction of a certified teacher. They often provide direct support to students, assist with progressing monitoring, implement lessons designed by the teacher, and complete record-keeping and other clerical tasks. In addition to a high school diploma, Paraprofessionals must meet one of the following requirements: complete two years of college, have an associate degree, or demonstrate competency in reading, writing, and

math. The latter requirement can be met through either a state or local competency test. Paraprofessional positions are not typically well paid, although this is somewhat offset by not being required to work during breaks and holidays. The fact that many paraprofessionals enjoy their work enough to continue in the profession despite the poor pay says much about the value these staff members bring to the classroom. This is another high need area, and the wise special education teacher will work hard to retain a good paraprofessional. (O\*NET Online, 2024).



### RELATED SERVICE PROVIDERS

Related services provide extra support in areas such as speech or motor skills to students with disabilities. These services help children with disabilities gain benefit from their education. Some of the more commonly known related services are transportation services, speech and language therapy, occupational therapy, and physical therapy.

To qualify for special education, a child with a disability must demonstrate that he or she needs special education services in order to make progress in the general education curriculum. In a similar manner, to receive related services, a child who qualifies for special education must demonstrate that

he or she needs related services in order to benefit from special education. Essentially, this means children do not qualify for related services unless they are eligible for special education; however, not all children in special education are eligible for related services.

Related services must be appropriate based on the needs of the child and must be necessary in order for the child to gain educational benefit from special education and related services. The school can hire service providers directly or they can contract for provision of the services through another agency. The school must provide these services at no cost to the parents. IDEA contains a long list of related services. This list is not meant to be exhaustive and if a child requires a service not on the list in order to receive education benefit, the school is still required to provide it.

IDEA specifically mentions transportation as a related service. This means if the child needs special transportation in order to get to and from school, the school must provide it. This includes the provision of special equipment such as a special lift or a wheelchair accessible vehicle. It may also include additional staff in the vehicle in order to ensure the safety of the child, for example to assist a child who is prone to frequent seizures. Determination of whether special transportation is a necessary related service is determined by the needs of the child.

The most familiar of the related services is speech and language therapy. Because speech and language skills are so interwoven throughout a child's educational experience, speech and language therapy is the most frequently provided service. For this reason, a child does not need to qualify for other special education services in order to qualify for speech and language therapy as a related service (NASET, 2024). Speech and language therapists address speech disorders such as difficulties producing certain speech sounds or difficulties with fluency such as stuttering. They may also work

with a student on receptive and expressive language difficulties, including pragmatics and social communication (ASHA, 2024).

Motor skills are addressed through occupational or physical therapy. Occupational therapy is generally related to fine motor skills such as buttoning and zipping clothes, tying shoelaces, and using tools such as pencils, crayons, and scissors. Physical therapy covers gross motor movement such as walking, running, jumping, and throwing. A child with an orthopedic disability may find it hard to join in circle time activities with his classmates because of difficulties getting up and down from a seated position on the floor. A physical therapist would work with that child to develop strategies that would address that concern and ensure that child could participate in this part of his educational program.

In the 1999 case of Cedar Rapids Community School District v. Garret F., the U.S. Supreme Court expanded the concept of related services to include continuous nursing services that were necessary for a student to attend school. These services qualified as related services given the services did not need to be performed by a medical doctor. School health services are often provided by a school nurse but can also be provided by another qualified person such as a specially trained paraprofessional or teacher. Some typically provided school health services include tube feeding, suctioning, repositioning to prevent the development of pressure sores, catheterization, assistance in the bathroom, and the administration of medications. Schools cannot require parents to provide these services as that would be a violation of the IDEA requirement to provide a free and appropriate public education.

### FREE APPROPRIATE PUBLIC EDUCATION

IDEA mandates that a free appropriate public education (FAPE) be provided at public expense to all school-aged children. The education offered must meet state education standards and, for children with disabilities, be in

accordance with the child's individual education program (IEP). As we've already noted, this education must be provided at no cost to the family and insufficient funds is not a valid reason for a school failing to supply FAPE for a child with a disability. However, when choosing between multiple options, the school may choose the cheapest option that provides FAPE. Also note that any fee that is normally collected from other children in the school, such as field trip costs or class dues, may also be collected from children with disabilities (NASET, 2024).

The term "appropriate" in relation to FAPE has been legally determined to mean sufficient for the child to receive education benefit. In the landmark case of Hendrick Hudson District Board of Education v. Rowley, the court upheld that schools do not have an obligation to maximize a child's potential. The provisions of FAPE require that the child with a disability receive an education that is designed to meet the child's unique needs and that will enable the child to receive educational benefit, but it does not require that the child be given the best of all possible educational options. While the court has been somewhat vague on the meaning of "appropriate" and "educational benefit," it has upheld that measurable progress in the curriculum and toward IEP goals demonstrates that a child is receiving educational benefit (NASET, 2024).



### LEAST RESTRICTIVE ENVIRONMENT

IDEA requires that children with disabilities be educated in the least restrictive environment (LRE) that will enable the child to still receive FAPE. Just as the IEP is individualized to meet the unique needs of the child, LRE for any child is also determined by the unique strengths and challenges of that child. While placement in a self-contained special education classroom is considered more restrictive than placement in an inclusive general education classroom, for a particular child that placement in the self-contained special education classroom may be the least restrictive placement option that will still enable the child to receive FAPE. In other words, placement of that child in the general education classroom may actually inhibit the child from making progress and receiving educational benefit, thus making the general education classroom more restrictive for that child than the self-contained special education classroom.

The case of <u>Daniel R.R. v. State Board of Education (1989)</u> specifically addressed this issue. In this case, the court upheld that a self-contained class was an appropriate placement for a student with Down syndrome. Daniel's parents wanted their son to be educated in the general education

classroom, but the court determined that this preference had to be secondary to the requirement that he receive an appropriate education. As a result of this case, a two-step process was established for determining LRE.

First, the team must establish whether the student can make progress and demonstrate educational benefit in the general education classroom with the support of supplementary aids and services. If not, then the student may be placed in a more restrictive environment, but the team then has a duty to complete the second step, which is to establish that the student has been integrated with typically developing peers to the maximum extent appropriate. The case of Oberti v. Board of Education of the Borough of Clementon School District (1992) upheld this two-step process and further emphasized that a student cannot be moved to a more restrictive environment solely because of a need for a modified curriculum.

Thus, in order to meet the LRE requirement, the IEP team should consider a continuum of placements. This continuum ranges from the general education classroom as the least restrictive to homebound instruction as the most restrictive. It is important to note that the placement decision must not be made until after the IEP is developed. This ensures that the IEP is designed to meet the child's unique needs and not simply in accordance with a particular placement option. Once the team determines the needs and goals of the student, the team can then work through the continuum of possible placements and determine the least restrictive option that will support the program that has been developed for that child. The team must consider not just the elements of the placement itself, but also whether the child could be successful in that placement given appropriate supports.

#### **Continuum of placements:**

- General education classroom
- Special education resource room

- Special education self-contained classroom
- Special education school
- Residential facility
- Hospitalization
- Homebound instruction

Placement in a general education classroom means the student will be educated alongside peers without disabilities. Placement is not an "all or nothing" decision and most students with disabilities will spend at least part of their day with their nondisabled peers. The extent of that time, and the supplementary aids and services needed to make it happen, will be determined by the IEP team and spelled out in the student's IEP. In some cases, a general education class will be co-taught by two teachers, a special education teacher and a general education teacher.

For many students with disabilities, the LRE will be a combination of placement in a general education classroom and placement in a special education resource room. This student will spend a specified amount of time receiving specially designed instruction in the resource room to meet their unique learning needs, but will still receive the majority of their education in the general education classroom. In the United States, students who are placed in general education for at least 80% of their day are still considered to be fully included.

A smaller number of students will be placed in a self-contained special education classroom. These students will still likely join their general education peers for a portion of their day, but it will likely be for non-academic times such as recess and lunch or for specialized portions of the school day such as music, art, and physical education. Most of these students will receive specially designed instruction in the special education classroom in the academic areas of reading, writing, and math. If these

students join their nondisabled peers during academic portions of the day, the learning objectives for these students may be modified to match their learning needs and the educational focus may be more on participation.

More than 95% of students receiving special education services will be educated in a general education school building. Only a very small number of these students will be educated in a special education school, a residential facility, or a hospital or home setting. Of the 3% of students educated in separate schools for children with disabilities, the largest groups of these children, in proportion to totals in other placements, had either deafblindness or multiple disabilities, followed by students with emotional disturbance. One reason for this may be that many children who are both deaf and blind or who have multiple disabilities may require specialized teaching and equipment not available in other settings. Additionally, children with emotional disturbance may require greater structure and consistency than is available in a general education setting. However, across the continuum of placements, a homebound setting is considered the most restrictive placement since these students are not being educated with their typically developing peers at all. Table 204.65 shows the Percentage distribution of students 6 to 21 years old served under Individuals with Disabilities Education Act (IDEA), Part B, by educational environment and type of disability: Fall 2012 through Fall 2022 (National Institute for Education Statistics, 2023).

Table 204.65. Number of school-age students served under Individuals with Disabilities Education Act (IDEA), Part B, by educational environment and type of disability: Selected years, fall 2012 through fall 2022

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All students with disabilities	Type of disability and year	ments	percent	percent	or more	ities	facility	school\1\	placement	
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Multiple disabilities	Intellectual disability	422	197	118	81	22	1	2	2	#
Orthopedic impairment		124		22	19	22	1	1	5	#
Specific learning disability   2,343   94   461   1,746   8   1   28   2   2   2   2   3   4   461   1,746   8   1   28   2   2   2   2   3   4   41   1   #   #   #   #   #   #   #   #		32	6	5	18	1	#	#	1	#
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Speech or language impairment			94	461	1.746	8		28	2	
Traumatic brain injury			4.5	48			#			
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Placement must be determined by the IEP team and based on the unique needs of the student. Schools may not make placement decisions solely based on factors such as the child's disability category, convenience for the school, or availability of space. In other words, a school cannot say, "Your child will be placed in Ms. Jones' self-contained class because we place all our children with autism in her self-contained class." It may be possible that Ms. Jones' self-contained class is the LRE for this child, but that must be determined by the team based on the child's strengths, needs and individualized education program. The LRE for a child can also change as the child learns news skills, so placement must always be reviewed at the annual IEP meeting. If there is a need to change the child's placement prior to the annual review, an IEP meeting must be held to discuss the reasons for the change in placement and parents or guardians must give permission for the placement to be changed.

Schools also cannot determine that a child is too severely disabled to benefit from education. The case of <u>Timothy W. v. Rochester New Hampshire School District</u> (1989) reaffirmed that every child has a right to a free and appropriate public education. This ruling is sometimes summarized as the "zero-reject" rule. IDEA is available to all students with a disability who demonstrate a need for special education. The student does not need to demonstrate an ability to benefit from special education as a condition of receiving that education. This ruling also defined special education more broadly to include instruction in functional skills in addition to academics.



## **CHAPTER 2: SOURCES**

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