

SACRAMENTO CITY UNIFIED
Notice of Action
(Prior Written Notice)

This notice is provided to parent prior to local educational agency (LEA)/district initiation or refusal regarding change of identification, evaluation, educational placement, or provision of free appropriate public education. This notice includes a description of the proposed and/or refused action, an explanation of why the LEA/district proposed to take this action, a description of any other options that were considered and the reasons why those options were rejected, and other factors that are relevant in this proposal.

Student Name: Nicky Chang

Birthdate: 10/5/2012

Date: 12/18/2020

Purpose: ☐ Identification ☐ Evaluation ☒ Educational Placement ☒ Provision of Free Appropriate Public Education
☐ Other

Actions Proposed	Reasons for Proposed Actions	Evaluation Procedures, Tests, Records, or Reports Used in Deciding for the Actions Proposed	Date Actions will be implemented
Identification - Determine your child's initial special education eligibility status and disability category: Speech and Language Educational Placement - Determine whether current placement is appropriate at this time. Provision of FAPE - Determine whether current placement is appropriate.	Nicky is due for an Annual IEP review. Federal law requires the IEP team to meet every year to review educational placement. The team will meet to review goals, services, placement, and current supports to determine if Nicky will be continuing to receive educational benefit in their current placement.	The team will review progress on goals, academic and behavior data, classroom-based assessments and work samples, and teacher reports.	

Actions Refused	Reasons for Refused Actions	Evaluation Procedures, Tests, Records, or Reports Used in Deciding for the Actions Refused
	N/A	

Other Options Considered	Reasons for Rejecting Other Options	Other Factors Relevant to Actions Proposed and/or Refused
		Parent and staff input.

Parents/Guardians have protections under state and federal procedural safeguard provisions. Please refer to the enclosed NOTICE OF PROCEDURAL SAFEGUARDS for an explanation of these rights. If you would like further information about your rights or the proposed action please contact:

Print Name of Contact	Position	Phone	E-mail Address
Abigail Clayton M.A. CCC-SLP	<u>Language Speech and Hearing Specialist</u>	<u>916-542-1288</u>	<u>Abigail-Clayton-NPA@SCUSD.edu</u>

IEP Dated 12/18/2020 attached:

☐ Yes ☒ Not Applicable

SACRAMENTO CITY UNIFIED
INVITATION TO INDIVIDUAL EDUCATIONAL PROGRAM TEAM MEETING/NOTICE OF MEETING

Student Name: Nicky Chang

Birthdate: 10/5/2012

☐ Initial ☒ Annual ☐ Triennial ☐ Transition Planning ☐ Pre-Expulsion ☐ Interim ☐ Other

Address 33 DE FER CIR Sacramento, CA 95823

Dear Mai Yang

Today's Date 12/18/2020

An Individual Education Program (IEP) Meeting is being arranged to discuss educational program for the student named above. You are invited to attend as a member of the IEP team. Your participation and input are important in the development of an appropriate education and arriving at decisions about your child's education. You have the right to have other individuals present who have knowledge or special expertise about your child. Your child could benefit from participation in the IEP meeting and is invited to attend. If this is the initial IEP meeting and the student was receiving services under Part C through an IFSP, you may request that the district invite the Part C Service Coordinator or other representative. Secondary students age 15 or older should attend the IEP Team meeting. Parents of adult students may also participate in the meeting.

The meeting is scheduled for:

Date 12/18/2020

Time 2:00

School/Location Susan B. Anthony

Room Via Zoom

We anticipate that the following members may also attend:

☒ Administrator/Designee
☐ Special Education Teacher
☒ General Education Teacher
☐ Student
☐ Psychologist
☒ Specialist Language Speech and
Hearing Specialist

☐ _____
☐ _____
☐ _____
☐ _____
☐ _____
☐ _____

NOTICE: If you wish to audio tape this meeting, you must provide 24 hour notice, we may also audio tape the meeting.

If you would like further information about your Procedural Safeguards or the purpose of this meeting, please call:

Name Abigail Clayton M.A. CCC-SLP

Title Language Speech and Hearing Specialist

School/District Sacramento City Unified School District

Phone 916-542-1288

Please complete and sign this form, and return to Abigail Clayton

Check the following items, as appropriate:

☐ **YES**, I plan to attend the meeting
☐ **YES**, I plan to attend the meeting and bring the following additional attendees:
☐ I do not plan to attend the meeting, but I am available by teleconference
☐ I require assistance of an interpreter. (Language)
☐ I request a different time and/or place. Please call me at _____ Home _____ Work _____
☐ I give my consent for the district to invite other agency personnel to attend the meeting if secondary transition is being addressed.
☐ **NO**, I cannot attend the meeting, but hereby give my permission for the meeting to be held without me (CFR 300.322d). I understand the IEP and related documents from this meeting will be provided to me for my signature, and I agree to return them in a timely manner.
☐ **NO**, I cannot attend, but I will send _____ as my representative to speak for me. I understand the IEP and related documents from this meeting will be provided to me for my signature, and I agree to return them in a timely manner.

Signature _____

Date _____

☐ Parent ☐ Guardian ☐ Surrogate ☐ Adult Student

For LEA use only:

Comments/Additional Information

SACRAMENTO CITY UNIFIED IEP TEAM MEMBER EXCUSAL

Student Name: Chang, Nicky

Birthdate: 10/5/2012

IEP Date: 12/18/2020

By mutual agreement between the parent/adult student, and designated representative of the local education agency, the presence and participation of the Individual Education Program team member(s) identified below is/are not necessary and has/have been excused from being present and participating in the meeting scheduled on 12/18/2020 because (1) the member's area of the curriculum or related services is not being modified or discussed in the meeting or (2) the meeting involves a modification to or discussion of the member's area of curriculum or related services and the member submitted, in writing to the parent and the IEP team, input into the development of the IEP prior to the meeting.

Individual Education Program Team Member(s)

Individual Education Program Team Member(s)	Area Of Curriculum Or Related Services	Area Of Curriculum Or Related Services is Not Being Discussed Or Modified	Written input has been submitted to the parent and the IEP team prior to the meeting regarding Area Of Curriculum Or Related Services	The IEP team member is being mutually excused from the IEP meeting
<u>See Lor</u>	<u>General Education</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> whole <input checked="" type="checkbox"/> in part
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> whole <input type="checkbox"/> in part
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> whole <input type="checkbox"/> in part
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> whole <input type="checkbox"/> in part
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> whole <input type="checkbox"/> in part
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> whole <input type="checkbox"/> in part

By mutual agreement the IEP team members identified above, have been excused from being present and participating in my child's IEP meeting.

Check the relationship to student, sign, and date below.

Signature of ☐ Parent ☐ Guardian ☐ Surrogate

Date: _____

Signature of ☐ Parent ☐ Guardian ☐ Surrogate

Date: _____

Signature of Adult Student (ages 18-21):

Date: _____

Signature of Designated District Representative:

Date: _____

Title/Position: _____

"IDEA Section 614 (d) (1) (c) IEP TEAM ATTENDANCE- '(i) ATTENDANCE NOT NECESSARY – A member of the IEP team shall not be required to attend an IEP meeting, in whole or in part, if the parent of a child with a disability and the local educational agency agree that the attendance of such a member is not necessary because the member's area of the curriculum or related services is not being modified or discussed in the meeting, '(ii) EXCUSAL- A member of the IEP Team may be excused from attending an IEP meeting, in whole or in part, when the meeting involves a modification to or discussion of the member's area of curriculum or related services, if—'(I) the parent and the local educational agency consent to the excusal; and '(II) the member submits, in writing to the parent and the IEP team, input into the development of the IEP prior to the meeting. '(iii) WRITTEN AGREEMENT AND CONSENT REQUIRED- A parent's agreement under clause (i) and consent under clause (ii) shall be in writing."

**SACRAMENTO CITY UNIFIED
INDIVIDUALIZED EDUCATION PROGRAM (IEP) - INFORMATION / ELIGIBILITY**

Student Legal Name: Chang, Nicky Legal Suffix: _____ Date of Birth: 10/5/2012 IEP Date: 12/18/2020
Original SpEd Entry Date: 11/17/2015 Next Annual IEP: 12/17/2021
Last Eval: 10/25/2018 Next Eval: 10/24/2021

MEETING TYPE: ☐ Initial ☒ Annual ☐ Triennial

Additional Purpose of Meeting (If needed): ☐ Transition ☐ Pre-Expulsion ☐ Interim ☐ Other

Age: 8 year(s) 2 months

Grade: 02 Second grade

EL: ☒ Yes ☐ No

Student ID: 70029601

Native Language: 23 Hmong

Redesignated: ☐ Yes ☒ No

SSID: 2926759217

Interpreter ☒ Yes ☐ No

Parent/Guardian: Mai Yang

Home Address: 33 DE FER CIR

City: Sacramento

State/Zip: CA, 95823

Home Phone:

Work Phone:

Cell Phone: (916)856-9492

Email:

Parent/Guardian: Lou Chang

Home Address: 33 DE FER CIR

City: Sacramento

State/Zip: CA, 95823

Home Phone:

Work Phone:

Cell Phone: (916)856-9305

Email:

District of Special Education Accountability: Sacramento City Unified School District

Residence School: Edward Kemble

Hispanic Ethnicity: ☐ Yes ☒ No ☐ Ethnicity Intentionally Left Blank

Race (regardless of Ethnicity): Race 1. 208 Hmong Race 2.

Race 3. Race 4. Race 5. ☐ Race Intentionally Left Blank

INDICATE DISABILITY/IES Note: For initial and triennial IEPs, assessment must be done and discussed by IEP Team before determining eligibility. * Low Incidence Disability

Primary: Speech or Language Impairment (SLI)

Secondary: None

☐ Not Eligible for Special Education ☐ Exiting from Special Education (returned to reg. ed/no longer eligible)

Describe how student's disability affects involvement and progress in general curriculum (or for preschoolers, participation in appropriate activities) Nicky's language delay in both English and Hmong adversely impact his ability to communicate or access academic success.

FOR INITIAL PLACEMENTS ONLY

Has the student received IDEA Coordinated Early Intervening Services (CEIS) using 15% of IDEA funding in the past two years?

☐ Yes ☒ No

Date of Initial Referral for Special Education Services: 7/20/2015

Person Initiating the Referral for Special Education service: 40 Other School/district personnel

Date District Received Parent Consent: 10/5/2015

Date of Initial Meeting to Determine Eligibility: 11/17/2015

**SACRAMENTO CITY UNIFIED
PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE**

Student Name: Chang, NickyBirthdate: 10/5/2012IEP Date: 12/18/2020**Strengths/Preferences/Interests**

Nicky really enjoys playing with his cars/toys, being outside, and going to Walmart to shop.

Parent input and concerns relevant to educational progress

2018: Per parent: Noticed improvement in attention and communication. Father is still concerned about him speaking in the school and paying attention.

2019: Just concerned about English development and sounds.

2020: Mom reports that her main concern is that wants to play more than he wants to learn and participate in academic activities.

Smarter Balanced Assessment Consortium (SBAC)
☒ Not Applicable
English/Language Arts Overall
☐ Standard Exceeded ☐ Standard Met ☐ Standard Nearly Met ☐ Standard Not Met

 Reading ☐ Above Standard ☐ Near Standard ☐ Below Standard

 Writing ☐ Above Standard ☐ Near Standard ☐ Below Standard

 Speaking and Listening ☐ Above Standard ☐ Near Standard ☐ Below Standard

 Research/Inquiry ☐ Above Standard ☐ Near Standard ☐ Below Standard
Math
☐ Not Applicable
Math Overall
☐ Standard Exceeded ☐ Standard Met ☐ Standard Nearly Met ☐ Standard Not Met

 Concepts and Procedures ☐ Above Standard ☐ Near Standard ☐ Below Standard

 Problem Solving and Data Analysis ☐ Above Standard ☐ Near Standard ☐ Below Standard

 Communication Reasoning ☐ Above Standard ☐ Near Standard ☐ Below Standard
California Alternate Assessments (CAA)
☒ Not Applicable

 English Language Arts ☐ Understanding ☐ Foundational Understanding ☐ Limited Understanding

 Math ☐ Understanding ☐ Foundational Understanding ☐ Limited Understanding

 Science ☐ Understanding ☐ Foundational Understanding ☐ Limited Understanding
English Language Development Test (English Learners Only)
☐ Not Applicable

☐ ELPAC

Overall Score: Overall Performance Level: Oral Language Score/Level:

Written Language Score/Level:

Listening:

Speaking:

Reading:

Writing:

☐ Alternate Assessment

Name:

Overall Score/Level:

Listening:

Speaking:

Reading:

Writing:

Physical Education Testing (grades 5, 7 & 9):

Other Assessment Data (e.g., curriculum assessment, other district assessment, etc.)

Hearing Date: 10/29/2018 ☒ Pass ☐ Fail ☐ Other

Vision Date: 10/29/2018 ☒ Pass ☐ Fail ☐ Other

Preacademic/Academic/Functional Skills

Nicky still struggles in all academic areas. He is not able to read or write in both Hmong and English. He has support at home, so most of the work that he turned into me were/are mostly done by someone else, not Nicky. He performs better in basic math and seems to enjoy math better. Overall, his progress is minimal due to the challenge of distance learning.

Math---87% (with support from siblings); iReady Math---372 (kinder); iReady Reading---318 (Kinder); Not able to read at this time in both Hmong and English.

Additional classroom support has been provided to Nicky. He current sees an instructional aide twice weekly for 30-minutes. He also works with Ms. Lor on reading skills in both Hmong and English. Assignments are shortened when necessary.

Communication Development

2020: Nicky is happy and engaged during speech and language sessions with minimal verbal prompting His speech sound production remains inconsistent. Errors noted included substitution of /v/ for /b/, reduction of s-blends, and assimilation of multisyllabic words. He has been observed to only produce simple sentences that are reduced in complexity and syntax when compared to same aged peers. When read a short passage aloud and asked simple "wh" questions, he requires additional cueing and time to produce a response.

Gross/Fine Motor Development

There are no concerns with his gross motor movement at this time. No fine motor concerns reported.

Social Emotional/Behavioral

2020: He interacts well with his siblings within his home environment. He follows directions, no behavior concerns noted.

2019: Teacher input and SLP observation at school - Classmates love playing with Nicky. He has been observed to participate in tag when the other children chase him and they laugh and scream together. His will go to the teacher when he needs help and waits while being spoken to. He is very observant and comments on things he sees or hears. He demonstrates difficulty with attention, both in the classroom setting and in therapy sessions. He enjoys playing games and will participate in turn takes gamings with peers given minimal guidance.

Vocational

Not yet known, however when Nicky is out in the community he aspires to be those professions he sees.

Adaptive/Daily Living Skills

Nicky is independent within his daily living skills. Nicky can put on his shirt and pants. He is able to tie his shoes, it is just not perfect at this time. He is brushing his teeth, but needs assistance to assure adequate cleanse. He is demonstrating an interest in eating, whereas before, father reported he wouldn't express he is hungry. Now he asks to eat. He really enjoys ice cream and yogurt.

Health

Per parent: Nicky's sleep as improved. He is sleeping throughout the night. He was diagnosed with a heart murmur at 6 months old. He had the surgery at 4, and it went well. There are no concerns.

For student to receive educational benefit, goals will be written to address the following areas of need:

Expressive and Receptive Language, Articulation

**SACRAMENTO CITY UNIFIED
ANNUAL GOALS AND OBJECTIVES**

Student Name: Chang, Nicky

Birthdate: 10/5/2012

IEP Date: 12/18/2020

Area of Need: Language	Measurable Annual Goal #: 1 Goal: By October, 2020, when given pictures or a passage read to him, Nicky will describe the picture or story when being asked a WH question (who, what, where) using complete sentences with 80% accuracy in 4 separate trials. <input checked="" type="checkbox"/> Enables student to be involved/progress in general curriculum/state standard Speaking/Listening 1.0 <input type="checkbox"/> Addresses other educational needs resulting from the disability <input type="checkbox"/> Linguistically appropriate <input type="checkbox"/> Transition Goal: <input type="checkbox"/> Education/Training <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Person(s) Responsible: LSHS
Baseline: He is answering "wh" questions regarding a passage read to him with 50% accuracy.	

Short-Term Objective: By March, 2020, when given pictures or a passage read to him, Nicky will describe the picture or story when being asked a WH question (who, what, where) using complete sentences with 67% accuracy in 4 separate trials.

Short-Term Objective: By May, 2020, when given pictures or a passage read to him, Nicky will describe the picture or story when being asked a WH question (who, what, where) using complete sentences with 75% accuracy in 4 separate trials.

Short-Term Objective:

Progress Report 1: 3/2/2020

Summary of Progress: He answered "wh" questions (2/5) with incomplete sentences. He repeated 6-word sentences.

Comment:

Progress Report 2: 5/19/2020

Summary of Progress: Progress was not checked due to inability to contact parents and child by phone.

Comment:

Progress Report 3:

Summary of Progress:

Comment:

Annual Review Date: 12/18/2020

Goal met ☐ Yes ☒ No

Comments: He demonstrates the ability to understand wh- questions, however requires multiple prompts to generate a response and currently answers with approximately 60% accuracy.

**SACRAMENTO CITY UNIFIED
ANNUAL GOALS AND OBJECTIVES**

Student Name: Chang, Nicky

Birthdate: 10/5/2012

IEP Date: 12/18/2020

<p>Area of Need: Expressive and Receptive Language</p>	<p>Measurable Annual Goal #: <u>1</u></p> <p>Goal: By December 2021, when asked to describe, or answer a "wh-" questions in response to an activity or short passage, Nicky will respond with a complete grammatically correct simple sentence in 80% of opportunities presented.</p> <p><input checked="" type="checkbox"/> Enables student to be involved/progress in general curriculum/state standard</p> <p><input type="checkbox"/> Addresses other educational needs resulting from the disability</p> <p><input type="checkbox"/> Linguistically appropriate</p> <p><input type="checkbox"/> Transition Goal: <input type="checkbox"/> Education/Training <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living</p> <p>Person(s) Responsible: LSHS, Student</p>
<p>Baseline: When read aloud a short passage Nicky currently responds to "wh-" questions with incomplete short sentences in 65% of opportunities presented.</p>	

Short-Term Objective: By March 2021, Nicky will describe objects with 3-4 attributes in 80% of opportunities presented as measured by LSHS data and observation.

Short-Term Objective: By June 2021, when asked to describe, or answer a "wh-" questions in response to an activity or short passage, Nicky will respond with a complete grammatically correct simple sentence in 60% of opportunities presented.

Short-Term Objective:

Progress Report 1:

Summary of Progress:

Comment:

Progress Report 2:

Summary of Progress:

Comment:

Progress Report 3:

Summary of Progress:

Comment:

Annual Review Date:

Goal met ☐ Yes ☐ No

Comments:

**SACRAMENTO CITY UNIFIED
ANNUAL GOALS AND OBJECTIVES**

Student Name: Chang, Nicky

Birthdate: 10/5/2012

IEP Date: 12/18/2020

Area of Need: Articulation	Measurable Annual Goal #: <u>Articulation</u> Goal: By December 2021, Nicky will produce all age-appropriate sounds including /s/ blends, stopping of /v/ for /b/, and production of up to 3-syllable words with 80% accuracy as measured by LSHS data and observation.
Baseline: In short sentences Nicky inconsistently produces the following errors: reduction of /s/ blends, stopping of /v/ for /b/, and assimilation of multisyllabic words.	<input checked="" type="checkbox"/> Enables student to be involved/progress in general curriculum/state standard <input type="checkbox"/> Addresses other educational needs resulting from the disability <input type="checkbox"/> Linguistically appropriate <input type="checkbox"/> Transition Goal: <input type="checkbox"/> Education/Training <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Person(s) Responsible: LSHS, Student

Short-Term Objective: By March of 2021, Nicky will produce /v/ in all positions of the words at the sentence level with 80% accuracy as measured by LSHS data and observation.

Short-Term Objective: By June of 2021, Nicky will produce /s/ blends in all positions of words at the sentence level with 80% accuracy as measured by LSHS data and observation.

Short-Term Objective:

Progress Report 1:

Summary of Progress:

Comment:

Progress Report 2:

Summary of Progress:

Comment:

Progress Report 3:

Summary of Progress:

Comment:

Annual Review Date:

Goal met ☐ Yes ☐ No

Comments:

SACRAMENTO CITY UNIFIED
Offer of FAPE - SERVICE

Student Name: Chang, NickyBirthdate: 10/5/2012IEP Date: 12/18/2020

The service options that were considered by the IEP team (List all): The team reviewed the assessments results and determined that the student qualifies for special education services. Next the team developed goals to remediate the student's areas of concern. The team discussed general education without supports and general education with supports. The team determined that the student's least restrictive environment is in the general education class with special education supports in speech. The district's offer of FAPE is general education with supports in special education Speech.

In selecting LRE, describe the consideration given to any potential harmful effect on the child or on the quality of services that he or she needs: The team discussed that he requires speech and language support in a setting with lower student to teacher ratio to address Nicky's language delays. These supports cannot adequately be provided in the general education setting and would require a separate setting for a portion of the day. The team agreed the education benefit he would receive in the speech settings outweigh the potential harmful effects of missing the general education instructional time away from general education peers.

SUPPLEMENTARY AIDS & SERVICES AND OTHER SUPPORTS FOR SCHOOL PERSONNEL, OR FOR STUDENT, OR ON BEHALF OF THE STUDENT

☒ The IEP team discussed and determined program accommodations are not needed in general education classes or other education-related settings.

☐ The IEP team discussed and determined the following program accommodations are needed in general education classes or other education-related settings.

Program Accommodations	Start Date	End Date	Location
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☒ The IEP team discussed and determined program modifications are not needed in general education classes or other education-related settings.

☐ The IEP team discussed and determined the following program modifications are needed in general education classes or other education-related settings.

Program Modifications	Start Date	End Date	Frequency	Duration	Location
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☒ The IEP team discussed and determined other supports for school personnel, or for student, or on behalf of the student are not needed.

☐ The IEP team discussed and determined the following other supports for school personnel, or for student, or on behalf of the student are needed.

Other Supports for School Personnel, or for Student, or on Behalf of Student	To Support	Start Date	End Date	Frequency	Duration	Location
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SPECIAL EDUCATION and RELATED SERVICES

Service: <u>Language and speech</u>	Start Date: <u>10/31/2020</u>	End Date: <u>12/31/2021</u>
Provider: <u>SELPA</u>	<input type="checkbox"/> Ind <input checked="" type="checkbox"/> Grp <input type="checkbox"/> Sec Transition	
Duration/Freq: <u>30 min x 50</u> Totaling: <u>1500</u> min served <u>Yearly</u>	Location: <u>Separate school or Special Education Center or facility</u>	
Comments: <u>Speech and language services can be provided in, but not limited to the following models: consult/collaboration with the classroom teacher, push-in, and pull-out. Services may be interrupted by special school functions, student absences, testing, field trips, and school drills. Student will not be pulled for services during the first and last two weeks of school due to consultation and planning purposes.</u>		

Programs and services will be provided according to where student is in attendance and consistent with the district of service calendar and scheduled services, excluding holidays, vacations, and non-instructional days unless otherwise specified.

Special Education Transportation ☐ Yes ☒ No

EXTENDED SCHOOL YEAR (ESY)

☐ Yes ☒ No

Rationale: Not yet evidence of losing considerable skills or knowledge over extended breaks from school requiring ESY intervention following the roupelement/retension model.

Programs and services will be provided according to where student is in attendance and consistent with the district of service calendar and scheduled services, excluding holidays, vacations, and non-instructional days unless otherwise specified.

SACRAMENTO CITY UNIFIED IEP TEAM MEETING NOTES

Student Name: Chang, Nicky

Birthdate: 10/5/2012

IEP Date: 12/18/2020

Date: 12/18/2020

Notes: Purpose of meeting: Annual IEP to determine continuing eligibility for special education services and annual IEP to review goals, services, placement and current supports to determine if **Nicolas** is making progress and is continuing to receive educational benefit.

A copy of the parent's rights were provided emailed to the parent and reviewed.

Introductions were made. Members in via Zoom attendance:

Speech-Language Pathologist, Abigail Clayton M.A. CCC-SLP

Parent, **Mai Yang**

Teacher, **See Lor**

Administration, **Bao Moua**

Attendance form was presented and completed.

Demographics were verified. All information is correct.

Strengths and parental concerns were discussed. Parent noted that they are concerned about Nicky's overall desire to participate in the general curriculum.

The general education shared informal classroom based assessments. It is to be noted that the validity of this is unknown as Nicky does not complete classroom work independently. Mrs. Lor reported that she is very concerned about Nicky's progress in the general curriculum and urged any special education team members to attend Nicky's next SST meeting.

The speech-language pathologist reported on their current levels and shared the results of their assessments (see present levels page).

The team reviewed the classroom and assessment data and determined that **Nicky** meets criteria for special education services as a child with a speech and language impairment. The team discussed **Nicky's** academic deficits and the goals needed to remediate those deficits. Next the team determined the amount of support necessary for **Nicky** to achieve educational benefit. The team discussed placement options and determined that the least restrictive environment for **Nicky** and The District's offer of a free and appropriate education (FAPE) is through inclusive practices in the general education classroom with pull-out for speech and language services. This placement allows **Nicky** to receive special education services while remaining with his peers in the general education classroom to access the general education curriculum. The team discussed academic regression and determined that **Nicky** is not at risk of academic regression and the extended school year is not recommended at this time.

The FAPE and Services page of this annual/triennial IEP reflect a FAPE offer which would be provided in a full time, traditional in-person education model. This is not the current model available with the District, since due to the COVID-19, the District has been ordered to begin the school year in a distance learning model. The need for the distance learning model is anticipated to be temporary. Because this IEP includes an offer of FAPE for the next 12 months, the FAPE and Services pages reflect what the long term offer of FAPE looks like after school physically reopens.

In 2020, due to the COVID-19 pandemic, schools were unexpectedly physically closed in an effort to limit the spread of this virus. It is now anticipated that similar physical school closures may be necessary in the future. In an effort to be prepared for this future possibility, the District is now including in IEPs a statement regarding IEP implementation should another unforeseen circumstance arise. Therefore, in the event of a future physical closure (separate from the current COVID-19 pandemic) due to an emergency lasting more than 10 school days, the District will provide:

- Access to both synchronous and asynchronous instruction, as possible given the emergency situation
- Weekly contact, as a minimum, by each provider on your child's IEP implementation team during the emergency situation
- Virtual and low tech educational opportunities, as possible given the emergency situation

-Written notice of the opportunity for an IEP meeting to discuss an individualized temporary plan during the emergency situation.

Due to state and local health orders, in-person learning is not currently possible. In order to support your student's access to learning during the ongoing physical school closure, the district is proposing the following temporary distance learning program which will provide FAPE virtually until the in-person learning program outlined on the FAPE plan is available to be implemented safely. This temporary distance learning program has been specifically designed to support your child's individual and specialized educational needs during the physical school closure in order to provide access to appropriate progress in light of their individual circumstances at this time. When it is deemed safe to re-open schools for in person learning, this temporary distance learning program will be immediately terminated, and the student will return to the IEP services and placement outlined on the FAPE and Services pages of this IEP. The proposed temporary distance learning plan for your student is consistent with on-campus learning.

Service minutes were discussed. The team discussed providing speech and language services one time weekly for thirty minutes with the exclusion of the first and last two weeks of the academic school calendar for administrative purposes and team members agreed that this amount of time is appropriate to address the student's needs.

Goals were proposed in the area of articulation and accepted by the team.

Parent consent was verbally obtained and agreed to receive IEP documents electronically. The meeting was adjourned.

SACRAMENTO CITY UNIFIED SIGNATURE AND PARENT CONSENT

Student Name: Chang, NickyBirthdate: 10/5/2012IEP Date: 12/18/2020

IEP Meeting Participants

<u>Mai Yang</u>	<u>12/18/2020</u>		
Parent/Guardian/Surrogate	Date	Parent/Guardian	Date
		<u>See Lor</u>	<u>12/18/2020</u>
Student/Adult Student	Date	General Education Teacher	Date
<u>Bao Moua</u>	<u>12/18/2020</u>	<u>Abigail Clayton</u>	<u>12/18/2020</u>
LEA Representative/Admin.Designee	Date	Special Education Specialist	Date
Additional Participant/Title	Date	Additional Participant/Title	Date
Additional Participant/Title	Date	Additional Participant/Title	Date
Additional Participant/Title	Date	Additional Participant/Title	Date
Additional Participant/Title	Date	Additional Participant/Title	Date

CONSENT

- ☐ I agree to all parts of the IEP.
☐ I agree with the IEP, with the exception of
☐ I decline the offer of initiation of special education services.
☐ I understand that my child is not eligible for special education.
☐ I understand that my child is no longer eligible for special education.

Signature below is to authorize and approve the IEP.

Signature _____ Date _____
☐ Parent ☐ Guardian ☐ Surrogate ☐ Adult Student

Signature _____ Date _____
☐ Parent ☐ Guardian ☐ Surrogate ☐ Adult Student

PARENT INVOLVEMENT

As a means of improving services and results for your child did the school facilitate parent involvement?

☒ Yes ☐ No ☐ No Response

If my child is or may become eligible for public benefits (Medi-Cal): I authorize the LEA/district to release student information for the limited purpose of billing Medi-Cal/Medicaid and to access Medi-Cal: health insurance benefits for applicable services.

Signature _____
☐ Parent ☐ Guardian ☐ Surrogate ☐ Adult Student

- ☐ Parent/Adult Student has received a copy of the Procedural Safeguards.
☐ Parent/Adult Student has received a copy of assessment report (if applicable).
☐ Parent/Adult Student has received a copy of the Individualized Education Plan (IEP).
☐ Parent/Adult Student has received written notification of protections available to parents when LEA requests to access Medi-cal benefits.
☐ Student enrolled in private school by their parents. Refer to Individual Service Plan, if appropriate.