



## ***STUDENT STUDY TEAMS (SST)***

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## **WHAT IS A STUDENT STUDY TEAM?**

An SST is a multi-disciplinary team that considers, plans, and assesses general education interventions and supports for students experiencing academic, speech/language, and/or social-emotional/behavioral difficulties. This early intervention for struggling students through the SST process is a function of the general education program and not of special education. The SST process provides an opportunity for an in-depth focus on improving school success one student at a time.

**The purpose of the (SST) is to problem-solve and to identify supports in the general education setting which allow a student to be successful in that setting. Each LEA is required to have an SST process in place.**



**IDENTIFY**



**PRIORITIZE**



**PLAN**



**REVIEW**

Typically, well-implemented SST structures and processes increase student achievement through the following elements:

- Identification of student strengths, as well as concerns that interfere with the student's learning and achievement
- Prioritization of student's concerns
- Development of a closely monitored, data driven action plan
- Periodic review of student progress

## **WHO PARTICIPATES IN THE SST TEAM**

The SST is comprised of members of the general education school staff and includes meaningful participation of the parent/guardian and the student, if appropriate. The SST reviews and analyzes all screening data, including Response To Instruction and Intervention (RTI2) results and provides a system for accountability. It is recommended that an SST include at least the referring person, principal/administrative designee, the classroom teacher or other school staff, and the parent/guardian. Parent's play an integral role in the SST process and it is recommended that the LEA have in place communication pathways that support meaningful parental participation. If requested, intervention specialists and/or special educators may also participate in SST meetings.

## **TEAM MEMBER ROLES AND RESPONSIBILITIES:**

### **Referring Person**

- Clearly define student's strengths
- Share goals for student referred
- Identify areas of concern
- List attempts to address concerns, implemented over a reasonable period of time
- Provide objective feedback regarding success/lack of success
- Solicit additional support/suggestions
- Implement additional support/suggestions

**Principal/Administrative Designee**

- Facilitate collaboration
- Offer reasonable alternatives
- Provide support to student, teacher, and parent/guardian
- Focus on student involvement in the general education process
- Suggest additional general education programs and supports available (i.e. Reading recovery, title I, etc.)

**Classroom Teacher or Other School Staff**

- Provide specific input regarding identified concerns
- Suggest support/adaptations to be implemented
- Provide follow-up support to teacher/parent/student

**Parent/Guardian**

- Share personal goals for child
- Clearly define a student's strengths
- Identify areas of concerns
- Provide any relevant additional out-of-school information (health, social-emotional)
- Partner with the school in solutions-based problem solving
- Accept shared responsibility for partnership

**Student, if Appropriate**

- Share personal goals
- Provide information regarding likes/dislikes
- Accept responsibility for suggested change

***SST REFERRAL***

A student may be referred to the SST for:

- Lack of academic progress
- Behavioral/emotional concerns
- Attendance/truancy issues
- Consideration for retention
- Social adjustment
- Consideration for special education disabilities
- Other unresolved parent/guardian concerns

**SST FLOWCHART**

IDEA     504 Plan



**REFERRAL**

- Student is experiencing academic, speech/language, and/or social emotional/behavioral difficulties.
- Teacher or parent/guardian request an SST
- Complete SST Referral Form

**SCHEDULE**

- Schedule SST/ Communicate with family
- Complete teacher(s) student feedback form

**SST MEETING**

- Hold SST Meeting
- Use SST meeting form to document notes and responsibilities
- Ensure appropriate staff are notified of outcomes and place SST meeting form in student cumulative folder

**REVIEW**

- Apply interventions, document progress
- Schedule follow up SST meetings (8-12 weeks)

**NEXT STEPS**

- Hold SST meeting review to follow-up on progress, adjust/intensify interventions, and/or add supports as needed
- A recommendation for referral for assessment under Section 504 may result.
- A recommendation for referral for special education assessment under IDEA may result

## **INSUFFICIENT STUDENT PROGRESS**

The SST will meet at a minimum two times for an initial SST meeting and a review SST meeting. When a student demonstrates insufficient growth based on progress monitoring and subsequent modification of interventions and supports that have been implemented with fidelity for 8 - 12 weeks at each RTI<sup>2</sup> tier, the SST should consider a referral for an assessment under Section 504 or IDEA. The SST needs to detail the steps and interventions that have been taken by the school to include the student in a general education classroom. This list can include:

- Supplementary aids and services provided
- Alterations made to the general education program
- Consistency of interventions and outcomes
- Coordination with other school site programs
- Fidelity of interventions and outcomes

Typically, the SST process is not appropriate for students described below:

- Specific disability areas. Students suspected of having disabilities, such as hearing impairment, visual impairment, deaf-blindness, severe and recent traumatic brain injury, intellectual disability (moderate or severe), multiple disabilities, and some students with severe autism, severe orthopedic impairments and/or significant health issues
- Mental illness. For students suspected of exhibiting a significant mental illness, the school psychologist should evaluate the student's needs and, as appropriate, contact the proper agency

## **LEGAL REQUIREMENTS**

If a referral to special education is the outcome, the SST fulfills the legal function of ensuring that documented attempts have been made to modify the general education program before referring the student for special education, as per [\(EC56303; 5 CCR 3021\)](#).

If the SST recommends an assessment for special education after attempted systematic and substantiated general education interventions, the assessment questions to be answered are: a) whether the child has a disability, b) to determine the educational needs of the child, and c) if the child would educationally benefit from special education services.

The general education teacher serves an essential role in addressing the questions listed below. These questions can assist in determining eligibility for special education supports and services as well as answering the concern for referral:

- Is the discrepancy due primarily to limited school experience, poor school attendance, environmental, cultural or economic disadvantages, intellectual disability, emotional disturbance, vision, hearing and/or motor problems, or lack of instruction in reading or math or limited English proficiency?
- Can this discrepancy be addressed through additional services in conjunction with interventions in the regular program? (Information documented through the SST meetings.)
- Is this discrepancy corroborated by other data? (Information obtained from parent, student, staff).
- Is it possible for the student to succeed in general education for any portion of the academic program?
- Is it possible for the student to succeed in regular nonacademic classes?
- What services will special education provide that the general education setting cannot provide?

If a student is referred for special education assessment and does NOT meet eligibility criteria the SST may need to:

- Review additional school support programs
- Consider additional linkage and referral to appropriate community agencies
- Review implemented interventions to determine if adjustments to these can be developed/ refined
- In some instances, if a student has a physical or mental impairment which may substantially limit a major life event (e.g., learning), the student may be referred for consideration under Section 504. There should be a separate 504 eligibility team.

## ***PARENT/GUARDIAN REFERRAL FOR SPECIAL EDUCATION ASSESSMENT***

The SST is to be used as a forum for problem-solving, identification of concerns, and an opportunity for discussion and communication. The SST is not to be used to delay a special education referral. While the SST is not a legal requirement before a special education assessment, documentation of interventions in general education is.

Any time a referral to assess a student is proposed, an Assessment Plan (AP) will be developed and sent to the parent/guardian for review within 15 calendar days of receipt of the referral. The parent/guardian shall have up to 15 calendar days from the receipt of the proposed AP to either grant or decline the proposed assessment. An AP will need to be presented to the parent/guardian in person, emailed, sent home with the student, and/or mailed to the student/parent/guardian address on file. In some cases, the school may need to require a return receipt to provide documentation that the parent/guardian received the assessment plan. When the AP is presented to the parent/guardian for review, the following should be attached:

1. A copy of the Notice of Parental Rights and Procedural Safeguards
2. A Prior Written Notice (PWN)

Concurrently, parent/guardian could also be referred to the school psychologist or special education staff. The school psychologist or special education staff person:

- Can discuss the parent/guardian's concerns.
- Ensure that the parent/guardian fully understands the referral process.
- Suggest less intrusive interventions to address the student's problems.
- If appropriate, assist the parent/guardian in submitting the assessment request in writing.
- Suggest involvement in the SST process if this has not already taken place.

If the parent/guardian agrees to the SST process, schedule an SST meeting within 15 calendar days of written request for assessment.

At the SST:

- Discuss the parent/guardian's concerns
- Review screening data gathered by site personnel
- Review the purpose of the special education referral
- Seek to determine the area of suspected disability

If information reviewed by the SST suggests that the student's needs can be met in the regular education program, with or without modifications, special education consideration is likely not warranted. If the parent/guardian agrees, interventions need to be documented on an action plan form and a monitoring/follow-up plan would be proposed. Documentation must indicate that parent/guardian agrees with the intervention plan and withdraws request for assessment. If appropriate, the SST can consider 504 eligibility which could result in a 504 plan.

If the school, through the SST process or the written request, does not agree that a special education assessment is necessary, written notice to the parent/guardian must be provided, stating the basis for the LEA refusal to conduct an assessment. This becomes a special education function.

To comply with federal regulations, the letter to the parent/guardian must include the following:

- Full explanation of all procedural safeguards
- Description of the action proposed or refused by the LEA; an explanation of such proposals or refusals
- Description of any options considered and reasons for rejection of options
- Description of each evaluation procedure, test, record, or report used as a basis for the proposal made or as basis for the refusal for assessment
- Description of other relevant factors for the proposal or refusal

The parent/guardian letter must be in the language or mode of communication used by the parent, unless it is clearly not

feasible to do so. The parent/guardian can elect to participate in a mediation or request due process.

If information reviewed by the SST suggests that the student's needs cannot be met in the general education program, with or without modifications, special education consideration is likely warranted. Follow referral for special education assessment procedures.

### ***SPECIAL CONSIDERATIONS FOR ENGLISH LEARNERS***

If a student's Home Language Survey indicates a language other than English as the home language, the SST must consider the needs of English Learners.

Unless the student has a severe disability, including but not limited to severe vision and hearing impairments, severe physical impairment, severe cognitive impairment, autism, or severe health impairment, the student should be allowed sufficient time to acquire English proficiency and receive appropriate academic instruction in reading and math. It is critical to differentiate between a student who is not achieving in the classroom because English is not his/her primary language and a pupil who is not achieving due to a disabling condition.

LEAs are encouraged to utilize the Response To Instruction and Intervention (RTI<sup>2</sup>) process, as a multi-tiered approach to providing services and interventions to struggling learners, including students having language or speech difficulties, and/or students with challenging behaviors at increasing levels of intensity. The process should incorporate systems of intervention and supports that are provided to students in direct proportion to their individual needs. Through RTI<sup>2</sup>, students with and without disabilities, benefit from the design of a well-integrated system of instruction and intervention guided by the production, analysis and use of student outcome data.

RTI<sup>2</sup> ensures that an eligibility decision for special education services is not based on a student's lack of access to scientific research-based instruction. For students with behavioral concerns/needs, a system of positive behavioral and intervention supports (PBIS) is used to promote success.

### ***HELPFUL SUGGESTIONS FOR EFFECTIVE SST MEETINGS***

- Speak with the parent/guardian in advance to let them know what to expect at an SST meeting
- Have translators available as appropriate as well as written documents translated as needed
- Have a separate facilitator and note taker
- Begin with a positive remark and welcome all participants to the meeting
- Explain the purpose of the meeting
- Follow the structure of the SST Meeting Summary Form (included in the appendix) to facilitate a successful meeting
- Set a positive tone for the SST meeting by recognizing the student's strengths before listing concerns
- Reference specific samples of the student's work when explaining any strengths, weaknesses, or means of improvement
- Specific examples of student's behavior should also be used to explain his/her level of development, socialization, and personal adjustment
- Explain any evaluation process including formal and informal assessments
- Avoid using "education" or "mental health" jargon
- Encourage the use of person-first language
- Suggest, using concrete examples, to parents/guardians of how they may help/support their child at home
- Prioritize concerns and action items; it is better to focus on one problem in-depth than to give superficial treatment to many
- Let parents/guardians ask questions; they will likely have something specific to discuss with the team
- Have consent for services forms, release of information forms, and community referrals available at the meeting
- Set a date for a follow-up SST
- Make parents/guardians aware of availability of team members
- End the meeting with a summary of the action plan and a positive comment
- Thank parents/guardians for participating in the SST meeting
- Provide copies of completed SST meeting summary form to parents/guardians



## **SAMPLE SST INTERVENTIONS**

### **Attendance Strategies**

- Alarm clock for parent/guardian/student
- Earlier bedtime
- Provide parent/guardian information re: simpler bus route
- Help parent/guardian to find better transportation to school
- Parent/guardian agrees to bring child to school daily
- Parent/guardian will make sure child gets on bus in morning
- Parent/guardian will wake up earlier to get child to school on-time
- Student will wake up earlier
- Wake -up call for parent/guardian and/or student

### **Behavioral Strategies**

- Participation in after-school program
- Allow student to draw to calm down in class
- Allow student to walk around while reading
- Avoid helping too much (student can “learn helplessness”)
- Build rapport with student (focus on strengths, interests); schedule regular time to talk
- Call home on a good day to enhance parent-staff-student relationship
- Call home on a bad day for support
- Change antecedent event (event that occurs prior to target behavior)
- Chart/graph student behavior (assess/determine pattern of behavior)
- Clarify consequences with student and follow step consistently
- Class/counselor change recommended
- Classroom problem-solving sessions
- Collaboration with outside sources (e.g., therapist, tutor, after-school program)
- Allow time to play preferred game
- Connect family with cultural community center
- Daily check-in/check-out with student
- Develop behavioral contract
- Develop/alter classroom rules (“Development of Classroom Rules”)
- Display exemplary student work (classroom, hallway, etc.)
- Give leadership responsibilities/important jobs
- Help parent/guardian set up home reward/management system
- Ignore negative behavior, if possible
- Immediately recognize positive behaviors
- Increased parent/guardian attention at home
- Move student’s seat (preferential seating)
- Non-Verbal signals between teacher and student
- Offer student choices
- Pair student with older or younger student for structured academic activity, with emphasis on social skills
- Parent/guardian will call teacher weekly
- Positive reward system developed at school or home
- Provide student frequent breaks for relaxation or small-talk
- Provide student time for physical activities/movement
- Refer for other services
- Relaxation techniques
- Survey/interview student to determine interests

### **Health Strategies**

- Asthma class/group
- Collaborate with primary medical provider
- Dental exam/dental emergencies
- Fact Sheets on communicable diseases and school age illnesses

- Hearing screening/exam
- Improve hygiene
- Make sure child wears glasses
- Medication Administration
- Obtain glasses for student
- Vision screening/exam

### **Instructional Strategies and Modifications**

- Academic contract
- Allow previewing of content, concepts and vocabulary
- Allow student to have sample or practice tests
- Ask parent/guardian to structure study time (give them information about long-term assignments)
- Collect homework daily instead of weekly
- Communicate with after-school program staff (e.g., re: homework help)
- Communicate with last year's teacher
- Complete documentation for a 504 plan
- Consider ELL/bilingual placement
- Consider retention
- Cue/maintain eye contact with student when giving directions
- Individual and/or small group instruction
- Family will go to library
- Give student immediate feedback (make sure assignments are started correctly)
- Give student options for presentation (written/oral or illustration/model)
- Help parents/guardians to learn reading strategies
- Homework checklist or folder
- Invite parent/guardian to literacy night at school
- Make sure student stays for after school program
- Manipulative and Visual Prompts
- Move students' seat (preferential seating)
- Parent/guardian will ask another family member to give student homework help
- Principal will check-in with student daily regarding class work
- Provide printed copy of board work/notes
- Provide study guides/questions
- Read aloud to parent/guardian at home
- Send home extra work
- Send home unfinished class work
- Student will teach/tutor/read to a peer or younger child
- Study carrel
- Supply student with samples of work expected

### **COMMONLY ASKED QUESTIONS**

#### **Who can refer a student to the SST?**

*School staff or parent/guardian can refer a student to the SST. The referring person must be in attendance at the SST meeting. If school personnel refer a student, the following should be asked to attend: Parent/guardian, general education teacher, administrator or designee and student, if appropriate.*

#### **Does the parent/guardian have to be invited to the SST?**

*YES. In some instances, the school teams prefer to meet informally to discuss referral concerns. The parent/guardian must, however, initially be contacted and advised that there are concerns and that the SST will meet.*

#### **Who contacts the parent/guardian?**

*The classroom teacher or referring person is the recommended parent/guardian contact. It is assumed that the teacher would have been in communication with the parent/guardian regarding his/her concerns before the SST referral is initiated.*

**How do I know if a referral is appropriate?**

*Any referral is “appropriate” if a parent/guardian, teacher, or student requires support. It is advantageous to refer a student at the earliest warning signs or concerns. A supportive team can help reduce frustration that builds when a teacher feels that he/she is not meeting a student’s needs and/or when a parent/guardian feels his/her concerns are not being heard.*

**Why is it important to complete vision and hearing screenings?**

*Medical issues could significantly impact a student’s learning and/or behavior. The LEA must review if the vision and hearing screenings are current. If the SST decides that a referral for assessment for special education eligibility is necessary after interventions have been systematically attempted, current vision and hearing screenings are required prior to additional assessments.*

**Why is a review of the cumulative folder necessary?**

*Understanding the child’s complete educational history is imperative. Limited or poor school attendance or a multi-school history may indicate the concerns are not related to a specific disability but rather lack of exposure or opportunities.*

**Does the SST information get placed in the cumulative folder?**

*Yes. It is recommended that an SST folder be established and placed in the cumulative folder. This will allow other staff members and future schools to review what concerns have surfaced and how those concerns were addressed.*

**How long should the SST meeting last?**

*On average, the duration of an SST is usually 30 to 45 minutes. Sufficient ideas should be generated within that time frame. If brainstorming is not successful within that time, it is probable that the issue needs to be more clearly defined or more information needs to be obtained. (Refer to Page 6 of this manual for information to be addressed.)*

**How many times does the SST meet regarding a specific child?**

*LEAs should conduct at least two SST meetings: The first to determine what interventions need to be put into place and the second to report back on the success of the interventions or suggest additional interventions.*

**What if the parent/guardian refuses to participate in the SST process?**

*Parents play an integral role in the SST process and it is recommended that the LEA have in place processes that support meaningful parental participation. At minimum, parents must be kept informed of concerns and recommendations. Each LEA will have to determine how to handle non-participation in the SST process.*

**What if the SST doesn’t solve the problem?**

*Due to the range of academic/behavior concerns that can be presented to the SST, not all student needs may be solved. What can result is the LEA providing transparency to parent/guardians in knowing that all that is currently reasonable and possible is being done to support their student.*

## Can a teacher refuse to implement strategies or interventions for a student?

*No. A student has rights under several different entitlements in the law to an appropriate education. Interventions and strategies do not mean that a student cannot be held accountable for learning a core amount of information considered necessary for success in a class. Interventions and strategies do mean that a student can receive the information and/or demonstrate the competencies in alternative modes of instruction and/or assessment.*

## When does the SST refer for special education assessment?

*When there is enough data to provide information to the following questions: When is the student able to access general education? What supports and interventions are successful? When is the child not able to access general education? What supports and interventions have been tried? What additional information is needed to help this child succeed? What will be available in special education that is not available in the general education setting? If the SST team feels that a referral to special education or 504 is imminent, then either special education or 504 personnel should be involved in the SST before a referral for assessment is made.*

## Does a student with ADD/ADHD automatically qualify for special education?

*No. ADD/ADHD is NOT a special education eligibility area. The SST might refer to the Special Education or 504 team for eligibility review.*

## What do we do if a parent/guardian requests an assessment for special education? Does this bypass the SST process?

*Not necessarily. The SST is to be used as a forum for problem-solving, identification of concerns, and an opportunity for discussion and communication. However, the SST is not to be used to delay a special education referral. While the SST is not a legal requirement before a special education assessment, documentation of interventions in general education is.*

## What is 504 and how is it connected to the SST process?

*504 is a section of the Rehabilitation Act of 1973 that insures individuals with disabilities have equal access and opportunities and may not be discriminated against on the basis of their disability. If interventions in the general education environment prove to be insufficient, the SST team may decide to refer the student to the 504 team, to determine if the student may be eligible for services under 504. If the SST refers a student for special education assessment, and the student does not qualify; (a discrepancy plus a processing problem) a student's 504 eligibility may be considered. Students may be referred for 504 eligibility without going through the SST process.*

*The LEA shall ensure they have developed a 504 team to:*

- *Organize and carry out the process of referrals*
- *Meet to determine eligibility*
- *Develop and implement a 504 plan*
- *And at minimum review student 504 plans annual*



**REFERRAL**



**ELIGIBILITY**



**PLAN**



**REVIEW**

# ***APPENDIX A:***

## ***SST REFERRAL FORM***

Editable versions of the documents within the Appendix are available to download at:

[https://padlet.com/selpapd/SST\\_Appendices](https://padlet.com/selpapd/SST_Appendices)

**Type School/District Name Here**  
**Student Study Team (SST) Request Form**

**I. Basic Information**

Student Demographic Information	
Name:	Grade:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth:
Referring person: <input type="checkbox"/> Staff referral: <input type="checkbox"/> Parent/Guardian referral	Name of teacher/parent/guardian:
Is the student currently identified as: <input type="checkbox"/> Foster Youth <input type="checkbox"/> Homeless	
Home Language:	

English Learners Only	
Please select EL Typology:	
<input type="checkbox"/> Native U.S.-born ELs	ELs who are U.S. born citizens
<input type="checkbox"/> Foreign-born ELs	ELs who were born outside of the U.S.
<input type="checkbox"/> Newcomer ELs	ELs who have been in the U.S. for 1 or 2 years
<input type="checkbox"/> Highly-schooled Newcomer ELs	ELs who have been in the U.S. for 1 to 2 years, but who attained a high-quality education in their primary language
Proficiency in English (ELPAC)	Date:

**II. Student Strengths**

List student strengths here:
------------------------------

**III. Describe target area of concern: (Be objective and descriptive)**

What changes would you like to see in the student's behavior or performance? (Be as specific as you can.)
---

**IV. Attendance and Behavior**

Attendance	
Days Enrolled	Days Present
Excused Absences	Unexcused Absences
Tardies	SARB case <input type="checkbox"/> Yes <input type="checkbox"/> No

Behavior Regularly Displayed (select all that apply):				
<input type="checkbox"/> Aggression	<input type="checkbox"/> Crying	<input type="checkbox"/> Fearfulness	<input type="checkbox"/> Insecurity	<input type="checkbox"/> Stealing
<input type="checkbox"/> Anxiety	<input type="checkbox"/> Defiance	<input type="checkbox"/> Foul Language	<input type="checkbox"/> Lying	<input type="checkbox"/> Tries Hard
<input type="checkbox"/> Apathy	<input type="checkbox"/> Dependability	<input type="checkbox"/> Frustration	<input type="checkbox"/> Moodiness	<input type="checkbox"/> Withdrawal
<input type="checkbox"/> Cheerfulness	<input type="checkbox"/> Explosiveness	<input type="checkbox"/> Hyperactivity	<input type="checkbox"/> Nail Biting	<input type="checkbox"/> Other:
<input type="checkbox"/> Cooperation	<input type="checkbox"/> Facial Tics	<input type="checkbox"/> Indifference	<input type="checkbox"/> Showing Off	<input type="checkbox"/> Other:

## V. Academic Data

Assessment Data	Data Point	Date	Data Point	Date
Math				
Reading				
ELA Benchmark				
Math Benchmark				
Science Benchmark				
Social Studies Benchmark				
CAASPP ELA				
CAASPP Math				
Behavior or Work Contract				
Other				

## VI. Current/Past Interventions

Environment		Teaching Techniques	
Intervention	Outcome	Intervention	Outcome
<input type="checkbox"/> Clarify Rules <input type="checkbox"/> Change Seating <input type="checkbox"/> Reduce Distractions <input type="checkbox"/> Change Class Activities <input type="checkbox"/> Change Groups <input type="checkbox"/> Increased physical space <input type="checkbox"/> Special quiet/time-out area <input type="checkbox"/> Modify schedule <input type="checkbox"/> Add structure		<input type="checkbox"/> Adjust preverbal (tone, volume, cadence) <input type="checkbox"/> Use of physical prompts/ <input type="checkbox"/> Reduce stimulation <input type="checkbox"/> Teacher circulates around the room <input type="checkbox"/> Repeat instructions <input type="checkbox"/> Designative activities <input type="checkbox"/> Use of visual aides <input type="checkbox"/> Use of non-verbal cues <input type="checkbox"/> Contingency management program (contracts/rewards/consequences)	

Instruction Program		Materials	
Intervention	Outcome	Intervention	Outcome
<input type="checkbox"/> Cooperative learning <input type="checkbox"/> Individualized instruction <input type="checkbox"/> Teacher Conferring model (1:1) <input type="checkbox"/> Small Group <input type="checkbox"/> Before/afterschool tutoring		<input type="checkbox"/> Use of varied materials <input type="checkbox"/> Computer/tablets <input type="checkbox"/> Music/Tapes <input type="checkbox"/> Books/stories <input type="checkbox"/> Manipulatives	

Activities		Miscellaneous	
Intervention	Outcome	Intervention	Outcome
<input type="checkbox"/> Simplify <input type="checkbox"/> Shorten <input type="checkbox"/> Individual Contracts <input type="checkbox"/> Peer support system <input type="checkbox"/> Notebooks for assignments <input type="checkbox"/> Alternative assignments <input type="checkbox"/> Use of recording device <input type="checkbox"/> Use of recording device		<input type="checkbox"/> Review cum folders <input type="checkbox"/> Collaborated with colleagues <input type="checkbox"/> Collaborated with former teachers <input type="checkbox"/> Parent conference <input type="checkbox"/> Referral to counselor <input type="checkbox"/> Referral to office <input type="checkbox"/> Behavior contract <input type="checkbox"/> Other:	

## VII. Communication

Complete Parent/Guardian Contact Information before Referral to SST	
Name of Parent/Guardian Contacted:	
Date of contact:	
Parent/Guardian Response/Ideas Generated with Parent:	
Teacher Signature	Date:

# ***APPENDIX B:***

*SST PARENT/GUARDIAN INVITE*

Editable versions of the documents within the Appendix are available to download at:

[https://padlet.com/selpapd/SST\\_Appendices](https://padlet.com/selpapd/SST_Appendices)



School Name:

Student Study Team Meeting

Today's Date:

Student's Name:

DOB:

Dear Parent/Guardian Name,

The Student Study Team (SST) is comprised of school staff members who are dedicated to your child's success. We invite you to join us, as a vital member of the Student Study Team. This team will be meeting soon to identify how we can best serve your child's educational needs. Your presence at this meeting is important and will benefit your child's educational progress. Please take a moment to review the meeting details below and return the bottom portion of this form to the school office.

Thank you,

The Student Study Team meeting will be held on:
Date
Time:
Location:

If this appointment is not convenient, please contact \_\_\_\_\_ at \_\_\_\_\_ to reschedule.

Please complete and promptly return this portion to the school office	
Student Name:	Teacher:
Parent/Guardian Name:	
Mobile number:	Email:
Please check one:	
<input type="checkbox"/> Yes, I will attend the SST meeting	
<input type="checkbox"/> No, I cannot attend the SST meeting	
<input type="checkbox"/> Please contact me to reschedule the SST meeting.	

# ***APPENDIX C:***

## ***SST TEACHER INPUT FORM***

Editable versions of the documents within the Appendix are available to download at:

[https://padlet.com/selpapd/SST\\_Appendices](https://padlet.com/selpapd/SST_Appendices)

**Type School/District Name Here**  
**Student Study Team (SST) Teacher Input Request**

Dear Teacher,

We will be holding an SST meeting. Your input on the academic, behavioral, and functional performance of this student is critical to his/her success. Please complete and return this form by: \_\_\_\_\_

Student Name:	Grade:
Date:	Time:
Location:	

Teacher Information	
Name:	
Subject(s) Taught:	Date Completed:
Student's current academic grade:	Student's current citizenship grade:
Student Attendance:	Tardies: Absences:

**I. Student Strengths Scale (Please X all)**

	Always	Usually	Sometimes	Rarely	Unsure
1. Makes and effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Works well with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Demonstrates academic improvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Works independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Timely to class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Turns in assignments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Involved in academic discourse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Follows class rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Displays respect towards teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Ask teacher for help	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Willing to help others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Avoids talking excessively or out of turn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Positive peer relations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Comes to class prepared with school materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**II. Behavior regularly displayed**

Behavior Regularly Displayed (select all that apply):				
<input type="checkbox"/> Aggression	<input type="checkbox"/> Crying	<input type="checkbox"/> Fearfulness	<input type="checkbox"/> Insecurity	<input type="checkbox"/> Stealing
<input type="checkbox"/> Anxiety	<input type="checkbox"/> Defiance	<input type="checkbox"/> Foul Language	<input type="checkbox"/> Lying	<input type="checkbox"/> Tries Hard
<input type="checkbox"/> Apathy	<input type="checkbox"/> Dependability	<input type="checkbox"/> Frustration	<input type="checkbox"/> Moodiness	<input type="checkbox"/> Withdrawal
<input type="checkbox"/> Cheerfulness	<input type="checkbox"/> Explosiveness	<input type="checkbox"/> Hyperactivity	<input type="checkbox"/> Nail Biting	<input type="checkbox"/> Other:
<input type="checkbox"/> Cooperation	<input type="checkbox"/> Facial Tics	<input type="checkbox"/> Indifference	<input type="checkbox"/> Showing Off	<input type="checkbox"/> Other:

**III. Academic Data**

Assessment Data	Data Point	Date	Data Point	Date
Math				
Reading				
ELA Benchmark				
Math Benchmark				
Science Benchmark				

Social Studies Benchmark		
CAASPP ELA		
CAASPP Math		
Behavior or Work Contract		
Other		

#### IV. Current/Past Interventions

Please select all applied interventions

Environment		Teaching Techniques	
Intervention	Outcome	Intervention	Outcome
<input type="checkbox"/> Clarify Rules <input type="checkbox"/> Change Seating <input type="checkbox"/> Reduce Distractions <input type="checkbox"/> Change Class Activities <input type="checkbox"/> Change Groups <input type="checkbox"/> Increased physical space <input type="checkbox"/> Special quiet/time-out area <input type="checkbox"/> Modify schedule <input type="checkbox"/> Add structure		<input type="checkbox"/> Adjust preverbal (tone, volume, cadence) <input type="checkbox"/> Use of physical prompts <input type="checkbox"/> Reduce stimulation <input type="checkbox"/> Teacher circulates around the room <input type="checkbox"/> Repeat instructions <input type="checkbox"/> Designative activities <input type="checkbox"/> Use of visual aides <input type="checkbox"/> Use of non-verbal cues <input type="checkbox"/> Contingency management program (contracts/rewards/consequences)	

Instruction Program		Materials	
Intervention	Outcome	Intervention	Outcome
<input type="checkbox"/> Cooperative learning <input type="checkbox"/> Individualized instruction <input type="checkbox"/> Teacher Conferring model (1:1) <input type="checkbox"/> Small Group <input type="checkbox"/> Before/afterschool tutoring		<input type="checkbox"/> Use of varied materials <input type="checkbox"/> Computer/tablets <input type="checkbox"/> Music/Tapes <input type="checkbox"/> Books/stories <input type="checkbox"/> Manipulatives	

Activities		Miscellaneous	
Intervention	Outcome	Intervention	Outcome
<input type="checkbox"/> Simplify <input type="checkbox"/> Shorten <input type="checkbox"/> Individual Contracts <input type="checkbox"/> Peer support system <input type="checkbox"/> Notebooks for assignments <input type="checkbox"/> Alternative assignments <input type="checkbox"/> Use of recording device		<input type="checkbox"/> Review cum folders <input type="checkbox"/> Collaborated with colleagues <input type="checkbox"/> Collaborated with former teachers <input type="checkbox"/> Parent conference <input type="checkbox"/> Referral to counselor <input type="checkbox"/> Referral to office <input type="checkbox"/> Behavior contract <input type="checkbox"/> Other:	

#### V. Additional Comments

Please provide any additional comments to help create a success plan:

# ***APPENDIX D:***

## ***SST MEETING SUMMARY***

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School/District Name  
**Student Study Team Meeting Summary**

Check one:  Initial SST     2<sup>nd</sup> (Follow-up) SST     3<sup>rd</sup> (Follow-up) SST

**I. Student Information**

Today's Date	Student Name	Grade	Teacher	Age	Birthdate	Gender
Primary Language: <input type="checkbox"/> Foster Youth <input type="checkbox"/> Homeless <input type="checkbox"/> EL <input type="checkbox"/> Other: _____						
Previous SST's/Reviews: _____						

**II. Strengths:** Include strengths and interests at school (academic, social, learning style) and at home (family supports, community, and interests):

Text

**III. Areas of Concern:** Include academic, behavior, emotional, health, social and home concerns

Text

**IV. Student History**

Health	Assessment Data (Most Current)
Was Pregnancy & birth typical: <input type="checkbox"/> Yes <input type="checkbox"/> No    If Complications, please describe:	SBAC – ELA:
Developmental milestones met: <input type="checkbox"/> Walking <input type="checkbox"/> Talking <input type="checkbox"/> Toileting	SBAC – Math:
Health concerns: <input type="checkbox"/> Hearing <input type="checkbox"/> Vision <input type="checkbox"/> Dental <input type="checkbox"/> Sleep	BMK – ELA:
Chronic conditions:    Current medications: _____	BMK – Math:
Does student have health insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No    Type of insurance: _____	Reading:
	Writing:

<b>Family &amp; Home</b>		Math:
Family members (in or out of the home):		CELDT:
		# of Absences:
		# of Tardies:
		Behavior:
History of schools attended (include preschool):		
English Language Learner? <input type="checkbox"/> Yes <input type="checkbox"/> No		Years Speaking English:
Other:		

**V. Prior Interventions**

Intervention	Time Frame	Goal	Outcome
1.	From to		
2.	From to		
3.	From to		
4.	From to		
5.	From to		

**VI. Action Plan**

Intervention/Accommodation	Start Date	Person Responsible	Expected Outcome	Review Date	New Action?
1.					<input type="checkbox"/> Yes <input type="checkbox"/> No
2.					<input type="checkbox"/> Yes <input type="checkbox"/> No
3.					<input type="checkbox"/> Yes <input type="checkbox"/> No
4.					<input type="checkbox"/> Yes <input type="checkbox"/> No
5.					<input type="checkbox"/> Yes <input type="checkbox"/> No

**VII. Follow-up Date** (schedule within 4-8 weeks): \_\_\_\_\_

**VIII. Team Members**

Title	Name	Signature
1. Parent/Guardian		
2. Student (if applicable)		
3. Administrator		
4. Referring Teacher (s)		

# ***APPENDIX E:***

***SST PARENT/GUARDIAN FEEDBACK***

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School/District Name  
**SST Parent/Guardian Survey**

Dear Parent/Guardian,

We thank you for joining us for today's Student Study Team (SST) meeting. In an ongoing effort to ensure that this process is meaningful to our parent/guardian participants, please take a few minutes to complete the survey below, and return it to Name in Location (ie: front office) on your way out of the school today.

Today's Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Your Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Your Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

1. How were you notified of this meeting?  
 Letter/Invitation       Phone Call       Email       Other: \_\_\_\_\_
  
2. Was the **purpose** of the SST meeting communicated clearly at the beginning of the meeting?  
 Yes       No
  
3. Were introductions made at the beginning of the meeting?  
 Yes       No
  
4. In discussing your child, did the team start by detailing his/her **strengths**?  
 Yes       No
  
5. Did you feel that your input was valued throughout the meeting?  
 Yes       No
  
6. Were the next steps/interventions in helping your student clearly described?  
 Yes       No
  
7. Please provide any additional comments or questions, and a member of the SST team will get back to you: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





IL DISTRETTO  
**CHARTERSELPA**