

## ACCOMMODATING HEALTH NEEDS IN SCHOOL: 504 PLANS

August 2024

There are many steps that schools must take to make sure that children with health needs are supported to learn and are included in all parts of school. This fact sheet explains the rights that children with health problems have in school, including the right to be identified, evaluated, and receive an accommodations plan and the right to be free from disability discrimination. The goal is to make sure every student with a disability can fully participate in school. Accommodations help students with disabilities succeed at school and create a level playing field for the child.

### WHEN IS MY CHILD ENTITLED TO SPECIAL HELP FOR A HEALTH CONDITION?

If your child has a health need, chronic condition, physical, mental, or behavioral impairment that “substantially limits” a “major life activity” and needs help to participate in or benefit from

#### Special Considerations

**Virtual learning:** While schools have returned to in-person learning, there may be other health emergencies that require students to return to virtual instruction. In these cases, a parent should request a 504 meeting to determine how their child’s educational needs can be met. Parents always have the right to disagree with their child’s proposed placement or the failure to make reasonable accommodations in school to ensure the safety of the child. The rights and advocacy tips discussed in this fact sheet apply.

**COVID Compensatory Services (CCS)** are services that are necessary to make up for the education disruption during the pandemic. For more information, please see ELC’s [COVID Compensatory Services](#) fact sheet.

- Your child’s 504 team should have met with you to review data on your child’s skills to compare with data from before the pandemic. **If this meeting did not occur, you can request it in writing.**
- If your child did not make meaningful progress, lost skills, or did not receive required services, the 504 team should develop a plan with you to provide CCS. PDE has a suggested [plan](#) for deciding how much CCS your child is owed.
- If you disagree with the plan for CCS or no plan was created, raise this issue with your child’s school. You can take any of the advocacy steps that are described in this fact sheet about what to do when you disagree with decisions of the 504 team.

education or extracurricular programs, your child may qualify for accommodations in school. Common examples of such health needs include diabetes, asthma, as well as ADHD, depression, anxiety disorders, and mental/behavioral health conditions.

### WHAT IS A MAJOR LIFE ACTIVITY?

A “major life activity” includes learning, walking, seeing, hearing, speaking, concentrating, breathing, caring for oneself, lifting, performing manual tasks, eating, sleeping, standing, bending, reading, thinking, toileting, and communication.<sup>1</sup> A child can also qualify because of problems with “major bodily functions” such as functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions.

### WHAT ARE SOME EXAMPLES OF CONDITIONS THAT ARE COVERED?

- Asthma
- Auditory/visual processing delays
- Severe allergies
- Anxiety
- ADD and ADHD
- Cancer
- Crohn’s disease
- HIV/AIDS
- Epilepsy
- Medically fragile
- Ulcerative colitis
- Diabetes
- Depression
- Dyslexia
- Oppositional defiant disorder
- Physical disabilities

### WHY IS IT IMPORTANT TO IDENTIFY STUDENTS WITH HEALTH CONDITIONS?

This is important to ensure that all students receive the accommodations they need to learn and have access to the full range of educational opportunities. When schools do not recognize the health needs of a student, this can lead to incorrect disciplinary decisions, removals from school, or harmful truancy referrals due to students’ long-term physical and mental health conditions.<sup>2</sup> This is disability discrimination as the school is punishing a child based on the child’s disability.

Research shows that Black and Brown students disproportionately attend under-resourced schools, which fail to identify students who are eligible to receive these necessary accommodations.<sup>3</sup> Moreover, within the same school, due to systemic and individual anti-Black racism, white students are consistently the racial group with the highest identification rates for disability accommodations, while Black and Brown students have far lower identification rates.<sup>4</sup> This is a contributing factor leading to far higher rates of out-of-school suspension and removal of Black and Brown students with disabilities from the classroom.<sup>5</sup>

### WHAT CAN I DO IF I THINK MY CHILD NEEDS ACCOMMODATIONS IN SCHOOL?

If you think your child needs accommodations, ask that your child be evaluated for a **504 plan**, also known as a “service agreement” or “accommodations plan.”<sup>6</sup> This is an agreement between a parent and the school, describing what accommodations will be provided to your child so that your child can participate in and benefit from school activities. Section 504 of the Rehabilitation Act of

1973 is a federal civil rights law that makes it illegal for public schools and some private schools to discriminate against people with disabilities.<sup>7</sup> Public schools must provide a free appropriate public education (FAPE) to all students.<sup>8</sup>

We suggest that you ask **in writing**. In your letter or email, explain the disability your child has and the type of help you believe your child needs. You can include copies of evaluations, records, or prescriptions. The school district must evaluate your child (or accept private evaluations) and determine whether your child qualifies for a 504 plan.

### WHAT DOES A 504 PLAN INCLUDE?

A Section 504 plan lists the services and accommodations your child needs.<sup>9</sup> Some examples of typical accommodations are: permitting a child with a seizure disorder to stay indoors during recess when it is hot outside; dispensing medication for a student with asthma; having a child with a vision impairment sit close to the blackboard; allowing a child with diabetes to go to the school nurse to get an insulin shot.

A 504 plan can also include services that your child needs to access school in the same way as other classmates, such as special transportation or school counseling.

### DOES MY CHILD NEED SPECIAL EDUCATION SERVICES?

Not necessarily. Children with chronic health impairments or serious illnesses *may* need special education, but only if your child requires specially designed instruction or needs to learn differently. If your child qualifies for special education through an individualized education program (IEP), a school district must provide special education services, including therapies and other related services, and your child must be educated in the “least restrictive environment” with their nondisabled peers.

A child is “other health impaired” if they have a serious or continuing health problem that limits their strength or alertness in school or raises their sensitivity to the school environment – and this affects their ability to learn to the extent of requiring different instruction.<sup>10</sup> Examples of health problems that may qualify your child for special education if they affect their ability to learn include attention deficit disorder (ADD), attention deficit hyperactivity disorder (ADHD), Tourette syndrome, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, and sickle cell anemia.

If you think your child is eligible for special education, you can ask that the school evaluate your child. To learn more about this evaluation process, see ELC’s fact sheet [Special Education Evaluations](#). If the school agrees that your child is eligible for special education, you and the district will develop an IEP that lists the special education and other services your child needs. For more information on the special education process, see ELC’s manual [The Right to Special Education in Pennsylvania: A Guide for Parents and Advocates](#) and other publications that can be obtained from ELC’s website ([www.elc-pa.org](http://www.elc-pa.org)).

## WHAT SHOULD I DO IF MY CHILD'S HEALTH IMPACTS ATTENDANCE?

Sometimes a child with a chronic health condition who is eligible for special education cannot attend school regularly or misses school for long periods of time. Parents and the school district should determine how the student will receive their assignments and how much in-home teaching the student needs (the minimum is usually five hours, but if more instruction is appropriate for the child, the child should receive more). Those decisions should be included in the child's IEP or Section 504 plan. Specially designed instruction can also be provided while your child is in the hospital if the child is not too ill to learn.

It is important to communicate with your child's school about all attendance issues. To learn more about school attendance and truancy, see ELC's [School Attendance and Truancy: Understanding the Basics](#).

## DOES MY CHILD STILL QUALIFY FOR A 504 PLAN IF THE PROBLEM ONLY HAPPENS PERIODICALLY?

Yes. A child can be eligible even if the child's impairment only occurs periodically.<sup>11</sup> A child can even be entitled to accommodations if their illness is in remission if it would substantially limit a major life activity if it were active. However, the child would qualify for protection under the law only if the problem is likely to last or has lasted for at least six months.

Federal law also provides that a school district **cannot** consider steps that have been taken to help the child (for example, medication, a wheelchair, or a hearing aid) in determining whether the child has a physical or mental impairment that substantially limits a major life activity.<sup>12</sup> The one exception is if the child uses ordinary eyeglasses or contact lenses.

## WHAT IF THE SCHOOL DISTRICT AND I DON'T AGREE ABOUT WHETHER MY CHILD IS ELIGIBLE FOR AN IEP OR SECTION 504 PLAN, OR THE TYPE, AMOUNT, OR LOCATION OF SERVICES NEEDED?

If you disagree with your school district over the child's eligibility or the type, amount, or location of services provided in your child's IEP or Section 504 plan, you can:

- Request mediation from the Office for Dispute Resolution (ODR): Call ODR at 1-800-222-3353 or get a mediation request form at <https://odr-pa.org/iep-ifsp-facilitation-mediation-request-form/>. The mediation system helps families with either special education issues or Section 504/Chapter 15 disputes.
- For children with Section 504 plans (also called "service agreements"): Request an informal conference with district officials by sending a written request to the principal (and send a copy to the district's director of special education). Within 10 school days of receiving your request, the district must hold the conference to try to resolve the disagreement.
- Request a formal hearing: For more information on the hearing system and other options for resolving disputes, see ELC's fact sheet entitled [Resolving Special Education Disagreements](#) at [www.elc-pa.org](http://www.elc-pa.org) or visit ODR's website at <https://odr-pa.org/due-process/>.

## CAN A SCHOOL DISTRICT BE HELD LIABLE FOR DISCRIMINATING AGAINST MY CHILD BASED ON THEIR DISABILITIES UNDER SECTION 504?

Yes. To establish a disability discrimination under Section 504 or the Americans with Disabilities Act,<sup>13</sup> a parent must demonstrate that the student: (1) has a disability or was regarded as having a disability;<sup>14</sup> (2) was otherwise qualified to participate in school activities;<sup>15</sup> and (3) was denied the benefits of the program or was otherwise subject to discrimination because of the child's disability.<sup>16</sup> Claims of disability discrimination can be remedied through monetary damages.<sup>17</sup> The standard for obtaining damages under antidiscrimination laws is significant. The discrimination must be intentional.<sup>18</sup> Intentional discrimination can be satisfied through a showing of deliberate indifference.<sup>19</sup> To satisfy the deliberate indifference standard, a parent must present evidence that shows: (1) The school district had knowledge that a federally protected right is substantially likely to be violated<sup>20</sup> and (2) the school district failed to act despite that knowledge.<sup>21</sup> To learn more about this, see this ELC fact sheet: [Right to Damages for Disability Discrimination](#).

## CAN I GET HELP FOR MY CHILD FROM ANY OTHER SOURCE?

Medical Assistance or Medicaid (MA) is the federal/state insurance program that pays for health screens and treatment services for low-income children and adults. In Pennsylvania, children with disabilities sufficiently severe to qualify for federal Social Security income benefits are eligible for MA regardless of the amount of their families' income. They will be eligible unless they have too much income in their own name. Child support and Social Security benefits are not considered the child's income and so will not be counted against them. Many children with severe physical or behavioral disabilities in Pennsylvania qualify for MA coverage. Eligible children have the right to all "medically necessary" physical and behavioral health services. Coverage includes routine medical care (such as immunizations or treatment for ordinary illness) but can also include quite specialized and costly services.

Children who qualify for MA get an "ACCESS" card, which they can use to buy a wide range of preventive and treatment services. In most counties, these children are also enrolled in a Medical Assistance HMO. For many services and items, a child's physician will need to request authorization from the HMO based on medical necessity. If families also have private health insurance, MA will require them to use their private insurance first. However, MA services must be free and promptly provided, and no copays or other additional payments can be charged to families.

Some key behavioral health services covered by MA include psychiatric hospital stays, residential treatment facilities, behavioral health rehabilitation services (the most common of which is therapeutic staff support or "TSS" – staff who provide one-on-one support to children with serious behavioral problems), medication for behavioral problems (such as Ritalin for children with attention deficit disorder), outpatient therapy, and partial hospitalization programs.

On the physical health side, some **examples** of what MA pays for include therapies, shift and intermittent skilled nursing, communication devices and other durable medical equipment, and personal care services for children who need assistance with basic activities of daily living (eating, dressing, hygiene, etc.). MA must provide eligible children with the medical services necessary to meet the child's physical and behavioral needs during the school day and provide services in the child's home, community, or school setting.

Remember, even if MA pays for a service that your child receives during the school day, if that service is needed for them to learn or attend school safely (such as a nurse or TSS support), it is important that the service be listed on their IEP.

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The Education Law Center-PA (ELC) is a nonprofit, legal advocacy organization with offices in Philadelphia and Pittsburgh, dedicated to ensuring that all children in Pennsylvania have access to a quality public education. Through legal representation, impact litigation, community engagement, and policy advocacy, ELC advances the rights of underserved children, including children living in poverty, children of color, children in the foster care and juvenile justice systems, children with disabilities, multilingual learners, LGBTQ students, and children experiencing homelessness.

ELC’s publications provide a general statement of the law. However, each situation is different. If questions remain about how the law applies to a particular situation, contact ELC’s Helpline for information and advice – visit [www.elc-pa.org/contact](http://www.elc-pa.org/contact) or call 215-238-6970 (Eastern and Central PA) or 412-258-2120 (Western PA) – or contact another attorney of your choice.

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<sup>1</sup> 34 C.F.R. § 104.3.

<sup>2</sup> *Id.*; see also Tony Fabelo et al., Council of State Governments Justice Center and Public Policy Research Institute, *Breaking schools’ rules: A statewide study of how school discipline relates to students’ success and juvenile justice involvement* (2011), [https://csgjusticecenter.org/wp-content/uploads/2020/01/Breaking\\_Schools\\_Rules\\_Report\\_Final.pdf](https://csgjusticecenter.org/wp-content/uploads/2020/01/Breaking_Schools_Rules_Report_Final.pdf); Russell J. Skiba, *Where should we intervene? Contributions of behavior, student, and school characteristics to suspension and expulsion*, in CLOSING THE SCH. DISCIPLINE GAP 132 (Daniel J. Losen ed., 2015).

<sup>3</sup> Daniel J. Losen, Paul Martinez & Grace Hae Rim Shin, The Ctr. For C.R. Remedies At The C.R. Project, UCLA, *Disabling Inequity: The Urgent Need For Race-Conscious Resource Remedies* 13-14 (2021), <https://www.civilrightsproject.ucla.edu/research/k-12-education/special-education/disabling-inequity-the-urgent-need-for-race-conscious-resource-remedies/final-Report-03-22-21-v5-corrected.pdf> (finding that 306 districts of 1,000 or more students reported zero students eligible for 504-only in 2017-18).

<sup>4</sup> *Id.*

<sup>5</sup> *Id.*

<sup>6</sup> 34 C.F.R. § 104.35.

<sup>7</sup> 29 U.S.C. § 794.

<sup>8</sup> 34 C.F.R. § 104.33.

<sup>9</sup> *Id.* § 104.33.

<sup>10</sup> *Id.* § 300.8.

<sup>11</sup> U.S. Dep’t of Educ., *Frequently Asked Questions about Section 504 and the Education of Children with Disabilities*, <https://www2.ed.gov/about/offices/list/ocr/504faq.html>.

<sup>12</sup> *Id.*

<sup>13</sup> Americans with Disabilities Act of 1990, 42 U.S.C. §§ 12101 et seq.

<sup>14</sup> *Roe v. Healey*, 2023 WL 5199870, 8 (1st Cir. 2023).

<sup>15</sup> *Id.*

<sup>16</sup> *Id.*

<sup>17</sup> *Perez v. Sturgis Pub. Schs.*, 143 S.Ct. 859 (2023).

<sup>18</sup> *S.H. ex rel. Durrell v. Lower Merion Sch. Dist.*, 729 F.3d 248, 265 (3d Cir. 2013).

<sup>19</sup> *Id.* See, e.g., *Chambers ex rel. Chambers v. School Dist. of Phila. Bd. of Educ.*, 537 F. App’x 90, 96-97 (3d Cir. 2013) (finding an issue of genuine fact as to whether a district was deliberately indifferent when the school was aware that therapies were not provided, ignored parents’ requests for hearings, and failed to place student in appropriate programs.); *D.C. ex rel. A.T. v. Pittsburgh Pub. Schs.*, No. 19-cv-12, 2022 WL 267359, at \*12 (W.D. Pa. Jan. 28, 2022) (holding that whether district provided sufficient behavioral supports promptly enough to student with a disability must be submitted to a jury where district failed to act despite knowledge that plaintiff’s 504 rights); *Beam v. Western Wayne Sch. Dist.*, No. 15-cv-01126, 2018 WL 6567722, at \*7-8 (M.D. Pa. Dec. 13, 2018) (school’s decision to send communications regarding child’s behavioral issues but not their academic performance suggested that the school purposefully withheld this information, constituting deliberate indifference).

<sup>20</sup> *Durrell*, 729 F.3d at 265.

<sup>21</sup> *Id.*

# How to Get a Section 504 Plan

## Tell the School

- Complete and sign a Letter of Request.
- Collect supporting documents
  - Doctors' letters
  - Report cards
  - Standardized test scores
  - Teacher evaluations
- Make 2 copies of everything (one for you, one for the school)
- Bring these to your child's school. Have someone sign for it!

## Evaluate the Student

- You **MUST** sign a Permission to Evaluate Form.
- The school **MUST** make it easy to get this form.
- Once you sign, the school has 60 days to evaluate your child.
- A team will review all the information and write an Evaluation Report.

## Decision

- The team will decide if your child needs a 504 Plan.
- The school fills out a form that explains the decision.
- The school will tell you what they decide.

## If Agreed... Make a 504 Plan

- Accommodations will be made for your child.
- You will get a copy of the 504 Plan.
- You **MUST** sign this plan.
- This Plan will be reviewed every year.
- Your child will be re-evaluated every 3 years or when their needs change.
- If the Plan is **NOT** followed, you may request Due Process or ask the Department of Education to investigate.

## If Denied... Next Steps

- Talk to the school about the reasons for the denial and what additional information staff may need.
- You can request mediation through PATTAN by calling (800) 222-3353.
- You can request a formal Due Process Hearing

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Attention:  
Principal or 504 Coordinator's name:  
School Name:  
School Address:  
City, State, ZIP

Date:

**RE: Request for 504 Plan**

Dear Mr./Ms. \_\_\_\_\_ (504 Coordinator or Principal's name)

I am the parent/guardian of \_\_\_\_\_. He/She is in \_\_\_\_ grade at \_\_\_\_\_  
School. Mr./Ms. \_\_\_\_\_ is his/her teacher.

My child's education is very important to me. I would like him/her to be evaluated for his/her eligibility for Section 504 accommodations. He/she has been diagnosed with \_\_\_\_\_, which directly impacts his/her education and needs. Please see the attached form describing how this condition impacts performance at school. I believe he/she needs the following accommodations and/or services:

\_\_\_\_\_  
\_\_\_\_\_

I have attached a letter from my child's doctor documenting the diagnosis, in addition to report cards and other supporting documents. Please consider this letter as consent for the school's nurse or administrators to speak to my child's doctor, Dr. \_\_\_\_\_, about the plan.

I understand that the evaluation must be provided at no charge to me. Please keep me updated on your progress. If this request is denied, please reply in writing with the reason for the denial. If you need more information or have questions, you can call me at \_\_\_\_\_ or email me at \_\_\_\_\_.

I understand that within 25 days of receiving this written request, the school district must evaluate this information and send me a response. Please include a copy of this letter in my child's educational record.

Thank you in advance for working with me to help my son/daughter with his/her learning needs. I look forward to working together with you and the educational team to give my child a successful education.

Sincerely,

[Parent's name and signature]



## ***INSTRUCTIONS FOR PHYSICIAN RECOMMENDING 504 PLAN***

***Instructions: Give two copies of this letter to the parent/guardian, who will then deliver it along with a Letter of Request and other documents to the child's school. Make sure the parent/guardian signs a consent form so the school can communicate with you if they have further questions. Some schools may require medical records.***

*Use CLEAR, CONCISE directives:*

- *Good choices: "must have," "needs," "requires,"*
- *Weak choices: "could benefit from" or "it would be best if."*
- *Example: "Due to the severity of his/her educational needs, s/he requires...."*

Date:

Dear \_\_\_\_\_ (Principal/case manager/counselor)

(Name of child) is under my care and has been diagnosed with \_\_\_\_\_. I recommend that he/she be given a 504 plan to accommodate his/her medical needs.

In order for \_\_\_\_\_ to be in an appropriately safe environment and receive appropriate education, he/she requires a 504 plan that includes the following components:

*List required accommodations*

- *identify HOW the diagnosis affects the student's learning/experience at school*
- *BE SPECIFIC when describing accommodations*
- *Explain how this accommodation will address the problem.*

*Example: Instead of "preferential seating," explain that the student has ADHD and is thus easily distracted and must sit at the front of the classroom near the instructor, away from the windows or computers, and near supportive instead of distracting peers.*

Thank you and if you have any further questions, I can be reached at: \_\_\_\_\_

Very truly yours,

(Signature, Name of Physician)

## Section 504 Accommodations

This form will help you and your school decide if your child needs accommodations.

Student Name: \_\_\_\_\_

Address: \_\_\_\_\_

Student birth date: \_\_\_\_\_

Student ID number: \_\_\_\_\_

School: \_\_\_\_\_

Grade: \_\_\_\_\_

Parent(s)/guardian(s) name(s): \_\_\_\_\_

Teacher's name: \_\_\_\_\_

Date: \_\_\_\_\_

1. Does the student have a physical or mental disorder? For example:

- Physical problems that affects the nerves, muscles, bones, vision, speech, breathing, heart, lungs, stomach, or blood.
- Cancers or other long-term illnesses (like Sickle-Cell Disease, Diabetes, or Asthma)
- Mental, psychological, or emotional disorders (like ADHD, Depression, Anxiety, or Bipolar Disorder)

YES  NO. If YES, please name and/or describe to the best of your ability:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Does this disorder severely limit a major life activity?

___ Learning	___ Hearing	___ Performing manual tasks	___ Thinking
___ Speaking	___ Walking	___ Working	___ Standing
___ Seeing	___ Breathing	___ Caring for one's self	___ Lifting
___ Concentrating	___ Organizing	___ Sleeping	___ Eating
___ Other:	_____		

3. Does the student score below average on standardized exams (PSSA)?

YES  NO

4. Does the student get below-average grades in school?

YES  NO

## Section 504 Accommodations

This form will help you and your school decide if your child needs accommodations.

5. Does the student get disciplined (detention, suspension, etc.) for inappropriate behavior often?  YES  NO. If YES, please give details:

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6. Is the student absent or late to school often?  YES  NO

7. Does the student receive special health care (medication, inhaler, etc.) during the school day?  YES  NO

8. Is the student disruptive or distracted in class?  YES  NO

Please put together as many of the following sources as you can:

- Current and/or old report cards showing poor grades or a decline in grades
- School records
- Individual Achievement Tests
- Group Achievement Tests
- Work samples (example: homework assignments)
- Medical report: letter from a doctor with a diagnosis explaining how this condition affects the student
- Classroom teacher report
- Individualized Education Plan Data
- Any other sources you think would be helpful

Parent/guardian's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print parent/guardian's name: \_\_\_\_\_ Date: \_\_\_\_\_

## SAMPLE 504 ACCOMMODATIONS

### ACADEMIC

#### Reading

- Provide additional reading time
- Use “previewing strategies”
- Select text with less on a page
- Shorten amount of required reading
- Avoid oral reading
- Use recorded texts/reading assignments
- Read tests and directions to student

#### Written Language

- Reduced paper and pencil tasks
- Note taking assistance, i.e., other students, NCR paper, etc.
- Tape recorder for written assignments
- Oral responses to written assignments/tests
- No penalties for spelling or mechanical errors in written assignments
- Accept non-written forms or reports, i.e., displays, oral projects, etc.
- Test with multiple choice/fill in questions
- Use typewriters, word processors, tape recorders, computer

#### Math

- Allow use of calculator
- Use graph paper to space numbers
- Provide additional math time
- Provide immediate correctness feedback and instruction via modeling of correct computational procedure
- Shorten length of math assignments
- Frequent checks for understanding
- Provide opportunities for drill and practice

#### Attention

- Seat student in quiet area
- Seat student near good role model
- Seat student near “study buddy”
- Increase distance between desks
- Allow extra time to complete assignments
- Shorten assignments/work periods to coincide with span of attention
- Use a timer for designated work periods
- Break long assignments into smaller parts so student can see the end to the work

- Assist student in setting short-term goals
- Give assignments one at a time to avoid work overload
- Require fewer correct responses for grade
- Reduce amount of homework
- Instruct student in self-monitoring using cueing
- Pair written instructions with oral instructions
- Cue students to stay on task, i.e., private signal

### Impulsiveness

- Ignore minor, inappropriate behavior
- Increase immediacy of rewards and consequences
- Set behavior contracts with student
- Minimize unstructured transition times
- Acknowledge positive behavior of nearby students
- Seat student near the teacher or a peer who is a good role model
- Provide positive reinforcement for appropriate behavior
- Allow student to stand at times while working
- Remind student to check over product if performance is rushed and careless
- Avoid crowded worksheets
- Provide varied activities during behavior and earn rewards
- Use concise verbal instructions after obtaining eye contact with the student
- Have student repeat instructions/directions to check for understanding

### Organization Planning

- Maintenance of student planner/assignment notebook
- Provide organization rules
- Encourage student to have notebook with dividers and folders for work
- Supervise writing down of assignments
- Send weekly progress notes home
- Reward neatness rather than penalize sloppiness
- Allow student to have extra set of textbooks at home
- Give assignments one at a time
- Assist student in setting short-term goals
- Encourage student to learn keyboarding skills
- Allow student to tape record assignments, homework, classroom projects, etc.

### Organizational Strategies

- Model and reinforce organizational systems, i.e., color-coding
- Write out homework assignments, check student's recording of assignments
- Tailor homework assignments toward student strengths
- Set time expectations for assignments
- Provide clues such as clock faces indicating beginning and ending times

- Teach study/organizational skills
- Schedule before or after school tutoring/homework assistance

### Behavior Modification

- Post and discuss classroom rules
- Praise compliant behavior
- Provide immediate feedback
- Ignore minor misbehavior
- Use “prudent” reprimands for misbehavior; avoid lecturing or criticism
- Set up behavior contracts, enlisting parents support to follow through at home
- Implement classroom management system with token, rewards, points, etc.
- Seat students near the teacher

### Behavioral Strategies

- Use behavioral management techniques consistently within a classroom and across classes
- Implement behavioral/academic contracts
- Utilize positive verbal and/or nonverbal reinforcements
- Utilize logical consequences
- Confer with the student’s parents (and student, as appropriate)
- Establish a home/school communication system for behavior monitoring
- Post rules and consequences for classroom behavior
- Put student on daily/weekly progress report/contract
- Reinforce self-monitoring and self-recording of behaviors

### Test Taking

- Allowing open book exams
- Giving exam orally
- Giving take home tests
- Using more objective items, i.e., fewer essay responses
- Allowing student to give test answers on tape recorder
- Giving frequent short quizzes, not long exams
- Allowing extra time for exam
- Reading test item to student
- Avoid placing student under pressure of time or competition

### Social Emotional

- Provide reassurance and encouragement
- Frequently compliment positive behavior and work product
- Encourage cooperative learning tasks with other students
- Monitor social interactions for both positive and inappropriate behavior

- Model acceptance of student by assigning special responsibilities in the presence of peer group
- Prompt appropriate social behavior either verbally or with a private signal
- Provide brief training in anger control; use calming strategies; encourage student to walk away; tell a nearby adult if getting angry
- Watch for signs of stress build up and provide encouragement or reduced work load to alleviate
- Speak softly in non-threatening manner if student shows nervousness
- Send positive notes home
- Talk to student in private when behavior needs correcting
- Encourage social interactions with classmates if student is withdrawn or excessively shy
- Review instructions when giving new assignments to check for student understanding

#### Classroom Instruction Modifications

- Extending time permitted for completion of assignments
- Preferential seating
- Reducing written assignments
- Extending testing time
- Provide extra set of textbooks for home
- Study guides and organizing tools
- Provide a peer tutor/helper
- Counseling
- Have student use an organizer; train in organizational skills
- Modify recess/PE/transportation

#### Environmental Strategies

- Provide a structured learning environment
- Make separate “space” for different types of tasks
- Possible adapting of non-academic times such as lunch, recess, and PE
- Change student seating
- Utilize a study carrel
- Alter location or personal or classroom supplies for easier access or to minimize distraction
- Provide sensory breaks
- Provide a written or picture schedule

#### Presentation Strategies

- Tape lessons so the student can listen to them again
- Use computer-aided instruction and other audiovisual equipment
- Select alternative textbooks, workbooks, and/or provide books on tape
- Highlight main ideas and supporting details in the book
- Provide copied material for extra practice, i.e., outlines, study guides, etc.

- Prioritize drill and practice activities for relevance
- Vary the method of lesson presentation using multi-sensory techniques:
  - Lecture plus overhead/board demonstration support
  - Small groups required to produce a written product
  - Large groups required to demonstrate a process
  - Computer-assisted instruction
  - Peer tutors and/or cross-age tutors
  - Demonstrations, simulations
  - Experiments
  - Games
- Ask student to repeat/paraphrase context to check understanding
- Arrange for a mentor to work with student in his/her interest area or area of greatest strength
- Provide peer tutoring
- Simplify and repeat instructions about in-class and homework assignments
- Vary instructional pace
- Reinforce the use of compensatory strategies, i.e., pencil grip, mnemonic devices, “spell check”
- Vary kind of instructional materials used
- Assess whether student has the necessary prerequisite skills; determine whether materials are appropriate to the student’s current functioning levels
- Reinforce study skill strategies (survey, read, recite, review)
- Introduce definition of new terms/vocabulary and review to check for understanding
- Be aware of student’s preferred learning style and provide matching instruction materials
- Pre-teach and/or re-teach important concepts
- Prepare advanced organizers/study guides for new material

### Assignments

- Modify the amount of homework
- Use written directions to supplement oral directions
- Reduce paper and pencil tasks
- Allow for assignments to be word processed
- Lower reading level of assignments
- Break assignments into a series of smaller assignments
- Use highlighted texts

### Evaluation Methods

- Limit amount of material presented on a single page
- Provide a sample or practice test
- Provide for oral testing
- Provide tests in segments so that student hands in one segment before receiving the next part



- Provide personal copy of test tools and allow for color-coding/highlighting
- Adjust time for completion
- Modify weights of tests when grading

#### Miscellaneous

- Student conference
- Parent conference
- Student/parent conference
- Schedule changes
- Using “pass/fail” instead of letter grades
- Peer tutoring
- Preferential seating
- Counseling
- Consultation with special education staff
- Peer helper/paired working arrangement
- Omission of assignments requiring copying in a timed situation
- Allowing student to copy from paper/book rather than from the blackboard
- Concrete rather than abstract instruction
- Consideration of student’s learning style, i.e., auditory, visual, tactile/kinesthetic
- Specialized equipment to access school or classes
- Building modification for student access
- Provide student with outline/summary of important information from classes
- Modified school day (length/sequence)
- Home study/instruction
- Adjust requirements for grades

#### **SPECIFIC DISABILITIES**

##### Attention Deficit Disorder (ADD) and Attention Deficit Hyperactive Disorder (ADHD)

- Seat the student away from distractions and in close proximity to the teacher
- State classroom rules, post in an obvious location, and enforce consistently
- Use simple, concise instructions with concrete steps
- Provide seating options
- Tolerate (understand the need) excessive movement
- Provide a peer tutor/helper
- Teach compensatory strategies
- Train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects (school nurse)
- Monitor for stress and fatigue; adjust activities
- Adjust assignments to match attention span, etc.
- Provide supervision during transitions, disruptions, field trips
- Model the use of study guides, organizing tools

- Accommodate testing procedures; lengthy tests might be broken down into several shorter administrations
- Provide prompt feedback on both successes and areas needing improvement
- Initiate frequent parent communication
- Establish a school/home behavior management program
- Provide training for staff
- Have the student use an organizer; train in organizational skills
- Establish a nonverbal cue between teacher and student for behavior monitoring
- Assign chores/duties around room/school
- Adapt environment to avoid distractions
- Reinforce appropriate behavior
- Have child work alone or in a study carrel during high stress times
- Highlight required or important information/directions
- Provide a checklist for student, parents, and/or teachers to record assignments of completed tasks
- Use a timer to assist student to focus on given task or number of problems in time allotted; stress that problems need to be correctly done
- Have student restate or write directions/instructions
- Allow student to respond in variety of different modes, i.e., may place answers for tests on tape instead of paper
- Give student opportunity to stand/move while working
- Adapt student's work area to help screen out distracting stimuli
- Grade for content integrity and not just neatness/presentation
- Schedule subjects that require greater concentration early in the day
- Supply small rewards to promote behavior change
- Avoid withholding physical activity as a negative reinforce
- Allow for periodic, frequent physical activity, exercise, etc.
- Determine trigger points and prevent action leading to trigger points
- Provide for socialization opportunities such as circle of friends

## Anxiety

### **Seating**

- Classroom seating; seat away from more rambunctious classmates for less distraction

### **Following Directions**

- Signaling class first when giving directions
- Directions written on board or elsewhere

### **Class Participation**

- Closed-ended questions (requiring yes or no) or opinion questions
- Signal student for their turn
- Pair with "classroom buddy" who can gently guide student in appropriate social encounters with other students and can model good interaction skills

**Class Presentations**

- Present to teacher alone
- Audiotape or videotape presentation at home

**Answering Questions at the Board**

- Exempting student from going to board
- To eliminate risk of being wrong, ask student to write date on board

**Testing Conditions**

- Extend time on tests
- Testing in an alternate, quiet location
- Use of word banks, equation sheets for cueing
- Limit use of timed tests
- Permit tests to be read orally, dictated, scribed, or typed

**Lunchroom/Recess/Unstructured Activities**

- Create ties between small groups of students, i.e., lunch bunch
- Have students choose groupings themselves

**Safe Person**

- One person who understands student's worries and anxieties, i.e., counselor, principal, nurse, teacher

**Cool Down Pass**

- Allowing student to leave situation briefly to get drink of water or wash their face allows them to clear their head and return to class less anxious
- Use orange (or any color) card for student to place on desk/teacher's desk that signals they are out on a break
- Develop de-escalation procedure, i.e., 1) take 10 breaths; 2) identify how a "hero" would handle situation; 3) access designated staff; 4) do alternative, less stressful work; 5) do reading for 5 minutes in alternative area

**Assemblies/Large Group Activities**

- Allow student to sit where most comfortable

**Return After Illness**

- Assign buddy to copy notes and share handouts
- Give student option to take test at another time (if return on day of test)
- Use test time to make up other missing work

**Field Trips**

- Accommodate student's level of readiness so they can participate fully
- Consider having student in "teacher's group"
- Have parents accompany group until student is ready

**Change in Routine/Substitute Teachers**

- Send a note home alerting family in change (if possible)

**Fire/Safety Drills**

- If possible, let student know about alarm sounds

**Classroom Assignments**

- Allow sufficient time to complete assignments

- Minimize competition between students
- Do not force student to participate in social activities
- Do not call on student unless they raise their hand

### **Homework Expectations**

- Teacher sets reasonable amount of time for homework
- Reduce homework to fit into time frame
- Eliminate repetition by having child do every other math question
- Reduce reading and writing assignments
- Consider books on tape
- Consider “scribe” for child while they dictate answers

### **Habits**

- If student engages in nail biting, hair twirling, etc. provide predetermined nonverbal signal
- Interact with child frequently to facilitate attentive behavior and provide positive feedback

### Dysgraphia

#### **Early Writers**

- Use of paper with raised lines for a sensory guide
- Try different pens and pencils to find one that’s most comfortable
- Encourage proper grip, posture, and paper positioning for writing
- Use multi-sensory techniques for learning letters, shapes, and numbers
- Use of a computer; do not eliminate handwriting

#### **Young Students**

- Allow use of print or cursive, whichever is more comfortable
- Use large graph paper for math calculation to keep columns and rows organized
- Allow extra time for writing assignments
- Begin writing assignments creatively with drawing or speaking ideas into tape recorder
- Alternate focus of writing assignments; emphasis on some for neatness and spelling, others for grammar or organization of ideas
- Do not judge timed assignments on neatness or spelling
- Encourage use of spellchecker
- Reduce amount of copying; instead, focus on writing original answers and ideas
- Have student complete tasks in small steps instead of all at once
- Use alternative means of assessing, i.e., oral reports or visual projects

#### **Teenagers**

- Provide tape recorders to supplement note taking and to prepare for writing assignments
- Create a step-by-step plan that breaks writing assignments into smaller tasks

- Use assistive technology such as voice-activated software if the mechanical aspects of writing remain a major hurdle

## Dyslexia

### **Textbooks and Curriculum**

#### **Books/Reading**

- Provide audiotapes/CDs of textbooks and have student follow the text while listening
- Provide summaries of chapters
- Use marker or highlighting tape to highlight important textbook sections
- Assign peer reading buddies
- Use colored transparency or overlay
- Review vocabulary prior to reading
- Provide preview questions
- Use videos/filmstrips related to the readings
- Provide a one-page summary and/or a review of important facts
- Do not require student to read aloud
- Talk through the material one-to-one after reading assignments

#### **Curriculum**

- Shorten assignments to focus on mastery of key concepts
- Shorten spelling tests to focus on mastering the most functional words
- Substitute alternatives for written assignments (posters, oral/taped or video presentations, projects, collages, etc.)

#### **Classroom Environment**

- Provide a computer for written work
- Seat student close to teacher in order to monitor understanding
- Provide quiet during intense learning times

### **Instruction and Assignments**

#### **Directions**

- Give directions in small steps and with as few words as possible
- Break complex direction into small steps—arrange in a vertical list format
- Read written directions to student, then model/demonstrate
- Accompany oral directions with visual clues
- Use both oral and written directions
- Ask student to repeat; check for understanding

#### **Writing**

- Use worksheets that require minimal writing
- Provide a “designated note taker;” photocopy another student’s or teacher’s notes
- Provide a print outline with videotapes and filmstrips
- Allow student to use a keyboard when appropriate

- Allow student to respond orally
- Grade only for content not spelling or handwriting
- Have student focus on a single aspect of a writing assignment (elaboration, voice, etc.)
- Allow student to dictate answer to essay questions
- Reduce copying tasks
- Reduce written work

### **Math**

- Allow student to use a calculator without penalty
- Use visuals and concrete examples
- Use grid paper to help correctly line up math problems
- Present information in small increments and at a slower pace
- Take time to reteach if student is struggling to understand
- Read story problems aloud
- Break problems into smaller steps

### **Grading**

- Provide opportunity to test orally
- Allow student to type responses
- Read test to student
- Evaluate oral performances more than written
- Avoid penalizing for spelling errors, reversals, etc.

### **Testing**

- Go over directions orally
- Permit as much time as needed to complete tests; avoid timed testing
- Read test materials and allow oral responses
- Separate content from mechanics/conventions grade
- Provide typed test materials, not tests written in cursive
- Allow student to respond on tape, with a typewriter, or by dictating answers to a tutor for assessment
- Allow tests to be taken in a room with few distractions

### **Homework**

- Reduce reading assignments; keeping concepts that have been taught
- Accept work dictated by student to a parent/tutor
- Limit amount of time to spend on homework; have parents verify time spent on assignments

## **ASSISTIVE TECHNOLOGY**

### **No Tech**

- Explicit spelling instruction based on analysis of spelling error patterns
- Mad minutes for practice spelling high frequency words

- Practice proof reading for spelling errors
- Mnemonic techniques to retain word spellings
- Provide extra time for writing assignments
- Provide charts that post rules for punctuation, capitalization, spelling

### **Low Tech**

- Word walls or word cards
- Pocket thesaurus
- Pocket dictionaries
- Sentence starters
- Electronic spell check and thesaurus
- Double grade assignments with spelling factored in and out
- Use highlighters or colored pencils to focus on specific conventions, e.g., parts of speech, punctuation, capitalization
- Peer editing or older student mentors

### **High Tech**

- Word prediction software
- Spell checking tools on computers
- Writing software that cues misspellings
- Automatic correction features in word processors
- Talking word processors to cue misspelled words and provide feedback on what was written
- Outline/graphic organizing software
- Document templates that are structured for different writing tasks
- Use online thesaurus features to prompt the use of stronger verbs, adverbs, adjectives
- Abbreviation expanders software: used with word processing, allowing user to create, store, and reuse abbreviations for frequently used words or phrases
- Alternative keyboards: programmable keyboards that have special overlays to customize the appearance and function of standard keyboard
- Graphic organizers and outlining; allows user to dump information in an unstructured manner and later helps in organizing the information into appropriate categories and order
- Paper-based computer pen: records and links audio to what a person writes using a pen and special paper enabling user to take notes while simultaneously recording someone speaking
- Portable word processor/laptop: helpful for students who may have trouble writing by hand and prefer to use a keyboard allowing editing and correcting written work more efficiently than by hand
- Proofreading software programs: assists with spelling, grammar, punctuation, word usage, and sentence structure in writing
- Speech recognition software programs: assistance for user who has struggle with writing

- Speech synthesizer/screen readers: assistance for user who struggles with reading and writing by displaying and reading aloud text on a computer screen, including text that has been typed by the user, scanned in from printed pages
- Talking spellcheckers/electronic dictionaries: assistance for user who struggles with writing and spelling by “reading aloud” and displaying selected words on screen so user can see and hear the words
- Word prediction software programs: assistance for users who struggle with writing by “predicting” a word the user intends to type based on spelling, syntax, and frequent/recent use prompting user to use proper spelling, grammar and word choices with fewer keystrokes



## HEALTH

### Allergies

- Avoid allergy-causing substances: soap, weeds, pollen, food
- In-service necessary persons: dietary people, peers, coaches, laundry service people, etc.
- Allow time for shots/clinic appointments
- Use air purifiers
- Adapt physical education curriculum during high pollen time
- Improve room ventilation, i.e., when remodeling has occurred and materials may cause an allergy
- Develop healthcare and/or emergency plans
- Address pets/animals in the classroom
- Involve school health consultant in school-related health issues
- Train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects (school nurse only)

### Asthma

- Modified activity level for recess/PE
- Use of air purifier
- Avoidance of allergens
- Train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects (school nurse)
- Access to water, gum, etc.
- Curriculum consideration (science/PE, etc.)
- Bus transportation in winter (time of year)
- Healthcare and emergency plan (school nurse)
- Make field trips that might aggravate the condition non-mandatory and supplement with videos, audiotapes, movies, etc.
- Have peers available to carry materials to/from classes, e.g., lunch tray, books
- Provide rest periods
- Make healthcare needs known to appropriate staff
- Provide indoor space for before and after school activities
- Have a locker that is centralized and free of atmosphere changes
- Adapt attendance policies or school day length if needed
- Place student in most easily controlled environment

### Arthritis

- Provide a rest period during the day
- Accommodate for absences for doctors' appointments
- Provide assistive devices for writing, e.g., pencil grips, non-skid surface, computer, etc.
- Adapt physical education curriculum

- Administration medication following medication administration protocols (school nurse only)
- Train student for proper dispensing of medications; monitor and/or distribute dispensing of medications; monitor for side effects (school nurse only)
- Arrange for assistance with carrying books, lunch tray, etc.
- Provide book caddie
- Implement movement plan to avoid stiffness
- Provide seating accommodations
- Allow extra time between classes
- Provide locker assistance
- Provide modified eating utensils
- Develop healthcare plan and emergency plan
- Provide for accommodations for writing tasks; a note take, computer for note taking
- Make available access to wheelchair/ramps and school van for transportation
- Provide more time for massage or exercises
- Adjust recess time
- Provide peer support groups
- Arrange for instructional aide support
- Install handle style door knobs (openers)
- Record lectures/presentations
- Have teachers provide outlines of presentations
- Issue Velcro fasteners for bags
- Obtain padded chairs
- Provide a more comfortable style of desk
- Adjust attendance policy, if needed
- Provide a shorter school day
- Furnish a warmer room and sit student close to the heat
- Adapt curriculum for lab classes
- Supply an extra set of books for home use and keep a set at school
- Let student give reports orally rather than in writing
- Provide an awareness program for staff and students
- Monitor any special dietary considerations
- Involve school health consultants in school health-related issues
- Provide post-secondary or vocational transition planning

### Bipolar Disorder

- Break down assignments into manageable parts with clear and simple directions, given one at a time
- Plan advanced preparation for transitions
- Monitor clarity of understanding and alertness
- Allow most difficult subjects at times when student is most alert
- Provide extra time on tests, class work, and homework, if needed

- Strategies in place for unpredictable mood swings
- Provide appropriate staff with training on bipolar disorder
- Create awareness by staff of potential victimization from other students
- Implement a crisis intervention plan for extreme cases where student gets out of control and may do something impulsive or dangerous
- Provide positive praise and redirection
- Report any suicidal comments to counselor/school psychologist immediate
- Consider home instruction for times when the student's mood disorder makes it impossible for them to attend school for an extended period

### Diabetes

- Allow student to check blood sugar in the classroom and in some cases to treat a minor low in class as well
- Unlimited bathroom privileges; may need to have someone accompany and definitely need a system to be sure that child has returned in a timely manner
- Student may not be denied recess or lunch; lunch should not be delayed without prior notice to parents so appropriate adjustment can be made
- Student's emergency supplies and any supplies they regularly carry need to go any time there is any sort of fire drill or lockdown
- Appropriate food made available if lunch is not available, i.e., forgot lunch, ran out of school lunch, someone else took wrong lunch
- Time to eat lunch needs to be adequate; may require student leave for a few minutes early to test first or that they have a preferential place in lunch line
- Parents should be provided lunch menu with portion sizes and carbohydrate counts in advance; timeframe to be mutually agreed upon
- Whenever possible, school day schedule should be worked so that all students eat snack at the same time as the diabetic student
- Water needs to be immediately available to student at all times
- All tests/exams must be administered when blood glucose is in range, which is determined with parents and care provider; if glucose is out of range, student must be able to take exam at a time as soon as possible when sugars are in range
- Student must be allowed to check blood sugars during a test and if they go out of range, there should be a plan in place
- Timed tests need to take into account any time needed to test and/or deal with blood sugar issues
- Blood sugar level must be checked before student is disciplined
- If misbehavior is noted and blood sugar is out of range, may have plan for adjusting discipline or to contact parent for guidance
- Treatment for low blood sugar with instructions should be kept in every classroom student goes to at any time during school day, including library and special rooms
- All substitutes need to be made aware of diagnosis and have detailed plan of action and care for student, including how to get immediate assistance
- Student's lunch needs to stay with them on field trips

- Delegated person at all school-sponsored activities that occur out of school
- Plan to ensure safety of student with diabetes before and after school, i.e., on the playground before the bell rings and while waiting for the bus or to be picked up
- Notification system for letting parents know when supplies are running low
- Letter sent to classmates regarding the diagnosis and/or snacks

### Epilepsy

- Provide appropriate training to staff on epilepsy
- Train both staff and children on what to do in the event the child has a seizure
- Observe for consistent triggers of seizures
- Should seizures occur, document the characteristics of each seizure
- Seat the child in an area where they will not be injured if a seizure occurs
- Prepare an emergency plan should a seizure occur. For example:
  - Protect the child from injury by clearing space around him
  - Ask other children to keep the area clear
  - Loosen tight clothing and protect the child's head from injury
  - Do not insert an object into the child's mouth
  - If he is unconscious, place the child on their side to keep them from choking on vomit
  - Stay with the child until they fully recover
- Do not allow them to be unsupervised, especially during physical education or field trips
- Give the child time to make up work they missed because of absence due to seizures
- Train appropriate school personnel to properly dispense medication and monitor for side effects, as needed (school nurse)