



MINNESOTA VALLEY EDUCATION DISTRICT STUDENT REFERRAL FOR OUT-OF-DISTRICT SERVICES

The Minnesota Valley Education District (MVED) is proud to be able to offer an array of services and support for its member districts, including direct services for students with disabilities whose unique needs make services in the child's home school difficult. Often, these students are struggling to regulate their behavior and emotions to a point where the learning environment for other students is being compromised. When this occurs, it is often not clear what type of programming may best benefit the student who is struggling. As a result, IEP teams are encouraged to make a referral for additional services, and the MVED Referral Team will review the information and determine which of its two programs would best meet the needs of an individual student:

1. **Minnesota Valley School (MVS)** is a Level 4 program for special education students only in grades K-12. The purpose of MVS is to provide intensive emotional/behavioral support to special education students who have not responded to the most intensive evidence-based interventions and supports available within the level 3 setting in schools. MVS is not designed to meet the needs of learners with serious cognitive delays or profound physical disabilities.
2. **Minnesota River School (MRS)** offers three out-of-district Level 3 programs (Grades K-4, Grades 5-8 and Grades 9-12) for special education students who have: ongoing social problems that include difficulty communicating and interacting with others, repetitive behaviors as well as limited interests or activities, and behavior that hurt the individual's ability to function socially. The purpose of Minnesota River School is to provide students with individualized learning opportunities where they can practice the social interaction, communication skills, and self-regulation skills that are necessary to successfully manage the sensory and environmental stimuli that may impede their ability to attend and participate in instruction. Minnesota River School emphasizes academic understanding as it applies to functional life skills and the application of those skills.

Criteria for Consideration of Out-of-District Services

- Students must have a current Individualized Education Plan (IEP) **including** a Positive Behavior Support Plan (PBSP) **and** a specific goal related to the behavior needs.
- Students must have a current evaluation report (ER), **including** a functional behavioral assessment (FBA).
- Students should have served a minimum of 60% of the school day in a special education setting (level III).
- All possible interventions and resources within the level III have been tried and documented.
- The MVED Coordinator of the program being considered should be made aware of this student and situation and have observed the student in their current setting prior to a referral being made.

Once you have determined the student meets these criteria, please follow the referral process steps.

Referral Process Steps

- Contact MVED Coordinator/MVED Principal regarding any student who there are concerns regarding their ability to be provided appropriate services in their home school setting.
 - These students will be placed on a referral list that the MVED team will review monthly for updates until an official referral is made.
- Hold an IEP meeting with MVED Principal invited
- Write a PWN recommending the out-of-district placement and IEP changes including:
 - Least Restrictive Environment
 - Federal Setting
 - Service Grid
 - Transportation
 - Removing 1:1 paraprofessionals
 - Any other IEP changes determined by the team
 - Note: IEP meeting will be held at MVS/MRS in about a month so staff can get to know student
- Complete and submit to MVED Principal
 - A completed referral
 - Signed PWN
 - Report Card / Transcript (HS only)
- MVED will set up and conduct an intake meeting

TIPS AND BEST PRACTICES FOR TALKING WITH PARENTS ABOUT MVED PLACEMENT

1. Alternative Placements should not be discussed with parents until the MVED Coordinator has been contacted to consult and observe the student.
2. MVED Placements should be discussed only as an option in the continuum of interventions.
3. Referral to any MVED Program should not be used as a threat or a consequence.
4. Once the appropriate program is determined by the referral team and the option is discussed and is a viable option, a tour, meeting, or phone call with the individual program could be arranged if parents are resistant or request more information.
5. Talking points:
 - a. We believe the best place for your child is a more specialized program, and we will continue to try interventions within the school until we have exhausted all evidence-based options.
 - b. An MVED placement is only an option. Staff will implement all other lesser restrictive interventions prior to considering alternative settings.

STUDENT REFERRAL

STUDENT NAME _____

D.O.B. (mm/dd/yyyy): _____ GRADE: _____

PRIMARY -PARENT NAME: _____ PH: _____

ADDRESS: _____ CITY/ZIP: _____

EMAIL _____

SECONDARY -PARENT NAME: _____ PH: _____

ADDRESS: _____ CITY/ZIP: _____

EMAIL _____

SCHOOL DISTRICT: _____

IS THE STUDENT OPEN ENROLLED INTO YOUR DISTRICT: YES _____ NO _____

IF YES, FROM WHICH DISTRICT: _____

CURRENT BEHAVIORAL INFORMATION

Physical restraint use? No Yes - Frequency/Number _____

Seclusions? No Yes - Frequency/Number _____

School suspensions? No Yes - Number of days in current school year _____

MENTAL HEALTH

The following are concerns:

- | | | |
|---|---|---|
| <input type="checkbox"/> Anxiety related problems | <input type="checkbox"/> Intimidating/assaultive behavior | <input type="checkbox"/> Self-injurious behavior |
| <input type="checkbox"/> Attention inattentiveness | <input type="checkbox"/> Medication compliance | <input type="checkbox"/> Sexual inappropriateness |
| <input type="checkbox"/> Avoidance | <input type="checkbox"/> Mood problems | <input type="checkbox"/> Suicidal ideas/attempts |
| <input type="checkbox"/> Difficulty w/ peer relationships | <input type="checkbox"/> Obsessive/compulsive behavior | <input type="checkbox"/> Other: _____ |

The following conditions are medically documented/diagnosed:

- | | | |
|---|--|--|
| <input type="checkbox"/> ADHD | <input type="checkbox"/> Depression | <input type="checkbox"/> Conduct Disorder |
| <input type="checkbox"/> Anxiety Disorder | <input type="checkbox"/> Fetal Alcohol Spectrum Disorder | <input type="checkbox"/> Oppositional Defiant Disorder |
| <input type="checkbox"/> Autism/Asperger's Syndrome | <input type="checkbox"/> Obsessive Compulsive Disorder | <input type="checkbox"/> Attachment Disorder |
| <input type="checkbox"/> Reactive Attachment Disorder | <input type="checkbox"/> Other _____ | |

STUDENT BEHAVIOR HISTORY

Briefly answer the following questions regarding the student's behavior:

1. Describe the behavior concerns of the student.
2. Describe the academic concerns of the student.
3. Describe any attendance concerns of the student.
4. What does the student need to be able to do to return to the general education school?
5. Other information that you feel will be beneficial for the MVS team to know about the student.