SERVICE DELIVERY & LEAST RESTRICTIVE ENVIRONMENT
(34 C.F.R. §§ 300.114-300.117; GEORGIA RULE 160.4-7-.07)

One of the most significant requirements of the Individuals with Disabilities Education Act (IDEA) is that children with disabilities be educated in the least restrictive environment (LRE) to the maximum extent appropriate. Special education and related services are designed to help meet the unique needs of children with disabilities in the LRE.

To effectively meet the standards of instruction, children with disabilities in Georgia must be exposed to and held accountable for the Georgia Standards of Excellence (GSE). Ultimately, the Individualized Education Program (IEP) Team’s goal is for children with disabilities to be educated in regular education settings with supplementary aids and services to the maximum extent possible. Children with disabilities, including those placed by the local educational agency (LEA)\(^1\) in public or private institutions or other care facilities in Georgia, are to be educated with children who are nondisabled to the maximum extent possible.

Education of children with disabilities can be made more effective by:
- teaching the GSE effectively, holding the same challenging expectations that have been established for all children;
- preparing children with disabilities to lead productive and independent adult lives, to the maximum extent possible;
- providing opportunities for parents to participate meaningfully in the education of their children at school and at home;
- providing effective special education and related services;
- providing supplementary aids and services so children with disabilities can learn in regular education settings whenever appropriate; and

\(^1\) Local educational agencies include public boards of education or other public authorities legally constituted within Georgia for either administrative control or direction of, or to perform a service function for public elementary or secondary schools in a city, county, township, school district, or other political subdivision of the State, including state charter schools and Georgia Department of Juvenile Justice (DJJ).
providing regular education teachers with professional learning to ensure that children with disabilities receive appropriate accommodations or modifications and are not removed from regular education settings because accommodations or modifications are not being provided.

When the IEP Team has reviewed the child’s progress (present levels of academic achievement and functional performance); decided on the goals and, in some cases, objectives for the next year; and developed a transition plan when needed; the Team then considers the kinds of supports and services the child will need in order to meet the goals and the setting in which the services will be provided.

The IEP Team always begins by considering how the goals can be met in the regular education setting. The Team should determine the education services, related services, supplementary aids and services, and assistive technology that are necessary for the child to stay in the regular education setting, continue to have access to the GSE, and meet the goals in the IEP. Examples might include use of an assistive technology device, a behavior intervention plan, support from a paraprofessional or sign language interpreter, or changes in the physical environment such as use of positioning devices for a child with an orthopedic impairment. The IEP Team determines the child’s needs, services, supports, and/or accommodations that are required to make progress in regular education settings.

The IEP Team can consider placing the child outside of regular education settings only when the IEP Team has evidence that even with the use of supplemental aids and services, education in regular education settings will not be successful. If the child is placed in a setting other than regular education settings for a portion of the school day, high expectations for achievement on the GSE and a plan for moving back into less restrictive settings should continue to be in place.
**LRE Decision Process**

| Update Present Levels of Academic Achievement and Functional Performance (PLAAFP) |
| Develop IEP goals (and objectives, if needed) using deficits identified in the PLAAFP |
| Determine whether the goal or objective can be taught in a regular education setting |

<table>
<thead>
<tr>
<th>Accommodations and Modifications</th>
<th>Personnel Supports</th>
<th>Settings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Determine the alternative placement or community setting where those goals and objectives that cannot be taught in a regular education setting can be taught</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Determine additional settings or activities that will provide opportunities for interaction with nondisabled peers</td>
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<td></td>
</tr>
<tr>
<td>Review progress monitoring data specific to goals and objectives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service Option</td>
<td>Personnel</td>
<td>Description of Service</td>
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<tr>
<td>Regular Education</td>
<td>Regular Education Teacher, No Special Education Support</td>
<td>Child with a disability is served in the regular education class with no additional personnel support from special education.</td>
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<tr>
<td>Additional Supportive Services</td>
<td>Para, Interpreter, Job Coach, Other Assistive Personnel, or other teacher (not special education)</td>
<td>Child with a disability receives service from personnel other than a certified special education teacher in the regular education classroom. (i.e. para, interpreter, or job coach) *</td>
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<td>Direct Service: Consultative</td>
<td>Regular Education Teacher and Special Education Teacher who provides Direct Service according to the Consultative Delivery Model</td>
<td>Child with a disability receives direct service from the special education teacher in the regular education classroom, the amount of time determined by the IEP team.</td>
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<tr>
<td>Direct Service: Collaborative</td>
<td>Regular Education Teacher and Special Education Teacher who provides Direct Service according to the Collaborative Delivery Model</td>
<td>Child with a disability receives direct service from the special education teacher in the regular education for less than 100% of the segment.</td>
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<tr>
<td>Service Option</td>
<td>Personnel</td>
<td>Description of Service</td>
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<tr>
<td>Direct Service: Co-teaching</td>
<td>Regular Education Teacher and Special Education Teacher who provides Direct Service according to the Co-teaching Delivery Model</td>
<td>Child with a disability receives direct service from the special education teacher in the regular education for 100% of the segment each time this class meets.</td>
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<tr>
<td>Instruction for Individuals or Small Groups Outside the Regular Education Classroom</td>
<td>Special Education Teacher</td>
<td>Child with a disability receives direct service from the special education teacher in a special education classroom.</td>
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<tr>
<td>Separate Day School or Program</td>
<td>Special Education Teacher</td>
<td>Child with a disability receives direct service from the special education teacher in a special education classroom in a separate school or program. An example would be a GNETS Center-based Program.</td>
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<tr>
<td>Home-based Instruction</td>
<td>Special Education Teacher</td>
<td>Child with a disability receives direct service from the special education teacher at the child’s home. Home-based Instruction may be used as a short-term placement option on occasions when the parent and LEA agree at an IEP meeting.</td>
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<tr>
<td>Residential Placement In-State or Out-of-State</td>
<td>Special Education Teacher</td>
<td>Child with a disability receives direct service from the special education teacher in a residential setting as determined by the IEP team.</td>
</tr>
<tr>
<td>Hospital/Homebound Instruction</td>
<td>Special Education Teacher</td>
<td>Child with a disability and a medically diagnosed condition restricting them to hospital or home receives direct service from a special education teacher.</td>
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Frequently Asked Questions

1. What is the Least Restrictive Environment?
   The IDEA requires that children with disabilities, to the maximum extent appropriate, are educated with children who are not disabled. This requirement includes children who are publicly placed in public or private institutions, psychiatric care, group homes, or state-operated hospitals in Georgia. Only when the nature or severity of the disability is such that education in regular education settings with supplementary aids and services cannot be satisfactorily achieved can children with disabilities be moved to other settings such as special classes or separate schooling. Regardless of where services are being provided, children with disabilities are expected to continue to have access to the GSE for their grade level, and teachers are expected to maintain high expectations for student performance in meeting the standards.

2. Who decides what placement is the least restrictive environment for a child with a disability?
   The IEP Team determines the least restrictive environment, which includes the services and supports needed for each eligible child with a disability. The IEP Team makes the placement decision in accordance with the IDEA and Georgia Department of Education (GaDOE) Special Education Rules. The child’s placement must be based on the IEP and be reconsidered at least annually by the IEP Team. The child attends the same school that he or she would attend if nondisabled unless the IEP indicates that some other arrangement is necessary. The IEP Team must consider any potential harmful effects on the child or on the quality of services needed when selecting the least restrictive environment for each individual child with a disability. LEAs are to ensure that a full continuum of alternative placements is available to meet the special education and related service needs of children with disabilities.

   The IEP Team may not make placement decisions based only on the category of the child’s disability, the severity of the disability, the placement options currently available, the availability of educational or related services, space availability, or administrative convenience. The law is also clear that children with disabilities have a right to an equal opportunity to participate in nonacademic and extracurricular services and activities. See 34 C.F.R. §§ 300.107, 300.117; Georgia Rule 160-4-7-.07(4). LEAs must provide these activities in such a way that children with disabilities have an opportunity to participate in general school activities such as lunch, counseling services, athletics, transportation, health services, recreation activities, clubs, or employment opportunities.
3. **What types of support must be considered by the IEP Team for a child with a disability to stay in the regular classroom?**

   The IEP Team, which includes the parent and the LEA personnel, must carefully consider accommodations, modifications, personnel supports, and possible changes to the physical environment that will enable the child with a disability to be educated in regular education settings.

4. **In a co-taught classroom, who is responsible for providing special education services?**

   In a co-taught classroom, the special education teacher is responsible for providing special education services and should be listed as the service provider on the IEP. In addition, the regular education and special education teachers provide instruction for the whole segment(s) to all children in the classroom.

5. **What are accommodations?**

   Accommodations are changes in how instruction is provided, how the child is expected to respond, how the child participates in classroom activities, and in the kinds of instructional materials and how they are used. For example, a child might listen to portions by using text-to-speech rather than reading it, answer questions orally or use a computer keyboard instead of writing with a pencil, use large print text books, watch video with captions, participate in a discussion in a biology class with a sign language interpreter, or have a peer take notes so a copy of the notes can be easily shared. Accommodations provide children with disabilities a variety of ways to access the Georgia Standards of Excellence (GSE) so that their disabilities are not barriers to achievement. Children receiving accommodations are still expected to meet the same grade level GSE as their peers without disabilities. Accommodations provide access to the standards and support students in their least restrictive environment.

   Accommodations must be appropriate and specific to the child’s needs. Too many accommodations or unnecessary accommodations can hinder achievement or lower expectations. On the other hand, a lack of needed accommodations in the classroom can prevent a child from meeting the standards that may have been possible with the right accommodations implemented well. Accommodations offer the opportunity for success but they cannot guarantee that the child will be successful.

6. **What are program modifications?**

   Program modifications are alterations that change, lower, or reduce learning expectations. Modifications can increase the gap between the achievement of children with disabilities and the expectations for proficiency at a particular grade level.
Consistent use of certain modifications could adversely affect children throughout their educational career.

7. **What is an assistive technology device?**

The term “assistive technology device” means any item, piece of equipment, or product system, whether acquired commercially, off the shelf, modified, or customized, that is used to increase, maintain, or improve functional capabilities of a child with a disability. 34 C.F.R. § 300.5.

Many people think of technology as equipment such as a wheelchair or an expensive computer-based communication device. In fact, most assistive technology devices are simple and inexpensive. The definition of an assistive technology device is very broad in the IDEA. The definition of assistive technology services is also general. IEP Teams must consider each child’s need for assistive technology in the development, review, and revision of the child’s IEP. When the Team determines that assistive technology is required, the assistive technology devices and services should be clearly specified in the child’s IEP and provided in a timely manner. The child, school staff, and child’s family, if appropriate, should receive training in the use of the device.

The term “assistive technology service” means any service that directly assists a child with a disability in the selection, acquisition, or use of an assistive technology device. This may include:

a) the evaluation of the needs of such child, including a functional evaluation of the child in the child’s customary environment;
b) purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices for such child;
c) selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing of assistive technology devices;
d) coordinating and using other therapies, interventions, or services with assistive technology devices such as those associated with existing education and rehabilitation plans and programs;
e) training or technical assistance for such child, or, where appropriate, the family of such child; and
f) training or technical assistance for professionals (including individuals providing education and rehabilitation services), employers, or other individuals who provide services to, employ, or are otherwise substantially involved in the major life functions of that child. 34 C.F.R. § 300.6.
8. **What is the continuum of alternative placements?**
   The continuum of alternative placements includes options that must be available such as instruction in regular classes, special classes (small group), special schools, home instruction, and instruction in hospitals and institutions. Supplementary services and supports can be provided in any setting to children whose IEP requires such supports. For instance, children may receive small group in conjunction with regular class placement for the same subject area.

9. **What are the placement options for school-aged students with disabilities?**
   A continuum of placements will be considered by the IEP Team for school-aged students with disabilities:
   - Support in regular education settings with age appropriate non-disabled peers
     - Additional supportive services
       - Supportive Instruction
         examples: paraprofessional and job coach
     - Direct special education services
       - Consultative services
       - Collaborative services
       - Co-teaching services
   - Other placement options, including
     - Special education small group classes
     - Special schools
     - Private schools
     - Home-based instruction
     - Hospital/homebound
     - Residential services

10. **What are the placement options for preschool age children with disabilities?**
    The same placement options for school-aged students extends to preschool children with disabilities. The IEP Team should consider the full continuum of options when making the
placement decision for a preschool child with a disability. Some specific preschool options may include:

1. participation in regular education early childhood programs in the public school or in the community, Head Start, Bright from the Start Pre-Kindergarten, public or private child care/day care, and preschool programs;

2. placement in a separate special education program housed in the public school or in a community-based setting; and/or

3. services in the home as the natural environment for a young child.

11. Does the full continuum of placements apply to all areas of disabilities?
   Yes. The full continuum of placements applies to all areas of disabilities.

12. How is the need for hospital/homebound (HHB) instruction determined?
   Hospital/homebound instruction may be used for students who have a medically diagnosed condition that will significantly interfere with their education and requires them to be restricted to home or a hospital for a period of time. The LEA provides hospital/homebound instruction only when the LEA has received a completed medical referral form signed by a physician. The form must state that it is anticipated that the child is unable to participate in instruction and will be absent for at least ten consecutive school days or has a chronic health condition that will cause absences over an intermittent time period. When that situation occurs, the IEP Team meets to review the IEP, consider the medical referral, and make necessary changes to the IEP as appropriate.

   Once the LEA determines the child meets the eligibility requirements for HHB instruction, the request will be forwarded to the IEP Team to assistant in the development of an Educational Service Plan (ESP) to deliver the appropriate HHB instruction. When the IEP Team considers hospital/homebound instruction, it is important to note that the final determination of services, the setting, and delivery method rests with the IEP Team. The medical referral provides a medical opinion on the child’s treatment. The medical opinion must be considered by the IEP Team as part of determining the services and setting(s) for the child. If a child with a disability is hospitalized outside of his or her LEA, the responsibility for the child’s hospital/homebound instruction remains with the LEA in which the child attends. The LEA where the child attends may contract with the hospital to provide instructional services, contract with the LEA where the hospital is located, or contract directly with appropriately certified teachers in that geographic area.
Special Education Rules Implementation Manual

Many times, it is very helpful to the team to have the practitioner who provided the hospital/homebound referral participate via a conference call in the IEP Team meeting. See the HHB Instruction State Board Rule 160-4-2.31 for additional information.

13. What is home-based instruction?
Home-based instruction is a short-term placement option used when the parent and LEA agree at an IEP Team meeting. When deciding on home-based instruction as a placement option, the IEP Team should write an appropriate reinstatement plan to incorporate the child back into the school setting. During the time the child is being served in the home-based setting, provision to a FAPE including access to the general education curriculum, as well as IEP services, must be provided.

14. How are home-based instruction different from hospital/homebound instruction?
The basis for hospital/homebound instruction is a medical condition that significantly interfere with the child’s education and requires them to be restricted to their home or a hospital for a period of time. Home-based instruction are provided for reasons other than medical concerns, and the IEP Team determines that the home is the most appropriate setting. Both are viewed as temporary placements with the expectation that the child will be transitioned back into the school setting as quickly as possible and with a reintegration plan that specifies the support necessary to enable the child’s reintegration back into the school-based setting.

15. How does LRE apply in nonacademic settings?
The LRE requirements also apply to nonacademic and extracurricular services and activities such as meals, recess periods, sports participation, participation in clubs, and field trips. Children with disabilities are to participate with their nondisabled peers in these kinds of activities to the maximum extent appropriate based on the child’s needs. The IEP Team decides what supplementary aids and services are appropriate and necessary for the child to participate in these activities.

16. What administrative issues impact the provision of LRE?
In the Georgia Rules, information is provided for LEAs on certain requirements for recruiting, hiring, training, and retaining an adequate supply of appropriately prepared and trained (certified or licensed) speech/language pathologists, special education teachers, related service providers, occupational and physical therapists, and educational interpreters. The State rules also specify the requirements for appropriate classroom space and list the maximum class sizes for preschool and school-aged students with disabilities. See Georgia Rule 160-4-7-.14. LEAs may have flexibility options for class size; however, a FAPE must be provided.