160-4-2-.32 STUDENT SUPPORT TEAM.

(1) DEFINITIONS.

(a) **Data-based decision making** – a process that consists of using data to identify needs of all students, selecting and implementing evidence-based practices and interventions, monitoring the progress of students’ responsiveness to an intervention and making adjustments based on progress monitoring data.

(b) **Dyslexia** – a specific learning disability that is neurobiological in origin. It is characterized by difficulties with accurate and fluent word recognition and by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede growth of vocabulary and background knowledge.

(c) **Multi-Tiered System of Supports** – a data-driven framework that includes evidence-based interventions aligned to identified student needs. Components of the framework include screening and progress monitoring to identify, predict, and monitor progress toward learning goals of students.

(d) **Other Disorders** – apraxia, dyscalculia, and dysgraphia.

(e) **Parent** – parent, legal agent, legal guardian, or kinship caregiver.

(f) **Student Support Team (SST)** – an interdisciplinary group that uses a systematic process to address learning and/or behavior problems of students, K-12, in a school.

(2) REQUIREMENTS.

(a) Each school shall establish general screening processes that inform an effective tiered system of supports to identify children for referral, have a minimum of one SST and shall establish support team procedures.

(b) Each school shall have a documented Data-based decision-making process, e.g., Multi-Tiered System of Supports, for the team. Before a referral is made for other supplemental or support services an evaluation and/or assessment shall be conducted.

(c) To refer a student to the SST, an educator or Parent must express concern for a student in one or more areas (e.g., behavior, engagement, health, academics, or
supports for learning). Prior evaluation(s) and/or assessment(s) of a student for a state or federal program shall be considered as having met this requirement.

(de) The SST shall include at a minimum the referring student’s teacher and at principal or designee along with any least two of the following participants, as appropriate to the needs of the student. Parents shall be invited to participate in all meetings of the student’s SST and in the development of interventions. The team should be reflective of a knowledge base necessary for analyzing the needs of the student and include the following positions:

1. Principal.


23. Counselor.

34. Lead teacher.

45. School psychologist.

56. Subject area specialist.

67. English Speakers of Other Languages teacher.

78. Special education teacher and/or related services providers.

8. Speech and Language Pathologist.


10. Central office personnel.

11. Section 504 coordinator, or.

12. 160-4-2-32 (Continued)

Other appropriate personnel.

(ed) Upon educator or Parent referral, the SST convenes to conduct a meeting that includes Data-based decision-making and next steps. Parents/guardians shall be invited to participate in all meetings of their child’s SST and in the development of interventions for their child.

1. The SST will inform and implement a plan that provides supports based on the student’s specific needs.
2. School personnel or Parents may determine that there is a reasonable cause to bypass the SST process for an individual student. Documentation in the student’s record shall clearly justify such action, including whether the Parent agreed with such a decision. In cases where immediate referral to Special Education is sought, the SST may still determine what interim strategies, interventions, and modifications shall be attempted for the student during the evaluation period.

3. It is not necessary for students who transfer into the local educational agency or state operated program with a current Individualized Education Program or Section 504 plan to go through the SST process.

(fe) Each school shall include the following steps leading to in the SST process:

1. Identify need. Collect and/or conduct assessments, including screeners, following the protocol for administering the instrument. Parents may have to consent depending on the purpose of the assessment and screening; identification of learning and/or behavior problems.

2. Select evidence-based interventions Assessment, if necessary.

3. Plan Educational plan.

4. Implementation.

5. Examine progress; and

6. Follow-up and support.

6(g) Documentation of SST activities shall include the following:

1. Student’s name.

2. Names of team members.

3. Meeting dates.

4. Identification of student learning and/or behavior problems.

5. Any records of assessment.

6. Educational plan and implementation results.

7. Follow-up and, as appropriate, continuous evaluation.
(3) EXCEPTIONS TO THE USE OF THE SST PROCESS.

(a) School personnel and parents/guardians may determine that there is a reasonable cause to bypass the SST process for an individual student. Documentation in the student’s record shall clearly justify such action, including whether the parent or guardian agreed with such a decision. In cases where immediate referral is sought, the SST shall still determine what interim strategies, interventions, and modifications shall be attempted for the student.

(b) It is not necessary for students who transfer into the local school system/state operated program with a current Individualized Education Program or Section 504 plan to go through the SST process.

(3) DYSLEXIA.

(a) Beginning in the 2024-2025 school year, local educational agencies shall screen all students in kindergarten through grade 3 for characteristics of Dyslexia and may screen students for other needs. At a minimum, local educational agencies shall annually screen all students in kindergarten through grade 3. The screening instrument(s) must be standardized and have validity and reliability.

1. Parental consent is not necessary for administering an assessment that is administered to all students.

2. Parental consent must be obtained prior to individualized assessments and/or additional screenings for suspected risk for Dyslexia. The request for consent must be provided in the native language of the Parent. Parental consent documentation shall remain on file as a part of the student’s education record. As part of this process, local educational agencies will provide Parents with resources, information, and materials regarding Dyslexia (e.g., Georgia Dyslexia Informational Handbook and the International Dyslexia Association (IDA) Dyslexia Handbook).

(b) When requested by a teacher or Parent, the local educational agency will conduct a Dyslexia-specific screening of any student at any grade level within 30 days.

(c) This rule does not require that students who participate in Dyslexia screening must be under the Student Support Team.

(d) The components of a universal Dyslexia screener to address reading difficulties must include, but are not limited to:
1. Phonological and phonemic awareness;
2. Sound symbol recognition;
3. Alphabet knowledge;
4. Decoding skills;
5. Rapid naming or reading fluency for students with some reading ability; and
6. Encoding skills.

(e) If the screening data and additional information support that the student exhibits reading difficulties consistent with characteristics of Dyslexia or Other Disorders, the local educational agency will begin or continue academic intervention and progress monitor to determine growth trajectory toward the student’s learning goal for 6 weeks. If the student does not demonstrate progress or expected growth during the required time frame, the student will be referred to the SST for further educational evaluation. In the interim, adjust the frequency, dosage, and strength of the intervention and continue to progress monitor.

(f) If the screening data support that the student exhibits characteristics of Dyslexia or Other Disorders, the local educational agency will begin or continue academic intervention in a small group or individual setting. The local educational agency will provide an individualized plan for academic interventions and monitor progress more frequently to determine the student’s growth trajectory toward his/her learning goal.

(g) If there is a risk for the characteristics of Dyslexia or Other Disorders and the student is not making appropriate progress, then the student may be suspected of having a disability and the local educational agency will provide the student with evidence-based interventions and monitor monthly or more often, as needed. In this instance, the local educational agency will follow the requirements as outlined in 160-4-7-.03 (Child Find Procedures) or Section 504.

Authority O.C.G.A. §§ 20-2-152; 20-2-159.6; 20-2-240.

Adopted: September 14, 2000 Effective: October 5, 2000