

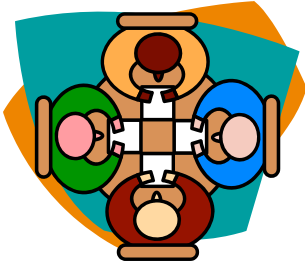
## E-IMPACT Process for Students Currently Served by Special Education

### e-IMPACT Checklist

1.  Concerned individual (e.g., special education case manager, teacher, counselor, administrator, parent) refers the student. The case manager and/or teacher complete the referral / tier 1 information on E- IMPACT via AIMS. ***Should a parent request special education testing, please explain the RTI process and have them sign the Notice of Decision.***
2.  Special education case manager or teacher prints referral, prints AIMS data from data link on e-IMPACT, and submits it to the principal or IMPACT designee.
3.  Principal or IMPACT designee ensures the following items are completed ***prior*** to the IMPACT meeting:
  - Vision and Hearing passed within one year of IMPACT meeting date
  - LEP testing completed within 6 months of IMPACT meeting date
  - Specific*** strengths and concerns identified in one or more of the following areas: Speech, Language Arts, Math, Behavior/Social, Attendance, Physical/Medical, and/or Other
  - Specific ***strategies*** and classroom interventions listed and ***aligned with the area of concern***
  - Frequency, duration and instructional grouping of strategies/interventions listed
  - Strategies/interventions implemented for a period of 6-9 weeks
  - Data from AIMS link attached to referral
  - Parent contact information recorded on referral
4.  IMPACT team schedules the IMPACT meeting for the new concern.  
Date: \_\_\_\_\_

### IMPACT Meeting for New Concern

1.  Conduct the IMPACT meeting for the new concern using the following steps:
  - Teacher shares IMPACT Student Referral form, including strengths, concerns and
  - IMPACT team members ask questions regarding the referral to obtain additional information.
  - Team considers other pertinent information including health, social, and educational history.
  - Team consults resources and identifies strategies by which to attain goals.
  - Team develops the ***Action Plan***, including the following:
    - ***Specific, measurable and reasonable goals*** related to the area of concern
    - ***Specific*** intervention ***strategies*** to meet goals
    - Person(s) responsible for intervention
    - Frequency and duration of intervention (e.g., M-F; 30 minutes)
    - Instructional grouping (e.g., 1:3; 1:4)
  - Teacher and/or interventionist implement action plan for a period of 6-9 weeks and record weekly progress on *Progress Monitoring* form.
  - If parents are not in attendance, the team provides feedback to them regarding summary/conclusion of IMPACT meeting for new concern.
2.  Schedule the IMPACT Progress Review Meeting. Date: \_\_\_\_\_



## IMPACT Process for Students Currently Served by Special Education

### IMPACT Progress Review Meeting – IMPACT team/ARD Committee review progress

1.  Conduct the Progress Review meeting using the following steps: **(MEETING MAY NOT BE CONDUCTED WITHOUT WEEKLY PROGRESS MONITORING FORMS.)**
  - Teacher and/or interventionist review *Action Plan* including student progress on each goal and record progress/mastery in e-IMPACT
  - IMPACT team decides to do one or more of the following:
    - Discontinue the action plan due to the student's adequate progress, but continue to monitor the progress of the student
    - Continue the action plan and monitor student progress for an additional 6-9 weeks
    - Modify the action plan by adding, deleting or changing goals and strategies
    - Consult with a specialist (e.g., AISD curriculum specialist, behavioral specialist, speech and language pathologist) and modify the action plan based on the specialist's recommendations
    - Consider testing for dyslexia/dysgraphia
    - Consider completing the ADHD IV Rating Scale (**If behavior is a concern, a behavior specialist observation and consultation is required.**)
    - Consider 504 services
    - Consider requesting a special education evaluation. **Note:** *Ensure that vision and hearing screening has been completed within the last year & LEP testing within 6 months.*
2.  If the parents are not in attendance, provide feedback to them regarding the IMPACT committee decision.
3.  If the decision is made to request additional special education testing, schedule an ARD committee meeting. Date: \_\_\_\_\_ **Note:** Be sure to invite the SLP/SEES to the ARD committee meeting.