

INTRODUCTION

OVERVIEW

The New Jersey State Board of Education has established that the primary mission of schools is to enhance student achievement of high academic standards in safe and disciplined learning environments. The effectiveness of public education in fulfilling this mission depends largely upon the capacity of school systems to respond to the diverse educational needs of students. Constantly evolving social conditions and the changing educational needs that tend to emerge with these changes can pose dramatic barriers to student achievement.

The educational mission is made more complex by the increased incidence, prevalence and intensity of problems students bring to schools. These problems include high risk behaviors, such as alcohol, tobacco and other drug abuse, violence, vandalism, child abuse and neglect, early sexual involvement, youth pregnancies and parenting, suicide attempts and suicides, eating disorders, low self-regard, poor socialization skills, lack of readiness for school, as well as chronic medical conditions and physical disabilities.

The types of at-risk behaviors students manifest while in school include not concentrating or focusing on learning, not completing assignments, not achieving to demonstrated skill level or tested potential, declining or failing grades, cheating, absenteeism, tardiness, falling asleep, inability to stay in seat or work within structure, decreased participation, self-defeating responses to peer pressure, deteriorating personal appearance and hygiene, erratic behavior, loss of affect, acting out, fighting, defying authority, violating rules and dropping out of school. These and other problems place students at risk for school failure and other problems, leaving parents and teachers frustrated and in need of assistance.

In response to these circumstances and the attendant needs of students, the New Jersey Department of Education continues to provide leadership to schools for educational improvement and whole-school reform. One such effort to be addressed in this manual is the school's program of intervention and referral services (I&RS).

ADMINISTRATIVE CODE

In April 2001, the State Board of Education adopted new rules to provide district boards of education with standards for the delivery of intervention and referral services (N.J.A.C. 6A:16-7, Intervention and Referral Services*). (A copy of N.J.A.C. 6A:16-7 is provided in Appendix A.) The requirements set forth in the regulations are intended to provide schools with direction in formulating coordinated services and team delivery systems to address the full range of student learning, behavior and health problems in the general education program, such as those identified in the Overview section above. Under the new regulations, however, schools *may* also provide intervention and referral services for students who have been determined to be in need of special education programs and services.

***Establishment and Purposes of
Intervention and Referral Services***

Pursuant to these regulations, district boards of education are required to:

"... establish and implement a coordinated system in each school building for the planning and delivery of intervention and referral services that are designed to assist students who are experiencing learning, behavior, or health difficulties..."
[N.J.A.C. 6A:16-7.1(a)]; and which are designed to:

"...assist staff who have difficulties in addressing students' learning, behavior, or health needs." [N.J.A.C. 6A:16-7.1(a)]

The regulations make it clear that I&RS activities should be focused on concerns with students, and that the end result of I&RS activities should be student improvement. It is equally important to note, however, that, an I&RS program must consist of a formal, coordinated and well-articulated system of supportive activities and services for staff who have identified student difficulties and those who will be involved in the amelioration of the identified educational concerns.

*These rules *replaced* the preceding regulations that required schools to provide a program of Intervention and Referral Service for General Education Pupils, which *replaced* the regulations that required the establishment of Pupil Assistance Committees (PACs) in all public school buildings.

Administrative Code, continued

Under the code, the typical means for facilitating student progress is through the provision of *direct assistance and support to all staff* who have roles to play in helping children move forward in their educational careers.

Multidisciplinary Team

In configuring building programs of I&RS, district boards of education are required to:

"...choose the appropriate multidisciplinary team approach for planning and delivering the services..." [N.J.A.C. 6A:16-7.1(a)]

A multidisciplinary team is at the core of a well-coordinated system of I&RS services. Bringing together representatives from all professional constituencies in a school to support staff in helping students grow is essential for effective problem solving.

Student Populations

The regulations set forth that the intervention and referral services *shall* be provided to:

"... aid students in the general education program;"
(N.J.A.C. 6A:16-7.1(a)1)

The regulations for intervention and referral services, however, also *permit* the provision of services, as appropriate, for:

"... students who have been determined to be in need of special education programs and services."
(N.J.A.C. 6A:16-7.1(a)2)

For I&RS services provided to students with learning disabilities, the regulations articulate the following condition:

"The intervention and referral services provided for students with learning disabilities shall be coordinated with the student's Individualized Education Program team, as appropriate." (N.J.A.C. 6A:16-7.1(a)2i)

The regulations permit the provision of services to students with learning disabilities, for example, because school staff sometimes can benefit from

Administrative Code, continued

assistance in managing the special circumstances that can result from the inclusion of students with learning disabilities in the general education classroom. Since one of the primary purposes of the I&RS program is to assist staff who have difficulties in addressing students' learning, behavior or health needs [N.J.A.C. 6A:16-7.1(a)], the IRS team, for example, could help a teacher who requests assistance of the team in developing strategies, obtaining materials or expanding skills in managing a classroom that includes both general education students and students determined to have learning disabilities, or the team could help the teacher with strategies, materials or skills for better addressing the individual academic, behavior or health needs of students in their classes who have learning disabilities.

Child study teams primarily provide services to students. I&RS teams primarily provide services to staff for the benefit of students.

For years, drug and alcohol core teams in the general education program have intervened with students who are high risk for substance abuse. A portion of the student caseload for core teams has included students with diagnosed learning disabilities. Under the I&RS regulations, it is possible for I&RS teams that choose to fulfill the functions of drug and alcohol core teams or the functions of other problem-solving teams to work with both general education and special education student cases.

The code, however, imposes a condition on I&RS team work with special education cases: ***When at any point an action by the I&RS team could or will affect students' Individualized Education Programs (IEP), the team is required to coordinate with students' IEP teams.***

***Functions of Intervention
and Referral Services Teams***

Per the provisions of N.J.A.C. 6A:16-7.2(a), the required functions of the coordinated system of intervention and referral services in each school building are as follows:

1. *Identify learning, behavior and health difficulties of students;*
2. *Collect thorough information on the identified learning, behavior and health difficulties;*

Administrative Code, continued

3. *Develop and implement action plans which provide for appropriate school or community interventions or referrals to school and community resources, based on the collected data and desired outcomes for the identified learning, behavior and health difficulties;*
4. *Provide support, guidance, and professional development to school staff who identify learning, behavior and health difficulties;*
5. *Provide support, guidance, and professional development to school staff who participate in each building's system for planning and providing intervention and referral services;*
6. *Actively involve parents or guardians in the development and implementation of intervention and referral services action plans;*
7. *Coordinate the access to and delivery of school resources and services for achieving the outcomes identified in the intervention and referral services action plans;*
8. *Coordinate the services of community-based social and health provider agencies and other community resources for achieving the outcomes identified in the intervention and referral services action plans;*
9. *Maintain records of all requests for assistance and all intervention and referral services action plans, according to the requirements of 34 CFR Part 98, 34 CFR Part 99, 42 CFR Part II, N.J.S.A. 18A:40A-7.1, N.J.A.C. 6A:16-3.2, and N.J.A.C 6:3-2.1;*
10. *Review and assess the effectiveness of the provisions of each intervention and referral services action plan in achieving the outcomes identified in each action plan and modify each action plan to achieve the outcomes, as appropriate; and*
11. *At a minimum, annually review the intervention and referral services action plans and the actions taken as a result of the building's system of intervention and referral services and make recommendations to the principal for improving school programs and services, as appropriate."*

Administrative Code, continued**School Staff and Community
Member Roles**

Under N.J.A.C. 6A:16-7.3, district boards of education are required to establish guidelines for the involvement of school staff and community members in each building's system of intervention and referral services. At a minimum, the following information should be identified:

"the roles and responsibilities of the building staff who participate in each building's system for planning and providing intervention and referral services;"

"... the roles and responsibilities of staff members who identify learning, behavior or health difficulties;"

"... the roles and responsibilities of other district staff for aiding in the development and implementation of intervention and referral services action plans; and"

"... the roles, responsibilities and parameters for the participation of community members for aiding in the development and implementation of intervention and referral services action plans."

The school must establish and convey clear parameters for the involvement of school staff who ask for help from the I&RS team and for both school staff and community resources who plan and implement I&RS services. Defining the roles and responsibilities of participants is essential for effective I&RS team operations.

The I&RS rules were specifically designed to provide a foundation for the establishment and delivery of I&RS services, while providing schools with *flexibility* in adapting the mandated program to individual district and building needs. The regulations provide direction to school districts regarding the structure and functions of I&RS services and the roles and responsibilities of those involved with the I&RS program, as well as the *value* of school-based intervention and referral services. Schools, however, may determine the best multidisciplinary team structure and coordinated delivery system for operationalizing the services, given the programs, needs, resources and characteristics of their buildings and surrounding communities, their staffing patterns and related policies and procedures.

WHOLE-SCHOOL REFORM

The school's I&RS program, like any school-level improvement initiative, should be integrated into the school's overall program and supported by research-based educational practices and planning principles, including the following:

Strategic Planning Process

The I&RS regulations require I&RS teams to conduct on an annual basis, at a minimum, a systematic review of I&RS action plans and actions taken data as a result of the building's system of I&RS, and to make recommendations to the principal for improving school programs and services, as appropriate (N.J.A.C. 6A:16-7.2(a)11). This review provides schools with the opportunity to identify patterns of academic, behavior and health concerns in the school and develop proactive responses. The information obtained from the review can support a school-wide needs assessment process and help make recommendations for educational improvements in areas such as staff development, curriculum, policies, procedures, school-wide programs or designated programs. In addition, I&RS team operations are guided by action plans for program planning and organization that are *regularly* developed by team members to maintain and improve the program and the quality of services provided to staff, as well as to students at-risk for school failure and their families.

Professional Development Opportunities

All school staff should be afforded regular professional development opportunities that support student achievement of high academic standards. Consistent with this principle, schools are required to provide support, guidance, and professional development *both* to I&RS team members and to school staff who request services of the I&RS team (N.J.A.C. 6A:16-7.2(a)4 and 6A:16-7.2(a)5). Some key areas of professional development for I&RS team success include best practices for effective collaboration, problem solving, innovative and effective instructional practices, behavior management, relevant health issues and elements of I&RS program development, implementation and maintenance.

Whole School Reform, continued**Integration of Access
to Health and Social
Services**

Access to health and social services should be woven into the fabric of the school. A primary reason for the adoption of collaborative problem-solving teams, such as the I&RS team, is to bring together, as needed, all of the school and community resources that are necessary for responding to requests for assistance for addressing educational problems (N.J.A.C. 6A:16-7.2(a)7 and 6A:16-7.2(a)8). Consistent with this principle, the I&RS team serves a pivotal role in coordinating all appropriate school, home and community resources for supporting school staff and community agency personnel, as appropriate, in the resolution or management of student learning, behavior and health concerns.