



The 504 Bulletin

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Thank You!



Your assistance in providing your current 504 plans to this office by the October 17 deadline is greatly appreciated. We know that this is a very busy time of the school year and recognize that this imposed one more

burden on your already heavy workload. However, this effort will enable our office to provide more meaningful and accurate data, information and training to 504 coordinators, administrators and others who are involved with the program at the district and building levels.

As we transition to the new online submission of 504 plans and the online availability of other 504 information, we hope to continue to make the system more "user friendly" and available to everyone interested in program information. Keep up the good work and call with any questions.

Burl Oliver, Compliance Coordinator 742-4293



Web Resources for 504 Plans

The onset of the 2008-09 school year has brought an increasing number of requests for information and ideas concerning the 504 program. In addition to training being provided on an ongoing basis within ASD, the following resources are offered as examples of "where to go" for additional information and input for individual 504 plans and the development of appropriate accommodations for students. While this list identifies only a small segment of the resources available, it summarizes a variety of websites, etc. that can assist in the approach to the development of a meaningful 504 plan.

If you also have resources you have used that would benefit other coordinators and staff, please feel free to share those with us and we will include them in future editions of the Bulletin.

1. Idaamerica.us/aboutId/teachers/index.asp
Learning Disabilities Association
1. add.org
Attention Deficit Disorder Association
3. Chadd.org
Children and Adults with Attention Deficit/Hyperactivity Disorder
4. nimh.nih.gov/health/topics/child-and-adolescent
National Institute of Mental Health
5. nmha.org/go/get-info
Mental Health America
6. Ed.gov/parents/needs/speced/edpicks
ED.gov
7. nichy.org/Pages/Home.aspx
National Dissemination Center for Children with Disabilities

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Parent's Rights

A new, more comprehensive "A Parent's Guide to Section 504 (Parent's Rights)" has been finalized and is now available online. Additionally, administrators and 504 coordinators have been provided a copy of the new document for insertion in their 504 Administrative Guidelines books. The new document replaces the "A Parent's Guide to Section 504" (Parent's Rights) document included with the initial printing of the book.

Training

So far this school year training has been provided for administrators, school staff, teachers, counselors, related services personnel, parents and various councils and boards on the topic of 504. An increased level of awareness has proved valuable in making the program and its benefits known and has resulted in numerous inquiries.

If you would like to have a training session on Section 504 for staff at your school please call either Burl Oliver, AD 504 Coordinator at 742-4293 or Nancy Bertino, Administrative Assistant at 742-4272. Let us know that date, time and location you would like to have the training, the number of people to attend and particular issues you would like to have discussed and we'll do the rest.



Building-level Section 504 Coordinators

OK, you've been appointed the 504 coordinator for your school. Congratulations! Now what? The following list of possible duties is not all inclusive, but provides an idea of what might be expected of you in this role.

1. Serve as the building principal's designee at all 504 meetings.
2. Serve as the primary 504 resource for staff and parents.
3. Coordinate and attend all initial 504 evaluations.
4. Ensure completion of annual reviews for all 504's.
5. Complete a NOPA and provide copies to team members as needed.
6. Distribute 504 plan copies as needed.
7. Ensure data is input into student management system.
8. Maintain copies of all 504 plans and supporting documentation.
9. Monitor suspensions and expulsions of 504 students.
10. Monitor testing accommodations for 504 students.
11. Work with staff to ensure plan implementation.
12. Ensure testing accommodations for 504 students are approved.
13. Work with staff to ensure needed evaluations are completed.
14. Provide building-level 504 training for staff.



§504 Questions and Answers

1. My daughter has diabetes. In spite of this, she has maintained a 4.0 GPA and is continuing to progress through a rigorous academic curriculum. She also plays hockey and is active in student government. However, her diabetes is a concern and she has occasionally missed school due to her condition. She's had a 504 plan due to her disability for several years and continues to need the accommodations provided in the areas of additional time for standardized testing in order to compete for entry into a "good" college next year. Now, the school has questioned whether she is entitled to the 504 accommodations/plan. What's the deal?
2. A student, on a 504 plan for ADHD, has been suspended several times during the past year for various actions within the school environment, including threatening other students. The student's parents question the authority of the school to suspend their child while on a 504 plan. Can the school suspend or expel a student if they are on a 504 plan?
3. We were recently told that we needed to review a 504 plan for a student transferring to our school. I thought 504 plans only needed to be reviewed annually?

Depression In Children

Disabilities which “qualify” a student for Section 504 services range widely. Often a disabling condition is one that we deal with everyday and often one that goes unrecognized. Yet, the disability and the effect on the child/student can be significant enough to create a roadblock to their educational progression. By recognizing these potential conditions we can assist students to overcome those roadblocks and successfully navigate the elementary, middle and high school maze.

The following article from the Mayo Clinic discusses depression in children and how it is treated. The information contained in the article can help teachers and administrators identify and deal with this condition in their student population. The full article can be viewed at <http://www.nlm.nih.gov/medlineplus/depression.html>.

What is the most effective treatment of depression in children?

Many years ago, doctors didn't believe that children could experience depression. But mental health experts now know that depression is as common in kids as it is in adults. Early detection and treatment of depression in children is important.

Treatment of depression in children may include psychotherapy and antidepressant medications. Opinions vary as to which form of treatment should be tried first. But a growing body of evidence indicates that for most children the best approach is a combination of both.

Studies show that a form of psychotherapy called short-term cognitive behavior therapy relieves symptoms of depression in many kids. Children who are depressed often have an unhealthy, negative view of themselves and their experiences. Cognitive behavior therapy helps children develop a healthier, more positive view. Research suggests that this type of therapy can be faster and more effective than other types of therapy in some kids.

Even when symptoms of depression go away, a therapist may recommend that a child continue psychotherapy for a time. This may further develop and enhance the child's coping skills—reducing the risk that depression will recur.

Medication also can help. The development of newer antidepressant medications and mood-stabilizing drugs has improved the treatment of depression in children. Medication may be useful when a child:

- Has severe symptoms that likely won't respond to psychotherapy alone.
- Doesn't have convenient or timely access to psychotherapy
- Has a psychosis or a bipolar disorder
- Has chronic or recurring depression

It's generally best for a child to keep taking the medication for several months after symptoms of depression go away. This reduces the risk of recurrence.

Some research indicates a link between antidepressants and increased suicidal thoughts and behaviors in children being treated with these drugs. As a result, in October 2004, the Food and Drug Administration strengthened warnings about antidepressant use in kids—not to prevent their use but to encourage doctors to carefully weigh the risks and benefits before prescribing them.

An important part of treating depression in young people is educating the child and family members about the illness and its treatment.

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§504 Questions and Answers

1. Under Section 504 regulations students who are making academic progress are by definition not in need of 504 accommodations. While the student in question does indeed have a disability, it appears that the disability does not substantially impact her ability to maintain academic progress in the regular classroom. Thus, it is not unreasonable for the 504 team, during a review of her 504 plan, to question her qualifications for a 504 plan. The student's ability to meet academic requirements in this case outweighs any need for accommodations.
2. Yes. Under a 504 plan the team must convene a Manifestation Determination meeting to examine whether the student's actions leading to the recommendation for suspension or expulsion were caused by the student's disability. If the team determines the student's actions were directly related to the disability, the school cannot suspend or expel the student for more than 10 school days. At that point, the team should consider potential program changes or changes in the classroom for the student. If however, the team determines that the student's actions had no bearing on his/her behavior, the school should treat the student, including potential disciplinary action, as they would a non disabled student.
3. 504 plans, under ASD policy, are required to be annually reviewed. However, anytime a “substantial change of placement occurs, or is considered”, the team needs to review the plan to determine if it is appropriate for the new setting and the current circumstances of the student's disability. This includes movement to a new school, new classroom, new grade, etc. This review is in addition to the review required every 3 years under federal mandate.