This is a redacted version of the original decision. Select details have been removed from the decision to preserve anonymity of the student. The redactions do not affect the substance of the document.

## Pennsylvania

# Special Education Hearing Officer

#### **DECISION**

Child's Name: D.M.

Date of Birth: [redacted]

Date of Hearing: June 23, 2011

**CLOSED HEARING** 

ODR No. 1854-1011JS

<u>Parties to the Hearing:</u> <u>Representative:</u>

Parent[s] Pro Se

Centennial School District Anne E. Hendricks, Esquire

433 Centennial Road Levin Legal Group

Warminster, PA 18974 1301 Masons Mill Business Park

1800 Byberry Road

Huntingdon Valley, PA 19006

Date Record Closed: June 28, 2011

Date of Decision: July 7, 2011

Hearing Officer: Cathy A. Skidmore, M.Ed., J.D.

## INTRODUCTION AND PROCEDURAL HISTORY

Student<sup>1</sup> is an elementary school-aged student in the Centennial School District (hereafter District). Student, who is eligible for special education, was most recently evaluated in March 2011. The District requested a due process hearing after the Parents sought an independent educational evaluation (IEE) at public expense following completion of that March 2011 evaluation. The hearing convened in one session at which the parties presented evidence in support of their respective positions.<sup>2</sup> For the following reasons, I find in favor of the District.

#### **ISSUES**

Whether the District's March 2011 re-evaluation of Student was appropriate under the applicable law; and, if it was not, are the Parents and Student entitled to an IEE at public expense?

## **FINDINGS OF FACT**

- 1. Student is an elementary school-aged student who resides with the Parents in the District. (Notes of Testimony (N.T.) 47-48)
- 2. Student was initially evaluated in April 2006 prior to entering the District for kindergarten. Student was determined to be eligible for special education on the basis of an orthopedic impairment (OI). (N.T. 62; School District Exhibit (S) 5)
- 3. A private developmental evaluation was conducted in September 2008 through a neonatal follow-up program. That evaluation noted parental reports that Student exhibited anxiety and occasionally had panic attacks, likely due to a prior surgery in 2007, but that Student had improved. This evaluator reported that Student demonstrated difficulty with fine motor tasks and sustained visual attention. On an administration of the Wechsler Intelligence Scale for Children Fourth Edition (WISC-IV), Student attained a full scale

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<sup>&</sup>lt;sup>1</sup> Student's name and gender are not used in this decision for confidentiality reasons.

<sup>&</sup>lt;sup>2</sup> The following exhibits were admitted at the hearing: School District Exhibits (S) 2, S 3, S 5, S 7, S 13, S 19. (Notes of Testimony (N.T. 148-50) The Parents also sought admission of S 8 and S 12, to which the District objected. (*Id.* at 149-50) This hearing officer reserved ruling on those exhibits (*id.* at 150) and hereby admits S 12 only on the following basis: S 8 appears in full and verbatim in S 2 and there is, therefore, no need for a separate S 8; and, while S 12 does reference S 2, admission of the full evaluation provides a more complete understanding than does the brief summary of that evaluation in S 2.

- IQ of 87 (Low Average range), with Verbal Comprehension and Working Memory Index scores in the Average range, a Perceptual Reasoning Index score in the Low Average range, and a Processing Speed Index score which was well below average. (S 13)
- 4. The District conducted a re-evaluation of Student in April 2009, reviewing existing data. The resulting re-evaluation report (RR) summarized previous assessments from the initial evaluation in April 2006, a physical therapy progress report from July 2008, the developmental evaluation from September 2008, and then-current occupational and physical therapy information. Previous input from the school nurse and the family were also included, as well as previous aptitude testing (the Dynamic Indicators of Basic Early Literacy Skills (DIBELS)) and grades during the 2006-07 and 2007-08 school years. "Some anxiety at times" was also noted. (S 5 at 8) The team determined that no additional assessments would be conducted at that time. (N.T. 54; S 5)
- 5. Academically, Student reportedly had generally satisfied requirements in all subjects in the 2007-08 school year. At the time of the April 2009 evaluation, Student's performance in the classroom reportedly ranged from 73-100% in Reading and from 65-100% in Math, with some areas of weakness or difficulty noted. Writing and Spelling scores were not a concern. (S 5)
- 6. The April 2009 RR recommended continuation of occupational therapy (OT) for fine motor and visual motor/perceptual needs, physical therapy (PT) for gross motor needs, and academic modifications and accommodations in the classroom, as well as monitoring of Student's anxiety at school. The team concluded that Student remained eligible for special education on the basis of OI, with identified needs in the area of fine and gross motor functioning and visual scanning. All participants, including the Parents, agreed with the April 2009 RR. (N.T. 54; S 5)
- 7. Student's Parents requested that the District re-evaluate Student on November 23, 2010. However, the District did not document receipt of a signed consent to evaluate form until January 3, 2011. (N.T. 119-20; S 2 at 46-47)
- 8. The District conducted a vision screening in December 2010 which determined that a full vision evaluation was not indicated. However, recommendations were made for use of a line marker when Student read, use of double-spacing on a computer, and follow-up with an eye care professional. (S 7)
- 9. In early January 2011, Student was privately evaluated by a Doctor of Optometry who is also a certified vision therapist. This physician provided a report of that evaluation which summarized Student's prior surgery and then-current vision difficulties including problems with eye tracking and eye teaming, visual processing, and visual motor integration. The evaluator recommended home-based vision therapy and a re-evaluation in six months. (S 12)

<sup>&</sup>lt;sup>3</sup> References to Student's Parents in the plural are used where both parents were acting together or one appeared to be acting on behalf of both.

- 10. The District re-evaluated Student at the beginning of the 2011 calendar year (during fourth grade), issuing a new RR on March 2, 2011 and convening a meeting with the Parents on March 3, 2011. (N.T. 55-56, 87-88; S 2)
- 11. The purpose of the March 2011 RR was to gain an understanding of Student's current educational levels due to concerns with Student's academic performance, including the Parents' concerns that Student had a specific learning disability and that attention/focus were impacting Student's learning. (N.T. 58-60, 62; S 2)
- 12. Student's teachers provided input into the March 2011 RR, as did the school counselor and nurse, as well as Student's Parents. Student's regular education teacher reported that Student was capable within the fourth grade curriculum but often failed to complete homework assignments. The learning support teacher reported that Student worked independently and used appropriate strategies on assignments and tests. (N.T. 57-59; S 2)
- 13. The March 2011 RR contained a summary of the District's 2006 evaluation, as well as summaries of evaluations relating to Student's vision in May 2007, October 2010, December 2010, and the January 2011 evaluation; an evaluation by an orthopedic surgeon in August 2008; the September 2008 developmental evaluation; and very recent and detailed OT and PT evaluations. (N.T. 62; S 2)
- 14. The recent vision evaluations indicated that Student did not have visual difficulties which would impact Student in the classroom. (N.T. 74; S 2)
- 15. In the areas of OT and PT, the March 2011 RR included the recommendations of those therapists that Student continue with both OT and PT. The occupational therapist identified Student's OT needs in the areas of motor skill deficits, visual tracking and visual discrimination, endurance with motor tasks during the school day, organizational skills, awareness of the right side (which is more affected by Student's OI than the left side), and self-help skills. The physical therapist noted that Student used bilateral crutches for ambulation and a motorized wheelchair for longer distances, and continued to demonstrate needs related to gross motor skills. (S 2 at 8-14)
- 16. Academically, the March 2011 RR noted that Student had made appropriate gains over the previous school years since kindergarten, and that Student had not demonstrated significant behavioral or academic difficulties. Student's 2010-11 grades were reflected in Math and Reading, as were results of the DIBELS for kindergarten through the 2009-10 school year. Student had scored in the proficient range in Reading and Mathematics on the Pennsylvania System of State Assessment in third grade. (S 2 at 18-22)
- 17. A Critical Reading Inventory from December 2010 was also summarized, reflecting listening comprehension scores at the fourth grade level, reading fluency and accuracy instructional at the fourth grade level, and reading comprehension below grade level. Student exhibited a strength in auditory discrimination and a weakness in visual discrimination. (S 2 at 22-24)

- 18. The RR summarized Student's previous and then-current Individualized Education Programs (IEP). For the 2010-11 school year, Student was in regular education with itinerant learning support, and OT and PT were provided as related services. Student had a full-time aide. A number of program modifications and items of specially designed instruction were also set forth in the March 2011 RR. Student was provided with a small group (learning support) environment for tests as well as enlarged print on tests; a small group environment for pre- and post-teaching and completing assignments; limited nonessential written work; and modified homework assignments. Student was also able to use a laptop for written assignments. (S 2 at 5-6, 24-25)
- 19. Behaviorally, the March 2011 RR reflected that Student had demonstrated some anxiety at the beginning of the 2010-11 school year. However, the regular education teacher believed that Student's anxiety by the time of that RR was no different than that of Student's peers and did not adversely affect Student academically. Student reported to the school psychologist feeling nervous or anxious at school "sometimes" (S 2 at 28) but did not state that this feeling interfered with Student's learning. (N.T. 100-01; S 2 at 24-25, 28)
- 20. The Behavior Assessment Scale for Children Second Edition (BASC-2) was used to obtain information from Student, Student's teacher, and one of the Parents. Student's scales reflected scores in the At-Risk range for the Locus of Control, Attention Problems, and Self-Esteem Scales as well as on the Emotional Symptoms Index. Student's teacher's scale reflected scores in the Clinically Significant range on the Somatization Scale and the Internalizing Problems Composite, while Student's Parent's scales reflected scores in the Clinically Significant range on the Anxiety and Somatization Scales and the Internalizing Problems Composite. Student's teacher's scales reflected scores in the At-Risk range on the Anxiety and Withdrawal Scales. The school psychologist concluded that because Student's behaviors did not interfere with Student's learning, there was no basis for finding Student eligible in the Emotional Disturbance category of exceptionality. (N.T. 70-73; S 2 at 32-34)
- 21. The school psychologist observed Student in the classroom during a social studies class using the Behavioral Observation of Students in Schools (BOSS). Student was academically engaged throughout the majority of the thirty-minute lesson (88% of the time compared to peers who were engaged 84% of the time). (N.T. 74-76; S 2)
- 22. The school psychologist administered cognitive and achievement testing of Student over a two-day period, establishing a rapport with Student throughout. Student exhibited some anxiety on both days. On the first day, Student was "slightly anxious" on a timed cognitive assessment. (S 2 at 25) On the second day, Student reported feeling sick for a few minutes but calmed down sufficiently to continue with testing. Student also became "very flustered and panicked" when an unexpected fire drill forced evacuation, but became calmer after the school psychologist confirmed there was no actual fire. Student's aide also spoke with Student and told the school psychologist that Student was able to continue with the testing after the fire drill. (N.T. 63-65, 77-81, 84, 112, 144-45; S 2 at 25-26)

- 23. On the WISC-IV, the school psychologist substituted a few subtests which reduce motor skill demands. Student achieved a full scale IQ of 84, in the Low Average Range, with Verbal Comprehension and Working Memory Index scores in the Average range, the Perceptual Reasoning Index score in the Borderline range, and the Processing Speed Index score in the Extremely Low Average range. Student's General Ability Index (GAI) was calculated to be 94, in the Average range, and thought to be a more accurate estimate of Student's intellectual potential. (N.T. 64-65, 67-69; S 2 at 28-30)
- 24. On selected subtests of the Wechsler Individual Achievement Test Third Edition (WIAT-III), Student scored in the Average range on the Total Reading, Basic Reading, Reading Comprehension and Fluency, and Mathematics Composites. Student's scores demonstrated a relative weakness in Oral Reading Accuracy. (N.T. 69-70; S 2 at 30-32)
- 25. The school psychologist conducted an ability-achievement discrepancy analysis using the WISC-IV GAI and WIAT-III scores, and found no notable discrepancies. Those results combined with a lack of concerns over Student's academic performance in the classroom led to the determination that Student was not eligible for special education on the basis of a specific learning disability. (N.T. 62; S 2 at 32)
- 26. The school psychologist incorrectly stated in the March 2011 RR that Student had used an eraser on cognitive testing. The only erasures which Student made were on the WIAT-III, which were permitted. On the WISC-IV, where erasures were not permitted, Student self-corrected by crossing out and writing above the first answer. (N.T. 80-83, 116, 119, 121-22, 143; S 2 at 25)
- 27. The March 2011 set forth the following needs for Student: encouragement; a positive/nurturing learning environment; PT and OT; development of strategies to address anxiety as needed; and improvement/development of strategies to address tasks involving processing speed, visual discrimination, and perceptual reasoning skills. (S 2 a 36)
- 28. Lastly, the March 2011 made specific recommendations to Student's IEP team which included strategies to address anxiety (including addressing the classroom environment, providing directions, class participation, taking tests in an alternate environment, identifying a safe person, and providing a pass for calming), and extra time for tasks involving processing speed and/or fine motor skills. (S 2 at 36-39)
- 29. All participants of the evaluation team who were present at the March 3, 2011 meeting signed agreement with the disability determination. In this District, the signature reflects agreement with any disability determination, not only that for specific learning disability. (N.T. 88; S 2 at 39)
- 30. The Parents requested an IEE on April 12, 2011 at an IEP meeting, and again on May 9, 2011. At the April IEP meeting, the school psychologist again explained the discrepancy analysis conducted with respect to the WISC-IV and WIAT-III scores. The District refused an IEE at public expense on May 17, 2011. (N.T. 90-94, 126-27, 129-30, 131-32; S 3; S 19 at 2-3, 10, 14)

#### **DISCUSSION AND CONCLUSIONS OF LAW**

Generally speaking, the burden of proof consists of two elements: the burden of production, and the burden of persuasion. At the outset, it is important to recognize that the burden of persuasion in an administrative hearing such as this lies with the party seeking relief. *Schaffer v. Weast*, 546 U.S. 49, 62 (2005);<sup>4</sup> *L.E. v. Ramsey Board of Education*, 435 F.3d 384, 392 (3d Cir. 2006). Accordingly, the burden of persuasion in this case rests with the District which requested the hearing. Courts in this jurisdiction have generally required that the filing party meet their burden of persuasion by a preponderance of the evidence. *See Jaffess v. Council Rock School District*, 2006 WL 3097939 (E.D. Pa. October 26, 2006). Nevertheless, application of these principles determines which party prevails only in cases where the evidence is evenly balanced or in "equipoise." The outcome is much more frequently determined by which party has presented preponderant evidence in support of its position.

Hearing officers are also charged with the responsibility of making credibility determinations of the witnesses who testify. *See generally David G. v. Council Rock School District*, 2009 WL 3064732 (E.D. Pa. 2009). This hearing officer found each of the witnesses to be generally credible, and the testimony as a whole was more consistent than not. Credibility of specific witnesses is discussed further in this decision as necessary.

The Individuals with Disabilities Education Act (IDEA)<sup>5</sup> ensures, *inter alia*, that all children with disabilities are provided with a free, appropriate public education (FAPE) to meet their individual needs. Local education agencies, including school districts, are required under the IDEA to conduct a "full and initial individual evaluation" of a student before it provides

<sup>&</sup>lt;sup>4</sup> The burden of production, "*i.e.*, which party bears the obligation to come forward with the evidence at different points in the proceeding," *Schaffer*, 546 U.S. at 56, relates to the order of presentation of the evidence.

<sup>&</sup>lt;sup>5</sup> 20 U.S.C. §§ 1401 et seq.

special education and related services to that child. 20 U.S.C. § 1414(a)(1)(A); *see also* 34 C.F.R. § 300.301(a). In conducting an evaluation, a local education agency must ensure that it uses procedures to determine whether the child has a disability and to determine the child's educational needs. 20 U.S.C. § 1414(a)(1)(C); 34 C.F.R. § 300.301(c)(2). Evaluation procedures include adherence to time limitations which, in Pennsylvania, mandate that evaluations be completed within 60 calendar days following receipt of parental consent. 20 U.S.C. § 1414(a)(1)(C); 34 C.F.R. § 300.301(c); 22 Pa. Code §§ 14.123(b) and 14.124(b).

The child must be assessed "in all areas of suspected disability." 20 U.S.C. § 1414(b)(3)(B); *see also* 34 C.F.R. § 300.304(c)(4). The IDEA regulations provide further guidance for conducting the evaluation or re-evaluation.

- (b) Conduct of evaluation. In conducting the evaluation, the public agency must—
- (1) Use a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information about the child, including information provided by the Parent, that may assist in determining—
  - (i) Whether the child is a child with a disability under § 300.8; and
  - (ii) The content of the child's IEP, including information related to enabling the child to be involved in and progress in the general education curriculum (or for a preschool child, to participate in appropriate activities);
- (2) Not use any single measure or assessment as the sole criterion for determining whether a child is a child with a disability and for determining an appropriate educational program for the child; and
- (3) Use technically sound instruments that may assess the relative contribution of cognitive and behavioral factors, in addition to physical or developmental factors.

34 C.F.R.. § 304(b); *see also* 20 U.S.C. § 1414(b)(2). The evaluation must assess the child "in all areas related to the suspected disability, including, if appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities[.]" 34 C.F.R. § 304(c)(4); *see also* 20 U.S.C. § 1414(b)(3)(B). Assessments

must be administered in a manner which is nondiscriminatory, in a form designed to yield accurate information, and for the purpose for which the assessments were designed, by a trained professional, and in accordance with the test maker's instructions. 20 U.S.C. § 1414(b)(3); 34 C.F.R. § 300.304(c)(1). Additionally, the evaluation must be "sufficiently comprehensive to identify all of the child's special education and related services needs, whether or not commonly linked to the disability category in which the child has been classified," and utilize "[a]ssessment tools and strategies that provide relevant information that directly assists persons in determining the educational needs of the child[.]" 34 C.F.R. §§ 304(c)(6) and (c)(7); see also 20 U.S.C. § 1414(b)(3). Further, the team must ensure that it considers existing information about the child through the following.

(a) Review of existing evaluation data.

As part of an initial evaluation (if appropriate) and as part of any reevaluation under this part, the IEP Team and other qualified professionals, as appropriate, must—

- (1) Review existing evaluation data on the child, including—
  - (i) Evaluations and information provided by the Parents of the child;
  - (ii) Current classroom-based, local, or State assessments, and classroom-based observations; and
  - (iii) Observations by teachers and related services providers; and
- (2) On the basis of that review, and input from the child's Parents, identify what additional data, if any, are needed to determine—
  - (i)(A) Whether the child is a child with a disability, as defined in § 300.8, and the educational needs of the child; or
  - (B) In case of a reevaluation of a child, whether the child continues to have such a disability, and the educational needs of the child;
  - (ii) The present levels of academic achievement and related developmental needs of the child;
  - (iii)(A) Whether the child needs special education and related services; or
  - (B) In the case of a reevaluation of a child, whether the child continues to need special education and related services; and

(iv) Whether any additions or modifications to the special education and related services are needed to enable the child to meet the measurable annual goals set out in the IEP of the child and to participate, as appropriate, in the general education curriculum.

34 C.F.R. § 305(a); see also 20 U.S.C. § 1414(c)(1).

The IEP team, which includes qualified professionals and the child's parent(s), makes the determination of, *inter alia*, whether the student is a child with a disability and in need of special education. 20 U.S.C. § 1414(c)(1)(B); 34 C.F.R. § 300.306(a)(1). In making these determinations, the local education agency must "[d]raw upon information from a variety of sources, including aptitude and achievement tests, parent input, and teacher recommendations, as well as information about the child's physical condition, social or cultural background, and adaptive behavior" and further "[e]nsure that information obtained from all of these sources is documented and carefully considered." 34 C.F.R. § 300.306(c).

When parents disagree with a school district's educational evaluation, they may request an IEE at public expense. 34 C.F.R. § 300.502(b); *see also* 20 U.S.C. § 1415(b)(1). When a parent requests an IEE, the local education agency must either file a request for a due process hearing to establish that its evaluation was appropriate, or ensure that an IEE is provided at public expense. 34 C.F.R. § 300.502(b)(2). In this case, the Parent requested an IEE, and District filed a due process complaint seeking a determination that its evaluation was appropriate. (Finding of Fact (FF) 30)

After careful review, this hearing officer concludes that the District's educational evaluation of Student was appropriate according to the applicable law. The evaluation included functional, developmental, and academic information from a variety of sources about Student. Specifically, the evaluation included a review of prior records and evaluations, as well as information from the Parents. (FF 2, 3, 4, 5, 6, 8, 9, 13) Student's educational history was

summarized, including grades and recent assessments. (FF 16, 17) Detailed information from Student's physical and occupational therapists was included. (FF 15) There was a summary of Student's previous and then-current IEP as well as information on Student's special education programming for the 2010-11 school year. (FF 18) The school psychologist administered both cognitive and achievement testing using appropriate norm-referenced, technically sound instruments. (FF 22, 23, 24) While also confirming Student's previously identified needs, the March 2011 RR focused on the main concern that Student had a specific learning disability. (FF 11, 25) In addition to a classroom observation and discussion of Student's reported anxiety, behavioral assessment was also conducted through the BASC-2 which obtained information from Student, one of the Parents, and a teacher. (FF 19, 20, 21) All of this information was summarized in detail in the RR and, taken together, comprised a thorough assessment of Student's present levels of academic achievement and functional performance. The March 2011 provided a discrepancy analysis, concluding based on current information that Student did not demonstrate a significant discrepancy between ability and achievement, while also retaining the eligibility category of OI and making recommendations to address Student's specific needs. (FF 11, 25, 27, 28)

There were several specific concerns expressed by the Parents at the due process hearing challenging the District's March 2011 RR, each of which warrant brief discussion. The first was that Student displayed anxiety prior to the administration of the cognitive and achievement testing. (N.T. 31-34) However, the District's school psychologist testified, quite credibly, that he established rapport with Student and ascertained whether the anxiety exhibited by Student during the two dates of testing was significant enough that testing should not continue. (N.T. 78-80; FF 22) This hearing officer accepts as true Student's own testimony that

Student did not recall the school psychologist asking if Student was feeling well enough to continue with testing (N.T. 142-43); however, this hearing officer also understands that many students become anxious in testing situations, and that there are a number of ways that a professional may assess student anxiety during an assessment to determine whether a delay is warranted. Here, the school psychologist established rapport with Student, had a discussion with Student's aide about whether assessment should continue, and concluded in his professional judgment that it was not necessary to reschedule the cognitive and achievement testing. (FF 22) It is also noteworthy that all of the information available to the District suggested that Student was, in general, not displaying anxiety in the school environment. (FF 12, 19, 21) This hearing officer cannot conclude that the District's March 2011 evaluation was flawed on the basis of Student's anxiety on the test dates.

The next concern is that Student was permitted to erase answers during testing. (N.T. 35-37) The testimony on this topic was consistent that Student was permitted to erase only on the portions of the WIAT-III where erasure is permitted. (FF 26) Accordingly, this hearing officer cannot fault the District in this regard.

The Parents also expressed concern that Student's academic performance was not adequately considered, including whether Student demonstrated a specific learning disability.

(N.T. 35-36, 42-44) However, the evidence is preponderant that Student's cognitive and achievement testing in March 2011 did not suggest a specific learning disability, which conclusion was consistent with Student's academic performance in the classroom. (FF 23, 24, 25) Although the developmental evaluation suggested an ongoing need to reassess Student's academic and functional performance (S 13), this hearing officer concludes that the District's

March 2011 RR did just that. Again, the District's evaluation cannot be deemed inappropriate on this basis.

The Parents also suggest that the District's failure to conduct a functional behavior assessment (FBA) rendered its evaluation inappropriate. (N.T. 38) However, there was no evidence that Student was demonstrating any behaviors of concern that would and should have properly been addressed by an FBA. (N.T. 120-21) Again, the March 2011 RR revealed that despite the results of the BASC-2, Student was not exhibiting behaviors at school which impeded Student's learning. (FF 20) Similarly, Student's history of anxiety (N.T. 42-43) was not adversely impacting Student's education such that further inquiry into this potential need was merited. (FF 19) That does not mean, of course, that the District or the IEP team should not remain cognizant of this characteristic and continually monitor Student for symptoms of anxiety, particularly if Student exhibited serious anxiety sometime after the March 2011 RR was completed. (N.T. 134-35)

The Parents did raise one additional matter which is of some concern to this hearing officer. The record reflects that the Parents requested a re-evaluation in November 2010, yet no steps were taken to conduct that re-evaluation until January 2011. (N.T. 34-35, 39; FF 7) The record does not reveal the reasons for the delay, including whether the District's re-evaluation was timely under the applicable regulations, 22 Pa. Code §§ 14.123, 14.124. Nevertheless, this case proceeded solely on a determination of whether the District's March 2011 evaluation was appropriate, and not whether Student was denied a free, appropriate public education (FAPE), an issue where procedural errors might form the basis of a denial of FAPE if there has been a substantive impediment to educational benefit or a significant impediment to meaningful decision-making by the Parents. 20 U.S.C. § 1415(f)(3)(E); 34 C.F.R. § 300.513(a)(2). While

school districts generally must, of course, comply with the regulations regarding timelines for evaluations, there is no reason to make a determination of whether the March 2011 RR was, in fact, timely since the provision of FAPE is not at issue in this case, nor is there a basis in the record for reaching such a conclusion.

It merits observation that Student's Parents are clearly very loving, dedicated, and involved parents. The District personnel likewise demonstrated clear concern for Student, as well as professionalism in identifying and meeting Student's needs. Student has many more years in the District during which time the parties will need to collaborate as a team. It is the sincere hope of this hearing officer that the parties are able to set aside their current disagreement and continue to work cooperatively together for Student's future educational programming.

In conclusion, it is the determination of this hearing officer that the District's reevaluation of Student assessed all areas of suspected disability as Student presented in March of
2011, and that this evaluation was sufficiently comprehensive to determine Student's educational
needs and guide the IEP team in developing an appropriate program to meet those needs.

Accordingly, I find that the District's evaluation was appropriate. Thus, there are no grounds on
which to order an IEE at public expense.

## **CONCLUSION**

For all of the foregoing reasons, I conclude that the District's March 2011 re-evaluation of Student was appropriate, and there is therefore no basis to order an IEE of Student at public expense.

## **ORDER**

1. The evaluation of Student conducted by the District and reflected in the March 2011 RR was appropriate.

2. The District is not ordered to take any further action.

It is FURTHER ORDERED that any claims or issues not specifically addressed in this decision and order are denied and dismissed.

Cathy A. Skidmere

Cathy A. Skidmore HEARING OFFICER

Dated: July 7, 2011