

CTSS Documents Required for School Districts to Access Reimbursement(MHCP Provider Manual)	Location in Special Education Documentation :	Special Education Legal Citations
Annual Diagnostic Assessment (MS 245.4876)	Evaluation Summary Report (34C.F.R.300.304, MinnRule 3525.2710)	Evaluations, Functional Behavioral Assessments, Individualized Education Program plan, Behavioral Interventions Plan, Annual Reviews and Progress Reporting Legal References
Age	Evaluation Summary Report	34C.F.R.300.304The child is assessed 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.
Current living situation (including household membership and housing status)	Evaluation Summary Report (Background Information, parent information)	MinnRule3525.2710 - the child is evaluated in all areas of suspected disability, including, if appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities; Household membership also included during enrollment.
Basic needs status including economic status	Evaluation Summary Report (Background Information, parent information, and/or parent interview)	MinnRule3525.2710
Education level and employment status	Evaluation Summary Report (Background Information)	MinnRule 3525.2710
Relationships	Evaluation Summary Report (Background Information)	MinnRule3525.2710

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Strengths and resources - social networks	Individualized Education Program (IEP) Plan, Behavior Intervention Plan, and/or Parent Interview, Teacher Interview, Student Interview	34C.F.R.300.324 In development of the IEP, the IEP team must consider the strengths of the child; concerns of the parents
Belief system	*Not required	MS125A.08 Testing and evaluation materials, and procedures used are selected and administered so as not to be racially or culturally discriminatory.
Contextual non-personal factors contributing to the recipient's presenting concerns	Evaluation Summary Report (Background Information) and/or Parent Interview, Student Interview, Teacher Interview	MinnRule3525.2710
General physical health and relationship to recipient's culture	Evaluation Summary Report; Medically Relevant Information, Developmental History, Health/Physical Status	34C.F.R.300.304 see above and MinnRule 3525.2710 Evaluation/assessment must be comprehensive and address any health concerns
Current medications	Evaluation Summary Report, Medically Relevant Information, Developmental History, Health/Physical Status	34C.F.R.300.304 see above and MinnRule 3525.2710
Description of symptoms, reason for referral,	Evaluation Summary Report (Background Information), Individualized Education Program (IEP), Present Levels of Academic Achievement and Functional Performance	34C.F.R.2710
Mental status exam	Evaluation Summary Report (Mental Health Screening)	MinnRule3525.1329Subp.3, mental health screening
Screenings used to determine a recipient's substance use, abuse, or dependency, and other standardized screening instruments	N/A	MinnRule3525.1329 .Evaluation may include data from chemical health assessments.

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Clinical summary explaining the provisional diagnostic hypothesis	N/A	
Standard Diagnostic Assessment also includes:		
Perceptions of his/her condition	Evaluation Summary Report (Student Interview)	MinnRule3525.2710
Description of symptoms	Evaluation Summary Report (Parent Interview, Student Interview, Mental Health Screening)	MinnRule3525.2710 Autism – may also include autism checklists, communication and development rating scales, FBA
History of mental health treatment	Evaluation Summary Report (Mental Health Screening will contain Outside Diagnosis, name of provider, location of provider)	MinnRule3525.1329
Important developmental incidents	Evaluation Summary Report (when relevant)	MinnRule3525.1329 For children not yet enrolled in Kindergarten.Evaluation process must show developmentally significant impairments in self-care, social relations, or social or emotional growth, including medical, cultural and developmental information.
Maltreatment, trauma, or abuse issues	Evaluation Summary Report (when relevant)	MinnRule3525.2710, 3525.1329
History of alcohol and drug usage and treatment	Evaluation Summary Report (when relevant)	MinnRule3525.1329 .Evaluation may include data from chemical health assessments.
Health history and family health history, including physical, chemical, and mental health history	Evaluation Summary Report, Medically Relevant Information, Developmental History, Health/Physical Status. * Would not include family health history only information that pertains to student.	MinnRule 3525.2710

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Cultural Influences and their impact on the recipient	34C.F.R.300.304 Assessments and evaluation materials are selected and administered so as not be discriminatory on a racial or cultural basis; Are provided and administered in the child’s native language. Considered, not documented.	MinnRule3525.1329 Patterns of behavior must not be the result of cultural factors. The evaluation may include data from socio-cultural, and ethnic information reviews.
Assessment of the recipient's needs based on:		
Baseline measurements	Evaluation Summary Report (Functional Behavioral Assessment)	MinnRule3525.1329 Evaluation findings must be supported by current or existing data form: 1). Clinically significant scores on standardized, nationally normed behavior rating scales; systematic observations. MinnRule35245
Symptoms	Evaluation Summary Report (Mental Health Screening)	MinnRule3525.1329 Evaluation findings must be supported by interviews with parent, pupil, and teacher; observations; record reviews; mental health screening.
Behavior	Evaluation Summary Report (Functional Behavioral Assessment)	MinnRule3525.1329 Evaluation findings must be supported by functional behavioral assessment.34C.F.R. 300.324 IEP must consider appropriate positive behavioral interventions and supports and other strategies for a child. MinnRule3525.2810 the IEP shall include appropriate positive behavioral interventions and strategies

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		<p>For a functional behavioral assessment this report must include (MDE):</p> <ul style="list-style-type: none"> • a description of problem behaviors and the identification of events, times, and situations that predict the occurrence and nonoccurrence of the behavior; • the antecedents, consequences, and reinforcers that maintain the behavior, the possible functions of the behavior, and possible positive alternative behaviors; and • a variety of data collection methods and sources that facilitate the development of hypotheses and summary statements regarding behavioral patterns.
Skills	Evaluation Summary Report (Functional Behavioral Assessment)	MinnRule3525.1329; 3525.2710 3525.1333Adaptive domains must be considered for daily living and independent living skills; social and interpersonal skills; academic skills; recreation and leisure skills; work and work related skills
Abilities	Evaluation Summary Report (Functional Behavioral Assessment)/ Individualized Education Plan	MinnRule3525.1329; MinnRule 3525.2710
Resources	Evaluation Summary Report (Parent Interview; assessment tools; observations).	MinnRule3525.1329; MinnRule 3525.2710
Vulnerabilities	N/A	
Safety	Evaluation Summary Report (Functional Behavioral Assessment)	MinnRule3525.1329; MinnRule 3525.2710

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Assessment methods and use of standardized assessment tools	Evaluation Summary Report	34C.F.R.300.304 Evaluation must use a variety of assessment tools and strategies; must use technically sound instruments that may assess the relative contribution of cognitive and behavioral factors, in addition to physical or developmental factors.
Clinical summary including recommendations	Evaluation Summary Report (Summary)	MinnRule 3525.2710 The evaluation is sufficiently comprehensive to identify special education and related services needs.
Involvement of recipient and family	Prior Written Notice Consent to Evaluation; IEP Meetings	MinnRule 3525.2710 The District shall obtain parental consent prior to conducting evaluations; Parents are involved throughout the IEP process including parent interviews and IEP meetings.34C.F.R.300.503 Parents are given the opportunity to agree or disagree with plan. MinnRule 3525.0700 Parents have the rights to be involved to participate at each IEP meeting to develop, review, or revise the IEP.
Sufficient data to support findings on all axes of the current Diagnostic and Statistical Manual (DSM) and any differential diagnosis	School Districts are required to use ICD-10 reporting as of October 1, 2015. DHS-7092- <i>ICD-10-CM Reporting for Schools</i> Schools following the guidelines in the DHS-7092 guidelines:	MinnRule 3525.1329 Criteria for eligibility for Emotional Behavioral Disorder may include the following behaviors: aggressive, hyperactive or impulsive behaviors; withdrawn or anxious behavior, pervasive unhappiness, depression, severe problems with mood or feelings; intense

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	<ul style="list-style-type: none"> • ICD-10-CM (Clinical Modifications) classifies and describes (1) diseases and disorders and (2) signs, symptoms and conditions. <p>DSM diagnosis only provided if reporting on outside DA (Mental Health Screening).</p>	<p>fears or school refusal; overly perfectionist; failing to express emotion; displaying pervasive sad disposition; developing physical symptoms related to worry or stress; changes in eating or sleeping patterns; disordered thought processes</p>
<i>Individual treatment Plan every 90 days</i>	Individualized Education Program (IEP) Plan	<p>34C.F.R.300.22 The IEP is a written statement or plan for a child with a disability that is developed, reviewed, and revised in accordance with the regulations.125A.08 The individualized education program team must consider positive behavioral interventions, strategies, and supports that address behavior needs for children. The IEP is reviewed at least annually and Progress on the IEP is reviewed 3-4 times per year.</p>
Measurable and observable goals	Individualized Education Plan-	<p>125A.08(b)(1) The IEP team has determined appropriate goals and objectives based on student’s needs. MinnRule 3525.2810 IEP shall include Present Levels of functioning; goals, objectives; related service required</p>
Start and end dates	Individualized Education Plan	<p>MinnRule 3525.2810; Date for the beginning of the services, anticipated</p>

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		frequency, location, and duration of the services and modifications The IEP must be reviewed at least annually.
Progress notes that includes:	Progress Monitoring	The month to month plan is completed through ongoing progress monitoring and progress reports which must be completed at least as often as parents are informed of their nondisabled student's progress (MinnRule 3525.2610) In accordance with parent conferences, this usually means progress reports are completed 2- 3 times per year.
<p>Type of service</p> <p>Date of service</p> <p>Session start and stop times</p> <p>Scope of service (nature of interventions or contacts, treatment modalities, phone contacts, etc.)</p> <p>Recipient's progress (or lack thereof) to overall treatment plan goals and objectives</p> <p>Formal or informal assessment of the recipient's mental health status</p> <p>Name and title of person who gave the service</p> <p>Date documentation was made in the client record</p>	<p>Description Assessment Plan (DAP) Logging</p> <p>Note, Progress reports</p>	<p>DHS IEP Technical Assistance Guidelines followed regarding health services record documentation including:</p> <ul style="list-style-type: none"> -The recipient's name on each page of the recipient's record -The date on which the entry is made -The date or dates on which the health service is provided -Documentation of the actual services provided -The length of time spent with the recipient if the amount paid for the service depends on time spent -The signature and title of the person who provided the service

Special education requirement documents:

Example: *Emotional Behavioral Assessment*

Prior Written Notice given to parent (parent must give permission to assess student)

- Parent interview
- Student interview
- Teacher interview
- Mental health screening (SDQ or Outside Diagnosis if within 1 year)
- Systematic Observations (three) – different settings

Functional Behavioral Assessment

- Identification of target behaviors
- Identifications of events preceding the occurrence-non-occurrence of the behaviors
- Immediate antecedent events, consequences, and reinforcers that maintain the behavior
- Possible functions of each behavior
- Hypothesis, summary statement, condition, and environmental factors about each target behavior
- Possible alternative behaviors to replace the target behaviors

Individualized Education Program (IEP) plan with present level of functioning, goals and objectives and Behavior

Intervention Plan that includes:

- Students strengths
- Target behaviors
- Interventions
- Replacements/positive behaviors

Other possible areas of assessment;

Developmental Cognitive Delay assessment

- Adaptive Behavior Assessment System (ABAS)

Autism Assessment

- Autism Spectrum Disorder (ASD) developmental history/parent interview that addresses three core features of ASD(social interaction, communication, and restricted interest/stereotyped behavior.

