

School Lingo

Adjustment

An adjustment is a **strategy** that we ask the school to use **informally, freely and immediately** upon return to school to help the student adjust to the changes they are experiencing from their TBI. They are informal because they are not part of a written 504 Plan and because we are hoping the child will not need them for long. Adjustments are used most following concussion.

- Examples: wearing a hat for light sensitivity, wearing headphones for noise sensitivity, leaving class 5 minutes early to avoid hallway rush for vestibular issues, putting their head down for fatigue or headache, etc.

Accommodation

An accommodation is a **formalized adjustment**, written into a 504 Plan or IEP. They must be “reasonable”. Because it has been formalized by being put into writing in one of the two legal documents (IEP or 504 Plan), school personnel must use them when they apply. An accommodation helps the student to learn the same material that everyone else is learning.

Modification

A modification is a change to what the student is taught or what they are expected to learn. For example, the child is assigned fewer math problems and easier ones than everyone else.

504 Plan

504 Plans are written plans that show what supports will be used to help a child with a disability access the regular curriculum. These supports are accommodations. The curriculum is not changed.

IEP

An individualized educational plan or IEP allows a child with a disability specialized instruction, modified curriculum and/or any related services (PT, OT, SLP, etc.) they may need. TBI is a disability category in TN schools. After a request for testing is submitted, there will be a records review and testing may be recommended. Even if a child has a TBI, the child must have a functional disability or psychosocial impairment *that adversely affects the child's educational performance*.

Psychoeducational testing vs. Neuropsychological testing

A school psychologist performs psychoeducational testing which typically focuses on IQ and academic achievement. This testing does not typically include assessing individual cognitive processes, so Neuropsychological testing *may* be warranted since it is these processes that are typically impacted by TBI. The school may decide not to do NP testing. If this is the case, ask for the reason in writing. NP testing often provides the best way to pinpoint deficits, identify strengths and target treatment.

Regular Education Diploma vs. “Special Education Diploma”

At the high school level, if a child is on an IEP where the curriculum is modified, then that child cannot graduate with a regular education diploma. They would graduate with what is colloquially known as a “special education diploma,” though it is technically known as a Certificate of Attendance or a Work-Study Diploma, depending on the emphasis of their schooling. A new category will be introduced for the 2018-2019 school year.

Children with an alternate diploma will have a harder time going to college and getting a job.

Therefore, it is extremely important that the education plan for children with TBI be developed properly. There will absolutely be children who require an IEP because they need curriculum modifications.

Most children will be able to use simple adjustments and accommodations.

Some children may require one-on-one pull-out sessions with an SLP or school psychologist to work on changes to cognitive processes. Think of this as teaching the child how to learn with their “new” brain. The emphasis would be on strategy development and metacognitive awareness. In this case, **a change to the curriculum may not be needed.** If this is the best approach to intervention and learning, then it is important this be clearly conveyed to the school. It would be helpful to give the treating therapist at the school and idea of what this type of treatment might entail. It would also be helpful to share cbirt.org’s Sample IEP goals Cbirt’s

Sample IEP Goals:

https://cbirt.org/sites/cbirt.org/files/resources/sample_iep_goals_for_students_with_tbi.pdf , so they can get an idea of how therapy is often conceptualized differently with a child with a TBI.

