



# South Dakota REPORT

Advocating the Rights of South Dakotans with Disabilities

## THE PROTECTION AND ADVOCACY SYSTEM FOR SOUTH DAKOTA

Volume 30, Issue 2

March, 2015

### Final Notice -

## The *South Dakota Report* is Going Green

**B**ecause of increased printing costs, and well as a number of requests to have the *South Dakota Report* sent via email instead of receiving a paper copy, South Dakota Advocacy Services is converting its subscription mailing list to an email list to the extent possible. This transition will occur through the end of June 2015. To-date, our response rate is less than 10% of mail subscribers.

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[Note: Anyone who has requested a paper copy since July 2014 will remain on the mailing list.]

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Partners in Policymaking Year 23 with Governor Dennis Daugaard (*see p. 14*)

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# Not So RAD: Assisting Students with Reactive Attachment Disorder in the Classroom

by Emily Garcia

**R**eactive Attachment Disorder (RAD) is a psychiatric illness that mainly affects a child's ability to form healthy attachments with family or caregivers. Typically, this is a result of a "survival instinct" imposed at a very young age. These children have often been the victims of abuse or neglect and lacked a significant caregiver as infants. (American Academy of Child and Adolescent Psychiatry) They often have difficulty coping with their feelings.

Children with RAD may seem extremely friendly to the passerby. Parents often see a divergence between their own experiences and that of people on the outside. Parents develop an "insiders" and "outsiders" mentality. Daniel Hughes writes, "The child's avoidance and controlling behaviors are survival skills developed under conditions of overwhelming trauma. They will decrease as a sense of safety increases, and while they may need to be addressed, this is not done with anger, withdrawal of love, or shame." (Hughes) Teachers, social workers, and others that work with the child will sometimes observe the child to be "inappropriately clingy" (Thomas) with the child wanting to sit on their lap or have a small personal space. Some Outsiders have said that children will make false reports against their parents of abuse and neglect. Oftentimes, children with RAD are well-liked by both adults and children that interact with them outside of their home environments. (McGinn)

Whereas the Outsiders may see the child as compliant and almost too-pleasant, the parents and caregivers see a very different array of behaviors. These children often have difficulty coping with their feelings. At home, the child may show defiant, controlling behaviors. They may throw temper tantrums at the drop of a hat and make hateful statements toward caregivers. The behaviors may manifest as violence against themselves, animals, or others close to them. The child is constantly looking to control others around them through manipulation. (McGinn)

There is often a divergence of behaviors from home to outside environments. Parents and caregivers become frustrated because people who work with their children do not experience the child's need to control to the same degree as at home. Parents and therapists know that even small behaviors, like taking a long time to tie one's shoe or refusing a birthday treat, is a method of control for the child. This is discouraging to parents because they are oftentimes looking to create a "universal" approach to therapy. Parents and therapists would like all adults, professionals and family alike, to interact with the child in a uniform way that takes control away from the child. There are many "schools of thought" on approaches to RAD. However,

**Reactive Attachment Disorder**  
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# TECH BYTES

by Valorie Ahrendt

**U**ndoubtedly you have heard the saying, “There’s An App For That!” Well, it is true. If someone has a need, more than likely there is an app to address that need. There is a funny commercial from France about a husband who tries to get his wife to go paperless. When she and their child are coloring in a coloring book, he shows her how he can use his fingers on an iPad app to draw colored pictures. When he sees her Post-it Notes all over the refrigerator door, he shows her how he can use a Post-it Note app on his iPad. When he sees her playing a game of Sudoku in a paperback book, he shows her that he can play the same game on his iPad. When he sees her reading a hard-covered book (gasp!), he shows her how he reads his books on his iPad. The next scene is the husband sitting on the toilet. He realizes the toilet paper roll is empty and calls for his wife. She slides his iPad under the door. The iPad screen has a picture of a roll of toilet paper. 😊

I thought it was pretty funny and it made me realize that technology is great, but there are still tasks that we need to accomplish each day in which computers or apps are not qualified to do the job. This edition of Tech Bytes will feature assistive devices that help with those activities of daily living that computers just cannot help with – at least not yet.

## Assistive Devices for Hygiene Tasks

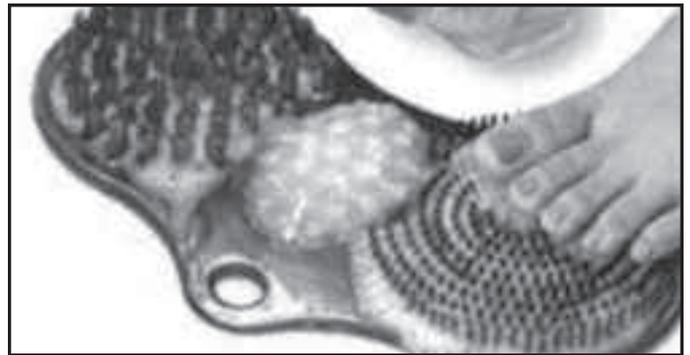
A unique nail clipper, called The Press-On One Handed Nail Clipper (below), easily clips nails with just a gentle press of the hand. With an extra long and extra wide base, it provides stability and leverage for one handed use. Rubber feet on the bottom hold the clipper in place during use. It is ideal for people who have difficulty manipulating small items. \$31.95



The Nail Clipper Board is a standard size clipper, but it is securely attached to a plastic base. Suction cup feet on the bottom of the base attach to a table or counter to provide stability and keep the board from slipping. It is designed to assist people who have limited pinching ability. \$19.95



Individuals who have difficulty bending at the waist may find this next product beneficial. Soapy Soles Elite Foot Brush is a 3-in-1 foot care product. It allows a person to clean, massage, and stimulate his or her feet, all without ever bending over. The pad stays in place by suctioning to the tub or shower floor. A person can rub his or her foot over the soap dispenser to release the soap, and then move the foot over the foot brush to spread the soap around and clean the dirt away. Options also include “bumps” for reflexology and a pumice stone for exfoliating. \$14.95



## Assistive Devices for the Car

Getting in and out of a vehicle can be quite challenging for some due to orthopedic issues. Two products can make this task easier. First, the Swivel Car Seat Cushion is a rotating seat cushion that helps to reduce pain on the back, hips, and knees when getting out of a car. A non-slip base keeps it in place and it rotates 360 degrees to provide a smooth and easy transfer. \$29.95



Once a person rotates around in the seat, it can be even more difficult to exit the vehicle without help. The Auto Handybar Car Transfer Aid (p. 4) can give that extra hand. The Handybar is made of forged steel and can be easily inserted and removed in the car door frame’s striker plate. Striker plates are located on both the driver and passenger sides in vehicles. The Handybar can be reversed to give just the right height and angle of grip for getting in and out of a vehicle. \$29.95. There is an option

*Tech Bytes*  
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## Reactive Attachment Disorder

(Continued from page 2)

uniformity is the key to most approaches. Because Outsiders often do not see the controlling behaviors to the same degree as parents, they consider these behaviors in the realm of “normal” and are unwilling to play their part in the child’s treatment.

Parents should begin by educating school staff about RAD and how it presents in their child. Parents cannot expect educators or other community members to thoughtfully work with the child if they are uneducated about how RAD manifests in children. It is important to approach educators with a team-like attitude in order to give the impression that there are many people working for the same goal with the child. Offer the teacher or other professional specific language and strategies that work for your child. This will send the message to the child that ALL the adults he or she knows recognize his/her controlling behaviors and that they are taking those controls away from the child. At the end of this article are common classroom strategies.

The next step in working with the school is requesting Special Education testing (do this via a hand-written or typed letter to the principal or special education director). If the child qualifies for Special Education due to RAD or other disabilities, accommodations and modifications should be written in the Individualized Education Plan (IEP) to address how Reactive Attachment Disorder affects the child in the school environment. If the child is already on an IEP, call an IEP meeting to address including accommodations and modifications that address the RAD. It is helpful to include the child’s therapists or mental health professionals at such meetings to assist in educating school staff about the child and to offer the school advice on how to work with the child’s specific mental health needs.

*If the child does NOT qualify for an IEP, request that the school consider a 504 plan that addresses the strategies needed for working with the child.*

Continue to monitor the child’s progress and behaviors in school. If parents feel their child’s needs are improperly addressed, call a team meeting to discuss the issue.

## Tech Bytes

(Continued from page 3)

to purchase the Swivel Cushion and the Handybar together for \$55.95.



### Assistive Device for Gripping Tools

Summer means lawn care and house projects! Whether one is sweeping, mopping, raking, or painting, it all involves gripping a handle of some sort. These tasks can be difficult, especially when a person has limited mobility or strength in the wrist and forearm.

Tackling a child’s needs pertaining to a diagnosis of RAD can be a difficult task. This is compounded by the variance in behaviors from child-to-child. Parents can play a vital role in implementing an appropriate plan for their child with RAD.

Below is a non-exhaustive list of common classroom strategies for students with RAD:

- ◆ Utilize a “common language” for all interactions with the child;
- ◆ Acknowledge the subtlety of the child’s controlling behaviors;
- ◆ Advise the teachers how the child acts when exhibiting behaviors related to RAD;
- ◆ Employ natural consequences – some have found the “Love and Logic” training to be helpful;
- ◆ Hold the child accountable for completing his or her own work – do not play into the child’s “learned helplessness;”
- ◆ Professionals who work with the child should maintain a professional demeanor at all times when working with the child – avoid power struggles;
- ◆ Maintain consistency in the classroom routine – the child should know what to expect;
- ◆ Point out incorrect behaviors quickly in a non-argumentative, light manner – “Johnny, I see that you are taking a long time to start your work;” and
- ◆ Sustain an on-going dialogue with parents and therapists to maintain commonality in all settings.

### Sources

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The RoboHandle Ergonomic Tool Handle was developed to meet this need. It is an adapted handle that can be attached to the shaft of a hand tool. Two stainless steel clamps are included, and for a more permanent attachment, the handle can be attached using sheet metal screws. Instead of using the wrist and forearm to maneuver the tool, the RoboHandle allows the larger and stronger bicep and tricep muscles to be engaged. \$19.95



As with apps, if one has a specific need, there is probably an assistive device or product available to meet that need. The website <http://www.products.disabled-world.com> has hundreds of devices and products to consider.

# Legal Pull-out Section

March 2015

## Illegal Exclusion and the Improper Use of Risk Assessments

by John A. Hamilton

The previous issue of the *South Dakota Report* (Volume 30, Issue 1; November 2014) discussed the illegal removal of children with and without disabilities from school. Children have been told they may not return to school due to various behavior, but they are not formally suspended and not given their procedural due process rights; for those children with disabilities (those found eligible under IDEA), they are similarly not afforded their due process rights per the discipline regulations of IDEA. This article continues with the same topic, specifically addressing school districts' proper and improper use of Risk Assessments.

### What is a Risk Assessment?

One may hear the term, "Risk Assessment," in many fields, such as business, healthcare, science, or disease control. In general terms, assessing risk means identifying an undesirable outcome, determining the probability of it occurring, and then determining if that amount of risk is acceptable or whether certain steps need to be taken to minimize or eliminate the risk. Various types of Risk Assessments may be used in school settings, such as deciding whether to delay or call off school when the weather is bad or making determinations of staffing levels on the playground before school and during recess in an effort to keep children safe. The type of Risk Assessment discussed herein pertains to the risk posed to others by individual students.

Schools often seek Risk Assessments in situations where a student has demonstrated certain aggressive/violent behaviors or where school officials believe the threat for such behavior exists. This type of Risk Assessment tries to determine the propensity for future behaviors, and if it is determined that such propensity exists, what steps can be taken to minimize that risk. Probably the greatest fear on the part of school officials and parents is the "school shooter." While statistically very rare (children are much more likely to be violently victimized or killed outside of school), school safety has come to the forefront nationwide. One only needs to hear "Columbine" or "Sandy Hook" for that fear to pervade the minds of parents, school staff, and State and local government officials.

Risk Assessments can take several forms, such as behavior profiling, guided professional judgment, automated decision making, and threat assessment. Profiling involves comparing students to characteristics of prior perpetrators. This method would likely result in over-identification, statistically what are called "false positives," meaning a number of students would be labeled as fitting the profile who would never actually commit

school violence, while missing at-risk students because they did not fit the profile. Guided Professional Judgment involves establishing a baseline for prevalence of behavior, then using a checklist of various characteristics. However, because school violence is so rare, the baseline is very low. The checkmarks for a particular student may not rise to the level of concern due to the low baseline, resulting in under-identifying students who pose a risk. Automated Decision Making involves using statistical data and equations to identify potentially dangerous students. This method also has drawbacks. Due to the rarity of school violence, the base rate is too low for meaningful results. The problem with each of these types of risk assessments is that they rely on prior events to guide inferences about a specific situation.

A method that focuses on the facts of a particular situation to guide inferences, rather than what factors are shared with prior perpetrators, is the Threat Assessment. Threat Assessments are typically completed by mental health professionals. This type of Risk Assessment recognizes students as individuals, meaning there is no profile or single "type" of perpetrator. It distinguishes between one making a threat and one who actually poses a threat. In other words, actual perpetrators tend to plan ahead and do not announce their intent through making threats.

While use of Risk Assessments has undoubtedly increased in school settings, there seems to be a misperception on the part of at least some school districts regarding what information a Risk Assessment will provide. In a situation several years ago, the school superintendent stated he would not allow a student back in school unless the assessment *guaranteed* that the student would never do anything violent, and would never swear, act disrespectful, or get into any type of trouble. Despite the assessment finding the student to not be a risk, the superintendent would not follow the evaluator's recommendations because there was no guarantee attached to it. He continued to refuse to allow the student to set foot in the school building. Obviously, no assessment is ever going to come with a guarantee.

There also seems to be a misperception on the part of at least some districts regarding how the Risk Assessment interplays with student rights. Specifically, some districts seem to believe by requiring a Risk Assessment, other rights essentially go "on-hold" until that process is completed. The following is a typical scenario:

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*Risk Assessments*  
(Continued on page 6)

## ***Risk Assessments***

***(Continued from page 5)***

A student does or says something perceived to be threatening. Perhaps a student threatened another student or a teacher. Maybe the student simply mentioned the word, “Columbine.” Whatever the act, it resulted in the student being sent home from school. School administrators want a Risk Assessment completed. They inform the parents the Risk Assessment must be completed before the student may return to school. If the assessment shows a significant risk of harm to others, the student will not be allowed to return to school.

This scenario clearly leaves many unanswered questions, such as how long will it take, what happens to the student in the meantime, or who will pay for it? Other questions include who will provide the assessment or who does the district believe is qualified to provide an assessment the district will accept? Before addressing these variables, perhaps an actual situation will better illuminate the issues:

On October 29, 2013, a district informed the grandmother of a student with a disability that due to behaviors, the student could not return to school (or step foot on school grounds) until a Risk Assessment was completed. The district’s assumption was apparently that the grandmother would arrange for the Risk Assessment, but the district provided her no information on where to go to have it completed. However, the student was allowed to go to the city library for an hour a day to receive his special education from a *paraprofessional*. The district took no action to suspend the student. The district also took no immediate steps to ensure the risk assessment was completed. The district eventually scheduled and paid for a risk assessment in late January 2014. An IEP Team meeting resulted in a determination the student could attend school for a period or two, with the plan to increase his time at school. Essentially, the student went without an education for three months and then began receiving just an hour or two of education per day. Since no formal suspension occurred, the district provided no notice of a long-term suspension, no notice of the procedural due process right to contest the underlying charges at a school board hearing, and no notice of IDEA procedural safeguards.

Is this how a Risk Assessment is supposed to work? The answer to that question is an emphatic “NO,” as will be discussed below.

### **Risk Assessments Do Not Exist in Legal Vacuum**

A student does not lose his or her constitutional, statutory, and/or regulatory rights when a Risk Assessment is sought. Those rights do not go on hold. If school officials will not allow a student back in school pending a risk assessment, that removal should be considered a suspension and schools should take formal action to suspend a student if the desire is to keep the student out of school.

In South Dakota, school principals can suspend any student from school for no more than ten school days. School superintendents may suspend for up to 90 days, but if a superintendent wishes to impose a suspension longer than ten days (*i.e.*, long-term suspension), the student must first be given notice of the long-term suspension and the right to a hearing

before the school board. The suspension is “stayed” (the student returns to school) until the school board renders its decision (“unless in the judgment of the superintendent of schools, the pupil’s presence poses a continuing danger to persons or property or an ongoing threat of disrupting the academic process,” in which case the student may be removed and the hearing must be held as soon as practicable). SDCL 13-32-4.2.

Therefore, school authorities generally do not have the legal authority to keep a student out of school for more than ten school days pending a Risk Assessment. If the Risk Assessment can be completed within the ten days, that is fine. If it will take longer, the student cannot be kept out of school past the tenth day without a school board vote or if the student waives the right to such a hearing, or if the above exception applies.

If a student is eligible for special education services, additional rights attach. School authorities can remove a student with a disability for the same ten (consecutive) school days. If a longer removal is desired, however, the IEP Team must conduct a manifestation determination by the end of the tenth day. If the behavior in question is determined to be a manifestation of the student’s disability, the suspension ends and the student must return to the placement the student had been in prior to the removal. If the IEP Team determines the behavior was not a manifestation of the student’s disability, the district must continue to educate the student, but in a different setting, so that the student can continue to participate in the general curriculum and progress toward meeting the student’s IEP goals. 34 C.F.R. §300.530(d)(1).

Risk Assessments do not operate separate from these laws. Rather, they must be conducted within the requirements of regular, or regular and special education, laws. A Risk Assessment, after all, is nothing more than an evaluation.

### **Risk Assessments Require Consent**

When schools require Risk Assessments, what they are typically seeking is an assessment by a mental health professional. In special education parlance, the district is seeking an evaluation. Within the No Child Left Behind Act, specifically the “Hatch Amendment,” schools cannot administer an assessment of a student’s mental or psychological condition, or of any illegal, anti-social, or self-incriminating behavior, without parental consent. 20 U.S.C. §1232h; 34 C.F.R. §98.4. South Dakota law contains a similar requirement pertaining to actual mental health treatment at SDCL 13-32-3: “No public school administrator or teacher shall refer a student for psychiatric treatment within or outside the school without the prior written consent of such student’s parent or guardian.”

Likewise, IDEA requires prior written notice and parental consent prior to conducting evaluations. Under IDEA, if parents refuse consent, districts can file for a due process hearing to attempt to override the refusal, but as discussed above, a student’s rights do not go on hold during this process. Thus, short of convincing a hearing officer of the necessity of the evaluation, schools cannot force the Risk Assessment to occur under IDEA if parents do not provide written consent.

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***Risk Assessments***  
***(Continued on page 7)***

## Risk Assessments

(Continued from page 6)

### Who Pays for the Risk Assessment?

Schools can obviously ask families to have a Risk Assessment completed and pay for it at their own expense. Parents may agree to that, which means the parents are obviously providing consent. Parents may also voluntarily agree to keep the child home until it is completed, which presumably would take the question of whether a suspension has occurred off the table.

Parents must keep in mind, however, that a Risk Assessment is no more than an evaluation, and if the district is mandating that it occur, both IDEA and Section 504 of the Rehabilitation Act would require the district to pay for it. It would likely be true under regular education law as well.

### Tips for Parents

When a school district demands that a Risk Assessment be completed, parents are encouraged to take the following steps:

1. Ask questions. If the district has not already provided this information, find out exactly what the district wants done, by whom, and when it will take place. Confirm that the district intends to pay for it. Find out what the district's plan is for the child while waiting for the evaluation to occur and the evaluation report to be completed. Find out what will occur if you (parents) refuse to consent to the Risk Assessment.
2. Provide written informed consent *or* refuse consent. Consent must be "informed," which is why it is important to have all questions answered before agreeing to or refusing anything. If parents agree with the information the district provided as to what will occur, they must sign and date their consent. If parents disagree with what the district proposes, they have the right to withhold consent.
3. A district can remove any student from school for up to ten school days. If the district wants the student to remain out of school until the Risk Assessment is completed, the written report is prepared, and a meeting can be held to discuss the results, the district must formally long-term suspend the student if this process will take more than ten school days. A long-term suspension triggers a student's procedural due process rights, meaning notice of the right to a hearing before the school board. It also triggers children with disabilities'

rights under IDEA to a manifestation determination and continued services (either a return to the child's placement or to another setting). Therefore, if the student is to be removed for over ten school days and the district has not provided notice to of a long-term suspension, parents should ask for the authority allowing the district to keep the child out of school. Since no such authority exists, parents should inform the district the student will return to school on the eleventh day.

### Conclusion

Even though student safety may be involved, Risk Assessments must co-exist and operate within the existing legal framework of student discipline, which, in-turn, imposes parameters on their use. Risk Assessments are evaluations. No matter how emphatically the school mandates that it occur, the reality is Risk Assessments require parental consent and cannot be forced upon a family unless ordered as the result of a special education due process hearing. It is illegal for a school to say a student may not return to school until a Risk Assessment is completed unless it is completed within ten school days (and even then there must be notice of a short-term suspension), or unless the district provides notice of its intent to impose a long-term suspension (in which case, the Procedural Due Process rights applicable to all children come into play and for children with disabilities, IDEA's discipline procedures must also be followed).

In the above "real life" example, that district violated a number of laws when it prohibited the student from attending school for three months pending a Risk Assessment. Most significantly, the district took no action to suspend the student, deprived the student of his right to education, and deprived the student of his procedural due process rights under both State law and IDEA.

Improper use of Risk Assessments is a prominent way in which schools illegally exclude students from school. If the reader is aware of this practice, we encourage you to contact SDAS and/or complete the "Illegal Exclusion Survey" on the SDAS website, [www.sdadvocacy.com](http://www.sdadvocacy.com).

Information on types of risk assessments was gleaned from: Psychology in the Schools, Vol. 38(2), 2001, *Evaluating Risk for Targeted Violence in Schools: Comparing Risk Assessment, Threat Assessment, and other Approaches*, Marisa Reddy, et. al.

General topical information on schools' use of risk assessments was gleaned from: *Risk Assessments can be Risky Business!*, Eric R. Herlan, School Law Advisory, Winter 2014.



### Correction

In the article, "Transition Services - An Introduction on IDEA requirements," in Vol. 30, Iss. 1 (November 2014) of the *South Dakota Report*, it stated, "If the IEP Team determines an individual student does not need services in one or more of the areas above, the IEP must contain a statement to that effect and the basis upon which the determination was made." This language was referenced to an OSEP Policy letter from 1993. However, that requirement was removed in the 1999 regulations. While SDAS believes this practice has merit to ensure all transition services areas are considered, it is no longer contained in IDEA's regulations.

# Law Students and Lawyers Work Together for Sioux Falls Veterans Legal Clinic

by Elizabeth Overmoe

SDAS attorneys, John Hamilton and Elizabeth Overmoe, assisted in the coordination and implementation of the Veterans Legal Clinic at the Veterans Administration hospital in Sioux Falls on March 27, 2015. The six-hour event, hosted by the USD School of Law Veterans Legal Education Group (“VLEG”), assisted over 30 veterans. The goal of the Veterans Legal Clinic was to assist veterans with a variety of legal concerns on a pro bono (free) basis. Our volunteer attorneys met with any veteran requesting assistance to provide guidance and advice for that veteran’s particular legal situation. Law student volunteers were also onsite to complete initial interviews with the vets and introduce them to our volunteer attorneys. Our volunteers provided legal advice and guidance on problems such as employment, Social Security, healthcare, estate planning, family law, and criminal issues. VLEG is hoping to continue this veterans legal clinic each spring in Sioux Falls and may expand to include a legal clinic in the Rapid City area next year.



Photos: (Top Left) Attorney, Jason Krause of Dorothy & Krause Law Firm, discussing legal issues with a law student volunteer; (Top Right) Attorney Bob Nelson of Avera Hospitals; (Bottom Left) SDAS Program Director and Staff Attorney, Elizabeth Overmoe; (Bottom Right) SDAS Legal Affairs Director, John Hamilton; (Middle) USD Law Student Volunteers with attorney Jason Krause and VA personnel Becky Hess.

# What Can Vocational Rehabilitation Do For Me?

by Tim Neyhart

**T**he South Dakota Division of Rehabilitation Services (DRS) is the designated state agency for providing rehabilitation services under the federally-funded Rehabilitation Services Administration Program. This article will provide information about many services that persons can receive from DRS, or “VR” as it is commonly known.

In order to be eligible for VR services, one must have a disabling condition that significantly interferes with his or her ability to get or keep a job, and who needs VR services to overcome these barriers to employment. The services provided by VR are individualized and are specially designed to meet the unique needs of the person with a disability.

The application process is straightforward and relatively simple compared to applications for other government-funded programs. Anyone interested in applying for services should look in the phone book, contact the local library, or contact almost any disability services agency to get information about how to contact the local VR office. After establishing an appointment, a rehabilitation counselor will meet with the applicant and begin the eligibility determination process.

The eligibility determination process begins with establishing that one has a disability that affects the ability to work. The time it takes to complete the eligibility determination process can be reduced by bringing current medical records to the appointment with the counselor. As an alternative, the applicant can provide the counselor a list of the addresses and phone numbers of the doctors, clinics, hospitals or therapists that have been providing one services. VR will have the applicant sign a release of information and request the records. If a person is not currently working with a medical care provider, it is possible for VR to pay for evaluations to establish a medically-based determination of disability. If a person has an obvious disability, the medical review process may be skipped or used to establish the functional skills a person may need to become employed. Persons receiving Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) are presumed to have met the first criteria of having a disability that limits their ability to work.

The other part of the assessment process is to discuss the applicant’s employment history and interests, strengths, and abilities. This information will allow the applicant and counselor to work to identify the type of employment in which one is interested. This process will begin to identify the VR services needed to work toward the goal of employment.

Once the applicant’s eligibility is determined, he or she will work with the VR Counselor to identify and agree on an employment goal. Once this goal is established, one will work with the VR counselor to develop a detailed plan of the services needed to achieve that goal. This plan is known as an Individual Plan for Employment, or an “IPE.”

The IPE is the blueprint for the client’s rehabilitation services. The plan will outline who pays for each service, and will include who, what, where, when, and how the services are to be provided. There are many VR services for which there are no costs to the applicant. However, some of the services needed to reach one’s employment goal may be based on economic need and the availability of other resources. One of the services that requires an economic needs test is payment of college tuition.

VR will require the client to complete an application for government grants to cover costs for this service. Some examples of other resources that may be used to cover the cost of services identified in the IPE include Medicaid, health insurance, and federal grants or benefits. People who are receiving SSI and SSDI are presumed to have met the financial needs test. For other applicants, part of the application process includes gathering financial information to identify possible payment sources for services.

As mentioned earlier, the eligibility process need not take a great deal of time. In most cases, eligibility should be established in sixty days or less. After eligibility is established, the time it takes to reach one’s employment goal depends on the client’s individual needs, the nature of the goal, and the length of time one requires VR services to achieve that goal.

The types of services available to assist someone in their efforts to return to work are varied and significant. The following information was taken from the South Dakota Division of Rehabilitation Services link: <http://dhs.sd.gov/drs/vocrehab/vr.aspx>.

**Assessment for determining eligibility and VR needs** – These services consist of medical and psychological evaluations, as well as a wide-range of vocational assessments, that are designed to help your VR Counselor determine whether you are eligible for VR Services. Diagnostic services may also be needed to gain an understanding of the nature and implications of your disability and to help determine the services you will need to attain your employment goal.

**Vocational Rehabilitation Counseling** – This is one of the most important services that you can receive. It is provided by your VR Counselor throughout the VR process. Your Counselor can help you better understand and adjust to your disability; help you choose your employment goal; help you develop a plan to attain your employment goal; and help you adjust to any changing circumstances caused by your disability. If needed, your Counselor can counsel your family members to help them to better understand your disability and learn how to be supportive of you during the VR process.

*Rehabilitation Services  
(Continued on page 10)*

## **Rehabilitation Services**

**(Continued from page 9)**

**Physical and Mental Restoration** – These services are aimed at enhancing your employability by removing or reducing the effects of your disability. These services may include limited medical or psychological treatment or therapy, orthotic and prosthetic devices, and other services and devices that are likely to remove or reduce the limitations caused by your disability.

**Vocational / Other Training Services** – These services may be provided to help you gain the specific knowledge and skills required to perform the job indicated on your IPE. Training for employment can be obtained at a public or private vocational school, college, or rehabilitation facility. Other options include on-the-job training and job coaching.

**Maintenance** – Maintenance is financial support for expenses such as food, shelter, and clothing that occur due to the individual's participation in a program of vocational rehabilitation services. These expenses must be a direct result of participating in a vocational rehabilitation program and cannot be for normal living expenses.

**Transportation** – DRS can provide financial support for transportation services when you have travel associated with obtaining vocational rehabilitation services.

**Services to Family Members** – DRS can help pay for services to family members if the services are necessary to enable you to obtain an employment outcome.

**Interpreter Services** - Interpreter services can be provided for individuals who are deaf, hard of hearing, or individuals who are deaf-blind and require tactile interpreting services. Other types of language interpreting can be provided while receiving other vocational rehabilitation services.

**Job Related Services** - These services include assistance with your job search, job placement services, and a number of other services designed to help you keep your job once attained. DRS can provide some of these services directly, while in other situations DRS may purchase these services from providers who specialize in this service area.

**Supported Employment** – These services consist of job training and specialized services for individuals with the most significant disabilities to help them obtain and maintain employment. DRS Supported Employment services most often consist of job placement, job coaching, and assisting the individual on the job site to help assure successful employment. The DRS services are time limited with long-term support services provided by another agency or funding source.

**Personal Assistance Services** – This consists of a variety of services to assist an individual to perform daily living activities on or off the job. These services are intended to help individuals gain greater control of their lives by aiding their ability to perform everyday activities as independently as possible. The services must be necessary to the achievement of an employment outcome and provided only while the individual is receiving other vocational rehabilitation services.

**Rehabilitation Technology** - These services consist of rehabilitation engineering, assistive technology devices, and

assistive technology services. Services may initially consist of an evaluation by an assistive technology specialist to help identify accommodations, assistive devices, and services that can help you overcome barriers to your independence in a training situation, at a job-site, or in your home (if needed to enable you to obtain and retain employment). An Assistive technology specialist sometimes recommends modifications to vehicles to make them usable for people to have independent access to employment.

**Transition Services** – Transition services consist of a variety of services needed by high school students or other secondary school students with disabilities to make the adjustment from school to employment. VR Counselors can participate in students' Individual Education Plan (IEP) meetings to provide vocational rehabilitation consultation and technical assistance to students, parents, and faculty members as they plan for the student's future after high school. The most common services provided by DRS for transition students are Project Skills (paid work experience program) and postsecondary preparation programs called Youth Leadership Forum and Catch the Wave.

**Technical Assistance and Other Consultation Services** - DRS can assist individuals who are pursuing self-employment or telecommuting with market analysis, development of business plans, and other resources if needed.

**Self-employment Services** - DRS can assist individuals whose goal is self-employment with such things as occupational licenses, tools, equipment, and initial stocks and supplies when needed. DRS has a self-employment policy defining the level of financial participation from the VR program. If you are seeking self-employment, consult with your VR Counselor on this policy and other resources to assist you.

## **Employment**

The primary objective of the vocational rehabilitation program is to assist individuals with disabilities to find employment that is consistent with their strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice. Your plan for employment can include services to assist you in obtaining employment and keeping the job. After you obtain employment, your vocational rehabilitation counselor will follow-up to make sure everything is going well and that both you and your employer are satisfied.

Your employment needs to be in the most integrated setting possible. For most individuals, this is employment in the community working for an employer. The Division of Rehabilitation Services can assist individuals to become self-employed as an employment option. Individuals seeking self-employment as an employment objective will be required to complete an assessment of their business potential and to complete a small business plan.

## **Case Closure**

When your employment, as described above, has been maintained for at least 90 days, your VR case can be closed as successfully rehabilitated. You and your VR Counselor

**Rehabilitation Services**  
**(Continued on page 11)**

## **Rehabilitation Services**

**(Continued from page 10)**

will need to agree that your employment outcome is satisfactory and you are performing well on the job.

Your case can also be closed in situations where you have been determined ineligible, you have requested your case file closed, for lack of cooperation on your part, or other reasons. When your case is closed, you will be notified of case closure. You will be provided information as to why your case is being closed, information on the Client Assistance Program, and an opportunity to discuss the case closure with the VR Counselor. When your case is closed, you can reapply for services at a later date.

### **Post Employment**

If your VR case has been closed as successfully rehabilitated, you can receive post employment services to help with your employment. Post employment is very goal specific and short-term in nature. If you require a number of services over an extensive period of time or you have lost your employment, your VR Counselor may suggest that you re-apply for VR Services. If you are approved for post employment services, you and your VR Counselor will jointly develop an amendment to your Individualized Plan for Employment.

Not everyone who qualifies for VR services will want or need all of these services. You have a right as the client to help in the selection of the services that you need and in identifying who will provide the needed services to you. It is important that you are informed about the services you will need to begin or return to work. It is also important that you work closely with your VR Counselor. All services a person requires for their IPE must be preauthorized before VR is allowed to pay for them. If you believe that you need a service or support, you must work with the VR Counselor to assure that the VR Counselor has agreed and authorized VR to pay for that service. If you do not follow this process, it is possible that you will be required to pay for the service yourself.

VR has developed a new service designed to assist people to return to work called an "Employer Paid Work Experience." The following is a copy of a Program Guide from the state agencies that describes this service in detail.

**TO: All DRS/SBVI Staff**

**FROM: Eric Weiss, DRS Director; Gaye Mattke, SBVI Director**

**Draft: PROGRAM GUIDE DRS/DSBVI 2015-02**

**March 3, 2015**

**SUBJECT: Employer Paid Work Experiences**

Effective immediately, the Divisions of Rehabilitation Services (DRS) and Service to the Blind and Visually Impaired (SBVI) will participate in supporting costs related to obtaining or maintaining employer paid work experiences.

Many vocational rehabilitation (VR) clients could benefit from working in temporary employment or employment not directly connected to their career goal. This employment is beneficial for them to build basic employment and work hardening skills as they work toward their career goal.

Vocational rehabilitation currently assists with job readiness training through classes in a non-work environment; but does not consistently provide job readiness training in a real work environment beyond the current paid work experience programs.

This Program Guide provides guidance to support that VR Services can be provided to a person to assist them in obtaining or maintaining an employer-paid work experience. This Program Guide further addresses situations in which employment services are allowable for a job that is not the employment goal on the Individual Plan for Employment (IPE).

### **When is an employer paid work experience appropriate?**

- ◆ Individual has difficulty getting or keeping employment;
- ◆ Youth with disabilities and / or limited work history (Project Skills should be utilized if available);
- ◆ VR Client is attending a post-secondary program and would benefit from additional real work experience; or
- ◆ VR Client is participating in a training program and would benefit from additional real work experience while completing their training.

### **Required documentation**

- ◆ Services must be pre-approved and identified on an IPE;
- ◆ IPE services include description of work and social skills to be developed.

### **What services are typically authorized?**

- ◆ Job Placement Services
- ◆ Job Coaching Services
- ◆ Follow Along Services
- ◆ Work clothes and other items required on the job if financial need is met
- ◆ Other disability related services needed during the work experience

If you have any questions on the content of this policy, please contact the DRS or SBVI Assistant Director at 1-800-265-9684.

This service should be of great value for people who have little or no work experience, as it provides supports to gain work experience while working on one's overall employment goal. The opportunity to develop work experience, have a relationship with an employer who can be available to provide job references, and experience the social aspects of working may make the difference between successfully becoming employed long-term and not becoming employed at all.

As an applicant and a client, it is important to stay in touch with your VR Counselor and work to create a good relationship with him or her. There are times when a client or applicant may need assistance in addressing some issue with the Counselor or the VR program. If this happens, the applicant or client has a right to contact the Client Assistance Program for assistance. The Client Assistance Program is a component program of South Dakota Advocacy Services and can be reached by calling 1-800-658-4782.

# New Resources Available for Transition-Age Students / Parents

South Dakota Advocacy Services (Valorie Ahrendt, John Hamilton), along with South Dakota Parent Connection (Paula Souhrada) and LifeScope (Tisha Degross, Nicholas Carrierdamon), have teamed-up to develop and create colorful two-sided “Infographics.” The documents provide information on the Transfer of Rights process, Power of Attorney, and Guardianship/Conservatorship. Because the rights of students and parents are different in these areas, there are separate documents explaining these rights from the student and parent/guardian perspectives.

Information graphics, or **infographics**, are graphic visual representations of information, data, or knowledge intended to present complex information quickly and clearly. Thinking about what will happen when a child with a disability becomes an adult can be an anxiety producing time for all involved. The team wanted to make the legal topics easier for students and parents to understand so they could make informed decisions as a family.

The initial feedback has been very positive from parents, students, and school districts. Ideally, school districts will provide these documents to students with disabilities and parents at the IEP meeting prior to the student turning age seventeen (the meeting where schools must inform students and parents about the transfer of rights at age eighteen). The team is currently working on distribution. In the meantime, they are available at all South Dakota Advocacy Services and South Dakota Parent Connection offices, as well as at the former South Dakota Achieve building of LifeScope.



For Parents/Guardians



For Students



## Stop Me If You Have Heard This Before . . . About Parent Training

by Gail C. Eichstadt

Children with disabilities were guaranteed the right to a free appropriate public education by the Education for All Handicapped Children Act (Public Law 94-142) in 1975. Congress reauthorized EAHCA several times, most recently in December 2004 as the Individuals with Disabilities Education Improvement Act (IDEA). Educators should be familiar with IDEA’s requirements and follow them. Despite IDEA’s requirements, SDAS staff continue to hear an amazing amount of poor information provided by school staff at IEP meetings!

At an IEP meeting for an elementary child whose disability included challenging behaviors, SDAS requested parent training to assist the parents with the behaviors related to the child’s disability. The special education director ended the discussion on the proposal by stating, “Parent training should be provided by the Family Support 360 program.”

Parent counseling and training has long been included in the description of related services under IDEA. It is a related service to help parents understand their child’s special needs.

34 C.F.R. § 300.34(c)(8). Districts may provide parent training on child development and to train parents on the needed skills to support the implementation of their child’s individual education program (IEP). Parent counseling and training can be crucial to the success of the IEP, especially where there is a need for consistency between school and home.

The special education director and IEP team should have considered the parent training request. The denial on the proposed parent training was not mentioned on the Prior Written Notice given to the parents after the meeting. If denied, the parents could have appealed the decision through a State Complaint or due process hearing. See 34 C.F.R. § 300.153, filing a State Complaint; 34 C.F.R. § 300.507, filing a Due Process Complaint. Parent counseling and training included on an IEP must be provided to parents at no cost.

Parent counseling and training is a helpful tool for IEP teams. All IEP teams should consider its use when developing an IEP for a child needing special education and related services.

# Arens Retires

**I**rma Arens, Advocacy Services Representative Assistant, is retiring on April 30<sup>th</sup> after twelve years with SDAS. She began working for SDAS on February 1, 2003, as Administrative Assistant to Twila Stibral and Lynne Cain in the Yankton office. After Lynne's retirement in 2007, Irma began to assume more duties and was recently promoted to Advocacy Services Representative Assistant.

Irma and her husband, Allan, have two married daughters: Sandra Adam-Sias (Rey), who lives in Las Cruces, New Mexico; and Joei Harris (Todd), who resides in Bennington, Nebraska. They are the proud grandparents of five granddaughters and two grandsons and are hoping to spend more time with all of them upon retirement.

Irma is also looking at retirement as an opportunity to play a lot more golf. Traveling to a warmer climate in the winter may also be on her agenda.

Irma states, "I have truly enjoyed my time with SDAS and will miss all



**Irma Arens**

my co-workers and the friendships that we have developed throughout the years. My door is always open and would love to see any of you who may be traveling in the Crofton area."

Although Irma will be deeply missed by her co workers and people she assists, we wish her many years of adventurous travel, joyous times with family, and fun in the sun!

# New Advocacy Services Representative Assistant in Yankton

**H**eather Kotalik began her employment with South Dakota Advocacy Services (SDAS) in the Yankton field office on April 6, 2015. Heather is the Yankton office's new Advocacy Services Representative Assistant. She will perform both administrative tasks and assist Twila Stibral (PATBI Director) with cases.

Heather graduated with an A.A.S. in Business Administration from National American University Online in 2008. She graduated in 2014 from Mount Marty College in Yankton, SD, with a B.A. in Psychology and a minor in Spanish. Prior to her employment at SDAS, Heather worked at Abilities Building Services in Yankton.



**Heather Kotalik**

Heather was raised on a farm near Wagner, SD, where her love for country living began. She enjoyed taking care of her horses and helping her parents on the farm. She is married to Joe Kotalik and has three children (Mackenzie 12, Karli 9, and Colt 2). They have recently moved to an acreage and own a trucking company.

Heather enjoys riding horses, helping her parents with their cattle, spending time outside, and is looking forward to adding horses to their acreage in the future. SDAS welcomes Heather to the agency and looks forward to working with her.

# New ASR in Pierre Office

**C**indy J. ("C.J.") Moit began working as an Advocacy Services Representative in the Pierre office on January 1, 2015. She is working in the PADD, CAP, PAIMI, PAIR, and PAAT Programs.

C.J. worked for thirteen years as a Service Coordinator for South Dakota's Birth-to-Three Program prior to her employment with SDAS. She is also a Year 12 graduate of Partners in Policymaking.

C.J. had contact with SDAS for a number of years through her employment and through Partners. C.J. is excited to be able to work for SDAS. "I decided I wanted to move into a job where I can help persons with disabilities of all ages. I look forward to many years with SDAS helping others." When not working, C.J. enjoys

reading, gardening, cooking, and playing with her grandchildren and pets (two dogs, two lizards, fish, and a rat).



**C.J. Moit**



# Five Sessions Completed - Year 23 Readies for Graduation

by Sandy Stocklin Hook

**W**ith five of six sessions completed, Year 23 of SD Partners in Policymaking is looking forward to graduation. The Class of 2015 is very diversified and come from all corners of South Dakota. Over the past five months, the 27 participants have gathered in Pierre one weekend a month to learn to be self-advocates and leaders. They have learned how to empower themselves and others.

The class theme/motto for Year 23 is "Out of the Darkness ... Into the Light." Graduation and continuing education for past graduates was April 24-25, 2015, and will receive full coverage in the July edition of the *South Dakota Report*.

## DECEMBER TRAINING

SDAS Legal Affairs Director, John Hamilton of Sioux Falls, presented on the Individuals with Disabilities Education Improvement Act of 2004 - IDEA. Hamilton helped the class understand the law and the IEP process and answered questions regarding parental rights.

Hamilton also discussed *How To Be A Superhero For Your Child* and explained discussion points that apply equally to parents and self-advocates. He reminded the group that silence is NOT golden when attending meetings. " Oftentimes you, the parent, are the only advocate for your child at IEP meetings. You need to know what your child needs and go after that."

Dr. Patrick Schwarz provided valuable insight and actual experiences for successful inclusion in educational settings. "Inclusion means everyone belongs everywhere - in our schools, in our community, in our work places," exclaimed Schwarz, a professor at National-Louis University in Chicago. "Successful school inclusion can lead to successful community inclusion." He encouraged Partners to be creative, to think outside the box.

Tim Neyhart, SDAS Executive Director, discussed transition and how it is never too early to start thinking about transition and formulating a plan. "Parents, talk to your student about what they want to do and what supports they

will need to accomplish this goal," stressed Neyhart. "Take your child to the IEP meeting. Let their voice be heard."

## JANUARY TRAINING

This session centered on the legislature - from meeting and working with your legislators to the importance of providing public testimony. Presenter David Hancox, a lobbyist from Minnesota, told the class, "No one can tell your story like yourself. You have the details, the knowledge, the heart. You can be an effective lobbyist for your cause." He told them, "Don't be afraid to talk to your elected officials, they work *for you*. They are regular people. You are a resource to legislators on all levels and what you bring to the table is important." Hancox shared pointers on providing effective testimony, such as always telling the truth and admitting when you do not know the answer, but volunteering to find the answer. He also discussed campaigns and coalition building and using the media effectively.

After time for preparation, the class used their newly-acquired skills to provide mock testimony on current bills before the SD Legislature. Helping the class to calm their nerves and give them tips and pointers were bill coaches Gail Eichstadt of SDAS; Robert J. Kean, Dennis Hook, Arlene Poncelet, Tom Scheinost, and Craig Eichstadt of Pierre; Elaine Roberts of Sioux Falls; and Vikki Day of Highmore. C. Eichstadt is a Year 14 graduate of Partners and Day graduated in Year 10. Kean is the former Executive Director of

SDAS. Roberts is the Executive Director of SD Parent Connection and former legislator. Poncelet is the Executive Director for the South Dakota Council on Developmental Disabilities. Hook is a former lobbyist at the SD Legislature. Scheinost is a former director for the Division of Developmental Disabilities and lobbyist.

Senators and Representatives from the SD Legislature, along with Lt. Governor Matt Michels, served on the legislative panel. Those guests included Representatives Paula Hawks of Hartford, and Jacqueline Sly and Brian Gosch of Rapid City. Hawks serves as a House Minority Whip and Gosch is the House Majority Leader. Senators on the panel included Angie Buhl-O'Donnell of Sioux Falls, Mike Vehle of Mitchell, and Assistant Senate Minority Leader Troy Heinert of Mission. The class also viewed the House and Senate in action and met for a photo with Governor Dennis Daugaard.

Neyhart and Shelly Pfaff, Executive Director for SD Coalition of Citizens with Disabilities, spoke on the Americans With Disabilities Act. Kean explained how to use the Legislative Research Council's web page to track bills, view committee action, etc.

## FEBRUARY TRAINING

Neyhart provided a history of Social Security. He described how it started and where the program is at today.

*Partners in Policymaking*  
(Continued on page 15)



Tania Kostal, Wendy Figland, and Kraig Leichtenberg (l-r) providing mock testimony before the legislative panel

## Partners in Policymaking

*(Continued from page 14)*

Continuing the political theme from January, the class had a panel presentation of types of local government. Panel members were Leon Schochenmaier, Pierre City Administrator; Hughes County Manager, Kevin Hipple of Pierre; Cari Leidholt, Pierre School Board; and Tribal Affairs Secretary, Steve Emery. The panel described the similarities and differences in their governmental bodies, and how individuals are invited to attend meetings and can get on the agenda. Each encouraged the Partner participants to be active in their local governmental agencies.



Participants Carrie King (l) and Tara Boechler (r) with Governor Dugaard

Pat Czerny of DakotaLink in Rapid City discussed and demonstrated assistive technology devices and how assistive technology can make the difference between being dependent and becoming independent. He gave a "hands-on" demonstration of how devices work and can make things simpler and easier for all people.

Jim Kellar of Freeman discussed how to have effective meetings, be in control of the meeting without being aggressive, and how time management can make the difference between a successful or out-of-control meeting. He shared the importance of including everyone in the meeting, how to listen to ideas, how to effectively summarize what you heard, and how to get a group to work as a team. He spoke of self-advocacy skills and the importance of knowing who you are and what you want. "It is important your voice be heard. You need to learn the importance of negotiating. This is a skill that will last a lifetime and create allies, not adversaries."

Kellar also introduced the Talking Circle, wherein everyone is given an equal opportunity to speak without interruptions or judgment. A talking piece is shared among the participants and a person can only speak when in possession of the talking piece. When finished speaking, the piece is passed to the next person in the circle. When not speaking, the participants are taught to listen with open ears and open hearts. Kellar stressed the importance of effective listening skills. "Listening is an art and sometimes listening is a lost art. You need to listen and respect others as they speak. If you are a good listener, you can help affect attitudes, lives, changes, and personalities."

### MARCH TRAINING

Neyhart continued his Social Security training by discussing who qualifies and why, and what happens when a Social Security recipient returns to work.

Dr. Wayne Duehn of Arlington, TX, made his 17th trip to South Dakota to present to Partners in Policymaking. Duehn explained how to detect abuse and neglect, both physical and sexual. He discussed where, how, and to whom it should be

reported, the profile of the perpetrator, and how abuse and neglect occurs everywhere, and "yes, even in South Dakota." He went on to say, "Sexual and physical abuse of our elderly, children, and individuals with disabilities is on the rise and you need to know the signs and how to stop it."

Duehn provided an overview on human sexuality issues, including suggestions of what and how to educate young children of all abilities the importance of "it is your body and it is private." He told the group "no is no and teach your children to say NO."

Dennis Hook, Pierre, a Senior Master 4<sup>th</sup> degree black belt in Tae Kwon Do, taught Tai Chi and self-defense moves that can be used by everyone, including those with limited movement and mobility. He also gave a Child Abduction Prevention Seminar with assistance from Gabby Thompson, a member of the Pierre Tae Kwon Do Club.

Desiray Nelson of Onida, a Year 20 Partners graduate, and Angela Lisburg of Pierre spoke about Child Advocacy Centers in South Dakota (CACSD). This organization promotes the development, cultural awareness, growth, and continuation of child advocacy centers in SD through education and training, mentoring, collaboration, advocacy, development of child advocacy centers, and legislation.

The final session of Year 23 was April 24-25, 2015, at the Ramkota Hotel in Sioux Falls. The weekend included continuing education, Common Grounds, and the graduation banquet and ceremony. Partners in South Dakota is funded in part by the SD Council on Developmental Disabilities; Center for Disabilities at the Sanford School of Medicine at USD; SD Parent Connection; and the PADD, PAIMI, and PAIR Programs of SD Advocacy Services, which also facilitates and coordinates the training.



Group Presentation during the February session

**South Dakota Advocacy Services**  
**221 S. Central Avenue, Suite 38**  
**Pierre, SD 57501**  
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**CHANGE SERVICE REQUESTED**

## Intellectual and Developmental Disabilities and TBI Awareness Month

Staff from SDAS, along with a great representation of friends from Oahe, Inc., attended a proclamation signing at the Ft. Pierre City Council. Mayor Gloria Hanson read a proclamation declaring March as Intellectual and Developmental Disabilities and Traumatic Brain Injury Awareness month in the city of Ft. Pierre. She presented the proclamation to SDAS Executive Director, Tim Neyhart (below). The Pierre City Council read and signed a similar proclamation (right). Governor Dennis Daugaard also signed a proclamation declaring the same state-wide.



## *Calendar*

- ◆ **June 3-4, 2015** - YAMWI Conference, Mount Marty College, Yankton
- ◆ **June 11-12, 2015** - Lighting the Way Conference, Augustana College, Sioux Falls
- ◆ **July 13, 2015** - 25th Anniversary ADA Celebration, 8:15 - 4:15, Hilton Garden Inn, Sioux Falls (*see announcement, page 7*)
- ◆ **September 20, 2015** - Partners in Policymaking Application Deadline

