

**Schools for
All Children**

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**The Los Angeles Unified School District's
Position Paper
Related Services**

ADAPTED PHYSICAL EDUCATION

BACKGROUND

The many benefits of physical activity have been documented through years of research. These benefits include increased muscular strength, stimulation of bone growth, cardiovascular fitness, and flexibility or range of motion, which enable the body to move and function more efficiently and contribute to personal health. In addition, individuals can attain higher levels of functional movement, fundamental movement patterns and sport skills through physical activity. The attainment of these skills and patterns promotes a higher quality of life and greater opportunity for social interaction with others.

Quality physical education programs provide opportunities for students to attain movement skills and knowledge that can be applied to physical activities across their lifespan. Current research indicates that physical activity helps contribute to increased academic performance, reaction time and brain stimulation. The President's Council on Physical Fitness & Sport (1999) has published a position statement regarding physical activity and individuals with disabilities. Individuals with disabilities, for the most part, can gain very similar benefits from physical activity and the accrued physical fitness as people without disabilities.

All children, unless specifically excused or exempt, are required participate in a physical education program. See California Education Code (CEC) § 51222 and exemptions in Cal. Educ. Code § 51241. The Individuals with Disabilities Education Improvement Act of 2004 (IDEA) and Federal regulations define "special education" as specially designed instruction to meet the unique needs of a child with a disability, including instruction in the classroom *and instruction in physical education*. 20 U.S.C. § 1401(29); § 34 C.F.R. § 300.26. Like all special education, physical education should be provided in such a manner that promotes maximum interaction between children with disabilities and their non-disabled peers.

California Code of Regulations, Title 5, section 3051.5, provides:

"Adapted physical education is for individuals with exceptional needs who require developmental or corrective instruction and who are precluded from participation in the activities of the general physical education program, modified general physical education program, or in a specially designed physical education program in a special class. Consultative services may be provided to pupils, parents, teachers, or other school personnel for the purpose of identifying supplementary aids and services or modifications necessary for successful participation in the regular physical education program or specially designed physical education programs."

PURPOSE

The purpose of this document is to identify program guidelines that clarify the array of physical education services provided to students within the Los Angeles Unified School District (LAUSD). Service Delivery models (SEE APPENDIX A) for adapted physical education will be described and aligned with the three-tiered models of prevention and intervention. In addition, this paper will describe the expectations for service completion.

Section I: Pre-referral Response to Intervention and Instruction (RtI²)

Section II: Assessment and Eligibility for APE Services

Section III: Adapted Physical Education Intervention within Special Education

Section IV: Adapted Physical Education Service Completion Guidelines

Adapted Physical Education (APE) is an instructional program within the spectrum of physical education options, which is taught by a credentialed APE teacher. The teacher provides curriculum-based and prescriptive instruction for students identified as eligible for service as well as pre-referral assistance to schools and general education teachers. Each teacher works within a comprehensive service delivery model that complies with legal mandates and best meets the needs of the child. In addition, services may be supplemented through collaboration with a variety of team members (such as teachers, speech specialists, psychologists, parents, occupational therapists and physical therapists, medical personnel, and others) to provide an integrated and consistent program for students with disabilities.

Instruction in APE provides the foundation for learning and performing psychomotor skills, so that students with disabilities can more fully, safely and with satisfaction participate in movement programs, recreation, sport and physical fitness activities with their non-disabled peers. The APE teacher teaches in all domains of learning with an emphasis on the psychomotor area. Instruction is provided in communication, cognitive, social, behavioral, perceptual and daily living domains in the context of gross motor skill development. Student preferences and interest are considered in program planning as well as coordination of services and resources.

POSITION

The District believes that in an effort to ensure a successful school experience for all children that:

1. All students with gross motor delays will be provided with physical education intervention programs.
2. The gross motor needs of this group of students be addressed early in their education.
3. Students with significant motor delays be referred for an APE evaluation after they have had the opportunity to:
 - Participate in an intervention program for a specified period of time;
 - Have their progress monitored; and
 - Have their response to the provided interventions be evaluated for effective progress or a need for an adapted physical education evaluation.
2. A parent may, at any time, request an adapted physical education evaluation. Upon receipt of the request, the District will follow special education policies and procedures for attending to the parent's request.

4. Students found eligible for special education services, due to gross motor delay will have an Individualized Education Program (IEP) that focuses on student access to and achievement in the educational program.
5. Students receiving Adapted Physical Education (APE) services will have the opportunity to participate with their non-disabled peers.

SECTION I

PRE-REFERRAL AND RESPONSE TO INSTRUCTION AND INTERVENTION (RtI²)

Response to Instruction and Intervention (RtI²) is a systemic multi-tiered framework that guides the development of a well-integrated and seamless system of instruction (e.g. literacy, numeracy, language development, and positive behavior support across content areas), and intervention that is matched to student need and directed by student outcome data from multiple measures. (BUL- 4827.1 Multi-Tiered Framework for Instruction, Intervention, and Support)

The RtI² framework establishes a process for providing increasing levels of instructional time and intensity whereby the needs of all learners are identified, supported early, and effectively, and high performing students have access to acceleration in learning. The RtI² framework is based on the provision of good, quality, first instruction and the use of data to identify students for appropriate acceleration and interventions. RtI² implementation is everyone's responsibility and advances student achievement through frequent progress monitoring, ongoing data collection and analysis as well as the provision of immediate, evidence-based intervention for students who need it. For the school based provider, this may include consultation regarding the normal acquisition motor skills and monitored interventions to address mild weaknesses in gross motor skills.

Physical Education Instruction Within the five essential components of RtI²:

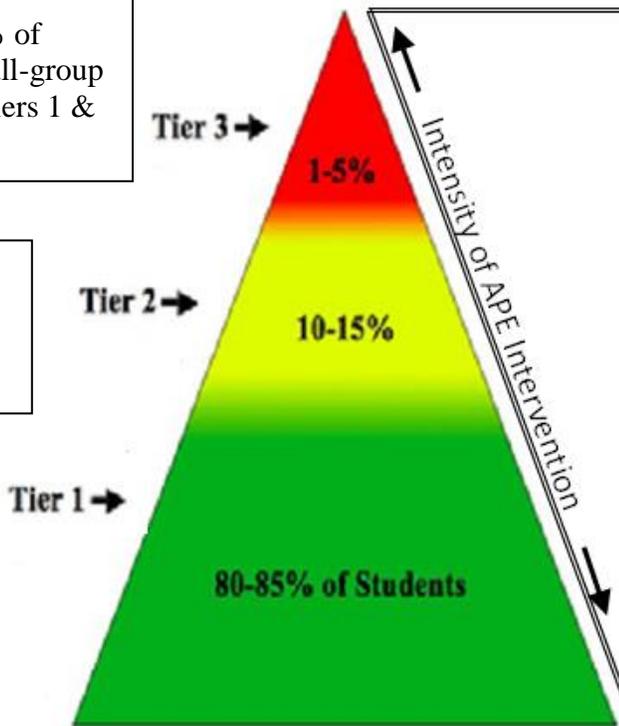
- Multi-tiered framework to instruction and intervention
- Problem-solving progress
- Data-based decision-making
- Time spent physically active and engaged
- Professional development

In a multi-tiered approach to instruction and intervention, teachers provide instruction at each tier of service that is differentiated, culturally responsive, data-based and aligned to the grade-level California Physical Education Model Content Standards. The Adapted Physical education teacher is an integral part of the RtI² process in the general education setting. By participating in this intervention approach, the APE teacher contributes expertise to the problem solving process and provides strategies for any student who may evidence challenges in the area of motor development. The problem solving process requires a step-by-step focus to define the problem, analyze why the student is unable to achieve physical education standards, implement intervention strategies and evaluate the response to the instruction and intervention.

Tier 3: Intensive Instruction and Intervention
 “Intensive Intervention,” is for an estimated 1-5% of students who need individualized and/or very small-group instruction that is highly focused, in addition to Tiers 1 & 2, and designed to accelerate student progress.

Tier 2: Strategic or Supplemental Instruction
 It is expected that 10-15% of students will need additional time and type of instruction to learn successfully.

Tier 1: Core Instruction
 It is expected that of all of the students receiving core instruction, 80-85% of students will be proficient when good first instruction is delivered.



A Problem Solving Cycle in General Education
 (For Students with Gross Motor Weaknesses)

Identification

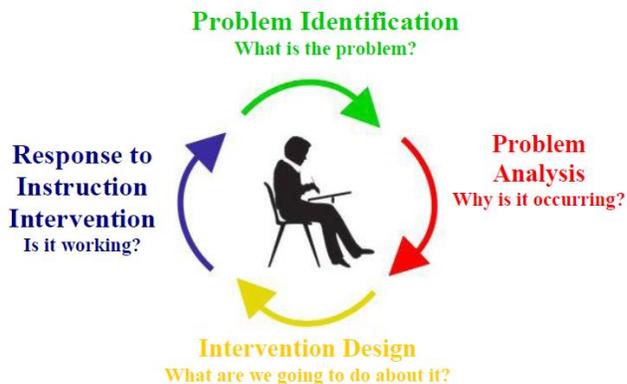
APE teachers may be called upon to assist in the identification of gross motor issues students may be experiencing.

Problem Analysis

APE teachers are highly trained experts in the identification of gross motor deficits in children and are a valuable resource in the analysis of movement patterns.

Intervention Design

APE teachers will assist classroom and general physical education teachers with lesson design and physical education pedagogy for child with disabilities.



Response to Instruction and Intervention

APE teachers will also assist the classroom and general physical education teachers with the measurement and evaluation to determine the success or failure of the program design. Frequent progress monitoring and ongoing data

collection and analysis are used continually throughout the school year to determine the level of intensity and support necessary for individual students.

Intervention Strategies

Tier 1: Core, Universal Instruction

Within the Tier 1 level of services, the APE interventions are focused on increasing the general knowledge base of teachers regarding motor development and effective physical education teaching practices. APE teachers may provide informal consultation to school staff; classroom teachers and general physical education teachers.

The consultations may include:

- Identification of different instructional strategies, modifications, and adaptations that will benefit all of the students in the class.
- Often, students with mild disabilities participate successfully in general physical education if rules are modified, accommodations are made and/or equipment is changed, or provided with a peer tutor or "buddy".

Tier 2: Targeted, Supplemental Interventions & Supports

Within the Tier 2 level of services, the APE teacher may screen a child to assist school staff in determining the appropriate level of intervention for that child and to establish measurement criteria. Screening should not be confused with assessment, as placement decisions in special education cannot be based upon information obtained from screening. Care must be exercised not to single the child out when screening, as this is assessment and would require an assessment plan.

The screening process could include:

- Review of school records.
- Consultation with the classroom teacher or other school staff.
- Parent interview/report.
- Student Success Team (SST) action plan or 504 accommodation plan.
- Observation of an entire class.
- Physical Fitness Test Results.

Screening may entail a review of any general education program, such as a teacher's class or an entire grade level. All individuals in the class or grade level are seen for brief periods of time. Since all members of a given group receive the same treatment, this type of screening is not considered to be individual in nature, as it does not target a specific child. It is important to ensure that children are not singled out.

Information obtained from screening can be used to determine the need for a referral to APE or to identify other adaptations, accommodations, or modifications needed for a child to participate in the general physical education program. It is recommended that interventions and their outcomes be documented for a reasonable period of time.

Tier 3: Intensive, Individualized Interventions and Supports

Within the Tier 3 level of services, the APE teacher may utilize the screening observations to assist school staff with the SST process, monitor student progress, and identify specific individual interventions.

After reasonable interventions have been attempted and documented, a determination may be made that a formal APE assessment is appropriate to determine the child's needs. If the intervention is successful then there is no need to progress to Section II.

SECTION II ASSESSMENT AND NEED FOR SERVICES

The mission of the Division of Special Education is to provide leadership, guidance, and support to the school community in order to maximize learning for all students within an inclusive environment so that each student will contribute to and benefit from our diverse society.

The Individuals with Disabilities Act (IDEA) defines many parameters of the referral, assessment, and review processes. The purposes of screening within general education are to identify other adaptations, accommodations, or modifications, or to determine whether assessment is needed for the purpose of identifying a child's needs and potential special education services.

If the student is eligible for special education under IDEA, and is enrolled in general or specially designed physical education, an IEP team meeting will be held to determine appropriate adaptations, accommodations, or modifications to attempt within the current physical education setting.

There are no specific placement criteria established in federal or state statutes or regulations for APE services. Frequently, poor performance on motor tests indicates that the pupil is demonstrating difficulty with movement skills or performance. Scores and age-equivalents used to indicate poor performance are: a raw score which falls 1.5 standard deviations below the mean, a raw score which ranks at the 7th percentile or below, or an age equivalent which indicates the child is functioning at 30% below chronological age.

In some instances, the disability of the child is so apparent that a referral to APE is appropriate without implementation of adaptations, accommodations, and modifications. However, on the IEP, it should be documented that these have been considered. This will assist in communicating with future examiners and service providers.

Sometimes, the nature of disability is such that even though the student performs within normal limits on standardized motor tests or on developmental scales, performance in physical education continues to be adversely affected. In these specialized cases where a child's disability interferes with educational performance in physical education, the IEP team, with direct input from the APE teacher, may determine that APE services are appropriate.

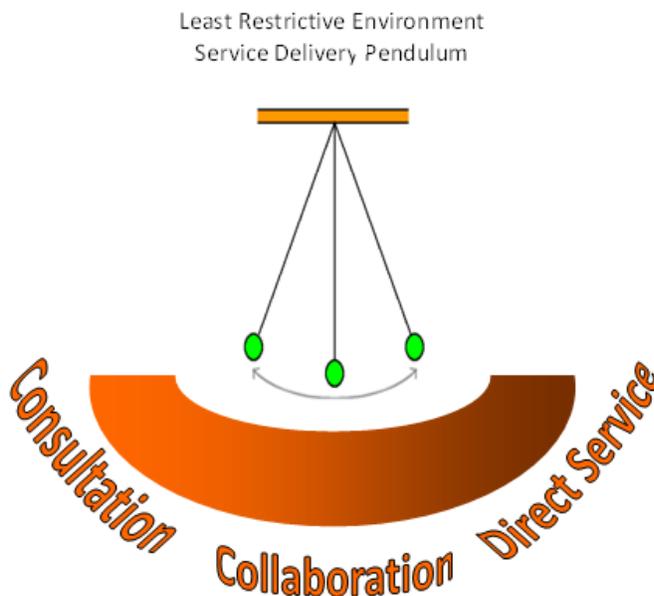
Students with disabilities, which are temporary in nature, are not eligible for special education and/or related services as the disability will diminish significantly or will disappear over time. Some examples are broken bones, pulled ligaments and muscles, and infections. Since APE is

a special education service, children with temporary disabilities are not eligible for APE services. However, some students with temporary disabilities may need accommodations within general or specially designed physical education.

SECTION III SERVICE DELIVERY MODELS WITHIN SPECIAL EDUCATION

Adapted physical education services include special education intervention in the areas of perceptual motor skills, physical fitness, locomotor skills, object control and adaptive behaviors following a comprehensive assessment by an adapted physical education teacher. It is the position of the District that physical education intervention is dynamic and is implemented using an array of service delivery models which change as the needs of the student change to meet their ongoing needs to access their core curriculum. The APE teacher designs evidence-based educational programs school-wide in the least restrictive environment to meet students' needs throughout the school year. No one single service delivery model is necessarily used exclusively during intervention.

The District supports a variety of strategies for the delivery of APE services, including consultation, collaborative and direct service models. Delivery of services may fall into these 3 categories and like a pendulum, service delivery may swing back and forth between less intense to more intense depending on the level of support needed at any given time to meet the student's core academic program needs:



- **Consultation** is a service provided indirectly to the student consisting of regular review of student progress, student observation, accommodations and modifications or core material, developing and modeling of instructional practices through communication between the general education teacher, the special education teacher, parent and/or related service provider.

- **Collaboration** is a service by which general education teachers, special education teachers and/or related service providers work together to teach students with and without disabilities in the classroom. All are responsible for direct instruction, planning and delivery of

instruction, student achievement, progress monitoring and discipline to support the student goals and objectives and to access the curriculum.

- **Direct Service** is instruction or service by a single special education provider designed to support bridge and strengthen student skills. It is an opportunity to provide specific skill instruction, re-teach, pre-teach, and scaffold instruction to support student goals and objectives and to access the curriculum.

Many children with disabilities can participate in the general physical education program because their disability requires only minor adaptations, or does not affect their performance in physical education at all. Students with disabilities must have the opportunity to be successful in general physical education, until it is determined that they cannot access the curriculum. Sometimes, assessment results indicate that general physical education will not be safe or appropriate for an individual with a disability. However, when interpreting assessment information, it is recommended that the IEP team, with significant input from the APE teacher, consider actual outcomes of opportunities the student has had to participate in general physical education.

Specially designed physical education is an instructional program based on the District's Adapted Physical Education curriculum and designed for children with disabilities who are in a Special Day Program and cannot benefit from participation in general physical education. Goals may or may not be identified for these students. An appropriately credentialed APE teacher and/or a special day program teacher shall teach specially designed physical education for students with severe disabilities.

It is recommended that general and adapted physical educators use a collaborative and/or consultative approach to provide the maximum amount of joint participation between disabled and non-disabled children.

The general classroom teacher, general physical education teacher, or special day program teacher should be aware of the goal(s) stated on the IEP and should reinforce skills taught by the APE teacher. The IEP team should indicate on the IEP how coordination would occur between school personnel. All providers are expected to report progress of students with disabilities, on their caseload, toward meeting IEP goals and objectives. Providers should coordinate with the school site personnel to ensure they are following the school site procedures for reporting.

It is the responsibility of the District to ensure that all students receive the appropriate number of minutes of physical education instruction inclusive of APE instruction. Elementary students are to receive 200 minutes of physical education instruction every 10 days and secondary 400 minutes every 10 days. (Cal. Educ. Code § 56345.)

SECTION IV ADAPTED PHYSICAL EDUCATION SERVICE COMPLETION GUIDELINES

Best practices require that expected outcomes and service completion criteria are discussed with the IEP team upon the initiation of APE services and upon change in services. There are several factors the IEP teams should consider when making decisions regarding adapted physical education service completion:

1. The student's gross motor deficits no longer negatively affects his/her educational performance in general physical education or specially designed physical education program.
2. The student no longer requires Adapted Physical Education as a related/DIS service in order to benefit from his/her special education program.

3. The student consistently demonstrates behaviors that inhibit progress in gross motor development, such as a lack of cooperation, motivation, or chronic absenteeism. In these circumstances the IEP Team should consider the initial eligibility decision since these behaviors may reflect social maladjustment, environmental, cultural, or economic factors rather than an actual disability. The IEP team may also explore alternative services or strategies to remedy interfering behaviors or conditions.
4. The student's needs will be better served by an alternative program and/or service, as determined by the IEP team.
5. He/she graduates from high school or has met the secondary physical education requirement (barring health issues that indicate continued services are necessary to maintain quality of life).
6. He/she reaches the age of 22 years.

RELATED RESOURCES

Adapted Physical Education Guidelines in California Schools, Approved by the California Department of Education Special Education Division August 2001.

Elliott, Judy. *Response to Intervention: What & Why?* The School Administrator. September 2008

Physical Education Model Content Standards for California Public Schools Kindergarten Through Grade Twelve, Adopted by the State Board of Education on January 2005.

REF-4984.1 *Implementing a Multi-Tiered Framework for Instruction, Intervention, and Support* dated March 19, 2010, issued by Los Angeles Unified School District Office of Curriculum, Instruction and School Support.

Stephens, T.L., Sillman-French, L., Kinnison, L., French, R. *Implementation of a Response-to Intervention System in General Physical Education*. Journal of Physical Education, Recreation and Dance. November/December 2010.

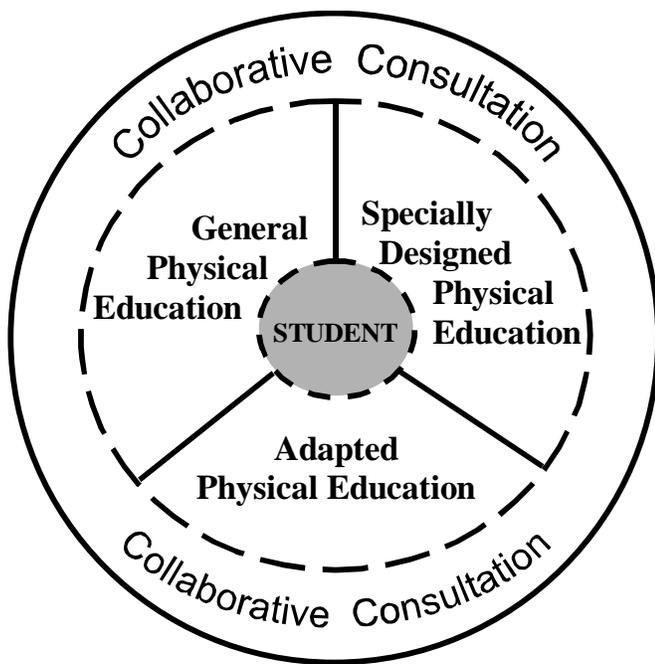
Physical Education Service Delivery Models

General Physical Education:

Movement activities are provided by the general PE teacher and may include accommodations, adaptations, or modifications, which are made by the general PE teacher.

Specially Designed Physical Education:

Is an instructional program based on the District's Adapted Physical Education curriculum and designed for children with disabilities who are placed in a Special Day Program and cannot benefit from participation in general physical education. Goals may or may not be identified for these students. An appropriately credentialed APE teacher and/or a special day program teacher shall teach specially designed physical education for severely handicapped students.



Adapted Physical Education:

APE is a physical education program for children with disabilities who have needs which cannot be solely met in general or specially designed physical education. It is taught by a credentialed APE teacher either independently, with or without aides, or in a team teaching situation with either a general or special educator. Frequency and duration of services, and goals and objectives/ benchmarks, which are monitored by the APE teacher, are identified on the IEP.

Collaborative Consultation: Collaborative consultation in and of itself is not a service. It is a process by which an APE teacher works, with other members of the school team, to plan individualized instruction. Collaborative consultation results in a program that is consistent with the curriculum, setting, and needs of the student and is coordinated with other services and educational activities in which the student participates.

APE Collaborative Consultation could be identified on the IEP as a service that is provided on behalf of the student and assists the student in participating in the less restrictive settings of General or Specially Designed Physical Education.

Sample Adaptations in the General Physical Education Program

Category	Examples
Formation (including space, placement within group, and boundaries of the activity)	<ul style="list-style-type: none"> • Assign a student with asthma, obesity or reduced stamina to infield positions during softball unit. • Place hard of hearing student near instructor when verbal instructions are given. • Reduce the court or field size for student with asthma, obesity, or reduced stamina.
Change form or language used	<ul style="list-style-type: none"> • Use gestures and demonstration to augment verbal communication. • Provide written list of tasks or steps to a student with attention or auditory memory difficulties. • Assign a peer helper to a student with attention, communication, or reading difficulties.
Equipment	<ul style="list-style-type: none"> • Use lighter or smaller sports equipment for a student with reduced strength or small stature. • Make multiple pieces of the same equipment available to increase practice time for students. • Use equipment that moves at a slower speed when students are learning a new skill.
Task or objective (alter skill level to be taught or practiced during lesson)	<ul style="list-style-type: none"> • Reduce the number of repetitions of an exercise for student with reduced strength or mild physical disability. • Set goals for improving individual performance rather than comparing performance with other students. • Allow for additional trials for student with lower skills or mild physical disability.
Environment including social environment	<ul style="list-style-type: none"> • Assign a peer helper to a student with attention, communication, or reading difficulties. • Teacher selects teams. Do not allow student captains to "choose" teams in front of group. • Provide specific feedback and positive comments from peers or teacher.
Players (number, groupings of individuals or organize class into stations)	<ul style="list-style-type: none"> • Teacher structures groups to ensure equality and opportunity to contribute/participate. • Assign peers to model, assist, or augment participation.
Rules (including game rules and class rules.)	<ul style="list-style-type: none"> • Alter rules for inclusion rather than exclusion. • Alter dress code rules during outdoor activities for student who is sensitive to the sun.
Sport specific participation in physical education example	<ul style="list-style-type: none"> • A student with Down Syndrome and the associated cervical vertebrae defects does not participate in diving, gymnastics, wrestling, or other activities that may put pressure on the neck. However s/he may have the ability to participate in all other physical education curricular areas. • A student with uncontrolled seizure disorder does not participate in activities around water, heights or involving moving equipment (e.g., roller skates or bicycles). However s/he may have the ability to participate in all other physical education curricular areas.

Physical Education Model Content Standards for California Public Schools

An Essential Discipline

Physical education is an integral part of the educational program for all students. It teaches students how their bodies move, how to perform a variety of physical activities, the health-related benefits of regular physical activity, and specific skills that will allow them to adopt a physically active, healthy lifestyle. It also provides learning experiences that meet the developmental needs of students. With physical education, students become confident, independent, self-controlled and resilient; develop positive social skills; learn to set and strive for personal, achievable goals; learn to assume leadership, cooperate with others, and accept responsibility for their own behavior; and improve their academic performance.

The model content standards provide opportunities for teachers to reinforce student learning in all areas of the curriculum. In addition, the standards create opportunities for linking the content in English-language arts, science, mathematics, and history-social science with the content in physical education, thereby establishing and emphasizing the many connections between the subjects.

Highlights of the Standards

The *Physical Education Content Standards* will assist schools in establishing specific learning goals and objectives for physical education. A sequential, developmentally appropriate curriculum should be designed and implemented to help students acquire the knowledge, skills, attitudes, and confidence needed to adopt and maintain a physically active, healthy lifestyle.

There are five overall model content standards for elementary and middle school children. They are:

- Standard 1: Demonstrate motor skills and movement patterns needed to perform a variety of physical activities.
- Standard 2: Demonstrate knowledge of movement concepts, principles, and strategies as they apply to learning and performance of physical activities.
- Standard 3: Assess and maintain a level of physical fitness to improve health and performance.
- Standard 4: Demonstrate knowledge of physical fitness concepts, principles, and strategies to improve health and performance.
- Standard 5: Demonstrate and utilize knowledge of psychological and sociological concepts, on principles, and strategies as applied to learning and performance of physical activity.

In the elementary grades, the specific content standards emphasize how students move in their environment, moving through space and time, how they (student and a partner) move in space together, continuity and change in movement, manipulating objects in time and through space, and manipulating objects with accuracy and speed.

In middle school, the specific content standards emphasize working cooperatively to achieve a common goal, meeting challenges and making decisions, and working as a team to solve problems.

For high school youth there are only three overall model content standards. They are:

- Standard 1: Demonstrate knowledge and competency in motor skills, movement patterns and strategies needed to perform a variety of physical activities.
- Standard 2: Achieve a level of physical fitness for health and performance while demonstrating knowledge of fitness concepts, principles, and strategies.
- Standard 3: Demonstrate knowledge of psychological and sociological concepts, principles, and strategies as they apply to learning and performance of physical activity.

The high school experience represents the culmination of physical education. From kindergarten through fifth grade, the content is delivered in small pieces to best facilitate learning at the appropriate developmental level. In sixth through eighth grade, consolidation of content occurs and student skills are refined, representing a natural progression of skill sophistication. When students reach ninth grade, they are ready to integrate all that they know with all that they can do. They experience higher order thinking and increased skill performance. For this reason, the five elementary and middle school model content standards have been combined into the three high school model content standards seen above.

To fulfill the requirement for high school graduation, students must take two years of physical education in high school. In this publication, these two years are referred to as Course 1 and Course 2. The content of these courses will be selected from activities required by the *California Code of Regulations Title 5, Section 10060*.

In addition to Courses 1 and 2, Elective Courses 3 and 4 are available to students. All schools are mandated by *Education Code* to provide physical education elective courses for students after they have completed the two years required for graduation. Course 3 electives allow students to explore a variety of different lifelong activities in search of one they really enjoy. Course 4 electives are designed as a continuation of Course 3 and are intended for students who wish to pursue advanced knowledge and skills. Students who take Course 4 have completed Course 3 and want an intensive experience in an activity that they are committed to for a lifelong activity.