



Many children with [hypoxic-ischemic encephalopathy \(HIE\)](#) have [learning disabilities](#) and other [associated conditions](#) that may make them eligible for special education services. Children who are placed in special education programs should be given an individualized education plan (IEP) (1). The IEP is a legal document covered by the [Individuals with Disabilities Education Act \(IDEA\)](#). IEPs explain the special education services and instruction that will be administered to the child throughout their schooling (2). They cover the specific types of help the child will get at school. As the child grows, the IEP also evolves to include a [transition plan](#) for when the child becomes an adult.

What is in an IEP?

The document outlines several key items (2):



- The child's current abilities, including strengths and weaknesses
- A description of the services the child will receive, as well as how often they will receive them
- Goals for the child's development
- Details about the child's disciplinary rights and the parents' right to be involved in decisions regarding the child's education



- Assistive technology that may be needed for the student
- Accommodations and modifications (like extended testing time) to assist the student
- Related services, such as [speech therapy](#)
- A transition plan into adulthood (when the child turns 14)

Who creates the IEP?

This plan is drawn up by a combination of individuals, which can include:

- The child's parents
- The child's special education teacher
- A district representative
- A test data interpreter
- One of the child's non-special education teachers
- The student (required from age 16 onwards)
- A school psychologist
- An adaptive PE teacher
- Special service providers (such as occupational therapists)

The IEP is designed to maximize the student's abilities and help them to succeed in an academic setting. The team making the IEP can help decide what this success will look like. Depending on the child's disabilities, they may be placed in a regular classroom with support, or they may be placed in a special education classroom, or a combination of the two. Current discourse surrounding special education programs is geared towards helping the student be in the least restrictive environment (ie, an integrated classroom) as much as possible.



Can you change your child's IEP?

The IEP is *not* a static document – as the child grows, and their skills and abilities begin to change, the IEP changes along with the child. IEP meetings are used to review and update the child's IEP (3). The IEP must be reviewed yearly. While it may not be a full-scale overhaul of the IEP, annual reviews help families track how effective the IEP is for their child. Legally, full re-evaluations must happen *at a minimum* once every three years (the triennial evaluation) after the child is designated as requiring special education services. If the parent or teacher requests a re-evaluation, they can occur more frequently (3). During a re-evaluation, the team assesses whether or not the IEP is working – whether or not the student is achieving the goals outlined in the IEP, whether or not the child needs additional supports (and, if so, which supports are needed), and whether the services are being provided in the way that the IEP outlines.

It is important to note that re-evaluations are critical for ensuring the child receives continued appropriate services. The last re-evaluation meeting before the child leaves high school is especially important. If the child will be receiving services in post-secondary education, they will need up-to-date information about their educational needs. Getting a thorough re-evaluation is one way to ensure the child's needs will be met even as they transition into adulthood.



Other facets of special needs services: health planning

While the IEP is the most well-known plan for children with disabilities, children with complex health needs will also need an [Individualized Health Plan \(IHP\)](#) to maximize their health (4). These plans may be drawn up before the child starts school (several months before kindergarten) and allow the child to manage any health conditions that may impact their learning experience in school.

Do you need someone to talk to?

Your child was just diagnosed with HIE and your head is spinning with what may feel like a thousand different things. Questions, medical terms, care plans; it can be difficult to make sense of everything that has happened.

As you start to do your research on exactly what your child's diagnosis means, you may be bombarded with facts, information, and advice regarding HIE, and you may be lost as to where to turn next.

We want to hear your story. HIE Help Center is owned by [ABC Law Centers](#) (a birth injury law firm). The intake team at ABC Law Centers is here to listen to every detail of what you and your family may have gone through during labor and delivery. Although we are not doctors and cannot provide medical advice, our team can provide you with resources specifically tailored to your situation. Our team has reviewed and handled thousands of cases and is trained to recognize if there may have been medical malpractice that led to your child's diagnosis. We can advise if taking legal action may be beneficial to you and your family.

Call us at (888) 329-0122 to speak with a member of our intake team.

Other resources for IEP planning:

- [Understood.org: Understanding Individualized Education Programs](#)
- [U.S. Department of Education: A Guide to the Individualized Education Program](#)



Related resources:

- [Early Intervention \(Ages 0-3\)](#)
- [IEPs and the Transition Between Life Stages](#)
- [Transition to Adulthood](#)

Sources

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