THE PLAIN LANGUAGE of SPECIAL EDUCATION

Auburn University, Department of Special Education, Rehabilitation and Counseling (SERC) & the Alabama State Department of Education

DaLee Chambers, Ph.D., J.D.
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The Plain Language of Special Education is a work in progress. This document will be updated annually, until such time that changes are no longer necessary.

To provide input, please e-mail: daleec@alsde.edu.

The Plain Language of Special Education, Revised February 2020, Original DRAFT March 2018, DaLee Chambers, Ph.D., J.D.; Auburn University, Department of Special Education, Rehabilitation and Counseling (SERC); and the Alabama State Department of Education, Special Education Services.

For questions or comments, please contact Dr. DaLee Chambers at 334-694-4782 or by e-mail at daleec@alsde.edu.

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## Special Education PROCESS

<p>| Intervention Strategies in the General Education Class | Before a child is referred for special education evaluation or concurrently during the evaluation process, intervention strategies must be implemented in the general education program and monitored by the Problem-Solving Team (PST) for an appropriate period of time (a minimum of eight weeks), and be determined unsuccessful. This rule may be waived for a child who has severe problems that require immediate attention, for three- and four-year olds, for five-year olds who have not been in kindergarten, for children with articulation, voice, or fluency problems only, for children with a medical diagnosis of traumatic brain injury, and for a child who has been referred by his or her parents. AAC 290-8-9.01(4). |
| Referral Meeting | The Individualized Education Program (IEP) Team must review the referral, including documentation of intervention strategies and processes, and determine in a timely manner if the child will be evaluated for special education services. If the IEP Team determines that the child should not be evaluated for special education services, written notice, that meets the notice requirements must be given to the parent and the child must be referred to the PST. If the IEP Team determines that the child should be evaluated for special education services, the public agency must obtain the parent's written consent for the evaluation. AAC 290-8-9.01(6)(e). |
| Consent for Evaluation | Before an initial evaluation can be conducted, the public agency must, after providing notice, obtain informed written consent as required. AAC 290-8-9.02(1)(a). |
| Initial Evaluation &amp; Initial Eligibility | The public agency has sixty (60) calendar days from the date the public agency receives a parent's signed consent for initial evaluation to conduct and complete an initial evaluation. The public agency has thirty (30) calendar days from the completion of the evaluation to determine initial eligibility. The timeline runs regardless of any scheduled interruptions in the scholastic year or the scheduled summer vacation. EXCEPTION: (1) The timeline does not apply if the parent of a child repeatedly fails or refuses to produce the child for the evaluation. (2) The timeline does not apply to the public agency if a child enrolls in a school of another public agency after the relevant timeframe has begun and prior to completion of the initial evaluation. This only applies if the receiving public agency is making sufficient progress to ensure a prompt completion of the evaluation, and the parent and receiving public agency agree to a specific time when the evaluation will be completed. AAC 290-8-9.02(1)(b). |
| Consent for Special Education Services | A public agency that is responsible for making FAPE available to a child with a disability must obtain written informed consent from the parent of the child before the initial provision of special education and related services to the child. This consent may be obtained after an eligibility determination has been made, but must be obtained prior to the provision of special education and related services. AAC 290-8-9.04(4)(a). |</p>
<table>
<thead>
<tr>
<th><strong>Initial IEP if Found Eligible for Special Education Services</strong></th>
<th>A meeting to develop an IEP must be conducted within <strong>30 calendar days</strong> of the initial determination that the child needs special education and related services. The IEP must be in effect before special education and related services are provided to a child and must be implemented as soon as possible following the IEP meeting, unless the meeting occurred during the summer or a vacation period, or where there are circumstances that require a short delay (e.g., working out transportation arrangements or finding a qualified provider). There can be no delay in implementing a child's IEP while determining the payment source for providing or paying for special education and related services.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reevaluation</strong></td>
<td>Reevaluations shall not occur more than once a year, unless the parent and the public agency agree otherwise, and <strong>must occur at least once every three years</strong>. AAC 290-8-9.02(6)(c).</td>
</tr>
</tbody>
</table>
| **Annual IEP Review** | The IEP must be reviewed **at least once every 12 months** (i.e., by the signature date of the last IEP). AAC 290-8-9.05(11)(a)1.  
Each IEP's annual review date is calculated based on the IEP signature date of the previous IEP. Each IEP must be reviewed by the annual review date (signature date plus one year).  
When the IEP is reviewed, the IEP Team may review the current IEP and write a new IEP, or in select cases the development of a new IEP can be delayed for a reasonable period of time. The "duration date" on the current IEP is the date the IEP expires; therefore, that date must be considered before the decision is made to delay the writing of a new IEP.  
Examples of when an IEP Team might conduct the annual review without developing a new IEP are:  
1. A student is scheduled to graduate and has a current IEP in place until the end of the school year.  
2. A student transfers into the LEA with a current IEP around the time the annual review is due.  
If the option to review is used, the IEP Team is required to meet prior to (or on) the annual review date to review the current IEP, but they are not required to write a new IEP at that time. To ensure compliance, a new IEP must be written before the "duration date" (ending date) of the current IEP. |
| **IEP Review and Revision** | If the parent(s) or the child's teacher has reason to suspect that the IEP needs revision, an IEP meeting may be requested at anytime. The education agency must conduct the IEP meeting **within 30 calendar days** upon the receipt of the request. AAC 290-8-9.05(11)(a)3. |
**Step 1. Child is identified as possibly needing special education and related services.**

Local education agencies (LEAs) serving children with disabilities must develop and implement procedures that ensure that all children within their jurisdiction, birth to 21, regardless of the severity of their disability, and who need special education and related services are identified, located, and evaluated. Child Find also applies to children with disabilities who attend private schools, including children attending religious schools, within the LEA’s jurisdiction, highly mobile children with disabilities (e.g., migrant children), homeless children, or children who are wards of the State and children who are suspected of having a disability and are in need of special education, even though they have not failed, been retained in a course or grade or are advancing from grade to grade.

Before a child is referred for special education evaluation or concurrently during the evaluation process, intervention strategies must be implemented in the general education program and monitored by the Problem-Solving Team (PST) for an appropriate period of time (a minimum of eight weeks), and be determined unsuccessful. This rule may be waived for a child who has severe problems that require immediate attention, for three- and four-year olds, for five-year olds who have not been in kindergarten, for children with articulation, voice, or fluency problems only, for children with a medical diagnosis of traumatic brain injury, and for a child who has been referred by his or her parents.

(From: U.S. Department of Education www2.ed.gov/parents/needs/specced/iepguide/index.html)
To ensure that underachievement in a child suspected of having a disability is not due to lack of appropriate instruction in reading or math, the group must consider, as part of the evaluation:

(a) Prior to, or as a part of, the referral process, the child was provided appropriate instruction in regular education settings, delivered by qualified personnel; and

(b) Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, was provided to the child’s parents.

(AAC, 290-8-9.01(2))

Prong 1. Documentation of Appropriate Instruction

Examples of Appropriate Instruction for Elementary Aged Students
The student has:
– participated in a scientifically research-based reading program
– participated in a scientifically research-based math program
– received standards-based instruction by a qualified teacher
– had his or her data reviewed and appropriate instructional strategies have been implemented in the classroom based on the student’s needs
– participated in small group instruction
– participated in a school enrichment program
– participated in a tutorial program
– participated in a private educational program
– received private speech therapy services

Examples of Appropriate Instruction for Secondary Aged Students
The student has:
– participated in a reading intervention program
– participated in a math intervention program
– participated in a drop-out intervention program
– received standards-based instruction by a qualified teacher
– had his or her data reviewed and appropriate instructional strategies have been implemented in the classroom based on the student’s needs

Details regarding the appropriate instruction that the student received must be documented on the eligibility report.

Prong 2. Required Assessments to Parents

Data-based documentation of repeated assessments of achievement at reasonable intervals is required to determine that underachievement is not due to lack of appropriate instruction in reading or math. Progress monitoring tools are effective in meeting this requirement.

Progress monitoring is a scientifically based practice that is used to assess students’ academic performance and evaluate the effectiveness of instruction.

“If instructional models vary in terms of the frequency and number of repeated assessments that are required to determine a child’s progress.” (Comments, 34 C.F.R. § 300.309, page 46657)

Details of the objective and systematic process utilized to document the child’s progress, including the intervals at which parents were provided information must be recorded on the eligibility report. These details might include the name of the progress monitoring tool, the intervals at which data was collected, and the intervals at which progress was reported to parents.
Step 2. Child is evaluated.
Before an initial evaluation can be conducted, the LEA must, after providing notice, obtain informed written consent from the parent as required.

The evaluation must assess the child in all areas related to the child's suspected disability. The evaluation results will be used to decide the child's eligibility for special education and related services and to make decisions about an appropriate educational program for the child. If the parents disagree with the evaluation conducted by the LEA, they have the right to take their child for an Independent Educational Evaluation (IEE). They can ask that the school system pay for this IEE.

Step 3. Eligibility is decided.
A group of qualified professionals and the parents look at the child's evaluation results. Together, they decide if the child is a "child with a disability," as defined by IDEA. Parents may ask for a hearing to challenge the eligibility decision.

Step 4. Child is found eligible for services.
If the child is found to be a "child with a disability," as defined by IDEA, he or she is eligible for special education and related services. Within 30 calendar days after a child is determined eligible, the IEP Team must meet to write an IEP for the child.
IMPORTANT RESOURCES for ELIGIBILITY

All of these resources can be found on the Special Education Services Webpage on the ALSDE website.
http://www.alsde.edu/sec/ees/Pages/home.aspx.

Alabama Administrative Code (AAC), Chapter 290-8-9
(Select Policy; Select the Alabama Administrative Code Tab)
The purpose of the “Rules of the Alabama State Board of Education State Department of Education, Chapter 290-8-9, Special Education Services” is to provide guidelines for special education services in Alabama. These rules govern practices related to the identification of and services for students with disabilities. The rules are based on final regulations for the Individuals with Disabilities Education Act (IDEA). Any rule contained in 290-8-9-.00 through 290-8-9-.11 required only by State Board of Education rule and not required by federal and/or state law is indicated in bold italics. (For the purposes of this training manual the term local education agency (LEA) is utilized; however, the rules outlined in the AAC apply to all public agencies.)

The definitions, criteria, and minimum evaluative components for each disability area are found in the AAC (also known as the Code); in addition to procedures for determining eligibility.

Notice and Eligibility Decision Regarding Special Education Services
(Eligibility Report)
(Select Forms; Select the Eligibility Tab)
The eligibility report is used to document the decision regarding eligibility for special education services. All assessments and results used in the evaluation/reevaluation process are recorded.

The eligibility report is used at initial eligibility determination and each reevaluation for continued eligibility determination.

Compliance Verification Forms, Disability Areas
(Select Forms; Select the CVF Tab)
Compliance verification forms are provided by the Alabama State Department of Education, Special Education Services. The form for each disability area outlines the evaluations that are required to determine eligibility. The form provides a place for case managers to record whether or not each required evaluation was completed and whether or not the evaluations were recorded on the eligibility report.

The disability area CVF should be used along with the criteria from the AAC whenever determining eligibility for initial evaluation or reevaluation.
IMPORTANT RESOURCES for ELIGIBILITY

Alabama Administrative Code (AAC), Chapter 290-8-9

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PROCEDURES for DETERMINING ELIGIBILITY

Child Find. (AAC, 290-8-9.01(1)(a)).
LEA’s serving children with disabilities must develop and implement procedures that ensure that all children within their jurisdiction, birth to twenty-one, regardless of the severity of their disability, and who need special education and related services are identified, located, and evaluated. Child Find also applies to children with disabilities who attend private schools, including children attending religious schools, within the LEA's jurisdiction, highly mobile children with disabilities (e.g., migrant children), homeless children, or children who are wards of the State and children who are suspected of having a disability and are in need of special education, even though they have not failed, been retained in a course or grade or are advancing from grade to grade.

A child does not have to fail to be eligible for special education and related services. A referral for special education should never be denied based solely on the student having passing grades.

The Team needs to answer these questions in determining if the child is eligible for special education and related services:

- Does the child have a disability?
  (i.e., Does the child meet the criteria for at least one of the disability categories listed in IDEA?)

- Does the disability affect the child’s educational performance?
  (Educational performance can be affected even though the child has passing grades; for instance, the child does not achieve commensurate with his or her age and/or ability levels)

- Does the child need special education and related services?

Eligibility and Consent for Services. (AAC, 290-8-9-.04).
LEAs must develop and implement procedures to ensure that children will be properly identified according to the definitions, criteria, and minimum evaluative components set forth in these rules. If a child has a disability but only needs a related service and not specially designed instruction, the child is not considered to be a child with a disability under the IDEA.

Procedures for Determining Eligibility. (AAC, 290-8-9-.04(1)).
Upon completion of the administration of assessments and other evaluation measures, a group of qualified professionals, including the parent of the child, or the IEP Team, must determine if a child has a disability and the educational needs of the child within 30 calendar days from the date the local education agency (LEA) completes the initial evaluation. When making the determination with respect to each child, the group must:

(a) Be composed of a team of qualified professionals including the parents (Eligibility Committee) or the IEP Team;

(b) Draw upon information from a variety of sources, including aptitude and achievement tests, parent input, teacher recommendations, physical condition, social or cultural background, and adaptive behavior;

(c) Consider all evaluation information pertaining to the child, so that no single evaluation procedure will be used as the sole criterion for determining eligibility;
(d) Ensure that all evaluation information from (b) above is documented and carefully considered; and

(e) Ensure that a child is not determined to be a child with a disability if the determinant factor is a lack of appropriate instruction in reading [including the essential components of reading instruction as defined in section 1208(3) of the Elementary and Secondary Education Act of 1965 (phonemic awareness, phonics, vocabulary development, reading fluency including oral reading skills, and reading comprehension strategies)], a lack of appropriate instruction in math; the child has limited English proficiency; or the child does not otherwise meet the eligibility criteria for a specific area of disability. Children from various ethnic groups, including speakers of regional dialects, do not have a disability solely because their manner of communicating does not conform to the expectations of the standard English-speaking community. In order for a limited English proficient student to be deemed eligible, the eligibility team must determine that the communication disorder exists in the child's native language and is not the result of learning English as a second language. The teaching of English as a second language or general American dialect is not the responsibility of special education.

(f) Use standard scores when determining eligibility for special education.

(g) Reconvene when the LEA or the parents believe that the child’s eligibility should be reviewed.

(h) Determine continued eligibility at least once every three years.

(i) For children suspected of having a specific learning disability, the Eligibility Committee and/or IEP Team must also include:

1. The child’s regular education teacher, or
2. If the child does not have a regular education teacher, a regular education teacher qualified to teach a child of his or her age, or
3. For a child of less than school age, an individual qualified by the SEA to teach a child of his or her age, and
4. At least one person qualified to conduct individual diagnostic examinations of children, such as a school psychologist, speech-language pathologist, or remedial reading teacher.

Disability Definitions, Criteria, and Minimum Required Evaluative Components.

(AAC, 290-8-9-.03).

Each LEA must develop and implement procedures to identify and evaluate children suspected of having a disability that adversely affects their educational performance and who, as a result, may need special education (specially designed instruction) and related services. The evaluations listed in this rule are the required minimum evaluations to be administered prior to determining initial eligibility for special education services. Professional judgment should be used to determine if the results of any of the required evaluations are reliable sources of information or if other assessment data may prove to be more accurate indicators of the child's level of functioning. The IEP Team may determine, on a case-by-case basis, that other evaluations are needed. Vision and hearing screenings (traditional or functional, as appropriate) must be the first evaluations conducted for all children suspected of having a disability, unless otherwise indicated.
Disability Categories, Ages Three Through Twenty-One.
Disability categories listed in IDEA under which 3- through 21-year-olds may be eligible for services:

- Autism;
- Deaf-Blindness;
- Emotional Disability;
- Hearing Impairment/Deaf and Hard-of-Hearing;
- Intellectual Disability;
- Multiple Disabilities;
- Orthopedic Impairment; *
- Other Health Impairment;
- Specific Learning Disability;
- Speech or Language Impairment;
- Traumatic Brain Injury; or
- Visual Impairment.

(*Alabama has separate criteria for Other Health Impairment; and Other Health Impairment, Attention Deficit Disorder (ADD) & Attention Deficit Hyperactivity Disorder (ADHD)).

Developmental Delay, Ages Three Through Nine.
States and local educational agencies (LEAs) may use the term “developmental delay” with a child aged 3 through 9:

- If he or she experiences delays in one or more of the designated developmental areas; and who, because of the developmental delays,
- Needs special education and related services.

Developmental delay means a delay that adversely affects daily life and/or educational performance in one or more of the following developmental areas:

1. Adaptive;
2. Cognitive;
3. Communication;
4. Social or emotional; and/or
5. Physical.
EVALUATIONS for DETERMINING ELIGIBILITY
The following evaluative components are routinely used to identify students with disabilities. (Refer to the AAC for the minimum evaluative components for each disability area.)

References to specific editions of tests have been omitted from the examples in order to avoid including information that will become outdated. It is important to ensure the most current test instrument is used.

VISION AND HEARING SCREENINGS ARE ALWAYS THE FIRST STEP …
Evidence that vision/hearing screening results are satisfactory prior to proceeding with evaluations is the first step in evaluating students for the following areas: autism, emotional disability, intellectual disability, orthopedic impairment, other health impairment, specific learning disability, speech or language impairment, and traumatic brain injury.

Evidence that vision screening results are satisfactory prior to proceeding with evaluations is the first step in evaluating students for the area of hearing impairment.

Evidence that hearing screening results are satisfactory prior to proceeding with evaluations is the first step in evaluating students for the area of visual impairment. (AAC, 290-8-9-.03).

<table>
<thead>
<tr>
<th>VISION/HEARING SCREENING CRITERIA (AAC, 290-8-9-.03)</th>
<th>Vision Screening</th>
<th>Hearing Screening</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism</td>
<td>Pass</td>
<td>Pass</td>
</tr>
<tr>
<td>Deaf-Blindness</td>
<td>Optometric or Ophthalmic Evaluation. Optometric and/or ophthalmic data indicating that the individual has a visual impairment.</td>
<td>Audiological Evaluation. Audiological data indicating that the individual has a hearing impairment.</td>
</tr>
<tr>
<td>Developmental Delay</td>
<td>Pass</td>
<td>Pass</td>
</tr>
<tr>
<td>Emotional Disability</td>
<td>Pass</td>
<td>Pass</td>
</tr>
<tr>
<td>Hearing Impairment</td>
<td>Pass Evidence that vision screening results are satisfactory prior to proceeding with evaluations.</td>
<td>Audiological Evaluation. Audiological data indicating that the child has a hearing impairment.</td>
</tr>
<tr>
<td>Intellectual Disability</td>
<td>Pass</td>
<td>Pass</td>
</tr>
<tr>
<td>Multiple Disabilities</td>
<td>Pass</td>
<td>Pass</td>
</tr>
<tr>
<td>Orthopedic Impairment</td>
<td>Pass</td>
<td>Pass</td>
</tr>
<tr>
<td>Other Health Impairment</td>
<td>Pass</td>
<td>Pass</td>
</tr>
<tr>
<td>Other Health Impairment, ADHD</td>
<td>Pass</td>
<td>Pass</td>
</tr>
<tr>
<td>Specific Learning Disability</td>
<td>Pass</td>
<td>Pass</td>
</tr>
<tr>
<td>Speech or Language Impairment</td>
<td>Pass</td>
<td>Pass</td>
</tr>
<tr>
<td>Traumatic Brain Injury</td>
<td>Pass</td>
<td>Pass</td>
</tr>
<tr>
<td>Visual Impairment</td>
<td>Optometric or Ophthalmic Evaluation. Optometric/ophthalmic data indicating that the individual has a visual impairment.</td>
<td>Pass Evidence that hearing screening results are satisfactory prior to proceeding with evaluations.</td>
</tr>
</tbody>
</table>
**INDIVIDUAL INTELLECTUAL EVALUATION**

The individual intellectual evaluation measures *intellectual functioning*, which is the mental capacity for activities such as learning, reasoning, and problem solving. A test score below 70 indicates a limitation in intellectual functioning. (American Association on Intellectual and Developmental Disabilities; AAIDD).

“Nonverbal” intellectual assessments utilize entirely nonverbal administration and response formats. They are designed to give a comprehensive, standardized assessment of general intelligence with little or no verbal expression from the examiner and examinee. They are useful for non-native speakers and children with poor expressive abilities.

**Examples of Individual Intellectual Evaluations**

**Intellectual/Developmental Assessments**
Current versions of: Bilingual Verbal Ability Test, (BVAT); Cognitive Assessment System (CAS); Differential Ability Scales, (DAS); Kaufman Assessment Battery for Children, (KABC); Reynolds Intellectual Assessment Scales (RIAS); Stanford–Binet Intelligence Scales, (SB); Stanford–Binet Intelligence Scales for Early Childhood, (Early SB); Wechsler Adult Intelligence Scale, (WAIS); Wechsler Intelligence Scale for Children, (WISC); Wechsler Preschool and Primary Scale of Intelligence, (WPPSI); Woodcock–Johnson Tests of Cognitive Abilities, (WJ COG).

**Nonverbal Intellectual Assessments**
Current versions of: Comprehensive Test of Nonverbal Intelligence, (CTONI); Leiter International Performance Scale, (Leiter); Naglieri Nonverbal Ability Test – Individual Administration (NNAT–Individual); Test of Nonverbal Intelligence, (TONI); Universal Nonverbal Intelligence Test (UNIT); Wechsler Nonverbal Scale of Ability (WNV).

**INDIVIDUAL INTELLECTUAL CRITERIA (AAC, 290-8-9-.03)**

<table>
<thead>
<tr>
<th>Condition</th>
<th>Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism, Hearing Impairment, Orthopedic Impairment, Other Health Impairment, Other Health Impairment, ADHD, Visual Impairment</td>
<td>(Individual intellectual may be included, but is not required)</td>
</tr>
<tr>
<td>Emotional Disability</td>
<td>Evidence that the problem is not due to <em>intellectual</em>, sensory, or health factors.</td>
</tr>
<tr>
<td>Intellectual Disability</td>
<td>Total or full-scale intelligence quotient must be at least two standard deviations below the mean (70 or below).</td>
</tr>
<tr>
<td>Specific Learning Disability</td>
<td>(Individual intellectual may be included for response to intervention and patterns of strengths and weaknesses models, but is not required)</td>
</tr>
</tbody>
</table>

When using the predicted achievement model to calculate the severe discrepancy, administer: An age-appropriate norm-referenced individually administered intelligence test (full scale score).
INDIVIDUAL EDUCATIONAL ACHIEVEMENT EVALUATION

An achievement evaluation is a test of developed skill or knowledge. The most common type of achievement test is a standardized test designed to measure skills and knowledge learned in a given grade level through training or classroom instruction.

Examples of Individual Educational Achievement Assessments
Current versions of: Diagnostic Achievement Battery, (DAB); Diagnostic Achievement Test for Adolescents, (DATA); Goldman-Fristoe Test of Articulation, (G–FTA); Hammill Multiability Achievement Test (HAMAT); KeyMath Diagnostic Assessment, (KeyMath DA); Kaufman Test of Educational Achievement Comprehensive Form, (KTEA); Peabody Individual Achievement Test (PIAT); Test of Written Language, (TOWL); Test of Silent Contextual Reading Fluency (TOSRF); Test of Silent Word Reading Fluency (TOSWRF); Wechsler Individual Achievement Test, (WIAT); Woodcock–Johnson Tests of Achievement, (WJ ACHIEVE); Woodcock–Johnson Diagnostic Reading Battery, (WJ DRB); Young Children’s Achievement Test (YCAT).

INDIVIDUAL EDUCATIONAL ACHIEVEMENT EVALUATION CRITERIA (AAC, 290-8-9.-03)

<table>
<thead>
<tr>
<th>Impairment</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism, Deaf-Blindness, Hearing</td>
<td>(Individual achievement may be included, but is not required)</td>
</tr>
<tr>
<td>Impairment, Orthopedic Impairment,</td>
<td></td>
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<tr>
<td>Other Health Impairment, Other</td>
<td></td>
</tr>
<tr>
<td>Health Impairment, ADHD, Visual</td>
<td></td>
</tr>
<tr>
<td>Impairment</td>
<td></td>
</tr>
<tr>
<td>Emotional Disability</td>
<td>Individual <strong>educational achievement evaluation</strong> and a statement of how</td>
</tr>
<tr>
<td></td>
<td>the impairment adversely affects the child’s academic performance and/or</td>
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<td></td>
<td>the child’s social/emotional functioning. Evidence that the emotional</td>
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<td></td>
<td>disability adversely affects the child's academic performance and/or social/</td>
</tr>
<tr>
<td></td>
<td>emotional functioning in the school environment.</td>
</tr>
<tr>
<td>Intellectual Disability</td>
<td>Individual <strong>educational achievement evaluation</strong> (Note: Screening</td>
</tr>
<tr>
<td></td>
<td>instruments may not be used to determine eligibility). Evidence that the</td>
</tr>
<tr>
<td></td>
<td>disability adversely affects educational performance. (Note: Achievement</td>
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<td></td>
<td>scores at least one standard deviation below the mean should confirm and</td>
</tr>
<tr>
<td></td>
<td>validate the intellectual functioning and adaptive behavior scales).</td>
</tr>
</tbody>
</table>
| Specific Learning Disability | When provided with appropriate learning opportunities, children with specific learning disabilities do not achieve commensurate with age and ability level in one or more of the following areas: basic reading skills, reading comprehension, mathematical calculation, mathematical reasoning, oral expression, listening comprehension, and/or written expression.  
  
When using the predicted achievement model to calculate the severe discrepancy, administer:  
An age-appropriate, individually administered, standardized, norm-referenced achievement test to determine a student’s obtained achievement score(s) using one of the following two methods:  
I. Using an obtained total test score from the administration of a test of achievement, or using an obtained test score from the administration of a test in the area of suspected disability (e.g., a test of reading, a test of math, a test of written expression).  
II. Using obtained composite scores or subtest scores from the administration of two different achievement tests in the same area(s) of suspected disability and/or skill deficit. |
| --- | --- |
| Traumatic Brain Injury | Individual educational achievement evaluation to serve as initial post-trauma baseline measure.  
Evidence that the traumatic brain injury adversely affects educational performance. |
**PERFORMANCE MEASURES**

Performance measurement is the process of collecting, analyzing and/or reporting information regarding the performance of an individual.

**PERFORMANCE MEASURES CRITERIA (AAC, 290-8-9-.03)**

<table>
<thead>
<tr>
<th>Disability</th>
<th>Performance measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Disability, Traumatic Brain Injury, Visual Impairment</td>
<td>(Additional performance measures may be included, but are not required)</td>
</tr>
<tr>
<td>Autism</td>
<td>(Additional performance measures may be included, but are not required.) Additional performance measures may include developmental, intellectual, achievement (individual or group), motor, criterion-referenced tests, curriculum-based assessments, work samples, portfolios, observation.</td>
</tr>
<tr>
<td>Deaf-Blindness</td>
<td><strong>Performance measures</strong> such as developmental scores, diagnostic test(s), observations, communication evaluations, orientation and mobility assessments that document how the impairment adversely affects the educational performance of the child. Evidence of severe communication needs and evidence of severe educational needs related to the functional use of hearing and vision.</td>
</tr>
<tr>
<td>Hearing Impairment</td>
<td><strong>Performance measures</strong> such as group or individual intelligence scores, individual/group education achievement and/or diagnostic test(s), classroom observation, review of child's existing records (i.e., attendance, health). Evidence that the educational performance is adversely affected by the disability.</td>
</tr>
<tr>
<td>Orthopedic Impairment</td>
<td><strong>Performance measures</strong> such as developmental scores, individual and/or group intelligence scores, individual and/or group educational achievement and/or diagnostic test(s) scores, classroom observations, motor assessments, criterion-referenced tests, curriculum-based assessments, review of child's existing records (i.e., attendance, health). Performance measures that document how the child’s disability affects his or her involvement and progress in the general education curriculum or, for preschool children how the disability affects the child’s participation in age-appropriate activities.</td>
</tr>
<tr>
<td>Other Health Impairment</td>
<td><strong>Performance measures</strong> such as developmental scores, individual and/or group intelligence scores, individual and/or group education achievement and/or diagnostic test(s) scores, classroom observations, motor assessments, criterion-referenced tests, curriculum-based assessments, review of child's existing records, (i.e., attendance, health). Performance measures that document how the child’s disability affects his or her involvement and progress in the general education curriculum, or for preschool children how the disability affects the child’s participation in age-appropriate activities.</td>
</tr>
<tr>
<td>Other Health Impairment, ADHD</td>
<td><strong>Performance measures</strong> such as developmental scores, individual and/or group intelligence scores, individual and/or group education achievement and/or diagnostic test(s) scores, classroom observations, motor assessments, criterion-referenced tests, curriculum-based assessments, review of child's existing records, (i.e., attendance, health).</td>
</tr>
<tr>
<td>Specific Learning Disability</td>
<td>When using the <em>patterns of strengths and weaknesses</em> model: Documentation of a pattern of strengths and weaknesses in <em>performance</em>, achievement, or both, relative to age, state-approved grade-level standards, or intellectual development, that is determined by the group to be relevant to the identification of a specific learning disability, using appropriate assessments.</td>
</tr>
</tbody>
</table>
**BEHAVIOR RATING SCALE**

A behavior rating scale is an assessment instrument designed to obtain the perceptions of a subject’s behavior in a standardized format. Rater’s may be the subject (self-rating) or others with the opportunity to observe and describe aspects of the subject’s behavior, such as parents and teachers (Encyclopedia of Child Behavior and Development).

**Examples of Behavior Rating Scales**

Current versions of: Achenbach Child Behavior Checklist (CBCL); Behavior Assessment System for Children, (BASC); Behavior Evaluation Scale, (BES: Long); Behavior Disorder Identification Scale, (BDIS); Behavior Rating Profile, (BRP); Disruptive Behavior Rating Scale (DBRS); Devereux Behavior Rating Scale–School Form; Emotional and Behavior Problem Scale, (EBPS).

Rating scales for ADHD help professionals obtain information from parents, teachers, and others about symptoms and functioning in various settings.

**Examples of ADHD Rating Scales**

Current versions of: AD/HD Comprehensive Teacher Rating Scale (ACTeRS); ADHD Rating Scale; Attention Deficit Disorders Evaluation Scale, (ADDES); Attention Deficit/Hyperactivity Disorder Test (ADHDT); Behavior Rating Inventory of Executive Function (BRIEF); Brown Attention-Deficit Disorder Scales; Conners Full-length Version Parent, (Conners-P); Conners Full-length Version Teacher, (Conners-T); Conners Full-length Version Self-Report, (Conners-SR).

**BEHAVIOR RATING SCALE CRITERIA (AAC, 290-8-9-.03)**

<table>
<thead>
<tr>
<th>Autism</th>
<th>Communication/language evaluation and a behavior rating scale and/or an adaptive behavior rating scale. Evidence that communication/language skills and/or social skills adversely affect educational performance.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Disability</td>
<td>Administration of three of the same norm-referenced behavior rating scale by three or more independent raters who have had knowledge of the child for at least six weeks. One of the raters may be the parent or the child. If a self-report is used, it must be a version of the same behavior rating scale. Standard scores (total or composite) on two out of three of the same norm-referenced behavior rating scale must be at least two standard deviations above or below the mean (70, depending on the rating scale). Ratings from three or more scales will be obtained from at least three independent raters, one of whom may be the parent or the child through a self-report.</td>
</tr>
<tr>
<td>Condition</td>
<td>Documentation Requirements</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Other Health Impairment, ADHD</td>
<td>Administration of three of the same norm-referenced behavior rating scale, ADD or ADHD scale by three or more independent raters who have had knowledge of the child for at least six weeks. One of the raters may be the parent or the child. If a self-report is used, it must be a version of the same behavior rating scale, ADD or ADHD scale. Standard scores (total or composite) on two out of three of the same norm-referenced scale designed specifically to determine the presence of ADD or ADHD must be at least two standard deviations above or below the mean (70, depending on the rating scale). Ratings from three or more scales must be obtained from at least three independent raters, one of whom may be the parent.</td>
</tr>
<tr>
<td>Specific Learning Disability</td>
<td>Documentation that the existence of specific learning disability is not the result of a visual, hearing, or motor disability; intellectual disability; emotional disability; cultural factors; environmental or economic disadvantage or limited-English proficiency must include but is not limited to adaptive behavior scale, behavior rating scale, environmental cultural economic concerns checklist.</td>
</tr>
</tbody>
</table>
ADAPTIVE BEHAVIOR RATING SCALE

Adaptive behavior is the collection of conceptual, social, and practical skills that are learned and performed by people in their everyday lives. (American Association on Intellectual and Developmental Disabilities; AAIDD).

- Conceptual skills: language and literacy; money, time, and number concepts; and self-direction.
- Social skills: interpersonal skills, social responsibility, self-esteem, gullibility, naïveté (i.e., wariness), social problem solving, and the ability to follow rules, obey laws, and avoid being victimized.
- Practical skills: activities of daily living (personal care), occupational skills, healthcare, travel/transportation, schedules/routines, safety, use of money, use of the telephone.

Examples of Adaptive Behavior Rating Scales
Current versions of: AAMR Adaptive Behavior Scales–School, (ABS–S); Adaptive Behavior Assessment System, (ABAS); Adaptive Behavior Evaluation Scale (ABES); Scales of Independent Behavior (SIB); Vineland.

ADAPTIVE BEHAVIOR RATING CRITERIA (AAC, 290-8-9-.03)

Autism | Communication/language evaluation and a behavior rating scale and/or an adaptive behavior rating scale.

Evidence that communication/language skills and/or social skills adversely affect educational performance.
| Intellectual Disability | (Note: School and home versions must be conducted using the same instrument).

**Adaptive behavior scales.**

(i.) Total score on at least one adaptive behavior scale must be at least two standard deviations below the mean (70 or below). A school version of an adaptive behavior scale is required to be completed.

The public agency must make reasonable efforts to obtain a home version of the adaptive behavior scale. If a home version is not obtained, a second school version is required. The school version(s) and the home version of the adaptive behavior scale must be conducted using the same instrument. The home version of the adaptive behavior scale can be completed by the parent through a home visit, parent/teacher conference, telephone interview, or other mutually agreed upon arrangement. It is the responsibility of the public agency to ensure that the parent receives the assistance needed to complete the adaptive behavior scale. The public agency must make at least two attempts to have the parent complete the home version of the adaptive behavior scale within the sixty (60) days of receiving parental consent for initial evaluation and document such attempts on the eligibility report. However, the absence of a home version of the adaptive behavior scale must not delay the eligibility determination timeline.

(ii.) For students with individual intellectual scores in the significant cognitive disability range (55 and below), the total score on at least one adaptive behavior scale must be at least 1.5 standard deviations below the mean (77 or below).

A school version of an adaptive behavior scale is required and reasonable efforts to obtain a home version must be made.

| Specific Learning Disability | Documentation that the existence of specific learning disability is not the result of a visual, hearing, or motor disability; intellectual disability; emotional disability; cultural factors; environmental or economic disadvantage or limited English proficiency must include but is not limited to adaptive behavior scale, behavior rating scale, environmental cultural economic concerns checklist. |
AUTISM/AUTISM SPECTRUM DISORDER RATING SCALE

Autism and autism spectrum disorder rating scales are designed to identify symptoms, behaviors, and associated features of Autism Spectrum Disorders (ASDs).

Examples of Autism/Autism Spectrum Disorder Rating Scales
Current versions of: Asperger Syndrome Diagnostic Scale (ASDS); Autism Diagnostic Interview, (ADI); Autism Diagnostic Observation Schedule (ADOS); Childhood Autism Rating Scale, (CARS), ST–Standard Version, HF–High-Functioning Version; Children’s Communication Checklist (CCC); Gilliam Asperger’s Disorder Scale (GADS); Gilliam Autism Rating Scale (GARS); Krug Asperger’s Disorder Index (KADI).

AUTISM/AUTISM SPECTRUM DISORDER RATING SCALE CRITERIA (AAC, 290-8-9-.03)

| Autism         | A normed rating scale that is used to document the presence of an autism spectrum disorder. Score on a rating scale (normed for the appropriate diagnostic group) indicating the presence of an autism spectrum disorder. |

The Plain Language of Special Education, DaLee Chambers, Ph.D., J.D., Revised February 2020
DEVELOPMENTAL SCALE

Developmental scales screen and evaluate early childhood developmental milestones in the areas of motor, adaptive, cognitive, personal social, and communication.

A standardized, norm-referenced instrument(s) that evaluates all five developmental domains is required for identifying developmental delay. An additional standardized, norm-referenced instrument(s) or a criterion-referenced instrument that supports the one or two identified areas of delay from the first instrument is also required to determine eligibility.

Examples of Developmental Scales
Current versions of: Battelle Developmental Inventory (BDI); BRIGANCE Diagnostic Inventory of Early Development (IED); Developmental Assessment of Young Children (DAYC); Infant–Toddler Developmental Assessment (IDA); Psychoeducational Profile (PEP).

DEVELOPMENTAL SCALE CRITERIA (AAC, 290-8-9-.03)

<table>
<thead>
<tr>
<th>DEVELOPMENTAL SCALE CRITERIA (AAC, 290-8-9-.03)</th>
<th>A standardized, norm-referenced instrument(s) that evaluates all five developmental domains.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developmental Delay</td>
<td>The standard score in one developmental domain must be at least two standard deviations below the mean (70 or below) on a standardized, norm-referenced instrument; or the standard scores on two or more developmental domains must be at least one and a half standard deviations below the mean (77 or below) on a standardized, norm-referenced instrument.</td>
</tr>
<tr>
<td></td>
<td>Scores obtained must be validated by supporting evaluations in the same identified area(s) of delay. If the standard score on the first instrument yields a delay of at least two standard deviations (70 or below) in one or more domains, then at least one domain must be validated (70 or below) by another norm-referenced or criterion-referenced instrument. If the standard score on the first instrument yields a delay of at least one and a half standard deviations (77 or below) in two or more domains, at least two of the domains must be validated (77 or below) by another norm-referenced or criterion-referenced instrument. When using a criterion-referenced instrument that does not yield standard scores, age equivalent scores may be used to determine the percent of delay and must be converted to standard scores. The score must be at least a 30% delay (two standard deviations below the mean) in one domain or a 25% delay (one and a half standard deviations below the mean) in two or more domains.</td>
</tr>
</tbody>
</table>
OBSERVATION
(NATURAL PRESCHOOL SETTING; STRUCTURED ACADEMIC SETTING; UNSTRUCTURED NONACADEMIC SETTING)

One informal assessment method is observation. Informal assessments are used to obtain information and make decisions about children or programming by using methods other than standardized instruments.

Observation involves looking at children in systemic ways to identify behaviors, document performance, and make decisions. Observers should be well trained in techniques. It is important to conduct observations in an unbiased manner and leave out feelings and opinions.

Examples (the objective of the lesson, behaviors observed, and student performance have been notated in italics for training purposes only):

- (Structured, Academic Setting) Benjamin was observed during his kindergarten reading class. For the first activity students were expected to actively engage in group reading activities with purpose and understanding (the objective of the lesson based on the course of study standard). Benjamin sat on the carpet with the other students while a story was read aloud. Benjamin talked to people around him three times, laid down once, and answered “I don’t know” when called asked a question about the story read aloud (behaviors observed and student performance). During the second activity, some students were in their seats working independently. Benjamin was in small group reading instruction with the teacher and three other students. Benjamin correctly identified the front and back covers when asked to identify the front cover, back cover, and title page of a book (the objective of the lesson based on the course of study standard contrasted with the student performance). He did not identify the title page. During the second lesson, while other students were producing rhyming words (the objective of the lesson based on the course of study standard), Benjamin was tapping on the table, looking around the room, and humming to himself (behaviors observed). Benjamin did not produce any rhyming words (student performance) and his off-task behaviors were unaffected by teacher prompts to pay attention (behaviors observed).

- (Structured, Academic Setting) Dondra was observed in the computer lab during a 5th grade English Language Arts lesson. Students were asked to draw on information from multiple print or digital sources, demonstrating the ability to locate an answer to a question quickly or to solve a problem efficiently (the objective of the lesson based on the course of study standard). Dondra sat at a computer alone, looking for information about cats for her writing project. After just a few seconds, Dondra opened a game and started playing instead of researching for her project. Dondra got back on task when the teacher announced there were five minutes left (behaviors observed). When time was called, Dondra had located one source of information. She had not answered any of the questions about cats that she had given to complete (student performance).
• (Unstructured, Nonacademic Setting) Catherine was observed before and after school. Before school students wait in the cafeteria. After school students wait for buses in their classroom or their car ride in front of the building. Catherine sat at the end of a table, alone in the cafeteria before school. There were conversations going on around her, but she did not talk to anyone. Two boys scuffled with each other near her and she did not look up. She sat with her chin rested on her bag for most of the 20 minutes before the bell rang for her to go to class. She flipped through a library book at one point, and put it back away after a few seconds (behaviors observed). After school Catherine sat on her book bag waiting for her mother to pick her up. Two girls stopped to talk to Catherine. She looked away until the girls walked off. Catherine was blocking the walkway so the teacher on duty asked her to move back. Catherine mumbled to herself as she picked her bag up. Catherine took her stuff and moved to the other end of the waiting area. Catherine stood up, picked up her bag and got in the car when her mother arrived. Her mother asked how her day was and Catherine replied “fine” (behaviors observed).

Examples of Observations
Current versions of: Behavior Assessment System for Children Student Observation System (BASC–SOS); Alabama State Department of Education Form–Narrative in area of suspected exceptionality.

**OBSERVATION CRITERIA (AAC, 290-8-9-.03)**

<table>
<thead>
<tr>
<th>Condition</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism</td>
<td>Observation in both a structured and an unstructured school environment or natural setting for all students in Grades K-12. An observation in a natural setting and a structured interview with the parents/primary caregiver for all preschool aged children. Evidence of current characteristics/behaviors typical of an autism spectrum disorder.</td>
</tr>
<tr>
<td>Deaf-Blindness</td>
<td>(Observation may be included, but is not required) Performance measures such as developmental scores, diagnostic test(s), observations, communication evaluations, orientation and mobility assessments that document how the impairment adversely affects the educational performance of the child. Evidence of severe communication needs and evidence of severe educational needs related to the functional use of hearing and vision.</td>
</tr>
<tr>
<td>Developmental Delay</td>
<td>An observation of the child in an age-appropriate environment. Evidence that the developmental delay adversely affects the child's performance in age-appropriate activities must be documented.</td>
</tr>
<tr>
<td>Emotional Disability</td>
<td>Observation by a qualified professional in two or more educational settings (one structured setting and one unstructured setting). Observational data that documents the emotional disability in two or more educational settings.</td>
</tr>
</tbody>
</table>
Specific Learning Disability

The public agency must ensure that the child is observed in the child's learning environment (including the regular classroom setting) to document the child's academic performance and behavior in the areas of difficulty.

The group responsible for determining whether a child has a specific learning disability, must decide to:

(I.) Use information from an observation in routine classroom instruction and monitoring of the child's performance that was done before the child was referred for an evaluation; or

(II.) Have at least one member of the group conduct an observation of the child's academic performance in the regular classroom after the child has been referred for an evaluation and parental consent is obtained.

In the case of a child of less than school age or out of school, a group member must observe the child in an environment appropriate for a child of that age.
ENVIRONMENTAL CULTURAL ECONOMIC CONCERNS (ECE)
CHECKLIST

The ECE Checklist is used to determine what environmental, cultural, and economic concerns apply. The ECE checklist is used: (1) to determine factors impacting a student’s learning and therefore excluding him or her from being identified as a student with a disability; (2) to determine whether or not a student needs to be administered a non-traditional intelligence test if there is environmental, language, cultural, and/or economic concerns checked; and (3) to consider if there has been a lack of appropriate instruction in reading and/or math.

Checks on the ECE checklist do not prohibit a student from being identified for special education services; however, a student should not be considered for special education services if his or her learning or behavior problem can be primarily attributed to ECE concerns.

ENVIRONMENTAL CULTURAL ECONOMIC CONCERNS (ECE) CHECKLIST CRITERIA

(AAC, 290-8-9-.03)

| Emotional Disability                                      | Documentation that the emotional disability is exhibited over a long period of time (typically six months) to a marked degree that adversely affects educational performance. Documentation must include teacher, parent and/or child interview(s); documentation of environmental, socio-cultural, and/or ethnic information (e.g., Environmental, Cultural and Economic Concerns checklist); and at least one of the following:
|                                                           | (i.) Observation of the child in an educational environment other than the required observation.
|                                                           | (ii.) Counselor reports.
|                                                           | (iii.) Language evaluation.
|                                                           | (iv.) Anecdotal records from classroom teacher(s) or other LEA personnel. |

| Intellectual Disability                                  | Determination of any environmental, cultural, language, or economic differences that might mask the student's true abilities. If at least one concern is noted, the team must consider administering a non-traditional intelligence test. |

| Specific Learning Disability                             | Documentation that the existence of specific learning disability is not the result of a visual, hearing, or motor disability; intellectual disability; emotional disability; cultural factors; environmental or economic disadvantage or limited English proficiency must include but is not limited to adaptive behavior scale, behavior rating scale, environmental cultural economic concerns checklist. |
WORK SAMPLES

One informal assessment method is work samples. Informal assessments are used to obtain information and make decisions about children or programming by using methods other than standardized instruments.

Work samples demonstrate what a child knows and is able to do. Work samples provide a concrete example of learning and can show growth and achievement over time. Work samples can be compared to the expectations in the course of study standard(s) to document what the child is able to do.

Details from work samples must be captured with words on the eligibility report.

Examples:
- Each student was asked to use addition to find the total number of objects arranged in rectangular arrays with up to five rows and up to five columns; write an equation to express the total as a sum of equal addends in four given problems. Latricia found the total number of objects in all four problems. She wrote the correct equation for one of the problems and wrote an incorrect equation for three of the problems.

- The assignment was for students to write an argument to support claims with clear reasons and relevant evidence. Aaron selected recycling as his topic. He typed his assignment. Aaron has six sentences. There are seven words misspelled and no punctuation except for a period at the very end. Aaron has one clear reason for recycling. Three of the sentences do not relate to recycling and there was no relevant evidence included. Graded with a rubric, Aaron scored 4/10 on this assignment. He earned points for selecting a topic and identifying one clear reason for recycling. He lost points for spelling, punctuation, and lack of development of the topic.

Work samples are required for identifying a child with a specific learning disability. Although not required, work samples are also great to include as part of eligibility reports for other disability areas.

WORK SAMPLES CRITERIA (AAC, 290-8-9-.03)

<table>
<thead>
<tr>
<th>Specific Learning Disability</th>
<th>(Work samples may be included, but are not required)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism</td>
<td>Documentation of work samples in the area of suspected disability. Work samples in the area of difficulty.</td>
</tr>
</tbody>
</table>
INTERVIEW

One informal assessment method is the interview. Informal assessments are used to obtain information and make decisions about children or programming by using methods other than standardized instruments.

Interviews are important tools for understanding the perceptions of the child and significant persons in the child’s life. Interviews can provide insight about significant historical events as well as performance in other settings.

Details from interviews must be captured with words on the eligibility report.

**INTERVIEW CRITERIA (AAC, 290-8-9-.03)**

<table>
<thead>
<tr>
<th>Condition</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism</td>
<td>A structured interview with the parent/primary caregiver for all students in Grades K-12.</td>
</tr>
<tr>
<td></td>
<td>Evidence of current characteristics/behaviors typical of an autism spectrum disorder.</td>
</tr>
<tr>
<td>Developmental Delay</td>
<td>A family interview documenting strengths, needs, and concerns.</td>
</tr>
<tr>
<td></td>
<td>Evidence of adverse effect.</td>
</tr>
<tr>
<td>Emotional Disability</td>
<td>Documentation that the emotional disability is exhibited over a long period of time (typically six months) to a marked degree that adversely affects educational performance. Documentation must include <strong>teacher, parent and/or child interview(s)</strong> …</td>
</tr>
</tbody>
</table>
**DOCUMENTATION OF INTERVENTIONS**

Prior to determining initial eligibility for orthopedic impairment (OI); other health impairment (OHI); and other health impairment, attention deficit disorder (OHI, ADD) and attention deficit hyperactivity disorder (OHI, ADHD) research-based interventions must be used and results documented.

Research-based interventions must be used and results documented for initial eligibility and reevaluation in the area of visual impairment (VI).

Details regarding the research-based interventions/accommodations tried must be recorded on the eligibility report.

**DOCUMENTATION OF INTERVENTIONS CRITERIA (AAC, 290-8-9-.03)**

<table>
<thead>
<tr>
<th>Deaf-Blindness, Developmental Delay, Emotional Disability</th>
<th>(Documentation of interventions may be included, but is not required)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Orthopedic Impairment</td>
<td>A statement of how the impairment adversely affects the educational performance of the child, and for <em>initial evaluations</em> for special education services only, <strong>documentation of interventions/accommodations</strong> must include a written description of all interventions/accommodations that have been tried in the regular education class(es) or the natural environment (for preschool children) but were deemed unsuccessful. Interventions/accommodations may be documented through teacher interview(s) that are specific to the child’s disability, classroom observation(s) that are specific to the child’s disability, health records, anecdotal records, therapy evaluations, and intervention strategies.</td>
</tr>
</tbody>
</table>

| Other Health Impairment                                | A statement of how the impairment adversely affects the educational performance of the child and, for *initial evaluations* for special education services only, **documentation of interventions/accommodations** must include a written description of all interventions/accommodations that have been tried in the regular education class(es) or the natural environment (for preschool children) but were deemed unsuccessful. Interventions/accommodations may be documented through teacher interview(s) that are specific to the child’s disability, classroom observation(s) that are specific to the child’s disability, health records, anecdotal records, therapy evaluations, and intervention strategies. |

| Other Health Impairment, ADHD                          | For *initial evaluations* for special education services only, **documentation of interventions/accommodations** must include a written description of all interventions/accommodations that have been tried in the regular education class(es) or the natural environment (for preschool children) but were deemed unsuccessful. Interventions/accommodations may be documented through teacher interview(s) that are specific to the child’s disability, classroom observation(s) that are specific to the child’s disability, health records, anecdotal records, therapy evaluations, and intervention strategies. |
| Specific Learning Disability | Data that demonstrate that the child was provided appropriate instruction in regular education settings, delivered by qualified personnel; and data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, which was provided to the child's parents.  
(I.) The instructional strategies used and the student-centered data collected; and  
(II.) The documentation that the child's parents were notified about:  
   I. The State's policies regarding the amount and nature of student performance data that would be collected and the general education services that would be provided;  
   II. Strategies for increasing the child's rate of learning; and  
   III. The parents' right to request an evaluation. |
# MEDICAL/PROFESSIONAL EVALUATION

A medical or professional evaluation is required for eligibility under certain disability categories. In other instances, a medical or professional evaluation might not be required, but rather it is one of the ways in which a disability may be documented.

## MEDICAL/PROFESSIONAL EVALUATION CRITERIA (AAC, 290-8-9-.03)

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism</td>
<td>Comprehensive evaluation and report to be completed by a medical doctor, clinical psychiatrist, school psychologist or other qualified person (i.e., psychometrist) trained in the area of autism evaluation. Medical, clinical, psychiatric, or school psychologist evaluation, or an assessment by a qualified person (e.g., psychometrist) trained in the area of autism evaluation.</td>
</tr>
<tr>
<td>Orthopedic Impairment</td>
<td>Documentation of the orthopedic impairment (medical diagnosis/physician’s statement). Evidence of an orthopedic impairment.</td>
</tr>
<tr>
<td>Other Health Impairment</td>
<td>Documentation of the health impairment (medical diagnosis/statement). Evidence of a health impairment.</td>
</tr>
</tbody>
</table>
COMMUNICATION/LANGUAGE EVALUATION

A communication/language evaluation is a required component for the identification of students with autism.

“Speech and language assessment is the second critical area to include in a core assessment battery for the diagnosis of [Autism Spectrum Disorder] ASD. As with intellectual ability, understanding of the child’s language abilities, particularly when compared against their cognitive abilities, is important for the differential diagnosis process (specifying the most appropriate diagnosis).” (Autism Spectrum Disorders: Foundations, Characteristics, and Effective Strategies, Chapter 2. Durocher, J. Assessment for the Purpose of Instructional Planning for Students with Autism Spectrum Disorders).

### COMMUNICATION/LANGUAGE EVALUATION CRITERIA (AAC, 290-8-9-.03)

<table>
<thead>
<tr>
<th></th>
<th><strong>Communication/language evaluation</strong> and a behavior rating scale and/or an adaptive behavior rating scale. Evidence that communication/language skills and/or social skills adversely affect educational performance.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism</td>
<td>Performance measures such as developmental scores, diagnostic test(s), observations, <strong>communication evaluations</strong>, orientation and mobility assessments that document how the impairment adversely affects the educational performance of the child.</td>
</tr>
</tbody>
</table>

| Deaf-Blindness | Performance measures such as developmental scores, diagnostic test(s), observations, **communication evaluations**, orientation and mobility assessments that document how the impairment adversely affects the educational performance of the child. |
**STATEMENT OF HOW DISABILITY “ADVERSELY AFFECTS”**

The statement of how the disability “adversely affects” describes how the characteristics of the disability affect the student’s academic performance and/or social emotional functioning.

**STATEMENT OF ADVERSE AFFECT CRITERIA (AAC, 290-8-9-.03)**

<table>
<thead>
<tr>
<th>Disability</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Disability</td>
<td>Individual educational achievement evaluation and a statement of how the impairment <em>adversely affects</em> the child’s academic performance and/or the child’s social/emotional functioning. Evidence that the emotional disability adversely affects the child's academic performance and/or social/emotional functioning in the school environment.</td>
</tr>
<tr>
<td>Orthopedic Impairment</td>
<td>A statement of how the impairment <em>adversely affects</em> the educational performance of the child, and for initial evaluations for special education services only, documentation of interventions/accommodations must include a written description of all interventions/accommodations that have been tried in the regular education class(es) or the natural environment (for preschool children) but were deemed unsuccessful. Interventions/accommodations may be documented through teacher interview(s) that are specific to the child’s disability, classroom observation(s) that are specific to the child’s disability, health records, anecdotal records, therapy evaluations, and intervention strategies.</td>
</tr>
<tr>
<td>Other Health Impairment</td>
<td>A statement of how the impairment <em>adversely affects</em> the educational performance of the child and, for initial evaluations for special education services only, documentation of interventions/accommodations must include a written description of all interventions/accommodations that have been tried in the regular education class(es) or the natural environment (for preschool children) but were deemed unsuccessful. Interventions/accommodations may be documented through teacher interview(s) that are specific to the child’s disability, classroom observation(s) that are specific to the child’s disability, health records, anecdotal records, therapy evaluations, and intervention strategies.</td>
</tr>
<tr>
<td>Other Health Impairment, ADHD</td>
<td>A statement of how the health impairment <em>adversely affects</em> the educational performance of the child and documentation of performance measures such as individual and/or group intelligence scores, individual and/or group education achievement and/or diagnostic test(s) scores, classroom observations, criterion-referenced tests, curriculum-based assessments, review of child's existing records, (i.e., attendance, health, discipline). Evidence that the health impairment adversely affects the educational performance of the child.</td>
</tr>
<tr>
<td>Visual Impairment</td>
<td></td>
</tr>
<tr>
<td>-------------------</td>
<td></td>
</tr>
</tbody>
</table>
| Evidence of visual functioning that **adversely affects** educational performance as evaluated by a certified vision specialist. Documentation of educational problems that even after appropriate accommodations, the disability continues to affect educational performance. Educational problems may be assessed by a certified vision specialist through one or more of the following:  
(i.) A learning media assessment,  
(ii.) Functional vision assessment, and/or  
(iii.) An orientation and mobility evaluation. |
**DOCUMENTATION OF EXISTENCE OVER TIME**

Over a “long period of time” is not specifically defined. A long period of time is typically six months. (AAC, 290-8-9.03(4)(c)5). The intent is to avoid identifying a student for special education under the category of emotional disability (ED) if the student is reacting to a temporary trauma or a temporary situation that will pass in time.

**DOCUMENTATION OF EXISTENCE OVER TIME CRITERIA (AAC, 290-8-9-.03)**

| Emotional Disability | Documentation that the emotional disability is exhibited over a long period of time (typically six months) to a marked degree that adversely affects educational performance. Documentation must include teacher, parent and/or child interview(s); documentation of environmental, socio-cultural, and/or ethnic information (e.g., Environmental, Cultural and Economic Concerns checklist); and at least one of the following:
| | (v.) Observation of the child in an educational environment other than the required observation.
| | (vi.) Counselor reports.
| | (vii.) Language evaluation.
| | (viii.) Anecdotal records from classroom teacher(s) or other LEA personnel.
| | Documentation may also include at least one of the following, if available:
| | (I.) Clinical psychological/psychiatric reports.
| | (II.) School psychologist reports.
| | (III.) Medical reports.
| | Evidence that the emotional disability is exhibited over a long period of time (typically six months) and to a marked degree, and that the child’s educational performance is adversely affected. |
DETERMINING ELIGIBILITY for SPECIFIC LEARNING DISABILITY (SLD)

“Specific learning disability means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia.” (AAC, 290–8–9.03(10)(a)).

A key component in determining if a student has a specific learning disability is documentation that the existence of specific learning disability is not the result of “a visual, hearing, or motor disability; intellectual disability; emotional disability; cultural factors; environmental or economic disadvantage or limited English proficiency.” (AAC, 290–8–9.03(10)(c)3).

“To ensure that underachievement in a child suspected of having a specific learning disability is not due to lack of appropriate instruction in reading or math, the group must consider, as part of the evaluation:

1) Data that demonstrate that prior to, or as a part of, the referral process, the child was provided appropriate instruction in regular education settings, delivered by qualified personnel; and

2) Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, which was provided to the child's parents.” (34 C.F.R. § 300.309)

*See Prong 1, Documentation of Appropriate Instruction and Prong 2, Required Assessments to Parents.

- When determining whether a child has a specific learning disability, an LEA will not be required to take into consideration whether a child has a severe discrepancy between intellectual ability and predicted achievement.

- An LEA may use a process based on the child's response to scientific, research-based intervention.

- Additionally, an LEA may use other alternative research-based procedures for determining whether a child has a specific learning disability. (AAC, 290–8–9.03(10)(b)1).
Severe Discrepancy.  
(A 16 Point or More Discrepancy between IQ and Predicted Achievement).  
An LEA may consider severe discrepancy between intellectual ability and predicted achievement to determine whether a child has a specific learning disability. In Alabama, if using a total score, the difference must be 16 points or more between the Predicted and Obtained Achievement Scores for a severe discrepancy. If using subtest or composite scores, the difference must be 16 points or more between the Predicted and Obtained Achievement Scores for both subtests for a severe discrepancy. (AAC, 290–8–9.03(10)(d)2.(i). A drawback of the severe discrepancy model is that it requires a student to “wait to fail” at a certain level before being identified so it is not practical or accurate for younger students.

Patterns of Strengths and Weaknesses.  
(Strengths and Weaknesses Relative to Age and State–approved Grade–level Standards).  
Patterns of strengths and weaknesses is the second procedure an LEA may use to determine whether a child has a specific learning disability. With patterns of strengths and weaknesses, the child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, state-approved grade-level standards, or intellectual development, that is determined by the IEP Team to be relevant to the identification of a specific learning disability, using appropriate assessments. (AAC, 290–8–9.03(10)(c)2.(iii)).

Response to Scientific, Research-Based Intervention.  
(Instructional Strategies Used and the Student–Centered Data Collected).  
Response to instruction/intervention is the third procedure an LEA may use to determine whether a child has a specific learning disability. With response to instruction/intervention, the child does not make sufficient progress to meet age or state-approved grade-level standards in one or more of the areas identified (oral expression, listening comprehension, written expression, basic reading skills, reading fluency skills, reading comprehension, mathematics calculation, or mathematics problem solving) when using a process based on the child’s response to scientific, research-based intervention. (AAC, 290–8–9.03(10)(c)2).
DETERMINING ELIGIBILITY for SPEECH OR LANGUAGE IMPAIRMENT (SLI)

Speech or Language Impairment means a communication disorder in the area of articulation, voice, fluency, or language that adversely affects a child’s educational performance. (AAC, 290–8–9.03(11)).

Evidence that vision/hearing screening results are satisfactory prior to proceeding with evaluations is the first step in evaluating students for speech or language impairment. (AAC, 290–8–9.03).

Articulation/Phonological Disorder
- Standard or formal measure of articulation/phonological skills
- Stimulability assessment (as part of formal test or separate assessment)
- Statement regarding the impact of intelligibility on connected speech
- Examination of oral structures and functioning
- Documentation of adverse effect of child’s articulation disorder on involvement or progress in the general education curriculum and/or environment

Voice Disorder
- Standard or formal measure of pitch, loudness, quality, inflection, and resonance
- Written description of the child’s voice patterns (one in classroom and one in a non-structured environment that includes social/peer interaction over six-week period, or less if appropriate)
- Medical evaluation (preferably by an ENT); written documentation from the physician stating that the child is medically cleared to participate in voice therapy
- Teacher/caregiver written documentation of adverse effect of child’s voice disorder on involvement or progress in the general education curriculum and/or environment

Fluency Disorder
- Standard or formal measure of dysfluency patterns
- Description of the child’s speaking pattern (in more than one speaking task and in more than one setting)
- Interviews with the child, teachers, and/or parent documenting strengths and concerns regarding the fluency disorder
- Teacher/caregiver written documentation of adverse effect of the child’s fluency disorder on involvement or progress in the general education curriculum and/or environment

Language Disorder
- Standard or formal comprehensive measure of both receptive and expressive language skills
- Assess specific language component as a back-up if comprehensive measure is above 70 SS.
- Teacher/caregiver written documentation of adverse effects of child’s language impairment on involvement or progress in the general education curriculum and/or environment
**Step 6. IEP meeting is held and the IEP is written.**

The IEP Team gathers to talk about the child’s needs and write the IEP. Parents and the student (when appropriate) are part of the team.

Before the school may provide special education and related services to the child for the first time, the parent(s) must give consent.

If the parents do not agree with the IEP and placement, they may discuss their concerns with other members of the IEP Team and try to work out an agreement. If they still disagree, parents can ask for mediation, or the LEA may offer mediation. Parents may file a complaint with the state education agency and may request a due process hearing, at which time mediation must be available.

Parents are given a copy of the IEP.

If necessary, the IEP is revised during the implementation period.
**Academic Achievement AND Functional Performance**

*Individuals with Disabilities Education Act, 2004...*

“A statement of the child’s present levels of academic achievement and functional performance, including how the child’s disability affects the child’s involvement and progress in the general education curriculum (i.e., the same curriculum as for nondisabled children); or for preschool children as appropriate, how the disability affects the child’s participation in appropriate activities.”

“A statement of measurable annual goals, including academic and functional goals, designed to meet the child's needs that result from the child's disability to enable the child to be involved in and make progress in the general education curriculum and meet each of the child's other educational needs that result from the child's disability.”

**ACADEMIC ACHIEVEMENT**

“A considerable gap in achievement in reading, mathematics, science, and social studies exists between youth with disabilities and their peers in the general population.”


**FUNCTIONAL PERFORMANCE**

Functional performance is the acquisition of essential and critical skills needed for children with disabilities to learn specific daily living, personal, social, and employment skills, or the skills needed to increase performance and independence at work, in school, in the home, in the community, for leisure time, and for postsecondary and other lifelong learning opportunities.

- **Standards-Based Instruction**
  (Based on current class placement, such as 8th grade English, 3rd grade science, 6th grade alternate achievement standards)
  *These goals reflect the student’s academic functioning in relation to grade-level academic standards.*

- **Remediation**
  (Based on current functioning in basic skills such as low functioning in reading, writing, and/or mathematics)
  *These goals reflect the student’s academic functioning in relation to proficiency in basic skills.*

**Other considerations such as:**

- Behavior
- Communication
- Study Skills
- Organization
- Time Management
- Social Skills
- Adaptive Behavior
- Daily Living Skills
- Transition (at least by age 16)
Thinking About ANNUAL GOALS

ENDREW F.

To meet its substantive obligation under the IDEA, a school must offer an IEP reasonably calculated to enable a child to make progress appropriate in light of the child’s circumstances. Endrew F. v. Douglas County Sch. Dist. RE-1, 69 IDELR 174 (U.S. 2017).

What does “reasonably calculated” mean?

• An action done with awareness
• Includes thought, measurement, and precision
• Is informed by professional expertise, and the views of a child’s parents or guardians

<table>
<thead>
<tr>
<th>Writing Goals that are Appropriately Ambitious</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Goals must challenge the child.</td>
</tr>
<tr>
<td>• It is inappropriate to lower academic expectations for students due to behavior issues or severe disability.</td>
</tr>
<tr>
<td>• Be cautious of carrying goals over from IEP to IEP.</td>
</tr>
<tr>
<td>• Requests from parents or guardians for goals that appear to be beyond the child’s capabilities should be evaluated with data.</td>
</tr>
<tr>
<td>• Goals must be purposeful and sufficiently challenging.</td>
</tr>
<tr>
<td>• Students must have the supports and services needed to meet ambitious goals.</td>
</tr>
</tbody>
</table>

Thinking About ANNUAL GOALS

...for Students with *Mild Disabilities*

Academic
Standards-Based Instruction (most likely Course of Study Standards or Essentials Course Objectives)
Intervention Programs

Functional
Communication Skills
Study Skills
Organizational Skills
Social Skills

Ages 16 and Older
Transition Skills

...for Students with *Moderate and Severe Disabilities*

Academic
Standards-Based Instruction (most likely Alabama Alternate Achievement Standards)
Intervention Programs

Functional
Communication Skills
Adaptive Behavior Skills
Daily Living Skills

Ages 16 and Older
Transition Skills

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**Keep in Mind a Student’s Educational Performance Includes a Broad Range of Skills**

**Educational Performance**
Educational performance means academic, social/emotional, and/or communication skills.
(AAC, 290-8-9.00(4).

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“Facial compliance with the IDEA’s requirements is not enough. The language of the IEP has to make sense and communicate something meaningful about the child and the proposed program…”

Norlin, J., (2011). What do I do when...
Components of PRESENT LEVEL

Strengths, Needs, and How the Student's Disability Affects Performance in the General Education Curriculum (for Preschool Children, How the Disability Affects the Child's Participation in Age Appropriate Activities) are the three components that are required in the Present Level of Academic Achievement and Functional Performance.

- **Strengths** and **Needs** must be individualized. For academic goals, “Strengths” and “Needs” must be based on data related to the standards. This might be things the student can and cannot do in relation to the standard being considered for the goal, or things from past standards that relate to the standard being considered for the goal the student can and cannot do. Strengths and Needs are specific to each goal and are not typically repeated in more than one Present Level.

- **How the Student’s Disability Affects Performance in the General Education Curriculum** is based on characteristics of the student that are a result of his or her disability (e.g., difficulty with comprehension, slow reading rate, difficulty memorizing facts, poor generalization of skills, poor organization of notes and other written materials, impulsivity, and low attention span). The characteristic(s) resulting from the disability that affect performance in the General Education Curriculum might be repeated in more than one Present Level depending on the nature of the standards being addressed.

**PLEASE NOTE:**
IEP Teams must know the Present Level of Academic Achievement and Functional Performance in order to determine where the student can reasonably be expected to perform within 12 months.
How the Disability Impacts Involvement and Progress in the General Education Curriculum

EXAMPLES of characteristics that could affect the child’s involvement and progress in the general education curriculum:

- Perseverates on a topic
- Difficulty attending/Easily distracted
- Difficulty with transitions
- Limited communication
- Struggles with receptive communication and/or expressive communication
- Difficulty with abstract concepts
- Uses echolalia and rote phrases
- Is non-verbal
- Unable to generalize from one person to another and/or one setting to another
- Difficulty with decoding and phonemic awareness, reading comprehension, and/or reading fluency
- Difficulty in noisy environments
- Lacks social skills
- Difficulty following directions and/or asking for help
- Becomes obsessive during tasks
- Displays noncompliant behaviors
- Withdraws from others
- Over reacts to situations
- Displays verbal and/or physical aggression
- Becomes easily overwhelmed and shuts down
- Displays self-injurious behaviors
- Difficulty communicating and expressing self appropriately
- Disorganized
- Difficulty following rules
- Tantrums easily
- Requires assistance with daily living/self-care
- Difficulty expressing needs and wants
- Difficulty developing and maintaining peer relationships
- Difficulty staying focused
- Becomes fatigued easily
- Difficulty remembering what has been read and/or heard
- Difficulty with social interactions
- Distracted by noise
- Makes inappropriate comments
- Difficulty staying on topic
- Becomes tired easily and/or often
- Chronically absent due to illness
- Difficulty producing written work
- Unable to independently access materials
- Difficulty moving from one setting to another
- Difficulty asking questions or making comments during discussions
- Poor oral expression, listening comprehension, and/or written expression
- Short term and/or long term memory loss
- Difficulty building and maintaining relationships
- Impulsivity
- Difficulty with eye-hand coordination
- Hesitant to speak out loud
- Unintelligible speech
- Isolates self from others
- Difficulty retaining information
- Behavioral outbursts
- Difficulty with problem solving and critical thinking
- Short attention span
- Poor balance and coordination
- Difficulty with time management
- Pragmatic and social language delays
- Difficulty accessing printed material and/or board work
- Poor sense of personal space and social norms
- Low self-esteem and/or low self-image
- Significant developmental delays in all areas
- Poor fine-motor and/or gross motor
- Impulsiveness
- Flat affect
- Unpredictable mood changes
- Difficulty with auditory discrimination
- Difficulty with visual perception
- Poor comprehension of math symbols
- Difficulty thinking and writing at the same time
- Slow and inaccurate text reading
- Distracted by visual and/or auditory stimuli
- Difficulty with word retrieval/naming problems
- Low achievement in most or all academic areas
- Requires close supervision

Adapted from: Georgia Department of Education, Impact of Disability

The Plain Language of Special Education, DaLee Chambers, Ph.D., J.D., Revised February 2020
Identify the characteristics that affect the child’s “involvement and progress in the general education curriculum” in the Present level.

- Jane has difficulty producing written work.
- Brandon has short-term memory loss.
- Frances has difficulty retaining information and does not generalize information from one situation to another.
- Kayla has a poor sense of personal space and social norms.
- Frank perseverates and lacks the ability to transition or switch ideas appropriately.
Components of GOAL

The Who, Behavior, Criterion, Conditions, and Timeframe are five components that increase the measurability of IEP goals.

**PLEASE NOTE:**
Copying and pasting standards into the goal is not individualized and places the local education agency in a very vulnerable litigious situation.

In order for goals to be individualized:
- the present level must reflect specific information from the standards that the student can (strengths) and/or cannot do (needs); and
- the goal must reflect specific information from the standards that the student needs to learn to do.

WHO (The student...)
EXAMPLES: Jane, Brandon, Oscar, Frances, Matt

BEHAVIOR (Will do what...)
EXAMPLES:
- Read 4th grade-level text orally with accuracy, appropriate rate, and expression
- Identify the main idea and provide at least three details related to the main idea
- Use aspects of the writing process (e.g., plan, organize, write, edit, revise) to produce high quality, coherent writing
- Read emergent-reader texts with purpose and understanding
- Select and apply general mathematics rules correctly to solve problems
- Fluently add and subtract within 1000
- Create and follow a system for organizing personal items in locker/desk/notebook
- Imitate five signs/gestures/or word approximations
- Demonstrate good listening skills (e.g., pay attention to the person who is speaking, keep eye contact, show interest by nodding or by smiling at appropriate times, do not interrupt, be an active listener, ask questions to gain more information or clarify) and explain why listening is important for problem solvers
- Engage in conversations about home, school, and community rules and why they are important

CRITERION (To what level or degree...)
EXAMPLES: 90% accuracy; 100% accuracy on 4/5 trials; 80% accuracy on 5/5 trials; zero times per day; two times per class; 8/10 times

CONDITIONS (Under what conditions...)
EXAMPLES: Given 10 addition facts; using augmentative communication device; on a laptop; on a tablet device; with peers; of connected text; with a calculator; unassisted; given three choices; starting at any number less than 120; to request, protest, or greet familiar listeners; with guidance and support from adults; using strategies and algorithms based on place value, properties of operations, and/or the relationship between addition and subtraction

TIMEFRAME (In what length of time...)
EXAMPLES: By January 7, 20XX; by the end of the second semester; by the end of the first nine weeks; by the end of the school year
As used in this part, the term individualized education program or IEP means a written statement for each child with a disability that is developed, reviewed, and revised in a meeting in accordance with §§ 300.320 through 300.324, and that must include…

(ii) For children with disabilities who take alternate assessments aligned to alternate achievement standards, a description of benchmarks or short-term objectives; (§ 300.320 Definition of individualized education program.)

Benchmarks may be:
- Sequential (crawl, then walk) or
- Parallel (decode accurately and understand what is read)

Benchmarks are a logical breakdown of the major components of an annual goal.

Benchmarks are required for students with significant cognitive disabilities, regardless of whether it is a testing year or not.

Benchmarks are steps toward the goal; therefore, a minimum of two benchmarks per goal are expected.

A benchmark describes “the amount of progress the child is expected to make within specified segments of the year . . . benchmarks establish expected performance levels that allow for regular checks of progress within specified segments of the year.”


It is helpful if benchmarks include timeframe(s) that “coincide with progress reporting periods for the purpose of gauging whether a child’s progress is sufficient to achieve the annual goal.”

Mr. Wilson’s Special Education Blog. (May 17, 2010). Writing IEP Goals, Benchmarks, & Objectives.

Benchmarks may or may not require performance criteria for clarity. For instance, in some cases it is implied the proposed criteria is 100% and/or the highest criteria the student is able to achieve.

“Benchmarks indicate the interim steps a child will take to reach an annual goal.”

“Using a roadmap analogy, benchmarks and short-term objectives are used to divide the trip to the final destination into concrete, smaller steps.”

Benchmarks or Short-Term Objectives
www.parentcenterhub.org/benchmarks/
**Sample PRESENT LEVEL & GOAL**

**Standards-Based Instruction**

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**ACADEMIC ACHIEVEMENT: Standards-Based Instruction EXAMPLE 1**

**PRESENT LEVEL OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE:**

Jane can organize words into sentences. She has not mastered organizing sentences into paragraphs. (ELA 3.25.5 & 3.25.4). Jane’s problems with word retrieval make written expression difficult for her.

**MEASURABLE ANNUAL GOAL related to meeting the student’s needs:**

With guidance and support from adults, Jane will plan, organize, write, edit, and revise to produce writing appropriate to task and purpose on 5/5 trials by January 7, 20XX (ELA 3.25.)

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**ACADEMIC ACHIEVEMENT: Standards-Based Instruction EXAMPLE 2**

**PRESENT LEVEL OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE:**

Brandon knows that the two digits of a two-digit number represent amounts of tens and ones and he can round whole numbers from 1 to 9 (M 3.10.8 & M 3.10.7). He cannot identify the steps in rounding two- and three-digit numbers. (M. 3.10.6). Brandon struggles to retrieve information from long-term memory.

**MEASURABLE ANNUAL GOAL related to meeting the student’s needs:**

With a written prompt, Brandon will use the steps for rounding two- and three-digit numbers to round whole numbers from 10 to 99 and whole numbers from 100 to 999 (M. 3.10.4 & M. 3.10.2) with 90% accuracy by the end of the second semester.

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**Specially designed instruction is required for students with disabilities...**

*Standards-based goals* should always be supported by tutorial and/or intensive instruction.
ACADEMIC ACHIEVEMENT: Remediation EXAMPLE 1

PRESENT LEVEL OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE:

Eloise (7th grader) reads and comprehends text complexity at the 3rd grade level (ELA 7.19). Her progress with text complexity is in “needs improvement.” Vocabulary and sight words are strengths for Eloise. Eloise’s weak processing skills cause difficulty with decoding, phonemic awareness, reading comprehension, and reading fluency.

MEASURABLE ANNUAL GOAL related to meeting the student’s needs:

Eloise will read and comprehend literary nonfiction in Grades 4-5 text complexity with 90% accuracy by the end of the school year (ELA 7.19.2).

ACADEMIC ACHIEVEMENT: Remediation EXAMPLE 2

PRESENT LEVEL OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE:

Charles (5th grader) lacks the mathematics foundations to perform multiplication and division operations (M. 4.2). He can recall basic addition and subtraction facts; however, he does not recall multiplication facts. He can read word problems. Charles has difficulty understanding abstract concepts.

MEASURABLE ANNUAL GOAL related to meeting the student’s needs:

Charles will score 80% or higher on a randomly selected mixed operations probe on 5/5 trials by November 1, 20XX (M. 4.2 & 4.3).

Specially designed instruction is required for students with disabilities...
Remediation goals should always be supported by research-based interventions.
FUNCTIONAL PERFORMANCE EXAMPLE 1

PRESENT LEVEL OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE:

Tricia displays noncompliant behaviors. At least three times per week, sometimes daily, Tricia refuses to work, does not follow directions, fails to comply with class routines, says “no” to the teacher, and moves about the classroom without permission. She has never left the classroom and she does not exhibit these behaviors in PE or her elective courses. Tricia has difficulty regulating her behavior due to hyperactivity. This difficulty adversely affects Tricia’s ability to remain in the general education classroom.

MEASURABLE ANNUAL GOAL related to meeting the student’s needs:

Given at least three opportunities per day, Tricia will utilize self-regulation skills to follow directives and interact with staff without incident, 90% of the time, during 20 minute observed intervals, three times per day, three days per week over a four-week period, by the end of the first grading period.

FUNCTIONAL PERFORMANCE EXAMPLE 2

PRESENT LEVEL OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE:

Tyler struggles to stay organized. He fails to turn in assignments and as a result he has very low daily grades in almost all of his classes. Tyler has difficulty staying focused, but has been successful with using a planner to keep track of assignments. Tyler has short-term memory issues.

MEASURABLE ANNUAL GOAL related to meeting the student’s needs:

Tyler will demonstrate organizational skills by the end of the first semester by keeping class work in notebooks, and turning in all assignments on time during 5/6 random weekly checks.

Specially designed instruction is required for students with disabilities...

*Functional goals should always be supported by targeted instruction.*
BENCHMARKS EXAMPLE 1

PRESENT LEVEL OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE:

Bobby has made progress understanding words are symbols for objects. He demonstrates understanding of familiar words (e.g., his name on cubbyhole, “mom” and “dad” when associated with the person or a picture of the person, and the words for a few animals such as cat and dog when associated with a picture). He does not demonstrate understanding of unfamiliar words or phrases/sentences. He has letter-sound understanding for the letter b only, since his name and “boy” both start with b. Bobby is non-verbal.

MEASURABLE ANNUAL GOAL related to meeting the student’s needs:

Bobby will demonstrate understanding of 60 printed words associated with pictures or tangible objects 3/3 times by the end of the fourth nine-week grading period (ELA.AAS.4.21).

BENCHMARKS:
1. By the end of the first nine-week grading period, Bobby will use actions/behavior to communicate understanding of printed words (e.g., answer yes/no questions about printed words or sentences, show preference to certain words).
2. By the end of the second nine-week grading period, Bobby will identify 20 new sight words.
3. By the end of the third nine-week grading period, Bobby will match 35 words to pictures.
4. By the end of the fourth nine-week grading period, Bobby will demonstrate letter-sound knowledge for at least 10 letters introduced one at a time in the following order: a, m, t, p, o, n, c, d, u, s, g, i, f, b, l, e, r, w, k, x, v, y, z, j, q.
5. By the end of the fourth nine-week grading period, Bobby will match 60 words to pictures.
BENCHMARKS EXAMPLE 2

PRESENT LEVEL OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE:

Donna demonstrates a desire to feed herself independently. She can suck through a straw when given minimal assistance keeping her lips closed around the straw. She is in the early stages of knowing she should attempt to keep her mouth closed when eating. The muscles that open and close her mouth work adequately, and she can move her lips and tongue. She does not typically pick up or hold anything without prompting. Donna has deficits in reasoning, problem solving, and planning.

MEASURABLE ANNUAL GOAL related to meeting the student’s needs:

Donna will feed herself finger foods, and soft foods on a spoon, and drink from a cup (with and without a straw) without spilling, 5/5 times by the end of November 20XX.

BENCHMARKS:

1. Donna will use a napkin to wipe her hands and face by the end of September 20XX.
2. Donna will refrain from talking while eating and will eat with her mouth closed by the end of September 20XX.
3. Donna will feed herself precut finger foods by the end of October 20XX.
4. Donna will hold a cup with both hands when drinking without a straw by the end of October 20XX.
5. Donna will keep her lips closed around a straw and drink by the end of October 20XX.
6. Donna will use her dominant hand to hold a spoon horizontally between her thumb and index finger when prompted by the end of November 20XX.
7. Donna will use her wrist to dip a spoon to get food and bring the side of the spoon to her mouth when prompted by the end of November 20XX.
TYPE(S) OF EVALUATION FOR ANNUAL GOAL

The IDEA states that each child's IEP must contain:

A description of—

How the child's progress toward meeting the annual goals...will be measured... (§ 300.320(a)(3))

The “Type of Evaluation” identifies the method that will be used to measure progress. The method selected must coordinate with the goal. For instance, data collection should only be selected for goals that can be effectively measured through data collection. Current data must be used to assess progress for annual goals and/or benchmarks.

Examples:

Curriculum Based Assessment
Curriculum based assessments measure a student's performance in the local curriculum. Sample items from the curriculum are selected for the curriculum based assessment in order to evaluate progress and assist with educational planning.

Data Collection
Data collection involves gathering information on targeted variables in a systemic manner. Data that is collected is used to answer relevant questions and measure progress.

Teacher/Text Test
Teachers sometimes create classroom tests. These tests help the teacher become informed about what the students know and are able to do either before a lesson or after a lesson. Another option for teachers is to use a test that is provided by the publisher of the textbook; or perhaps create a test from a question bank provided by the publisher. If a textbook is used it is crucial that teachers teach and test what is outlined in the standards, which does not always match what is included in the textbook.

State Assessment(s)
State assessments are designed to measure how each child is progressing toward college and career readiness. State assessments help LEAs know if the curriculum they have chosen is working or if they should make adjustments. State assessments are typically summative assessments.

Teacher Observation
Teacher observation can be used to evaluate student behavior or performance. The criteria and tools selected for an observation should be focused and rigorous. An observation should paint a fair and accurate picture of the objectives or skills being evaluated. Observations must focus on behavior or performance that can be directly observed.

Work Samples
Work samples document tasks completed by students. Work samples that are used for evaluation should be clearly graded according to set criteria such as a grading key or rubric. Work samples might include paper documents, videos, or digitized documents. Examples are classroom assignments, projects, reports, essays, and visual or performing arts projects.

Grades
While good grades can be evidence of progress, they are not necessarily a reflection of specific performance. For instance, does a C mean a student partially mastered all the concepts; or fully mastered some of the concepts? Also, an A in one class may mean something totally different than an A in another class. For these reasons, grades may be one of the evaluation methods, but in most cases grades should not be the only evaluation method.
## Types of Assessment

<table>
<thead>
<tr>
<th>FORMATIVE ASSESSMENT</th>
<th>SUMMATIVE ASSESSMENT</th>
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<tbody>
<tr>
<td>Assessment for learning (and instructional planning)</td>
<td>Assessment of learning</td>
</tr>
<tr>
<td>Occurs during instruction</td>
<td>Occurs after instruction</td>
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<tr>
<td>Used continuously</td>
<td>Used at the end</td>
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<tr>
<td>Used to improve instruction and provide student feedback</td>
<td>Used to measure student competency</td>
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<tr>
<td>Used to check for understanding</td>
<td>Used for grades and promotion</td>
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<tr>
<td>Primarily prospective (looking forward)</td>
<td>Primarily retrospective (looking backward)</td>
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<tr>
<td>Provides real performance information</td>
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<tr>
<td>Used to enhance learning</td>
<td>Used to prove performance</td>
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**Formative Assessments...**

Informal, or formative assessments are about checking for understanding in an effective way in order to guide instruction. They are used during instruction rather than at the end of a unit or course of study. And if we use them correctly, and often, yes, there is a chance instruction will slow when we discover we need to re-teach or review material the students wholly "did not get" – and that's okay. Because sometimes we have to slow down in order to go quickly.

Rebecca Alber, Why Formative Assessments Matter

[www.edutopia.org/blog/formative-assessments-importance-of-rebecca-alber](http://www.edutopia.org/blog/formative-assessments-importance-of-rebecca-alber)
SPECIAL EDUCATION
(i.e., Specially Designed Instruction)

Special education means specially designed instruction, at no cost to the parents, to meet the unique needs of a child with a disability, including:

i. Instruction conducted in the classroom, in the home, in hospitals and institutions, and in other settings; and

ii. Instruction in physical education.

Specially designed instruction means adapting, as appropriate, to the needs of an eligible child under these rules, the content, methodology, or delivery of instruction:

i. To address the unique needs of the child that result from the child’s disability; and

ii. To ensure access of the child to the general curriculum, so that the child can meet the educational standards within the jurisdiction of the public agency that apply to all children. (§ 300.39 Special Education.)

Specially Designed Instruction means:

adapting, as appropriate,

- to the needs of the child, the
  - content,
  - methodology, or
  - delivery of instruction...

...To address the unique needs of the child that result from the child’s disability; and

...To ensure access of the child to the general curriculum, so that the child can meet the educational standards!

Content is the knowledge and skills being taught.

Examples: A student with an IEP may be increasing the number of words he can spell correctly, while other students are learning to write paragraphs with sentences; A student with an IEP may require instruction in adaptive behavior and life skills, while instruction for other students is primarily academic.

Methodologies are the instructional strategies and approaches used to teach content.

Example: A student with an IEP may be taught to read using a multisensory reading intervention that explicitly and systematically targets specific skills, while other students are taught to read using the core reading program.

Delivery is the way in which instruction is provided.

Example: A student with an IEP may receive intensive individual or small-group instruction to pre-teach concepts or remediate skills, while other students receive homogenous large-group classroom instruction.

“Students who are able to have their learning needs met effectively and sufficiently within the general education environment through the exclusive use of individual accommodations rather than specially designed instruction would not be considered a special education student...”

State Support Team 7, Ohio Department of Education,
www.sst7.org/media/573e0a5ada793.pdf
In partnership with the Collaboration for Effective Educator Development, Accountability and Reform (CEEDAR), the Council for Exceptional Children has developed and published a set of High Leverage Practices (HLPs) for special educators and teacher candidates.

The HLPs are organized around four aspects of practice:

- Collaboration
- Assessment
- Social/emotional/behavioral
- Instruction

Special education teachers must be flexible problem solvers who not only have expertise in using highly effective practices, but also are proficient in monitoring the effectiveness of these practices with individual students and making decisions regarding changes in practice as needed. This routine analysis of practice and its effect on important student outcomes is foundational for effective special education teachers.

High-Leverage Practices in Special Education: Introduction

HELPFUL RESOURCES
Specially Designed Instruction

www.intensiveintervention.org

The National Center on Intensive Intervention’s (NCII) mission is to build district and school capacity to support implementation of intensive intervention, or data-based individualization, in reading, mathematics, and behavior for students with severe and persistent learning and/or behavioral needs. NCII is a five-year technical assistance center funded by the U.S. Department of Education's Office of Special Education Programs (OSEP) and is part of OSEP's Technical Assistance and Dissemination Network.

Data-Based Individualization: A Framework for Intensive Intervention

Data-based individualization (DBI) is a research-based process for individualizing and intensifying interventions through the systematic use of assessment data, validated interventions, and research-based adaptation strategies. This document introduces and describes the DBI process and how it can be used to support students who require intensive intervention in academics and/or behavior.
The term `related services' means transportation, and such developmental, corrective, and other supportive services (including speech-language pathology and audiology services, interpreting services, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, social work services, school nurse services designed to enable a child with a disability to receive a free appropriate public education as described in the individualized education program of the child, counseling services, including rehabilitation counseling, orientation and mobility services, and medical services, except that such medical services shall be for diagnostic and evaluation purposes only) as may be required to assist a child with a disability to benefit from special education, and includes the early identification and assessment of disabling conditions in children.

The term does not include a medical device that is surgically implanted, or the replacement of such device.

### Related services may include but are not limited to:

- Counseling services
- Interpreting services
- Medical services, for diagnostic and evaluation purposes only
- Orientation and mobility services
- Physical and occupational therapy
- Psychological services
- Recreation, including therapeutic recreation
- School nurse services, designed to enable a child with a disability to receive a free appropriate public education
- Social work services
- Speech-language pathology and audiology services
- Transportation
- Rehabilitation counseling

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Related services are services that are required to assist a child with a disability to benefit from special education.
Supplementary aids and services are often critical elements in supporting the education of children with disabilities in regular classes and their participation in a range of other school activities. (Center for Parent Information and Resources)

Examples:
• Accommodations and Modifications
• Program Modifications
• Support for Personnel
• Assistive Technology

Accommodations and Modifications

An accommodation...
“allows a student to complete the same assignment or test as other students, but with a change in the timing, formatting, setting, scheduling, response and/or presentation. This accommodation does not alter in any significant way what the test or assignment measures.

Examples of accommodations include a student who is blind taking a Braille version of a test or a student taking a test alone in a quiet room.”

A modification...
“is an adjustment to an assignment or a test that changes the standard or what the test or assignment is supposed to measure.

Examples of possible modifications include a student completing work on part of a standard or a student completing an alternate assignment that is more easily achievable than the standard assignment.”

“Needed modifications and accommodations should be written into a student’s IEP...
These changes should be chosen to fit the student’s individual needs. It’s important to include the student, if appropriate, when discussing needed accommodations and modifications. Asking the student what would be helpful is a good first step.”

School Accommodations and Modifications, Families and Advocates Partnership for Education (FAPE)
Program Modifications

“Program modifications may be used to describe a change in the curriculum or measurement of learning, for example, when a student with a disability is unable to comprehend all of the content an instructor is teaching.” (New York State Education Department)

Support for Personnel

“The IEP must describe the supports for school personnel that will be provided on behalf of the student in order for the student to advance toward attaining the annual goals, to be involved in and progress in the general curriculum and to participate in extracurricular and other nonacademic activities. Supports for school personnel are those that would help them to more effectively work with the student. These could include, for example, special training for a student’s teacher. These supports for school personnel are those that are needed to meet the unique and specific needs of the student.”

“Examples of supports that may be provided for school personnel include:

• Information on a specific disability and implications for instruction;
• Training in use of specific positive behavioral interventions;
• Training in the use of American Sign Language;
• Assistance with curriculum modifications;
• Behavioral consultation with school psychologist, social worker or other behavioral consultant...”

(Assistive Technology

“The IEP must describe any assistive technology devices and/or services needed for the student to benefit from education, including whether the use of a school-purchased assistive technology device is required to be used in the student’s home or in other settings in order for the student to receive a free appropriate public education.”

“Assistive technology device means any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified or customized, that is used to increase, maintain or improve the functional capabilities of a student with a disability. Assistive technology devices can range from ‘low technology’ items like pencil grips, markers or paper stabilizers to ‘high technology’ items such as voice synthesizers, Braille readers or voice activated computers.”

“Assistive technology service means any service that directly assists a student with a disability in the selection, acquisition or use of an assistive technology device. When a student needs an assistive technology device or service,” the IEP Team “needs to consider what instruction the student might require to use the assistive technology device as well as any supports and services the student and/or the student’s teachers may need related to the use of the device.” (New York State Education Department)
STATE AND DISTRICT WIDE ASSESSMENTS

i. A statement of any individual appropriate accommodations that are necessary to measure the academic achievement and functional performance of the child on state and districtwide assessments… and

ii. If the IEP Team determines that the child must take an alternate assessment instead of a particular regular state or districtwide assessment of student achievement, a statement of why--

A. The child cannot participate in the regular assessment; and
B. The particular alternate assessment selected is appropriate for the child;

($ 300.320(a)(6) Definition of individualized education program.)

TRANSITION

Transition Services. Beginning not later than the first IEP to be in effect when the child turns 16, or younger if determined appropriate by the IEP Team, and updated annually, thereafter, the IEP must include--

1. Appropriate measurable postsecondary goals based upon age appropriate transition assessments related to training, education, employment, and, where appropriate, independent living skills; and

2. The transition services (including courses of study) needed to assist the child in reaching those goals.

($ 300.320(b) Definition of individualized education program.)

TRANSFER OF RIGHTS

Transfer of Rights at Age of Majority. Beginning not later than one year before the child reaches the age of majority under state law, the IEP must include a statement that the child has been informed of the child's rights under Part B of the Act, if any, that will transfer to the child on reaching the age of majority... ($ 300.320(c) Definition of individualized education program.)

“When a student reaches the age of 19, that adult student is presumed under Alabama law to be capable of making his or her own decisions, including educational decisions. That does not mean; however, that parents cannot continue to be involved in their children's education. It does mean that, by law, the rights granted to parents under the IDEA have transferred to the adult student, unless that adult student has been determined to be incompetent under Alabama law, or has not been determined incompetent but has been determined unable to provide informed consent with respect to his or her educational program.”

(For more information regarding informed consent, see the following resource: Alabama State Department of Education, Special Education Services, May 2008, Procedures For Determining The Inability Of An Adult Student With A Disability To Provide Informed Consent When IDEA Rights Are Transferred At The Age Of Majority (19)).
LEAST RESTRICTIVE ENVIRONMENT (LRE)

Least restrictive environment.--
(A) In general.--To the maximum extent appropriate, children with disabilities, including children in public or private institutions or other care facilities, are educated with children who are not disabled, and special classes, separate schooling, or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability of a child is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily. (TITLE I -- AMENDMENTS TO THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT § 612(a)(5) LEAST RESTRICTIVE ENVIRONMENT.)

Children 6-21 Years of Age

- 100% to 80% of the Day Inside the Regular Education Environment
- 79% to 40% of the Day Inside the Regular Education Environment
- Less Than 40% of the Day Inside the Regular Education Environment
- Private School (Parentally Placed)
- Separate School - Public Day School Greater Than 50% of the Day
- Separate School - Private Day School Greater Than 50% of the Day
- Homebound
- Hospital
- Public Residential School Greater Than 50% of the Day
- Private Residential School Greater Than 50% of the Day
- Short Term Detention (Community or Residential) or Correctional Facilities

Children 3-5 Years of Age

- Regular Early Childhood Program At Least 10 Hrs. Per Week Receiving Majority of Special Education Services in the Regular Early Childhood Environment
- Regular Early Childhood Program At Least 10 Hrs. Per Week Receiving Majority of Special Education Services in Other Location
- Regular Early Childhood Program Less Than 10 Hrs. Per Week Receiving Majority of Special Education Services in the Regular Early Childhood Environment
- Regular Early Childhood Program Less Than 10 Hrs. Per Week Receiving Majority of Special Education Services in Other Location
- Separate Class: Attending a Special Education Program Not Attending a Regular Early Childhood Program or Kindergarten
- Separate School: Attending a Special Education Program Not Attending a Regular Early Childhood Program or Kindergarten
- Residential Facility: Attending a Special Education Program Not Attending a Regular Early Childhood Program or Kindergarten
- Service Provider Location Not Attending a Special Education Program or a Regular Early Childhood Program or Kindergarten
- Home Not Attending a Special Education Program or a Regular Early Childhood Program or Kindergarten
LEAST RESTRICTIVE ENVIRONMENT (LRE)

Continuum of alternative placements.--
Each public agency must ensure that a continuum of alternative placements is available to meet the needs of children with disabilities for special education and related services.
The continuum required must—
(1) Include alternative placements:
• Instruction in regular classes,
• Special classes,
• Special schools,
• Home instruction, and
• Instruction in hospitals and institutions; and
(2) Make provision for supplementary services (such as resource room or itinerant instruction) to be provided in conjunction with regular class placement.
34 CFR 300.115.

why?
Why?
WHY?

...did you remove him from the general education setting?

Or better yet, why couldn’t his services be delivered in the general education setting…

Patrick is in 6th grade and reads on a 2nd grade level. He receives instruction in a resource room with replacement intervention programs for reading and mathematics. The resource room was selected for reading and mathematics instruction due to substantial gaps in performance so that he can participate in the lessons without distraction or embarrassment.

• He receives individual counseling in a private room; and participates in role play and hands on experiences in the resource room to improve behavior. Group counseling and in-class coaching were considered, but ruled out due to the nature of Patrick’s emotional outbursts and aggression.

Have available a continuum of LRE placements.

Consider supplementary aids and services:
• Accommodations and modifications
• Program modifications
• Support for personnel
• Assistive technology

Monitor the appropriateness of the environment.
LEAST RESTRICTIVE ENVIRONMENT (LRE)

The least restrictive environment justification explains why there is nonparticipation if the student does not participate full time in the general education classroom.

LRE considerations:
- Consider the general education classroom first
- Consider what aids and services would allow the student to participate in the general education classroom successfully
- Consider what positive behavior strategies and interventions may be appropriate for a student with behavior that impedes his or her learning or the learning of others
- Consider the student's language needs if the student is deaf or hard of hearing, or is an English Learner (EL)
- Consider the need for instruction in Braille and the use of Braille for a student who is blind or visually impaired
- Consider the student's communication needs
- Consider the student's need for assistive technology devices and services

LRE decision is not based upon the following:
- The student's disability
- School organization
- Instructional methods
- Curriculum content
- Service availability
- Space availability

(Source Unknown)

Common mistakes when justifying LRE:
Identifying the service rather than the reason.

For example:
Unacceptable LRE justification: “Bob needs 1-1 speech services”

Acceptable LRE justification: “Bob requires 1-1 instruction for articulation because he is self-conscious and highly distracted when practicing in a group setting”

Note: LRE justifications must be individualized for each student according to his or her characteristics and difficulties. A few students might have the same or similar wording in the LRE justification, but there should be variation in the statements across the LEA, schools, and classrooms, that demonstrates the justifications are individualized and not copied and pasted.
LEAST RESTRICTIVE ENVIRONMENT (LRE)

What has the court said about least restrictive environment?

The court in *Oberti* adopted a two-part test for assessing compliance with the LRE requirement. (See *Oberti*, 995 F.2d at 1215.)

**First, determine:**

“whether education in the regular classroom, with the use of supplementary aids and services, can be achieved satisfactorily.”

Factors to consider are:

(1) The steps the LEA has taken to accommodate the child in a regular classroom;

(2) The child’s ability to receive an educational benefit from regular education; and

(3) The effect the child with a disability’s presence has on the regular classroom.

**Second, if placement outside of a regular classroom is necessary for the child’s educational benefit, evaluate:**

“whether the school has mainstreamed the child to the maximum extent appropriate, i.e., whether the school has made efforts to include the child in school programs with nondisabled children whenever possible.”

This requirement also applies to preschool children, (see 34 C.F.R. § 300.552,) and the LEA bears the burden of proving compliance with the IDEA’s mainstreaming requirement.

*Oberti by Oberti v. Bd. of Educ. of Borough of Clementon Sch. Dist.*, 995 F.2d 1204, 1215 (3d Cir. 1993)

LRE Justification Examples:

_____ receives small-group instruction in a quiet environment because he has difficulty with noise and withdraws when distracted.

_____ displays verbal and physical aggression toward others, which makes instruction in a smaller, more structured environment necessary.

_____ tantrums easily and is prone to behavioral outbursts; therefore, she requires social skills training in a private, non-threatening environment.

_____ has gaps in adaptive behavior; therefore, she requires targeted instruction in functional academics, daily living, and self-help skills in natural and/or simulated natural settings.

(Including the student's characteristic(s) in the LRE justification is not required, (especially if that information is sensitive and/or confidential) but sometimes including it helps clarify the situation.)
Step 7. Services are provided.
The school makes sure that the child’s IEP is being carried out as it was written.

Each of the child’s teachers and service providers has access to the IEP and knows his or her specific responsibilities for carrying out the IEP. This includes the accommodations, modifications, and supports that must be provided to the child, in keeping with the IEP.

Step 8. Progress is measured and reported to parents.
The child’s progress toward the annual goals is measured, as stated in the IEP. His or her parents are regularly informed of their child’s progress and whether that progress is enough for the child to achieve the goals by the end of the year. These progress reports must be given to parents at least as often as parents are informed of their nondisabled children’s progress.

Step 9. IEP is reviewed.
The child’s IEP is reviewed by the IEP team at least once every 12 months (i.e., by the signature date of the last IEP), or more often if the parents or school ask for a review. Parents, as team members, must be invited to attend these meetings. Parents can make suggestions for changes, can agree or disagree with the IEP goals, and agree or disagree with the placement.

If parents do not agree with the IEP and placement, they may discuss their concerns with other members of the IEP team and try to work out an agreement. There are several options, including additional testing, an independent evaluation, or asking for mediation or a due process hearing. They may also file a complaint with the state education agency.

(From: U.S. Department of Education
www2.ed.gov/parents/needs/speced/iepguide/index.html)
EVIDENCE-BASED PRACTICES

PROGRAMS, POLICIES, and PRACTICES for STUDENTS with DISABILITIES SHOULD ALWAYS BE EVIDENCED-BASED

The Every Student Succeeds Act (ESSA) “defines evidence-based according to the type of study conducted, not necessarily the strength of the study results.

Those levels are:

**Strong Evidence.** A well designed and implemented experimental or randomized control trial.

**Moderate Evidence.** At least one quasi-experimental study.

**Promising Evidence.** At least one correlational study with statistical controls for selection bias.

**Demonstrates a Rationale.** Relevant research or evaluation showing that the product will likely improve student outcomes; still needs other support that it has a favorable effect.”


**“Evidence-based practice refers to a practice with the strongest research evidence:**
- Shown to have a positive effect on student outcomes
- The research design allows one to infer that the practice led to child or student improvement
- Multiple high-quality studies have been conducted
- Reviewed by a reputable organization (e.g., What Works Clearinghouse)”

IRIS Center, Peabody University. What is an evidence-based practice or program (EBP)? Retrieved March 11, 2019. https://iris.peabody.vanderbilt.edu/module/ebp_01/cresource/q1/p01/#content

PROGRESS MONITORING

- Identify target behavior
- Develop measurement approach
- Monitor and evaluate progress


“Progress monitoring is an essential part of successful intervention. It is the scientifically based practice of assessing students’ academic performance on a regular basis that serves the following purposes:
- Determine whether students are benefitting from core Tier I instruction
- Develop more effective programming for students who are not benefitting from core instruction
- Identify students who are not making adequate progress towards benchmarks
- Compare the efficacy of different forms of instruction/intervention
- Design more effective, individualized interventions early on”

**Co-TEACHING and Co-PLANNING**

"Co-teaching is a specific service delivery option that is based on collaboration." (Marilyn Friend and Lynne Cook)

**Co-TEACHING**

"Co-teaching is one way to deliver services to students with disabilities or other special needs as part of a philosophy of inclusive practices. As a result, it shares many benefits with other inclusion strategies, including a reduction in stigma for students with special needs, an increased understanding and respect for students with special needs on the part of other students, and the development of a sense of heterogeneously-based classroom community."

"In co-taught classrooms, ALL students can receive improved instruction. This includes students who are academically gifted or talented, students who have average ability, students who are at-risk for school failure as well as students with identified special needs."


**Shared Responsibilities**

Both educators are responsible for the following:
- Planning
- Delivering instruction
- Adapting materials
- Parental communication
- Accommodations
- Providing feedback
- Grading


**Six Approaches to Co-Teaching**

1. One Teaching, One Observing
2. Station Teaching
3. Parallel Teaching
4. Alternative Teaching
5. Teaming
6. One Teaching, One Assisting


**Co-PLANNING**

"What is co-planning?"

Co-planning is where two teachers who are going to teach together use one of the models of co-teaching to decide how they will implement instruction to meet the needs of all students. During the planning process the general goals of the lesson are developed along with ways to meet the academic and/or behavioral needs of individual students. Depending on the type of co-teaching used, the amount of planning time that is needed varies.

Why is co-planning important?

Co-planning is very important for co-taught teams to effectively meet the needs of all students. Without co-planning, lessons that are developed may just address the general needs of students in the classroom. If students in the classroom have unique academic or behavioral needs, without co-planning, accommodations may not be developed to ensure these specific students' needs are met in the co-taught setting."

**PRIOR WRITTEN NOTICE**

*The school must explain “why” when an IEP Team proposes or refuses to take an action in certain instances.*

Written notice must be given to the parents of a child with a disability a reasonable time before the public agency—

(1) **Proposes** to initiate or change the identification, evaluation, or educational placement of the child or the provision of FAPE to the child.

(2) **Refuses** to initiate or change the identification, evaluation, or educational placement of the child or the provision of FAPE to the child.

(§ 300.503(a) Prior notice by the public agency.)

Parents must receive prior written notice from the school each time the school proposes to take, or refuses to take actions related to the following areas:

- Identification, evaluation, or educational placement (including graduation with a standard or advanced diploma) of the child.
- The provision of a free appropriate public education (FAPE) for the child.

Content of notice. The notice must include -

1. A description of the action proposed or refused by the agency;
2. An explanation of why the agency proposes or refuses to take the action;
3. A description of each evaluation procedure, assessment, record, or report the agency used as a basis for the proposed or refused action;
4. A statement that the parents of a child with a disability have protection under the procedural safeguards of this part and, if this notice is not an initial referral for evaluation, the means by which a copy of a description of the procedural safeguards can be obtained;
5. Sources for parents to contact to obtain assistance in understanding the provisions of this part;
6. A description of other options that the IEP Team considered and the reasons why those options were rejected; and
7. A description of other factors that are relevant to the agency's proposal or refusal.

(§ 300.503(a) Prior notice by the public agency.)

**IEP Team:**
Do not let saying “no” become too easy.
Be accustomed to articulating “why.”
PART V: REEVALUATION

10

Step 10. Child is reevaluated.
At least every three years the child must be reevaluated. The purpose of the reevaluation is to find out if the child continues to be a "child with a disability," as defined by IDEA, and what the child's educational needs are. However, the child must be reevaluated more often if conditions warrant or if the child's parent or teacher asks for a new evaluation before three years has passed.