

# Assessments School Age Years

hen a child struggles in school, it is cause for concern. The first step in addressing this concern is gathering information.

Next, with the appropriate information, you and the school work together to sort out what is going on and what might be needed. Keep in mind: Assessment is the foundation for making changes to support your child.

Eligibility for Special Education services as well as accommodations provided under a 504 Plan must be determined through assessments. As part of a federal law — the Individuals with Disabilities Education Act (IDEA) — there are specific requirements for Special Education assessments.



If your child is already receiving Special Education services at school through an Individual Education Plan (IEP), assessments are also used to revise any part of the IEP.

# Other related information packets include those on specific disabilities as well as:

- Advocating for Your Child with Special Needs
- Behavior
- Individual Education Plans (IEPs)
- IEP Tool Kit
- Getting Organized
- · Resolving Disagreements
- 504 Plans

### This packet reviews how to:

- » share your concerns using specific examples of the problem
- » request a formal evaluation
- » understand the legal requirements of the Special Education assessment process
- » make sense of evaluation reports
- » use assessment information to help your child



### **Assessment Resources**

#### Websites

Familes and Advocates Partnership for Education (FAPE), www.fape.org

Great Schools (formerly Schwab Foundation for Learning), www.greatschools.net

Center for Parent Information and Resources, www.parentcenterhub.org/

Disability Rights California, www.disabilityrightsca.org

Wrightslaw, www.wrightslaw.com

Websites of organizations for specific disabilities also have information on best practices for disability-specific assessments.

### **Books**

The Complete Guide to Special Education: Expert Advice on Evaluations, IEPs and Helping Kids Succeed (2010) – Linda Wilmshurst, PhD, and Alan W. Brue

Special Educator's Comprehensive Guide to 301 Diagnostic Tests (2006) – Roger Pierangelo

The Complete IEP Guide (2011) – Larry Siegel, Esq.

Straight Talk About Psychological Testing for Kids (2003) – Ellen Braaten

From Emotions to Advocacy: The Special Education Survival Guide (2006) – Peter Wright, Esq., & Pamela Wright

All About IEPs (2010) - Peter Wright, Esq.

Functional Assessment and Program Development for Problem Behavior (1997) – Robert O'Neill

Special Education Eligibility (2007) – Roger Pierangelo



### **Assessment Overview**

### The Foundation of an IEP

An assessment (or evaluation) is needed to decide if a child is eligible for Special Education services or a 504 Plan. Evaluations can also gather information to help revise a child's existing plan. When used for eligibility, assessments must address all areas of suspected disability. To qualify for Special Education, the assessment must find a disability in at least one of 13 eligibility areas. Also, the disability must significantly get in the way of a child's education. If a child is found eligible for either Special Education or a 504 Plan, assessment is the foundation for developing the plan. If a child is not eligible, the assessment can still give helpful information for general education staff.

### **TYPES OF SPECIAL EDUCATION EVALUATIONS**

- **Initial:** to identify if a student has a disability that meets eligibility requirements and determine educational needs.
- **Triennial:** conducted every 3 years after a student is in Special Education to find out if the child still is eligible. It is also used to measure progress and identify current educational needs. If the school district decides no testing is needed as they feel the student is clearly eligible yet the parent asks for assessment, the school must assess based on parent request.
- As needed or per parent request: to guide possible changes to the IEP by finding out how to meet the unique needs caused by the disability, such as the need for speech and language services, assistive technology, occupational therapy, or counseling.
- **Independent Educational Evaluation (IEE):** an evaluation by someone independent of th school district, paid for by the district, if a parent disagrees with a school district evaluation.

### **TIMELINES FOR SPECIAL EDUCATION EVALUATIONS**

- When a school district receives a written request for an evaluation, it has 15 calendar days (excluding school vacations greater than 5 days) to answer in writing if it will do the assessment. If you, the parent, make the request verbally, the district is to help you put the request in writing.
- If the district decides an assessment is not needed, they must put in writing the information they used to make this decision. Parents have a right to appeal the denial.
- If the district agrees to assess, they must give you a written assessment plan and get written parent consent to go ahead with the plan. You (parent or guardian) have at least 15 calendar days from the receipt of the proposed assessment plan to arrive at a decision regarding the plan. The assessment(s) may begin immediately upon receipt of the parent's concent.
- The district has 60 calendar days (excluding school vacations of greater than 5 days) to finish the assessment and hold an IEP meeting to go over the findings, decide eligibility, and, if eligible, develop the IEP.

**REQUIREMENTS** – Special Education law describes the procedures and required features of assessments.

#### IMPORTANT CONSIDERATIONS

- Ask for copies of written reports before the IEP meeting so you can check accuracy, develop questions, identify areas of agreement or disagreement, or review the report with others.
- Formal testing is only one method of assessment. A variety of methods must be used (including information from parents) such as interviews, observations, work samples, attendance or discipline records, review of past history, etc.
- Organize what you want to share —write down your ideas, concerns, and observations; bring these and other important papers to the IEP meeting. See the Matrix IEP Tool Kit.
- Before signing the consent to assess, make sure all areas of concern are being evaluated Understand why each test is being proposed and what each test is measuring.



### **Assessment Overview**

### The Foundation of an IEP

### ASSESSMENTS FROM PROFESSIONALS IN PRIVATE PRACTICE

If you provide a private assessment, the IEP team must consider it, but the district is not obligated to use it or agree with it. However, private assessments can be quite useful — call Matrix for quidance.

### INDEPENDENT EDUCATIONAL EVALUATION (IEE)

If you disagree with the school's assessment, you can ask for an independent one at public expense. Put this in writing. The school district must either give you information on how to get an IEE, or initiate a due process hearing to show that their assessment was appropriate. If a ruling finds the district assessment was appropriate, then the district would not have to provide an IEE. Follow the district's IEE policy before taking any action, or you may end up paying for the assessment.

### ANOTHER ASSESSMENT OPTION – CALIFORNIA DIAGNOSTIC CENTER

This center is part of the California Department of Education. Among other services, they provide assessments for districts at the district's request. See <a href="https://www.dcn-cde.ca.gov">www.dcn-cde.ca.gov</a>.

### IMPORTANT INFORMATION TO CONSIDER IN SELECTING A PRIVATE EVALUATOR

### **Types of Evaluators**

A professional's training and level of education is important. Some tests can only be given by a certain type of professional. Know the different types of professionals. For example:

**Psychologists**: Educational, Clinical and School Psychologists, Neuropsychologists

**Counseling:** Marriage and Family Therapists (MFT), Clinical Social Workers, Psychiatrists, Clinical Psychologists

**Physicians:** General Pediatrician, Developmental Pediatrician, Child Psychiatrist

**Educators:** General Education, Special Education, Educational Therapist, Educational Consultant

### INTERVIEWING EVALUATORS – Ask questions before making a choice, such as:

- What experience have they had with children such as yours— what percentage of their practice or how many similar evaluations in a year?
- What is their training and licensing?
- How much time is involved?
- Will the report include an appendix with test scores?
- Will the report include recommendations for interventions?
- Will there be a classroom observation?
- Do they attend IEP or school meetings to review their report?
- Is there a separate meeting with you as the parent?
- How soon can they start and when can they finish?
- Fee structure and charges for phone consultation?

Get references from others, including other parents. Compare each professional and include how they communicated with you during your phone interview.





# **IEPs: The Sequence**

he Individuals with Disabilities Education Act (IDEA) is the federal Special Education law which requires that students with disabilities in Special Education receive a free and appropriate education (FAPE) in the least restrictive environment (LRE). This law sets up a process with a sequence to make sure that students with disabilities receive an Individualized Education Program (IEP) based on their specific needs, and that they not be needlessly segregated from their non-disabled peers. You will see that the sequence of discussion and decisions must happen in an orderly manner: first assessments, then goals, then services, and only then, placement. Assessment is the base or foundation for the development of the IEP. All of the parts of the IEP are to flow from assessments of the student. Below you will see how the IEP is built from the foundation up.

### 4. Placement

The last decision is where services should take place for the student to make adequate progress on their goals and be in the least restrictive environment appropriate for this student. Discussion of placement happens after agreement is reached on assessment, goals, and related services and should be based on needs, not category of disability. Parents have a right to visit any recommended placement.

#### 3. Services

Once goals are written, the team decides the services the student needs to make progress on their goals and be educated in the least restrictive environment. This means being educated to the greatest extent possible with non-disabled peers. The frequency, duration and location of services must be written. Availability and convenience should not determine services; rather, the decision is based on what the student needs to make progress. Needed modifications should be written as well as behavioral supports.

### 2. Goals

Using the assessment information, the IEP team, including the parent, identifies areas of need that the IEP will address so that the student will make progress in the general education curriculum. Beginning with specific and measurable statements of present levels of academic achievement and functional performance, the team develops annual goals, both academic and functional. These are specific and measurable statements of how the student will perform after one year of Special Education services. Student strengths and interests must be considered in addressing areas of need.

### 1. Assessment

Assessment should occur in all areas related to the suspected disability. It consists of standardized tests, background information, and other data on how a student functions or performs such as work samples and observations. Assessment cannot be discriminatory: Students who do not speak English should not be tested in English, visually impaired students should have assessments that do not rely on seeing, etc. For students with language disabilities, their cognitive ability (intelligence) should not be measured with tests that are heavily dependent on language. No single procedure is to be used as the sole criterion of eligibility. Parental consent is required for all assessments. Screenings given to all students by teachers are not considered to be an evaluation.



# Parent Observations: Getting Specific

When explaining your concerns about your child, being specific helps. Organize your information. Our IEP Tool Kit can help with this. Have work samples. Keep a log of specific behaviors. Showing something can sometimes be more powerful than telling something. The following are examples of specific observations:

General	Specific
messy handwriting	math problems aren't lined up letters spill over the lines on the page pencil marks are so dark and she pushes too hard writes slowly and tires quickly bring a work sample – show what you mean
doesn't listen	instructions need to be repeated if there is a list of things to do, student does only the first thing gets headaches in loud places makes noises, sings, talks to self
doesn't get his work done	forgets books three out of the five days each week desk papers, drawers, backpack are a mess gets the right answer but takes a long time thinks work will take less time than it does
can't remember	math facts still not memorized; doesn't know what month it is does fine on a spelling test one week, then can't spell the same words the next week
reading is hard	reads short passages, avoids reading books doesn't want to read books unless they have pictures reads aloud fine, but can't summarize it aloud skips lines, adds words that aren't there, misses simple words doesn't want to read aloud; when does, reads slowly with difficulty
my child is unhappy	has stomachaches each day before school rips up, crumples, or throws out work or assignments pokes holes in the cuffs of sweatshirts doesn't sleep well and seems tired most days reports being teased by other kids
behavior problems	teacher sends email each week about disruptions received in-school suspension from principal gets into conflicts during lunch and recess



# Sample Letter

# Request for an Initial Assessment for Special Education or 504 Plan Eligibility

Parent/Guardian's name			
Address			
City, State, Zip Code			
Daytime Telephone			
Date			
(Principal or S	Special Education Direc	ctor)	
Local School District			
Address			
City, State, Zip Code			
Dear:			
I am the parent of	, who is in the	grade at	(school). I am requesting
a comprehensive assessment	in all areas related to su	uspected disability	
Act or Section 504 of the Reha	bilitation Act of 1973. I	am requesting thi	
been tried (list interventions s			•
	3 3		e, add: has been
diagnosed with			nas been
alagnosca with	(	professionary.	
It is my understanding that I w	vill hear back from you	in writing within 1	5 days of this request. I look
forward to hearing from you a	-	_	,
Sincerely,			
Your name			
cc: Include others who you thi	nk might need to know	v about your reque	est .
•••••	, <b></b>		• • • • • • • • • • • • • • • • • • • •
NOTES:			
*If the district agrees to do an a	ssessment, when you giv	ve your written pern	mission to the assessment plan, it
_		•	reports prior to the IEP meeting.
While the district is not required	l to do this, it is considere	ed best practice.	
*If your child has a health imp	airment such as ADHD,	Tourette's, or sleep	<b>p apnea,</b> eligibility under the
Other Health Impairment categ	ory needs to be consider	red. Make this clear	by stating: "I am requesting
a comprehensive assessment in			luding the Other Health
Impairment category, to determ	nine whether	is"	

www.matrixparents.org | 94 Galli Drive, Suite C, Novato, CA 94949 | Helpline: 800.578.2592



# Sample Letter

## Request for Special Education Eligibility Assessment (Preschool Age)

Parent/Guardian's name
Address
City, State, Zip Code
Daytime Telephone
Date
(Special Education Director)
Your School District
Address
City, State, Zip Code
Dear:
I am the parent of, who isyears old. I am requesting a comprehensive assessment in all areas of suspected disability to determine whether is eligible for Special Education and/or related services under the Individuals with Disabilities Education Act. (If applicable, add): has been diagnosed with by (professional).
I am requesting this assessment because (be specific and brief; give examples in all areas of development where you suspect delays or have concerns such as speech/language, behavior, social/emotional, cognition).
It is my understanding that I will hear back from you in writing within 15 days of this request. I look forward to hearing from you.
Sincerely,
Your name
cc: Include others whom you think might need to know about your request (intake coordinator of the district, preschool teacher, etc.).
NOTES:
If the district agrees to do an assessment, when you give your written permission to the assessment plan, it is very important to put in writing that you would like copies of all written reports prior to the IEP meeting. While the district is not required to do this, it is considered best practice.
If the district denies your request for assessment, their denial must be put in writing, called Prior Written Notice, and include all the data they used to support their denial.



## **Commonly Used Assessment Tools**

Professionals use a variety of tools to learn about a child's skills, behavior, emotions, or capacity for learning. Before giving consent to an assessment, learn about the proposed tools so you feel confident they will provide the information needed. Some tests evaluate a variety of areas and others are skill specific. Most tests include subtests, so ask if all will be given, and if not, ask why. Descriptions of many tests can be found on the internet and in the materials listed on our Resources page of this packet. The following are examples of tests that are commonly used:

### I.Q. (Intelligence Quotient)

Wechsler Intelligence Scale for Children (WISC-IV)
Comprehensive Test of Non-verbal Intelligence (C-TONI)
Woodcock Johnson Cognitive Abilities (WJ Cognitive)
Developmental NEuroPSYchological Assessment (NEPSY) — includes theory of mind

### **Academics**

Woodcock Johnson Achievement (WJ Achievement) Wechsler Achievement Tests (WIAT) KeyMath Test of Written Language (TOWL) Gray Oral Reading (GORT)

### Language

Clinical Evaluation of Language Fundamentals (CELF) — includes language pragmatics
Test of Problem Solving (TOPS) — includes language pragmatics
Test of Auditory Processing (TAPS)
Comprehensive Assessment of Spoken Language (CASL) — includes language pragmatics
Social Communication Questionnaire (SCR)

### **Processing**

Test of Visual Perceptual Skills (TVPS)
Wide Range Assessment of Memory and Learning (WRAML)
Connor's — measures attention

Comprehensive Test of Phonological Processing (CTOPP)

Test of Everyday Attention for Children (TEA-CH)

### **Emotions and Behavior**

Behavior Assessment System for Children (BASC) Children's Manifest Anxiety Scale Beck Depression Scale Vineland Adaptive Scale



### Autism (see also Language)

Autism Diagnostic Observation Schedule (ADOS)
Pervasive Developmental Disorders Screening Test (PDDST)
Autism Diagnostic Interview (ADI)



# ✓ CHECKLIST Assessment Checklist

Parents must give their written consent for an assessment to take place. In order to understand the assessments that will be used with your child, learn about each assessment tool, why it has been selected, the specifics of what will be measured, and how this will be done. If you ask for an assessment and the school says an assessment is not needed, they must give you written notice explaining their reasons for saying no and the data they used to make that decision. It is not OK for the district to just tell you they don't think an assessment is needed.



### **Assessment:**

☐ must be in all areas related to the suspected disability — Communication, Health and living skills, Academics, Motor, Perceptual and Social/emotional). Some parents remember these areas by thinking C.H.A.M.P.S.
☐ includes a variety of measures, as no single score or procedure can decide eligibility or determine a student's program. Examples of different measures or procedures: observation, work samples, interviews, attendance or behavior records, report cards, and group and individual standardized tests
$\square$ includes information from the parent, teachers, and others who give services
$\square$ includes discussion of strengths as well as areas of need
☐ describes a child's educational needs and gives information to guide instruction (i.e. if you are concerned that your child can't read long passages of text, a reading test is needed that assesses this and not a test that involves reading single words or 1–2 sentences).
$\square$ includes tests given by trained persons in accordance with testing instructions
$\hfill\square$ must be valid, non-discriminatory (race, culture, native language), and tests must accurately measure what they are designed to measure
$\hfill\square$ must take into account a child's age, level of functioning, disabilities, and attention
☐ given to students with impaired sensory, manual, or speaking skills to measure ability must accurately reflect ability rather than reflecting the impairment (i.e. if you have low vision, a reading test with small text may not measure your intellectual ability accurately)
□ results given in a written report and explained in a way that you understand. At the time you give your written consent, ask to receive written reports before the IEP meeting so you have time to carefully read the information, manage any emotions privately, and be prepared with questions and to be part of the IEP team discussion. While this is not required of districts, it is best practice. Many districts will do their best to make this happen.



# Questions to Ask Yourself When Reviewing Your Child's Assessment

As you read the reports the professionals have written, the following questions may guide you. Many families find it helpful to use a copy of the original report to make margin notes or use different colored highlighters to find information you want to bring up at the IEP meeting.

- Is the information accurate? If information is not accurate, highlight that in one color. Ask to have the report corrected. If the evaluator agrees, get a corrected copy and review your child's file to be sure the inaccurate copy is removed. If the district refuses to correct the information, ask for the district's policy on student records. There are legal requirements about parent requests to change student records.
- Does the assessment "feel" right? Does it sound like your child? Highlight in another color key areas that you agree with and in another color, areas you disagree with. This can help you quickly find these areas for discussion. If after the IEP meeting you still disagree with an assessment, ask your district for a copy of the policy on seeking an independent educational evaluation (IEE) at public expense. Information on IEE is available through Matrix, in the Parents Rights document given to you by the district, or from the CA Department of Education by calling 800.926.0648.
- **Are inconsistencies explained?** Does the report explain possible causes when there are different findings for the same area? If there is a large variation in scores within one test in different areas, is this noted and the scores not averaged? Or if the scores are averaged despite the variation, is the variation considered?
- If a weak area is identified, is it further evaluated to better understand the weakness? This is similar to unpeeling an onion to get to other layers. Dig deeper to understand weak areas.
- Are scores shown in percentiles as well as standard and/or scaled scores? Do you understand the scores and how they are reported? Percentiles are often easiest for parents to understand. A score of 50% means your child is right in the middle of where all children score. Ask to have scores put in a way you understand.
- Were multiple methods of evaluation used? This means the evaluation includes more than test scores and includes items such as teacher observations, work samples, attendance or behavior records, interviews, review of history, reports from other professionals, rating scales.
- Were all areas of suspected disability evaluated and were your initial concerns addressed? If not, you could request further evaluation, or you can disagree and ask for an IEE.



## **Assessment Scoring Terminology**

Test scores can be very confusing to parents. As scores are used along with other data to make decisions about your child, it is important to ASK, ASK, ASK the professionals to give explanations that you understand. Sometimes professionals forget that not everyone knows the terminology that they use every day. The following are explanations that may help you:

**STANDARD SCORE:** In standard scores, the average or mean score is 100. This is the same as getting a 50% score or a score right in the middle of all of the scores. Standard scores are unlike classroom tests where 100 is a perfect score.

**STANDARD DEVIATION:** In standard scores, the average score or mean is 100, with a standard deviation of 15. The average child will earn a standard score of 100. If a child scores 1 standard deviation above the mean, the standard score is 100 plus 15 (100 + 15 = 115). If the child scores 1 standard deviation below the mean, this is 100 minus 15 (100 - 15 = 85). Two-thirds of all children

are between 1 standard deviation below and 1 standard deviation above the average or mean score, scoring between 85 and 115.

**SCALED SCORE:** In scaled scores, 10 is the average score. This would be the same as getting a 50% score. The standard deviation for a scaled score is 3. Again, two thirds of all children fall between 1 standard deviation below (10 - 3 = 7) and 1 standard deviation above (10 + 3 = 13) the average/mean of a scaled score of 10, scoring between 7 and 13.

**PERCENTILE RANK:** Shows where a child is relative to 100 other students. If you think of 100 students standing in a line according to how well they did on a test, and your child receives a 60% rank, that means that 40 students out of 100 scored better, and your child scored better than 59 other students.

**T-SCORES:** Usually used to report results on emotional rating scales. Unlike in academic testing where the higher the score the better the result, with T-scores, scores that fall very high or very low may be areas of concern or a problem. For each test, be sure to ask the evaluator to explain the significance of T-scores, as the range of scores that may be of concern can vary.

**NORM-REFERENCED TESTS:** Designed to show how well a given student performs against some average or norm.

**STANDARDIZATION:** A procedure for establishing test norms by giving the test to large numbers of children who are representative of those for whom the test is designed.



# Assessment Score and Percentile Conversion Chart

STANDARD SCORE	SUBTEST SCORE	% RANK
145	19	GREATER THAN
140	18	GREATER THAN
135	17	99%
130	16	98%
125	15	95%
120	14	91%
115	13	84%
110	12	75%
109	_	73%
108	_	70%
107	_	68%
106	_	66%
105	11	63%
104	_	61%
103	_	58%
102	_	55%
101	_	53%
100	10	50% MIDDLE
99	_	47%
98	_	45%
97	_	42%
96	_	39%
95	9	37%
94	_	34%
93	_	32%
92	_	30%
91	_	27%
90	8	25%
89	-	23%
8B	-	21%
87	_	19%
86	_	18%
85	7	16%
80	6	9%
75	5	5%
70	4	201



# **Ratings Chart**

Classification Ratings Corresponding to Standard Scores, Scaled Scores, Percentile Ranks and T-Scores

à							Standard Score	Sealed Score	Percentile Rank	T - Score
Very Superior						000	E .	91	88	70 .
Superior				0	000	0000	8	*	91	*
IIIgh Average		0	0000	0000	0000	0000	110	1	75 9	3
Range	(1) (1) (2) (3)	0 0 0 0 0 0	00000	00000	0000	00000	100			
<average range=""></average>	0000	00000	00000	0000	0000	00000		0	5 50	<b>*</b>
Lew		9	0000	0000	0000	00000	06	80	25	9
Donieriine				0	000	0000 00	08 6	9	0	•
Despois						000	69	7	7	3



# Special Education Categories of Eligibility

California Education Code has 13 eligibility categories for school-aged children. For each category, the disability must adversely affect education and result in needing Special Education and related services so the student will benefit from his or her education. The lack of educational achievement cannot be the result of limited school experience, poor school attendance, a history of inappropriate instruction, or environmental, cultural, or economic disadvantage. Schools provide an evaluation at no expense to parents to decide eligibility for Special Education.

**Note:** Special Education categories are not the same as diagnostic categories used by doctors and professionals outside the education system. A student can have a diagnosis and not meet the criteria for Special Education eligibility that may apply to that diagnosis.

### • Specific Learning Disability (SLD)

Option # 1: the discrepancy method requires a severe discrepancy or gap between intellectual ability and certain academic skills. The discrepancy must be caused by a disorder in one or more of the basic processing areas (visual, auditory, attention, cognitive, sensory/motor). The processing disorder results in problems with listening, speaking, reading, writing, doing math. Option #2: The RTI (response to intervention) method evaluates the student's response to increasingly intensive levels of general education intervention, and, if limited response, Special Education may result.

### • Speech and Language (SL)

Several possible disorders qualify: reduced intelligibility or inability to use speech which significantly gets in the way of communication or attracts adverse attention; disorders of abnormal voice and fluency; expressive or receptive language with scores at least below 7% for age on two or more standardized tests in one or more area: morphology, syntax, semantics, pragmatics.

### Other Health Impairment (OHI)

Limited strength, vitality, or alertness due to chronic or acute health problems, including but not limited to asthma, attention deficit or attention deficit hyperactivity disorder, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia, and Tourette Syndrome.

### • Emotional Disturbance (ED)

One or more of the following are seen over an lengthy period of time and to a marked degree: inability to learn which cannot be explained by intellectual, sensory, or health factors; an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; inappropriate types of behavior or feelings under normal circumstances in several situations; a general pervasive mood of unhappiness or depression; or a tendency to develop physical symptoms or fears associated with personal or school problems.

### • Autism (ASD)

A developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally seen before age 3. Other traits: engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences.



# Special Education Categories of Eligibility

### Intellectual Disability (ID)

General intellectual functioning is significantly below average with deficits in adaptive behavior.

### • Hard of Hearing (HH)

A hearing impairment, whether permanent or fluctuating, which causes problems with the processing of language through hearing, even with amplification.

### Deaf

### • Deaf/Blindness (DB)

Both hearing and visual impairments, the combination of which causes severe communication, developmental, and educational problems.

### • Multiple Disabilities (MD)

Combination of disabilities when needs can't be met in programs for only one impairment, i.e. intellectual disability (ID) & blindness, ID & deafness, ID & orthopedic impairment (excludes deaf-blindness).

### Orthopedic Impairment (OI)

Severe impairment, including those caused by congenital anomaly, disease or other causes (such as cerebral palsy, amputations and fractures, or burns which cause contractures).

### • Traumatic Brain Injury (TBI)

Brain injury by an external force or an internal event, i.e. stroke or aneurysm, resulting in partial or total functional disability or psychosocial problems resulting in mild, moderate, or severe impairments in one or more areas, including cognition; language; memory; attention; reasoning; abstract thinking; judgment, problem-solving; sensory, perceptual and motor abilities; psychosocial behavior; physical functions; information processing; and speech. Not included: congenital, degenerative, or birth trauma brain injury.

### • Visual Impairment (VI)

Includes blindness and partial sight that, even with correction, affects a child's educational performance.

### • Established Medical Condition (3-5 years)

An established medical condition or congenital syndrome which the IEP team decides has a high chance of needing Special Education.

### • A developmental delay in one or more of five areas:

for children birth–36 months, 33% in one or more area. Or an established risk condition with a high probability of developmental delay.



## **Assessment Denials or Disagreements**

### If you have asked for an assessment and the district has said no:

- Make sure your school district gives you the Prior Written Notice document. This is required
  by Education Code whenever a district refuses to assess. This document must state the reason for the denial. It must also state all the data used to make this decision. For more information on Prior Written Notice, see our IEP Packet.
- Review your letter in which you requested an assessment. If you didn't provide specific examples to support the need for an assessment, write another letter with specifics. Example: "I am requesting an assessment because my student has had three suspensions in the last two months. Her last report card showed a D in math and an F in English."
- If you find that there isn't enough data to support your request, more time might be needed for data to show the need your child may have for Special Education.
- For any denial, you have the option to take the district to due process. See our Disagreement packet.
- For a denial of a request for an initial eligibility assessment, you can file a compliance complaint with the California Department of Education. The complaint would say that you believe the district has not followed their responsibility for "Child Find." Child Find is a district's obligation to identify, locate, and evaluate children who may have a disability that would require Special Education.

### If you received an assessment report and you disagree with the report:

Sign in disagreement with the assessment report. Note you could agree with one assessment report and not another; e.g., you agree with the speech/language report but not the psychology report. To resolve the disagreement, you then could request:

- more assessment by the district
- a California Department of Education Diagnostic Center assessment, <u>www.dcn-cde.ca.gov.</u>
- an Independent Education Evaluation at Public Expense (IEE)

Assessments are the foundation upon which an IEP is developed. Assessment information is used to decide IEP goals, services, and placement. Having accurate assessments is the start of developing a meaningful IEP.



# Using the Results of an Assessment

### **Building on the Foundation**

Once you agree with the assessments, remember that assessment information is the foundation for interventions, whether it be an IEP, a 504, or a general education student success team (SST) or sometimes called student study team (SST) plan.

In reading the assessments, use our IEP Tool Kit to help you identify areas of need that could be addressed in an education plan.

# In Special Education, assessment information is used to determine eligibility and, if eligible, to write the IEP and decide:

- areas of need
- present levels of performance and annual goals for each area of need
- services (type, frequency, duration, location)
- if any special factors should be part of the IEP: behavior plan, assistive technology, English language supports, communication assistance
- what accommodations and modifications to the curriculum might be needed
- which state group test to use and any accommodations or modifications to the test
- whether to include extended school year
- how to judge progress, compare previous assessments, and act as a base for future assessments

### In a 504 plan, assessment is used to determine eligibility and, if eligible, to:

• Identify what reasonable accommodations need to be made in the general education setting

### If a student is not eligible for either an IEP or 504 plan, assessments can be used:

- To assist the general education teacher in understanding the student's learning profile
- To identify any adjustments to general education
- As a baseline when measuring progress in the future. In some cases, students who may not meet eligibility requirements now may do so in the future.

