**Special Education Eligibility Codes**

**Ontario School District**

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**Intellectual Disability: Eligibility Requirements**

**Definition**

Intellectual Disability: a student, whose intelligence test score is two or more deviations below the norm on a standardized individual intelligent test, existing with deficits in adaptive behavior, academic skills and manifested during the developmental period.

**Evaluation Requirements**

The special education team must include at least one professional knowledgeable and experienced in the evaluation of students with intellectual disability. The evaluation should include the following:

* Teacher: review the cum file
* Psych: an individually administered standardized intelligence test
* District Learning Specialist: a standardized adaptive behavior scale
* Medical Professional: a medical report or health assessment statement indicating whether there are any sensory or physical factors that may affect the student’s educational performance
* Learning Specialist: a developmental history of the student
* Learning Specialist: academic assessment
* Team: assessments to determine the impact of the suspected disability
* Team: Additional evaluations that are necessary to determine the student’s educational needs

**Meeting Minutes**

The meeting minutes should include the following:

* The criteria met by the student which documents the existence of the disability;
* A summary of the deliberation of the special education team regarding the procedures and the criteria; and
* A statement regarding the adverse impact on the student’s educational performance and the need for special education.

**Intellectual Disability Eligibility Evaluation Checklist**

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| --- | --- | --- |
| Student: | DOB: | Grade: |
| Teacher: | Case Manager: | Age: |

|  |  |  |
| --- | --- | --- |
| **What** | **Who** | **Completion** |
| Meeting notice for eval planning |  |  |
| Permission to eval form |  |  |
| Test Description Sheets |  |  |
| Record Review |  |  |
| Standardized Intelligence Test |  |  |
| Adaptive Behavior Scale |  |  |
| Developmental History |  |  |
| Medical statement |  |  |
| Assessment to determine impact | 1. | 1. |
| 2. | 2. |
| Additional Assessments(if necessary) |  |  |
| Meeting notice/Eligibility |  |  |
| Eligibility Statement |  |  |
| Prior Written Notice |  |  |
| Copy to parents/Rosie |  |  |

**Hearing Impairment: Eligibility Requirements**

**Definition**:

Hearing impairment includes both “hard of hearing” and “deaf”. “Hard of hearing” means a hearing condition which is functional with or without amplified sound and adversely affects the student’s educational performance. “Deaf” means hearing impairment which is so severe that the student’s hearing, with amplified sound, is nonfunctional for the purposes of educational performance.

**Evaluation Requirements:**

The special education team must include at least one professional knowledgeable and experienced in the evaluation and education of students with hearing impairments. The evaluation should include the following:

* Regional EDS: An audiological assessment by a licensed audiologist using standard procedures to confirm hearing levels and determine amplification needs.
* Medical professional: A medical report or health assessment statement indicating whether the hearing loss, if conductive, is treatable and whether the sue of amplification is contra-indicated.
* Learning Spec./Motor/SLP: An additional evaluation necessary to identify the student’s educational needs.
* Learning Specialist: Assessments to determine the impact of the suspected disability on the student’s educational performance.

**Meeting Minutes**

The meeting minutes should include the following:

* The criteria met by the student which documents the existence of the disability;
* A summary of the deliberation of the special education team regarding the procedures and the criteria; and
* A statement regarding the adverse impact on the student’s educational performance and the need for special education.

**Hearing Impairment Eligibility Evaluation Checklist**

|  |  |  |
| --- | --- | --- |
| Student: | DOB: | Grade: |
| Teacher: | Case Manager: | Age: |

|  |  |  |
| --- | --- | --- |
| **What** | **Who** | **Completion** |
| Meeting notice for eval planning |  |  |
| Permission to eval form |  |  |
| Test Description Sheets |  |  |
| Record Review |  |  |
| Audiological Assessment |  |  |
| Medical Statement |  |  |
| Developmental History |  |  |
| Assessment to determine impact | 1. | 1. |
| 2. | 2. |
| Additional Assessments(if necessary) |  |  |
| Meeting notice/Eligibility |  |  |
| Eligibility Statement |  |  |
| Prior Written Notice |  |  |
| Copy to parents/Rosie |  |  |

**Communication Disorder: Eligibility Requirements**

**Definition**

“Communication Disorder” means the impairment of speech articulation, voice, fluency, or the impairment of development of language comprehension and/or expression, or the impairment of the use of a spoken or other symbol system that adversely affects educational performance. The language impairment may be manifested by one or more of the following components of language: morphology, syntax, semantics, phonology, and pragmatics.

**Evaluation Requirements**

The special education team must include at least one professional knowledgeable and experienced in the evaluation of students with communication disorders (a speech and language pathologist licensed by a State Board of Examiners in Speech Pathology and Audiology or the Teacher Standards and Practices Commission). The evaluation should include the following:

SLP: A standardized assessment of articulation and/or phonological processes and a speech sample.

SLP: An evaluation or screening of the child’s hearing acuity and, if indicated, a measure of middle ear functioning.

Medical For a suspected **voice disorder**, a medical statement by an by an

Professional: otolaryngologist licensed by a State Board of Medical Examiners; for other suspected communication disorders, a medical statement or health assessment statement describing relevant medical issues, if necessary.

SLP: For a suspected **voice disorder**, a voice assessment scale.

SLP: For a suspected disorder in **syntax, morphology, semantics, or pragmatics**, a representative language sample and standardized test(s) assessing language comprehension and expression.

SLP: For a suspected **fluency disorder**, an observation in at least two settings and a standardized measurement by a speech and language pathologist.

SLP: An evaluation of the student’s oral mechanism, if indicated.

Special Ed. Any additional assessments to determine the impact of the suspected

Team: disability.

Special Ed. A file review and any additional assessments that are necessary to

Team: identify the student’s educational needs.

**Criteria for Determining the Existence of the Disability**

**a. Voice Disorder:**

• The student demonstrates chronic vocal characteristics that deviate in at least one of the areas of pitch, quality, resonance, and intensity;

• The voice disorder interferes or limits communication or intelligibility; and

• The disorder is rated as moderate to severe using a voice assessment scale.

**b. Fluency Disorder:**

• The student demonstrates interruption in the rhythm or rate of speech, which is characterized by hesitations, repetitions, or prolongations of sounds, syllables, words or phrases;

• The fluency disorder interferes with communication and calls attention to itself across two or more settings;

• The student demonstrates moderate to severe vocal dysfluencies, or the student evidences associated secondary non-vocal behaviors, such as struggling or avoidance as indicated by a standardized measure; **and**

**c. Phonological or Articulation Disorder:**

• The student’s phonology or articulation is rated significantly discrepant as measured by a standardized test.

• The disorder is substantiated by a language sample or other evaluation

• The disorder interferes with overall speech intelligibility and communication.

**d. Syntax, morphology, pragmatics, or semantic disorder:**

• See following pages for new language criteria

• The disorder is not the result of another disability (e.g., mental retardation, emotional disturbance)

**DETERMINING SPECIAL EDUCATION ELIGIBILITY**

For a student to be eligible for special education services under the category of communication disorder, the special education team must determine:

• The disability has an adverse impact on the student’s educational performance (kindergarten through age 21) or the student’s developmental progress (age 3 through the age of eligibility for kindergarten); and

• The student needs special education services as a result of the disability.

**EVALUATION SUMMARY REPORT**

The evaluator should prepare a written report that includes the following:

• A listing of all evaluation procedures required above and the results;

• The criteria to be used in consideration as to whether the student qualifies.

**MEETING MINUTES**

The meeting minutes should include the following:

• A summary of the deliberation of the special education team regarding the procedures and the criteria; and

• A statement regarding the adverse impact on the student’s educational performance and the need for special education.

**Language Disorder Eligibility – Quick Reference**

In order to meet eligibility for a language disorder, the team must determine the presence of a language disorder, the educational impact of the disorder, and whether or not special education services are warranted.

**1. Does the student have a language disorder as evidenced by standardized tests? If yes, is the language disorder substantiated by language samples or other tests?**

• To de determined by standardized assessments, language sampling, and other tests if appropriate.

• Response to Intervention can provide additional information on how a student learns, remembers, and transfers information over time, and is recommended when testing results are inconclusive.

**2. Does the child’s impairment have an adverse impact on the child’s educational performance?**

• **To be determined by communication checklists, teacher interview, and other tools that assess educational impact.**

**3. As a result of the disability, does the student need special education service?**

• To be determined by completion of the Language Disorder Eligibility Considerations Worksheet.

In order to qualify as language disordered, the answer to all questions must be ‘Yes.’ Please see following pages for more comprehensive information for each question.

**Language Disorders Eligibility Criteria**

**Question 1: Does the student have a language disorder as evidenced by standardized tests? If yes, is the language disorder substantiated by language samples or other tests?**

When conducting an evaluation, it is important to conduct a review of school records and look at attendance, school history, prior testing, vision and hearing screening data, and obtain parental input and information regarding family, medical, and developmental history. Relevant factors should be included in the diagnostic report. This information can be gathered at the Building Screening Committee meeting.

**Question 2: Does the child’s impairment have an adverse impact on the child’s educational performance?**

If the team determines that the student has a language disorder as evidenced by standardized tests and language sampling, the team must then determine if the student’s disability has an adverse educational impact. A student can have a language disorder but still not meet eligibility criteria for special education if the disorder does not have a significant impact on the student’s educational performance.

Educational impact can be determined by review of the Communication Checklist and/or teacher interview. Other tools that are also recommended to determine educational impact are Responsiveness to Intervention/Instruction (RTI), classroom observations, work sample analysis, and curriculum-based assignments. A more comprehensive description of use of these tools to determine educational impact is included in this manual.

**Question 3: As a result of the disability, does the student need special education services?**

Complete the “Language Disorder Eligibility Considerations Worksheet” to determine if the student qualifies for special education services under the area of a language disorder.

It is important to weigh all evidence from multiple assessments, including standardized testing, language sampling, and additional assessments to determine whether or not the existence of a language impairment is supported.

The weight of evidence is distributed among the multiple assessments. Standardized testing is one component that, in many evaluations, must be weighed with other components when making eligibility determinations.

When assessment components do not appear to agree, professional judgment is required to determine if the student meets eligibility criteria for service, and describe the rationale in summary of the diagnostic report.

**Communication Disorder Eligibility Evaluation Checklist**

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| --- | --- | --- |
| Student: | DOB: | Grade: |
| Teacher: | Case Manager: | Age: |

|  |  |  |
| --- | --- | --- |
| **What** | **Who** | **Completion** |
| Meeting notice for eval planning |  |  |
| Permission to eval form |  |  |
| Test Description Sheets |  |  |
| Record Review |  |  |
| Speech/Language Assessment |  |  |
| Medical Statement (for suspected voice disorder) |  |  |
| Hearing Screening |  |  |
| Oral Mechanism |  |  |
| Language Sample (expression and comprehension) |  |  |
| Voice Assess. Scale |  |  |
| Fluency- Observation in 2 settings | 1. | 1. |
| 2. | 2. |
| Assessment to Determine Impact |  |  |
| Additional Assess. If necessary |  |  |
| Meeting notice/Eligibility |  |  |
| Eligibility Statement |  |  |
| Prior Written Notice |  |  |
| Copy to parents/Rosie |  |  |

**Vision Impairment: Eligibility Requirements**

**Definition**

“Vision Impairment” means a visual impairment which, even with correction, adversely affects a student’s educational performance. This term includes those students who are partially sighted or blind.

**Evaluation Requirements**

The special education team must include at least one professional knowledgeable and experienced in the evaluation and education of students with vision impairments. The evaluation should include the following:

* Regional ESD: Additional evaluations or assessments that are necessary to identify the student’s educational needs, including a functional assessment of Residual visual acuity or field of vision.
* Medical Professional: A medical report by an ophthalmologist or optometrist licensed by a State Board of Examiners indicating that the student has a vision impairment.
* Special Education Team: Assessments to determine the impact of the suspected disability on the student’s educational performance.

**Meeting Minutes**

The meeting minutes should include the following:

* The criteria met by the student which documents the existence of the disability;
* A summary of the deliberation of the special education team regarding the procedures and the criteria; and
* A statement regarding the adverse impact on the student’s educational performance and the need for special education.

**Vision Impairment Eligibility Evaluation Checklist**

|  |  |  |
| --- | --- | --- |
| Student: | DOB: | Grade: |
| Teacher: | Case Manager: | Age: |

|  |  |  |
| --- | --- | --- |
| **What** | **Who** | **Completion** |
| Meeting notice for eval planning |  |  |
| Permission to eval form |  |  |
| Test Description Sheets |  |  |
| Record Review |  |  |
| Medical Statement |  |  |
| Assessment to determine impact | 1. | 1. |
| 2. | 2. |
| Additional Assessments(that are necessary to identify student’s education needs, including a functional assessment of child’s residual visual acuity or field vision.) |  |  |
| Meeting notice/Eligibility |  |  |
| Eligibility Statement |  |  |
| Prior Written Notice |  |  |
| Copy to parents/Rosie |  |  |

**Deaf/Blindness Eligibility Evaluation Checklist**

|  |  |  |
| --- | --- | --- |
| Student: | DOB: | Grade: |
| Teacher: | Case Manager: | Age: |

|  |  |  |
| --- | --- | --- |
| **What** | **Who** | **Completion** |
| Meeting notice for eval planning |  |  |
| Permission to eval form |  |  |
| Test Description Sheets |  |  |
| Record Review |  |  |
| Date of Elig. Of Vision Imp. |  |  |
| Date of Elig. Of Hearing Imp. |  |  |
| For a student who meets the minimum criteria for ether hearing impairment or vision impairment, but demonstrate inconsistent or inconclusive responses in other sensory area, a functional assessment by an educator of the vision or hearing impaired, as appropriate. |  |  |
| For a student who meets the minimum criteria for ether haring or vision impairment, and has a degenerative disease or pathology that affects the acuity of the other area, a medical statement or health assessment as appropriate. |  |  |
| Meeting notice/Eligibility |  |  |
| Eligibility Statement |  |  |
| Prior Written Notice |  |  |
| Copy to parents/Rosie |  |  |

**Emotional Disturbance: Eligibility Requirements**

**Definition**

“Emotional disturbance” is a condition exhibiting one or more of the following over a long period of time and to a marked degree that adversely affects a child’s educational performance: (1) an inability to learn that cannot be explained by intellectual, sensory, or health factors, (2) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers, (3) inappropriate types of behavior or feelings under normal circumstances, (4) a general pervasive mood of unhappiness or depression, or (5) a tendency to develop physical symptoms or fears associated with personal or school problems. The term includes schizophrenia but does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance.

**Evaluation Requirements**

The special education team must include at least one professional knowledgeable and experienced in the evaluation of students with emotional disturbance. The evaluation should include the following:

* District Learning Specialist/Learning Specialist: Evaluation of Emotional/behavioral status. (Can be an FBA).
* Learning Specialist: Developmental and Social History
* District Learning Specialist/Learning Specialist: The completion of at least two behavior rating scales (one of which must be standardized) by at least two adults.
* Learning Specialist: An observation in the classroom and in at least one other setting by someone other than the student’s regular teacher.
* Learning Specialist: Assessments to determine the impact of the suspected disability.
* Medical Professional: A medical report or health assessment statement indicating whether there are any physical factors that may be affecting the student’s educational performance.
* Learning Specialist: A file review and any other necessary assessments that are necessary to identify the student’s educational needs.

**Meeting Minutes**

The meeting minutes should include the following:

* The criteria met by the student which documents the existence of the disability;
* A summary of the deliberation of the special education team regarding the procedures and the criteria; and
* A statement regarding the adverse impact on the student’s educational performance and the need for special education.

**Determining Special Education Eligibility**

For a student to be eligible for special education services under the category of serious emotional disturbance, the special education team must determine:

* The disability has an adverse impact on the student’s education performance (kindergarten through age 21) or the student’s developmental progress (age 3 through the age of eligibility for kindergarten); and
* The student needs special education services as a result of the disability.

A student who is socially maladjusted may not be identified as having a emotional disturbance unless the child also meets the minimum criteria above. The following table reflects characteristics of social maladjustment vs. emotional disturbance in a number or areas.

|  |  |  |
| --- | --- | --- |
| **Behavior Area** | **Emotional Disturbance** | **Socially Maladjusted** |
| **School Behavior** | Unable to comply with teacher requests; needy or has difficulty asking for help | Unwilling to comply with teacher requests; truancy; rejects help |
| **Attitude Toward School** | School is a source of confusion or angst; does much better with structure | Dislikes school, except as a social outlet; rebels against rules and structure |
| **School Attendance** | Misses school due to emotional or psychosomatic issues | Misses school due to choice |
| **Educational Performance** | Uneven achievement; impaired by anxiety, depression, or emotions | Achievement influenced by truancy, negative attitude toward school, avoidance |
| **Peer Relations and Friendships** | Difficulty making friends; ignored or rejected | Accepted by a same delinquent or socio-cultural subgroup |
| **Perceptions of Peers** | Perceived as bizarre or odd; often ridiculed | Perceived as cool, tough, charismatic |
| **Social Skills** | Poorly developed; immature; difficulty reading social cues; difficulty entering groups | Well developed; well attuned to social cues |
| **Interpersonal Relations** | Inability to establish or maintain relationships; withdrawn; social anxiety | Many relations within select peer group; manipulative; lack of honesty in relationships |
| **Interpersonal Dynamics** | Poor self-concept; overly dependent; anxious; fearful; mood swings; distorts reality | Inflated self concept; independent; underdeveloped conscience; blames others; excessive bravado |
| **Locus of Disorder** | Affective disorder; internalizing | Conduct disorder, externalizing |
| **Aggression** | Hurts self and others as an end | Hurts others as a means to an end |
| **Anxiety** | Tense; fearful | Appears relaxed; cool |
| **Affective Reactions** | Disproportionate reactions, but not under student’s control | Intentional with features of anger and rage; explosive |
| **Conscience** | Remorseful; self critical; overly serious | Little remorse; blaming; non-empathetic |
| **Sense of Reality** | Fantasy; naïve; gullible; thought disorders | Street-wise; manipulates facts and rules for own benefit |
| **Developmental Appropriateness** | Immature; regressive | Age appropriate or above |
| **Risk Taking** | Avoids risks; resists making choices | Risk taker; daredevil |
| **Substance Abuse** | Less likely; may use individually | More likely; peer involvement |

**Emotional Disturnbance Eligibility Evaluation Checklist**

|  |  |  |
| --- | --- | --- |
| Student: | DOB: | Grade: |
| Teacher: | Case Manager: | Age: |

|  |  |  |
| --- | --- | --- |
| **What** | **Who** | **Completion** |
| Meeting notice for eval planning |  |  |
| Permission to eval form |  |  |
| Test Description Sheets |  |  |
| Record Review |  |  |
| Emotional/Behavioral Status |  |  |
| Developmental History (if needed) |  |  |
| Medical Statement |  |  |
| Behavior Rating ScalesScale 1:Scale 2: | 1. | 1. |
| 2. | 2. |
| Observation (2)Setting:Setting:  | 1. | 1. |
| 2. | 2. |
| Assessments to determine impact |  |  |
|  |  |
| Additional Evaluation (if needed) |  |  |
| Meeting notice/Eligibility |  |  |
| Eligibility Statement |  |  |
| Prior Written Notice |  |  |
| Copy to parents/Rosie |  |  |

**Orthopedic Impairment: Eligibility Requirements**

**Definition**

“Orthopedic Impairment” involves a motor disability caused by an anomaly, disease or impairment by other conditions (e.g., cerebral palsy, spina bifida, muscular dystrophy or traumatic injury) where the child requires specialized and integrated services in order to benefit from an educational program.

**Evaluation Requirements**

The special education team must include at least one professional knowledgeable and experienced in the evaluation of students with orthopedic impairments. The evaluation should include the following:

* Learning Specialist: Review the CUM file
* Medical Professional: A medical report or a health assessment statement indicating a diagnosis of orthopedic or neuromotor impairment or a description of the motor impairment.
* Motor: A standardized motor assessment, including the areas of the fine motor, gross motor and self-help, when appropriate, administered by a specialist knowledgeable about orthopedic or neuromotor development.
* Learning Specialist/ SPED team: assessments to determine the impact of the suspected disability.
* Learning Specialist: Additional evaluations that are necessary to determine the student’s educational needs.

**Meeting Minutes**

The meeting minutes should include the following:

* The criteria met by the student which documents the existence of the disability;
* A summary of the deliberation of the special education team regarding the procedures and the criteria; and
* A statement regarding the adverse impact on the student’s educational performance and the need for special education.

**Vision Impairment Eligibility Evaluation Checklist**

|  |  |  |
| --- | --- | --- |
| Student: | DOB: | Grade: |
| Teacher: | Case Manager: | Age: |

|  |  |  |
| --- | --- | --- |
| **What** | **Who** | **Completion** |
| Meeting notice for eval planning |  |  |
| Permission to eval form |  |  |
| Test Description Sheets |  |  |
| Record Review |  |  |
| Medical Statement |  |  |
| Assessment to determine impact | 1. | 1. |
| 2. | 2. |
| Additional Assessment |  |  |
| Meeting notice/Eligibility |  |  |
| Eligibility Statement |  |  |
| Prior Written Notice |  |  |
| Copy to parents/Rosie |  |  |

**Traumatic Brain Injury: Eligibility Requirements**

**Definition**

“Traumatic brain injury” (TBI) means an acquired injury to the brain caused by an external physical force resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a student’s educational performance. The term includes open or closed head injury resulting in 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. *The term does not include brain injuries that are congenital or degenerative, or brain injuries induced by birth trauma.*

**Evaluation Requirements**

The special education team must include at least one professional knowledgeable and experienced in the evaluation and education of students with traumatic brain injury. The evaluation should include the following:

* Medical Professional: A medical report or health assessment statement indicating that an event may have resulted in traumatic brain injury, its expected duration, needs for medical attention, and any recommendations for restriction of activity or for health management in school.
* District Learning Specialist/Learning Specialist: Administer or review a comprehensive psychological assessment using a battery of instruments intended to identify deficits associated with traumatic/acquired brain injury.
* Learning Specialist/ Motor/ SLP: other assessments including, but not limited to, motor evaluation if the student exhibits motor impairments, communication evaluation if the student exhibits communication deficits, and psychosocial evaluation if the student exhibits changed behavior.
* Learning Specialist/Motor/SLP: other educational information related to the impact of the suspected disability, including pre-injury performance and current adaptive abilities.
* Learning Specialist: An observation in the classroom and at least on other setting.
* Learning Specialist: Assessments to determine the impact of the suspected disability.
* Learning Specialist: Any additional assessments to identify the student’s educational needs.

**Meeting Minutes**

The meeting minutes should include the following:

* The criteria met by the student which documents the existence of the disability;
* A summary of the deliberation of the special education team regarding the procedures and the criteria; and
* A statement regarding the adverse impact on the student’s educational performance and the need for special education.

**Traumatic Brain Injury Eligibility Evaluation Checklist**

|  |  |  |
| --- | --- | --- |
| Student: | DOB: | Grade: |
| Teacher: | Case Manager: | Age: |

|  |  |  |
| --- | --- | --- |
| **What** | **Who** | **Completion** |
| Meeting notice for eval planning |  |  |
| Permission to eval form |  |  |
| Test Description Sheets |  |  |
| Record Review |  |  |
| Medical Statement |  |  |
| Comprehensive Psych Assessment |  |  |
| Other Assessments: Including but not limited to: motor, communication, psychosocial assessments as indicated by student’s functioning in those areas: | 1. | 1. |
| 2. | 2. |
| Observation (2)Classroom Setting:Other Setting:  | 1. | 1. |
| 2. | 2. |
| Assessments to determine impact |  |  |
|  |  |
| Additional Evaluation (if needed) |  |  |
| Meeting notice/Eligibility |  |  |
| Eligibility Statement |  |  |
| Prior Written Notice |  |  |
| Copy to parents/Rosie |  |  |

**Other Health Impairment: Eligibility Requirements**

**Definition**

“Other Health Impairment” means having limited strength, vitality or alertness, including a heightened alertness to environmental stimuli, due to chronic or acute health problems. Such health problems could include, but are not limited to: a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, diabetes, Tourette’s Syndrome, or attention deficit/hyperactivity disorder.

**Evaluation Requirements**

The special education team must include at least one professional knowledgeable and experienced in the evaluation of students with the suspected disability, the student’s regular teacher (if unavailable a general education teacher qualified to teach a student at his or her age) and a person qualified to conduct individual diagnostic assessment such as; a school psychologist, speech language pathologist, special education teacher or other qualified individual.

* Learning specialist: comprehensive review of commutative records, including special education file review.
* Learning specialist: Assessment of the health impairments impact on the student’s educational performance. Must include summary of any academic information used to consider educational impact. This may be derived from standardized evaluation, informal evaluation from the specialist and classroom teacher, CBM, work samples, teacher interview.
* Learning specialist: An observation that occurs in 2 setting during the school day. The observation needs to include: engagement time in the observed activity, comparison student data, observation of student reaction to the instructional environment.
* Medical Professional: a medical statement or health assessment statement indicating a diagnosis of a health impairment or a description of the health impairment, its expected duration, needs for medical attention and any recommendations for restrictions from activity or for health management in school.

**Meeting Minutes**

The meeting minutes should include the following:

* The criteria met by the student which documents the existence of the disability;
* A summary of the deliberation of the special education team regarding the procedures and the criteria; and
* A statement regarding the adverse impact on the student’s educational performance and the need for special education.

**Other Health Impairment Eligibility Evaluation Checklist**

|  |  |  |
| --- | --- | --- |
| Student: | DOB: | Grade: |
| Teacher: | Case Manager: | Age: |

|  |  |  |
| --- | --- | --- |
| **What** | **Who** | **Completion** |
| Meeting notice for eval planning |  |  |
| Permission to eval form |  |  |
| Test Description Sheets |  |  |
| Record Review |  |  |
| Medical Statement |  |  |
| Assessment to determine impactAssessment:Assessment:  | 1. | 1. |
| 2. | 2. |
| Additional Evaluations(if needed) | 1. | 1. |
| Observation (2)Classroom Setting:Other Setting:  | 1. | 1. |
| 2. | 2. |
| Meeting notice/Eligibility |  |  |
| Eligibility Statement |  |  |
| Prior Written Notice |  |  |
| Copy to parents/Rosie |  |  |

**Autism Spectrum Disorder: Eligibility Requirements**

**Definition**

Autism Spectrum Disorder (ASD) is an umbrella category over the following areas of disability: Asperger’s Syndrome, Autism, PDD-NOS and Rhett’s Syndrome. All are developmental disabilities typically affecting the processing, integrating, and organizing of information that significantly impacts communication, social interaction, functional skills and educational performance. Essential features, generally appearing during the first three years of life, will include exhibited impairments in:

• Communication

• Social Interaction

• Patterns of behaviors, interests, and/or activities that are restricted, repetitive, or stereotypic

• Unusual response to sensory experiences

The team needs to consider all of the criteria for determining if a child meets the eligibility category of ASD. The child needs to exhibit characteristics of ASD in each of the four areas. In addition, the team must be able to answer “Yes” to the following two questions for each of the four criteria areas: Are the characteristics inconsistent or discrepant with the child’s development in other areas, and are the characteristics documented over time and/or intensity? Generally, children show a number of characteristics in each area but one area may be less affected than other areas. These characteristics must be distinctly different relative to the individual’s developmental level and intellectual level. The duration and intensity of the behavioral characteristics must also be considered as well as how the behaviors are intrusive to the child’s learning.

**Evaluation Requirements**

* Team: Screening tool and file review
* ASD specialist, SLP, Learning Specialist: at least three 20 minute observation of the child’s behavior in multiple environments by an educator knowledgeable in ASD. One of the three observations should take place during direct interaction with the observer.
* ASD specialist: Standardized Autism Rating Scale
* SLP: Functional communication assessment which includes measure of language, semantics, and pragmatics
* Medical professional: a medical report or a health assessment statement indicating whether there are any physical factors that may be affecting the student’s educational performance (A medical diagnosis of ASD is not required).
* Learning Specialist: Assessments to determine the impact of the suspected disability.
* District Learning Specialist/Learning Specialist: Additional evaluations or assessments that are necessary to identify the child’s education needs.

**Meeting Minutes**

The meeting minutes should include the following:

* The criteria met by the student which documents the existence of the disability;
* A summary of the deliberation of the special education team regarding the procedures and the criteria; and
* A statement regarding the adverse impact on the student’s educational performance and the need for special education.

**Autism Spectrum Disorder Eligibility Evaluation Checklist**

|  |  |  |
| --- | --- | --- |
| Student: | DOB: | Grade: |
| Teacher: | Case Manager: | Age: |

|  |  |  |
| --- | --- | --- |
| **What** | **Who** | **Completion** |
| Meeting notice for eval planning |  |  |
| Permission to eval form |  |  |
| Test Description Sheets |  |  |
| Record Review |  |  |
| Developmental Profile(Parent Interview & Teacher Interview) |  |  |
| Medical Statement |  |  |
| Direct interaction with child(ADOS) |  |  |
| Functional Communication Eval |  |  |
| Behavior Rating Tool(CARS, ASDS, SSRS) |  |  |
| Assessment to determine impact(WIAT, CBM) |  |  |
| Additional Evaluations(ABAS, Vineland) |  |  |
| Observation (3)Multiple Environments  | 1.  | 1. |
| 2. | 2. |
| 3. | 3. |
| Meeting notice/Eligibility |  |  |
| Eligibility Statement |  |  |
| Prior Written Notice |  |  |
| Copy to parents/Rosie |  |  |

**Specific Learning Disability Eligibility Evaluation Checklist**

|  |  |  |
| --- | --- | --- |
| Student: | DOB: | Grade: |
| Teacher: | Case Manager: | Age: |

|  |  |  |
| --- | --- | --- |
| **What** | **Who** | **Completion** |
| Meeting notice for eval planning |  |  |
| Problem Solving Worksheet(documented intensification of ELL if needed.) |  |  |
| Permission to eval form |  |  |
| Test Description Sheets |  |  |
| Record Review |  |  |
| Progress monitoring data |  |  |
| Assessment to determine impact |  |  |
| Additional Assessments(if needed) |  |  |
| Observation  |  |  |
| Developmental History |  |  |
| Medical Statement(if needed) |  |  |
| Meeting notice/Eligibility |  |  |
| Eligibility Statement |  |  |
| Prior Written Notice |  |  |
| Copy to parents/Rosie |  |  |