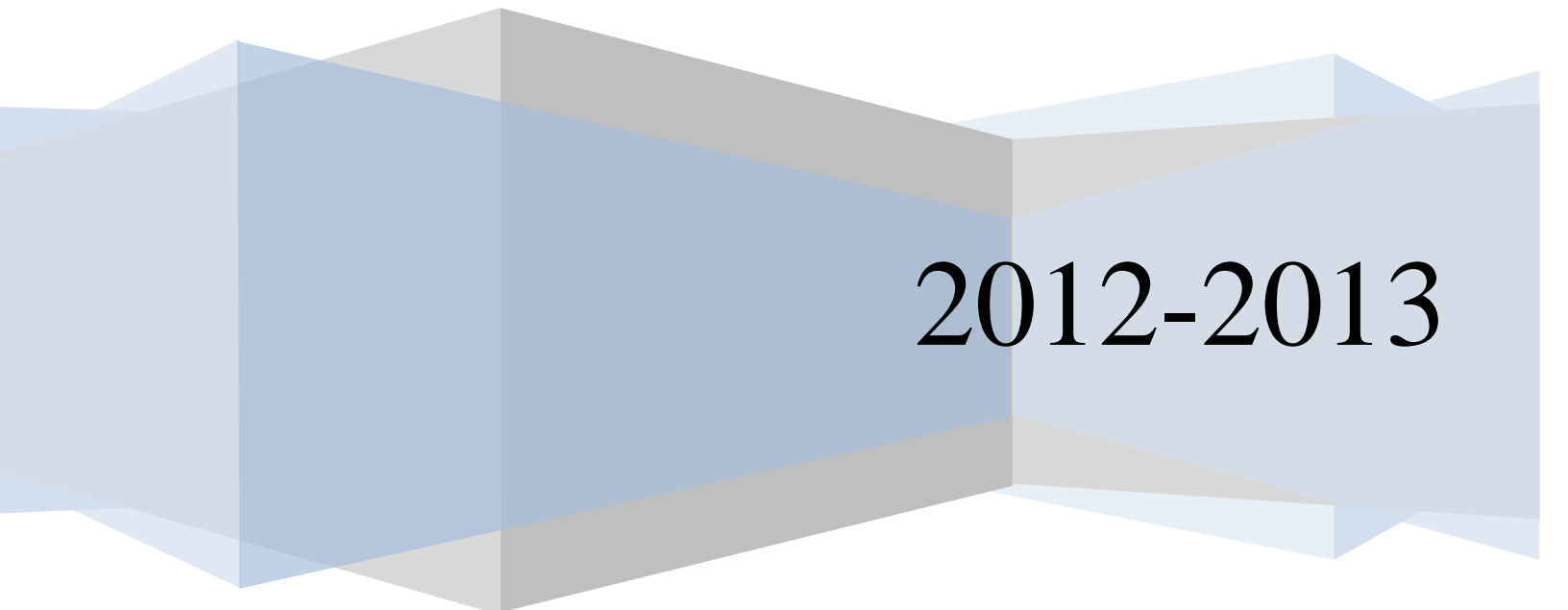


Haysville USD 261 – School Psychologist Handbook

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USD 261
School Psychologist Handbook
Special Education Department



2012-2013

Haysville USD 261 – School Psychologist Handbook

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PART I

SCHOOL PSYCHOLOGIST JOB DESCRIPTIONS

I. Part I: School Psychologist – Job Descriptions

A. School Psychologist Assignments

Angie Garner	Alternative High School Campus High School Chisholm
Crystal Winters	Early Childhood
Brad Johnson	Haysville Middle School/Freeman Elementary
Jessica Quinn	Haysville West Middle School/Bethel Life School/St. Cecilia Catholic School
Linda Sullivan	Rex Elementary
Judith Picard	Nelson Elementary
Jennifer Erickson	Oatville Elementary Prairie Elementary/
Marie Patterson	Ruth Clark Elementary

B. Psychologist’s Secretary Assignments

Sandy Harper	Brad Johnson
Terry Nicklaus	Angie Garner

C. School Psychologist – Job Description

School Psychologists tailor their services to the particular needs of each child and each situation. School Psychologist's roles can vary depending on building needs. Most provide assistance with these core services:

1. Consultation

- consult with teachers, parents, and administrators to provide healthy and effective alternatives when working with students who exhibit problems in learning and behavior
- help others understand child development and how it affects learning and behavior
- strengthen working relationships between educators, parents and community services

2. Assessment

Use a wide variety of techniques at an individual, group, and systems level to evaluate:

- academic skills
- learning aptitudes
- personality and emotional development
- behavior
- social skills
- learning environments and school climate
- eligibility for special education

3. Intervention

- work face-to-face with children and families
- help resolve conflicts and problems in learning and adjustment
- provide psychological counseling for children and families
- provide social skills training, behavior management, and other strategies
- monitor treatment integrity of interventions as appropriate
- data documentation and progress monitoring of interventions for students in special education
- help families and schools deal with crises

4. Prevention

- identify potential learning difficulties
- design programs for children at risk of failure
- provide parents and teachers with the skills to cope with disruptive behavior
- help foster tolerance, understanding, and appreciation of diversity in the school community
- develop school-wide initiatives to make school safer and more effective

5. Education

Develop programs on topics such as:

- teaching and learning strategies
- classroom management techniques
- working with students who have disabilities or unusual talents
- substance abuse
- crisis management

6. Research and Planning

- evaluate the effectiveness of academic programs, behavior management systems, and other services
- acquire new knowledge about learning and behavior
- contribute to planning and evaluating school-wide reform and restructuring
- interpret school-wide assessment data

7. Health Care Provision

- collaborate with school and community-based personnel to provide a comprehensive model of school-linked health services
- work with children and families to provide integrated community services focusing on psychosocial wellness and mental health-related issues
- developing partnerships with parents and teachers to create healthy school environments

D. Building Programs and Working with Teachers and Administrators

1. Each school psychologist is responsible for case management of all exceptional children and services in their buildings. The school psychologist shall provide effective consultation with special education staff, general education staff, administration and paraprofessionals regarding a variety of special education issues. Additionally, the school psychologist shall ensure that procedural requirements are followed including obtaining parental consent for changes in placement, services, and eligibility when necessary.
2. The school psychologist shall work with special education teachers, general education teachers, and administrators to improve program effectiveness, including classroom visitations, consultations, participation on building teams, presentations at building in-services, etc.
3. The services of the school psychologist shall be available to all special programs including self-contained special education classrooms. The school psychologist may be listed as a related service on any student's IEP if it is appropriate and necessary to enable a student to benefit from their educational program, and if the student is seen on a regular schedule.

E. Working with Parents

For purposes of this document the term parent will include parent, educational advocate, legal guardian, or student of majority age (18). Must have educational signature rights.

1. The school psychologist should schedule feedback, eligibility, placement, move-in and other conferences with parents according to reasonable and established timelines. The school psychologist should ensure the parents are fully informed of ongoing intervention strategies and should encourage parents to participate in staffing conferences in an active and meaningful manner.
2. The school psychologist is expected to appropriately address parent complaints and concerns within their assigned buildings and to effectively participate in resolution of these situations. School psychologists are encouraged to discuss difficult cases with special education administrators.

F. Case Management

1. The school psychologist is responsible for the coordination and completion of all comprehensive evaluations and reevaluations in their assigned buildings. As Case Managers, the school psychologist will provide follow through from referral to closure including the completion of all appropriate procedural paperwork and follow-up support. The school psychologist shall gather intake information, conduct their part of the evaluation and provide feedback to the parents and staff with regard to the child's performance. The school psychologist must ensure that the evaluation is appropriate as specified by the Kansas Regulations for Special Education and Kansas Special Education Law. Additionally, the school psychologist is expected to act in the "Case Manager" role to provide support on a variety of issues regarding special education students and the provision of appropriate services within their assigned buildings.
2. Each evaluation/reevaluation shall begin with a review of existing information and data on the student (evaluations from outside agencies, information from parents, results of previous evaluations conducted by the district). From this review, the team must determine what, if any additional information is needed to determine whether the student is eligible as a student with an exceptionality, the student's present levels of performance, whether the student needs special education and related services, and (in the case of reevaluations) whether additions/modifications to special education/related services are needed to enable the students to meet the IEP annual goals or to participate, as appropriate, in the general curriculum.
 - a) Initial Evaluations: Once the Student Improvement Team recommends an initial comprehensive evaluation, the recommendation and supporting information will be sent to the special education office for review. The special education office will send the **PRIOR WRITTEN NOTICE FOR EVALUATION OR REEVALUATION AND REQUEST FOR CONSENT** and **PARENTAL RIGHTS IN SPECIAL EDUCATION** to the parents for their written consent. The written notice must fully inform the parents regarding the scope of the evaluation procedures being proposed and parental consent must be obtained prior to conducting the action. The special education office will notify the school psychologist to proceed with the initial evaluation once the signed consent is received.
 - b) Reevaluations: Once the determination regarding additional data has been made, the school psychologist will send the **PRIOR WRITTEN NOTICE FOR EVALUATION OR REEVALUATION AND REQUEST FOR CONSENT** and **PARENTAL RIGHTS IN SPECIAL EDUCATION** to the parents for their written consent. The written notice must fully inform the parents regarding the scope of the reevaluation procedures being proposed and parental consent must be obtained prior to conducting the action. If the team determines that no additional information is necessary, the parents must be provided with notification of this decision with the **PRIOR WRITTEN NOTICE FOR EVALUATION OR REEVALUATION AND REQUEST FOR CONSENT** as well as the rationale and notification of their right to request an evaluation. The **PRIOR WRITTEN NOTICE FOR EVALUATION OR REEVALUATION AND REQUEST FOR CONSENT** must be signed and returned by the parent to proceed with the proposed action even if the team determines that no additional data is needed.

The team may proceed with the reevaluation if three documented attempts with no response [at least two methods of communication] have been employed.

The school psychologist's first priority is to complete evaluations and reevaluations on time.

3. Complete Initial Evaluations within 60 school days (excluding holidays and when school is not in session) of receiving parental consent.
 - Complete the evaluation. The evaluation is complete when the multi-disciplinary team, including parents, determines the eligibility status and anticipated special education needs.
 - Conduct a meeting to determine whether the student is a child with exceptionality.
 - Develop and implement the student’s IEP, if the child is a student with an exceptionality.

****The evaluation and implementation of the IEP must be completed within 60 school days.***

- Collect and organize appropriate evaluation documentation and ensure that it arrives in the Special Education Office no more than 10 working days following the staffing. All appropriate reevaluation documentation should be submitted to the Special Education Office within 10 working days of the triennial reevaluation due date. If the reevaluation is completed substantially earlier than the triennial reevaluation due date, submit all appropriate documentation to the Special Education Office within 10 working days of the actual staffing date.

****The Days of the Year Calendar can be used to assist in the calculation of the due dates.***

If extenuating circumstances occur, which are expected to result in an evaluation or reevaluation exceeding the established guidelines, the school psychologist shall: notify the building administrator and the Director of Special Education and contact parent to obtain their written permission for reasonable extension of the evaluation timelines. Written permission for the extension should be documented by obtaining written consent with an additional ***PRIOR WRITTEN NOTICE FOR EVALUATION OR REEVALUATION AND REQUEST FOR CONSENT*** signed by the parent. Include documentation of parent’s permission in the student’s evaluation/reevaluation records as well as a memo from the school psychologist indicating the reasons why the established timelines were exceeded and the results of any parent contacts.

G. Screening

Local education agencies are responsible for providing systematic and ongoing screening procedures for students. The school psychologist may be requested to consult with or assist directly in the screening process. Screening is the first step in the identification of exceptional children but is not a special education action and does not require consent. Preschool screening of children is also required. School psychologists assigned to Early Childhood evaluations may be requested to assist directly or indirectly with preschool screening clinics.

PART II

MTSS

PROBLEM SOLVING

II. Part II – MTSS and Problem Solving

A. Multi-Tier System of Supports

A Multi-Tier System of Supports (MTSS) is the process that Haysville Public Schools uses to describe how our district provides supports for each child in our school district to be successful. This process includes procedures and tools that teachers will use to make instructional decisions for each child that they instruct.

There are two federal laws that have made a difference in how school districts coordinate services for children. The first is the Elementary and Secondary Education Act (ESEA); most recently referred to as the No Child Left Behind (NCLB) Act. This Act requires that by the year 2014 all students are to meet proficiency targets in the area of reading and math, that schools would have a high graduation rate, and conversely a low dropout rate.

The second law influencing school districts is the 2004 reauthorization of the Individuals with Disabilities Education Act (IDEA). IDEA is the federal law that defines special education. The concept of Response to Intervention (RTI) was introduced in the 2004 reauthorization of IDEA and has influenced the way that Haysville Public Schools identify and serve students with an exceptionality.

The term RTI is typically much narrower than what is meant by MTSS. Some of these topics include the identification of a student with specific learning disabilities under IDEA, individual student problem solving approach to interventions, standard protocol approach to interventions or possibly a school wide approach. In Kansas MTSS encompasses all of these issues.

MTSS is a continuum of school-wide, evidence based set of processes that support a rapid response to the needs of each child as early as possible when they are not learning at the rate necessary to progress in the general education curriculum. The main goal is MTSS is to use our resources in ways that enable every child to be successful. This is accomplished by being prevention oriented, knowing who needs support as early as possible each school year, and putting the necessary supports in place as quickly as possible. It also requires that evidence-based interventions for all students be available based on each student's needs.

1. Each student will be screened at the beginning of the school year using the following tools: Literacy First Screeners, Scantron, and AIMSWeb.
 - Screening data will then be reviewed in each building at grade level PLC's and/or Student Improvement Teams. These teams will determine necessary instructional/behavioral interventions for each student.
 - Instructional/behavioral interventions will be implemented as early as possible each school year.
2. Student growth rate will be reviewed by grade level PLC's and/or Student Improvement Teams at least once every six weeks to determine if progress is being made by each student needing intervention. This is considered Tier-One intervention.

B. Tiered Levels of Intervention

- Tier I is the foundation, containing core curriculum. This curriculum should be effective for at least 80% of students. Tier I interventions focus on preventative and proactive group interventions for all students.
- Tier II interventions are more intense interventions (small group), meeting the needs of approximately 15% of students. Students receiving Tier II interventions continue to receive Tier I interventions as well.

- Tier III serves the remaining 5% of students. Students at this tier receive intensive, individual interventions. The intensity of the intervention is adjusted once students achieve target skill levels. Students receiving Tier III interventions also receive Tiers II and I.

C. Systematic Problem Solving

Systematic problem solving is a set of procedures used to examine the nature and severity of an educationally related problem. It is vital to document this process and minimally include:

- Description of problem
- Data collection and problem analysis
- Intervention design and implementation
- Progress monitoring
- Evaluation of intervention efforts

Describe the presenting problem in objective, measurable terms that focus on alterable characteristics of the individual and the environment.

Examine the individual and environment through systematic data collection.

Define the presenting concern in a statement that describes the degree of discrepancy between the expectations of the educational setting and the individual's performance.

D. Data Collection and Problem Analysis

A systematic, research-based, data-driven process shall be used to identify interventions that have a high likelihood of success.

1. Data collected on the identified problem shall be:
 - a) relevant to the identified problem
 - b) used to plan and monitor interventions
2. Data collection procedures shall:
 - a) be specific to the identified problem
 - b) be individually tailored
 - c) be valid and reliable
 - d) allow for frequent and repeated measurement (progress monitoring) of intervention effectiveness

E. Intervention design and Implementation

1. Design interventions based on:
 - a) the defined problem
 - b) the data collected and problem analysis
 - c) parent input
 - d) professional judgments about the potential effectiveness of interventions
2. Describe the interventions in an intervention plan that includes:
 - a) goals
 - b) strategies to address goal attainment
 - c) a progress monitoring plan
 - d) a decision making plan for summarizing and analyzing progress monitoring data (e.g. comparison of data to 4 point rule)
 - e) responsible parties

3. Interventions shall be implemented as developed and modified on the basis of objective data and with the agreement of the responsible parties.
4. The data derived from interventions that are not implemented as developed or properly modified cannot be used to make educational decisions.
 - a) For example, the intervention calls for 3 sessions of 20 minutes each week of additional assistance. Additional assistance is provided less than 3 times a week. The child does not make expected progress. The failure of the child to make expected progress cannot be used to make educational decisions because the intervention was not implemented as designed.

F. Progress Monitoring

Progress monitoring of targeted general education instruction or interventions is the systematic and on-going collection of data on student performance over time. It is important that progress monitoring is implemented consistently as described in an intervention plan.

1. Progress monitoring data is used to determine:
 - a) the effectiveness of an individual's current instruction or intervention
 - b) if changes in instruction or intervention need to be made

G. Progress Monitoring: Monitoring Measures

Progress monitoring data is systematically collected using instructionally sensitive measures that directly assess the intended outcomes of the general education instruction or intervention. Progress monitoring measures and data collection must be designed to assure that the data are reliable and valid for decision making.

When monitoring more intensive instruction or interventions, measures must be repeated frequently as intensive instruction or interventions require more frequent monitoring than general instruction. The progress monitoring schedules should be determined by:

1. the frequency of the problem being monitored
2. the intensity of the intervention being implemented

H. Progress Monitoring: Data Collection and Display

This is guidance for our psychologists when working with student intervention teams.

- 1) Systematic progress monitoring shall include:
 - a) regular and frequent data collection and
 - b) graphic display of the data
- 2) Regular data collection is defined by the intervention plan. The frequency of data collection is based on the nature and severity of the problem.
- 3) Seven to 12 data points are required to make instructional decisions that are statistically valid. So, in order to have sufficient data points to make a valid instructional decision, data must be collected regularly and frequently.
 - a) If progress of intervention is monitored:
 - i) daily, effectiveness of instruction may be determined after 2 weeks. (10 data points)
 - ii) twice a week, effectiveness of instruction may be determined after 1 month. (8 data points)
 - iii) once a week, effectiveness of instruction may be determined within 1 quarter. (9 data points)
 - iv) quarterly, every 9 weeks, effectiveness of instruction may not be determined, even after a year. (4 data points)

I. Progress Monitoring: Decision Rules

Decision rules for determining how to evaluate intervention effects based on progress monitoring data must be in place and consistently implemented.

1. Examples of Decision Making Rules Include:

- 4 Point Decision Making Rule: (e.g., “Given a minimum of two weeks of instruction and a minimum of 7 data points following the initiation of or change in instruction, a 4 point rule will be applied: raising Jenny’s goal will be considered if 4 data points fall above the fluency goal line; modifying/changing Jenny’s program (instructional approach, services, supports, etc.) will be considered if 4 data points fall below the fluency goal line.”)
- Trendline Analysis: (e.g., “Given a minimum of four weeks of instruction and a minimum of 8 data points following the initiation of or change in instruction, the trendline will be analyzed: raising Jared’s goal will be considered if the trendline is steeper than (i.e., above) the goal line; modifying/changing Jared’s program (instructional approach, services, supports, etc.) will be considered if the trendline is less steep than (i.e., below) the goal line.” NOTE: This example presumes a goal line with a positive slope *i.e., a goal for increased performance).
- See section K for additional information regarding aimlines and trendlines.

J. Evaluation of Intervention Effects

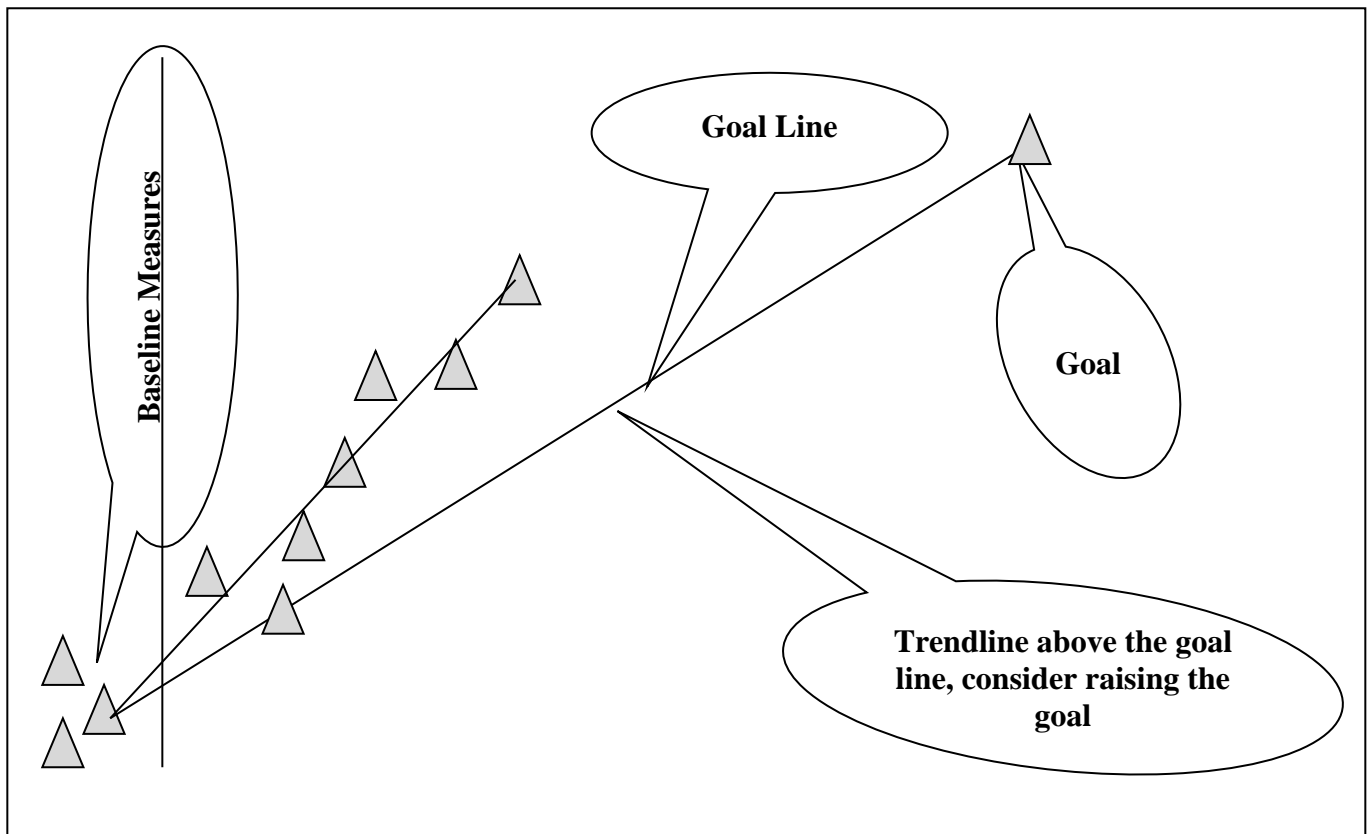
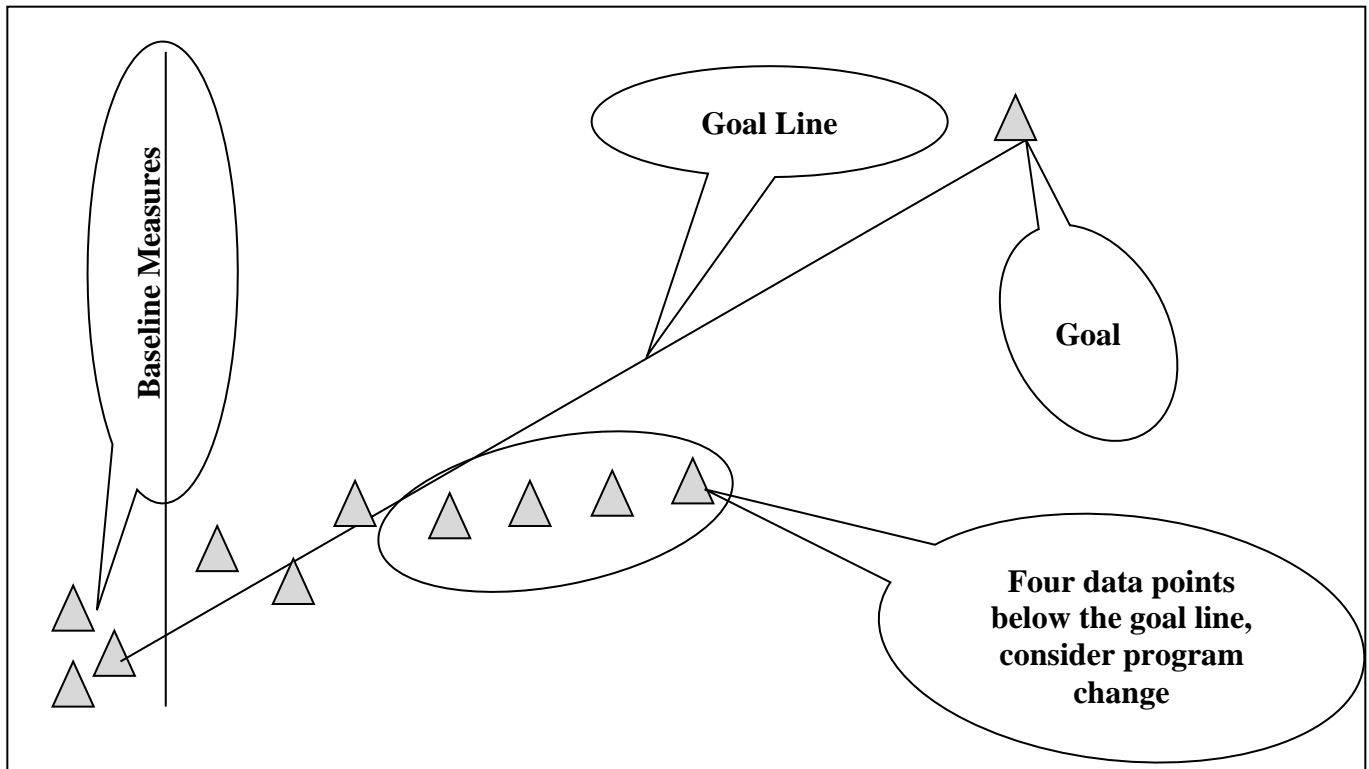
The effectiveness of interventions shall be evaluated through a systematic procedure in which patterns of individual performance are analyzed and summarized. Decisions regarding the effectiveness of interventions focus on comparisons of student’s progress with their initial level of performance and the target level of the intervention. This process includes data analysis and application of the decision rule.

1. Data should be used to answer the following questions:

- Is the data valid for decision making? (Was the intervention implemented as developed or properly modified? Was the data collected as regularly and frequently as required?)
- What does the decision rule tell us in relationship to the data (see examples, below)? Should the intervention be continued or modified?
- Is there a suspicion that the child has a disability?

K. Evaluation of Intervention Effects: Applying Decision Rules

This is guidance for our psychologists when working with student intervention teams.



L. Learning Disability Eligibility

The Kansas Department of Education (KSDE) allows two methods for determining if a student has a learning disability: Response to Intervention (RTI) and Patterns of Strengths and Weaknesses (PSW). Although all schools in the Haysville District have begun to implement some components of the RTI method within the Multi-Tiered System of Supports (MTSS), no school currently has implemented all components of RTI. All schools in the Haysville district must use the Patterns of Strengths and Weaknesses (PSW) to determine if a student has a specific learning disability in any academic area.

To show that a student has a learning disability using PSW, the psychologist must first review all cognitive measures administered to the student to determine if there are significant strengths and weaknesses. As of January 2012, this was defined by KSDE KISN staff to be a difference of at least fifteen standard score points between cluster, area, or individual subtest scores. If significant strengths and weaknesses exist, the psychologist must then review the existing research to determine if the cognitive weaknesses relate to achievement weaknesses. For further information on current research, refer to the KIN website and the Evaluation and Eligibility resources of the professional development materials developed by Sedgwick County Area Education Services for spring and fall 2012 workshops.

The school psychologist will share the PSW data with the multidisciplinary team during a staffing conference. If the multidisciplinary team determines that the student does have a learning disability, the team must then address the second prong of eligibility which is a need that can't be met by Tier II and III interventions within the MTSS structure in regular education. Intervention data collected prior to referral for special education evaluation and during the evaluation period is an excellent source of information for making this decision.

PART III

SPECIAL EDUCATION

PROCESS

III. Part III: Special Education Process:

A. School Initiated Referrals

1. The *Multi-Tiered System of Supports REQUEST FOR ASSISTANCE FORM* will be used document the general education intervention/MTSS problem solving process.
2. The referring teacher completes all relevant sections of the form, including all implemented interventions along with data corresponding to the duration and outcomes of those interventions.
3. The student intervention team:
 - reviews the referral information
 - generates hypotheses regarding probable causes
 - defines the area of concern
 - using collected baseline data, develops an intervention plan using research-based interventions with evaluation and progress monitoring procedures
 - evaluates the success of the interventions
4. The student intervention team recommends the following as appropriate:
 - general education interventions/strategies have resulted in significant progress for the student and are adequate to address the areas of concern
 - general education intervention continues, MTSS file placed in student cumulative file
 - general education interventions, including instruction and/or environmental modifications, have been inadequate to address the areas of concern
 - the interventions require intense and sustained resources unavailable within the general education environment
 - the data indicate the student may be a student with and exceptionality
 - MTSS Form, (including all documentation) is sent to the special education office
5. A referral for an evaluation may be made if the MTSS team determines that support needed to continue requires substantially more support than the general education resources can provide. In some cases, even though intervention is successful, a referral for an evaluation may occur because the MTSS team determines that the intervention requires ongoing, specially designed instruction and supervision not feasible in a general education setting.

For a formal referral to take place, the *Multi-Tiered System of Supports REQUEST FOR ASSISTANCE FORM* must be completed and be signed by all team members.

B. Parent Request for Evaluation

1. Parents may request an evaluation at any time verbally or in writing; however; informed written consent from the parents, guardians, or students of legal age is required to begin an evaluation. Informed written consent is documented through obtaining parental consent on the *PRIOR WRITTEN NOTICE FOR EVALUATION OR REEVALUATION AND REQUEST FOR CONSENT* form.
2. A full and individual initial evaluation, however; is required only if the child is suspected of having a disability/exceptionality. Teams are encouraged to examine all available data, ensuring appropriate consideration of multiple factors that may be impacting educational performance to determine if the student may be a student with a disability. This should include exclusionary factors such as poor school attendance, homelessness, drug use, situational issues, limited English proficiency, and/or lack of appropriate reading and math instruction.

3. In cases where parents request an evaluation and the team concludes that a disability/exceptionality is not suspected, the School Psychologist should contact special education administrators to determine if evaluation will not be conducted. If it has been determined that the evaluation will not be conducted, *PRIOR WRITTEN NOTICE FOR EVALUATION OR REEVALUATION AND REQUEST FOR CONSENT and PARENTAL RIGHTS IN SPECIAL EDUCATION* must be provided to the parent, which includes an explanation of why the public agency refuses to conduct the evaluation and the information upon which this decision is based.
 - The school psychologist should contact parents to discuss with them the process of the general education intervention team. If parents will allow the general education intervention team to implement strategies to address the concern, this may result in the team's determination that the child's needs can be met through the general education curriculum, or a comprehensive evaluation may be recommended.
 - If parents want immediate testing, the comprehensive evaluation can begin while the student intervention team simultaneously implements and documents intervention effectiveness. **Parental request for an evaluation does not eliminate the requirement for general education interventions and effectiveness to be documented.** This data will be needed when the evaluation team meets to determine special education eligibility.

C. Non Stand Alone Related Services

1. Physical, Occupational, and Adaptive Physical Education Therapy Referral Process

Only a student who has been identified with one of the thirteen categorical disabilities may receive the following services:

- Physical Therapy (PT)
- Occupational Therapy (OT)
- Adaptive Physical Education (APE)

If a student's physical needs do not affect their education, the related service is not the responsibility of the district.

D. Initial Evaluation Referral Process

1. If the student is referred for a comprehensive evaluation and presenting concerns include fine and gross motor issues the student must first go through the referral process for Student Interventions.
2. Student Intervention Team Chair is instrumental in ensuring that physical therapy (PT), occupational therapy (OT) and adaptive physical education (APE) staff, as appropriate, are involved with general interventions.
 - a) A checklist and resources to provide strategies will be provided to the teacher(s) and intervention team to use as a guideline regarding what needs are educationally relevant to PT, OT, and/or APE.
 - b) The therapist will review the checklists, informally screen the child through observation and will determine whether a formal evaluation is necessary as part of an initial comprehensive evaluation.
 - c) The case managing school psychologist will notify the PT, OT, and/or APE that consent for an initial comprehensive evaluation has been received.

3. Once the initial comprehensive evaluation is complete, the therapist will attend the initial staffing conference to report the evaluation findings to the team, including the parents. The therapist will provide a written report of their evaluation. If the child is found to be eligible for special education services and to qualify and need these related services, then therapy services will be indicated on the IEP. Goals and benchmarks will be developed to meet the child's needs. Copy all paperwork to the special education office with the appropriate checklist within 10 days after the staffing conference.

E. Referral Process for Students Already Receiving Services

1. If a student is already receiving special education services and a PT, OT, and/or APE concern arises, the appropriate IEP team member should reference the resources and checklists that have been provided by the above mentioned therapists. These strategies/interventions should be implemented and determined whether or not they have been successful. The appropriate adaptations should be given ample time to determine if they are successful or not.
2. If adaptations are unsuccessful, and the team determines that PT, OT, and/or APE services may be needed, the psychologist should meet with the IEP team as well as the PT, OT, and/or APE to consider initiating an evaluation to determine if a specific related service should be added.
 - a) If an evaluation for the related service is deemed necessary, parent permission must be obtained prior to the evaluation. Once consent is received, the therapist will complete an evaluation.
 - b) When the evaluation for the related service is completed the therapist will attend the staffing conference to report results. A written report of any assessments and observations will be provided. Therapy services will be added to the IEP with appropriate goals and benchmarks if services are determined to be necessary.
 - c) Although this is an initial evaluation for related services, the school psychologist will complete all the necessary staffing paperwork for a reevaluation. (It is a reevaluation as child is already receiving special education services).
3. Role of the Occupational Therapist, Physical Therapist, and Adaptive Physical Education Teacher
 - a) The therapist is considered to be part of the IEP team on students who are currently receiving these related services and should be provided with a timely notification of reevaluations and IEP meetings. Their input must be obtained so that present levels of educational performance, annual goals, benchmarks, and service times may be updated and modified as necessary.
 - b) For students currently receiving PT, OT, and/or APE services, the school psychologist is responsible for providing adequate notification to the therapist of any upcoming reevaluations or special education meetings.
 - c) The primary service provider is responsible for providing adequate notification to the therapist of all other typical IEP review meetings.

F. Initial Evaluations

1. At the time the Student Intervention Team makes a formal referral, the school psychologist must submit *Multi-Tiered System of Supports* to the Special Education Office for review to ensure completeness of information. If extenuating circumstances exist resulting in the school psychologist pursuing consent individually, the Special Education office must be notified first. The school psychologist shall provide all of the referral information to the Special Education Office upon completion of the evaluation.
 - a) Although interventions are an ongoing process if the expectation is that a comprehensive evaluation will be completed by the end of the school year, referral paperwork must be submitted to the Special Education Office as early as possible to complete the comprehensive evaluation within the 60-day timeline.
 2. The Special Education Office will complete *PRIOR WRITTEN NOTICE FOR EVALUATION OR REEVALUATION AND REQUEST FOR CONSENT* form.
 3. If parents do not return the consent form within 10 working days, the Special Education Office will mail a second consent form.
 4. If parents do not respond within a reasonable time following the second mailing, the case will be returned to the school psychologist.
 - a) The school psychologist is expected to make a personal contact with the parents concerning the proposed evaluation.
 - b) Following that contact the school psychologist shall notify the Special Education Office regarding the status of the proposed evaluation.
 - c) Copies of all telephone and other parent contacts should be summarized on the *PARENT CONTACT LOG* form and be made available in the central office files or school psychologist's file for use as documentation.
 - d) If a parent denies or otherwise does not consent for an initial evaluation:
 - The school psychologist shall maintain the documentation of the referral in his or her own files.
 - In a case where the parent denies consent, the school psychologist may contact the Director of Special Education concerning the initiation of mediation procedures or a due process hearing.
 5. Obtaining all the relevant information is imperative in an initial evaluation, and as case manager, the school psychologist is expected to ensure that appropriate measures are utilized to obtain information. Use the *INITIAL EVALUATION COVER SHEET* to ensure all paperwork and documentation is acquired and signed (if necessary).
 - a) Information required for an initial evaluation includes, but is not limited to:
 - Health Report which can be obtained from the school health aide.
 - Social History (completed by the school psychologist)
 - Teacher Report from the general education teacher(s).
 - Teacher Report from a special education teacher.
- Psychologist's Report
 - Obtaining information from the parent is an integral component of the assessment, and as case manager, the school psychologist is responsible for obtaining and reporting this information.

- Classroom observations should be summarized in the report as well as included separately in the student’s file.
 - Summary of intervention strategies and data regarding the effectiveness of these strategies.
 - Reporting assessment data is an integral component of the assessment. The school psychologist may utilize, as appropriate, standardized instruments including cognitive, achievement, behavior rating scales, adaptive behavior scales and informal measures.
 - Assessment Observations
 - Recommendations
 - Speech/Language, Occupational Therapy, Physical Therapy, and/or Adaptive Physical Education reports when applicable.
 - Team Reports are reviewed at the time of the meeting with the parents. This report enables the team to compile all assessment information to determine if the student is eligible and demonstrates a need for special education.
6. After the team completes the evaluation, schedule the staffing conference with the parents/legal guardians.
- a) The school psychologist contacts the parents to establish a time when they will meet with the team to review evaluation results.
 - b) The school psychologist sends the parents a 10-day reminder notice (maintain a copy in your file until a signed copy is received). The parents are to sign and return a copy of the 10-day notice acknowledging that they are aware of the date and time of the meeting.
 - (1) In the event that the parents do not establish a meeting time or miss appointments, it is the responsibility of the school psychologist to continue contacting the parent and to try alternate means of contacting such as certified mail. In the event that the parents or legal guardians do not establish a meeting time or continue to miss appointments, the team may meet without the parents but parents must be given a 10 day written notice of the meeting and a parental signature still must be obtained on required documents.
 - (2) A staffing summary, which summarizes information shared by the school team members, the parents, and the recommendations, is completed at the time of the meeting.
 - (3) If it is determined that the student does qualify and demonstrates a need for special education services, the team will develop an IEP with the parents. The school psychologist is responsible for preparing the placement consent pages and explaining these forms to the parents and requesting their consent.

G. Initial Evaluation Timeline

1. If the initial evaluation consent form has not been returned to the Special Education Office within **10 working days**, a second consent form will be mailed from the Special Education Office.
2. Initial evaluations must be completed **within 60 school days** (excluding holidays and when school is not in session) of an agency receiving parental consent. Within this 60 school day timeline, the team must complete the following:
 - a) Complete an evaluation of the student.
 - b) Conduct a meeting to determine whether the student is a child with an exceptionality.
 - c) Develop and implement the student’s IEP.

3. If eligibility and need for special education services has been determined, an IEP must be developed and implemented within the 60-day evaluation period.
4. If it appears likely that the evaluation team may recommend a child for special education services, the evaluation results should be made available in a timely manner to the appropriate staff for use in developing the IEP.
5. All initial evaluation documentation must be sent to the Special Education Office no more than 10 school days following the staffing.

H. Initial Evaluation Staffing Conferences

School Psychologists are expected to clearly explain their testing and shall chair routine team, evaluation, re-evaluation and placement staffing conferences. It is expected that the school psychologist will include in the staffing all persons involved in the evaluation, placement and provision of services for a student. This is to include sending and receiving teachers, building principals and other persons as appropriate.

1. After completion of assessments by all team members:
 - a) Informal evaluation team meeting (optional)
 - Discuss the results
 - Determine if additional data is needed to determine eligibility (exceptionality plus need)
 - Begin development of a draft IEP.
 - b) Formal Staffing (Required)
 - Review evaluation results
 - Seek parent input. Designate a person to express parent opinions if parent is not available
 - Determine eligibility and need with parent present
 - Develop IEP if appropriate.
 - c) Complete the following forms at the team staffing:
 - (1) *SPECIAL EDUCATION STAFFING SUMMARY*
 - Serves a written record of the information discussed and team recommendations.
 - The team shall certify with their signatures whether the summarized information reflects their conclusions. If there is disagreement a separate statement shall be provided by the dissenting team member to be attached to the summary. If parents dissent to the team recommendation, they are allowed to proceed with mediation, conflict resolution or due process.
 - (2) *INITIAL EVALUATION & ELIGIBILITY TEAM REPORT* (requires all participant signatures), *PRIOR WRITTEN NOTICE FOR IDENTIFICATION, SPECIAL EDUCATION and RELATED SERVICES, EDUCATIONAL PLACEMENT, CHANGE IN SERVICES, CHANGE IN PLACEMENT and REQUEST FOR CONSENT*(parent signature)
 - (3) *EMOTIONAL DISTURBANCE ELIGIBILITY CHECKLIST* (found on “DocuShare” and should be used for determination of ED services)
 - Provide copies of all forms to parents and service providers as appropriate.

I. Initial Evaluation Team Reports

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1. Complete the *INITIAL EVALUATION & ELIGIBILITY TEAM REPORT* for all students considered for initial special education identification and services.
2. Consider all areas of LD.
 - a) If an achievement assessment instrument was utilized that does not include the areas of oral expression or listening comprehension, the expressive language and receptive language scores obtained by the Speech/Language Pathologist (SLP) may be substituted.
 - b) The written evaluation for LD exceptionality must contain:
 - (1) documentation that the child does not achieve adequately for the child's age or to meet grade-level standards (refer to Appendix A – Learning Disability Eligibility Indicator)
 - (2) the child does not make sufficient progress to meet age or state-approved standards or exhibits a pattern of strengths and weaknesses in performance, achievement or both
 - (3) relative to age, state-approved grade level standards or intellectual development, and determination that the team considered and ruled out the effect of the following factors on the child's achievement (refer to Appendix A – Learning Disability Eligibility Indicator):
 - visual
 - hearing
 - motor skills
 - disability
 - intellectual disability
 - emotional disturbance
 - cultural factors
 - environmental factors
 - economic disadvantaged
 - and/or
 - limited English proficiency.

J. Reevaluations

1. Conducting reevaluations for all students receiving special education and related services is a requirement when conditions warrant a reevaluation or upon parent/IEP team member request, but not less than once every three years. It is required that a student be reevaluated before they are determined to no longer be eligible for special education OR related services and when a child is currently identified under an area of exceptionality and are being considered to determine their need for related services. When a reevaluation is required or requested:
 - a) The necessary school staff shall meet to complete the *REEVALUATIONMULTIDISCIPLINARY TEAM PLANNING REPORT* which will determine the scope of the reevaluation.
 - b) If the team determines that no reevaluation is needed, the School Psychologist will conference with the student's parents. The *NO REEVALUATION NEEDED FORM* will be sent by the school psychologist to the parents for their written consent.
2. The school psychologist is responsible for completing the *PRIOR WRITTEN NOTICE FOR EVALUATION OR REEVALUATION AND REQUEST FOR CONSENT FORM* and pursuing parental consent on all comprehensive reevaluations in their assigned buildings. Consent forms for reevaluations should be sent to parents early enough, prior to the triennial reevaluation due date, to allow sufficient time to obtain parental consent and complete all reevaluation activities.

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- a) Obtaining consent for initial evaluations or reevaluations:
 - (1) A minimum of three attempts shall be made utilizing two methods (phone call, mail, personal contact, etc.) to obtain parental consent.
 - (2) If parents fail to respond after the third attempt, the reevaluation shall be conducted and documentation of the attempts (notice forms, contact logs, consent forms, etc.) shall be submitted, with the reevaluation information to the Special Education office.
- b) If Parent Denies Consent:
 - (1) The school psychologist should first contact the parent in an attempt to understand the rationale of the parent for refusing to consent to the re/evaluation.
 - (2) Provide necessary clarification.
 - (3) Resolve any conflicts that appear to be hindering the process.
 - (4) If parent continues to refuse, the school psychologist should discuss the situation with special education administration in order to pursue possible mediation procedures, conflict resolution, or a due process hearing.
3. Reevaluation Timeline
 - a) Reevaluations are required to be conducted with all students receiving special education and related services not less than once every three years.
 - b) Once written consent is received, the reevaluation must be completed within 60 school days.
 - c) All reevaluation documentation should be submitted to the Special Education Office within 10 working days of the triennial reevaluation due date or 10 working days of the actual staffing date if the reevaluation is completed substantially sooner than the reevaluation due date.

K. Reevaluation Staffing Conferences

1. At the completion of the reevaluation, the team, including the parents meet to determine:
 - a) Present levels of performance.
 - b) Continued eligibility (exceptionality plus need) for special education.
 - c) Whether additions and modifications are necessary to enable the student to meet the measurable annual goals and participate in general education.
 - (1) *SPECIAL EDUCATION STAFFING SUMMARY* is completed to serve as a written record of the information discussed as well as the recommendations of the team and should be completed by the psychologist or designated member of the team.
 - (2) *REEVALUATION ELIGIBILITY TEAM REPORT* should be completed and serves as a written statement describing the team's decision regarding the student's identification, the basis for that decision, as well as any changes to the existing special education services. This shall be signed by all team members and a copy given to the parents
 - d) The school psychologist is responsible for compiling all of the documentation concerning the completed reevaluation and submitting that information to the Special Education Office within 10 days of the staffing conference. Use the *REEVALUATION COVER SHEET* to ensure all paperwork and documentation is acquired and signed (if necessary).

- e) Reasonable attempts should be made to align the triennial reevaluation date with the annual IEP date to avoid the need for parents to attend multiple meetings.
- f) The school psychologist will coordinate with the IEP team to ensure that the annual IEPs has the most recent reevaluation information included in them.

L. Reevaluation Dates in WebKIDSS

1. It is the responsibility of the School Psychologist to update the Reevaluation completion date on the dates screen page of the IEP in WebKIDSS. If an annual IEP *IS NOT* being completed at the same time as a reevaluation, an amendment IEP must still be completed to reflect the results of the comprehensive reevaluation information and the correct reevaluation completion date.

M. Dismissing Special Education Services

1. A reevaluation must be conducted before a student can be dismissed from special education and/or related services. The school psychologist will obtain *PRIOR WRITTEN NOTICE FOR EVALUATION OR REEVALUATION AND REQUEST FOR CONSENT FORM*.
 - a) Dismissing from a special education category: complete all reevaluation forms as appropriate.
 - b) Dismissing from a related service: obtain related service report and complete the *REEVALUATION & ELIGIBILITY TEAM REPORT* at the meeting.
 - c) For students receiving speech articulation services only, the speech therapist is responsible for the reevaluation process.

N. School Psychologist Report

The school psychologist report is part of the written results of the student's evaluation/reevaluation. A child who is assessed deserves to have an unbiased report that clearly and concisely expresses the school psychologist's findings. The report may include information gained through record review, tests, interviews, observation, informal assessments, or other methods.

The way a report is organized depends on personal preference, which may be governed partly by the anticipated audience of the report. The report requires the school psychologist to convey, to his/her readers, a body of information or content that will contribute to the decision making process. This information should be comprehensible to its intended audience. The school psychologist's report should be submitted to the special education teacher and other anticipated service providers, as appropriate in a timely manner prior to the staffing date. The following is offered as basic areas to be considered in all reports:

1. The report should identify the evaluation as being conducted by Haysville, USD 261 and contain basic information as:
 - Name of Student
 - The Student's Date of Birth
 - Student's Present Grade
 - School
 - Examiner's Name
 - Date of Evaluation (s)
 - Date of the Report
 - Who Referred the Student
 - Reason for Referral
 - Summary of Intervention Strategies and the Effectiveness of These Strategies

- Student Background/Developmental History/Medical History
- Testing Observations
- Interpretation of Evaluation Results
- The Impact of Behavioral Factors
- Recommendations

The report is to contain information from all assessments conducted by the school psychologist including formal testing, questionnaires, rating scales, interviews, and teacher reports. Test results from achievement testing conducted by the special education teacher should be included in the report unless the teacher prefers to write a report independently. Previous testing and test information from other sources should be included when available, particularly for reevaluations on which new formal testing was not conducted by the school psychologist. For reevaluations, the school psychologist report should summarize assessment data from previous evaluations and integrate new data from formal testing and informal assessments such as questionnaires, interviews, observations, and teacher reports. Additionally, the report should include individual recommendations regarding the student's need for special education services and additions or modifications necessary to enable the student to progress in the general education curriculum.

2. The setting in which the evaluation took place, as well as the behaviors observed, are to be described in the report and a determination should be made regarding the validity of the test scores obtained. Additionally, if the assessments were not conducted under standard conditions, any modification to conditions, which were deemed necessary, must be summarized in the report.
 - The assessment findings may include the following:
 - IQ scores and classifications
 - Percentile ranks of test scores
 - Description of the child's strengths and weaknesses as reflected by the scores and significant differences between the subtest scores and total test score
 - Comparison of verbal and nonverbal skills
 - Academic skill levels
 - Social and emotional interpretations
 - Signs suggestive of exceptionality
 - Interrelationships among test findings
 - Implications of assessment findings
 - Validity of test results
 - Recommendations

O. Change in Placement

1. The school psychologist will assist the IEP team to determine when parental consent for a change in placement or special education and related services is necessary. Although technically, parental consent is not required in some situations where changes are not being made in the IEP, notification to the parents of these changes is required. Since this notification requires the completion of *PRIOR WRITTEN NOTICE FOR IDENTIFICATION, SPECIAL EDUCATION and RELATED SERVICES, EDUCATIONAL PLACEMENT, CHANGE IN SERVICES, CHANGE IN PLACEMENT and REQUEST FOR CONSENT*, parent signatures to obtain consent are being required at all IEPs, even when changes are not being made. The only current exception to this requirement involves students receiving only speech services.

2. However, *PRIOR WRITTEN NOTICE FOR IDENTIFICATION, SPECIAL EDUCATION and RELATED SERVICES, EDUCATIONAL PLACEMENT, CHANGE IN SERVICES, CHANGE IN PLACEMENT and REQUEST FOR CONSENT* is legally required when changes are made to the IEP including:
 - a) Adding/Removing/Changing Services or Exceptionalities.
 - b) Increasing or Decreasing Special Education Time by 25% or more or more of the school day.
 - c) Making other substantial (greater than 25%) or material (greater than 25%) change in time to or from regular education.

P. Homebound Services for Special Education Students

If the need arises for homebound services for a special education child, the general procedures are as follows:

1. The school psychologist shall contact the Special Education Office as soon as possible.
2. A letter and release form should be sent for the parent to sign and return so that information may be obtained from the child's physician.
3. The school psychologists shall contact the home school principal and inform him/her that a child is in need of homebound services so that a teacher may be located to provide the homebound services. (If possible, the teacher should be a special education teacher certified at the same grade level as the child needing the homebound services).
4. The school psychologist shall set up a staffing so that the amount of time for homebound services can be determined, and an IEP and *PRIOR WRITTEN NOTICE FOR IDENTIFICATION, SPECIAL EDUCATION and RELATED SERVICES, EDUCATIONAL PLACEMENT, CHANGE IN SERVICES, CHANGE IN PLACEMENT and REQUEST FOR CONSENT* can be completed and signed by the parents.
5. When the child is no longer in need of homebound services the school psychologist shall set up a staffing so that the IEP can be revised and a signed *PRIOR WRITTEN NOTICE FOR IDENTIFICATION, SPECIAL EDUCATION AND RELATED SERVICES, EDUCATIONAL PLACEMENT, CHANGE IN SERVICES, CHANGE IN PLACEMENT AND REQUEST FOR CONSENT* can be obtained.

Q. Early Childhood Special Education Initial Evaluations & Reevaluations

1. Students who attend the Early Childhood classroom must be identified in one of the thirteen disability categories or as Developmentally Delayed (DD).
2. Initial evaluations and reevaluations are conducted by the Early Childhood school psychologist. Existing evaluation data should be considered and reviewed, but current evaluations should be conducted with these students in the areas necessary to determine their eligibility.
3. Best practice is that a student should not be labeled as DD if the initial evaluation occurs after age 6. A categorical placement should be determined at the regular triennial reevaluation for a child labeled DD to continue receiving special education services.

4. If the DD reevaluation does not result in a categorical placement, students who have not been successfully mainstreamed without special education support and specially designed instruction, may continue to receive special education services under the DD label between the ages of 6 and 9 (until the 10th birthday). Sometime prior to reaching age 10, DD students must be reevaluated to determine eligibility for categorical services or be dismissed. You may not continue DD services through the end of the school year in which the student reaches 10 years of age.

R. Individual Education Program

The IEP is the responsibility of the special education staff who are anticipated to be the service providers. The school psychologist as case manager plays an important part in ensuring the completeness and accuracy of dates, evaluation information, and other essential components of initial IEPs and IEPs that involve reevaluations or move-in students. At the staffing involving the initiation of services and placement, the school psychologist is expected to complete and obtain parental signatures on the *PRIOR WRITTEN NOTICE FOR IDENTIFICATION, SPECIAL EDUCATION and RELATED SERVICES, EDUCATIONAL PLACEMENT, CHANGE IN SERVICES, CHANGE IN PLACEMENT and REQUEST FOR CONSENT FORM* and to provide the parents with a copy as well as an explanation of their *PARENTAL RIGHTS in SPECIAL EDUCATION*. Additionally, the school psychologist (or other trained staff in the building) is responsible for collecting all relevant documentation concerning an eligibility staffing, organizing it according to the appropriate checklist, and transmitting the information to the Special Education Office within 10 working days of the staffing.

The school psychologist's attendance at all initial IEP meetings is required. Additionally, the school psychologist shall attend all IEP meetings that involve the review of reevaluation information or other special circumstances. Proper written notification to parents and staff of IEP meetings for an initial evaluation or a reevaluation is the responsibility of the school psychologist. The *NOTICE OF MEETING TO REVIEW EVALUATION RESULTS & DEVELOP AN IEP* form is sufficient to document reasonable notification to the parents when the parents attend and participate in the IEP meeting. However, when parents do not attend the IEP meeting, additional documentation should be recorded regarding attempts to involve the parents, including phone calls, letters, and similar documentation and included in paperwork sent to the Special Education Office. Similar to obtaining parental consent for reevaluations, these attempts must include at least three attempts through two methods.

S. Extended School Year

1. When the IEP team determines that Extended School Year Services are needed, the team must complete the *EXTENDED SCHOOL YEAR DOCUMENTATION OF NEED* form found on WebKIDSS. This form must be completed with the data to document why Extended School Year services are being recommended. You must obtain the parent's signature indicating YES, their student will attend Extended School Year or NO their student will not attend Extended School Year. This form must be completed and turned in no later than April 15th to the special education administration office.

T. Parental Rights in Special Education

1. Parents of special education students and of students being considered for special education eligibility are entitled to a copy and clear explanation of their rights in special education. *PARENTAL RIGHTS IN SPECIAL EDUCATION* must be provided to parents in the following situations and must be in the written language of the general public and provided in the native language of the parent or other mode of communication used by the parent unless it is clearly not feasible to do so:
 - At least one time in a school year, and
 - Notification and Request for Consent for Initial Evaluation
 - Notification and Request for Consent for Reevaluations
 - Notification of Identification, Special Education & Related Services, Educational Placement, Changes in Services, Changes in Placement and Request for Consent
 - Upon a disciplinary removal from school that constitutes a change in placement
 - Formal Complaint / Request for a Due Process Hearing
 - Parent Request for a copy of the Parental Rights

U. Move-In Students: Entering from within the State of Kansas

1. The school psychologist is responsible for obtaining all educationally relevant information on students who move into the district who have been previously placed in special education. Additionally, parental consent must be obtained to the level of services proposed through an IEP in our district.
2. At enrollment, the school psychologist shall:
 - a) Check the current address of the student to determine if they reside within our district boundaries.
 - b) Complete a move-in report and **immediately** submit it to the Special Education office.
3. Call the student's previous school to obtain evaluation and educational information that may be used to write an IEP. This information should be documented on the move-in report.

Some students may enter the district with the Special Education (SE) non-categorical. When conducting the move-in staffing, these students should be identified utilizing the appropriate categorical identification whenever possible. If it is not possible to identify the appropriate categorical identification, a student may be continued under the SE identification until a reevaluation can be completed. The following is a listing of the categorical identifications available for use with students in Kansas:

- Autism
- Deafness
- Deaf-Blindness
- Developmentally Delayed
- Early Childhood Disability

- Emotional Disturbance
 - Giftedness
 - Hearing Impairment
 - Specific Learning Disability
 - Intellectual Disability
 - Other Health Impairment
 - Orthopedic Impairment
 - Speech/Language Impairments
 - Multiple Disabilities
 - Traumatic Brain Injury
 - Visual Impairment
4. After the move-in meeting submit paperwork to Special Education Office as soon as possible. Use the *MOVE-IN COVER SHEET* to ensure all paperwork and documentation is acquired and signed (if necessary).

It is illegal to withhold records from a district where the student is currently enrolled for any reason. If records cannot be obtained from the previous district, the school psychologist may contact an administrator in the Special education Office for assistance with this matter. However, special education services may not be provided to students without the appropriate documentation. This documentation should include evaluation records (Psych. Reports, SLP reports, etc.), IEPs, and other relevant information necessary to make educational decisions regarding the student. If these records cannot be obtained, an evaluation must be conducted to generate the necessary information prior to providing special education services.

An IEP meeting must be held on all move-in special education students. An IEP from another district in Kansas may be utilized for the interim provision of services. However, a staffing to develop a new IEP and obtain consent for the provision of services in our district should be held within 30 days of the student's enrollment. Following the staffing, the school psychologist will submit the move-in cover sheet and supporting paperwork to the Special Education Office. The staffing should be held to address the following:

- Address necessary information to all staff involved.
- Determine if special education placement is appropriate using *MOVE-IN MULTIDISCIPLINARY TEAM REPORT*.
- Develop an IEP for implementation in our district.
- Obtain informed parental consent for the placement and provision of services in our district utilizing the *PRIOR WRITTEN NOTICE FOR IDENTIFICATION, SPECIAL EDUCATION and RELATED SERVICES, EDUCATIONAL PLACEMENT, CHANGE IN SERVICES, CHANGE IN PLACEMENT, and REQUEST FOR CONSENT FORM*.
- Provide the parents with a copy of their *PARENTAL RIGHTS IN SPECIAL EDUCATION*.

V. Move-In Students: Entering from Outside the State of Kansas

1. For a move-in student who had been receiving services in another state, a staffing should be held as soon as possible. The staffing shall be held to address the following:
 - a) Obtain consent for a reevaluation.
 - b) Determine if the special education identification and placement is appropriate.
 - c) Consider if sufficient evaluation information is available to determine the student's eligibility for special education services under Kansas guidelines.

- (1) If adequate information is available, document eligibility using the *MOVE-IN MULTIDISCIPLINARY TEAM REPORT* and, if appropriate, develop a new IEP for implementation in our district.
 - (2) If adequate information is not available a reevaluation using additional data will be conducted to determine eligibility under Kansas guidelines. The *REEVALUATION/CONTINUING ELIGIBILITY TEAM REPORT* will be completed at the staffing conference.
 - (3) Students will receive special education services while this reevaluation is conducted.
- d) When a new IEP is written, it shall be developed with the participation of the parents and a new *PRIOR WRITTEN NOTICE FOR IDENTIFICATION, SPECIAL EDUCATION and RELATED SERVICES, EDUCATIONAL PLACEMENT, CHANGE IN SERVICES, CHANGE IN PLACEMENT and REQUEST FOR CONSENT FORM* shall be completed and signed by parents. The school psychologist is responsible for the completion of this form and for obtaining the parental signatures as well as for ensuring that the parents receive a copy and clear explanation of their *PARENTAL RIGHTS IN SPECIAL EDUCATION*.

W. Excusal from Meeting

1. A member of the IEP team is not required to attend an IEP team meeting, in whole or in part, if the parent of a child with an exceptionality and the school agree, in writing, that the attendance of the IEP team member is not necessary because the member's area of the curriculum or related services is not being modified or discussed in the meeting.
2. A required member of the IEP team, may be excused from attending an IEP team meeting, in whole or in part, when the meeting involves a modification to or discussion of the member's area of the curriculum or related services, if:
 - The parent, in writing, and the school consent to the excusal; and
 - The IEP team member submits, in writing to the parent and the IEP team, input into the development of the IEP prior to the meeting
3. Informed parental consent means that the school must provide the parent with appropriate and sufficient information to ensure that the parent fully understands that the parent is consenting to excuse a required IEP team member from attending an IEP team meeting in which the member's area of the curriculum or related services is being changed or discussed and that if the parent does not consent the IEP team meeting must be held with that IEP team member in attendance (Federal Register, August 14, 2006, p 46674). To ensure that the parent is fully informed and written agreement or consent is appropriately documented, you must use the KSDE form for excusing a member of the IEP team. This form is found on WebKIDSS under FUNCTION: Enter Forms Data. The form is titled- *EXCUSAL FROM ATTENDANCE AT IEP MEETINGS of REQUIRED IEP TEAM MEMBERS*.

X. Medicaid

1. Medicaid reimburses LEAs for all medically necessary services for the child to receive a free and appropriate public education, as documented on the child's individualized educational plan (IEP). Providers of Medicaid-reimbursable services in an LEA must have appropriate credentials as described in the Medicaid State Plan and as required by the Kansas State Department of Education (KSDE).

2. Psychological services must be provided by or under the direction of a licensed psychologist in accordance with 42 CFR 440.60 (a). The psychologist must be licensed by the Behavioral Sciences Regulatory Board and/or licensed and endorsed by KSDE as a “school psychologist”. (This criteria mirrors current KSDE requirements.)
3. Medicaid reimbursement can occur only when permission is given for the LEA to share appropriate information concerning the student with the Kansas Health Policy Authority so the LEA, can, if applicable, seek reimbursement for any health-related services that are claimable under the Title XIX Medicaid Program or the Title XXI State Child Health Insurance Program. This permission is gained by obtaining parental signature on the parent release of information form titled *MEDICAID GREENBUSH FORM 2* on WebKIDSS.

Social work and psychology services limitations include the following:

- Individual counseling reimbursement is limited to a combined total of two hours (four units) per calendar week. Includes counseling and/or risk factor reduction intervention(s) provided to a healthy individual; approximately 30 min. (procedure code: 99402)
 - Group counseling reimbursement is limited to a combined total of one hour (two units) per calendar week. Includes counseling and/or risk factor reduction intervention (s) provided to healthy individuals in a group setting; approximately 30 minutes. (procedure code: 99411)
 - Psychological testing reimbursement is limited to a total of three hours per school year. Psychological testing includes psycho diagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, e.g., MMPI, RORSCHACH, WAIS, per hour of the psychologist’s or physician’s time, both face-to-face time with the patient and time interpreting test results and preparing the report. (procedure code: 96101)
 - Reimbursement is one hour equals one unit. For those individuals that cannot participate in a full hour of testing, the testing can be broken out into 15-minute increments as follows:
 - 0-15 minutes equals .25 units.
 - 16-30 minutes equals .5 units.
 - 31-45 minutes equals .75 units.
 - 46-60 minutes equals 1 unit.
 - Developmental testing (e.g., developmental screening test II, Early Language Milestone Screen with interpretation and report) reimbursement is limited to one session per school year. (procedure code: 96110)
4. Ongoing services can be addressed on the individual health plan (IHP), behavior intervention plan (BIP), and/or assisted technology plan. These plans must be identified in the IEP as well as attached to it.
 - Documentation of all services performed is required and must include:
 - Date, time, and description of each service delivered and by whom (name, designation of profession or paraprofessional)
 - Assessment and response to intervention service
 - Progress toward achieving individualized long- and short-term goals

Y. Special Transportation

1. Transportation is a related service when it is needed in order for the child to benefit from special education. Each situation is considered individually. In addition to travel to and from school, transportation, as a related service, also includes travel between schools as well as travel in and around school buildings. Thus, the IEP team may need to also assess a child's ability to access school facilities. Like all related services, when an IEP team determines it is needed, transportation services will be included on the child's IEP.
2. When the IEP team determines that special transportation services are needed, the *REQUEST FOR TRANSPORTATION FORM* found under the forms in WebKIDSS must be completed. A copy of this form must be sent to the transportation department and the special education administration office as soon as the IEP team determines special transportation is needed. In addition, the form must be updated annually along with the IEP.
3. If we are adding transportation as a service *PRIOR WRITTEN NOTICE FOR IDENTIFICATION, SPECIAL EDUCATION and RELATED SERVICES, EDUCATIONAL PLACEMENT, CHANGE IN SERVICES, CHANGE IN PLACEMENT, and REQUEST FOR CONSENT FORM* must be completed.

Z. (a)State/Local Assessments

It is the responsibility of the IEP team to determine the manner in which each student with a disability will participate in State and Local Assessments. The following is an outline of the options for the participation of students with disabilities in State and Local Assessments along with the eligibility criteria for each:

1. General Assessment:

The student participates without accommodations or modifications in the General Assessment for:

- Reading
- Mathematics
- Writing
- Science
- Social Studies

2. Assessment with Accommodations:

- The student has an active IEP or 504 Plan
- All of the accommodations the IEP team has determined this student requires to take the General Assessment with Accommodations are indicated in the IEP
- These accommodations are used for classroom instruction and classroom testing
- These accommodations provide equity rather than advantage and do not make the student appear as if they possess a skill or ability they do not actually possess

3. Kansas Assessment of Modified Measures (KAMM) Eligibility Criteria

a) Required components:

- (1) The student has a current IEP. The content area being assessed must be addressed through goals and objectives on the IEP.
- (2) Student is not eligible for the alternate assessment in the content area being considered. (Eligibility must be determined for each content area separately.)
- (3) The decision to determine a student's eligibility to participate in the KAMM may NOT RESULT PRIMARILY from: excessive or extended absence, any specific categorical label nor social, cultural, or economic differences.

Haysville USD 261 – School Psychologist Handbook

Criteria All criteria must be met to identify a student as eligible for participation in the KAMM.	Examples <i>Supporting evidence for meeting these criteria (Data)</i>
Intensive Individualized Instruction Does the student need significant changes in the complexity and scope of the general standards to show progress in the curriculum?	
Requires intensive specially designed instruction AND	<i>Planning/implementing of differentiated instruction to meet the individual needs of the student. For example: modifications, materials used, visual supports</i>
Requires intensive individualized supports AND	<i>Learning supported by adult assistance, providing frequent and structured prompting and cueing, or may use assistive technology</i>
Requires extensive instruction AND	<i>Extended learning time including increased frequency and duration of instruction and practice</i>
Classroom Assessment Does the student need supports to significantly reduce the complexity or breadth of assessment items?	
Requires differentiated content for classroom assessment AND	<i>Student receives modified classroom assessments on a routine basis</i>
Needs to show what they know differently AND	<i>Assistive technology, oral presentation instead of a written response, performance assessment</i>
Accommodations alone do not allow the student to fully demonstrate knowledge AND	<i>Documented accommodations have been insufficient</i>
Student Performance Is the student multiple years behind grade level expectations?	
Consistently requires instruction in pre-requisite skills to the grade level indicators being assessed AND	<i>Evidence shows the student's instructional level in the scope and sequence of the content standards is at a pre-requisite level</i>
Despite the provision of research based interventions, the student is not progressing at the rate expected for grade level AND	<i>Evidence shows the use of research based interventions and data for monitoring progress</i>
Student classroom achievement and performance is significantly below grade level peers	<i>The preponderance of the above evidence and data indicates that the student is performing significantly below their peer group. (It was discussed that this could be approx. 2 standards deviations below the mean).</i>

4. Kansas Alternate Assessment (KAA):

a) Required components:

- (1) The student has an active IEP. The content area being assessed must be addressed through goals and objectives on the IEP.
- (2) The student demonstrates cognitive abilities and adaptive behaviors that require **substantial adjustment** to the general curriculum
- (3) The student's learning objectives and expected outcomes focus on applications as indicated in the benchmarks, indicators, and examples in the extended standards
- (4) The student primarily requires direct and extensive instruction to acquire, maintain, generalize, and transfer the skills performed in the naturally occurring setting of the student's life

**Eligibility Criteria for
Students with Significant Cognitive Disabilities
To participate in the
Kansas Alternate Assessment**

- The student has an active Individual Education Plan and the present levels of educational performance data indicates that with regard to progress in the general curriculum area under consideration, the student is significantly delayed.

AND

- The student's learning objectives and expected outcomes in the academic area under consideration requires substantial adjustment to the general curriculum of that area. The student's learning objectives and expected outcomes in the area focus on application, as illustrated in the benchmarks, indicators, and clarifying examples within the Extended Standards.

AND

- The student primarily requires direct and extensive instruction in the academic area under consideration to acquire, maintain, generalize, and transfer the skills done in the naturally occurring settings of the student's life (such as school, vocational/career, community, recreation/leisure and home).

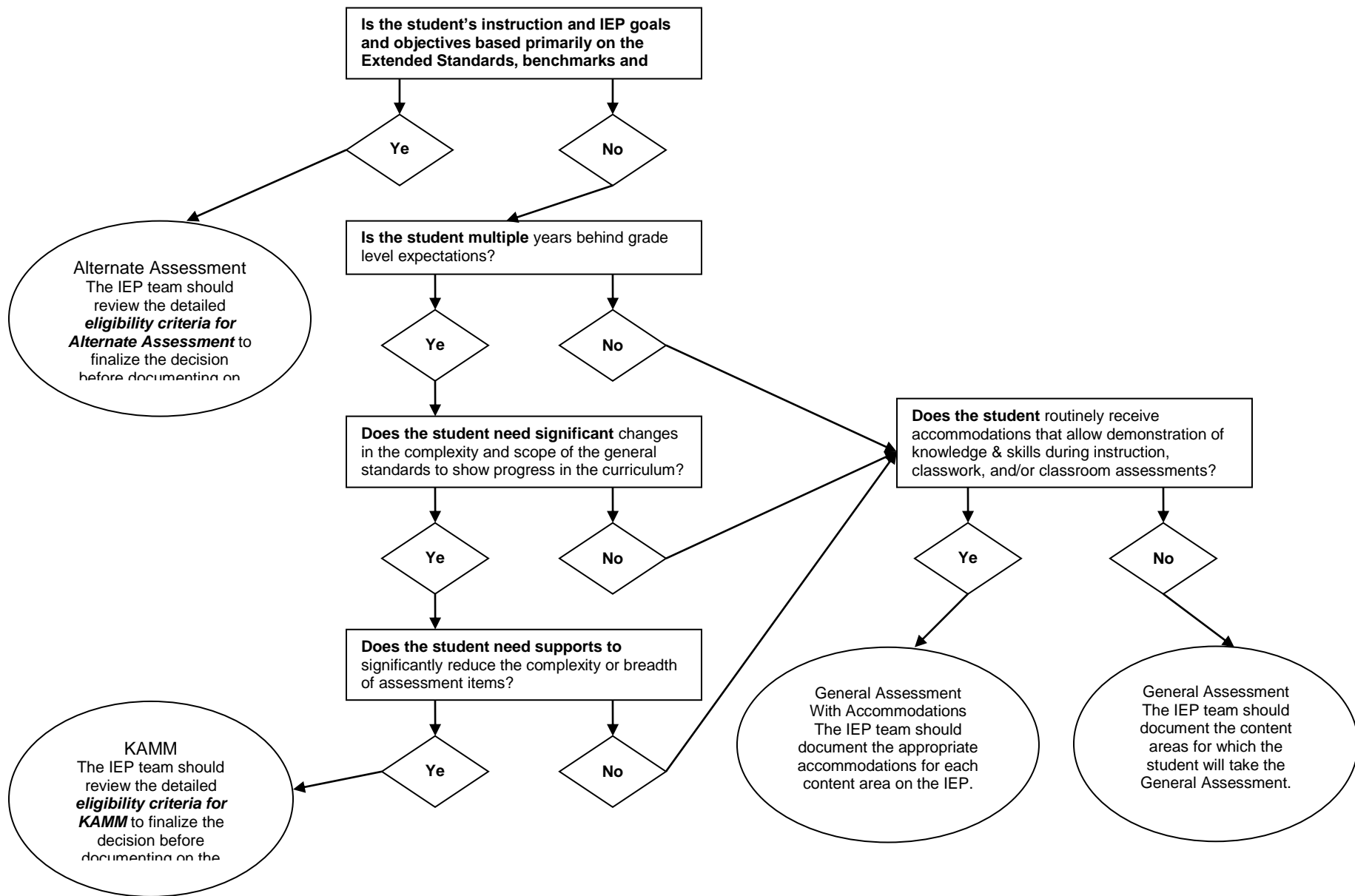
AND

- The student is presented with unique and significant challenges in demonstrating his or her knowledge and skills on any assessment available in the academic area under consideration.

The decision to determine a student's eligibility to participate in the alternate assessment may NOT RESULT PRIMARILY from:

- Excessive or extended absence
- Any specific categorical label
- Social, cultural, or economic difference
- Amount of time he/she receives special education services
- Achievement significantly lower than his or her same age peers

Z. (b) Decision Flowchart



AA. Discipline of Special Education Students

Identified students with disabilities (not gifted) have additional rights concerning suspension and expulsion procedures. Students with disabilities may be subject to short-term suspensions which do not exceed 10 consecutive school days, or for an extended-term suspension not exceeding 90 school days. Multiple short-term suspensions may be imposed within a given school year. Additionally, under certain circumstances, an expulsion may be imposed for a term not exceeding 186 days. However, a series of short-term suspensions must not constitute a pattern because of factors such as the length of each suspension, the duration of each suspension, or the proximity of the suspensions to one another. Such a series of short-term suspensions, constituting a pattern, would be considered an extended-term suspension and require the appropriate procedures to be followed.

Additionally, if a disciplinary action is proposed, which leads to the student being suspended for more than 10 cumulative days in a school year, the IEP team must meet to conduct a functional behavioral analysis and develop a behavior intervention plan to address the problem behaviors. If a behavior intervention plan has already been developed, the plan shall be reviewed by the IEP team and modified as necessary to address the behavior. The IEP team must meet within 10 business days of the child first being removed for more than 10 cumulative school days to conduct this analysis and develop the behavior intervention plan.

The school personnel must determine what special education services are necessary, when a short term suspension exceeds 10 cumulative days, to enable the student to appropriately progress in the general curriculum areas specified in the IEP and appropriately advance toward achieving the annual goals in the IEP. School personnel in this case refers to the regular education administrator, Director of Special Education (or designee), and the special education teacher of the student. IEP meetings relating to disciplinary actions shall be convened as expeditiously as possible. Although attempts should be made to meet with the parent(s) at a mutually convenient time, only 24-hour notification is required. Additionally, the notification does not have to be provided in written form.

All students have a right to a formal discipline hearing when an extended-term suspension or expulsion is proposed. If a suspension is greater than 10 consecutive school days or a series of short-term suspensions that constitute a pattern is proposed, the IEP team must conduct the functional behavioral analysis and develop a behavioral intervention plan as stated above. If a behavior intervention plan has already been developed, the IEP team must meet to review and revise this plan as necessary to address the behavior. This meeting must be held within 10 business days of the child first being removed. Additionally, the IEP team must make a manifestation determination to determine if the specific behavior is related to the student's disability. Extended-term suspensions and expulsions may not be imposed if the behavior subject to disciplinary action is a manifestation of the student's disability. If an IEP team determines that the behavior was not a manifestation, that information is submitted to the district's discipline hearing officer for the student's formal hearing. If the suspension is imposed, the IEP team must determine what special education services are necessary to enable the student to appropriately progress in the general curriculum and appropriately advance toward achieving the goals in their IEP. The IEP team must address the following in making a manifestation determination:

1. Based on its review of all the relevant information, the group must determine if the conduct in question was:
 - a) caused by, or had a direct and substantial relationship to the child's disability; or
 - b) the direct result of the school's failure to implement the child's IEP. (K.S.A. 72-991a(d)(2),(e)(1); 34 C.F.R. 300.530(e)(1)).

A student with a disability (not gifted) may be placed in an interim alternative education setting as a result of the student's possession of a weapon or illegal drug for up to 45 school days. Additionally a due process hearing officer may place a student with a disability in an alternative educational setting (which is proposed by school personnel) who has inflicted serious bodily injury upon another person while at school, on school premises, or at a school function for up to 45 school days without parental consent. The alternative educational setting proposed to a hearing officer must be appropriate, including the special education and related services to be provided to the student as well as services/modifications to address the behavior and prevent its reoccurrence.

Students found to be eligible under 504 are entitled to the same rights concerning disciplinary actions as identified special education students. Additionally, some regular education students may invoke the same protections regarding disciplinary actions as special education students. The school psychologist shall consult with building administration and district special education administration, when necessary, on disciplinary issues to ensure proper procedures are followed in their assigned buildings.

BB. Graduation of Special Education Students

1. Students receiving special education services will receive a regular high school diploma at the completion of their secondary program if they meet USD 261 graduation requirements. IEP teams can alter or modify graduation requirements when the high school principal, Director of Special Services and Assistant Superintendent are involved.
2. If the student has completed the required courses for graduation, but the IEP team determines the student still needs additional special education and related services, graduation may be delayed and the student can continue to receive the needed special education services on the IEP through the school year in which the student turns 21. Some students may require services until age 21 to meet IEP goals. The district's obligation to provide special education services ends (a) when the student meets graduation requirements and receives a regular high school diploma, (b) at the end of the school year in which the child reaches age 21, or (c) an evaluation shows that the child is no longer eligible for special education services.
3. No reevaluation is required prior to exiting a student due to graduation. Before the student completes the last semester of high school in which she/he is expected to graduate, the district will provide the student (if over age 18) and the parents with Prior Written Notice of the discontinuation of services at the end of the school year. The Prior Written Notice will clearly state that the student will no longer be entitled to receive special education services from the district after graduation. Parental consent is not required when a child graduates with a regular diploma.
4. Graduation is considered a change in placement; therefore, a *PRIOR WRITTEN NOTICE FOR IDENTIFICATION, SPECIAL EDUCATION and RELATED SERVICES, EDUCATIONAL PLACEMENT, CHANGE IN SERVICES, CHANGE IN PLACEMENT and REQUEST FOR CONSENT* form that terminates special education services at the completion of the final semester, shall be completed by the school psychologist and sent to the parents, or student if legal age. This form must be sent prior to the end of the student's last semester of classes if this was not incorporated into the last IEP. A copy of this form shall be filed in the student's special education records and replaced with the signed copy when it is returned by the parents.
5. Graduating special education students (not gifted) will have an exit meeting to discuss their *SUMMARY of PERFORMANCE* (SOP). The meetings will follow the normal meeting guidelines and the following will apply:
 - a) Graduating Seniors Process (Categorical Labels other than Gifted)

For students who are under 18 years of age or whose parents have legal guardianship:

Ample time prior to graduation send the “*Prior Written Notice for Identification, Special Education and Related Services, Educational Placement, Change in Services, Change in Placement, and Request for Consent*” and “*Destruction of Student Data*” forms to parents/legal guardians for signature. (The placement must clearly state: Special education services will be dismissed upon completion of graduation credits and meeting IEP goals. Summary of Performance reviewed with student prior to graduation.)

(Announce in the cover letter for the above forms that a small celebration will be held during the inclusive dates of proposed SOP reviews, offering them the opportunity to participate. Include also a statement to inform parent/guardian that once a date/time is confirmed the student will inform them of the specifics.)

For students who are 18 years or older and whose parents do not have legal guardianship:
The “Team” needs to have the following forms/information available for review and/or completion at the gathering:

- The “*Prior Written Notice for Identification, Special Education and Related Services, Educational Placement, Change in Services, Change in Placement, and Request for Consent*” (The placement must clearly state: Special education services will be dismissed upon completion of graduation credits and meeting IEP goals. Summary of Performance reviewed with student prior to graduation.)
- “*Destruction of Student Data*” forms
- Completed SOP
- Student Exit Survey
- Dismissal/Exit Form

NOTE: A copy of these completed forms need to be placed into the student’s SOP packet prior to the meeting being completed.

The “Team” needs to have the following forms/information available in the student SOP packet:

- Most Recent IEP (copy)
- Most Recent 3-year “*psych report*” reevaluation (copy)
- Signed Congratulations Cover Letter (personalized by school)
- Place copy of all forms completed above in to SOP packet for student

Graduation Placement Wording:

1. **DESCRIPTION OF THE ACTION AND REASONS WHY THE ACTION IS PROPOSED**
Special education services will be dismissed upon completion of graduation credits and meeting IEP goals. Summary of Performance reviewed with student prior to graduation.
2. **OPTIONS CONSIDERED AND WHY THE OPTIONS WERE REJECTED**
The team considered continued services, however upon graduation the student exits from special education.
3. **DESCRIPTION OF THE DATA USED AS BASIS FOR THE PROPOSED OR REFUSED ACTION**
The data used as a basis for the proposed action include summary of performance report, student & team input, review of files. Last 3-year reevaluation.
4. **OTHER FACTOR RELEVANT TO THE PROPOSAL OR REFUSAL**
No harmful social or educational effects are anticipated as a result of this special education action.

b) Graduating Seniors Process – Gifted ONLY

The process for graduating “Gifted” seniors will be the same as for all other exceptionalities except there will be no SOP review or meeting to discuss dismissal.

CC. Active Files/Records Maintenance

- a) Psychologist’s files should be maintained in a neat and organized manner on each student.
Do not leave used protocols in the same file as other records.
- b) Protocols should be maintained in the same manner as all other student records in an individual folder with a record of access form. Retain the protocol files until a reevaluation has been completed.
 - (1) If the reevaluation included comparable standardized assessments, the previous protocols may be shredded and the new protocols should be retained.
 - (2) If the reevaluation was a file review only, it will be necessary to maintain the previous protocols for the student.
 - (3) If parental consent to destroy protocols is obtained, the consent should be copied to all appropriate related service personnel who are maintaining protocol files.

2. Transferring files to Another Psych Office:

- a) In preparing files to be transferred to the next psych office, work with your secretaries to have your files cleaned and organized.
 - (1) Remove all duplicate reports, scraps of unnecessary paper, etc.
 - (2) Files for inactive non-placed students, students who have moved within the last two years, and protocol files for these students should also be included in the files transferred to the next appropriate school psychologists office.
 - (3) If a student moves to another district, the file is to be maintained by the school psychologist for two academic years. After two years the file should be sent to the special education office for long term storage.

3. Transferring files to the District Office

- a) Files to be transferred to the district office include seniors who have graduated who received services until graduation, seniors who were inactive at the time of their graduation and students, regardless of their grade and status, who have moved from your school two years ago.
- b) Collect files from teachers and related service providers.
- c) Send all paperwork to the district office from the psych file, teacher file and related service files.
- d) Divide these files into one of the following categories:
 - Graduated (active at the time of graduation)
 - Graduated (inactive at the time of graduation)
 - Moved Away (has been gone for two school years)
- e) Type a list of files to accompany the records to the district office. Keep one copy for your records and send one copy with the records to the district office.

4. Inactive Teacher/Related Service Files

- a) Teacher and related service files of students who have been staffed out of programs or moved are to be given to the school psychologist. The school psychologist and school psychologist secretary are to delete duplicates and keep pertinent information from these files in their own inactive files.

APPENDIX A: Eligibility Indicators

Eligibility Indicators
for
Haysville USD 261
Spring, 2011

Version 5.0 (a revision to the Fall, 2007 version)

A copy of this document may be downloaded by accessing the KSDE Special Education Services web page: www.ksde.org

This guidance document will continue to be a working document and will be periodically updated based on input from its use in the field.

Eligibility Indicators

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An Equal Employment/Educational Opportunity Agency

The Kansas State Department of Education does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. The following person has been designated to handle inquiries regarding the non-discrimination policies: KSDE General Counsel, 120 SE 10th Ave., Topeka, KS 66612; 785-296-3201

Haysville USD 261

This document contains information about initial evaluation, including appropriate sources of data, eligibility determination, and includes Federal and State definitions of each exceptionality area. It also provides information regarding exclusionary factors that must be considered and examples of indicators of eligibility to assist school personnel as they make decisions. The purpose of the document is to provide guidance to evaluation teams as they seek to address the two-prong test of eligibility when determining if a student is eligible for special education. For further guidance and a more complete discussion of the initial evaluation process, see Chapter 3 in the Special Education Process Handbook. This important resource may be viewed and downloaded by accessing the following web page: www.ksde.org

Eligibility Determination

The initial evaluation must include a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information. This includes information provided by the parent that may assist in determining whether the child is an exceptional child, the educational needs of the child, and the content of the child's IEP, including information related to enabling the child to be involved, and progress in the general education curriculum or, for preschool children, to participate in appropriate activities (K.S.A. 72-986(b)(1)). The Special Education Process Handbook outlines two methods of evaluation, (i) "the child's response to scientific research-based intervention" and (ii) "a pattern of strengths and weaknesses", which are outlined in federal regulations with regard to the identification of students with specific learning disabilities. However, in Kansas, both are also appropriate to be used to determine eligibility for any of the areas of exceptionality. Regardless of the method chosen, evaluation teams will use existing and/or new data that comes from a variety of sources. The richest source of this information comes from the data collected in the provision of interventions. Interventions typically occur as a part of the General Education Intervention process, but may also be collected from interventions conducted during the initial evaluation process.

When interpreting evaluation data from either of the two methods of evaluation for the purpose of making an eligibility determination, the team must ensure that the child meets the definition of one of the categories of exceptionality and, as a result of that exceptionality, needs special education and related services (KAR 91-40-1(k)(w); 34 CFR 300.8). This is known as the two-prong test of eligibility. If a child meets the definition of an exceptionality category but does not need special education and related services, s/he will not be determined to be eligible. If the child has a need for special education and related services but does not meet the definition of an exceptionality category, s/he will not be determined to be eligible. In the case of a child who is found to have a disability, but does not need special education and related services, a referral for a Section 504 evaluation may be considered.

1. Determining Whether the Child is a *Child with an Exceptionality*

"Exceptional children" means children with disabilities and gifted children (KAR 91-40-1 (w)). "Child with a disability" means the following: (1) a child evaluated as having intellectual disability, hearing impairments including deafness, speech or language impairments, visual impairments including blindness, emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health impairments, specific learning disabilities, deaf-blindness, or multiple disabilities, and who, by reason thereof, needs special education and related services; and (2) for children ages three through nine, a child who is experiencing developmental delays and, by reason thereof, needs special education and related services ((KAR 91-40-1 (k); CFR 300).

When considering the first prong of the two-prong test of eligibility, the team reviews the initial evaluation and other data to determine whether or not the child is a child with an exceptionality. To do this, team members compare the data about the child to see if there is a match to one of the exceptionality categories defined in the regulations. However, even when the data points to a particular area of exceptionality, there are exclusionary factors that must be examined before determining the child is a child with an exceptionality.

Regulations are very clear with regard to the fact that a child must NOT be determined to be a child with an exceptionality if:

(a) the determinant factor is:

- Lack of appropriate instruction in reading, including the essential components of reading instruction (defined in section 1208(3) of the ESEA (NCLB) as phonemic awareness, phonics, vocabulary development, reading fluency including oral reading skills, and reading comprehension strategies); or
- Lack of appropriate instruction in math; or
- Limited English proficiency; and

Haysville USD 261

(b) the child does not otherwise meet the eligibility criteria as a child with an exceptionality (KSA 72-986(f); KAR 91-40-10(c); 34 CFR 300.306(b)).

In addition to these exclusionary factors which apply to all categories of exceptionality, there are exclusionary factors specific to certain disabilities that must also be ruled out. Those factors are contained in this document and guidance is provided to assist teams in their evaluation of these factors as they determine eligibility.

If the evaluation data indicates there is a match with a particular category of exceptionality and the team has ruled out the presence of any exclusionary factors, the team may determine that the child meets one of the requirements of eligibility as a child with an exceptionality (Prong 1 of the test of eligibility). If there is not a match or exclusionary factors are present, the team must determine that the child does not meet the eligibility of a child with an exceptionality. However, being gifted or having a disability does not necessarily qualify a child for special education services. Thus teams must also consider the component of the definition which states: “and who, by reason thereof, needs special education and related services.”

2. Determining Whether the Child Needs Special Education and Related Services

The second prong of the test of eligibility is to determine whether or not the child needs special education and related services as a result of the exceptionality. It is helpful for teams to remember that by definition special education means specially designed instruction (KAR 91-40-1(kkk); 34 CFR 300.39(a)(1)), and, that specially designed instruction means adapting the content, methodology, or delivery of instruction to address the unique needs of a child that result from the child’s exceptionality to ensure access of the child to the general education curriculum in order to meet the educational standards that apply to all children (KAR 91-40-1 (III); 34 CFR 300.39(b)(3)(i)-(ii)). This implies that in order to have a need for special education, the child has specific needs which are so unique as to require specially designed instruction in order to access and progress in the general education curriculum.

Kansas regulations at KAR 91-40-7(c)(1-2), require that prior to referral for an initial evaluation the school must have data-based documentation of the following: (1) having provided appropriate instruction to the child in regular education settings that was delivered by qualified personnel (2) repeatedly assessing the child’s academic achievement at reasonable intervals which reflect formal assessment of the child’s progress during instruction; (3) having provided the assessment results to the child’s parents; and, (4) that the assessment results indicate an evaluation is appropriate. Gone are the days where school teams can simply indicate the interventions tried with anecdotal remarks to indicate the need for evaluation. The data collected prior to referral must now be documented as indicated above and, if the child goes on for evaluation, that data becomes an integral part of the eligibility determination of need. Whether the school is implementing a system of school-wide multi-tiered model of intervention (MTSS) or uses an individual problem solving approach (SIT, SAT, CARE, etc.) to carry out interventions and document the child’s progress, the school will have data regarding the child’s needs related to the intensity of instruction and supports required for the child to be successful.

The team must review the evaluation data in such a way as to understand the extent of the child’s needs with regard to specially designed instruction. Teams should be able to use the data to describe the intensity of the support needed to assist the child in accessing and progressing in the general education curriculum. It is only through this discussion that the team can determine whether or not the child’s need for having adapted content, methodology, or delivery of instruction is so great that it cannot be provided without the support of special education.

If the team determines that the child’s need for having adapted content, methodology, or delivery of instruction is so great that it cannot be provided in regular education without the support of special education, the team may determine that the child needs special education and related services (Prong 2 of the eligibility test). If the data suggests the child’s needs for instruction can be provided within regular education without the support of special education and related services, the team must determine that the child is not in need of special education and related services.

Examples of Sources of Data

1. General Education Interventions or Results of Screening/General Education Curriculum Progress

Data that the child was provided appropriate instruction in general education settings, including repeated assessments of achievement at reasonable intervals, reflecting formal assessment of the child's progress during instruction. This includes records of interventions attempted, data collected during monitoring, evaluation of interventions, and data collected through screening measures.

2. Record Review

Information provided by the parents, current classroom-based assessments, information from previous services providers, prior screenings, previous evaluations, reports from other agencies, portfolios, discipline records, cumulative file, health records, performance in relationship to curricular standards, and other records.

3. Interview (Parent and other caregivers, Student, Teacher)

Parents, teachers, and the child can all typically provide insight into areas of strengths and needs. Interviews can also provide information about significant historical events in the child's life as well as about his performance in the classroom and other settings. This may include instructional history, social history, medical information, and/or developmental history.

4. Observation

Structured observations, rating scales, ecological instruments, behavioral observations, functional analysis of behavior and instruction, anecdotal notes, and other observations (conducted by parents, teachers, related services personnel, and others). The purpose of the observation is to help the evaluation team understand the extent to which the child's skills are impacting his/her ability to participate and progress in a variety of settings.

5. Tests

Standardized norm-referenced tests are helpful if the information being sought is to determine how a child compares to a national group of children of the same age or grade. Criterion-reference tests are helpful in determining if the child has mastered skills expected of a certain age or grade level. Tests may include individual measures of ability or aptitude, curriculum-based assessments (e.g., CBA, CBM, or CBE), performance-based assessments (i.e., rubric scoring), or other skill measures such as individual reading inventories. Diagnostic testing which might include measures of reading, math, written language, other academic skills, tests of motor functioning, speech/language skills, adaptive behavior, self-concept, or appropriate tests of any domain of concern.

Autism

KAR 91-40-1 ‘

(f) "Autism" means a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three but not necessarily so, that adversely affects a child's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. The term shall not apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance.

Exclusionary Criteria: A child <i>must NOT be determined to be a child with an exceptionality</i> if the determinant factor is:	
Exclusionary Factor	How to Evaluate
<ul style="list-style-type: none"> Lack of appropriate instruction in reading, including the essential components of reading instruction (defined in section 1208(3) of the ESEA (NCLB); 	Evidence shows that the student’s previous reading instruction and curriculum addressed phonemic awareness, phonics, vocabulary development, reading (fluency including oral reading skills), and reading comprehension strategies. This evidence may come from (a) an evaluation of the school’s basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Lack of appropriate instruction in math; or 	Evidence shows that the student’s previous math instruction and curriculum addressed math calculation, problem solving, and conceptual understanding. This evidence may come from (a) an evaluation of the school’s basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Limited English proficiency; 	If the student being evaluated is an English Language Learner, provide evidence that the student was provided with appropriate accommodations and interventions to address it. Consider things such as: proficiency in English and in the student’s native language, amount of time in the country, level of education in the student’s native country, etc. Also consider whether the student’s rate of learning is different from those of similar language background and educational experience. If, in spite of appropriate accommodations and interventions, the student’s learning difficulties persist, this factor is ruled out.
<ul style="list-style-type: none"> and the child does not otherwise meet the eligibility criteria as a child with an exceptionality 	Evidence shows that the student’s learning difficulties are not due to factors other than those associated with the criteria for disabilities as defined in IDEA. For example, frequent moves, incarceration, substance abuse, etc.
<ul style="list-style-type: none"> The term shall not apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance. 	The team should rule out the presence of an emotional disturbance. If the data the team collects matches the indicators for emotional disturbance, the student should be identified as a child with an emotional disturbance rather than a child with autism.

Prong 1: Does the child exhibit an exceptionality?

Indicators

For meeting this prong of eligibility, the team must consider information and have data to support at least 1 indicator from each of the following categories:

1. Evidence

- Records contain medical information which provides evidence of autism
- Record review, interview, and/or observations indicate student's skills in verbal and nonverbal communication and social interaction are significantly different from peers
- Record review, interview, and/or observations provide information which substantiates student characteristics such as: engagement in repetitive activities and stereotyped movements; resistance to environmental change or change in daily routines; and unusual responses to sensory experiences which are significantly different than peers.
- Measures of the student's communication and social skills indicate skill level is markedly below that of peers
- Record review, interview and/or observations indicate concerns regarding the student's communication and social interaction skills were evident before age 3

2. Adverse effect

- Record review, interview and/or observation indicate that the student's condition adversely impacts his/her educational performance
- Progress monitoring data displayed on charts or graphs shows slow rate of growth in educational performance despite provision of intense, explicit instructional interventions
- Student progress monitoring data shows student's educational performance is markedly below that of peers

Prong 2: Does the child need special education?

Indicators

- Student progress monitoring data indicate intense or sustained resources needed in order for student to demonstrate adequate progress
- Despite modifications of instruction, curriculum, and environment, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more areas
- Student progress monitoring data show that the student's behavior of concern is resistant to targeted supplemental and intensive interventions to address communication, social interaction, and/or academic skills.
- Student Progress monitoring data of increasingly customized and individually tailored instruction and intervention indicate that the student needs specially designed instruction to access the general curriculum.
- Despite implementation of intensive interventions, which include purposeful instructional design and delivery, prioritized content, protected time and grouping, and performance monitoring, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more areas.

Developmental Delay (age 9 and younger)

KAR 91-40-1

(q) “Developmental delay” means such a deviation from average development in one or more of the following developmental areas that special education and related services are required:

- (A) Physical;
- (B) cognitive;
- (C) adaptive behavior;
- (D) communication; or,
- (E) social or emotional development

The deviation from average development shall be documented and measured by appropriate diagnostic instruments and procedures.

Exclusionary Criteria:	
A child must <i>NOT</i> be determined to be a child with an <i>exceptionality</i> if the determinant factor is:	
Exclusionary Factor	How to Evaluate
<ul style="list-style-type: none"> • Lack of appropriate instruction in reading, including the essential components of reading instruction (defined in section 1208(3) of the ESEA(NCLB)); 	Evidence shows that the student’s previous reading instruction and curriculum addressed phonemic awareness, phonics, vocabulary development, reading fluency (including oral reading skills), and reading comprehension strategies. This evidence may come from (a) an evaluation of the school’s basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> • Lack of appropriate instruction in math; or 	Evidence shows that the student’s previous math instruction and curriculum addressed math calculation, problem solving, and conceptual understanding. This evidence may come from (a) an evaluation of the school’s basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> • Limited English proficiency; 	If the student being evaluated is an English Language Learner, provide evidence that the student was provided with appropriate accommodations and interventions to address it. Consider things such as: proficiency in English and in the student’s native language, amount of time in the country, level of education in the student’s native country, etc. Also consider whether the student’s rate of learning is different from those of similar language background and educational experience. If, in spite of appropriate accommodations and interventions, the student’s learning difficulties persist, this factor is ruled out.
<ul style="list-style-type: none"> • and the child does not otherwise meet the eligibility criteria as a child with an exceptionality 	Evidence shows that the student’s learning difficulties are not due to factors other than those associated with the criteria for disabilities as defined in IDEA. For example, frequent moves, etc.

Prong 1: Does the child exhibit an exceptionality?

Indicators

For meeting this prong of eligibility, the team must consider information and have data to support at least 1 indicator from each of the three following categories:

1. Records indicate student is age 9 or under
2. Rate of skill acquisition as measured by progress monitoring is markedly different from peers
 - Progress monitoring data displayed on charts or graphs shows slow rate of growth in educational performance despite provision of intense, explicit instructional interventions
 - Progress monitoring data displayed on charts or graphs shows student is a non-responder to increasingly intense instructional interventions
3. Performance is significantly below developmental expectations in one or more developmental areas as measured by appropriate diagnostic instruments and procedures.
 - Performance is significantly below developmental expectations on a criterion referenced instrument in one or more developmental areas
 - Performance is significantly below normative sample on a standardized assessment in one or more developmental areas
 - Record review, interview, and/or observations demonstrate significant deviation from average development in one or more developmental areas
 - Student performance is significantly lower than peers on one or more benchmark assessments, curricular objectives, or state assessments.

Prong 2: Does the child need special education?

Indicators

- Student progress monitoring data indicates intense or sustained resources needed in order for student to:
 - physically negotiate and manipulate the environment, or
 - understand age appropriate information, reason, and solve problems, or
 - exhibit developmentally appropriate adaptive skills such as: self-care, home living, community use, self-direction, health and safety, and functional academics, or
 - convey and comprehend communication and social intent, or
 - positively impact relationships with peers and adults, or
 - initiate, respond to, and maintain positive social relationships, or
 - meet behavioral expectations (e.g., following directions, rules, and routines)
- Despite modifications of instruction, curriculum, and environment, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more developmental areas.
- Student progress monitoring data show that the student's behavior of concern is resistant to targeted supplemental and intensive interventions to address communication, social interaction, and/or academic skills.
- Student progress monitoring data of increasingly customized and individually tailored instruction and intervention indicate that the student needs specially designed instruction to access the general curriculum.
- Despite implementation of intensive interventions, which include purposeful instructional design and delivery, prioritized content, protected time and grouping, and performance monitoring, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more areas.

Emotional Disturbance

KAR 91-40-1

(v) "Emotional disturbance" means a condition exhibiting one or more of the following characteristics 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 shall not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance.

Exclusionary Criteria:

A child *must NOT* be determined to be a child with an *exceptionality* if the determinant factor is:

Exclusionary Factor	How to Evaluate
<ul style="list-style-type: none"> • Lack of appropriate instruction in reading, including the essential components of reading instruction (defined in section 1208(3) of the ESEA(NCLB)); 	Evidence shows that the student's previous reading instruction and curriculum addressed phonemic awareness, phonics, vocabulary development, reading fluency (including oral reading skills), and reading comprehension strategies. This evidence may come from (a) an evaluation of the school's basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> • Lack of appropriate instruction in math; or 	Evidence shows that the student's previous math instruction and curriculum addressed math calculation, problem solving, and conceptual understanding. This evidence may come from (a) an evaluation of the school's basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> • Limited English proficiency; 	If the student being evaluated is an English Language Learner, provide evidence that the student was provided with appropriate accommodations and interventions to address it. Consider things such as: proficiency in English and in the student's native language, amount of time in the country, level of education in the student's native country, etc. Also consider whether the student's rate of learning is different from those of similar language background and educational experience. If, in spite of appropriate accommodations and interventions, the student's learning difficulties persist, this factor is ruled out.
<ul style="list-style-type: none"> • and the child does not otherwise meet the eligibility criteria as a child with an exceptionality 	Evidence shows that the student's learning difficulties are due to factors other than those associated with the criteria for disabilities as defined in IDEA. For example, frequent moves, incarceration, substance abuse, etc.
<ul style="list-style-type: none"> • The student may not be socially maladjusted, unless it is determined that they also have an emotional disturbance 	Courts have interpreted social maladjustment to mean a conduct disorder. Teams should review records to rule out that the student has been identified as a student having a conduct disorder, unless other evidence that the student also has an emotional disturbance exists.

Prong 1: Does the child exhibit an exceptionality?

Indicators

For meeting this prong of eligibility the team must consider information and have data to support at least 1 indicator from each of the four following categories:

1. Characteristics of Emotional Disturbance

- Record reviews, interviews, and/or observations indicate levels of physical symptoms or fears which are different from peers and are correlated with school problems
- Record reviews, interviews, and/or observations indicate student exhibits inappropriate behaviors or feelings under normal circumstances
- Record reviews, interviews, and/or observations indicate an inability to build or maintain satisfactory interpersonal relationships with peers and teachers
- Record reviews, interviews, and/or observations indicate a pervasive mood of unhappiness or depression

2. Evidence that characteristics have been exhibited over a long period of time

Record reviews, interviews, and/or observations indicate that emotional difficulties have been exhibited over a long period of time

3. Evidence that characteristics are exhibited to marked degree

Assessments indicate behavioral and emotional characteristics are exhibited to a marked degree when compared to peers

4. Evidence that behavior adversely affects educational performance

- Record reviews, interviews, and/or observations indicate that emotional characteristics are adversely affecting the student's educational performance
- Record reviews, interviews, and/or observations indicate an inability to learn that cannot be explained by intellectual, sensory, or health factors
- Progress monitoring data displayed on charts or graphs shows slow rate of growth in educational performance despite provision of intense, explicit instructional interventions
- Progress monitoring data displayed on charts or graphs shows student is a non-responder to increasingly intense instructional interventions

Other Supporting Information

Records document a DSM-IV diagnosis that substantiates one or more of the following: an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; inappropriate types of behavior or feelings under normal circumstances; a general pervasive mood of unhappiness or depression; or a tendency to develop physical symptoms or fears associated with personal or school problems and includes schizophrenia

Prong 2: Does the child need special education?

Indicators

- Student progress monitoring data indicates intense or sustained resources needed in order for student to demonstrate adequate progress
- Despite modifications of instruction, curriculum, and environment, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more areas
- Modifications of instruction, curriculum, and the environment have not adequately addressed the behaviors, feelings, relationships, moods, fears, or physical symptoms that adversely affect the student's educational performance
- Student progress monitoring data show that the student's behavior of concern is resistant to targeted supplemental and intensive interventions
- Student progress monitoring data of increasingly customized and individually tailored instruction and intervention indicate that the student needs specially designed instruction to access the general curriculum

Gifted

KAR 91-40-1

(cc) "Gifted" means performing or demonstrating the potential for performing at significantly higher levels of accomplishment in one or more academic fields due to intellectual ability, when compared to others of similar age, experience and environment.

<p>Prong 1: Does the child exhibit an exceptionality?</p>
<p>Indicators</p>
<p>For meeting this prong of eligibility the team must consider information and have data to support at least 1 indicator from each of the three following categories:</p>
<p>1. Evidence of performing or demonstrating the potential for performing at significantly higher levels of accomplishment in one or more academic fields</p> <ul style="list-style-type: none">• Record reviews, interviews, and/or observations indicate student demonstrates superior reasoning and problem solving ability• Student progress monitoring indicates student’s skill level in one or more academic areas is much above that of peers• GPA, classroom, portfolio, or rubrics indicate a significantly high level of intellectual ability and excellence in academics• District, state, and national assessments indicate a significantly high level of intellectual ability and excellence in academics• A rank of not less than the 95th percentile on national norms on a standardized, norm-referenced achievement test in one or more of the academic fields (mathematics, language arts (including reading), science, and social science), or evidence that such test scores do not adequately reflect the child's excellence in academics• College entrance exams indicate a significantly high level of intellectual ability and excellence in academics• Pre-tests consistently indicate student has already mastered end of unit/curricular objectives prior to instruction
<p>2. Evidence of being due to intellectual ability</p> <ul style="list-style-type: none">• Record reviews, interviews, and/or observations indicate student shows persistent intellectual curiosity and asks searching questions• Record reviews, interviews, and/or observations indicate student shows initiative and originality in intellectual work• Ease of task completion indicates a significantly high level of intellectual ability and excellence in academics• Rate of acquisition and retention indicate a significantly high level of intellectual ability and excellence in academics• Products from home or school indicate a significantly high level of intellectual ability and excellence in academics• A composite rank of not less than the 97th percentile on an individually administered, standardized, norm-referenced test of intellectual ability, or evidence that the child's standardized, intelligence test score does not adequately reflect the child's high intellectual potential
<p>3. Evidenced that when compared to others of similar age, experience and environment</p> <ul style="list-style-type: none">• Multiple characteristics of giftedness exhibited when interventions provide adaptations, enrichment, or acceleration• Persistence to task and generalization of knowledge gained indicate a remarkably high level of accomplishment• Coursework analysis indicates a significantly high level of intellectual ability and excellence in academics when provided with interventions• Performance significantly higher than peers on one or more areas on benchmark assessments, curricular objectives, or state assessments

Prong 2: Does the child need special education?

Indicators

- Student progress monitoring data indicates intense or sustained resources needed in order for student to demonstrate appropriate progress:
- Evidence of student's mastery of successive levels of instructional objectives or course requirements indicates the need for intensive adaptations or acceleration
- Student progress monitoring data show that targeted supplemental interventions are insufficient for student to demonstrate appropriate progress
- Student progress monitoring data of increasingly customized and individually tailored instruction and intervention indicate that the student needs specially designed instruction to access the general curriculum at appropriate levels of instruction
- Intensive changes or modifications needed in instruction, curriculum, grouping, assignments, etc. for student to demonstrate appropriate progress
- Evidence of student's frustration with enriched instructional environments indicates the need for intensive adaptations or acceleration
- General education interventions such as alternative course selections or cross-age grouping are insufficient to support student progress

Intellectual Disability

KAR 91-40-1

(oo) "Intellectual Disability" means significantly sub-average general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, which adversely affects a child's educational performance.

Exclusionary Criteria:	
A child must NOT be determined to be a child with an exceptionality if the determinant factor is:	
Exclusionary Factor	How to Evaluate
<ul style="list-style-type: none"> Lack of appropriate instruction in reading, including the essential components of reading instruction (defined in section 1208(3) of the ESEA(NCLB); 	Evidence shows that the student's previous reading instruction and curriculum addressed phonemic awareness, phonics, vocabulary development, reading fluency (including oral reading skills), and reading comprehension strategies. This evidence may come from (a) an evaluation of the school's basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Lack of appropriate instruction in math; or 	Evidence shows that the student's previous math instruction and curriculum addressed math calculation, problem solving, and conceptual understanding. This evidence may come from (a) an evaluation of the school's basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Limited English proficiency; and 	If the student being evaluated is an English Language Learner, provide evidence that the student was provided with appropriate accommodations and interventions to address it. Consider things such as: proficiency in English and in the student's native language, amount of time in the country, level of education in the student's native country, etc. Also consider whether the student's rate of learning is different from those of similar language background and educational experience. If, in spite of appropriate accommodations and interventions, the student's learning difficulties persist, this factor is ruled out.
<ul style="list-style-type: none"> the child does not otherwise meet the eligibility criteria as a child with an exceptionality 	Evidence shows that the student's learning difficulties are due to factors other than those associated with the criteria for disabilities as defined in IDEA. For example, frequent moves, incarceration, substance abuse, etc.

Prong 1: Does the student exhibit an exceptionality?

Indicators

For meeting this prong of eligibility, the team must consider information and have data to support at least 1 indicator from each of the four following categories:

1. Information relating to sub-average general intellectual functioning
 - Student's rate of learning, as measured by progress monitoring, is markedly different from peers
 - Student's score is two or more standard deviations below the mean on an individually administered, standardized, norm-referenced test of intellectual ability
2. Information related to deficits in adaptive behavior
 - Records, interviews, and/or observations indicate student exhibits deficits in adaptive skill areas
 - Measures of adaptive behavior skills indicate significant deficits in two or more areas
3. Information related to initial occurrence during the developmental period
 - Records and/or interviews indicate deficits in adaptive behavior and low intellectual functioning were manifested during the developmental period
 - Records, interviews, and/or observations indicate adaptive behavior deficits have occurred over an extended period of time
4. Evidence of Adverse Effects on Educational Performance
 - Records, interviews, and/or observations indicate child's level of educational performance has been significantly below age or state-approved grade level standards.
 - Student's performance is significantly below age or state-approved grade level standards when measured on benchmark assessments, curricular objectives, or state assessments
 - Measures of academic achievement indicate significant delays across subject areas

Other Supporting Information

Records indicate a medical diagnosis of mental retardation

Prong 2: Does the child need special education?

Indicators

- Despite modifications in instruction, curriculum and environment, student's rate of learning is significantly less than peers
- Despite modifications in instruction, curriculum and environment, student's educational performance in various age appropriate environments is significantly below age or state-approved grade level standards.
- Despite modifications in instruction, curriculum and environment, student's adaptive behavior skills in various age appropriate environments is significantly delayed from peers
- Despite modifications of instruction, curriculum, and environment, the student does not make sufficient progress to meet age or state-approved grade-level standards across curricular areas
- Student progress monitoring data show that the student's behavior of concern is resistant to targeted supplemental and intensive interventions
- Student progress monitoring data of increasingly customized and individually tailored instruction and intervention indicate that the student needs specially designed instruction to access the general curriculum.
- Despite implementation of intensive interventions, which include purposeful instructional design and delivery, prioritized content, protected time and grouping, and performance monitoring, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more areas.

Learning Disability

KAR 91-40-1

(mmm) “Specific learning disability” means a disorder in one of more of the basic psychological processes involved in understanding or using language, spoken or written, that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term shall not include learning problems that are primarily the result of any of the following: (1) Visual, hearing, or motor, disabilities; (2) Intellectual Disability; (3) emotional disturbance; or (4) environmental, cultural, or economic disadvantage.

KAR 91-40-11

(b)(1) A group evaluating a child for a specific learning disability may determine that the child has such a disability only if the following conditions are met:

(A) The child does not achieve adequately for the child's age or meet state-approved grade-level standards, if any, in one or more of the following areas, when the child is provided with learning experiences and instruction appropriate for the child's age and grade level: (i) Oral expression; (ii) listening comprehension; (iii) written expression; (iv) basic reading skill; (v) reading fluency skills; (vi) reading comprehension; (vii) mathematics calculation; and (viii) mathematics problem solving; and

(B)(i) The child does not make sufficient progress to meet age or state-approved grade level standards in one of more of the areas identified in paragraph (b)(1)(A) when using a process based on the child’s response to scientific, research-based intervention; or (ii) the child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, grade level standards, or intellectual development that is determined by the group conducting the evaluation to be relevant to the identification of a specific learning disability, using appropriate assessments.

Exclusionary Criteria:	
A child <i>must NOT</i> be determined to be a child with an <i>exceptionality</i> if the determinant factor is:	
Exclusionary Factor	How to Evaluate
<ul style="list-style-type: none"> Lack of appropriate instruction in reading, including the essential components of reading instruction (defined in section 1208(3) of the ESEA(NCLB)); 	Evidence shows that the student’s previous reading instruction and curriculum addressed phonemic awareness, phonics, vocabulary development, reading fluency (including oral reading skills), and reading comprehension strategies. This evidence may come from (a) an evaluation of the school’s basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Lack of appropriate instruction in math; or 	Evidence shows that the student’s previous math instruction and curriculum addressed math calculation, problem solving, and conceptual understanding. This evidence may come from (a) an evaluation of the school’s basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Limited English proficiency; 	If the student being evaluated is an English Language Learner, provide evidence that the student was provided with appropriate accommodations and interventions to address it. Consider things such as: proficiency in English and in the student’s native language, amount of time in the country, level of education in the student’s native country, etc. Also consider whether the student’s rate of learning is different from those of similar language background and educational experience. If, in spite of appropriate accommodations and interventions, the student’s learning difficulties persist, this factor is ruled out.
<ul style="list-style-type: none"> and the child does not otherwise meet the eligibility criteria as a child with an exceptionality 	Evidence shows that the student’s learning difficulties are due to factors other than those associated with the criteria for disabilities as defined in IDEA. For example, frequent moves, incarceration, substance abuse, etc.
The determinant factor for why the child does not achieve adequately for the child’s age or does not	Evidence shows that student information does not match indicators for visual, hearing, or motor disability, intellectual

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make sufficient progress to meet age or State-approved grade level standards, or exhibits a pattern of strengths and weaknesses, is not primarily the result of:

- A visual, hearing or motor disability;
- emotional disturbance;
- cultural factors;
- environmental or economic disadvantage;
- limited English proficiency; or
- intellectual disability

disability, or emotional disturbance indicating the presence of another disability is not the primary cause of learning problems. However, it should be recognized that learning disabilities can co-exist with other types of disabilities (i.e., co-morbidity).

If any other factors (cultural, environmental or economic disadvantage, or limited English proficiency) are an issue for the student being evaluated, provide evidence that the student was provided with appropriate accommodations and interventions to address them. If, in spite of appropriate accommodations and interventions, the student's learning difficulties persist, these factors are ruled out as the primary cause.

Prong 1: Does the student exhibit an exceptionality?

Indicators

For meeting this prong of eligibility, the team must consider information and have data to support at least 1 indicator from each of the three following categories:

1. Observational Data

Observation in the student’s learning environment (which must include the general education classroom) provides evidence of the student’s performance and behavior in the area of difficulty. [Note: This is required for all evaluations of students suspected of having a learning disability]

2. The child does not achieve adequately for the child's age or meet state-approved grade-level standards.

- Measures of achievement in basic reading skills, reading fluency skills, and/or reading comprehension is significantly below age or state-approved grade level standards
- Measures of achievement in math calculation or math problem-solving are significantly below age or state-approved grade level standards
- Measures of achievement in written expression are significantly below age or state-approved grade level standards
- Measures of oral expression and/or listening comprehension indicate student performance is significantly below age or state-approved grade level standards
- Interviews indicate student demonstrates a high level of understanding during oral discussions but lacks mastery of basic skills
- Student performance is significantly below age or state-approved grade level standards on one or more benchmark assessments, curricular objectives, or state assessments

3. Evidence of provision of learning experiences and instruction appropriate for the child's age and grade level.

- Records of intervention indicate appropriate instructional decisions based on student data
- Progress monitoring data displayed on charts or graphs show slow rate of growth in at least one achievement domain despite provision of intense, explicit instructional interventions
- Progress monitoring data displayed on charts or graphs show student is a non-responder to increasingly intense instructional interventions.

Other Supporting Data

Record reviews shows DSM-IV diagnosis (by clinical psychologist or other appropriately trained and qualified diagnostician) of learning disability or previous identification as having a learning disability or other diagnosis of perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, or developmental aphasia.

Prong 2: Does the child need special education?

Indicators

- Student progress monitoring data indicates intense or sustained resources needed in order for student to demonstrate adequate progress
- Despite modifications of instruction, curriculum, and environment, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more areas.
- Despite modifications of instruction, curriculum, and environment, the student progress monitoring data shows variability across academic performance areas
- Student progress monitoring data shows that the student’s behavior of concern is resistant to targeted supplemental and intensive interventions
- Student Progress monitoring data of increasingly customized and individually tailored instruction and intervention indicate that the student needs specially designed instruction to access the general curriculum.
- Despite implementation of intensive interventions, which include purposeful instructional design and delivery, prioritized content, protected time and grouping, and performance monitoring, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more areas.

Multiple Disabilities

KAR 91-40-1

(pp)) "Multiple disabilities" means coexisting impairments, the combination of which causes such severe educational needs that those needs cannot be accommodated in special education programs solely for one of the impairments. The term shall not include deaf-blindness.

Exclusionary Criteria:	
A child must NOT be determined to be a child with an exceptionality if: the determinant factor is:	
Exclusionary Factor	How to Evaluate
<ul style="list-style-type: none"> Lack of appropriate instruction in reading, including the essential components of reading instruction (defined in section 1208(3) of the ESEA(NCLB)); 	Evidence shows that the student's previous reading instruction and curriculum addressed phonemic awareness, phonics, vocabulary development, reading fluency (including oral reading skills), and reading comprehension strategies. This evidence may come from (a) an evaluation of the school's basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Lack of appropriate instruction in math; or 	Evidence shows that the student's previous math instruction and curriculum addressed math calculation, problem solving, and conceptual understanding. This evidence may come from (a) an evaluation of the school's basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Limited English proficiency; 	If the student being evaluated is an English Language Learner, provide evidence that the student was provided with appropriate accommodations and interventions to address it. Consider things such as: proficiency in English and in the student's native language, amount of time in the country, level of education in the student's native country, etc. Also consider whether the student's rate of learning is different from those of similar language background and educational experience. If, in spite of appropriate accommodations and interventions, the student's learning difficulties persist, this factor is ruled out.
<ul style="list-style-type: none"> and the child does not otherwise meet the eligibility criteria as a child with an exceptionality 	Evidence shows that the student's learning difficulties are due to factors other than those associated with the criteria for disabilities as defined in IDEA. For example, frequent moves, incarceration, substance abuse, etc.
The term shall not apply if a child's educational performance is adversely affected primarily because the child is a child with deaf-blindness	The team should rule out the presence of deaf-blindness. If the data the team collects matches the indicators for deaf-blindness, the student should be identified as a child with deaf-blindness rather than a child with multiple disabilities.

Prong 1: Does the student exhibit an exceptionality?

Indicators

- Record review and/or Interviews indicate the presence of co-existing impairments
- Measures of educational performance indicate the following:
 - the coexisting impairments are such that the student cannot be provided services appropriately in classrooms solely for students with one of the impairments; or
 - the coexisting impairments are such that the student cannot be provided services appropriately in general education classrooms without specific assistance, modifications, adaptations, or supports necessary to accommodate the multiple impairments

Other supporting information:

Records contain medical information which provides evidence of multiple disabilities

Prong 2: Does the child need special education?

Indicators

For meeting this prong of eligibility, the team must consider information and have data to support at least 1 indicator from both of the following categories:

1. Despite modifications in instruction, curriculum and environment, student's rate of learning is significantly less than peers
 - Despite modifications in instruction, curriculum, and environment, student's educational performance in various age appropriate environments is significantly delayed from peers
 - Despite modifications in instruction, curriculum, and environment, student's adaptive behavior skills in various age appropriate environments is significantly delayed from peers
 - Despite modifications of instruction, curriculum, and environment, the student does not make sufficient progress to meet age or state-approved grade-level standards across curricular areas
 - Student progress monitoring data of increasingly customized and individually tailored instruction and intervention indicate that the student needs specially designed instruction to access the general curriculum.
 - Despite implementation of intensive interventions, which include purposeful instructional design and delivery, prioritized content, protected time and grouping, and performance monitoring, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more areas.
2. Student progress monitoring data indicate intense or sustained resources are needed to support interventions (e.g., specific assistance, modifications, adaptations, or other supports) necessary to accommodate student needs resulting from coexisting impairments
 - Record review, interviews, and observations show that coexisting impairments adversely affect the child's participation and progress in the general curriculum or participation in age-appropriate activities
 - Information from multiple sources of data indicate that the student exhibits a combination of impairments which causes such severe educational needs that they cannot be accommodated in special education programs solely for one of the impairments

Orthopedic Impairment

KAR 91-40-1

(tt) "Orthopedic impairment" means a severe orthopedic impairment that adversely affects a child's educational performance and includes impairments caused by any of the following: (1) congenital anomaly, such as clubfoot or absence of a limb; 2) disease, such as poliomyelitis or bone tuberculosis; and 3) other causes, such as cerebral palsy, amputation, and fractures or burns that cause contractures.

Exclusionary Criteria:	
A child must NOT be determined to be a child with an exceptionality if the determinant factor is:	
Exclusionary Factor	How to Evaluate
<ul style="list-style-type: none"> Lack of appropriate instruction in reading, including the essential components of reading instruction (defined in section 1208(3) of the ESEA(NCLB)); 	Evidence shows that the student's previous reading instruction and curriculum addressed phonemic awareness, phonics, vocabulary development, reading fluency (including oral reading skills), and reading comprehension strategies. This evidence may come from (a) an evaluation of the school's basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Lack of appropriate instruction in math; or 	Evidence shows that the student's previous math instruction and curriculum addressed math calculation, problem solving, and conceptual understanding. This evidence may come from (a) an evaluation of the school's basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Limited English proficiency; 	If the student being evaluated is an English Language Learner, provide evidence that the student was provided with appropriate accommodations and interventions to address it. Consider things such as: proficiency in English and in the student's native language, amount of time in the country, level of education in the student's native country, etc. Also consider whether the student's rate of learning is different from those of similar language background and educational experience. If, in spite of appropriate accommodations and interventions, the student's learning difficulties persist, this factor is ruled out.
<ul style="list-style-type: none"> and the child does not otherwise meet the eligibility criteria as a child with an exceptionality 	Evidence shows that the student's learning difficulties are due to factors other than those associated with the criteria for disabilities as defined in IDEA. For example, frequent moves, incarceration, substance abuse, etc.

Prong 1: Does the student exhibit an exceptionality?

Indicators

For meeting this prong of eligibility, the team must consider information and have data to support at least 1 indicator from each of the following categories:

1. Records contain medical information which provides evidence of orthopedic impairment

- Records contain information substantiating an impairment caused by: congenital anomaly, such as clubfoot or absence of a limb; disease, such as poliomyelitis or bone tuberculosis; and, other causes such as cerebral palsy, amputation, and fractures or burns that cause contractures
- Records and/or interviews indicate a history of orthopedic impairment

2. Records, interviews, observations, and/or tests show that the student's educational performance is much below that of peers

- Records, interviews, observations, and/or tests show that the student's orthopedic condition adversely impacts his/her educational performance
- Measures of motor skills indicate the student's skills are much below that of peers
- Progress monitoring data displayed on charts or graphs shows slow rate of growth in educational performance despite provision of intense, explicit instructional interventions
- Progress monitoring data displayed on charts or graphs shows student is a non-responder to increasingly intense instructional interventions.

Prong 2: Does the child need special education?

Indicators

- Despite modifications in instruction, curriculum, and environment, student's rate of learning is significantly less than peers
- Despite modifications in instruction, curriculum, and environment, student's educational performance in various age appropriate environments is significantly delayed from peers
- Despite modifications in instruction, curriculum, and environment, student's adaptive behavior skills in various age appropriate environments is significantly delayed from peers
- Despite modifications of instruction, curriculum, and environment, the student does not make sufficient progress to meet age or state-approved grade-level standards across curricular areas
- Student progress monitoring data show that the student's behavior of concern is resistant to targeted supplemental and intensive interventions
- Student progress monitoring data of increasingly customized and individually tailored instruction and intervention indicate that the student needs specially designed instruction to access the general curriculum.
- Despite implementation of intensive interventions, which include purposeful instructional design and delivery, prioritized content, protected time and grouping, and performance monitoring, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more areas.

Other Health Impairment

KAR 91-40-1

(uu) "Other health impairment" means having limited strength, vitality, or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment and that meets the following criteria: (1) is due to chronic or acute health problems, including asthma, attention deficit disorder or attention deficit hyperactivity disorder, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia, and Tourette syndrome; and 2) adversely affects a child's educational performance.

Exclusionary Criteria:	
A child <i>must NOT</i> be determined to be a child with an <i>exceptionality</i> if the determinant factor is	
Exclusionary Factor	How to Evaluate
<ul style="list-style-type: none"> Lack of appropriate instruction in reading, including the essential components of reading instruction (defined in section 1208(3) of the ESEA(NCLB)); 	Evidence shows that the student's previous reading instruction and curriculum addressed phonemic awareness, phonics, vocabulary development, reading fluency (including oral reading skills), and reading comprehension strategies. This evidence may come from (a) an evaluation of the school's basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Lack of appropriate instruction in math; or 	Evidence shows that the student's previous math instruction and curriculum addressed math calculation, problem solving, and conceptual understanding. This evidence may come from (a) an evaluation of the school's basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Limited English proficiency; 	If the student being evaluated is an English Language Learner, provide evidence that the student was provided with appropriate accommodations and interventions to address it. Consider things such as: proficiency in English and in the student's native language, amount of time in the country, level of education in the student's native country, etc. Also consider whether the student's rate of learning is different from those of similar language background and educational experience. If, in spite of appropriate accommodations and interventions, the student's learning difficulties persist, this factor is ruled out.
<ul style="list-style-type: none"> and the child does not otherwise meet the eligibility criteria as a child with an exceptionality 	Evidence shows that the student's learning difficulties are due to factors other than those associated with the criteria for disabilities as defined in IDEA. For example, frequent moves, incarceration, substance abuse, etc.

Prong 1: Does the student exhibit an exceptionality?

Indicators

For meeting this prong of eligibility, the team must consider information and have data to support at least 1 indicator from each of the following categories:

1. Records contain medical information which document chronic or acute health problems including: asthma; attention deficit disorder or attention deficit hyperactivity disorder; diabetes; epilepsy; heart condition; hemophilia; lead poisoning; leukemia; nephritis; rheumatic fever; sickle cell anemia; or Tourette syndrome.
 - Record review, interviews, observations, and/or tests show the student’s strength, vitality, or alertness is/are significantly different from peers
 - Record review, interviews, observations, and/or tests show the student demonstrates limited alertness with respect to the educational environment
2. Record review, interviews, observations, and/or tests show that the student’s condition adversely impacts his/her educational performance
 - Record review, interviews, observations, and/or tests show that the student’s educational performance is much below that of peers
 - Progress monitoring data displayed on charts or graphs shows slow rate of growth in educational performance despite provision of intense, explicit instructional interventions
 - Progress monitoring data displayed on charts or graphs shows student is a non-responder to increasingly intense instructional interventions.

Prong 2: Does the child need special education?

Indicators

- Despite modifications in instruction, curriculum, and environment, student’s rate of learning is significantly less than peers
- Despite modifications in instruction, curriculum, and environment, student’s educational performance in various age appropriate environments is significantly delayed from peers
- Providing modifications in instruction, curriculum, and environment does not alleviate adverse effects on student’s educational performance due to differences in strength, vitality, or alertness
- Despite modifications of instruction, curriculum, and environment, the student does not make sufficient progress to meet age or state-approved grade-level standards across curricular areas
- Student progress monitoring data show that the student’s behavior of concern is resistant to targeted supplemental and intensive interventions
- Student progress monitoring data of increasingly customized and individually tailored instruction and intervention indicate that the student needs specially designed instruction to access the general curriculum.
- Despite implementation of intensive interventions, which include purposeful instructional design and delivery, prioritized content, protected time and grouping, and performance monitoring, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more areas.

Sensory Impairments

KAR 91-40-1

(dd) "Hearing impairment" means an impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance but that does not constitute deafness as defined in this regulation.

(p) "Deafness" means a hearing impairment that is so severe that it impairs a child's ability to process linguistic information through hearing, with or without amplification, and adversely affects the child's educational performance.

(uuu) "Visual impairment" means an impairment in vision that, even with corrections, adversely affects a child's educational performance. The term includes both partial sight and blindness.

(g) "Blindness" means a visual impairment that requires dependence on tactile and auditory media for learning

(o) "Deaf-blindness" means the combination of hearing and visual impairments that causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for the hearing impaired or the visually impaired.

Hearing impairment, Deafness, Visual Impairment, Blindness

THE FOLLOWING EXCLUSIONARY CRITERIA APPLY TO HEARING IMPAIRMENT, DEAFNESS, VISUAL IMPAIRMENT, BLINDNESS, AND DEAF-BLINDNESS

Exclusionary Criteria:	
A child <i>must NOT</i> be determined to be a child with an <i>exceptionality</i> if the determinant factor is:	
Exclusionary Factor	How to Evaluate
<ul style="list-style-type: none"> Lack of appropriate instruction in reading, including the essential components of reading instruction (defined in section 1208(3) of the ESEA(NCLB)); 	Evidence shows that the student's previous reading instruction and curriculum addressed phonemic awareness, phonics, vocabulary development, reading fluency (including oral reading skills), and reading comprehension strategies. This evidence may come from (a) an evaluation of the school's basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Lack of appropriate instruction in math; or 	Evidence shows that the student's previous math instruction and curriculum addressed math calculation, problem solving, and conceptual understanding. This evidence may come from (a) an evaluation of the school's basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Limited English proficiency; 	If the student being evaluated is an English Language Learner, provide evidence that the student was provided with appropriate accommodations and interventions to address it. Consider things such as: proficiency in English and in the student's native language, amount of time in the country, level of education in the student's native country, etc. Also consider whether the student's rate of learning is different from those of similar language background and educational experience. If, in spite of appropriate accommodations and interventions, the student's learning difficulties persist, this factor is ruled out.
<ul style="list-style-type: none"> and the child does not otherwise meet the eligibility criteria as a child with an exceptionality 	Evidence shows that the student's learning difficulties are due to factors other than those associated with the criteria for disabilities as defined in IDEA. For example, frequent moves, incarceration, substance abuse, etc.

THE FOLLOWING INDICATORS APPLY TO HEARING IMPAIRMENT, DEAFNESS, VISUAL IMPAIRMENT, AND BLINDNESS

Prong 1: Does the student exhibit an exceptionality?

Indicators

For meeting this prong of eligibility, the team must consider information and have data to support at least 1 indicator from each of the following categories:

1. Records contain information which provides evidence of hearing impairment, deafness, or visual impairment
 - Measures of hearing indicate the following:
 - a 30dB (or greater) sensorineural or mixed hearing loss across speech frequencies in the better ear with amplification
 - a 30dB (or greater) conductive hearing loss across speech frequencies in the better ear with amplification (will require annual audiological evaluations to maintain deaf-blind certification)
 - a previous chronic condition exists which interferes with the auditory learning mode
 - congenital malformations of the auricle (e.g., absence of a pina or ear canal opening)
 - Measures of vision indicate the following:
 - Measured or estimated corrected visual acuity of 20/20 or less in the better eye
 - A previous chronic condition exists which interferes with the visual learning mode
 - Ocular motor (e.g., Muscle imbalance)
 - Anophthalmus (absence of actual eyeball)
 - Visual field of 40 degrees or less in the better eye
 - Hearing or vision losses are such that the student cannot be provided services appropriately in the general education classroom without specific assistance, modifications, adaptations, or supports necessary to accommodate the sensory loss
 - Testing indicates student is “functionally deaf”, “cortically deaf”, or has “central processing loss”- the hearing structures are present and working; however, the student does not attend, respond, localize, or process hearing to receive information from the environment or accurately interpret information about the environment
 - Testing indicates student is “functionally blind” or “cortically visually impaired”- the visual structures are present and working; however, the student does not track, localize, or process vision to receive information from the environment or accurately interpret information about the environment
2. Record review, interviews, observations, and/or tests show that the student’s impairment adversely impact his/her educational performance
 - Information from multiple sources of data indicates that the student exhibits a hearing impairment, whether permanent or fluctuating, that adversely affects a child’s educational performance
 - Information from multiple sources of data indicates that the student exhibits a hearing impairment that is so severe that it impairs a child’s ability to process linguistic information through hearing, with or without amplification, and adversely affects the child’s educational performance
 - Information from multiple sources of data indicates that the student exhibits a visual impairment that, even with correction, adversely affects a child’s educational performance
 - Record review, interviews, observations, and/or tests show that the student’s educational performance is much below that of peers
 - Progress monitoring data displayed on charts or graphs shows slow rate of growth in educational performance despite provision of intense, explicit instructional interventions
 - Progress monitoring data displayed on charts or graphs shows student is a non-responder to increasingly intense instructional interventions.

Other supporting information:

Records contain medical information which provides evidence of hearing impairment, deafness, or visual impairment

Prong 2: Does the child need special education?

Indicators

- Despite modifications in instruction, curriculum and environment, student's rate of learning is significantly less than peers
- Despite modifications in instruction, curriculum and environment, student's educational performance in various age appropriate environments is significantly delayed from peers
- Student progress monitoring data indicates intense or sustained resources (e.g. specific assistance, modifications, adaptations, or supports necessary to accommodate the sensory loss) are needed in order for student to demonstrate adequate progress
- Despite modifications of instruction, curriculum, and environment, the student does not make sufficient progress to meet age or state-approved grade-level standards across curricular areas
- Student progress monitoring data shows that the student's behavior of concern is resistant to targeted supplemental and intensive interventions
- Student progress monitoring data results of increasingly customized and individually tailored instruction and intervention indicate that the student needs specially designed instruction to access the general curriculum.
- Despite implementation of intensive interventions, which include purposeful instructional design and delivery, prioritized content, protected time and grouping, and performance monitoring, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more areas.

Deaf-blindness

THE FOLLOWING INDICATORS APPLY TO DEAF-BLINDNESS

Prong 1: Does the student exhibit an exceptionality?

Indicators

For meeting this prong of eligibility, the team must consider information and have data to support at least 1 indicator from each of the following 3 categories: □

1. Measures of hearing indicate the following:

- a 30db (or greater) sensorineural or mixed hearing loss across speech frequencies in the better ear with amplification
- a 30db (or greater) conductive hearing loss across speech frequencies in the better ear with amplification (will require annual audiological evaluations to maintain deaf-blind certification)
- a previous chronic condition exists which interferes with the auditory learning mode
- Congenital malformations of the auricle (e.g., Absence of a pina or ear canal opening)
- “Functionally deaf”, “cortically deaf”, or “central processing loss”- the hearing structures are present and working; however, the student does not attend, respond, localize, or process hearing to receive information from the environment or accurately interpret information about the environment

2. Measures of vision indicate the following:

- Measured or estimated corrected visual acuity of 20/20 or less in the better eye
- A previous chronic condition exists which interferes with the visual learning mode
- Ocular motor (e.g., Muscle imbalance)
- Anophthalmus (absence of actual eyeball)
- Visual field of 40 degrees or less in the better eye
- “Functionally blind” or “cortically visually impaired”- the visual structures are present and working; however, the student does not track, localize, or process vision to receive information from the environment or accurately interpret information about the environment

3. Measures of educational performance indicate the following:

- The combined vision and hearing losses are such that the student cannot be provided services appropriately in classrooms solely for students with visual or hearing impairments; or
- The combined vision and hearing losses are such that the student cannot be provided services appropriately in general education classrooms without specific assistance, modifications, adaptations, or supports necessary to accommodate both sensory losses

Other Supporting Information:

Records contain medication information which provides evidence of deaf-blindness

Prong 2: Does the child need special education?

Indicators

For meeting this prong of eligibility, the team must consider information and have data to support at least 1 indicator from each of the following categories

1. Despite modifications in instruction, curriculum, and environment, student’s educational performance in various age appropriate environments is significantly delayed from peers

- Student progress monitoring data indicates intense or sustained resources (e.g., specific assistance, modifications, adaptations, or supports necessary to accommodate the sensory loss) are needed in order for student to demonstrate adequate progress
- Despite modifications of instruction, curriculum, and environment, the student does not make sufficient progress to meet age or state-approved grade-level standards across curricular areas
- Student progress monitoring data show that the student’s behavior of concern is resistant to targeted supplemental and intensive interventions
- Student progress monitoring data of increasingly customized and individually tailored instruction and intervention indicate that the student needs specially designed instruction to access the general curriculum.
- Despite implementation of intensive interventions, which include purposeful instructional design and delivery, prioritized content, protected time and grouping, and performance monitoring, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more areas.
- Student progress monitoring data indicate intense or sustained resources (e.g., specific assistance, modifications, adaptations, or supports necessary to accommodate both sensory losses) are needed in order for student to demonstrate adequate progress

2. Information from multiple sources of data indicate that the student exhibits a combination of hearing and visual impairments which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for the hearing or visually impaired

Speech or Language Impairment

KAR 91-40-1

(III) "Speech or language impairment" means a communication disorder, including stuttering, impaired articulation, a language impairment, or a voice impairment, that adversely affects a child's educational performance.

Exclusionary Criteria:

A child *must NOT be determined to be a child with an exceptionality* if the determinant factor is:

Exclusionary Factor	How to Evaluate
<ul style="list-style-type: none"> Lack of appropriate instruction in reading, including the essential components of reading instruction (defined in section 1208(3) of the ESEA(NCLB)); 	Evidence shows that the student's previous reading instruction and curriculum addressed phonemic awareness, phonics, vocabulary development, reading fluency (including oral reading skills), and reading comprehension strategies. This evidence may come from (a) an evaluation of the school's basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Lack of appropriate instruction in math; or 	Evidence shows that the student's previous math instruction and curriculum addressed math calculation, problem solving, and conceptual understanding. This evidence may come from (a) an evaluation of the school's basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Limited English proficiency; 	If the student being evaluated is an English Language Learner, provide evidence that the student was provided with appropriate accommodations and interventions to address it. Consider things such as: proficiency in English and in the student's native language, amount of time in the country, level of education in the student's native country, etc. Also consider whether the student's rate of learning is different from those of similar language background and educational experience. If, in spite of appropriate accommodations and interventions, the student's learning difficulties persist, this factor is ruled out.
<ul style="list-style-type: none"> and the child does not otherwise meet the eligibility criteria as a child with an exceptionality 	Evidence shows that the student's learning difficulties are due to factors other than those associated with the criteria for disabilities as defined in IDEA. For example, frequent moves, incarceration, substance abuse, etc.

Prong 1: Does the student exhibit an exceptionality?

Indicators

For meeting this prong of eligibility, the team must consider information and have data to support at least 1 indicator from each of the following categories:

1. Record review, interview, observations, and/or assessments indicate student's voice, fluency, speech sounds, or language skills are not commensurate with age appropriate expectations
 - Record review, interview, observations, and/or assessments indicate student's communication skill level is much below that of peers
 - Record review, interview, observations, and/or assessments indicate student's communication skills have impacted development in other areas, e.g., social-emotional, cognitive
 - Student performance significantly lower than peers on measures of language which are related to curricular performance
2. Information from multiple sources of data indicates that the student exhibits stuttering, impaired articulation, a language impairment, or a voice impairment that adversely affects educational performance
 - Record review, interview, observations, and/or assessments indicate student's voice, fluency, speech sounds, or language skills have an adverse effect on the student's educational performance
 - Records and interviews indicate a history of academic difficulty relative to communication skills
 - Progress monitoring data displayed on charts or graphs shows slow rate of growth in educational performance despite provision of intense, explicit instructional interventions
 - Progress monitoring data displayed on charts or graphs shows student is a non-responder to increasingly intense instructional interventions.

Prong 2: Does the child need special education?

Indicators

- Despite modifications in instruction, curriculum, and environment, student's rate of learning is significantly less than peers
- Despite modifications in instruction, curriculum, and environment, student's educational performance in various age appropriate environments is significantly delayed from peers
- Despite modifications of instruction, curriculum, and environment, the student does not make sufficient progress to meet age or state-approved grade-level standards across curricular areas
- Student progress monitoring data show that the student's behavior of concern is resistant to targeted supplemental and intensive interventions
- Student progress monitoring data of increasingly customized and individually tailored instruction and intervention indicate that the student needs specially designed instruction to access the general curriculum.
- Despite implementation of intensive interventions, which include purposeful instructional design and delivery, prioritized content, protected time and grouping, and performance monitoring, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more areas.

Traumatic Brain Injury

KAR 91-40-1

(sss) "Traumatic brain injury" 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 educational performance. The term shall apply to open or closed head injuries resulting in impairments in one or more areas, including the following: (1) cognition; (2) language; (3) memory; (4) attention; (5) reasoning; (6) abstract thinking; (7) judgment; (8) problem-solving; (9) sensory, perceptual and motor abilities; (10) psychosocial behavior; (11) physical functions; (12) information processing; and (13) speech. The term shall not include brain injuries that are congenital or degenerative or that are induced by birth trauma.

Exclusionary Criteria:	
A child <i>must NOT be determined to be a child with an exceptionality</i> if: the determinant factor is:	
Exclusionary Factor	How to Evaluate
<ul style="list-style-type: none"> Lack of appropriate instruction in reading, including the essential components of reading instruction (defined in section 1208(3) of the ESEA(NCLB)); 	Evidence shows that the student’s previous reading instruction and curriculum addressed phonemic awareness, phonics, vocabulary development, reading fluency (including oral reading skills), and reading comprehension strategies. This evidence may come from (a) an evaluation of the school’s basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Lack of appropriate instruction in math; or 	Evidence shows that the student’s previous math instruction and curriculum addressed math calculation, problem solving, and conceptual understanding. This evidence may come from (a) an evaluation of the school’s basal curriculum and supplemental materials, and (b) that the student actually received instruction provided by highly qualified teachers using appropriate basal curriculum and supplemental materials.
<ul style="list-style-type: none"> Limited English proficiency; 	If the student being evaluated is an English Language Learner, provide evidence that the student was provided with appropriate accommodations and interventions to address it. Consider things such as: proficiency in English and in the student’s native language, amount of time in the country, level of education in the student’s native country, etc. Also consider whether the student’s rate of learning is different from those of similar language background and educational experience. If, in spite of appropriate accommodations and interventions, the student’s learning difficulties persist, this factor is ruled out.
<ul style="list-style-type: none"> and the child does not otherwise meet the eligibility criteria as a child with an exceptionality 	Evidence shows that the student’s learning difficulties are due to factors other than those associated with the criteria for disabilities as defined in IDEA. For example, frequent moves, incarceration, substance abuse, etc.
The term shall not include brain injuries that are congenital or degenerative or that are induced by birth trauma.	The term TBI is not used for a person who is born with a brain injury. It also is not used for brain injuries that happen during birth. Evidence is provided that the brain injury was sustained after some period of normal development.
The term shall not include brain injuries that are the result of brain tumors, brain infections, cerebral vascular accident (strokes), or poisonings.	The term TBI is not used for a person who sustained a brain injury as a result of a brain tumor, brain infection, cerebral vascular accident (stroke), or poisoning. Evidence is provided that the brain injury sustained was not caused by these conditions. (Note: Students with these conditions may meet eligibility requirements under the category of “Other Health Impaired”.)

Prong 1: Does the student exhibit an exceptionality?

Indicators

For meeting this prong of eligibility, the team must consider information and have data to support at least 1 indicator from each of the following categories:

1. Record review, interview, observation, and/or tests indicates that the student has an acquired injury to the brain (applies to both open or closed head injuries, including near drowning) caused by an external physical force that has resulted in total or partial functional disability or psychosocial impairment, or both, that adversely affects educational performance

- Record review, interviews, observations, and/or tests in one or more areas (cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual, and motor abilities; psychosocial behavior; physical functions; information processing; and speech) indicate student's skill level is much below that of peers
- Record review and/or interview indicates the brain injury is not congenital or degenerative or induced by birth trauma
- Record review and/or interview indicate the brain injury is not the result of brain tumors, brain infections, cerebral vascular accident (strokes), or poisonings.

2. Record review, interview, observation, and/or tests indicate the injury adversely affects the student's educational performance

- Progress monitoring data displayed on charts or graphs shows slow rate of growth in educational performance despite provision of intense, explicit instructional interventions
- Progress monitoring data displayed on charts or graphs shows student is a non-responder to increasingly intense instructional interventions.

Other Supporting Information:

Records contain medical information which provides evidence of traumatic brain injury

Prong 2: Does the child need special education?

Indicators

- Despite modifications in instruction, curriculum, and environment, student's rate of learning is significantly less than peers
- Despite modifications in instruction, curriculum, and environment, student's educational performance in various age appropriate environments is significantly delayed from peers
- Student progress monitoring data indicates intense or sustained resources are needed to support interventions (e.g. specific assistance, modifications, adaptations, or other supports) necessary to accommodate the needs resulting from the injury
- Despite modifications of instruction, curriculum, and environment, the student does not make sufficient progress to meet age or state-approved grade-level standards across curricular areas
- Student progress monitoring data show that student's behavior of concern is resistant to targeted supplemental and intensive interventions
- Despite implementation of intensive interventions, which include purposeful instructional design and delivery, prioritized content, protected time and grouping, and performance monitoring, the student does not make sufficient progress to meet age or state-approved grade-level standards in one or more areas.

Reporting Requirements

When the initial evaluation and eligibility determination are completed, the evaluation team must prepare a written evaluation/eligibility report. The report must include not only the evaluation results, but also document the eligibility determination.

The evaluation report serves as the documentation of the child's eligibility. The evaluation report and the documentation of eligibility must be provided, at no cost, to the parent (KAR 91-40-10(b); 34 CFR 300.306(a)(2)). There are specific requirements for reporting the eligibility determination (KAR 91-40-10(a), (e); 34 CFR 300.311). The report must include a statement of:

- a) whether the child is a child with an exceptionality;
- b) the basis for making the determination;
- c) the relevant behavior noted during the observation of the child (and for LD the relationship of that behavior to the child's academic functioning); and
- d) the educationally relevant medical findings, if any;
- e) and for a child determined to have a learning disability, the report must also include documentation of the following:

(i) the child does not achieve adequately for the child's age or to meet State-approved grade-level standards when provided with learning experiences and instruction appropriate for the child's age or State-approved grade-level standards,

(ii) AND

- the child does not make sufficient progress to meet age or State-approved grade-level standards when using a process based on the child's response to scientific, research-based intervention;
- OR
- 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.

(iii) The determinate factor for why the child does not achieve adequately for the child's age or does not make sufficient progress to meet age or State-approved grade level standards, or exhibits a pattern of strengths and weaknesses, is not primarily the result of:

- a visual, hearing or motor disability;
- intellectual disability;
- emotional disturbance;
- cultural factors;
- environmental or economic disadvantage; or
- limited English proficiency.

(iv) If the child has participated in a process that assesses the child's response to scientific, research-based intervention, the report must also document

- the instructional strategies used; and
- the student-centered data collected.

Documentation that the child's parents were notified about the process, including the following information:

- 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;
- strategies for increasing the child's rate of learning; and
- the parent's right to request an evaluation (K.A.R. 91-40-10(e), (f); K.A.R. 91-40-9(a)(2)(3); 34 C.F.R. 300.309(a)(3); 34 C.F.R. 300.311(a)).

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