

Louisville Municipal School District *Department of Special Education*



Procedures Handbook **2018-2019**

The purpose of this publication is to provide guidance to the employees of Louisville Municipal School District Department of Special Education. It does not create or ensure rights or obligations that are enforceable. The LMSD Department of Special Education reserves the right to make changes to this publication at any given time.

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1 Acknowledgment

The Louisville Municipal School District (LMSD) Department of Special Education relied on the Mississippi Department of Education (MDE) Special Education Policies and IDEA regulations at 34 C.F.R. sections 300.199(a) and (b) for guidance in the formulation of these policies.

2 Purpose

The purposes of these policies are:

- To make certain that all children with disabilities in enrolled in the Louisville Municipal School District (LMSD) are provided with a free appropriate public education (FAPE) that emphasizes special education and related services designed to meet their unique needs and prepare them for further education, employment, and independent living;
- To ensure that the rights of children with disabilities and their parents are protected;
- To assess and ensure the effectiveness of efforts to educate children with disabilities.
- To provide support and guidance to the management and staff of the Special Education Department of Louisville Municipal School District.

The LMSD Special Education Department reserves the right to change or suspend any or all parts of this manual.

3 CHILD FIND

3.1 Ongoing Child Find

The District will identify, locate and evaluate children, age's birth through twenty-one (21) in accordance with the District's evaluation procedures, regardless of the severity of their disability who are in need of special education and related services. These requirements apply to -

- Children who are enrolled and attend the school district;
- Homeless children;
- Children who are wards of the state;
- Highly mobile children with disabilities (such as migrant and homeless children);
- Children who are parentally-placed in a private, including religious, elementary or secondary school located within the boundaries of the District; and
- Children who are suspected of having a disability and may be in need of special education services.
- The District's Child Find contact person will coordinate referrals received due to the publicity campaign.
- Upon receipt of such a referral, the designated Child Find contact person will

notify the appropriate school/District personnel of the referral.

- Appropriate school/District personnel will follow up on referrals utilizing the District's procedures.

3.2 District of Residence

The "school district of residence" or the term "residing in the district's jurisdiction" will be defined as a child who -

- Resides within the boundaries of Louisville Municipal School District, if the child resides with a resident of LMSD and the resident is considered the parent,
- Resides as a result of placement therein by court order or by a State agency due to the child being a ward of the State, or
- Is legally transferred as prescribed in State law and State Board of Education policies and procedures.

3.3 Parentally-Placed Private School Children with Disabilities

Through a consultative process, the District will locate, identify and evaluate students with disabilities who are enrolled by their parents in private schools, including religious elementary and secondary schools located within the boundaries of the Louisville Municipal School District (refer to Glossary for the definition of *Private Schools, Elementary Schools and Secondary Schools*). Annually, designated District personnel will consult with appropriate representatives of the private school regarding the referral process for any child suspected of having a disability and who may be in need of special education and related services under IDEA.

Since elementary and secondary home schools are considered private schools in the state of Mississippi, then the requirements for parentally-placed private school children are applicable. For students who attend an elementary or secondary home school, parents will refer their child for evaluation services to the district in which the home school is located. After the evaluation is completed and if the child qualifies for services, then the services will be provided by the home school in the district of jurisdiction/residence. If the home school is located in the district of residence, then that district will be responsible for Child Find activities. If the home school is located in a district's jurisdiction other than the child's district of residence, then the district where the elementary or secondary home school is located will be responsible for the implementation of evaluation procedures and or any eligible services. This applies to any student, birth- twenty-one (21) years of age that is found eligible for special education services.

When conducting Child Find activities, LMSD will undertake activities that are similar to the activities undertaken for students enrolled in the District (i.e., evaluation standards and eligibility criteria). The process will be completed in a time period comparable to that of students enrolled in LMSD.

LMSD will ensure equitable participation of parentally-placed private school children in the Child Find process and maintain an accurate count of those children referred and evaluated for possible special education services, as well as the number of students who were determined to have a disability and the number of children with a disability served by the District.

The cost of carrying out the Child Find requirements, including individual evaluations, will not be considered in determining LMSD's proportionate amount of funding to be expended for services for parentally-placed private school children.

Children, who reside in another State but attend a private elementary or secondary school within the boundaries of LMSD, will be included in the District's process of Child Find.

3.4 Early Intervention Programs

The Louisville Municipal School District will participate in the Child Find and Service Coordination efforts under Part C of IDEA by accepting referrals of children who may have a disability and who may be in need of special education and related services as required under Part B of IDEA.

Children who are served in an early intervention program under Part C of IDEA and who are believed to be potentially eligible for Part B services will be referred to the local school District of residence by a Service Coordinator employed by the Mississippi Department of Health. Such a referral will be made at least ninety (90) days prior to the child's third birthday. Children suspected of having a disability and who may be in need of special education and related services will be evaluated under the requirements contained in the section of this manual to determine eligibility for services under Part B of IDEA.

LMSD will complete the Comprehensive Assessment and, upon receipt of consent from the parent or guardian, develop as well as implement the IEP for all eligible children by each child's third birthday in order to ensure continuity of services from the early intervention program to services provided by LMSD.

3.5 Head Start

The Louisville Municipal School District will implement local referral procedures with Head Start personnel when the agency serves children who live within LMSD's jurisdiction. The District may develop a local interagency agreement with the Head Start personnel to designate the referral procedures and responsibilities for LMSD and Head Start personnel.

Personnel from Head Start are responsible for providing relevant information to

District personnel when children who may have a disability and who may be in need of special education and related services are referred to the district of residence for identification and evaluation. Although collaboration is essential with Head Start personnel, the district of residence is ultimately responsible for the implementation of the Child Find requirements under IDEA.

3.6 Three - Tier Intervention Process

Based on the requirements of the State Board of Education, a three-tiered District-wide intervention process will be in effect, which is designed to meet the needs of every student. LMSD utilizes the intervention process model, including the components of Response to Intervention.

Referrals for a Comprehensive Assessment to determine whether a child has a disability and may be in need of special education and related services should be preceded by Tiers I - III interventions unless it is determined that an intervention(s) would not be appropriate as set forth in the limited circumstances found below. It should be noted that State Policies do not require the Tier II and III processes be conducted as a prerequisite to conducting an evaluation when a child is a child suspected of having a disability. When a child is suspected of having a disability, the Local Multidisciplinary Evaluation Team (MET) will proceed with a comprehensive evaluation to determine the educational needs of the child. However, the MET must assure that lack of appropriate instruction in reading and math is not the determinant factor for any eligibility category. Therefore, if interventions have not been implemented prior to the referral to the MET, the team may request the Teacher Support Team (TST) to initiate an intervention while the Comprehensive Assessment is being conducted.

The Three-Tier process will not be bypassed without significant data to support the need for a special education evaluation. Information obtained through this process can assist the MET in making appropriate determinations. If the District chooses to use a process based on the child's response to scientific, research-based intervention for determining whether a child has a specific learning disability, that process may be carried out as a pre-referral process or as part of the evaluation process.

Interventions will not be required as a part of the pre-referral process when:

- It is obvious that interventions would not meet the child's apparent educational needs, as in the case of a child with a severe disability or a child with only language/speech problems;
- A child transfers from out-of-state (refer to Section VI for out-of-state procedures) or transfers into the District from another district within the State and only has an IEP;
- An out-of-school child, ages three (3) through five (5) is referred for an evaluation; or

- A child's documented physical condition is such that immediate Child Study procedures are warranted. This provision will only apply to students who have been diagnosed by a qualified medical professional that the student has a significant Intellectual Disability; Multiple Disabilities; severe Autism; Blindness; Deafness; Deaf-Blind; Traumatic Brain Injury; or constitutes a physical danger to himself or others.

3.7 Parent Request for Evaluation

Parents may express concern in writing that their child is in need of special education and related services or request that their child be evaluated for special education services due to a disability. When such a request (written or orally) is made, the school-level staff member who received the request must inform the principal immediately. The principal or designee should inform the LMSD Director of Special Education within two (2) school days of when the request was made.

The District Review Team (MET) will meet within fourteen (14) calendar days of the request to discuss the parent's concerns. For written requests received during the summer when school is not in session, the MET will meet within two weeks of receipt of the request. Based on the data gathered and reviewed, the MET will make a decision as to whether the student is in need of an evaluation to determine if the student has a disability or if the Three-Tier process may be appropriate to address any academic/behavioral concerns.

It should be noted that the District considers it inappropriate for a school-level staff member to refer a parent to the special education office with the intent of bypassing the intervention process without supportive data.

3.8 Child Find News Release

Louisville Municipal School District, along with all other school districts in Mississippi in accordance with the Individuals with Disabilities Education Improvement Act (IDEIA), participates in an ongoing statewide effort to identify and evaluate children from birth through twenty-one years of age who may have disabilities and who are not currently receiving special education services. Early identification of children in need of special education services is important to each child.

Parents, service agencies, preschool teachers, physicians or any other concerned individual may refer a child to the Office of Special Services in their local school district. Once a referral is made, it is the responsibility of that office to ensure that the Mississippi Referral-to-Placement process is implemented in order to determine a child's eligibility for services.

Before a child is evaluated, written prior notice is given to the parents and procedural safeguards as well as parents' rights are explained. After parental permission for testing is obtained, a nondiscriminatory evaluation is conducted. Children are evaluated in all areas related to the suspected disability.

If a child is determined eligible for special education services, parents are notified and an Individualized Education Plan (IEP) is developed for that child. Parents must sign consent for placement prior to the child's receiving any special services. Services provided by each school district include speech/language therapy, services for autism, brain-injuries, learning disabilities, intellectual disability, visual and hearing impairments, developmental delays, physical disabilities (including ADHD), emotional disabilities, and multiple disabilities.

Information that could identify an individual child will be maintained by this agency and will be provided to other agencies only in accord with the Family Educational Rights and Privacy Act (FERPA) and IDEIA Part B. Parents are guaranteed the right to inspect any such information about your child and to challenge its accuracy. Access to this information is forbidden to any unauthorized person without informed consent.

It is the goal of the Louisville Municipal School District to provide a free appropriate public education to all children with disabilities through the age of twenty-one.

The Child Find Contact Person for Louisville Municipal School District is Ms. Mavis Crawford, Director of Special Education for LMSD.

4 Consents

4.1 Procedural Safeguards

When Congress enacted Public Law 94-142 as the Education for All Handicapped Children's Act in 1975, they included a system of procedural safeguards designed to protect the rights of children with disabilities and their parents. During subsequent reauthorizations of the law, now known as the Individuals with Disabilities Education Act, Congress maintained and added to these safeguards. Procedural safeguards include the right to participate in all meetings, to examine all educational records, and to obtain an independent educational evaluation of the child. Parents have the right to written notice when the school proposes to change or refuses to change the identification, evaluation or placement of a child. Further, the law includes several ways to resolve disputes including mediation, a "Resolution Session" and due process hearings. Procedural Safeguards include legally binding written mediation agreements and confidentiality.

Procedural Safeguards are offered to parents upon:

- (a) initial referral for evaluation or parent request for evaluation;
- (b) the child's initial IEP meeting;
- (c) Registration of a complaint under IDEA to the State Department of Education
- (d) Upon request by a parent; and

If there is no circumstance giving rise to the purpose of parents receiving a copy of Procedural Safeguards under (a), (b), (c), or (d) then the parents will be provided with a copy of the Procedural Safeguard at least once on an annual basis.

4.2 Parental Consent for Initial Evaluations

LMSD Department of Special Education must obtain informed parental consent prior to conducting an evaluation for determination of Special Education eligibility. LMSD will make multiple reasonable efforts to obtain parental consent, and these efforts will be documented. This consent is not to be construed as consent for enrollment in nor receipt of special education services.

For initial evaluations only, if the child is a ward of the state and does not reside with the parent, LMSD is not mandated to obtain parental consent for evaluation *if*:

- Despite documented reasonable efforts made, LMSD cannot locate the parent;
- The parental rights over the child have been terminated in accordance with State law; or
- The rights of the parent to make educational decisions for the child have been subrogated by a judge in accordance with State law and consent for an initial evaluation has been given by an individual appointed by the judge to represent the child.

If a parent of a child enrolled in or seeking to be enrolled in public school does not give consent for initial evaluation or fails to respond to a request for consent, LMSD may, but is not required to, pursue the initial evaluation under the procedural safeguards in Subpart E of the *IDEA 2004* regulations, if appropriate, except to the extent inconsistent with State law regarding such parental consent. If LMSD decides against evaluating a child when informed parental consent is denied, no violation of obligation has occurred under Child Find (*IDEA 2004* §300.111) nor Evaluation and Reevaluation mandates (§§300.301 – 300.111).

4.3 Parental Consent for Services

LMSD Department of Special Education is required to provide FAPE for all students with disabilities and must obtain informed parental consent prior to the initial provision of special education and any related services to a child. LMSD will make multiple reasonable efforts to obtain parental consent, and these efforts will be documented.

If the parent of a child who is eligible for special education services fails to respond to a request for or refuses consent for initial provision of special education and related services:

- LMSD Department of Special Education will not use the procedures in Subpart E of the *IDEA 2004* regulations to obtain agreement or a ruling for services to be provided to the child;
- LMSD will not be in violation of the mandate to provide FAPE available to the student for those services for which the parent has not provided consent; and
- LMSD is not required to hold an IEP committee meeting nor to develop an IEP under §§300.320 and 300.324 for the child.

If at any time after consent for initial placement is given, the parent of a child receiving special education services through LMSD Department of Special Education provides

written consent revoking the continued provision of special education and related services, LMSD:

- Will not continue to provide special education and related services to the child and will provide written notice (according to §300.503) before stopping the delivery of those services.
- Will not use the procedures in Subpart E of *IDEA 2004* to obtain agreement or a ruling that those services be provided to the child;
- Will not be considered in violation of mandated provision of FAPE to the child because of the failure to provide the child with continued special education and related services; and
- Will not hold an IEP committee meeting nor develop an IEP for further provision of special education and related services.

4.4 Parental Consent for Reevaluation

LMSD Department of Special Education must obtain informed parental consent prior to conducting a reevaluation for a student receiving special education services. LMSD will make multiple reasonable efforts to obtain parental consent, and these efforts will be documented.

If the parent of a child who is eligible for special education services fails to respond to a request for or refuses consent for reevaluation of a student receiving special education services:

- LMSD Department of Special Education may, but is not required to, use the procedures in Subpart E of the *IDEA 2004* regulations to obtain agreement or a ruling for a reevaluation to take place; and
- LMSD will not be in violation of the mandate to provide FAPE available to the student for the reevaluation for which the parent has not provided consent.

LMSD is not required to obtain informed parental consent if:

- Reasonable efforts to obtain such consent have been made and documented; and
- If the child's parent has failed to respond.

4.5 Other Consent Requirements

Parental consent is not required prior to:

- Reviewing existing data as part of an evaluation or reevaluation; or
- Administration of a test or other evaluation that is administered to all children unless, before administration of that test or evaluation, consent is required from parents of all children.

LMSD Department of Special Education may require parental consent for other services or activities to make certain that a parent's refusal of consent does not cause a failure in the district's provision of FAPE.

LMSD Department of Special Education will not use a parent's refusal to consent to one service or activity to deny the parent or child any other service, benefit, or activity of LMSD.

If a parent of a student who is enrolled in home school services or a private school at the choosing and expense of the parent does not provide consent for the initial evaluation or reevaluation, or if the parent fails to respond to a request to provide consent, the LMSD Department of Special Education will not use the consent override procedures and is not required to consider the child eligible for special education and related services.

To meet the reasonable efforts requirements mentioned in this section, LMSD Department of Special Education will document all attempts to obtain parental consents.

5 Evaluation

5.1 Evaluation Teams

Multidisciplinary Evaluation Team (MET)

Any student's case to be considered for a comprehensive evaluation for determination of eligibility for special education services is first presented to the Louisville Municipal Schools' Multidisciplinary Evaluation Team (MET). This team is composed of the Director of Special Education, a School Psychometrist and/or School Psychologist, a Speech/Language Pathologist, an educator certified in Special Education, and an educator certified in General Education. Additional experts or school personnel may participate in the review if necessary.

The purpose of the MET is to ensure that all necessary data has been obtained and is readily available for use during a comprehensive evaluation. Once it is determined that all data is present and ready for use, the case is then submitted to the Local Survey Committee (LSC) for the determination of whether to proceed with a comprehensive evaluation to determine eligibility for special education services through LMSD.

Local Survey Committee (LSC)

Members on the LSC may include, but are not limited to:

1. Administrators, such as superintendents, assistant superintendents, principals and supervisors of special education, and
2. Special education or general education teachers, language/speech pathologists, school social workers, guidance counselors, school psychologists or psychometrists, school health nurses, representatives of other agencies and examiners.

LSC members, including a chairperson, are appointed by the district superintendent. The LSC chairperson must have knowledge of the special education process and have a degree in education or an educationally related field. The chairperson and one other member should be permanent members of the committee. One of the committee members must have knowledge of the general education curriculum requirements for

the grade level or subjects of the child under review. Additional members may serve on the committee when a child with whom they work is being considered for referral or services. The child's teacher(s) should be a member of the team in order to provide any necessary explanations, clarifications or additional information regarding the data contained on the Teacher Narrative or Developmental History. The parent(s) will be given the opportunity to meet with the committee when the educational needs of their child are being determined by the committee.

Multidisciplinary Evaluation Team (MET)

The MET includes the parent and a group of qualified professionals that will vary from evaluation to evaluation, depending on the evaluations, assessments, observations, and procedures necessary for determining the eligibility and educational needs of the student. The MET is responsible for reviewing all information obtained through the comprehensive evaluation for eligibility for special education services to determine whether a student meets the eligibility criteria for special education services according to the guidelines set forth by the Mississippi Department of Education (MDE) and IDEA.

The MET must come to a consensus decision regarding the eligibility of the student. If **any** MET member, including a parent, disagrees with the consensus of the team, he must include a separate statement indicating his conclusions.

5.2 Comprehensive Evaluation Process

The comprehensive evaluation process is an inclusive assessment of the student's abilities, strengths, and weaknesses in the school, home, and community settings. Upon referral to the LMSD Department of Special Education, and once parental consent for evaluation is obtained, an individualized multidisciplinary evaluation is conducted for the purpose of determining that student's eligibility to receive special education services according to MDE and IDEA criteria.

A student cannot be ruled eligible for special education services if the determining factor is limited English proficiency, economic or cultural disadvantages, or a lack of appropriate instruction in reading or math. When considering the eligibility of a student with considerable weaknesses in reading, language arts, or math, the MET should review and take into account any non-special education instructional interventions provided to the student through the general education program.

The MET is mandated to meet and determine eligibility no later than 60 calendar days after receipt of written parental consent for testing. If the student is determined to qualify for special education and related services, the IEP committee must meet and have services in place within 30 days pursuant to the eligibility determination.

5.3 Evaluations and Reevaluations

Initial Evaluations

In order to provide special education and related services under IDEA to a student through LMSD, an individual comprehensive evaluation must be conducted.

A parent/guardian or public agency can request an initial evaluation for special education to determine if a child meets the IDEA criteria as a student with a disability. When a parent or agency makes a request for evaluation, LMSD MET must meet within 10 school days to consider the request and review any available relevant information. If the MET suspects that the child may possess a disability, Written Prior Notice (WPN) for Initial Evaluation must be provided to the parent within 5 school days of the meeting. If the MET determines that a comprehensive evaluation is not necessary at this time, notification of the decision will be presented to the parent within 5 school days of the meeting.

Initial evaluations must be conducted within 60 days of receiving parental consent for evaluation. Assessment will include evaluation materials selected so as not to be discriminatory in a racial or cultural basis. Based upon the gathered assessments and data, the MET will determine if the child possesses a disability under IDEA criteria, and will determine the educational needs of that child.

LMSD will not impose any limits on the number of requests for initial evaluation nor the number of responses per year. Nor will there be any restrictions upon the time of the year that requests are made.

Exceptions to the mandated evaluation timeframe may occur if:

- The parent/guardian of the child fails to bring the child for evaluation multiple times; or
- The child enrolls in another school district after the evaluation process has begun but prior to a determination being made as to whether the child possesses a disability.
- *These exceptions are only applicable if the school district can demonstrate efforts to ensure a timely completion of the evaluation process and if the parent and receiving school district agree to a time when the evaluation in progress may be completed.*

Screening for instructional purposes is not an evaluation.

The screening of a student by a teacher or specialist to determine appropriate instructional strategies for curriculum implementation shall not be considered to be an evaluation for eligibility for special education and related services.

Reevaluations

LMSD will reevaluate a child with a disability if the educational or related services needs of that student, including improved academic achievement and functional performance of that child, justify a reevaluation or if the child's parent or teacher requests a reevaluation. A reevaluation may not occur more than once per year unless it is an IEP committee decision. However, a reevaluation must occur at least once per every three years unless the IEP committee deems it unnecessary at which time a continued eligibility ruling must be documented on the IEP with necessary documentation of the IEP meeting, date, and reevaluation decision.

5.4 Evaluation Procedures

Prior to any evaluation, Louisville Municipal School District personnel designated by the Special Education Director will provide notice to the parents of a child with a disability that describes any evaluation procedures the agency proposes to conduct.

In conducting the evaluation, LMSD will

- 1) Use a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information about the child, including information provided by the parent, that may assist in determining
 - Whether the child is a child with a disability under IDEA and MDE criteria; and
 - The content of the child's IEP, including information related to enabling the child to be involved in and progress in the general education curriculum (or for a preschool child, to participate in appropriate activities);
- 2) Not use any single measure or assessment as the sole criterion for determining whether a child is a child with a disability and for determining an appropriate educational program for the child; and
- 3) Use technically sound instruments that may assess the relative contribution of cognitive and behavioral factors, in addition to physical or developmental factors.

LMSD will ensure that

- 1) Assessments and other evaluation materials used to assess a child under this part
 - Are selected and administered so as not to be discriminatory on a racial or cultural basis;
 - Are provided and administered in the child's native language or other mode of communication and in the form most likely to yield accurate information on what the child knows and can do academically, developmentally, and functionally, unless it is clearly not feasible to so provide or administer;
 - Are used for the purposes for which the assessments or measures are valid and reliable;
 - Are administered by trained and knowledgeable personnel; and
 - Are administered in accordance with any instructions provided by the producer of the assessments.
- 2) Assessments and other evaluation materials include those tailored to assess specific areas of educational need and not merely those that are designed to provide a single general intelligence quotient.
- 3) Assessments are selected and administered so as best to ensure that if an assessment is administered to a child with impaired sensory, manual, or speaking skills, the assessment results accurately reflect the child's aptitude or achievement level or whatever other factors the test purports to measure, rather than reflecting the child's impaired sensory, manual, or speaking skills (unless those skills are the factors that the test purports to measure).

- 4) The child is assessed in all areas related to the suspected disability, including, if appropriate, health, vision, hearing, social, and emotional status, general intelligence, academic performance, communicative status, and motor abilities.
- 5) Assessments of children with disabilities who transfer from one district to another district in the same school year are coordinated with those children's prior and subsequent schools, as necessary and as expeditiously as possible, to ensure prompt completion of full evaluations.
- 6) In evaluating each child with a disability, the evaluation is sufficiently comprehensive to identify all of the child's special education and related services needs, whether or not commonly linked to the disability category in which the child has been classified.
- 7) Assessment tools and strategies that provide relevant information that directly assists persons in determining the educational needs of the child are provided.

5.5 Additional requirements for evaluations and reevaluations

Review of existing evaluation data

As part of an initial evaluation (if appropriate) and as part of any reevaluation, the IEP committee or Multidisciplinary Evaluation Team (MET) and other qualified professionals, as appropriate, must

- 1) Review existing evaluation data on the child, including
 - Evaluations and information provided by the parents of the child;
 - Current classroom-based, district, and State assessments, and classroom-based observations; and
 - Observations by teachers and related services providers; and
- 2) On the basis of that review, and input from the child's parents, identify what additional data, if any, are needed to determine
 - Whether the child is a child with a disability, and the educational needs of the child; or
 - In case of a reevaluation of a child, whether the child continues to have such a disability, and the educational needs of the child;
 - The present levels of academic achievement and related developmental needs of the child;
 - Whether the child needs special education and related services, or
 - In the case of the reevaluation of a child, whether the child continues to need special education and related services; and
 - Whether any additions or modification to the special education and related services are needed to enable the child to meet the measurable annual goals set out in the IEP of the child and to participate, as appropriate, in the general education curriculum.
- 3) The IEP committee may conduct its review without a meeting.
- 4) The school must administer such assessments and other evaluation measures as may be needed to produce the data identified above.

If additional data are not needed

- 1) If the IEP committee and other qualified professionals, as appropriate, determine that no additional data are needed to determine whether the child continues to be a child with a disability, and to determine the child's educational needs, the school must notify the child's parents of
 - That determination and the reasons for the determination; and
 - The right of the parents to request an assessment to determine whether the child continues to be a child with a disability, and to determine the child's educational needs.
- 2) The school is not required to conduct the assessment described above unless requested to do so by the child's parents.

5.6 Evaluations before change in eligibility

- 1) LMSD must evaluate a child with a disability before determining that the child is no longer a child with a disability.
- 2) The evaluation described *above* is not required before the termination of a child's eligibility under *Part B of IDEA* due to graduation from secondary school with a *standard high school* diploma, or due to exceeding the age eligibility for FAPE under State law.
- 3) For a child whose eligibility terminates under circumstances described *above*, a school must provide the child a summary of the child's academic achievement and functional performance, which shall include recommendations on how to assist the child in meeting postsecondary goals.

5.7 Determination of eligibility

Upon completion of the administration of assessments and other evaluation measures

- 1) A group of qualified professionals and the parent of the child determines whether the child is a child with a disability, in accordance with IDEA and MDE criteria and the educational needs of the child; and
- 2) The school provides a copy of the evaluation report and the documentation of determination of eligibility at no cost to the parent.

Special rule for eligibility determination

A child must not be determined to be a child with a disability under *Part B of IDEA* if:

- 1) The determinant factor for that determination is
 - Lack of appropriate instruction in reading, including the essential components of reading instruction (as defined in §1208[3] of the ESEA);
 - Lack of appropriate instruction in math; or
 - Limited English proficiency; and

- 2) If the child does not otherwise meet the eligibility criteria under IDEA and MDE criteria.

Procedures for determining eligibility and educational need

In interpreting evaluation data for the purposes of determining if a child is a child with a disability and the educational needs of the child, LMSD will:

- Draw upon information from a variety of sources, including aptitude and achievement tests, parent input, and teacher recommendations, as well as information about the child's physical condition, social or cultural background, and adaptive behavior; and
- Ensure that information obtained from all these sources is documented and carefully considered.

If a determination is made that a child has a disability and needs special education and related services, an IEP (*Individualized Education Program*) must be developed for the child within thirty (30) calendar days from the date of the eligibility determination.

5.8 Additional Procedures for Identifying Children with Specific Learning Disabilities

Louisville Municipal School District may:

- 1) Use a severe discrepancy between intellectual ability and achievement for determining whether a child has a specific learning disability;
- 2) Use a process based on the child's response to scientific, research-based intervention; and/or
- 3) Use other alternative research-based procedures for determining whether a child has a specific learning disability.

The District must use the State criteria described in this section and the eligibility criteria set forth in the Special Education Eligibility Criteria Guidelines in determining whether a child has a specific learning disability.

Additional group members

The determination of whether a child suspected of having a specific learning disability is a child with a disability, must be made by the child's parents and a team of qualified professionals, which must include

- 1) The child's *general* education teacher; or
 - If the child does not have a *general* education teacher, a *general education* classroom teacher qualified to teach a child of his or her age; or
 - For a child of less than school age, an individual *licensed* to teach a child of his or her age; and
- 2) A special education teacher; and
- 3) At least one person qualified to conduct individual diagnostic examinations of children, such as a school psychologist, *psychometrist*, or speech-language pathologist.

Determining the existence of a specific learning disabilities (SLD)

The Multidisciplinary Evaluation Team (group described above including qualified professionals and the parent of a child) may determine that a child has a specific learning disability, if

- 1) The child does not achieve adequately for the child's age or fails to meet State-approved grade-level standards in one or more of the following areas, when provided with learning experiences and instruction appropriate for the child's age or State-approved grade-level standards
 - Oral expression
 - Listening comprehension
 - Written expression
 - Basic reading skill
 - Reading fluency skills
 - Reading comprehension
 - Mathematics calculation
 - Mathematics problem solving
- 2) The child does not make sufficient progress to meet age or State-approved grade-level standards in one or more of the areas identified above when using a process based on the child's response to scientific, research-based intervention; or
- 3) The child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, State-approved grade-level standards, or intellectual development, that is determined by the group to be relevant to the identification of a specific learning disability, using appropriate assessments; and
- 4) The group determines that its findings above are not primarily the result of
 - A visual, hearing, or motor disability;
 - Mental retardation;
 - Emotional disturbance;
 - Cultural factors;
 - Environmental or economic disadvantage; or
 - Limited English proficiency.

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

- 1) Data that demonstrate that prior to, or as a part of, the referral process, the child was provided appropriate instruction in general education settings, delivered by qualified personnel; and
- 2) Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, which was provided to the child's parents.

LMSD will promptly request parental consent to evaluate the child to determine if the child needs special education and related services, and will adhere to the timeframes,

unless extended by mutual written agreement of the child's parents and a group of qualified professionals

- 1) If, prior to a referral, a child has not made adequate progress after an appropriate period of time when provided appropriate instruction; and
- 2) Whenever a child is referred for an evaluation.

Observation

- 1) LMSD will ensure that the child is observed in the child's learning environment (including the *general education* classroom setting) to document the child's academic performance and behavior in the areas of difficulty.
- 2) The multidisciplinary evaluation team, in determining whether a child has a specific learning disability, must decide to
 - Use information from an observation in routine classroom instruction and monitoring of the child's performance that was done before the child was referred for an evaluation; or
 - Have at least one member of the multidisciplinary evaluation team conduct an observation of the child's academic performance in the general education classroom after the child has been referred for an evaluation and parental consent is obtained.
- 3) In the case of a child of less than school age or out of school, a group member must observe the child in an environment appropriate for a child of that age.

Specific documentation for the eligibility determination

For a child suspected of having a specific learning disability, the documentation of the determination of eligibility, must contain a statement of

- 1) Whether the child has a specific learning disability;
- 2) The basis for making the determination, including an assurance that the determination has been made in accordance with *Procedures for Determining Eligibility and Educational Needs*;
- 3) The relevant behavior, if any, noted during the observation of the child and the relationship of that behavior to the child's academic functioning;
- 4) The educationally relevant medical findings, if any;
- 5) Whether
 - The child does not achieve adequately for the child's age or to meet State-approved grade-level standards; and
 - The child does not make sufficient progress to meet age or State-approved grade-level standards; 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;
- 6) The determination of the group concerning the effects of a visual, hearing, or motor disability, mental retardation; emotional disturbance; environmental or economic disadvantage; or limited English proficiency on the child's achievement level; and
- 7) If the child has participated in a process that assesses the child's response to scientific, research-based intervention
 - The instructional strategies used and the student-centered data collected; and

- The documentation that the child's parents were notified about
 - *MDE'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 parents' right to request an evaluation.
- 8) Each group member must certify in writing whether the report reflects the member's conclusions. If it does not reflect the member's conclusions, the group member must submit a separate statement presenting the member's conclusions.

5.9 Eligibility Determinations Guidelines

It is necessary to adhere to federal regulations and corresponding State Policies when evaluating children suspected of having disabilities and when making eligibility determination for special education. School districts are allowed to make special education eligibility determinations for children. University based programs, local and regional juvenile detention centers, and private programs are required to work with the School district responsible for Child Find to determine special education eligibility for children.

General information

The information outlined in this section applies to all eligibility determinations.

- 1) A comprehensive evaluation to determine special education eligibility will:
 - Assure that lack of appropriate instruction in math or reading, including essential components of reading instruction as defined in the Elementary and Secondary Education Act (ESEA), is not the determinant factor;
 - Assure that limited English proficiency or social or cultural differences aren't the determinant factors;
 - Indicate the child needs special education and related services; and
 - Identify all educational needs to be addressed in development of the IEP, regardless of whether those needs are typically linked to the disability category; and
 - Consistently support the presence of a disability.

If there are inconsistencies in data, but the team believes the preponderance of data supports the presence of a disability and need for special education and related services, the perceived inconsistencies will be documented and explained.

- 2) A variety of assessment tools and strategies will be used to gather information. Procedures may include but are not limited to:
 - Teacher narrative and/or developmental history;
 - Data concerning the student's functioning in the home, the classroom, and/or an early childhood setting documented through interviews, observation, assessments, or other means;

- Cumulative record information statewide assessment results;
- Information on the child's physical condition, fine and gross motor skills, hearing, vision, and/or a facial examination, if necessary;
- Data concerning the child's social, behavioral, emotional, and adaptive functioning;
- Information about pre-academic and/or academic performance;
- How the student communicates;
- Indicators of cognitive abilities;
- Evaluations and other information provided by the parent;
- Evidence that the child has received appropriate instruction in reading and math for kindergarten and preschool child, information regarding development; and preschool experiences;
- Impact of social and cultural background and limited English proficiency on educational performance experiences; and
- For reevaluations, information from the IEP.

It is the responsibility of the multidisciplinary evaluation team to determine appropriate ways to measure each area and which instruments are necessary to obtain information sufficient to determine the presence of a disability, eligibility for special education, and programming needs. Teams will carefully consider what tests are used to determine the existence of a disability.

- 3) All data required for determining the presence of a disability, eligibility for special education, and development of the IEP will be current. More information may be requested. Historical and current data will be considered. Upon parent signature for evaluation/reevaluation, the following information, if required by MDE or deemed necessary by the MET, may be not older than:
 - One (1) year:
 - i. Intelligence measures
 - ii. Hearing screening and follow-up evaluations
 - iii. Vision screening and follow-up evaluations
 - iv. Physical examinations
 - Six (6) months:
 - i. Teacher Narrative
 - ii. Achievement measures
 - iii. Social, behavioral, adaptive, and emotional measures
 - iv. Language/Speech assessments
 - v. Motor Assessments
 - vi. Curriculum-based assessments.
 - Three (3) months:
 - i. Updated developmental History
 - ii. Developmental Instruments
- 4) Members of the multidisciplinary team can submit individual reports or compile all evaluation information in a single comprehensive report. An eligibility determination report must be completed to document the eligibility decision in the eligibility meeting. A copy of the evaluation report and eligibility determination report will be provided to the parents.

- 5) The eligibility determination report will indicate the team decision regarding eligibility category for which the criteria are met or a statement that the student does not meet the eligibility criteria. The team members will each certify in writing if the eligibility report reflects the member's decision. If not, the team member must submit a separate statement presenting the member's conclusions.
- 6) The evaluation report(s) will include:
 - Date(s) of assessment(s);
 - Name, title, qualifications of examiner(s), informants, and/or observers;
 - Testing conditions;
 - Behaviors noted during testing and observations;
 - Results of assessments;
 - Interpretations of assessments;
 - Explanations of any deviations from standardized testing procedures; and
 - Justifications for use of instruments that are not age appropriate.
- 7) Typically, a diagnosis from a psychologist, psychiatrist, nurse practitioner, physician or other health care professional using criteria from the Diagnostic and Statistical Manual of Mental Disorders (DSM) and/or International Statistical Classification of Diseases and Related Health Problems (ICD-9 Codes) is not required to determine a special education eligibility, nor is such diagnosis alone sufficient to determine eligibility for special education. When a diagnosis, evaluation, or statement by qualified professionals is required for a particular special education disability category, the requirement is listed as part of the eligibility criteria. When diagnostic or prescriptive information from a health care professional or psychologist is available to the public agency, the team will consider the information when making an eligibility determination for special education.
- 8) Language needs are inherent in the following categories:
 - Autism;
 - Hearing Impairment;
 - Traumatic Brain Injury;
 - Specific Learning Disability (Oral Expression and Listening Comprehension), or
 - Developmentally Delayed, Communication is one of the areas of delay. *A secondary ruling is not required. The IEP committee can decide if Speech/Language therapy is an appropriate related service.*
- 9) Adverse educational impact applies to academic, social, behavioral, and vocational performance.

6 Disability Categories

6.1 Autism (AU)

- DEFINITION

Autism (also commonly referred to as Autism Spectrum Disorder) means a developmental disability significantly affecting verbal and nonverbal communication

and social interaction, generally evident before age three (3), that adversely affects a child's educational performance. Additional 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. It is not necessary for the student to exhibit all of these additional characteristics to meet the criteria.

Included in the Autism category are the Pervasive Developmental Disorders, including Autistic Disorder, Asperger Disorder, Pervasive Developmental Disorder-Not Otherwise Specified, Rett's Disorder, and Childhood Disintegrative Disorder. Autism does not apply if a child's educational performance is adversely affected primarily because the child has an emotional disability. A child who manifests the characteristics of Autism after age three (3) could be identified as having Autism if the definition is satisfied and data consistently support an eligibility ruling of Autism.

- **EVALUATION REQUIREMENTS**

Personnel must gather, document and carefully consider:

- A. Results of instruments, observations and/or other data which address:
 - 1. Receptive and expressive language skills, including language semantics and pragmatics; prosody (linguistics including intonation, rhythm and focus in speech); and the need for assisted communication; and
 - 2. Social interactions; and
 - 3. Responses to sensory experiences; and
 - 4. Engagement in repetitive activities and stereotyped movements; and
 - 5. Resistance to environmental change or change in daily routines.
- B. A developmental history and/or other documentation which serves to determine the age of onset of autistic characteristics.
- C. A statement by a qualified professional supporting the multidisciplinary evaluation team's conclusion that the student meets the eligibility criteria for Autism as defined by federal regulations and State policy. A qualified professional is defined as one of the following:
 - 1. School psychologist currently licensed by MDE,
 - 2. Psychometrist currently licensed by MDE,
 - 3. Board-licensed psychologist,
 - 4. Nurse Practitioner, or
 - 5. Physician.

6.2 Deaf Blind (DB)

- **DEFINITION**

Deaf-Blindness means concomitant hearing and visual impairments that adversely affect a child's educational performance, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for children with deafness or children with blindness.

- **EVALUATION REQUIREMENTS**

When the evaluation team is considering eligibility under the Deaf-Blind category:

- A. A statement that the child cannot properly function in a special education program designed solely for children with hearing impairments or visual impairments must be included in the comprehensive evaluation and/or eligibility determination report, and
- B. Procedures for assessing both Hearing Impairment and Visual Impairment must be followed

6.3 Developmentally Delayed (DD)

- **DEFINITION**

A child in the age range of birth through nine (9) who is experiencing significant delays in two or more of the five developmental areas (cognitive, fine/gross motor, communication, social/emotional/behavioral, and adaptive behavior) meets the eligibility criteria for Developmentally Delayed if, by reason of the developmental delays, they need special education and related services due to a disability that adversely affects a child's pre-academic or educational performance. The criteria for DD could also be met if the child has a diagnosed disorder of known etiology which affects development in a negative fashion and has a high probability of resulting in a developmental delay. For diagnosed disorders, a diagnosis from a physician and research that supports the predicted developmental delays are required.

- **EVALUATION REQUIREMENTS**

Developmentally Delayed is for non-categorical identification when the child has a disability and needs special education and related services, but does not clearly fit one of eleven (11) eligibility categories (not including language/speech). If the eligibility criteria are clearly met for one or more of the eleven (11) (AU, DB, EmD, HI, ID, MD, OI, OHI, SLD, TBI, VI) eligibility categories (not including language/speech), DD should not be used. Mississippi has determined that DD applies to the age range birth through nine (9) years. A new eligibility determination must occur before the child's tenth (10th) birthday. The DD eligibility ruling cannot be maintained beyond the child's tenth (10th) birthday.

The following requirements apply to the DD category:

- A. Standard scores must be used when the instrument(s) yields standard scores.
- B. A significant delay is defined as 1.5 standard deviations below the mean of the test or subtest when the instrument yields standard scores.
- C. If the instrument yields only age equivalents, then significant delay is defined as a developmental age 25% below the child's chronological age or corrected age on the test or subtest.
- D. Follow guidelines in the test manual for calculating corrected age for children who were born pre-term. If the manual does not address corrected age calculation, the following guidelines should be considered:
 1. Calculate corrected age for children born prior to thirty-eight (38) weeks gestation, and
 2. Calculate corrected age up to twenty-four (24) months chronological age.

A variety of instruments should be considered and selected to yield information about the full range of the child's functioning in all five (5) developmental areas. When informants are used to gather information, they must have sufficient knowledge of the

child's functioning in the areas for which the informant provides input. A description of all methods and informants used must be included in the report and must meet the administration guidelines and standardized procedures for each instrument.

6.4 Emotional Disability (EmD)

- **DEFINITION**

Emotional Disability (EmD) exists when a student exhibits one (1) or more of the following characteristics over a long period of time and/or to a marked degree, adversely affecting educational performance:

- A. An inability to learn that cannot be explained by intellectual, sensory or health factors;
- B. An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
- C. Inappropriate types of behavior or feelings under normal circumstances;
- D. A general pervasive mood of unhappiness or depression; and/or
- E. A tendency to develop physical symptoms or fears associated with personal or school problems.

Emotional Disability includes schizophrenia. The term does not refer to children who are socially maladjusted, unless it is determined that they have an Emotional Disability.

- **EVALUATION REQUIREMENTS**

When the evaluation team is considering eligibility under the Emotional Disability category, the multidisciplinary team evaluation report and/or eligibility determination report must include:

- A. Narrative descriptions of:
 1. the student's behaviors, and
 2. situations in which the behaviors occur and situations in which the behavior does not occur, and
 3. antecedents leading to the behaviors, and
 4. consequences immediately following the behaviors;
- B. Functional assessments of the student's behavior, if conducted;
- C. Attempts to address the behaviors and the results, including:
 1. Behavior Intervention Plans, if developed and implemented during the pre-referral process; and
 2. office discipline referrals; and
 3. disciplinary actions;
- D. Documentation to support the behaviors have been exhibited for a long period of time and/or to a marked degree;
- E. A description of how the behaviors adversely affect educational performance;
- F. A statement as to whether the behaviors are typical for the student's age, setting, circumstances, and peer group, and if not, how the behaviors are different;
- G. The association between documented patterns of behavior and results of emotional and behavioral assessments;
- H. A statement by a qualified professional supporting the team's conclusion that the student meets the eligibility criteria for EmD. Prior to eligibility determination, the qualified professional making the statement must:
 1. observe the child,

2. review all information gathered during the comprehensive evaluation,
3. be qualified to interpret the test instruments administered according to the user qualifications for each measure, and
4. review the eligibility criteria for EmD.

Qualified personnel for this purpose include at least one of the following:

1. School psychologist currently licensed by MDE,
 2. Board-licensed psychologist, or
 3. Psychiatrist.
- I. If the team concludes the child does not meet the criteria for EmD because all behavior patterns appear to be the result of social maladjustment, the eligibility determination report must indicate this conclusion. Documentation must be included to support the team's conclusion that the behaviors are indicative of social maladjustment.

6.5 Hearing Impairment (HI)

- DEFINITION

Hearing Impairment (HI) means an impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance. Deafness means a hearing impairment that is so severe that the child is impaired in processing linguistic information through hearing with or without amplification that adversely affects a child's educational performance.

- EVALUATION REQUIREMENTS

When the evaluation team is considering eligibility under the Hearing Impairment category, which includes Deafness, the multidisciplinary team evaluation report and/or eligibility determination report must include:

- A. An audiometric evaluation explaining each of the following items:
 1. type of loss;
 2. age of onset, if known;
 3. severity of loss;
 4. speech reception or speech awareness thresholds, if obtainable;
 5. speech discrimination scores, if applicable;
 6. recommendations regarding amplification; and
 7. other recommended interventions, if any, including the need for assistive technology.
- B. A description of the follow-up examination and results, including:
 1. how the conditions noted during the examination might interfere with educational testing and performance; and
 2. recommendations for accommodations, modifications, and educational programming.
- C. Acoustic Immittance measures;
- D. An audiogram and/or measures of auditory evoked potential, such as Auditory Brainstem Response (ABR), Auditory Steady State Response (ASSR), and Otoacoustic Emissions (OAE) that would define the hearing loss;
- E. How the hearing loss impacts educational performance; and
- F. Communication abilities and needs, including the need for assisted communication.

NOTE: The audiological examination must be conducted by one of the following:

- I. an audiologist who holds MDE licensure in audiology,
- II. an audiologist who holds ASHA--CCC certification,
- III. a physician with expertise in conducting audiological evaluations using appropriate audiological equipment,
- IV. a qualified audiologist who holds certification from the American Academy of Audiology (AAA), or
- V. a qualified audiologist who is appropriately licensed through the designated licensure authority for the State of Mississippi.

6.6 Intellectual Disability (ID)

- **DEFINITION**

Intellectual Disability (ID) means significantly subaverage general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period that adversely affects a child's educational performance. Significantly subaverage general intellectual functioning is defined as two (2) standard deviations or more below the mean, including a standard score of 70, on a measure of cognitive ability.

A child with an eligibility ruling of Intellectual Disability exhibits learning problems which vary in degree from mild to severe. Delays in cognitive abilities, adaptive behavior, and developmental milestones must have been evidenced during a child's developmental period and, upon entering school, such delays must have adversely affected a child's educational performance

- **EVALUATION REQUIREMENTS**

When the evaluation team is considering eligibility under the Intellectual Disability category, the multidisciplinary team evaluation report and/or eligibility determination report must include results of:

- A. An individual standardized achievement test;
- B. An individual standardized measure of cognitive abilities;
- C. A norm-referenced measure of adaptive behavior.

6.7 Language or Speech Impairment (LS)

- **DEFINITION**

Language or Speech Impairment (LS) means a communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment, that adversely affects a child's educational performance. Speech disorders include impairments in articulation, fluency and/or voice. Language disorders include developmental or acquired impairments in the ability to receive, send, process, and comprehend concepts or verbal, nonverbal, and graphic symbol systems. A communication disorder may range in severity from mild to profound and may appear in combination with other communication disorders. A communication disorder may be the primary disability or secondary to other disabilities.

The American Speech Language and Hearing Association recognizes four (4) communication disorders described in A-D below:

- A. An articulation/phonological processing disorder is the atypical production of speech sounds characterized by substitutions, omissions, additions or

distortions that may interfere with intelligibility. Phonological processing includes the rules governing the addition or substitution of a phoneme, including but not limited to:

1. voicing processes;
2. deletion processes;
3. fronting processes;
4. syllable processes; and
5. phoneme processes.

- B. A fluency disorder is an interruption in the flow of speaking characterized by:
1. atypical rate,
 2. atypical rhythm, and
 3. repetitions in sounds, syllables, words, and phrases.

These characteristics might also be accompanied by excessive tension, struggle behavior, and secondary mannerisms.

- C. A voice disorder is characterized by the abnormal production and/or absences of:

1. vocal quality,
2. pitch,
3. loudness,
4. resonance, and/or
5. duration, which are inappropriate for an individual's age and/or sex.

- D. A language disorder is impaired comprehension and/or use of spoken, written and/or other symbol systems including:

1. the form of language (phonology, morphology, syntax),
2. the content of language (semantics), and/or
3. the function of language in communication (pragmatics).

- **EVALUATION REQUIREMENTS**

When the evaluation team is considering eligibility under the Language or Speech Impairment category, the multidisciplinary team evaluation report and/or eligibility determination report must include:

- A. Results of hearing screening;
- B. Results of an orofacial examination, which is required for suspected impaired articulation disorders, and, if necessary, a statement from a medical specialist noting physical problems which would interfere with speech production;
- C. A physician's statement of release and recommendation(s) for services when a voice evaluation has been conducted;
- D. The number, types, and severity of disruptions, and a description of secondary characteristics in various settings (e.g., reading, monologue, conversation) when a fluency evaluation has been conducted;
- E. Results of a standardized measure(s) of language, when a language evaluation has been conducted;

NOTE: The score(s) must be at least 1.5 standard deviations below the mean of the test in the areas of expressive language and/or receptive language, including morphology, syntax, semantics and/or pragmatics for an eligibility ruling in Language.

- F. When an articulation evaluation has been completed for children ages 30 months and older, evidence that the child's articulation skills are below age-

- appropriate peers based on normative data, including a measure of stimulability;
- G. Documentation that the child's communication impairment adversely affects educational performance including the child's ability to communicate in academic, social and vocational settings; and
- H. Documentation of the child's speech/language skills in conversational speech

6.8 Multiple Disabilities (MD)

- **DEFINITION**

Multiple Disabilities (MD) means concomitant impairments (such as intellectual disability-blindness or intellectual disability-orthopedic impairment), the combination of which causes such severe educational needs that children cannot be accommodated in special education programs solely for one of the impairments. Although disabilities in two (2) or more areas may exist in the following categories, Deaf-Blindness, Specific Learning Disability, Developmental Delay or Language or Speech Impairment, these categories do not constitute Multiple Disabilities, in and of themselves. Language/speech, along with another disability, is generally viewed as a secondary condition, not MD.

- **EVALUATION REQUIREMENTS**

When the multidisciplinary evaluation team is considering eligibility under the Multiple Disabilities category, the categories that are evidenced by the data and a statement that the child cannot be appropriately served in a special education program designed solely for one of the disabilities must be included in the eligibility determination report.

6.9 Orthopedic Impairment (OI)

- **DEFINITION**

Orthopedic Impairment (OI) means a severe orthopedic impairment that adversely affects a child's educational performance. The term includes impairments caused by a congenital anomaly (e.g., clubfoot or absence of one or more members), impairments caused by disease (e.g., poliomyelitis or bone tuberculosis), and impairments resulting from other causes (e.g., cerebral palsy, amputations, and fractures or burns causing contractures).

- **EVALUATION REQUIREMENTS**

When the multidisciplinary evaluation team is considering eligibility under the Orthopedic Impairment category, the evaluation report and/or the eligibility determination report must include a diagnostic report from a physician or a nurse practitioner that provides information regarding:

- A. The nature of the student's congenital or acquired Orthopedic Impairment, and
- B. Limitations and precautions to be considered, and
- C. Recommendations for educational programming.

6.10 Other Health Impairment (OHI)

- **DEFINITION**

Other Health Impairment (OHI) 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, that:

- A. Is due to chronic or acute health problems such as asthma, attention deficit disorder (ADD) or attention deficit hyperactivity disorder (ADHD), diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia, or Tourette Syndrome; and
- B. Adversely affects a child's educational performance.

- **EVALUATION REQUIREMENTS**

When the evaluation team is considering eligibility under the Other Health Impairment category, the evaluation report and/or the eligibility determination report must include a diagnostic report from a physician or a nurse practitioner that provides information regarding:

- A. The nature of the student's health impairment, and
- B. Limitations and precautions to be considered, and
- C. Recommendations for educational programming.

When the evaluation team is considering eligibility under the Other Health Impairment (OHI) category due to an attention deficit disorder (ADD) or attention deficit hyperactivity disorder (ADHD), the comprehensive evaluation report and/or eligibility determination report must include all of the following:

- A. A description of the student's behaviors, settings in which the behaviors occur, antecedents leading to the behaviors, and consequences immediately following the behaviors;
- B. Attempts to address the behaviors and the results, including office discipline referrals and disciplinary actions;
- C. A description of how the behaviors adversely affect educational performance;
- D. A statement as to whether the behaviors are typical for the student's age, setting, circumstances, and peer group, and if not, how the behaviors are different; and
- E. The correlation between documented behaviors and results of ADHD assessments.

NOTE: For ADD and ADHD, a diagnostic report from a physician or a nurse practitioner is not required.

6.11 Specific Learning Disability (SLD)

- **DEFINITION**

Specific Learning Disability (SLD) means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. Specific Learning Disability does not include learning problems that are primarily the result of visual, hearing, or motor disabilities, of intellectual disability, of emotional disability or of environmental, cultural differences, or economic disadvantage.

- **PRE-REFERRAL REQUIREMENTS**

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

- A. Data that demonstrate that prior to, or as a part of, the referral process, the child was provided appropriate instruction in general education settings, delivered by qualified personnel; and
- B. Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, which was provided to the child's parents.

The public agency must promptly request parental consent to evaluate the child to determine if the child needs special education and related services, and must adhere to the evaluation and reevaluation timeframes, unless extended by mutual written agreement of the child's parents and a group of qualified professionals:

- A. If, prior to a referral, a child has not made adequate progress after an appropriate period of time when provided instruction; and
- B. Whenever a child is referred for an evaluation.

- **EVALUATION REQUIREMENTS**

When determining whether a child has a Specific Learning Disability, public agencies:

- A. Must first consider whether a process based on the child's response to scientific, research-based intervention(s) is sufficient to determine eligibility (i.e., Response to Intervention—RtI); and, in addition
- B. May use other alternative research-based procedures; and/or
- C. May use a severe discrepancy between intellectual ability and achievement.

NOTE: Severe discrepancy is defined as 1.5 standard deviations below the measure of intellectual disability

- **TEAM COMPOSITION**

The multidisciplinary evaluation team must include the child's parents and a team of qualified professionals, including:

- A. The child's general education teacher; or
- B. If the child does not have a general education teacher, a general education classroom teacher qualified to teach a child of his or her age; or
- C. For a child of less than school age, an individual licensed by the SBE to teach a child of his or her age; and
- D. A special education teacher; and
- E. At least one person qualified to conduct individual diagnostic examinations of children, such as a school psychologist, psychometrist, speech-language pathologist, or remedial reading teacher.

- **REPORT REQUIREMENTS**

When the evaluation team is considering eligibility under the Specific Learning Disability category, the eligibility determination report must include:

- A. Documentation of an observation using the following guidelines:
 1. The public agency must ensure that the child is observed in the child's learning environment (including the general education classroom

- setting) to document the child's academic performance and behavior in the areas of difficulty.
2. The multidisciplinary evaluation team must:
 - i. Use information from an observation in routine classroom instruction and monitoring of the child's performance that was done before the child was referred for an evaluation; or
 - ii. Have at least one member of the multidisciplinary evaluation team conduct an observation of the child's academic performance in the general education classroom after the child has been referred for an evaluation and parental consent is obtained.
 3. In the case of a child of less than school age or out of school, a group member must observe the child in an environment appropriate for a child of that age.
- B. Statements indicating:
1. Whether the child has a specific learning disability; and
 2. The basis for making the determination; and
 3. The relevant behavior, if any, noted during the observation of the child and the relationship of that behavior to the child's academic functioning; and
 4. The educationally relevant medical findings, if any; and
 5. Whether:
 - i. The child does not achieve adequately for the child's age or fails to meet State-approved grade-level standards in one or more of the following areas, when provided with learning experiences and instruction appropriate for the child's age or State-approved grade-level standards in the following areas:
 - a) Oral expression
 - b) Listening comprehension
 - c) Written expression
 - d) Basic reading skills
 - e) Reading fluency skills
 - f) Reading comprehension
 - g) Mathematics calculation
 - h) Mathematics problem solving;
 - ii. The child does not make sufficient progress to meet age or State-approved grade-level standards in one or more of the areas identified in the paragraph (5.i.) above when using a process based on the child's response to scientific, research-based intervention; or
 - iii. The child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, State-approved grade-level standards or intellectual development that is determined by the group to be relevant to the identification of a specific learning disability, using appropriate assessments.
 6. The determination of the group concerning the effects of a visual, hearing, or motor disability, intellectual disability; emotional disturbance; environmental or economic disadvantage; or limited English proficiency on the child's achievement level; and

7. If the child has participated in a process that assesses the child's response to scientific, research-based intervention:
 - i. The instructional strategies used and the student-centered data collected; and
 - ii. The documentation that the child's parents were notified about:
 - a) MDE's policies regarding the amount and nature of student performance data that would be collected and the general education services that would be provided; and
 - b) Strategies for increasing the child's rate of learning; and
 - c) The parents' right to request an evaluation.

Each group member, including parent(s), must certify in writing whether the report reflects the member's conclusions. If it does not reflect the member's conclusions, the group member must submit a separate statement presenting his or her conclusions.

6.12 Traumatic Brain Injury (TBI)

- DEFINITION

Traumatic Brain Injury (TBI) means an acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a child's educational performance. The term applies to open or closed head injuries resulting in impairments in one (1) or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual and motor abilities; psychosocial behavior; physical functions; information processing; and/or speech. The term does not apply to brain injuries that are congenital or degenerative or to brain injuries induced by birth trauma.

- EVALUATION REQUIREMENTS

When the evaluation team is considering eligibility under the Traumatic Brain Injury category, the comprehensive evaluation report(s) and/or eligibility determination report must include the information included in A, B, and C below:

- A. Information from a variety of sources (e.g., assessments, evaluations, the student's teacher(s), parents and/or caregivers) who are familiar with the student's educational differences in functioning prior to and following the injury, if relevant, in the following areas:
 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/or
 13. speech.

- B. A description of the acquired brain injury and cause of the injury; and
- C. Reports from physicians, providers of rehabilitation services, and/or other healthcare providers describing precautions, limitations, and recommendations to consider when planning educational services, if available

6.13 Visually Impaired (VI)

- **DEFINITION**

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

- **EVALUATION REQUIREMENTS**

When the evaluation team is considering eligibility under the Visually Impaired category, the comprehensive evaluation report(s) and/or eligibility determination report must include a report from an ophthalmologist or optometrist that includes all of the following:

- A. visual acuity,
- B. diagnosed visual problems,
- C. a statement of how the child's visual problem might affect educational performance, and
- D. recommendations for educational programming.