

Title 28
EDUCATION
Part Cl.

Bulletin 1508
Pupil Appraisal Handbook

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State Superintendent of Education

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Chapter 1 LOCAL EDUCATION AGENCY RESPONSIBILITIES

§101. Introduction

INTRO

- A. This handbook is the regulatory guide for pupil appraisal personnel when conducting individual evaluations of students suspected of being exceptional and in need of special education and related services, and as a reference for persons requiring specific information regarding the determination of eligibility for special education services. The reference to an exceptionality includes any disability term as well as gifted and talented.
- B. The Criteria for Eligibility describes the minimal data that must be obtained in order to determine whether the student has an exceptionality and is in need of special education services. The Procedures for Evaluation specify minimal areas of data collection, and at times suggest the professional who is usually most qualified to gather and interpret the data in a certain area. Any deviations from or exceptions to procedures in this handbook shall be explained in the integrated written evaluation report.
- C. The format has been revised to more sequentially reflect the steps necessary to determine if the student's responsiveness to general education interventions is sufficient to allow him/her to show progress within the general curriculum. If adequate progress is not evident, the *Bulletin* describes the continuum of actions to be taken by the LEA through pupil appraisal personnel in determining eligibility for special education and related services.
- D. This revision of *Bulletin* 1508 includes hyperlinks that will assist the reader in locating pertinent sections. These hyperlinks will only be active when the *Bulletin* is viewed online at www.louisianaschools.net or downloaded to a computer or other electronic device for viewing.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 894 (May 2009), effective July 1, 2009.

§103. Child Find Guidelines

CFG

- A. General Information
 - 1. The Local Educational Agency (LEA) shall ensure that:
 - a. All students with exceptionalities residing in the district, including students with exceptionalities who are homeless children or who are wards of the State, and students with exceptionalities attending private schools, regardless of the severity of their disability, and who are in need of special education and related services, are identified, located, and evaluated; and
 - b. A practical method is developed and implemented to determine which students are currently receiving needed special education and related services.

2. Each LEA shall document that on-going identification activities are conducted to identify, locate, and evaluate each student who is suspected of having exceptionality, is in need of special education and related services, and meets the criteria listed below:
 - a. is enrolled in an educational program operated by or under the jurisdiction of a [public agency](#);
 - b. is enrolled in a private school program within the geographical jurisdiction of a [public agency](#);
 - c. is enrolled in a public or private preschool or day care program; or
 - d. is not enrolled in a school, except for students who have graduated with a regular high school diploma.

- B. Child find shall also include:
 1. students who are suspected of being students with exceptionalities and in need of special education, even though they are advancing from grade to grade; and
 2. highly mobile students, including migrant students.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 895 (May 2009), effective July 1, 2009.

§105. Pupil Appraisal Services

PAS

- A. Pupil appraisal services comprise an integral part of the total instructional program of the LEA. The purpose of pupil appraisal services is to assist students who have academic, behavioral, and/or communication challenges, adjustment difficulties, or other special needs which are adversely impacting the student's educational performance by providing services to students, parents, teachers, and other school personnel. These services include, but are not limited to the examples provided below:
 1. assistance to teachers and other school personnel in the development and implementation of behavioral and/or instructional interventions through a district's Response to Intervention (RTI) process, positive behavior support process, or other intervention processes;
 2. provision of support services to non-disabled students with academic, behavioral and/or communication difficulties;
 3. consultation with parents, students, teachers, and other personnel on topics such as instructional or behavioral modifications, exceptional students, and child development;
 4. provision of staff development to school personnel on topics such as assessment, interventions, or child development;
 5. evaluation of students to determine whether they are exceptional and in need of special education and related services;
 6. interpretation of evaluation findings to school personnel and parents;
 7. provision of related services to students with exceptionalities; and
 8. referral to other appropriate agencies for services when warranted.

- B. Pupil appraisal personnel are not limited to providing services solely to students

referred for an individual evaluation. Many students experiencing academic, behavior and/or communication difficulties may be helped through recommendations made by pupil appraisal personnel for use in the general education classroom, enabling the student to benefit from instruction in the general education curriculum and eliminating the need for referral for an individual evaluation. Major functions of pupil appraisal personnel should include being child/student advocates and assisting students to remain in and profit from the general education curriculum whenever possible. When a student, as a result of an individual evaluation, qualifies for special education and related services, pupil appraisal personnel will recommend those services and supports needed to assist the teachers and parents of the student in providing appropriate special educational services in the least restrictive environment.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 895 (May 2009), effective July 1, 2009.

§107. Qualified Examiners

QE

- A. The Individuals with Disabilities Education Act (IDEA) and Louisiana Revised Statutes 17:1941 *et. seq.* require that a student suspected of being exceptional receive a comprehensive multidisciplinary evaluation conducted by qualified examiners. Qualified examiners include pupil appraisal professionals certified by the State Department of Education and professionals from other agencies or in private practice, as described in this section.
1. Professional members of a pupil appraisal system include certified Assessment Teachers/Educational Consultants/Educational Diagnosticians, Certified School Psychologists, Qualified School Social Workers; Speech/Language Pathologists, Adapted Physical Education Teachers; Audiologists; Certified School Nurses, Occupational Therapists, Physical Therapists, Speech and Hearing Therapists, and Speech/Hearing/Language Specialists.
 2. LEAs shall regularly employ certified pupil appraisal personnel to conduct individual evaluations, but may also employ others as listed below.
 - a. Qualified examiners available from the Department of Health and Hospitals, the Department of Public Safety and Corrections, the State Board Special Schools, or other public agencies.
 - b. Private qualified examiners contracted to provide specialized assessments.
 - c. The student's teacher(s) as member(s) of the evaluation team.
 - d. A combination of the personnel listed above.
 3. LEA-selected evaluators in music, theatre, or visual arts must not be employed by the LEA conducting the evaluation and must be on the State Department of Education approved evaluator list.
 4. Regardless of the approach used for conducting individual evaluations, LEAs retain full responsibility for the individual evaluation. Any failure by an employee

or contractor to meet the requirements of this Handbook constitutes a failure by the LEA to comply with *Bulletin 1706: Regulations for the Implementation of the Children with Exceptionalities Act; R.S.17:1941, et. seq.*

5. Professionals in private practice who provide evaluations for educational use must meet the standards of and comply with the rules and regulations set by their respective statutory professional boards. Certification by the State Board of Elementary and Secondary Education is not required for these persons; however, Educational Assessment Teachers/Diagnosticians or Educational Consultants are required to be certified by the Department of Education, since licensing for independent practice does not exist.
 - a. Professionals employed by another State agency must meet the professional standards of that agency and be qualified through training to conduct evaluations.
 - b. The results of an evaluation conducted by these professionals may be used by an LEA in determining a student's eligibility for special educational services. It remains the LEA's responsibility to ensure that the student is evaluated and that his or her eligibility determination has been in accordance with the requirements of this handbook.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 896 (May 2009), effective July 1, 2009.

§109. Parental Participation

PP

- A. Participation by parents is crucial in all meetings in which decisions are being made regarding their child. Parents must be informed about the process used to assess their child's response to scientifically research-based interventions, appropriate strategies for improved achievement and the right to request an evaluation. Parents must be notified early enough to ensure the opportunity to participate in the meetings and discussions listed below. See *Bulletin 1706 §322* for additional participation procedures.
 1. School Building Level Committee meetings when decisions are made regarding their child.
 2. The evaluation team meeting to consider the results of the data and determine eligibility.
 - a. At the conclusion of the evaluation meeting where eligibility is determined, if the parents disagree with the consensus of the team, the LEA must afford the parents the right to challenge the evaluation report in accordance with procedural safeguards.
 3. The initial individual education program (IEP) Team meeting to review evaluation results and determine special education and related services in the least restrictive environment.

4. The IEP Team meeting to discuss new concerns and to determine if a reevaluation is needed.
5. In the case of a reevaluation, to discuss the review of existing evaluation data to determine whether the student continues to have an exceptionality, and continues to need special education and related services.

B. Parental Consent for Initial Evaluations

PC1

1. The LEA proposing to conduct an initial evaluation to determine if a student qualifies as a student with an exceptionality shall, after providing notice as described in Chapter 5 of *Bulletin 1706*, obtain informed consent from the parent of the student before conducting the evaluation. Parents must be given a copy of their rights at the time of the request for parental consent.
 - a. Parental consent for initial evaluation shall not be construed as consent for initial provision of special education and related services.
 - b. The LEA shall make reasonable efforts to obtain the informed consent from the parent for an initial evaluation to determine whether the student is a student with exceptionality.
2. For initial evaluations only, if the student is a ward of the State and is not residing with the student's parent, the LEA is not required to obtain informed consent from the parent for an initial evaluation to determine whether the student is a student with an exceptionality if:
 - a. despite reasonable efforts to do so, the LEA cannot discover the whereabouts of the parent of the student;
 - b. the rights of the parents of the student have been terminated in accordance with State law; or
 - c. the rights of the parent to make educational decisions 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 student.
3. If the parent of a student enrolled in a public school or seeking to be enrolled in a public school does not provide consent for initial evaluation under paragraph B1 of this section, or the parent fails to respond to a request to provide consent, the LEA may, but is not required to, pursue the initial evaluation of the student by utilizing the procedural safeguards in Chapter 5 of *Bulletin 1706* (including the mediation procedures or due process procedures), if appropriate.
 - a. The LEA does not violate its obligation under §111 and §§302-308 of *Bulletin 1706* if it declines to pursue the evaluation.

C. Parental Consent for Reevaluations

1. The LEA shall obtain informed parental consent prior to conducting any

reevaluation of a student with an exceptionality.

2. If the parent refuses to consent to the reevaluation, the LEA may, but is not required to, pursue the reevaluation by using the consent override procedures described in paragraph B3 of this section.
3. The LEA does not violate its obligation under §111 and §§302-308 of *Bulletin 1706* if it declines to pursue the reevaluation.
4. The informed parental consent described in C1 of this section need not be obtained if the LEA can demonstrate that:
 - a. it made reasonable efforts to obtain such consent, and
 - b. the student's parent has failed to respond.

D. Other Consent Requirements for Evaluations and Reevaluations

1. Parental consent is not required before:
 - a. reviewing existing data as part of an evaluation or a reevaluation; or
 - b. administering a test or other evaluation that is administered to all students unless, before administration of that test or evaluation, consent is required of parents of all students.
2. If a parent of a student who is home schooled (in a home study program) or placed in a private school by the parents at their own expense does not provide consent for the initial evaluation or the reevaluation, or the parent fails to respond to the request to provide consent, the LEA may not use the consent override procedures described in B3 and C2 of this section.
 - a. The LEA is not required to consider the student eligible for services as defined in *Bulletin 1706*.
3. To meet the reasonable efforts requirement in paragraphs B1b, B2a, and C4a of this section, the [public agency](#) shall document its attempts to obtain parental consent using the procedures in §322D of *Bulletin 1706*.

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Chapter 3. Interventions and Screenings

§301. Response to Intervention

RTI

- A. The Response to Intervention (RTI) process is a three-tiered approach to providing services and interventions to struggling learners and/or students with challenging behaviors at increasing levels of intensity. Essential components of the process include three tiers of instruction and intervention, use of standard protocols and/or problem-solving methods, and an integrated data collection/assessment system to inform decisions at each tier of instruction/intervention. The process incorporates increasing intensities of instruction and/or intervention that are provided to students in direct proportion to their individual needs. Embedded in each tier is a set of unique support structures or activities that help teachers implement, with fidelity, research-based curricula, instructional practices, and interventions designed to improve student achievement. RTI is designed for use when making decisions in both general and special education, creating a well-integrated system of instruction and intervention guided by student outcome data.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 897 (May 2009), effective July 1, 2009.

§303. School Building Level Committee

SBLC

- A. The School Building Level Committee (SBLC) is a general education, data driven, decision-making committee whose standing members consist of at least the principal/designee, a classroom teacher, and the referring teacher. In discussing an individual student's difficulties, the student's parent or guardian is an invited participant. The SBLC shall review and analyze all screening data, including RTI results, to determine the most beneficial option for the student. The Committee's options include, but are not limited to one of the following actions.
1. Conduct no further action at this time.
 2. Continue current intervention and progress monitoring through the RTI process.
 3. Conduct additional interventions through the RTI process.
 4. Refer the student to the appropriate committee to conduct a Section 504 evaluation.
 5. Refer the student to pupil appraisal personnel for support services.
 6. Refer the student to pupil appraisal personnel for an individual evaluation if an exceptionality is suspected.
- B. Parents must be provided a report or summary by the SBLC on the status of the student's response to scientifically research-based interventions which would include repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction. This report or summary must be provided to parents at least once each grading period until a decision is reached. If the parents disagree with the SBLC actions or decision, the parents must be provided a copy of their rights, which includes the right to request an evaluation. If it is the opinion of the SBLC that the student be referred for an initial evaluation, a pupil appraisal team

member shall be present to review supporting documentation.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 897 (May 2009), effective July 1, 2009.

§305. Screening Activities

SA

A. Overview

1. An LEA shall identify a student, enrolled in an educational program operated by the LEA, as suspected of having a disability only after the student has participated in an RTI process that produces data sufficient for the SBLC to recommend that a comprehensive individual evaluation be conducted by pupil appraisal personnel. **For a student suspected of having a communication disorder, follow the screening activities in §305.D1-3.** For a child not enrolled in school, screening activities are to be conducted by Pupil Appraisal personnel. Through the RTI process the SBLC shall coordinate and document results of all screening activities described below. RTI and screening activities for enrolled students (public and private) are conducted by general education personnel with assistance from other school personnel and pupil appraisal members, if necessary.
2. 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.

B. Sensory Screening

1. Hearing Screening

- a. Hearing screening shall be conducted unless the following three conditions are true.
 - i. Normal screening results have been obtained within the past 24 months for enrolled students and within the past 12 months for non-enrolled students.
 - ii. No hearing problems are currently being exhibited by the student.
 - iii. There is no history of acute or chronic ear infections or persistent head colds indicated in the health screening.
- b. The student is considered "at-risk" of having a hearing impairment when one of the following conditions exist:
 - i. failure to respond at 20db in one of 1000 Hz, 2000 Hz or 4000 Hz frequencies in at least one ear;
 - ii. failure to respond at 25db in two or more frequencies in at least one ear;
 - iii. middle ear pressure outside the range of -200 and +50 mm H₂O in either ear; or

- iv. excessively stiff or flaccid tympanogram in either ear.
- c. Students for whom specific audiometric test results cannot be obtained because of age or degree of involvement or for whom informal hearing test results do not rule out the possibility of a hearing loss should be considered "at risk." The extent of the student's hearing loss must be determined, using electrophysiological techniques when necessary.

2. **Vision Screening**

- a. Vision screening shall be conducted unless the following three conditions are true.
 - i. Normal screening results have been achieved within the past 24 months for enrolled students and within the past 12 months for non-enrolled children.
 - ii. No vision problems are currently being exhibited by the student.
 - iii. There is no history of eye infections, either acute or chronic, indicated in the health screening.
- b. A student's vision is considered "at risk" as dictated by the criteria in the manual of the instrument used for testing. Vision screening must include tests for the following three conditions:
 - i. acuity (near point and far point);
 - ii. color blindness; and
 - iii. muscle balance.
- c. When the required techniques are unsuccessful because of the student's immaturity, physical impairment, or mental ability, adapted methods of testing shall be used to determine the extent of the loss.

3. **Sensory Processing Screening**

- a. Sensory processing screening is conducted to determine if a student is "at risk" for sensory processing difficulties. (Refer to the Sensory Processing Screening [Checklist](#) in the Appendix for further guidance.) Sensory processing concerns may include the following:
 - i. visual symptoms;
 - ii. auditory symptoms;
 - iii. tactile symptoms;
 - iv. vestibular (balance) symptoms;
 - v. olfactory (smell) symptoms;
 - vi. gustatory (taste) symptoms;
 - vii. proprioceptive (movement) symptoms;
 - viii. motor planning difficulties; or
 - ix. attention/arousal difficulties.

C. **Health Screening**

- 1. Health screening is conducted to determine the health status of the student.

2. A student's health is considered "at risk" if through history, observation, or other procedures, health concerns are noted.

D. Speech and Language Screening

1. Speech and language screening is conducted by a speech-language pathologist unless the following four conditions are true as documented by a teacher-completed checklist of communication skills. [Checklist](#)
 - a. The student exhibits normal voice quality.
 - b. The student speaks with normal rate and fluency.
 - c. The student's articulation skills appear normal with respect to age and social/cultural factors.
 - d. The student's overall receptive and expressive language skills appear adequate with respect to age and social/cultural factors.
2. The tasks, items, or tests used in screening should include a sampling to determine the following pertinent skills or conditions:
 - a. auditory processing skills (e.g., reception, discrimination);
 - b. articulation;
 - c. receptive and expressive language;
 - d. voice;
 - e. fluency;
 - f. oral motor functioning; and
 - g. oral structure.
3. If the student's communication skills are "at risk," evidence-based interventions shall be conducted by a speech-language pathologist or other appropriate personnel with fidelity and for the length of time necessary to obtain sufficient data to determine their effectiveness. Informed parental consent must be obtained before conducting these interventions. In the case of suspected voice impairment, there must also be an assessment conducted by an appropriate medical specialist prior to implementing the interventions.

E. Motor Screening

1. Motor screening is accomplished through the observation of the student's gross and fine motor skills by the teacher responsible for providing physical education to the student and, if necessary, in consultation with the teacher responsible for classroom-based activities. The evaluation coordinator shall ensure that motor screening is conducted by pupil appraisal personnel during the evaluation for students not enrolled in school.
2. A student's gross or fine motor skills are considered "at risk" if the screening results indicate concerns in the following areas:
 - a. lack of strength, endurance, flexibility;
 - b. difficulty with balance activities;
 - c. failure to show opposition of limbs when walking, sitting, or throwing;

- d. lack of control with ball skills;
- e. difficulty in crossing the vertical midline;
- f. poor sense of body awareness; or
- g. difficulty in demonstrating motor sequences.

F. Assistive Technology Screening

1. Assistive Technology screening is conducted through an observation of the student's skills and educational environment. (See Appendix for the *Louisiana Assistive Technology Screening Checklist* for further guidance.)
2. A student's functional capabilities should be considered "at risk" if the screening results indicate concerns in the following areas:
 - a. physical functioning/motor abilities;
 - b. fine motor skills;
 - c. communication functioning;
 - d. vision/hearing;
 - e. academic functioning;
 - f. recreation and leisure;
 - g. vocational functioning;
 - h. general health; or
 - i. self-help.

G. Social/Emotional/Behavior screening

1. Social/emotional/behavior screening should include, at a minimum, a review of:
 - a. incident reports/discipline records;
 - b. teacher reports;
 - c. parent reports and information provided by the parent;
 - d. developmental profiles;
 - e. previous behavior intervention plans; and
 - f. anecdotal records.
2. If a review indicates current concerns in the above areas, the student's social/emotional/behavior status is "at risk." Documented, evidence-based intervention(s) appropriate to the student's age and behavioral difficulties shall be conducted with fidelity for the length of time necessary to obtain sufficient data to determine their effectiveness. Interventions are required for students with a suspected emotional disturbance unless there is substantial documentation that the student is likely to injure him/her self or others.

H. Educational Screening

1. Educational screening is accomplished by conducting:
 - a. a review of the results of student's educational history;
 - i. For a preschool-aged child not in school, a developmental screening shall be conducted by pupil appraisal personnel prior to or during the evaluation.

- ii. For a preschool-aged child enrolled in school, a developmental screening shall be conducted by the student's teacher.
- b. a review of the student's academic performance, including dyslexia screening results and results of applicable statewide and district-wide tests;
- c. a summary of the teacher/parent communication regarding the student's specific difficulties or exceptional skills;
- d. a review of the results of universal screening, conducted by the teacher or other staff member, which enables school personnel to measure the performance of students as compared to peers within their class, school, and/or district; and
- e. a comprehensive and documented review of evidence-based intervention(s) conducted with fidelity and for the length of time necessary to obtain sufficient data to determine their effectiveness. Interventions should be appropriate to the student's age and academic skill deficits.
 - i. Interventions are required for students suspected of having Autism, Developmental Delay, Emotional Disturbance, Mild Mental Disability, Orthopedic Impairment, Other Health Impairment, and Specific Learning Disability. Interventions are not required for a preschool-aged child, a student suspected of being gifted or talented, or a student suspected of having severe or low incidence impairment.

I. Gifted and Talented Screening

1. *Gifted.* Based on universal screenings that monitor student progress in the core curriculum, students functioning at the highest levels should be considered for gifted screening (refer to Chapter 9 for further screening requirements).
2. *Talented.* Based on advanced skills demonstrated by the student in visual arts, music, or theatre, the student should be considered for talent screening (Refer to Chapter 9 for further screening requirements).

J. Other Considerations

1. The SBLC must provide data-based documentation that the student's lack of educational progress is not primarily due to:
 - a. lack of appropriate, explicit and systematic instruction in reading which includes the essential components of reading instruction: phonics, phonemic awareness, fluency, comprehension, and vocabulary; (e.g., if more than 50 percent of the class falls below benchmark on universal screening, lack of appropriate instruction might be suspected);
 - b. lack of appropriate instruction in math (e.g., if more than 50 percent of the class falls below benchmark on universal screening, lack of appropriate instruction might be suspected);
 - c. limited English proficiency; (for students identified as English Language Learners, refer to [Louisiana Guidelines for Identification & Instruction of](#)

- d. [English Language Learners with Disabilities](#) for additional information); environmental or economic disadvantage (e.g., if a majority of low income students in the class fall below benchmark on universal screening, environmental or economic disadvantage as a primary factor might be suspected); or
 - e. cultural factors (e.g., for students from culturally and linguistically diverse backgrounds, there is evidence that the school and classroom teacher have been sensitive toward the students' diverse learning needs).
2. When data indicate that the student is not responding to the intervention, the SBLC shall consider other options within the RTI process. The SBLC shall provide, at a minimum, evidence that a scientifically research-based intervention was implemented with fidelity, the student's progress was monitored at reasonable intervals, and the student's rate of progress relative to peers was not adequate.
 3. For students who are found to be "at risk" in any of the screening areas listed above, but are not suspected of having an exceptionality, the SBLC shall conduct interventions or refer the student to the appropriate specialist to address the concern.
 4. For students who are found to be "at risk" in any of the screening areas listed above and are suspected of having an exceptionality, the evaluation coordinator shall ensure that the screening areas determined to be "at risk" are addressed in the individual evaluation.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
 HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 898 (May 2009), effective July 1, 2009.

§307. Referral Process

RP

- A. A referral for an individual evaluation should be made when the provisions in 1, 2 and 3 have been met.
 1. The SBLC provides documentation that the RTI process addressing academic and/or behavior concerns, or the speech or language intervention(s) addressing communication concerns have included:
 - a. scientifically research-based intervention(s) implemented with fidelity as evidenced by data sheets, computer-generated records, or other permanent products;
 - b. monitoring of the student's progress relative to peers, at reasonable intervals; and
 - c. graphed evidence that the student's rate of progress relative to peers was not adequate.
 2. The SBLC provides data-based documentation that the student's lack of

educational progress is not primarily due to the considerations described in J above.

3. The SBLC suspects the student of having a disability.

- B. An immediate referral may be made to pupil appraisal services for an individual evaluation of those students suspected of having low incidence impairments such as hearing impairment, visual impairment, deaf-blindness, traumatic brain injury, mental disability (moderate or severe), multiple disabilities, and some students with severe autism, orthopedic impairments and/or significant health issues; or based on substantial documentation by school building level personnel of any student suspected of being likely to injure him/her- self or others. Screening activities should be completed during the evaluation for these students.
- C. All referrals for enrolled students to pupil appraisal for evaluation shall be made through the SBLC with the approval of the principal/principal designee. If it is the opinion of the SBLC that the student be referred for an initial evaluation, pupil appraisal staff shall be present to review the supporting documentation to ensure there are adequate data to suspect the student may have an exceptionality.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 900 (May 2009), effective July 1, 2009.

Chapter 5 Evaluation Responsibilities

§501. Evaluation Coordination

EC

A. Evaluation Coordinator

1. Upon identification of a student suspected of being exceptional, a [qualified pupil appraisal staff](#) member shall be designated as evaluation coordinator.
2. While this assignment is the responsibility of the individual designated by the LEA to direct the pupil appraisal system, it is recommended that the evaluation coordinator be selected on a case-by-case basis by and from the pupil appraisal personnel assigned to the school. The determination of the evaluation coordinator shall be based upon the student's specific problems and other factors such as the expertise, caseload, and other responsibilities of each pupil appraisal staff member. Evaluation coordinator is not a position; therefore, one individual shall not be routinely designated this responsibility.
3. The following pupil appraisal personnel certified by the Louisiana Department of Education may serve as evaluation coordinators in the LEA.
 - a. Assessment Teacher/ Educational Consultant/Educational Diagnostician
 - b. Certified School Psychologist
 - c. Speech-Language Pathologist/Speech and Hearing Therapist/ Speech-Hearing-Language Specialist
 - d. Qualified School Social Worker
 - e. Audiologist

B. Responsibilities of the Evaluation Coordinator

1. The evaluation coordinator must conduct the following activities within 10 business days following receipt of referral by pupil appraisal.
 - a. Request informed parental consent to conduct an initial evaluation, if consent has not already been received.
 - b. The student's [parents](#) must be notified of the initial evaluation concerns and the types of assessments and procedures involved in the evaluation.
 - c. The parents must also be notified that there will be an opportunity to participate in the meeting at which identification and eligibility determinations will be made.
 - d. The student is referred to other appropriate agencies for screening/assessment/evaluation services, when warranted. The student may also be entitled to services other than those available through the educational system.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 900 (May 2009), effective July 1, 2009.

§503. Selection of Participating Disciplines

PD

- A. Upon receipt of informed parental consent for the evaluation, the evaluation coordinator shall ensure that at least two appropriate and [qualified](#) personnel representing different disciplines participate in the individual evaluation (one of whom shall be the evaluation coordinator). The following additional considerations shall apply.
1. If a sensory impairment is suspected, statewide assessment resources that meet State Standards should be considered.
 2. If the student is determined to be "at risk" through sensory, motor, or health screening, and if a sensory or other physical/health impairment is suspected, an appropriate assessment must be conducted by a physician or other qualified examiner with specialized training and experience in the diagnosis and treatment of the particular condition.
 3. If the student has a documented health or physical impairment; has a history of head or spinal cord injury, seizures, or diseases; needs assistance with activities of daily living due to health concerns; requires medications at school or home; requires health procedures and/or special diet; or has other health problems, the school nurse or other qualified personnel shall be a member of the evaluation team.
 4. If the student is suspected of having a specific learning disability, the student's general education teacher (or if the student does not have a general education teacher, a general education teacher qualified to teach a student of his or her age; or for a child of less than school age, an individual certified by the State Department of Education to teach a student of his or her age) must be a member of the multidisciplinary team. In no case shall the general education teacher replace the qualified pupil appraisal person.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 901 (May 2009), effective July 1, 2009.

§505. Procedural Responsibilities

PR

- A. Throughout the initial evaluation of a student, the evaluation coordinator shall ensure that specific procedures are followed.
1. Each individual evaluation is based on a comprehensive compilation of information drawn from a variety of sources.
 2. The evaluation is conducted in accordance with all requirements of this handbook, including timelines.
 3. The student is evaluated in each area of suspected exceptionality.

4. Full and complete records collected or generated in connection with an individual evaluation are maintained in accordance with confidentiality requirements.
5. The results of any previously conducted specialist's evaluations are obtained through written parental authorization for the release of these records.
6. A meeting of the multidisciplinary evaluation team members, including the parent, is scheduled and conducted to determine whether the student is exceptional.
7. An integrated report describing the findings and recommendations of the evaluation process, along with the determination of eligibility, is prepared; and a copy is provided to the supervisor of special education or designee.
8. The evaluation findings and recommendations are interpreted for the student's teacher(s).
9. A copy of the integrated report, including any dissenting opinions, along with the determination of eligibility, recommendations, and an opportunity for an oral explanation of the findings was provided to the student's parents prior to the initial IEP Team meeting.
10. A pupil appraisal staff member who participated in the evaluation shall be designated to attend the initial IEP Team meeting to explain the recommendations and assist in the development of the IEP. If a member of the team cannot be in attendance, an individual who can interpret the instructional implications of the evaluation must attend.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
 HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 901 (May 2009), effective July 1, 2009.

§507. Evaluation Procedures **ER**

- A. In conducting the evaluation, each LEA shall:
1. use a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information about the student, including information provided by the parent that may assist in determining;
 - a. whether the student has an exceptionality; and
 - b. the content of the student's IEP, including information related to enabling the student 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 student has an exceptionality 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.

- B. Other evaluation procedures. Each LEA shall ensure that the provisions in 1 through 7 below have been met.
1. Assessments and other evaluation materials used to assess a student under these regulations:
 - a. are selected and administered so as not to be discriminatory on a racial or cultural basis;
 - b. are provided and administered in the student's native language or other mode of communication and in the form most likely to yield accurate information on what the student knows and can do academically, developmentally, and functionally, unless it is clearly not feasible to so provide or administer;
 - c. are used for the purposes for which the assessments or measures are valid and reliable;
 - d. are administered by trained and knowledgeable personnel; and
 - e. 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. In no event shall IQ scores be reported or recorded in any individual student's evaluation report or cumulative folder. Whenever it is necessary to conduct an individual intellectual assessment as a component of an individual evaluation, the examiner shall review all available information regarding the student.
 3. Assessments are selected and administered to best ensure that if an assessment is administered to a student with impaired sensory, manual, or speaking skills, the assessment results accurately reflect the student's aptitude or achievement level or whatever other factors the test purports to measure, rather than reflecting the student's impaired sensory, manual, or speaking skills (unless those skills are the factors that the test purports to measure).
 4. The student is assessed in all areas related to the suspected exceptionality including, if appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities.
 5. Assessments of students with exceptionalities who transfer from one [public agency](#) to another public agency in the same school year are coordinated with those students' prior and subsequent schools, as necessary and as expeditiously as possible, to ensure prompt completion of full evaluations.
 6. In evaluating each student with an exceptionality, the evaluation is sufficiently comprehensive to identify all of the student's special education and related

services needs, whether or not commonly linked to the exceptionality category in which the student has been classified.

7. Assessment tools and strategies provide relevant information that directly assists persons in determining the educational needs of the student.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 901 (May 2009), effective July 1, 2009.

§509. Required Initial Individual Evaluation

IE

- A. A comprehensive initial evaluation shall be conducted before the initial provision of special education and related services to a student. Either a parent of a student or a [public agency](#) may initiate a request for an initial evaluation to determine if the student has an exceptionality.
- B. An initial individual evaluation shall be conducted when informed parental consent for the initial individual evaluation has been received by the LEA. If a request was made for an evaluation during the time period in which the student is subject to disciplinary measures, the evaluation shall be conducted in an expedited manner as defined in [§511](#) Evaluation Timelines.
- C. If the LEA suspects that the student is exceptional, an evaluation shall be conducted with parental consent. If the LEA does not suspect that the student is exceptional, then it may refuse to conduct an evaluation. The SBLC, through interventions, may attempt to resolve the student's difficulties. When an LEA refuses to initiate an evaluation upon parental request, the parents must be given a written explanation of the reason for the decision according to the requirements listed in Chapter 5 of *Bulletin 1706* and provided a copy of their rights, which includes the right to a due process hearing.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 902 (May 2009), effective July 1, 2009.

§511. Evaluation Timelines

ET

- A. The initial evaluation must be conducted within 60 business days of receiving parental consent for the evaluation with appropriate extensions as described below:
 1. End of the Year Extension – If the LEA begins an evaluation and there are fewer than 60 business days remaining in the LEA's current school year, the LEA may take this type of extension. However, the number of days used between the parental signature and June 1 (the SER official beginning date for summer) will be subtracted from the 60 business days, and the timelines will begin again on September 1 (the SER official ending date for summer).
 2. Parentally Approved Extension – If the LEA is making sufficient progress to ensure a prompt completion of the evaluation but needs extended time to assess the student in all areas of the suspected exceptionality, the parent and the LEA

may agree to a specific time when the evaluation will be completed.

- B. Extensions are not allowed during expedited evaluations for students subject to disciplinary measures as referenced in §534 of *Bulletin 1706*.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 902 (May 2009), effective July 1, 2009.

§513. Evaluation Components

EC1

- A. All initial evaluations shall include the following documented components (refer to individual exceptionalities for additional evaluation components):
1. a description of each screening activity and a review of the screening results;
 2. a review of cumulative records including test scores, discipline records, grade history, attendance records, statewide assessments, etc.;
 3. a review of any pertinent reports supplied by the parent or an outside agency;
 4. a review of the intervention(s) which includes data-based documentation that:
 - i. the interventions were scientifically research-based;
 - ii. the interventions were implemented with fidelity as documented by data sheets, computer records or other permanent products;
 - iii. progress monitoring was conducted at reasonable intervals; and
 - iv. the student did not show adequate progress based on local or national norms.
 5. a systematic student observation(s) in the environments in which the student is experiencing difficulties;
 6. an interview with the student to obtain his/her perceptions of his/her academic, behavioral and social performance;
 7. An interview with the student's core subject teacher(s) to obtain information regarding referral concerns and the student's academic performance, behavior, and peer interactions;
 8. A family interview conducted by a school social worker or other qualified pupil appraisal staff member to determine the impact of developmental, educational, social/emotional, cultural, and/or health factors on the student's educational performance;
 9. An interview with the referral source, if other than the parent or teacher;
 10. An educational assessment conducted by an educational diagnostician or other qualified pupil appraisal staff member which includes descriptions of educational strategies, academic and environmental adjustments needed, and curricular modifications necessary to provide accessible instructional materials in order to enable the student to show progress in the general education curriculum;
 11. A functional behavior assessment conducted or reviewed by a certified school psychologist, a qualified school social worker, or other appropriately trained personnel, when behavior is noted as a concern; and
 12. A review and analysis of any discrepancies between test results or observations and the student's customary behaviors and daily activities, or of any discrepancies among evaluation results.
- B. The final written report for initial evaluations must be a compilation of the data gathered

during the individual evaluation process. The data collected by pupil appraisal personnel must be integrated and written in language that is clear to the IEP Team and other individuals who will use it.

1. The integrated written report of the initial evaluation of an identified student must contain the following components:
 - a. the reason(s) for referral;
 - b. any additional concerns raised by the parents, teachers, or other involved professionals;
 - c. a description of the evaluation procedures, including interventions, used to address each evaluation concern, the student's response(s) to the intervention(s) and an analysis of the results;
 - d. a description of the information used to decide that **each** of the following was not a determinant factor for the suspected disability:
 - i. lack of appropriate explicit and systematic instruction in reading which includes the essential components of reading instruction: phonics, phonemic awareness, fluency, comprehension, and vocabulary;
 - ii. lack of appropriate instruction in math;
 - iii. limited English proficiency;
 - iv. environmental or economic disadvantage; and
 - v. cultural factors.
 - e. a description of the student's present level(s) of functioning in relationship to the general education curriculum;
 - f. a description of the student's relative strengths and support needs;
 - g. a description of the educational needs of the student ranked in order of importance;
 - h. a description of the impairment or condition that enables the student to be classified as eligible for special education and related services;
 - i. information sufficient to permit a determination of the validity of the evaluation data for the total evaluation process to include the following:
 - i. compatibility of the student to the examiner(s),
 - ii. suitability of the evaluation environment,
 - iii. existence of any extraordinary conditions,
 - j. a description of any discrepancies noted during the evaluation process;
 - k. recommendations for determining the content of the student's IEP including types of services necessary to meet the educational needs of the student and to enable the student to be involved in and progress in the general education curriculum (or for a preschool student, to participate in appropriate activities);
 - l. a brief summary of the evaluation findings;
 - m. explanation of all extensions of the evaluation timelines including documentation of parental approval; when necessary
 - n. names of assessment personnel participating in the evaluation;
 - o. signatures of assessment personnel whose conclusions are accurately reflected in the report;
 - i. if a participating appraisal person disagrees with the conclusion(s) in the integrated report, that person may submit a separate signed

- dissenting opinion stating the disagreement and giving supporting data and conclusion(s) prior to the IEP meeting; and
 - p. the documentation of the determination of eligibility including signatures of the evaluation team members and the parents.

- C. During the conduct of the evaluation, the team may suspect that a student is non-exceptional based on selected components. The final written report shall be a compilation of all assessments and procedures conducted with supporting data and conclusions.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 902 (May 2009), effective July 1, 2009.

§515. Determination of Eligibility

DE

- A. Special rule for eligibility determination.
 - 1. A student shall not be determined to be a student with a disability if the determinant factor for that eligibility determination is a:
 - a. lack of appropriate explicit and systematic instruction in reading, including the essential components of reading instruction: phonics, phonemic awareness, fluency, comprehension and vocabulary;
 - b. lack of appropriate instruction in math; or
 - c. limited English proficiency.
 - 2. A student shall not be determined to be a student with an exceptionality if the student does not otherwise meet the eligibility criteria as a student with an exceptionality as defined in this Handbook.
- B. Upon completion of the administration of assessments and other evaluation components:
 - 1. The evaluation team members and the parents of the student shall determine whether the student is a student with an exceptionality, and the educational needs of the student; and
 - 2. The LEA shall provide a copy of the evaluation report and the documentation of determination of eligibility at no cost to the parent. If a parent disagrees with the results of the evaluation report, the LEA shall provide to the parent a copy of the procedural safeguards, including the right to an Independent Educational Evaluation.
- C. Procedures for determining eligibility and educational need.
 - 1. In interpreting evaluation data for the purpose of determining if a student is a student with an exceptionality as defined in this Handbook, and the educational needs of the student, the evaluation team members shall:
 - a. draw upon information from a variety of sources, including aptitude and achievement tests, parent input, and teacher recommendations, as well

- as information about the student's physical condition, social or cultural background, and adaptive behavior; and
- b. ensure that information obtained from all of these sources is documented and carefully considered.
2. If a determination is made that a student has an exceptionality and needs special education and related services, an IEP shall be developed for the student.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 903 (May 2009), effective July 1, 2009.

§517. Independent Educational Evaluation

IEE

- A. The parents of a student with a disability or an exceptionality have a right to obtain an independent educational evaluation (IEE) of the student as described in Chapter 5 of *Bulletin 1706*.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 904 (May 2009), effective July 1, 2009.

Chapter 7. Disabilities – This chapter contains additional procedures required for disability determinations.

§701. Autism

AU2

- A. *Definition-* Autism (Autism Spectrum Disorders) means a developmental disability significantly affecting verbal and nonverbal communication and social interaction; generally evident before age three that adversely affects a student'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 does not apply if a student's educational performance is adversely affected primarily because the student has an emotional disturbance. A student who manifests the characteristics of autism after age three could be identified as having autism if the criteria are satisfied.
1. There may be coexisting conditions/associated features that may include, but are not limited to cognitive delays, seizure activity, depression, anxiety, obsessive-compulsive disorders, Tourette Syndrome, fragile X syndrome, tuberous sclerosis, pica, allergies, self-injurious behaviors, sleeping and toileting problems, etc.
 2. Asperger's Disorder, Pervasive Developmental Disorder-Not Otherwise Specified (PDD-NOS), Rett's Disorder, or Childhood Disintegrative Disorder may be considered for the classification if the criteria for autism are met.
- B. *Criteria for Eligibility-*The multidisciplinary team may determine that the student displays autism if disturbances identified **in all three of the categories** below exist and adversely affect a student's educational performance. These disturbances may be characterized by delays, deviancies, arrests, and/or regressions in typical skill development, and/or precocious skill acquisition. While autism is behaviorally defined, manifestation of behavioral characteristics may vary along a continuum ranging from mild to severe.
1. Communication: A minimum of two of the following items must be documented:
 - a. disturbances in the development of spoken language;
 - b. disturbances in conceptual development (e.g., has difficulty with or does not **understand** time but may be able to tell time; does not understand WH-questions; has good oral reading fluency but **poor comprehension**; knows multiplication facts but cannot use them functionally; does not appear to understand directional concepts, but can read a map and find the way home; repeats multi-word utterances, but cannot process the semantic-syntactic structure, etc.);
 - c. marked impairment in the ability to attract another's attention, to initiate, or to **sustain** a socially **appropriate** conversation;
 - d. disturbances in shared joint attention (**acts used to direct another's attention to an object, action, or person for the purposes of sharing** the focus on an object, person or event);

- e. stereotypical and/or repetitive use of vocalizations, verbalizations and/or **idiosyncratic language** (students with Asperger's syndrome may display these verbalizations at a higher level of complexity or sophistication);
 - f. echolalia with or without communicative intent (may be immediate, delayed, or mitigated);
 - g. marked impairment in the use and/or understanding of nonverbal (e.g., eye-to-eye gaze, gestures, body postures, facial expressions) and/or symbolic communication (e.g., signs, pictures, words, sentences, written language);
 - h. prosody variances including, but not limited to, unusual pitch, rate, volume and/or other intonational contours;
 - i. scarcity of symbolic play.
2. Relating to people, events, and/or objects: A minimum of four of the following items must be documented:
- a. difficulty in developing interpersonal relationships appropriate for developmental level;
 - b. impairments in social and/or emotional reciprocity, or awareness of the existence of others and their feelings;
 - c. developmentally inappropriate or minimal spontaneous seeking to share enjoyment, achievements, and/or interests with others;
 - d. absent, arrested, or delayed capacity to use objects/tools functionally, and/or to assign them symbolic and/or thematic meaning;
 - e. difficulty generalizing and/or discerning inappropriate versus appropriate behavior across settings and situations;
 - f. lack of/or minimal varied spontaneous pretend/make-believe play and/or social imitative play;
 - g. difficulty comprehending other people's social/communicative intentions (e.g., does not understand jokes, sarcasm, irritation; social cues), interests, or perspectives;
 - h. impaired sense of behavioral consequences (e.g., using the same tone of voice and/or language whether talking to authority figures or peers, no fear of danger or injury to self or others);
3. Restricted, repetitive and/or stereotyped patterns of behaviors, interests, and/or activities: A minimum of two of the following items must be documented.
- a. unusual patterns of interest and/or topics that are abnormal either in intensity or focus (e.g., knows all baseball statistics, TV programs; has collection of light bulbs);
 - b. marked distress over change and/or transitions (e.g., substitute teacher, moving from one activity to another);
 - c. unreasonable insistence on following specific rituals or routines (e.g., taking the same route to school, flushing all toilets before leaving a setting, turning on all lights upon returning home);
 - d. stereotyped and/or repetitive motor movements (e.g., hand flapping, finger flicking, hand washing, rocking, spinning);
 - e. persistent preoccupation with an object or parts of objects (e.g., taking magazine everywhere he/she goes, playing with a string, spinning wheels

on toy car, interested only in church steeple rather than the church);

- C. *Procedures for Evaluation* – Conduct all procedures described under §513: Evaluation Components. [Self-Review form](#)
- D. *Additional Procedures for Evaluation*
1. A comprehensive assessment conducted by a certified school psychologist, licensed psychologist, physician or other qualified examiner trained or experienced in the evaluation of students with developmental disabilities;
 2. Systematic observations of the student in interaction with others such as parents, teachers, and peers across settings in the student's customary environments.
 3. If the results of hearing screening are not definitive, the student shall be referred to an audiologist.
 4. A speech and language assessment conducted by a speech/language pathologist trained and experienced in the evaluation of children with developmental disabilities. For non-verbal communicators, an augmentative/alternative communication assessment should be conducted to determine needs and modes of communication.
 5. The educational assessment shall include the review and analysis of the student's response to scientifically research-based interventions documented by progress monitoring data, when appropriate.
 6. An occupational therapy assessment to address sensory processing and motor difficulties. All observed symptoms should be clearly documented. At a minimum, sensory processing assessment should address the following:
 - a. visual symptoms;
 - b. auditory symptoms;
 - c. tactile symptoms;
 - d. vestibular (balance) symptoms;
 - e. olfactory (smell) and gustatory (taste) symptoms;
 - f. proprioceptive (movement) symptoms;
 - g. motor planning difficulties; and
 - h. attention/arousal difficulties.
 7. Other assessments (e.g., adaptive behavior) as determined to be appropriate and necessary by the evaluation coordinator and the multidisciplinary team.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 904 (May 2009), effective July 1, 2009.

§703. Deaf-Blindness

DB2

- A. *Definition* - Deaf-blindness is concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational problems that they cannot be accommodated in special education programs solely for students with deafness or students with blindness.

1. If a student has only two disabilities and those disabilities are deafness and blindness, the student must be classified as having deaf-blindness. Each LEA shall notify State Deaf-Blind Census of all students who have both hearing and visual impairments.

B. *Criteria for Eligibility* - Evidence of 1, 2, and 3 are required.

1. **Vision Impairment** - any of the following:
 - a. measured corrected visual acuity is 20/70 or less in the better eye, and/or a previous chronic condition has interfered, is interfering, or will interfere with the visual learning mode;
 - b. cortical blindness in the presence of normal ocular structure as verified in the report of an ophthalmologist, pediatrician, or pediatric neurologist;
 - c. field of vision that subtends an angle of 20 degrees or less in the better eye; or
 - d. other blindness resulting from a documented medical condition.
2. **Deafness**
 - a. Sensorineural hearing loss of 25 decibels (ANSI) or more across the speech frequencies in the better ear with amplification and/or a previous chronic condition that has existed which has interfered, is interfering, or will interfere with the auditory learning mode.
3. **Educational Need**
 - a. Educational determination that the student's combined vision and hearing losses are such that he/she cannot be served appropriately solely by the special education program for either visual impairments or hearing impairments.

C. *Procedures for Evaluation*- Conduct all procedures described under §513: Evaluation Components. [Self Review Form](#)

D. *Additional Procedures for Evaluation*

1. An assessment of the student's vision conducted by an ophthalmologist or optometrist. When the impairment results from a documented medical condition, it shall be verified in the report of an ophthalmologist, pediatrician, or pediatric neurologist. When the condition is progressive or unstable, the need for a yearly eye examination will be documented in the integrated report.
2. An assessment of the student's hearing conducted by an audiologist or otologist.
3. An orientation and mobility screening conducted to assess the student's ability to travel around in his or her environment. (There is a suggested screening checklist in the Appendix.) Based on the results of the screening, an assessment conducted by a qualified orientation and mobility instructor may be warranted.

4. The educational assessment conducted should verify that the student's combined vision and auditory losses are such that he/she cannot be served appropriately by a program for students with visual or hearing impairments.
5. The family interview must include an investigation of family history of Usher Syndrome or other contributing medical difficulties.
6. A speech and language assessment of receptive and expressive language to include the student's language level and communication skills conducted by a speech/ language pathologist. The examiner should be fluent in the student's primary mode of communication or should utilize the services of a certified interpreter/ transliterator, when necessary.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 905 (May 2009), effective July 1, 2009.

§705. Developmental Delay

DD2

- A. *Definition* - Developmental Delay is a disability in which students/children, ages three through eight, are identified as experiencing developmental delays in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development or adaptive development.
1. A student shall be classified categorically if it is determined through the evaluation process, that the student has the specific sensory impairment of blindness or deafness and needs special education and related services. A student who meets the criteria for other disabilities may be classified categorically. If delays in addition to speech or language are evident, the student should be classified as having Developmental Delay or one of the other categorical disabilities.
 2. The use of the Developmental Delay category is optional to the local educational agencies. LEAs that choose not to use this category must classify categorically.
 3. If a student has only two disabilities and those disabilities are deafness and blindness, the student must be classified as having deaf-blindness. Each LEA shall notify State Deaf-blind Census of all students who have both hearing and visual impairments.
- B. *Criteria for Eligibility* - The student/child must be between the ages of three through eight years, and functioning significantly below age expectancy (i.e., exhibiting a delay of 25 percent or more on criterion-based measures or achieving a standard score greater than or equal to 1.5 standard deviations below the mean on norm-based measures) in one or more of the following areas:
1. Physical Development, which includes:
 - a. gross motor skills;
 - b. fine motor skills;

- c. sensory (visual or hearing) abilities; and
- d. sensory-motor integration.
- 2. Social, Adaptive or Emotional Development, which includes:
 - a. play (solitary, parallel, cooperative);
 - b. peer interaction;
 - c. adult interaction;
 - d. environmental interaction; and
 - e. expression of emotions.
- 3. Cognitive or Communication Development, which includes:
 - a. language (receptive or expressive);
 - b. concrete or abstract reasoning skills;
 - c. perceptual discriminations;
 - d. categorization and sequencing;
 - e. task attention;
 - f. memory; and
 - g. essential developmental or academic skills, as appropriate.

C. *Procedures for Evaluation-* Conduct all procedures described under §513: Evaluation Components. [Self-Review Form](#)

D. *Additional Procedures for Evaluation*

- 1. An examination conducted by a physician not only when the student appears to have a severe medical condition but also when deemed necessary by the evaluation coordinator. When the medical report indicates the student has a health or physical impairment requiring health technology, management or treatments including a special diet or medication, or needs assistance with activities of daily living due to health concerns, the school nurse or other qualified personnel will conduct a health assessment.
- 2. The educational assessment for school aged students shall include the review and analysis of the student's response to scientifically research-based interventions documented by progress monitoring data.
- 3. A functional/developmental assessment for preschool-aged children conducted by an educational diagnostician or other qualified pupil appraisal staff member who has appropriate training in the evaluation of early childhood disorders and/or development to determine not only levels of performance but to also include an analysis of the student's participation in appropriate activities.
- 4. A speech/language assessment conducted by a speech/language pathologist when a speech or language impairment is suspected.
- 5. An assessment conducted by an occupational therapist when sensory-motor integration difficulties are suspected.

E. *Procedures for Reevaluation*

1. When a triennial reevaluation must be conducted during the time period a student is classified as having developmental delays, the waiver process may be used when no other disability category is suspected and the student continues to have a disability and is still in need of special education and related services.
2. The reevaluation of students classified with Developmental Delay shall be conducted prior to the student's ninth birthday to determine whether to declassify or to classify the student categorically. The reevaluation shall include all initial evaluation procedures for the suspected exceptionality.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
 HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 906 (May 2009), effective July 1, 2009.

§707. Emotional Disturbance

ED2

- A. *Definition*- 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 student's educational performance: (Emotional disturbance includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance.)
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; and/or
 5. A tendency to develop physical symptoms or fears associated with personal or school problems.
- B. *Criteria for Eligibility* - Criteria 1, 2, 3 and 4 shall all be met. The student exhibits behavioral or emotional responses so different from age appropriate, cultural, or ethnic norms that they adversely affect the student's educational performance which includes academic progress, social relationships, work adjustment personal adjustment, and/or behavior in the school setting. Such a disability is more than a temporary, expected response to stressful events in the environment; is consistently exhibited in two different settings, one of which must be the school setting; and persists despite individualized intervention within general education and other settings. Emotional disturbance can co-exist with other disabilities.
1. Functional Disability - There is evidence of severe, disruptive and/or incapacitating functional limitations of behavior characterized by at least one of the following:
 - a. the inability to exhibit appropriate behavior routinely under normal circumstances;

- b. a tendency to develop physical symptoms or fears associated with personal or school problems;
 - c. the inability to learn or work that cannot be explained by intellectual, sensory, or health factors;
 - d. the inability to build or maintain satisfactory interpersonal relationships with peers and adults; or
 - e. a general pervasive mood of unhappiness or depression.
2. Duration - There is evidence of at least one of the following:
- a. The impairment or pattern of inappropriate behavior(s) has persisted for at least one year.
 - b. There is substantial risk that the impairment or pattern of inappropriate behavior(s) will persist for an extended period; or
 - c. There is a pattern of inappropriate behaviors that are severe and of short duration.
3. Educational Performance - There is evidence that **all** of the following are true.
- a. Educational performance must be significantly and adversely affected as a result of behaviors that meet the definition of emotional disturbance.
 - b. Behavioral patterns, consistent with the definition, exist after behavior intervention and/or counseling and educational assistance implemented through the RTI process which includes documented research-based interventions targeting specific behaviors of concern.
 - i. Documented evidence must show that scientifically research-based interventions implemented with fidelity did not significantly modify the problem behavior. The intervention(s) shall include operationally defined target behaviors, systematic measurement of the behaviors of concern, establishment of baseline, monitoring of the student's response to the intervention following intervention implementation, or prior to with repeated measures during the intervention. Documentation shall include graphing/charting of the results of the intervention(s), information regarding the length of time for which each intervention was conducted, and any changes or adjustments made to an intervention. *Significantly modify* means that a change in behavior is demonstrated to such a degree that, with continuation of the intervention program by the general education teacher and/or other support personnel, the student could continue in the general education program.
4. The behaviors of concern are exhibited across at least two different settings (home, school, and community), one of which must be school.

C. *Procedures for Evaluation-* Conduct all procedures described under §513: Evaluation Components. [Self Review Form](#)

D. *Additional Procedures for Evaluation*

- 1. A psycho-social assessment conducted by a social worker, school psychologist, or other qualified pupil appraisal staff member, which includes an interview with the student's parent(s), or care giver. If the assessment determines the student to be out-of-home, out-of-school or "at risk" of out-of-school, or out-of-home placement and in need of multi-agency services, the student must be considered

for referral to any existing interagency case review process.

2. A review of the functional behavior assessment which includes a description of the intensity, duration and frequency of occurrence of target behaviors and a description of antecedent(s) and consequence(s) maintaining the behavior(s). The assessment should be conducted across settings with multiple informants and should include a determination of the function(s) of the behavior(s) of concern.
3. A review of the appropriateness and effectiveness of the documented intervention(s). If interventions were not conducted prior to the evaluation, intervention(s) must be implemented during the evaluation process. Suspension/expulsion cannot be used as an intervention.
4. A comprehensive psychological assessment conducted by a certified school psychologist or a licensed psychologist, or psychiatric assessment conducted by a psychiatrist. The assessment shall include, at a minimum, an appraisal of the student's cognitive, emotional, and social functioning including self-concept.
5. The evaluation report shall include recommendations for the provision of counseling, school psychological, or school social work services as a related service. If these services are determined not to be necessary, written documentation of the justification for not providing the services shall be included in the evaluation report.
6. Other assessment procedures determined to be necessary by the multidisciplinary team.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 907 (May 2009), effective July 1, 2009.

§709. Hearing Impairment

HI2

- A. *Definition* – Hearing impairment means an impairment in hearing, whether permanent or fluctuating, that adversely affects a student's educational performance. It includes *Deafness* which is a hearing impairment that is so severe that the student is impaired in processing linguistic information through hearing, with or without amplification.
1. Deafness is a hearing loss with an unaided pure tone average of 70dB (ANSI) or more in the better ear at 500, 1000, and 2000 Hz. The hearing loss is so severe that the student is impaired in processing linguistic information through hearing, with or without amplification.
 2. Hard of Hearing includes the following
 - a. *Permanent or Fluctuating Hearing Loss*- a hearing loss with an unaided pure tone average in the better ear at 500, 1000, and 2000 Hz between 25 and 70 dB (ANSI). The hearing loss is severe enough to be considered educationally significant, as it will to varying degrees impact the normal

development of speech and language skills and/or interfere with learning new information through the auditory modality.

- b. *Unilateral Hearing Loss* - a permanent hearing loss with an unaided pure tone average in the poorer ear at 500, 1000, and 2000 Hz of 40 dB (ANSI) or greater. The hearing in the better ear is within the normal range (pure tone average of 20 dB or better at 500, 1000, and 2000 Hz). The hearing loss in the poorer ear is of sufficient severity to be considered educationally significant because it may affect the person's ability to

process linguistic information and/or localize sound, particularly in the presence of background noise.

- c. *High Frequency Hearing Loss* - a bilateral hearing loss with an unaided pure tone average of 40 dB or greater at any two of the following frequencies (2000, 3000, 4000 or 6000 Hz). The hearing loss is educationally significant because it is of sufficient severity to impact the person's ability to process linguistic information, particularly in the presence of background noise.

- 3. If a student has only two disabilities and those disabilities are deafness and blindness, the student must be classified as having deaf-blindness. The LEA shall notify State Deaf-Blind Census of all students who have both hearing and visual impairments.

B. *Criteria for Eligibility* - Criteria 1 and 2 must be met.

- 1. There must be audiological evidence that the student is either deaf or hard of hearing, consistent with the definition; and
- 2. There must be evidence that the hearing loss adversely affects the student's educational performance.

C. *Procedures for Evaluation* - Conduct all procedures described under §513: Evaluation Components. [Self Review Form](#)

D. *Additional Procedures for Evaluation*

- 1. The interview with the student must be conducted in the student's primary mode of communication.
- 2. An assessment of the student's hearing sensitivity, acuity, with and without amplification shall be conducted by a physician with specialized training or experience in the diagnosis and treatment of hearing impairments and/or a licensed audiologist.
- 3. The student, family and teacher interviews should include the following discussions:
 - a. the student's language and communication needs;
 - b. opportunities for direct communication with peers and professional personnel in the student's language and primary mode of communication;
 - c. academic functioning levels; and

- d. the full range of needs, which include opportunities for direct instruction in the student's language and primary mode of communication.
- 4. The Statewide Assessment Center for Students with Hearing Impairments may be used as a resource to conduct the evaluation.
- 5. A speech and language assessment of receptive and expressive language to include the student's language level and communication skills conducted by a speech/ language pathologist. The examiner should be fluent in the student's primary mode of communication or should utilize the services of a certified interpreter/transliterater, when necessary.
- 6. For students with deafness, a description of how the impairment is impacting the student's ability to process linguistic information shall be provided.

E. *Reevaluation*

- 1. If at the time of the triennial reevaluation, the student has not been considered for Usher Syndrome and it is judged that the student is "at risk" for the syndrome, the triennial reevaluation cannot be waived.
- 2. Students who are considered "at risk" for Usher Syndrome shall receive a comprehensive vision examination by an ophthalmologist or optometrist.
 - a. "At-risk" indicators are the following:
 - i. Unable to walk by 13 months;
 - ii. Difficulty seeing in low lighting situation;
 - iii. Glare sensitivity;
 - iv. Immediate family member(s) diagnosed with Usher Syndrome;
 - v. Difficulty seeing people/objects in visual periphery;
 - vi. Difficulty focusing on objects/written word; or
 - vii. Balance problems.
 - b. Students identified through screening, as "at risk" shall be referred to an ophthalmologist for assessment to document the presence of any disease process.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
 HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 908 (May 2009), effective July 1, 2009.

§711. Mental Disability

MED2

- A. *Definition - Mental Disability* means significantly sub average general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period that adversely affects a student's educational performance.
 - 1. In every case, determination of a mental disability shall be based on an assessment of a variety of factors including educational functioning, adaptive

behavior, and past and current developmental functioning (e.g., indices of social, intellectual, adaptive, verbal, motor, language, emotional, and self-care development for age).

- B. *Criteria for Eligibility* - Criteria 1 through 5 must all be met.
1. Documented evidence must show that evidence based intervention(s) implemented with fidelity did not significantly modify the areas of concern. The intervention(s) shall include operationally defined target behaviors, systematic measurement of the academic and/or social areas of concern, establishment of baseline, and monitoring of the student's response to the intervention. These results may not be available for students with low incidence impairments.
 2. For all students meeting the classification of Mental Disability as defined in a. through c., the degree of impairment shall be specified.
 - a. The measured intelligence and adaptive behavior functioning of a student with a Mental Disability - Mildly Impaired generally falls between two and three standards deviations below the mean. The student's adaptive behavior functioning falls below age and cultural expectations and is generally commensurate with the assessed level of intellectual functioning.
 - b. The measured intelligence and adaptive behavior functioning of a student with a Mental Disability - Moderately Impaired generally falls between three and four standard deviations below the mean. The student's adaptive behavior functioning falls below age and cultural expectations and is generally commensurate with the assessed level of intellectual functioning.
 - c. The measured intelligence and adaptive behavior functioning of a student with a Mental Disability - Severely Impaired generally falls greater than four standard deviations below the mean. The student's adaptive behavior functioning falls below age and cultural expectations and is generally commensurate with the assessed level of intellectual functioning.
 3. The learning problems are not due primarily to such factors as:
 - a. other disabling conditions;
 - b. lack of appropriate explicit and systematic instruction in reading which includes the essential components of reading instruction: phonics, phonemic awareness, fluency, comprehension, and vocabulary;
 - c. lack of appropriate instruction in math;
 - d. limited English proficiency;
 - e. lack of educational opportunity;
 - f. emotional stress in the home or school; or
 - g. environmental, or economic disadvantage.
 4. The student's academic or pre-academic functioning levels are generally commensurate with the assessed level of intellectual ability.
 5. The deficits occurred during the developmental period.
- C. *Procedures for Evaluation* - Conduct all procedures described under §513: Evaluation Components. [Self Review Form](#)
- D. *Additional Procedures for Evaluation*

1. The educational assessment should include informal and formal assessments, the review and analysis of assessment results and the student's response to scientifically research-based interventions documented by progress monitoring data.
2. An assessment of adaptive behavior including information provided by both parent(s) and teacher. When information is provided by only one informant, the reason must be explained in the report.
3. A psychological assessment conducted by a certified school psychologist, which includes the following procedures.
 - a. An appraisal of emotional or cultural/linguistic factors that may be causing or contributing to the student's problems.
 - b. A standardized nondiscriminatory individual assessment of intellectual functioning. The examiner shall review all available information regarding the student, the student's family, and the socio-cultural background of the student to determine whether the intellectual assessment results have been unduly influenced by such factors.
4. An assessment of language development and/or communication skills conducted by a speech/language pathologist or other qualified pupil appraisal staff member. For non-verbal communicators, an augmentative/alternative communication assessment should be conducted to determine needs and modes of communication.
5. Other assessment procedures deemed necessary by the multidisciplinary team.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
 HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 909 (May 2009), effective July 1, 2009.

§713. Multiple Disabilities

MD2

- A. *Definition* - Multiple Disabilities means concomitant impairments (such as mental disability-blindness, orthopedic impairment-deafness, autism-orthopedic impairment, or emotional disturbance-mental disability), the combination of which causes such severe educational needs that they cannot be accommodated in special education programs solely for one of the impairments.
1. If a student has the two disabilities of deafness and blindness, the student must be classified as having deaf-blindness and not developmental delay or multiple disabilities. The LEA shall notify State Deaf-Blind Census of all students who have both hearing and visual impairments.
- B. *Criteria for Eligibility* - Criteria 1 and 2 must both be met.
1. The full criteria for eligibility for each exceptionality described in this *Handbook* must be met. Each of these conditions must additionally be to a severe or

moderate degree.

2. The individual cannot be educated in a special educational program specifically designed for one of the impairments with additional related services for the other condition.

C. *Procedures for Evaluation* - Conduct all procedures described under §513: Evaluation Components. [Self Review Form](#)

D. *Additional Procedures for Evaluation*

1. Procedures for evaluation appropriate to each suspected disabling condition as described in this handbook must be followed.
2. The evaluation must indicate and the pupil appraisal examiners must certify that the disabling conditions are each moderate or severe.
3. The educational assessment shall describe how the severity of the student's needs leads to the classification of Multiple Disabilities.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 909 (May 2009), effective July 1, 2009.

§715. Orthopedic Impairment

012

A. *Definition* - Orthopedic Impairment means a severe orthopedic impairment that adversely affects a student's educational performance. The term includes impairments caused by congenital anomaly, impairments caused by disease (e.g., poliomyelitis, bone tuberculosis, etc.); and impairments from other causes (e.g., Cerebral Palsy, amputations, and fractures or burns that cause contractures).

B. *Criteria for Eligibility* - Criteria 1 or 2, and 3 must be met.

1. muscular or neuromuscular disabilities that significantly limit the ability to move about, sit, or manipulate the materials required for learning; or
2. skeletal deformities or abnormalities that affect ambulation, posture, and body use necessary in schoolwork; and
3. impaired environmental functioning that significantly interferes with educational performance.

C. *Procedures for Evaluation* - Conduct all procedures described under §513 Evaluation Components. [Self Review Form](#)

D. *Additional Procedures for Evaluation*

1. A report of a medical examination conducted within the previous 12 months from a physician qualified by training or experience to assess the student's orthopedic or neurological problems. The report must provide a description of the impairment, any medical implications for instruction or physical education, and

must indicate adaptive equipment and support services necessary for the student to benefit from the general education curriculum, as appropriate. When the medical report indicates the student has a health or physical impairment requiring health technology, management, or treatments including a special diet or medication or that the student needs assistance with activities of daily living, the school nurse or other qualified personnel will conduct a health assessment.

2. An assessment of the need for adapted physical education shall be conducted.
3. When deemed necessary by the evaluation coordinator and the multidisciplinary team, an Occupational Therapy assessment or Physical Therapy assessment, or both shall be conducted.
4. The educational assessment shall include the review and analysis of the student's response to scientifically research-based interventions documented by progress monitoring data, when appropriate.
5. The family interview should clarify parental concerns about the student's educational needs and identify health care providers and/or community resources used in caring for the student's medical or physical needs.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 910 (May 2009), effective July 1, 2009.

§717. Other Health Impairment

OH12

- A. *Definition* - 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 that is due to chronic or acute health problems -- and may include such conditions as 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 adversely affects a student's educational performance.
- B. *Criteria for Eligibility* - Criteria 1 or 2, and 3 must be met. If the diagnosed impairment has behavioral implications that research has shown to respond to behavioral interventions, criterion 4 must also be met.
 1. The disability results in reduced efficiency in schoolwork because of temporary or chronic lack of strength, vitality, or alertness, and includes such conditions as those specified in the definition; or
 2. A severe disability significantly limits one or more of the student's major life activities (that is, caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working); and
 3. The student exhibits impaired environmental functioning that adversely affects his or her educational performance.

4. Documented evidence must show that scientifically research-based interventions implemented with fidelity did not significantly modify the problem behavior. *Significantly modify* means that a change in behavior is demonstrated to such a degree that, with continuation of the intervention program by the general education teacher and/or other support personnel, the student could continue in the general education program.

C. *Procedures for Evaluation* - Conduct all procedures described under §513. Evaluation Components. [Self Review Form](#)

D. *Additional Procedures for Evaluation*

1. A report of a medical examination, conducted within the previous 12 months from a physician qualified by training or experience to assess the student's health problems, giving not only a description of the impairment but also any medical implications for instruction and physical education. When the medical report indicates the student has a health condition requiring health technology, management or treatments including a special diet or medication or that the student needs assistance with activities of daily living, the school nurse or other qualified personnel will conduct a health assessment.
2. If the diagnosed impairment has behavioral implications that research has shown to respond to behavioral interventions, the following procedures shall be conducted:
 - a. a review of the functional behavior assessment which includes a description of the intensity, duration and frequency of occurrence of target behaviors, and a description of antecedent(s) and consequence(s) maintaining the behavior(s). The assessment should be conducted across settings with multiple informants and should include a determination of the function(s) of the behavior(s) of concern;
 - b. a review of documented evidence which shows that scientifically research-based interventions implemented with fidelity did not significantly modify the problem behavior. The intervention(s) shall include operationally defined target behaviors, systematic measurement of the behaviors of concern, establishment of baseline, monitoring of the student's response to the intervention following intervention implementation, or prior to with repeated measures during the intervention. Documentation shall include graphing/charting of the results of the intervention(s), information regarding the length of time for which each intervention was conducted, and any changes or adjustments made to an intervention.
 - c. A review of the appropriateness and effectiveness of the documented intervention(s), and the implementation of additional intervention(s), if deemed necessary. Suspension/expulsion cannot be used as an intervention.
3. The family interview should clarify parental concerns about the student's

educational needs and identify health care providers and/or community resources used in caring for the student's medical or physical needs.

4. Any additional assessments deemed necessary by the evaluation coordinator and the multidisciplinary team.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 910 (May 2009), effective July 1, 2009.

§719. Specific Learning Disability

SLD2

- A. *Definition* – Specific Learning Disability means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. Specific learning disability does not include learning problems that are primarily the result of visual, hearing, or motor disabilities, of mental disability, of emotional disturbance, or of environmental, cultural, or economic disadvantage.
- B. *Criteria for Eligibility* – Criteria 1, 2, 3, and 4 must be met.
 1. The learning problems are not primarily the result of:
 - a. visual, hearing, or motor disability;
 - b. mental disability;
 - c. emotional disturbance;
 - d. cultural factors;
 - e. environmental or economic disadvantage;
 - f. limited English proficiency;
 2. There shall be a comprehensive and documented review of evidence-based intervention(s) conducted with fidelity and for the length of time necessary to obtain sufficient data to determine their effectiveness. Interventions shall be appropriate to the student's age and academic skill deficits and shall address the area(s) of concern presented by the SBLC. The RTI process shall provide sufficient data to determine if the student is making adequate progress in the general educational curriculum. The individual intervention(s) summary must include graphing of the results of the intervention(s), information regarding the length of time for which each intervention was conducted, and any changes or adjustments made to an intervention. If adequate progress is not evident or the interventions require such sustained and substantial effort to close the achievement gap with typical peers, further assessment using standardized achievement measures shall be conducted to determine if the child/youth exhibits a specific learning disability consistent with the definition. The intervention data shall demonstrate that the child/youth does not achieve adequately for his/her age or to meet state approved grade level standards in one or more of 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; or
 - h. mathematics problem solving.
3. To ensure that underachievement in a student suspected of having a specific learning disability is not due to lack of appropriate instruction in reading or math, the evaluation team must document the review of data that demonstrate that prior to, or as part of, the referral process:
- a. the student was provided appropriate instruction in math within the general education classroom, delivered by qualified personnel; and/or
 - b. the student was provided explicit and systematic instruction in reading which includes the essential components of reading instruction: phonics, phonemic awareness, fluency, comprehension, and vocabulary within the general education classroom, delivered by qualified personnel; and
 - c. the general education instruction was delivered by qualified personnel; and
 - d. data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, was provided to the student's parents.
4. To support the findings in 1 through 3 above, evidence of a pattern of strengths and low achievement must be documented as follows:
- a. area of low achievement addressed by the interventions shall be demonstrated by performance greater than one and one-half standard deviations below the mean in grades 1 and 2, or greater than two standard deviations below the mean in grades 3 through 12 using chronological age norms in one or more of the areas listed in 2 a-h above; and
 - b. area of strength as demonstrated by performance no more than one-half standard deviation below the mean in grades 1 and 2 or no more than one standard deviation below the mean in grades 3 through 12 using chronological age norms in one or more of the areas listed in 2 a-h above.
 - c. When the combination of the scientifically research-based intervention outcomes and standardized testing does not result in clearly established strengths and weaknesses, but a preponderance of all data collected supports the team's position that the student is a student with a specific learning disability, a full explanation and justification must be included in the evaluation report.

C. *Procedures for Evaluation* - Conduct all procedures described under §513: Evaluation Components. [Self Review Form](#)

D. *Additional Procedures for Evaluation*

- 1. The student's general education teacher must serve on the team to document the student's academic performance and behavior in the areas of difficulty and to provide documentation for any previous interventions. If the student does not

have a general education teacher, a general education classroom teacher qualified to teach a student-of his or her age must serve on the team.

2. The LEA must ensure that the student is observed in the learning environment which includes the regular classroom setting to document the student's academic performance and behavior in the areas of difficulty. The team may:
 - a. use information from an observation in routine classroom instruction and monitoring of the student's performance that was done before the student was referred for evaluation; or
 - b. conduct an observation of the student's academic performance in a regular classroom after the parental consent has been obtained.
 - c. In the case of a student out of school, a team member shall observe the child in an environment appropriate for a child of that age.
3. The evaluation team shall review and analyze the student's response(s) to scientifically research-based intervention(s) documented by progress monitoring data.
4. Based on the review and analysis in 3 above and the reason(s) for referral, a formal educational assessment shall be conducted by an educational diagnostician or other qualified personnel with training in formal educational assessment. This assessment shall document the pattern of strengths and areas of low achievement.
5. A psychological assessment shall be conducted by a certified school psychologist, when necessary, to rule out a mental disability.
6. A speech/language assessment shall be conducted by a speech/language pathologist when oral expression or listening comprehension is suspected to be an area of impairment. The results of the speech/language assessment may and should be used when considering strengths and areas of low achievement for this exceptionality.
7. When neurological or other health/medical problems are suspected, an assessment shall be conducted by a physician, neurologist, or neuropsychologist.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 911 (May 2009), effective July 1, 2009.

§721. Speech or Language Impairment

SLI3

- A. *Definition* - Speech or Language Impairment means a communication disorder such as stuttering, impaired articulation, language impairment, or a voice impairment that adversely affects a student's educational performance. (Dialectal variations alone do not qualify a student to be classified as having speech or language impairment.)

- B. *Criteria for Eligibility* - Criteria 1, 2, 3 or 4, and 5 must be met for a student to be classified as having a Speech or Language Impairment.
1. Articulation – Non-maturational speech disorder of one or more phonemes characterized by consistent addition, omission or incorrect production of speech sounds, and
 - a. for a student in grade K or above, data from documented intervention(s) conducted by a speech-language pathologist or speech-language pathology assistant that indicates that it is unlikely based on the student's rate of learning, that the student will acquire correct use of targeted phoneme(s) within a reasonable period of time; or
 2. Fluency- Inappropriate rate and time patterning of speech at least five percent of the time, characterized by any of the following: sound and syllable repetitions, sound prolongations, audible or silent blocking, interjections, broken words, circumlocutions, or words produced with an excess of tension and accompanied by ancillary movements that are indicative of stress or struggle, and
 - a. for a student in grade K or above, data from documented intervention(s) conducted by a speech-language pathologist or speech-language pathology assistant that indicates it is unlikely, based on rate of learning, that the student will attain normal fluency within a reasonable period of time.
 - b. a student exhibiting normal non-fluencies occurring during the developmental speech stage does not meet this criterion. Or
 3. Voice - Any inappropriate consistent deviation in pitch, intensity, quality, or other basic phonatory or resonatory attribute, and
 - a. for a student in grade K or above, data from documented intervention(s) conducted by a speech-language pathologist or speech-language pathology assistant that indicates it is unlikely, based on rate of learning, that the student will attain normal voice quality within a reasonable period of time. There must be an assessment conducted by the appropriate medical specialist prior to conducting intervention(s). Or
 4. Language - Impaired receptive or expressive disorder of phonology, morphology, syntax, semantics, or pragmatics.
 - a. A student shall exhibit a deficit of at least 1.5 standard deviations below the mean based on chronological age.
 - b. For a student in grade K or above, data from intervention(s) conducted by a speech–language pathologist or other appropriate personnel that indicates that it is unlikely, based on rate of learning, that the student will acquire targeted language skills that significantly impact the student's educational performance within a reasonable period of time; and
 5. There is **documented** evidence that the impairment significantly interferes with the student's educational performance or significantly interferes with the student's developmental functioning to a degree inappropriate for his or her cultural and social background or overall developmental level.
 - a. Some language difficulties cannot be described as a difference from the norm either because specific norms are not available or because the individual's language is deviant in a way not described adequately by developmental norms. In such cases, language samples should be

analyzed and the language behavior should be documented with deviations described in various settings. An overall picture of language behavior should be described. Students who are non-verbal communicators shall be described, using their augmentative and/or alternative communication needs or modes.

C. *Procedures for Evaluation:* Conduct all procedures described under §513: Evaluation Components. [Self Review Form](#)

D. *Additional Procedures for Evaluation*

1. A speech-language assessment conducted by a licensed speech-language pathologist, which shall include the following procedures:
 - a. the use of standardized test instruments and/or published normative data in speech-language pathology or child development;
 - b. formal or informal analysis of a communication sample;
 - c. additional information gathered from sources such as criterion-referenced materials, communication-related data collected by other professionals (including other pupil appraisal personnel and teachers), and an observation of communication skills;
 - d. an assessment of the structure and function of the oral peripheral mechanism;
 - e. an assessment of language processing, when appropriate;
 - f. assessment of augmentative/alternative communication needs when appropriate; and
 - g. the review and analysis of intervention data for students in grade K or above and when appropriate for children aged 3-5.
2. An educational assessment conducted to review academic skills and to determine whether the speech or language impairment significantly interferes with the student's educational performance. This assessment may be conducted by a qualified pupil appraisal staff member or the student's classroom teacher, when appropriate. The effect of the speech or language impairment on educational performance must be documented in the evaluation report, including an analysis of how the student's disability affects access to and progress in the general curriculum.
 - a. For a student suspected of having an articulation, fluency or voice disability, an educational assessment may be conducted by the classroom teacher.
 - b. For a student suspected of having a language disability, an educational assessment shall be conducted by an educational diagnostician or other qualified pupil appraisal member.
3. A review of the voice assessment conducted by an appropriate medical specialist in all cases in which there is a suspected voice impairment.
4. Information from a parent conference or other communication with the parent(s) to determine whether developmental, health, or other factors may be causing, contributing to, or sustaining the speech or language problem.

5. Medical, psychological, and additional educational assessments shall be requested by the evaluation coordinator, when appropriate to the evaluation of the suspected disability.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 912 (May 2009), effective July 1, 2009.

§723. Traumatic Brain Injury

TBI2

- A. *Definition* - 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 a student's-educational performance. The term applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual, or motor abilities; psychosocial behavior; physical functions; information processing and speech. The term does not apply to brain injuries that are congenital or degenerative, or brain injuries induced by birth trauma.
- B. *Criteria for Eligibility*- Criteria 1 and 2 must be met for a student to be classified as having a Traumatic Brain Injury.
 1. Documented medical evidence of an external insult to the brain causing an impairment in accordance with the definition exists; and
 2. The impaired functioning significantly affects educational performance.
- C. *Procedures for Evaluation*: Conduct all procedures described under §513: Evaluation Components. [Self Review Form](#)
- D. *Additional Procedures for Evaluation*
 1. Medical documentation that there has been an external insult to the brain, which causes an impairment to the cognitive, physical, behavioral or emotional functioning of the individual. A health assessment shall be conducted by a school nurse or other qualified personnel when the medical report indicates the student has an impairment requiring health technology, health management, or health treatments including a special diet or medication, or needs assistance with activities of daily living.
 2. A psychological assessment conducted by a certified school psychologist to determine the status of cognitive, behavioral, and emotional functioning.
 3. A speech/language evaluation conducted by a speech/language pathologist to determine whether there are speech and/or language difficulties.

4. Any other assessment procedures deemed necessary by the multidisciplinary team.

E. *Procedures for Reevaluation*

1. Due to the implications of a traumatic brain injury, a triennial reevaluation should be conducted if there are notable changes in the school setting regarding cognition, language, memory, attention, reasoning, abstract thinking, judgment, problem-solving, sensory, perceptual, or motor abilities, psychosocial behavior, physical functions, information processing, or speech. These changes could be noted by any member of the IEP Team.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 913 (May 2009), effective July 1, 2009.

§725. Visual Impairment

VI2

- A. *Definition* - Visual impairment (including blindness) means an impairment in vision that even with corrections adversely affects a student's educational performance. The term includes both partial sight and blindness.
1. If a student has the two disabilities of deafness and blindness, the student must be classified as having deaf-blindness and not developmental delay or multiple disabilities. The LEA shall notify State Deaf-Blind Census of all students who have both visual and hearing impairments
- B. *Criteria for Eligibility* - Criterion 1 and either 2, 3, 4, or 5 must be met.
1. Loss of vision which significantly interferes with the ability to perform academically and which requires the use of specialized textbooks, techniques, materials, or equipment; and
 2. Visual acuity in the better eye or eyes together with best possible correction of
 - a. Blindness - 20/200 or less distance and/or near acuity, or
 - b. Partial sight - 20/70 or less distance and/or near acuity;
 3. Blindness due to a peripheral field so contracted that the widest diameter of such field subtends an angular distance no greater than 20 degrees and that it affects the student's ability to learn;
 4. Progressive loss of vision, which may in the future affect the student's ability to learn; or
 5. Other blindness resulting from a medically documented condition.
- C. *Additional Procedures for Screening*
1. Orientation and mobility screening will be conducted to screen the student's ability to travel around in his or her environment. (There is a suggested screening checklist in the Appendix.)

D. *Procedures for Evaluation* - Conduct all procedures described under §513: Evaluation Components. [Self Review Form](#)

E. *Additional Procedures for Evaluation*

1. An eye examination conducted by an ophthalmologist or optometrist. When the impairment results from an active disease process, it shall be verified in the report of an ophthalmologist. When this condition is progressive or unstable, the need for a yearly eye examination shall be documented in the integrated report.
2. The educational assessment shall include:
 - a. A functional vision assessment (an assessment of the degree to which the student utilizes vision to operate within the environment).
 - b. An assessment of the student's reading and writing skills, including the student's needs in appropriate reading and writing media (including an assessment of the student's future needs for instruction in Braille or the use of Braille). For the student who is a non-reader, learning medium assessment would involve systematic examination of how he/she obtains information (visually, tactually, and/or auditorally).
3. Based upon the orientation and mobility screening results an assessment, if warranted, shall be conducted by a qualified orientation and mobility instructor for the purpose of identifying the student's ability to travel safely and efficiently in a variety of environments and situations with or without the use of special mobility devices and visual aids.
4. A family interview which addresses the following additional factors.
 - a. The needs of the family in understanding the student.
 - b. The community service agencies currently providing assistance to the family in relationship to the student.
 - c. The expectations of the parents for the student.
 - d. An appraisal of self-help and other functional skills exhibited at home.
5. When the data indicate a severe visual impairment, the evaluation coordinator should consider referring the student to the Statewide Assessment Center for Students with Visual Impairments for assistance in conducting specialized aspects of the evaluation.

F. *Procedures for Reevaluation* - If the visual impairment is progressive or unstable the triennial evaluation must be conducted.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 914 (May 2009), effective July 1, 2009.

Chapter 9 Gifted and Talented – This chapter contains additional procedures required for gifted and talented exceptionality determinations.

§901. Gifted

- A. *Definition* - Gifted children and youth are students who demonstrate abilities that give evidence of high performance in academic and intellectual aptitude.
- B. *Procedures for Screening* G2
1. Sensory screening shall be conducted whenever vision or hearing problems are suspected.
 2. Each LEA shall develop and implement procedures for screening students suspected of being gifted. The screening criteria shall not exceed the criteria for eligibility.
 3. At least two regular school staff members such as the principal/designee, teachers, counselors, pupil appraisal personnel, or other professional staff shall conduct a review of the screening information with the student's teacher. If the student meets the screening criteria, the student shall be evaluated. If the student does not meet the screening criteria, he/she should be exposed to activities that enhance skills and increase knowledge.
- C. *Criteria for Eligibility* [Self Review Form](#)
1. **Preschool and Kindergarten: Criterion a. or b. must be met.**
 - a. The student shall obtain a score at least three standard deviations above the mean on an individually administered test of intellectual abilities appropriately standardized on students of this age and administered by a certified school psychologist or licensed psychologist; or
 - b. The student shall obtain a combined score of at least ten when scores are entered into the cells of the Standard Matrix with at least four points earned on a test of intellectual abilities.
 2. **Grades 1-12: Criterion a., b., or c. must be met.**
 - a. The student shall obtain a score of at least two standard deviations above the mean on an individually or group administered test of intellectual abilities appropriately standardized on students of this age and administered by a certified school psychologist or licensed psychologist; or
 - b. The student shall obtain a score of at least seven when scores are entered into the cells of the Standard Matrix, at least two points of which is earned on the test of intellectual abilities; or
 - c. The student shall obtain a score of at least six when scores are entered into the cells of the Standard Matrix, and a recommendation for classification as gifted is made by pupil appraisal personnel who conducted the evaluation of the student in accordance with the evaluation procedures.

- D. *Procedures for Evaluation* - All tests and other procedures used to evaluate students referred for gifted assessments shall be standardized, non-discriminatory, and appropriate for the cultural background of the students being evaluated. Few, if any, standardized assessment instruments adequately control for the effect of such factors as environmental impoverishment, cultural differences, or the lack of opportunities to learn. It is imperative that such factors be closely attended to in any individual or group assessment of students suspected of being gifted, and given serious consideration by pupil appraisal and special education personnel when determining whether a student is gifted. Any significant discrepancies between formal test results and the student's customary behaviors and daily activities, or any discrepancies among test results should be examined closely during the evaluation and addressed in the evaluation report. The recommendation of the multidisciplinary team either to classify or not to classify a student as gifted must be based on a thorough evaluation of the student's abilities.
1. **Preschool and Kindergarten:** The individual evaluation shall include at a minimum the following procedures.
 - a. An individual assessment of intellectual abilities administered by a certified or licensed psychologist using an instrument or instruments appropriately standardized for students of this age.
 - b. An individual assessment of reading and mathematical skills using an achievement test standardized at the first grade level, conducted by an educational diagnostician or other qualified pupil appraisal member.
 - c. An interview with the student's parent(s) conducted by a school social worker or other qualified examiner.
 - d. An interview with the teacher(s) of enrolled students.
 2. **Grades 1 through 12:** An individual evaluation shall include at a minimum the following procedures.
 - a. An assessment of intellectual abilities, individually or group administered, by a certified or licensed psychologist using nondiscriminatory assessment procedures.
 - b. Additional assessments in the areas listed below, individually or group administered, by qualified pupil appraisal personnel. District wide test scores and scores obtained from screening instruments shall **not** be used in the Standard Matrix as part of the individual evaluation.
 - i. Total Reading
 - ii. Total Mathematics
 - c. An interview with the student's parent(s) by a school social worker or other qualified examiner.
 - d. An interview with the student's teacher(s).

E. STANDARD MATRIX

Points	1	2	3	4
	1.0 ≤ 1.49 SD	1.5 ≤ 1.99 SD	≥ 2.0 SD	≥ 2.5 SD (Preschool & K only)
Intellectual Abilities				
Achievement in Reading				
Achievement in Math				

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
 HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 914 (May 2009), effective July 1, 2009.

§903. Talented

T2

- A. *Definition* - Talented means possession of measurable abilities that give clear evidence of unique talent in visual or performing arts or both.
- B. *Procedures for Screening*
1. A student is identified by his or her regular or special education teacher, as having artistic needs that are not being met in the regular class in which the student is enrolled.
 2. The regular or special education teacher completes the appropriate screening instrument (Visual Arts, Music, or Theatre).
 3. Each LEA shall develop and implement procedures for screening students suspected of being talented in visual arts, music, and/or theatre. At a minimum, the state approved talent screening form must be used.
 4. Each item receiving a score of four or above on the rating scale must be documented with examples, or samples of the student's work, whichever is more appropriate.

5. The student must score in the range of 33-35 on the visual arts screenings instrument, or 33-35 on the music instrument or 48-50 on the theatre-screening instrument to warrant an evaluation.
6. If the student passes the screening criteria described above, the student shall be referred for a talented evaluation.

C. *Criteria for Eligibility* - Criteria 1 and 2 must be met for a student to be classified as Talented. [Self Review Form](#)

1. The student must meet local screening criteria.
2. Creative abilities in visual and/or performing arts grades K-12 must be demonstrated. Scores shall be reported exactly with no rounding allowed.
 - a. **Music:** For grades K - 6: criteria (i) or (ii), plus (iii) and (iv) or (v) must be met. For grades 7- 12: criteria (iii) and (iv) or (vi) must be met.
 - i. For grades K-3: the student must obtain a score of 35-40 on the State-approved music evaluation instruments.
 - ii. For grades 4-6: the student must obtain a score of 30-35 on the State- approved music evaluation instrument.
 - iii. The student must obtain a score of 18-20 on the music interview scale.
 - iv. For grades K-12: the student must obtain a score of 27-30 on the instrumental music audition scale, if performing prepared selections, or a score of 23-25, if performing improvisations.
 - v. For grades K-6: the student must obtain a score of 33-35 on the vocal music audition scale.
 - vi. For grades 7-12: the student must obtain a score of 47-50 on the vocal music audition scale
 - b. **Theatre:** Criteria (i) and (ii), or (i) and (iii) must be met.
 - i. The student must obtain a score of 12-15 on the theatre interview scale.
 - ii. For grades K-6: the student must obtain a score of 42-45 on the theatre audition scale.
 - iii. For grades 7-12: the student must obtain a score of 47-50 on the theatre audition scale.
 - c. **Visual Arts:** Criteria (i) and (ii), or (iii) and (iv) must be met.
 - i. For grades K-6: the student must obtain a score of 12-15 on the *Art Recognition Test*.
 - ii. For grades K-6: the student must obtain a score of 26-30 on the *Narrative Drawing Test*.
 - iii. For grades 7-12: the student must obtain a score of 26-30 on the *Design Test*.
 - iv. For grades 7-12: the student must obtain a score of 42-45 on the *Drawing Test*.
3. When the separate evaluator scores are tallied, it is important to note that the scores, if not a whole number, shall not be rounded to determine eligibility.
4. State-approved art, music, and theatre screening instruments and evaluation instruments are located in the *Talent Evaluation Kit*.

D. *Procedures for Evaluation*

1. An assessment of performance conducted simultaneously, independently, and without discussion of results by at least two State-trained evaluators in the appropriate arts area, using State-approved procedures and instruments.
2. A designated pupil appraisal evaluation coordinator shall attend the entire performance in 1 above and integrate all evaluation results into a report that indicates whether the student is talented, consistent with the criteria for appropriate classification of talented.
3. If the evaluation is conducted at a facility other than the student's school and the student does not have transportation to the off-campus site, it is the LEA's responsibility to provide transportation for that student to the evaluation site.
4. The evaluation coordinator shall integrate all evaluation results into a report that indicates whether the student meets criteria for the appropriate classification of talented.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 915 (May 2009), effective July 1, 2009.

Chapter 11. Reevaluation Information

§1101. Required Reevaluations

RI2

- A. A reevaluation of each student with an exceptionality must be conducted when one of the following events occurs:
1. when the LEA determines that the educational or related services needs, including improved academic achievement and functional performance of the student, warrant a reevaluation;
 2. when the student's teacher or parent requests a reevaluation;
 3. when a significant change in placement is proposed, which means moving the student to a more restrictive environment where the student will be in the regular class less than 40 percent of the day or, for a child age four through five, in the regular early childhood program less than 40 percent of the time; or
 4. when a student is no longer suspected of having an exceptionality. This includes students having the single exceptionality of speech and language impairment.
- B. The reevaluation described in A above is not required before the termination of a student's eligibility for special education and related services due to graduation from high school with a regular high school diploma, or due to exceeding the age eligibility for FAPE under State law.
- C. A reevaluation
1. must occur at least once every three years, unless the parent and the LEA agree that a reevaluation is unnecessary.
 - a. A triennial evaluation may be necessary if there are not adequate data to determine whether any additions or modifications to the special education and related services are needed to enable the student to meet the measureable annual goals in the IEP and to participate, as appropriate, in the general education curriculum.
 - b. A triennial evaluation may be necessary for students with developmental delays, hearing impairments, traumatic brain injury, or visual impairments. Refer to the specific disabilities in Chapter 7 for further guidance.
 - c. For students whose only exceptionality is gifted or talented, the reevaluation may be accomplished through the IEP process at the time of the IEP review meeting. Informed parental consent for the reevaluation must be sent to parents prior to the IEP review meeting in which the reevaluation will be conducted. If no concerns are evident with the student's current program, no evaluation report is required. This discussion will be documented on the IEP form, and a copy of the IEP form will be forwarded to pupil appraisal personnel.

2. may not occur more than once a year, unless the parent and the LEA agree otherwise.

D. An LEA is not required to conduct a reevaluation of an exceptional student who transfers with a current evaluation into its jurisdiction from another jurisdiction in Louisiana. Should the receiving LEA question the accuracy or the appropriateness of the student's classification, a reevaluation may be initiated after an IEP has been developed and the student is receiving special education and related services.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 916 (May 2009), effective July 1, 2009.

§1103. Parental Consent for Reevaluations **See §109. C** PCR

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 917 (May 2009), effective July 1, 2009.

§1105. Reevaluation Procedures [Self Review Form](#)

- A. When a reevaluation is conducted, an appropriate evaluation coordinator will be assigned. The evaluation coordinator or other designated personnel will notify parents, teachers, related service personnel, an official designee of the LEA, and other appropriate personnel of the purpose of the upcoming reevaluation; and will ensure that procedures below are followed.
1. Obtain informed parental consent (See Parental Consent);
 2. review evaluations and information provided by the parents of the student;
 3. review information provided by the student, when appropriate;
 4. review educational history, including all previous evaluation reports;
 5. review progress monitoring data provided by the teacher(s) and related service providers to determine the student's involvement and progress in the general education curriculum;
 6. review or conduct a functional behavioral assessment, if behavior is a concern;
 7. review data based on observations conducted by teachers and related service providers;
 8. complete any reevaluation requirements for the specific disabilities noted in §1101.C1b; and
 9. review transitional needs as part of all reevaluations occurring after the student's 15th birthday.
- B. On the basis of this review and input from the student's parents, identify what additional data, if any, are needed to determine:
1. whether the student continues to have the same exceptionality and the educational needs of the student;
 2. the present levels of academic achievement and related developmental needs of the student;
 3. whether the student continues to need special education and related services;

- and
4. whether any additions or modifications to the special education and related services are needed to enable the student to meet the measurable annual goals set out in the student's IEP and to participate, as appropriate, in the general education curriculum.
- C. This review may be conducted without a meeting.
- D. The LEA shall administer such assessments and other evaluation measures as may be needed to produce the data identified under paragraph A of this section.
- E. Based on the review described in A and B above, when it is determined that no additional data are needed to determine whether the student continues to be a student with an exceptionality and to determine the student's educational needs, the LEA shall notify the parent of:
1. this determination and the reasons for the determination; and
 2. the right of the parents to request an assessment to determine whether the student continues to be a student with an exceptionality, and to determine the student's educational needs.
 3. The LEA is not required to conduct the assessment described in E2 of this section unless requested to do so by the student's parents.
 4. This notification of the determination and the reasons for the determination provides documentation that a reevaluation occurred.
- F. Based on the review described in A and B above, when it is determined that additional data are needed or when there are new concerns regarding the student's progress toward meeting the measurable annual goals, the procedures described below shall be followed.
1. When a different exceptionality is suspected, initial criteria and procedures for the suspected exceptionality shall be followed. Scientifically research-based interventions shall be conducted by the special education provider or teacher in collaboration with pupil appraisal personnel.
 2. When additional data are needed, the evaluation coordinator shall ensure that all required procedures are followed.
- G. To document the findings in F above, the reevaluation report shall include at a minimum the following procedures:
1. the reason for the need to conduct this reevaluation;
 2. documentation of the procedures required in A1-9;
 3. if there were new concerns, documentation of scientifically research-based interventions and any additional data that addressed the concerns;
 4. if a new exceptionality was suspected, documentation of additional assessments and a summary of findings.
 5. documentation of a systematic observation in the environments in which the student is receiving services;
 6. documentation of conclusions of the reevaluation including the exceptionality, impairment or condition, and the determinations required in B above.

7. documentation of reevaluation participants and an explanation of all extensions, including documentation of parental approval, when necessary.
8. documentation of the parents' participation in the determination decision of the new exceptionality, when appropriate.
9. signatures of the team whose conclusions are accurately reflected in the report.
 - a. If a participating team member disagrees with the conclusion(s) in the report, that person may submit a separate signed dissenting opinion stating the disagreement, giving supporting data and conclusion(s)
10. results of the reevaluation documented and disseminated to the supervisor of special education or designee, parent(s), and school.

H. Timeline Extensions

1. Parentally Approved Extension - If the LEA is making sufficient progress to ensure a prompt completion of the reevaluation but needs extended time to assess the student in all areas of the exceptionality, the parent and the LEA may agree to a specific time when the evaluation will be completed.
2. Extensions may be taken on triennial reevaluation provided that the reevaluation is completed on or prior to the three year anniversary date.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 917 (May 2009), effective July 1, 2009.

§1301. Overview

- A. *Special services* as used in this chapter are included in the term *special education*, which means specially designed instruction, at no cost to the parents, to meet the unique needs of a student with a disability, including instruction conducted in the classroom, in the home, in hospitals and institutions, and in other settings. They include assistive technology when required as part of the student's special education; instruction in physical education (including special physical education, adapted physical education, movement education, and motor development); speech/language pathology services when the service is considered special education rather than a related service; travel training; and vocational education.
1. *At no cost* means that all specially-designed instruction is provided without charge, but does not preclude incidental fees that are normally charged to nondisabled students or to their parents as a part of the regular education program.
 2. *Specially-designed instruction* means adapting, as appropriate, to the needs of an eligible student, the content, methodology, or delivery of instruction to address the unique needs of the student that result from the student's disability; and ensuring access of the student to the general curriculum, so that he or she can meet the educational standards within the jurisdiction of the LEA that apply to all students.
- B. Specific criteria for eligibility for adapted physical education and assistive technology are immediately following this overview. Eligibility criteria for other special services are based on written documentation of need. When specific criteria to determine eligibility for other special services become necessary, they will be added to the document.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
 HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 918 (May 2009), effective July 1, 2009.

§1303. Adapted Physical Education

APE

- A. *Definition* - Adapted Physical Education is a direct instructional service for school aged students with disabilities who may not safely or successfully engage in unrestricted participation in the vigorous activities of the regular physical education program on a full-time basis. It is also a specially-designed program for children with disabilities aged three through five, who meet the criteria below.
- B. *Criteria for Eligibility*
1. Children aged three through five years
 - a. Evidence that the student meets 69 percent or less of the State identified motor skills for the level appropriate to the student's chronological age

- using the LA Motor Assessment for Preschoolers (LAMAP).
 - i. Students meeting 45 percent to 69 percent of the skills shall be identified as having motor deficits in the mild range.
 - ii. Students meeting 20 percent to 44 percent of the skills shall be identified as having motor deficits in the moderate range.
 - iii. Students meeting 19 percent or less of the skills shall be identified as having motor deficits in the severe range.
 - b. Corroboration of the motor deficit and the need for adapted physical education provided by the evaluator based upon observation of the student.
- 2. Students aged six through twenty-one
 - a. Evidence that the student meets 69 percent or less of the State-identified physical education competencies, using the *Competency Test for Adapted Physical Education (CTAPE)*, for the grade level appropriate to the student's chronological age.
 - i. Students meeting 45 percent to 69 percent of the competencies shall be identified as having motor deficits in the mild range.
 - ii. Students meeting 20 percent to 44 percent of the competencies shall be identified as having motor deficits in the moderate range.
 - iii. Students meeting 19 percent or less of the competencies shall be identified as having motor deficits in the severe range.
 - b. Corroboration of the motor deficit and the need for adapted physical education provided by the evaluator based upon observation of the student.
- 3. Students classified as having Autism, Emotional Disturbance, Traumatic Brain Injury, or Other Health Impairment.
 - a. Documented evidence that the student is unable to participate in a regular physical education class as a result of autism, a serious emotional disorder, brain injury, or a chronic or acute health condition.
 - b. Corroboration of the condition and the need for adapted physical education provided by the evaluator, based upon observation of the student.

C. *Procedures for Evaluation*

- 1. For students aged three through five years: An assessment of motor abilities using the LaMAP (Louisiana Motor Assessment for Preschoolers) conducted by a certified adapted physical education teacher.
- 2. For students aged six through twenty-one: An assessment of grade/age level physical education competencies using the CTAPE conducted by a certified adapted physical education teacher.
- 3. For students with a disability of Autism, Emotional Disturbance, Traumatic Brain Injury or Other Health Impairments: Written documentation verifying a significantly reduced performance that prevents safe and successful participation

in a regular physical education class. For students with Autism or Emotional Disturbance, the documentation must be provided by a certified school psychologist, licensed psychologist, or psychiatrist and an adapted physical education evaluator. For students with Other Health Impairments or Traumatic Brain Injury, the documentation must be provided by a physician and an adapted physical education evaluator.

4. Observation of the student in both structured (e.g. one-on-one with the evaluator) and unstructured (e.g. free play, recreational) settings. These observations should focus on, but not be limited to, those motor deficits identified by the motor assessment instrument.
5. Recommendations for specific types of activities and/or adaptations necessary to meet the physical education needs of the student should be included in the evaluation report.
6. The provision of services shall be determined at the IEP Team meeting, using the recommendations of the adapted physical education evaluator and the results of the motor assessment. The continuation of services shall be determined by the IEP Team at the annual IEP review using the recommendations of the adapted physical education teacher.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 918 (May 2009), effective July 1, 2009.

§1305. Assistive Technology

AT

- A. *Definition* - Assistive technology services means any service that directly assists a student with a disability in the selection, acquisition, or use of an assistive technology device. Included in these services are the following: AT1
1. An evaluation of the needs of a student with a disability, including a functional evaluation of the student in the student's customary environment.
 2. The purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices for students with disabilities.
 3. The selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing of assistive technology devices.
 4. The coordinating and using of other therapies, interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs.
 5. The training or technical assistance necessary for a student with a disability, or where appropriate, for the student's family.
 6. The training or technical assistance for professionals (including individuals providing education or rehabilitation services), employers, or other individuals who provide services to, employ, or who are otherwise substantially involved in the major life functions of that student.
 7. *Assistive technology device* is any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, used to

increase, maintain, or improve the functional capabilities of a student with a disability.

- a. Assistive Technology encompasses a broad range of devices from very simple (“low technology”) to very sophisticated (“high technology”).

B. *Criteria for Eligibility*

1. Criteria a. and b. must be met.
 - a. The student must be classified and eligible for special educational services; and
 - b. There is documented evidence that assistive technology is required within the educational setting.
2. Each LEA shall ensure that assistive technology devices and/or assistive technology services are made available to a student with a disability, if required, as a part of the student’s special education, related services, or supplementary aids and services. Consideration should be given for every student with a disability who is eligible for an individualized education program as to whether the student requires assistive technology devices and/or services to receive an appropriate education.

C. *Procedures for Evaluation*

1. The assistive technology evaluation shall be conducted by qualified professional(s) with the level of expertise necessary to address the specific areas of concern. These professionals may include, but are not limited to audiologists, occupational therapists, physical therapists, speech/language pathologists, teachers of the visually impaired, adapted physical education teachers, and assistive technology personnel.
 - a. An observation of the student interacting with parents, teachers or peers in the educational environment during daily activities. The utilization of observational tools such as interaction checklists, criterion-based instruments, task analysis, and needs assessment, etc., is recommended.
 - b. An interview with the primary care providers and classroom teacher(s) to determine what intervention strategies for assistive technology devices and services, if any, have already been attempted or provided and what the results were.
 - c. An assessment of the student’s current mobility, seating, positioning, and neuromotor ability, if applicable, to determine selection techniques and the method(s) of access for assistive technology as well as to address further seating, positioning, and mobility needs.
 - d. The results of an assessment with a variety of assistive technology devices that would be appropriate for the student. Trials with assistive

technology devices could include options for both low technology and high technology solutions. The student and family should be involved in this process to ensure the likelihood that the technology that is selected will be used.

2. Recommendations should also include personnel who will need training and technical assistance to work with the student.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 919 (May 2009), effective July 1, 2009.

§1501. Overview

- A. *Related services* means transportation and such developmental, corrective, and other supportive services as are required to assist a student with an exceptionality to benefit from special educational services. Related services include speech/language pathology and audiological services, school psychological services, physical and occupational therapy, recreation including therapeutic recreation, early identification and assessment of disabilities in students, counseling services including rehabilitation counseling, assistive technology devices and services, orientation and mobility services, and medical services for diagnostic or evaluation purposes. The term also includes school health services, social work services in schools, and parental counseling and training.
- B. When the need for such services is indicated by the referral concerns during the evaluation process, the evaluation coordinator shall ensure that appropriate and qualified personnel participate in the evaluation process. The criteria for eligibility for school health services, occupational therapy, orientation and mobility services, physical therapy, school psychological, school social work and speech/language pathology services immediately follow this overview. Eligibility criteria for other related services are based on written documentation of need. When specific criteria to determine eligibility for other related serves are necessary, they will be added to the document.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 919 (May 2009), effective July 1, 2009.

§1503. Occupational Therapy

- A. *Definition - Occupational therapy* includes the following services:
 - 1. evaluating students with disabilities by performing and interpreting tests and measurements and/or clinical observations of neurophysiological, musculoskeletal, sensorimotor functions and daily living skills;
 - 2. planning and implementing treatment strategies for students based on evaluation findings;
 - 3. improving, developing, restoring or maintaining functions impaired or lost through illness, injury, or deprivation;
 - 4. improving or maintaining ability to perform tasks for independent functioning when functions are impaired or lost; and
 - 5. administering and supervising therapeutic management of students with disabilities, recommending equipment and providing training to parents and educational personnel.
- B. *Criteria for Eligibility*
 - 1. Criteria a and b below must be met.
 - a. The student is classified and eligible for special education services. There

is documented evidence that occupational therapy is required to assist the student to benefit from the special education services.

- b. The student demonstrates a motor impairment in one of the following categories: Developmental, Motor Function, or Sensorimotor.
 - i. Developmental - Students (excluding those with neurophysiological impairments) who demonstrate a fine motor, visual motor, oral motor, or self help delay as follows:
 - (a). Students with disabilities ages 3y0m - 5y6m - Students who demonstrate a fine motor, visual motor, oral motor, or self help delay greater than 1 standard deviation below functional abilities as measured by an appropriate assessment instrument. Some instruments yield a development age score instead of a standard score. In such cases, a student must demonstrate a delay of at least 6 months below functional abilities. *Functional abilities* are defined as the student's overall educational performance in the areas of cognition, communication, social, self help, and gross motor.
 - (b). Students with disabilities ages 5y7m - 9y11m - Students who demonstrate a fine motor, visual motor, oral motor or self help delay greater than 1 standard deviation below functional abilities as measured by an appropriate assessment instrument. Some instruments yield a developmental age score instead of a standard score. In such cases, a student must demonstrate a delay of at least 12 months below functional abilities. *Functional abilities* are defined as the student's overall educational performance in the areas of cognition, communication, social, self help, and gross motor.
 - (c). Students with disabilities ages 10y0mo - 21y - Students who demonstrate a fine motor, visual motor, oral motor or self help delay greater than 1 standard deviation below functional abilities as measured by an appropriate assessment instrument. Some instruments yield a developmental age score instead of a standard score. In such cases, a student must demonstrate a delay of at least 18 months below functional abilities. *Functional abilities* are defined as the student's overall educational performance in the areas of cognition, communication, social, self help, and gross motor.
 - ii. Motor Function - According to clinical and/or behavioral observations (which may include, but are not limited to available current medical information, medical history and/or progress reports from previous therapeutic intervention), the student exhibits neurophysiological limitations or orthopedic limitations, that affect his or her physical functioning in the educational setting. These limitations might include abnormalities in the area(s) of fine motor,

visual motor, oral motor, or self help skills. In addition

to OT assessment, current student information must indicate one of the following abilities.

- (a). An ability to improve motor functioning with occupational therapy intervention;
 - (b). An ability to maintain motor functioning with therapeutic intervention (if the student maintains motor functioning without therapeutic intervention, OT would not be required in the educational setting); or
 - (c). An ability to slow the rate of regression of motor functioning with therapeutic intervention (if the student has a progressive disorder).
- iii. Sensorimotor - According to clinical behavior observation and/or an appropriate assessment instrument, the student exhibits an inability to integrate sensory stimulus effectively, affecting his or her capacity to perform functional activities within the educational setting. These activities might include abnormalities in the area of fine motor, visual motor, oral motor, self-help or sensory processing (sensory awareness, motor planning and organization of adaptive responses). In addition to OT assessment, current student information must indicate an ability to improve functional activity performance through OT intervention.

C. *Procedures for Evaluation*

1. The assessment shall be conducted by a licensed occupational therapist and shall include at a minimum the following procedures.
 - a. A review of available medical and educational information, environmental concerns, anecdotal records and observation of motor skills which document the specific concerns causing the referral.
 - b. An assessment of motor abilities.
2. For students ages 6 through 21, the assessment should be conducted in the educational environment.
3. The occupational therapist's assessment should be designed to answer the questions listed below.
 - a. Does this problem interfere with the student's ability to benefit from his or her educational program?
 - b. Is there a likely potential for change in the student's educational functioning if he/she receives therapeutic intervention?
4. The provision of services shall be determined at the IEP Team meeting, using the input of the occupational therapist and the results and recommendations of the therapy assessment. The continuation of services will be determined at the

annual IEP review using input from the therapist.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 920 (May 2009), effective July 1, 2009.

§1505. Orientation and Mobility

OM

- A. *Definition - Orientation and Mobility* means services provided to blind or visually impaired students by a university or agency trained and certified professional to enable those students to attain systematic orientation to and safe movement within their environment in school, home and community. These include teaching students appropriate skills.
1. Spatial and environmental concepts and use of information received by the senses (such as sound, temperature and vibrations) to establish, maintain, or regain orientation and line of travel (e.g. using sound at a traffic light to cross the street).
 2. Use of the long cane as a tool to supplement visual travel skills or as a tool to safely negotiate the environment for students with no available travel vision.
 3. The understanding and use of one's remaining vision and distance low vision aids.
 4. Other concepts, techniques, and tools.
- B. *Criteria for Eligibility*
1. Criteria a and b must be met.
 - a. The student must be classified and eligible under federal or state law as an individual with a visual impairment; and
 - b. There is documented evidence that orientation and mobility services are required to enable the student to benefit from special education.
- C. *Procedures for Evaluation* - The assessment shall be conducted by an orientation and mobility instructor recognized by the State Department of Education. The assessment shall include the following information.
1. An assessment of the student's ability to travel safely and efficiently in a variety of environments and situations with or without the use of special mobility devices and visual aids.
 2. A listing of the student's observed strengths and weaknesses in the area of travel safety and mobility skills.
 3. Recommendations concerning the student's demonstrated need for formal

orientation and mobility training within the specific areas. These

recommendations should be addressed by the IEP Team in planning the student's educational program.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 921(May 2009), effective July 1, 2009.

§1507. Physical Therapy

PT

A. *Definition - Physical therapy* includes the following services:

1. evaluating students with disabilities by performing and interpreting tests and measurements and/or clinical observations of neurophysiological, musculoskeletal, cardiovascular, respiratory, and sensorimotor functions;
2. planning and implementing treatment strategies for students based on evaluation findings;
3. improving, maintaining and/or slowing the rate of regression of the motor functions of a student to enable him/her to function in his educational environment; and
4. administering and supervising therapeutic management of students with disabilities, recommending equipment and providing training to parents and educational personnel.

B. *Criteria for Eligibility*

1. Criteria a. and b. below must be met.
 - a. The student is classified and eligible for a special education program. There is documented evidence that physical therapy is required to assist the student to benefit from special education.
 - b. The student demonstrates gross motor impairment in either the Developmental or Motor Function category.
2. Developmental - Students (excluding those with neurophysiological impairments) who demonstrate a gross motor delay are as follows:
 - a. Students with disabilities ages 3y0m - 5y 6m - Students who demonstrate a gross motor delay of 6 months or more below level of functional abilities as measured by an appropriate assessment instrument. Functional abilities are defined as the student's overall educational performance in the areas of cognition, communication, social, self help, and fine motor.
 - b. Students with disabilities ages 5y7m - 9y11m - Students who demonstrate a gross motor delay of 12 months or more below level of functional abilities as measured by an appropriate assessment instrument. Functional abilities are defined as the student's overall educational performance in the areas of cognition, communication, social, self help, and fine motor.
 - c. Students with disabilities ages 10y0 m - 21y - Students who demonstrate a gross motor delay of 18 months or more below level of functional abilities as measured by an appropriate assessment instrument.

Functional abilities are defined as the student's overall educational performance in the areas of cognition, communication, social, self help, and fine motor.

3. Motor Function - According to clinical and/or behavioral observations--which may include but are not limited to available current medical information, medical history and/or progress reports from previous therapeutic intervention--the student exhibits neurophysiological, orthopedic, cardiovascular, respiratory, or sensorimotor limitation that affect his or her gross motor functioning in the educational setting.
 - a. In addition to PT assessment, current student information must indicate one of the following:
 - i. An ability to improve motor functioning with physical therapy intervention.
 - ii. An ability to maintain motor functioning with therapeutic intervention (if the student maintains motor functioning without therapeutic intervention, PT would not be required in the educational setting).
 - iii. An ability to slow the rate of regression of motor function with therapeutic intervention (if the student has a progressive disorder).

C. *Procedures for Evaluation*

1. The assessment shall be conducted by a licensed physical therapist and shall include at a minimum the following procedures.
 - a. A review of available medical and educational information, environmental concerns, anecdotal records and observation of motor skills that document the specific concerns causing the referral.
 - b. An assessment of gross motor abilities.
 - i. For students' ages 6-21, the assessment should be conducted in the educational environment.
2. The physical therapy assessment shall be designed to answer the following questions:
 - a. Does this problem interfere with the student's ability to benefit from his or her educational program?
 - b. Is there a potential for change in the student's educational functioning if he/she receives therapeutic intervention?
3. The provision of services shall be determined at the IEP Team meeting using the input of the therapist and the results and recommendations of the therapy assessment. The continuation of services will be determined at the annual IEP review using input from the therapist.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 921 (May 2009), effective July 1, 2009.

§1509. School Health Services and School Nurse Services

SNS

- A. *Definition - School Health and School Nurse services are specially designed for a student who has a disability (defined under Federal and State statutes), having a special health need, and who is unable to participate in his or her educational program without the use of such health services, which may include, among others-- health treatments, technology, and/or management.*
1. The school health services referred to in this section are those determined through a health assessment during the evaluation process.
- B. *Criteria for Eligibility*
1. Criteria a, b, and c below must be met.
 - a. The student must be classified and eligible, under Federal or State law, as an individual with a disability.
 - b. There is documented evidence that special health services are required within the educational setting to enable the student to benefit from the special education program.
 - c. A prescription from a physician or dentist licensed to practice in Louisiana or adjacent state prescribes the health treatment, technology, and/or health management that the student must have in order to function within the educational environment; or there is a documented need for a modification of his or her activities of daily living.
- C. *Procedures for Evaluation - When there is evidence of the need for health technology, treatment and/or management, the assessment of a student by a school nurse or other qualified personnel shall include at a minimum the following procedures:*
1. An assessment of the student's health status conducted in the educational setting.
 2. An analysis and interpretation of the special health service needs, health status, stability, complexity of the service, predictability of the service outcome, and risks that may be involved with improperly performed services.
 3. The provision of services through the development of the Individualized Health Plan will be determined at the IEP Team meeting, using the input from the school nurse or other qualified personnel and the results and recommendations of the health assessment. The continuation of services will be determined at the annual IEP review using input from the school nurse.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 922 (May 2009), effective July 1, 2009.

§ 1511. School Psychological Services

SPS2

- A. *Definition- School Psychological Services include but are not limited to:*
1. administering psychological and educational tests, and other assessment

- procedures;
2. interpreting assessment results;
3. obtaining, integrating, and interpreting information about student behavior and conditions relating to learning (which may also include assisting in the development of academic intervention strategies, progress monitoring, evaluating intervention and service delivery outcomes, conducting functional behavior assessments, and conducting program evaluations);
4. consulting with other staff members in planning school programs to meet the special educational needs of students as indicated by psychological tests, interviews, direct observation, and behavioral evaluations;
5. planning and managing a program of psychological services, including psychological counseling for students and parents (which may also include implementing and/or monitoring interventions, conducting social skills training, anger management/conflict resolution training, study skills training, substance abuse prevention, crisis prevention and intervention, parent skills training, and coordinating services with other community agencies.); and
6. assisting in developing positive behavioral intervention strategies.

B. *Criteria for Eligibility*

1. Criteria a. and b. below shall be met.
 - a. The student is classified and eligible for special education services.
 - b. There is documented, observable and measurable evidence that school psychological services are necessary for the student to benefit from special education.

C. *Procedures for Evaluation*

1. The assessment shall be conducted by a certified school psychologist and shall include at a minimum the following procedures:
 - a. a review, analysis and determination of the appropriateness of evidence documenting the specific referral concern(s);
 - b. a systematic observation in the setting(s) in which the concern is manifested; and
 - c. any additional procedures judged necessary to determine if the area of concern interferes with the student's ability to benefit from his or her educational program.
2. The assessment should be designed to provide recommendations for interventions, strategies and/or services necessary to improve the student's educational performance. Such recommendations should take into account the diverse activities involving direct and indirect service provision that comprise the delivery system described in A above. These activities complement one another and therefore are most accurately viewed as being integrated and coordinated rather than discrete services. The provision of services shall be determined at the IEP Team meeting, using the results and recommendations of the assessment. The continuation will be determined at the annual IEP review using input from the school psychologist.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 922 (May 2009), effective July 1, 2009.

§1513. School Social Work Services

SSWS2

- A. *Definition - Social Work Services in schools* include but are not limited to:
1. preparing a social or developmental history on a student with a disability;
 2. providing group and individual counseling with the student and the family. (This may include linking them to community resources, helping them to actively participate in the student’s educational process, and providing crisis intervention services in the event of a death, illness, or community trauma. The school social worker shall maintain adequate safeguards for the privacy and confidentiality of information, and maintain data that is relevant to planning management and evaluation of school social work services.)
 3. working in partnership with parents and others on those problems in a student’s living situation (home, school, and community) that affect the student’s adjustment in school. (The school social worker will advocate for services to be provided in the context of multicultural understanding and competence, as well as work collaboratively as a part of an interdisciplinary team that will enhance the student’s academic performance.)
 4. mobilizing school and community resources to enable the student to learn as effectively as possible in his or her educational program; and
 5. assisting in developing positive behavioral intervention strategies to address behaviors of concern that will enhance the student’s ability to benefit from his or her educational experience.
- B. *Criteria for Eligibility*
1. Criteria a. and b. below must be met.
 - a. The student is classified and eligible for special education services.
 - b. There is documented, observable and measurable evidence that school social work services are necessary for the student to benefit from special education.
- C. *Procedures for Evaluation*
1. The assessment shall be conducted by a qualified school social worker and shall include the supporting documentation of the psycho-social stressors (see Appendix) being experienced by the student and/or his family and will include at a minimum the following procedures:
 - a. a review, analysis and determination of the appropriateness of evidence documenting the specific referral concern;
 - b. a family interview;
 - c. an interview with the student;

- d. interview(s) with the students teacher(s); and
 - e. review of available mental health and/or health records.
2. The assessment should be designed to provide recommendations for interventions, strategies and/or services necessary to improve the student's educational performance. Such recommendations should take into account the diverse activities involving direct and indirect service provision that comprise the delivery system described in A above. These activities complement one another and therefore are most accurately viewed as being integrated and coordinated rather than discrete services. The provision of services shall be determined at the IEP Team meeting, using the results and recommendations of the assessment. The continuation of services will be determined at the annual IEP review using input from the school social worker.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
 HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 923 (May 2009), effective July 1, 2009.

§1515. Speech-Language Pathology Services SLPS3

- A. *Definition - Speech/Language Pathology Services* include:
- 1. identification of students with speech or language impairments;
 - 2. diagnosis and appraisal of specific speech or language impairments;
 - 3. referral for medical or other professional attention necessary for the habilitation of speech or language impairments, as appropriate;
 - 4. provision of speech and language services for the habilitation of communication or prevention of communication impairments;
 - 5. assessment and interventions for augmentative/alternative communication; and
 - 6. counseling and guidance of parents, students, and teachers regarding speech and language impairments.
- B. *Criteria for Eligibility*
- 1. Criteria a, b, and c below must be met.
 - a. The student is classified as a student having a disability other than Speech or Language Impairment.
 - b. The student meets the criteria for eligibility for Speech or Language Impairment.
 - c. There is documented evidence that speech/language pathology services are required to assist the student to benefit from the special education services.
 - 2. Non-verbal students with disabilities who have augmentative/alternative communication needs may not be denied speech/language pathology services as a related service because of an inability to evaluate using traditional methods.
- C. *Procedures for Evaluation*

1. The assessment shall be conducted by following the procedures for evaluation under Speech or Language Impairment.
2. The speech/language assessment shall be designed to answer the following questions:
 - a. Does this problem interfere with the student's ability to benefit from his or her educational program?
 - b. Is there a likely potential for change in the student's educational functioning if he/she receives therapeutic intervention?
3. The provision of services shall be determined at the IEP Team meeting using the input of the therapist and the results and recommendations of the speech/language assessment. The continuation of services shall be determined at the annual IEP review using input of the therapist.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35: 923 (May 2009), effective July 1, 2009.

APPENDIX A

This Appendix provides clarification of terms and optional forms that may be used to assist in the evaluation process.

Business day - Monday through Friday, except for Federal and State holidays (unless holidays are specifically included in the designation of business day). Business days are identified by the SER calendar, which is distributed annually.

Day – refers to a calendar day unless otherwise indicated as business day or school day.

Developmental Screening – procedures used to approximate the child's level of functioning in each of the developmental domains (i.e., cognitive, physical, communication, social or emotional and adaptive) when an educational screening is not appropriate to assist in determining if an evaluation is warranted.

Educational Performance – reflects the total involvement of the student in the educational environment. It includes such things as the student's social interaction, emotional development, communication, behavior and participation in classroom activities as well as academic achievement.

Health Management - includes such procedures as assessment and monitoring by the school nurse of medical information, the response of the student to health procedures, and the delegation and supervision of health procedures.

Informed parental consent - full and informed consent according to Federal/State/local guidelines.

Measurement of the behavior of concern - the measurement of the rate, duration, magnitude, and frequency of a specific behavior. These measurements are not limited to but may be obtained through such techniques as listed below.

1. Behavior problems: direct observation, behavior checklist, behavior rating scales and self-report measures.
2. Academic problems: counting the number or percent of items or assignments completed, counting the number of errors on a task, counting the number of correct responses on a task, and recording the amount of time spent on a task.

Public agency - includes the State, local educational agencies (LEAs), educational service agencies (ESAs), nonprofit public charter schools that are not otherwise included as LEAs or ESAs and are not a school of an LEA or ESA, and any other political subdivisions of the State that are responsible for providing education to students with disabilities. (PA1)

School Building Level Committee - a general education, data-driven, decision-making committee whose standing members consist of at least the principal/designee, a classroom teacher, and the referring teacher. In discussing an individual student's difficulties, the student's parent or guardian is an invited participant.

Scientifically based research - research that involves the application of rigorous, systematic, and objective procedures to obtain reliable and valid knowledge relevant to education activities and programs; and includes research that:

1. employs systematic, empirical methods that draw on observation or experiment;
2. involves rigorous data analyses that are adequate to test the stated hypotheses and justify the general conclusions drawn;
3. relies on measurements or observational methods that provide reliable and valid data across evaluators and observers, across multiple measurements and observations, and across studies by the same or different investigators;
4. is evaluated using experimental or quasi-experimental designs in which individuals, entities, programs, or activities are assigned to different conditions and with appropriate controls to evaluate the effects of the condition of interest, with a preference for random-assignment experiments, or other designs to the extent that those designs contain within-condition or across-condition controls;
5. ensures that experimental studies are presented in sufficient detail and clarity to allow for replication or, at a minimum, offer the opportunity to build systematically on their findings; and
6. has been accepted by a peer-reviewed journal or approved by a panel of independent experts through a comparably rigorous, objective, and scientific review.

Significantly modify - change in behavior is demonstrated to such a degree that - with continuation of the intervention program by the regular teacher and, when necessary, minimal pupil appraisal or student services support - the student could continue in the regular educational program.

Situationally inappropriate - the behavior, while possibly acceptable in some settings or situations, is inappropriate to a significant degree for the situation in which it is viewed as a problem, and is inconsistent with the explicit or implied expectations of the setting and the persons therein.

Support Services - those services provided to regular education students who are not suspected of being exceptional but who are experiencing difficulty in their educational performance. The purpose of support services is to investigate a student's instructional/behavioral needs based on classroom curricula demands.

To a significant degree - a determination of the importance of a student's academic and/or behavioral problem(s) by the pupil appraisal personnel by examining

1. the rate, frequency, or number of occurrences,
2. the duration of the inappropriate behaviors,
3. the intensity or force with which the behavior is performed, or the multiplicity or number of inappropriate behaviors.

Adapted Physical Education Screening/Referral Form

Student's Name: _____ Soc. Sec. #: _____ Date of Birth: _____ Age: _____ Race: _____ Sex: _____

Grade: _____ School: _____ Date: _____ Complete: _____

IS THE CHILD RECEIVING APE SERVICES? YES NO **IF YES, DO NOT COMPLETE THIS FORM.**

APE1

Complete only items for appropriate age level: Scoring Code: + Symbol= Successfully Completed o Symbol- Unable to Perform

	<u>PERFORMANCE STANDARD</u>				<u>PERFORMANCE STANDARD</u>		
	Age 3	Age 4	Age 5		Age 9	Age 10	Age 11
_____ Kick a 7-inch playground ball	Stationery ball	Rolling ball	Run to & Kick Rolling ball	_____ Perform bent-knee crunches	13 times	15 times	16 times
_____ Catch a bean bag tossed from a distance of 5 feet (3 attempts)	Traps to body	Catch with both hands	Catch with one hand	_____ Perform standing long jump	3'4"	3'8"	4'0"
_____ Walk on a line (3 inches broad) without stepping off	5 steps towards	10 steps towards	5 steps backward	_____ Perform AAHPER shuttle run	13.0 sec	12.8 sec	12.4 sec
_____ Get up from floor without assistance	Sitting using hands	Sitting w/o hand support	Lying w/o hand support	_____ Throw a basketball to a wall and catch the rebound from a 4 foot restraining line for 15 seconds	6 times	7 times	8 times
_____ Throw a small ball overhead	3 feet	5 feet	10 feet	_____ Walk forward on a line alternating feet touching heel to toe	5 steps	10 steps	15 steps

	<u>PERFORMANCE STANDARD</u>				<u>PERFORMANCE STANDARD</u>			
	Age 6	Age 7	Age 8		Age 12	Age 13	Age 14	Age 15 & Older
_____ Hop on preferred foot	5 times	10 times	15 times	_____ Perform bent-knee crunches	20 times	20 times	20 times	20 times
_____ Skip forward, alternating feet	5times	10 times	15 times	_____ Perform standing long jump	4'0"	4'0"	4'0"	4'0"
_____ Dribble ball with preferred hand	5 times	10 times	15 times	_____ Perform AAHPER shuttle run	12.2 sec	12.2 sec	12.1 sec	Boys 12.0 sec Girls 12.6 sec
_____ Catch a bean bag tossed from ate appropriate distance with one hand (3attempts)	6 feet	10 feet	12 feet	_____ Throw a basketball to a wall and catch the rebound from a 4 foot restraining line for 15 seconds	5 times	6 times	7 times	8 times
_____ Balance on one foot	4 sec.	8 sec.	8 sec.	_____ Walk backward on a line alternating feet touching heel to toe	5 steps	10 steps	10 steps	10 steps

Is student participating successfully in regular physical education activities? _____ if not, why not? _____

Checklist for Use in Educational Programming

Student's Name: _____ DOB: _____ Screening Date: _____

Person Completing Form: _____ School: _____

The *Assistive Technology Screening Checklist* documents physical, fine/gross motor, communication, sensory, academic, recreation and leisure, vocational, and self-help areas in which assistive technology may be considered to enable a student with a disability to access the general education curriculum. It serves as an organizer for considering those skills and activities in which assistive technology would benefit a student's functioning in an academic setting.

Directions: Check *yes* or *no* for the following statements.

Physical Functioning/Motor Abilities

Task	Yes	No	Comment
1. The student can sit upright while completing tasks at his/her desk (i.e., not slouched, can hold head upright).			
2. The student maintains an appropriate posture while seated and actively engaged in a motor task (i.e., keyboarding, cutting).			
3. The student participates in playing and running activities without atypical postures.			
4. The student sits on the floor without assuming asymmetrical postures.			
5. The student has the motor skills necessary to get to/from school and/or get around within the school.			
6. The student participates in physical activities (structured or independent) and navigates within the classroom without tripping and stumbling.			
7. The student climbs and descends stairs independently.			
8. The student is able to open doors independently.			
9. The student maintains balance while performing an activity (e.g. getting up from the floor)			
10. The student carries objects while walking independently (e.g. books and papers).			
Comments:			

Fine Motor Skills

Task	Yes	No	Comment
1. The student cuts and/or handles scissors independently.			
2. The student uses writing utensils (i.e., markers, paintbrush, pencil, crayons) independently.			
3. The student copies materials from a book.			
4. The student turns pages in a book.			
5. The student ties shoes, buttons, snaps, and/or uses zippers independently			
6. The student operates door handles, water faucets and uses manipulatives.			
7. The student uses a standard keyboard to access a computer.			
8. The student draws, forms letters, stays on the line, and/or traces accurately with writing utensils.			
Comments:			

Communication Functioning

Task	Yes	No	Comment
1. The student speaks to communicate. (Check the level of the communication development.) a. <input type="checkbox"/> Fluent Conversation b. <input type="checkbox"/> Multiword Phrases c. <input type="checkbox"/> Single Word Utterances d. <input type="checkbox"/> Vocalizations e. <input type="checkbox"/> Other			
2. The student uses a mode other than speech to communicate. (Check the communication mode.) f. <input type="checkbox"/> Modes(s) used g. <input type="checkbox"/> Fluent Conversation h. <input type="checkbox"/> Multiword Phrases i. <input type="checkbox"/> Single Word Utterances j. <input type="checkbox"/> Vocalizations k. <input type="checkbox"/> Other			
3. The student responds to speech and noises in the environment.			
4. The student's mode of communication is understood by others.			

Vision/Hearing

Task	Yes	No	Comment
1. The student is able to see printed materials presented in the classroom.			
2. The student is able to see toys/objects in the classroom environment.			
3. The student is able to transfer information from a book, chart, and/or chalkboard to paper.			
4. The student has some usable vision.			
5. The student has some usable hearing.			
6. The student is able to hear speech/noise out of his/her field of vision.			
7. The student responds best to speech when the stimulus is within six feet of the speaker.			
8. The student speaks in an unusually loud voice.			
Comments:			

Academic Functioning

Task	Yes	No	Comment
1. The student understands basic cause/effect.			
2. The student makes choices.			
3. The student has the age-appropriate attention span needed to handle school/daily living tasks.			
4. The student has sequencing skills.			
5. The student can remember the steps necessary to accomplish a task.			
6. The student visually tracks along a line of print.			
7. The student reads text independently.			
8. The student writes legibly.			
9. The student writes legibly at a reasonable rate.			
10. The student accomplishes written tasks (e.g., paragraphs, essays, short answers).			
11. The student correctly spells words needed to communicate in written form.			
12. The student performs mathematical tasks needed for school and/or for daily living.			
13. The student takes notes at the level needed in school and/or in daily living.			
Comments:			

Recreation and Leisure

Task	Yes	No	Comment
1. The student uses the playground equipment independently.			
2. The student participates in group recreational activities, such as sports and group games.			
3. The student participates in activities requiring fine motor skills, such as board games or art.			
4. The student participates in extra-curricular activities, such as clubs.			
Comments:			

Vocational Functioning

Task	Yes	No	Comment
1. The student demonstrates sufficient stamina to work in a job.			
2. The student maintains a position for extended periods of time.			
3. The student uses a computer without modifications.			
4. The student holds the telephone and dials independently.			
5. The student independently uses equipment at a vocational training program.			
Comments:			

General Health

Task	Yes	No	Comment
1. The student breathes without difficulty.			
2. The student demonstrates sufficient stamina to maintain academic involvement throughout the school day.			
3. The student independently uses stairs, elevators, lockers, etc. within the school/work/community environment.			
4. The student's health condition is adequate for satisfactory school performance.			
5. The student demonstrates physical strength needed to participate in school activities.			

Self-Help

Task	Yes	No	Comment
1. The student independently uses a variety of clothing fasteners.			
2. The student organizes and maintains his/her school supplies and materials.			
3. The student independently files through a lunch line, selects meal items, and proceeds to a table.			
4. The student maintains personal hygiene.			
5. The student uses restrooms independently.			
6. The student manages meal-time utensils adequately.			
Comments:			

Summary of Results of Louisiana Assistive Technology Screening Checklist for Use in Educational Programming: Examine areas on the screening where student has received *no* responses. Review and determine if a referral for further assessment is necessary.

Recommendations: (Check the one statement that applies.)

1. Student has been considered for assistive technology and further action is not required at this time.

2. Student has been considered for assistive technology and additional screening in the following areas is recommended:

3. Student has been considered for assistive technology and the following “low-tech” solutions are recommended:

4. Student has been screened for assistive technology and a referral for a full assistive technology assessment is recommended.

Action Taken:

**Louisiana Department of Education
Communication Skills Teacher Checklist**

Student _____ DOB _____ Grade _____
Teacher _____ School _____

Please check yes or no to each of the following statements.

SLI2

Articulation (Speech Production)

Yes No The student's speech contains speech sound errors that are not typical for his/her age and social/cultural background. Sounds in words may be omitted, distorted, or substituted.

Yes No The student's speech is consistently difficult to understand, especially when the topic is not known.

Voice

Yes No The student's speaking voice is unusually loud or soft.

Yes No The student has an unusual quality to his/her voice (i.e. harsh/hoarse, nasal, breathy).

Speech Fluency

Yes No The student's speech contains disfluencies that interfere with communication (i.e. stuttering, sound, syllable, or word repetitions, sound prolongations, blocks or abnormal hesitations, abnormal rate of speech).

Yes No The student uses excessive filler phrases (i.e. "um," "uh," "you know").

Yes No The student appears to be frustrated when speaking.

Language

Yes No The student has difficulty understanding/ following age-appropriate directions.

Yes No The student has difficulty answering or responding to age-appropriate questions and other verbal information.

Yes No The student does not comprehend or speak using age-appropriate vocabulary.

Yes No The student does not request clarification when understanding is not clear.

Yes No The student does not answer or understand comprehension questions about age-appropriate stories.

Yes No The student speaks in incomplete sentences and phrases.

Yes No The student's oral language contains numerous grammatical errors that are not typical for students of the same age. (This may not apply to English Language Learners or those known to speak a dialect of English).

Yes No The student has difficulty providing age-appropriate explanations and directions.

Yes No The student does not use age-appropriate conversational skills (i.e. turn-taking, staying on topic, initiating conversation).

Please check one.

_____ This student's communication skills (articulation, voice, fluency, and language) appear to be adequate, and this student **does not** have a communication problem that adversely affects educational progress with regard to grades, behavior, class participation, or oral speaking abilities.

_____ In my opinion, this student **has** a communication problem that adversely affects educational progress in a significant way.

Teacher

Date

FUNCTIONAL BEHAVIOR ASSESSMENT CHECKLIST FBA1

- Review of school records and
 - available outside agency professional records
- Systematic, direct observations of student across school settings
- Interviews with the
 - student and
 - parent/caregiver and
 - teachers and
 - other appropriate school personnel and
 - appropriate community service providers
- Completion and review of behavior rating scales and/or other assessment tools
- Target behavior is operationally defined
 - in specific and
 - observable and
 - measureable terms
- Information is collected across
 - respondents and
 - settings
- Collected information allows determination of patterns of
 - frequency and
 - duration and
 - intensity
- Antecedent events that serve as a stimulus for the target behavior are
 - identified and
 - described
- Consequences that follow and maintain the target behavior are
 - identified and
 - described
- Function or purpose of the target behavior is identified
- Reinforcers are identified
- Hypothesis is generated about the relationship between the target behavior and
 - antecedents and
 - consequences, and
 - specific variables to be manipulated are identified
- Intervention is developed based upon hypothesis
- Acceptable replacement behaviors are identified
- Alternative skills needed for replacement behavior are identified
 - determination is made if student has alternative skills in his/her behavioral repertoire and if not,
 - which skills must be taught

ORIENTATION AND MOBILITY SCREENING CHECKLIST OMS1

Name: _____ DOB: _____ Screening Date: _____
Screened by: _____ School: _____

This orientation and mobility checklist, developed by the orientation and mobility instructors at the LA School for the Visually Impaired, may be used by the teacher or pupil appraisal personnel to screen the student's ability to travel in his or her environment.

(Circle the number of each statement that are true or cannot be answered, If 3 or more statements are circled, the student should be referred to a certified orientation and mobility instructor for formal assessment.)

1. Student's visual acuity is less than 20/200 in the better eye after best correction.
2. Student has difficulty adjusting to changes in light intensity (bright sunlight to dim indoor light or vice versa).
3. Student stumbles over low obstacles, steps, and drop-offs.
4. Student veers and pinballs while walking down a hallway or corridor.
5. Student becomes disoriented in new environments.
6. Student maintains wall contact with hand while walking.
7. Student would rather hold hand or arm of another person while traveling in new environments.
8. Student veers onto grass while walking on a sidewalk.
9. Student becomes disoriented on reverse route back to starting point.
10. Student holds head at an angle while walking.
11. Student makes body contact with walls and other obstacles; bumps into other students.
12. Student uses hands to detect and avoid obstacles while walking.
13. Student is uncertain or apprehensive about crossing at traffic intersections.
14. Student has difficulty determining cardinal directions using sun position.

PSYCHO-SOCIAL CHECKLIST

PS1

The following is a checklist of psycho-social stressors that may impact a student's academic and social functioning. This list is not comprehensive. These factors should be considered when determining if a student is eligible for special education. These stressors should not necessarily prevent a student from being identified, however, they **must** be considered.

- Severe illness of parent or family member(cancer, HIV, heart attack, psychiatric illness, etc)
- Death of a parent or caretaker
- Divorce or break-up of parent's primary relationship
- Student has received a threat of violence.
- Witness to community violence
- Severe Illness of a student (leukemia, cancer, heart problems, etc.)
- Experienced child abuse (physical, emotional, or sexual)
- Witness to domestic violence in home
- Placed in foster care
- Moved from one foster home to another
- Experienced natural disaster (hurricane, tornado, etc.)
- Changed schools one or more times during a school year
- Financial problems in the home. (Parent lost job, etc)
- Alcohol or drug abuse in family
- Substance abuse problems (older students)
- Pregnancy (older students)
- One or more psychiatric hospitalizations
- Has attempted suicide or has expressed suicidal thoughts
- Sexual identity issues
- Homelessness
- Parent or caretaker incarcerated
- Juvenile offender
- Health problems (asthma, diabetes, sickle cell, etc)
- Other. Please specify:_____

RESOURCES

R1

Louisiana Literacy Plan

<http://www.louisianaschools.net/lde/uploads/8629.pdf>

National Center on Response to Intervention

www.rti4success.org

What Works Clearinghouse

<http://ies.ed.gov/ncee/wwc/>

Intervention Central

www.interventioncentral.org

The IRIS Center

<http://iris.peabody.vanderbilt.edu/>

Positive Behavior Interventions and Support

www.pbis.org

Louisiana Positive Behavior Support

www.lapostivebehavior.com

A Framework for Conducting Assistive Technology

<http://www.louisianaschools.net/lde/uploads/8163.pdf>

Deaf and Hard of Hearing Resources

<http://www.doe.state.la.us/lde/eia/1036.html>

Deafblind Resources

<http://www.doe.state.la.us/lde/eia/2160.html>

Visual Impairment Assessment

<http://www.lsvi.org/Assessment.htm>

Louisiana Guidelines for the Identification and Instruction of English Language Learners with Disabilities

<http://www.doe.state.la.us/lde/uploads/13754.pdf>

Students with Significant Disabilities

<http://sda.doe.louisiana.gov/default.aspx>

School Health Services

<http://www.doe.state.la.us/lde/eia/1666.html>

Occupational Therapy and Physical Therapy in Louisiana: Reference Handbook for Special Education Administration and Therapists:

<http://www.louisianaschools.net/lde/uploads/10026.pdf>

National Dissemination Center for Children with Disabilities

<http://www.nichcy.org/Pages/Home.aspx>

National Center on Student Progress Monitoring

<http://www.studentprogress.org/>

SBLC CHECKLIST

SBLC1

COMPONENT	YES	NO	N/A
Tier 1			
Universal screening of literacy skills includes graphical representation of student's performance relative to peers in areas of:			
phonemic awareness			
phonics			
vocabulary			
reading fluency			
comprehension			
Documentation of:			
explicit and systematic instructional delivery			
differentiated instruction			
curricula and instructional materials aligned to state standards			
integrity of instructional implementation			
parent notified of concern(s) and informed of intervention plan if student does not meet benchmark standards for academics			
receipt of informed parental consent for services if the decision is made to seek support services			
Universal screening of numeracy skills includes graphical representation of student's performance relative to peers:			
Documentation of:			
explicit and systematic instructional delivery			
differentiated instruction			
curricula and instructional materials aligned to state standards			
integrity of instructional implementation			
parent notified of concern(s) and informed of intervention plan if student does not meet benchmark standards for academics			
receipt of informed parental consent for services if the decision is made to seek support services			
Universal screening of social/emotional/behavioral functioning includes graphical representation of student's discipline referrals/screening results relative to peers in:			
number of discipline referrals			
locations of discipline referrals			
times of discipline referrals			
types of discipline referrals			
results of universal screening instrument, when appropriate			
Documentation of:			
scientifically research-based classroom management plan			
scientifically research-based school-wide behavior support program			
integrity of classroom management plan implementation			
integrity of school-wide behavior support implementation			
data-based decision-making			
parent notified of concern(s) and informed of Tier II intervention plan if student's social/emotional/behavior functioning is outside acceptable limits			
receipt of informed parental consent for services if the decision is made to seek support services			

COMPONENT	YES	NO	N/A
TIER 2 (Circle appropriate area below)			
READING			
MATH			
ORAL EXPRESSION			
LISTENING COMPREHENSION			
WRITTEN EXPRESSION			
Strategic/targeted intervention and supplemental instruction for academic area of concern implemented with integrity which includes identification and documentation of:			
specific deficit skill area /target skill			
scientifically research-based intervention(s) used:			
baseline data			
resources needed for implementation/materials/training			
who will conduct intervention			
where intervention will occur			
frequency/intensity of intervention			
method of measurement			
how long it will take			
what criterion will determine a successful response to intervention			
who will monitor the progress			
who will chart the progress			
who will help ensure intervention carried out as planned/intervention integrity			
when team will meet again to discuss progress			
progress monitoring conducted at reasonable intervals			
graphical representation of progress in target academic area			
parent notified of progress at least once per grading period			
parent notified of concern(s) and informed of Tier III intervention plan if student does not meet intervention criterion			
receipt of informed parental consent for services if the decision is made to seek support services			
TIER 2			
SOCIAL/EMOTIONAL/BEHAVIORAL			
Strategic/targeted intervention and supplemental instruction for social/emotional/behavioral concerns implemented with integrity which includes identification and documentation of:			
specific deficit skill area			
scientifically research-based intervention(s) used:			
baseline data			
resources needed for implementation (e.g., materials/training)			
who will conduct intervention			
where intervention will occur			
frequency/intensity of intervention			
method of measurement			
how long it will take			
what criterion will determine a successful response to intervention			
who will monitor the progress			
who will chart the progress			
who will help ensure intervention carried out as planned/intervention integrity			
when team will meet again to discuss progress			
progress monitoring conducted at reasonable intervals			
graphical representation of progress in decreasing target behavior(s)			

COMPONENT	YES	NO	N/A
graphical representation of progress in increasing replacement behaviors			
parent notified of progress at least once per grading period			
parent notified of concern(s) and informed of Tier III intervention plan if student does not meet intervention criterion			
receipt of informed parental consent for services if the decision is made to seek support services			
TIER 3 (Circle appropriate area below)			
READING			
MATH			
ORAL EXPRESSION			
LISTENING COMPREHENSION			
WRITTEN EXPRESSION			
Intensive intervention and supplemental instruction for reading implemented with integrity which includes identification and documentation of:			
specific deficit skill area			
scientifically research-based intervention(s) used:			
baseline data			
resources needed for implementation (e.g., materials/training)			
who will conduct intervention			
where intervention will occur			
frequency/intensity of intervention			
method of measurement			
how long it will take			
what criterion will determine a successful response to intervention			
who will monitor the progress			
who will chart the progress			
who will help ensure intervention carried out as planned/intervention integrity			
when team will meet again to discuss progress			
progress monitoring conducted at reasonable intervals			
graphical representation of progress in target academic area			
parent notified of progress at least once per grading period			
receipt of informed parental consent for services if the decision is made to seek support services			
TIER 3			
SOCIAL/EMOTIONAL/BEHAVIORAL			
Intensive intervention and supplemental instruction for social/emotional/behavioral concerns implemented with integrity which includes identification and documentation of:			
functional behavior assessment			
specific deficit skill area			
scientifically research-based intervention(s) used:			
baseline data			
resources needed for implementation (e.g., materials/training)			
who will conduct intervention			
where intervention will occur			
frequency/intensity of intervention			
method of measurement			
how long it will take			
what criterion will determine a successful response to intervention			
who will monitor the progress			

COMPONENT	YES	NO	N/A
who will chart the progress			
who will help ensure intervention carried out as planned/intervention integrity			
when team will meet again to discuss progress			
progress monitoring conducted at reasonable intervals			
graphical representation of progress in decreasing target behavior(s)			
graphical representation of progress in increasing replacement behavior(s)			
parent notified of progress at least once per grading period			
parent notified of concern(s) and informed of Tier III intervention plan if student does not meet intervention criterion			
receipt of informed parental consent for services if the decision is made to seek support services			
SBLC provides documentation of:			
hearing screening			
vision screening			
sensory processing screening			
health screening			
speech and language screening			
motor screening			
assistive technology screening			
social/emotional/behavioral screening			
educational screening			
gifted and/or talented screening			
screening for fine motor concerns			
functional behavioral assessment			
behavior intervention plan			
retentions			
LEAP/iLEAP scores			
absences			
tardies			
dominant language			
specific reason for referral (must be the same as skill deficit area(s) addressed by interventions)			
Date(s) of previous evaluation(s) when appropriate			
previous classification, when appropriate			
SBLC decision			
If decision is referral for evaluation, SBLC provides documentation that lack of educational progress not primarily due to:			
lack of appropriate, explicit and systematic instruction in reading, which includes phonics, phonemic awareness, fluency, comprehension, and vocabulary			
lack of appropriate instruction in math			
limited English proficiency			
environmental or economic disadvantage			
cultural factors			

SENSORY PROCESSING SCREENING Instructions for Use

SP1

1. Prior to the first SBLC meeting, the **Sensory Processing Screening Checklist (SPS1)** is completed by the student's general education teacher(s).
2. The SBLC chairperson reviews the completed screening checklists to determine if there are difficulties that require intervention according to the **Sensory Processing Screening Criteria (SPS2)**.
3. When interventions are necessary, the SBLC targets the sensory area of greatest concern.
4. **Sensory Processing Intervention Strategies (SPS3)** are then selected to address the targeted area of concern.
5. Intervention strategies are implemented by the student's teacher(s) for the length of time designated by the SBLC.
6. Following the intervention period, the teacher records the intervention results on the SPS3.
7. Intervention results are reviewed by the SBLC.
8. For students who are "at risk" for sensory processing deficits, but are not suspected of having a disability, the SBLC targets additional interventions to be implemented by the classroom teacher(s).
9. For students who are suspected of having a disability, the SBLC obtains a second **Sensory Processing Screening Checklist** (following intervention) to determine if further assessment is warranted according to **Sensory Processing Screening Criteria (SPS2)**.

Student: _____ Teacher: _____ Date: _____

Sensory Processing Screening Checklist SPS1

Check the column that best describes how frequently the student exhibits each behavior.

SPSC1

SENSORY AREAS	Almost Never <25%	Occasionally <50%	Frequently <75%	Almost Always >75%
VISUAL				
Visual details/stimuli interfere with task completion				
Unable to locate and/or organize materials and supplies				
Reacts to small changes in classroom				
Comments:				
AUDITORY				
Overreacts to loud or unexpected noises (e.g., intercom, fire drill)				
Exhibits distress during lunch, P.E., assemblies				
Background noises hinder task completion				
Talks incessantly				
Requires repeated oral directions in class more than others				
Comments:				
TACTILE				
Overreacts to unexpected or light touch				
Withdraws/isolates self from others				
Touches people or their things to the point of irritation				
Fidgets with objects				
Has difficulty standing in line or close to other people				
Uses only fingertips to manipulate classroom materials				
Refuses to participate in messy activities				
Comments:				
VESTIBULAR/PROPRIOCEPTIVE				
Exhibits movement which interferes with classroom functioning/unable to stay in designated area/walks around				
Fidgets during activities (e.g., wiggles in seat, taps on desk)				
Leans out of desk or seat/rests head on desktop				
Becomes overly excited after movement activity				
Bumps/pushes/hits/runs into things or others				
Withdraws from active environments or situations				
Avoids climbing or playground equipment				
Comments:				
OLFACTORY AND GUSTATORY				
Chews/eats non-edible items (e.g., clothing, pens, pencils)				
Comments:				
BEHAVIORAL RESPONSE				
Has tantrums for no apparent reason				
Has difficulties with changes in routines				
Is rigid or set in his/her ways				
Overreacts or is dramatic compared to peers				
Appears lethargic				
Comments:				

SENSORY PROCESSING SCREENING CRITERIA (SPS2)

SPSC2

Based upon the results of the **Sensory Processing Screening Checklist (SPS1)**, the following screening criteria are used to determine when:

- a. Interventions are necessary
- b. Further assessment is needed should the student be referred for evaluation

CRITERIA

The student exhibits:

- 8 or more behaviors in the “Almost Always” category

OR

- 11 or more behaviors in the “Frequently” and “Almost Always” categories combined.

Suggested interventions for each sensory area (i.e., visual, auditory, tactile, etc.) are included in the Sensory Processing Intervention Strategies (SPS3). The intervention(s) should initially target the sensory area of greatest concern and may require more than one strategy.

Sensory Processing Intervention Strategies (SPS3)

Student: _____

Teacher: _____

SPIS

	Date Intervention Starts	Date Intervention Ends
Visual		
Limit/eliminate visual clutter within classroom such as busy bulletin boards, artwork items, hanging from ceiling, etc.		
Organize classroom materials in bins or behind curtained shelves		
Provide preferential seating for better view of blackboard as well as to reduce visual distractions		
Color code and clearly label materials and supplies		
Modify classroom lighting by dimming lights, closing or opening shades/blinds, etc.		
Provide consistent independent work area with visual boundaries as needed (e.g., use partition, carrel, or tape to provide boundaries)		
Intervention results:		
Auditory		
Provide white noise or classical music as appropriate to mask background noises		
Cover intercom to mute volume level		
Use headphones or earplugs to muffle sounds		
Provide verbal or visual warning when possible for fire drills, bells, and morning announcements		
Give visual directions rather than verbal		
Teach positive self-talk (e.g., "It's only a fire drill. It won't hurt me.")		
Encourage child to put hands over ears and let him/her know "it's ok"		
Place tennis balls on legs of chairs, rugs on classroom floor, or carpet squares under desk to reduce noise		
Provide seating around perimeter of noisy cafeteria or auditorium		
Provide either verbal or physical cue such as touching lips or tapping on shoulder to remind student it is not an appropriate time to talk		
Provide "Talk card" so only student with card is allowed to talk		
Give oral directions when in close proximity to student, breaking directions down into small steps		
Have student repeat directions back to teacher		
Intervention results:		

	Date Intervention Starts	Date Intervention Ends
Tactile		
Limit amount of touching/warn student ahead of time of possible touch		
Have child who touches too much carry weighted object (e.g., binder, book)		
When walking in line, have all students fold arms or put finger on lips		
Place student either in front of line or back of line to decrease proximity to others		
Use preferential seating to avoid touch (e.g., place desk at outside edge of classroom desks)		
Use carpet square or boundary to indicate where the child needs to remain		
When possible, have students sit at every other seat in cafeteria		
Have wet wipes readily available for immediate clean-up following a messy activity, thereby reducing possible student anxiety about participating		
Allow student to perform non-preferred tactile activities with a tool (e.g., use a brush, popsicle stick, Q-tip, etc.) or while wearing gloves		
Use novel or fun manipulatives to desensitize such as dried beans, Mardi Gras beads, Easter grass, water table, packing peanuts, etc.		
Intervention results:		
Vestibular/Proprioceptive		
<u>DO NOT penalize student by removing recess time</u> as student needs appropriate time for movement such as running, jumping, swinging, etc.		
Provide naturally occurring movement opportunities such as delivering messages, cleaning boards, obtaining and returning heavy materials to/from shelving (e.g., books)		
Have student wear backpack containing his/her books during transitions and movement breaks		
Provide clear boundaries for seating such as taped area, carpet square, etc.		
Allow time for student to “chill out” following movement activity (e.g., take three deep breaths before transitioning, allow stretching between activities, allow water breaks)		
Provide appropriate objects for fidgeting		
Have student give self bear hugs, or perform chair pushups		
Assist with decorating bulletin board by stapling decorations or stapling papers for teacher		
Allow use of Ellison cutout machine for bulletin board decorations		
Allow student to help rearrange desks or pick up chairs at end of school day		
Intervention results:		

	Date Intervention Starts	Date Intervention Ends
Olfactory and Gustatory		
Consider letting student chew on candy, gum, tooth brush, straw, or coffee stirrer		
Allow crunchy, chewy, or spicy snack breaks, (e.g., pretzels, dry cereal, fruit roll ups, hot tamale candies, slim jims, beef jerky, etc.)		
If cafeteria bothers child, consider allowing him/her to eat in another location		
Consider use of flavored chapstick		
Intervention results:		
Behavioral Response		
Provide verbal warnings about changes in the schedule		
Provide visual schedule		
Help students transition between activities using timers, music or transitional objects, such as using a book to bridge to library time, or a marker to bridge to art time		
Provide a quiet space for calming away from peers NOT THE TIME-OUT AREA		
For lethargic students, increase movement opportunities, incorporate multi-sensory experiences, and spicy/crunchy snacks		
Intervention results:		

APPENDIX B

SELF-REVIEW FORMS

The following forms may be used during evaluations and eligibility determinations to ensure that all components have been included when conducting initial evaluations, reevaluations, and the waiver process. They may also be used to conduct self-reviews of evaluations for monitoring purposes.

INITIAL EVALUATION CORE CHECKLIST

IE1

INITIAL EVALUATION PROCEDURES

- variety of assessment tools/strategies used to gather relevant information including
 - functional
 - developmental
 - academic
 - information provided by parent
 - information used to assist in determining
 - whether student has a disability
 - content of student's IEP including information enabling student
 - to be involved and progress in general education curriculum
 - to participate in appropriate activities (for preschool child)
- no single measure sole criterion for determining
 - exceptionality
 - appropriate educational program
- technically sound instruments to assess relative contribution of cognitive and behavioral
- assessments and other evaluation materials used were
 - tailored to assess specific areas of educational need
 - selected and administered so as not to be racially or culturally discriminatory
 - provided and administered in student's native language or other mode of communication and
 - in form most likely to yield accurate information
 - valid and reliable for the purposes used
 - valid for student with impaired sensory/manual/speaking skills
 - administered by trained and knowledgeable personnel
 - administered in accordance with instructions provided by producer
- student assessed in all areas related to suspected exceptionality
- assessments for students transferring from one public agency to another coordinated for prompt completion
- evaluation sufficiently comprehensive to identify all special education and related service needs
- assessment tools and strategies directly assist in determining educational needs

INITIAL EVALUATION COMPONENTS*

- ___ description of each screening activity and review of screening results
- ___ review of cumulative records including
 - ___ test scores
 - ___ discipline records
 - ___ grade history
 - ___ attendance records
 - ___ statewide assessments
- ___ review of any pertinent reports supplied by
 - ___ parent
 - ___ an outside agency
- ___ review of the intervention(s) including data-based documentation that:
 - ___ interventions were scientifically research-based
 - ___ interventions were implemented with fidelity
 - ___ progress monitoring was conducted at reasonable intervals
 - ___ student did not show adequate progress based on local or national norms
- ___ systematic student observation(s) in environments in which the student is experiencing difficulties
- ___ interview with the student to obtain his/her perceptions of
 - ___ academic performance
 - ___ behavioral performance
 - ___ social performance
- ___ interview with core subject teacher(s) addressing
 - ___ referral concerns
 - ___ academic performance
 - ___ behavior
 - ___ peer interactions
- ___ family interview addressing impact on educational performance of
 - ___ developmental
 - ___ educational
 - ___ social/emotional
 - ___ cultural
 - ___ health factors
- ___ interview with referral source when other than parent or teacher
- ___ educational assessment including
 - ___ descriptions of educational strategies
 - ___ academic adjustments needed
 - ___ environmental adjustments needed
 - ___ curricular modifications necessary to provide accessible instructional materials
- ___ functional behavior assessment when behavior noted as a concern
- ___ review and analysis of any discrepancies between test results/observations and customary behaviors
- ___ review and analysis of discrepancies among evaluation results

*refer to individual exceptionalities for additional evaluation components

INITIAL EVALUATION REPORT

- ___ reason(s) for referral;
- ___ any additional concerns raised by
 - ___ parents
 - ___ teachers
 - ___ other involved professionals
- ___ description of evaluation procedures used to address each evaluation concern including
 - ___ interventions
 - ___ student's response(s) to the intervention(s)
 - ___ analysis of intervention results
- ___ description of the information used to decide that **each** of the following was not determinant factor for the suspected disability
 - ___ lack of appropriate explicit and systematic instruction in reading including
 - ___ phonics
 - ___ phonemic awareness
 - ___ fluency
 - ___ comprehension
 - ___ vocabulary
 - ___ lack of appropriate instruction in math
 - ___ limited English proficiency;
 - ___ environmental or economic disadvantage; and
 - ___ cultural factors.
- ___ description of present level(s) of functioning in relationship to general education curriculum
- ___ description of student's
 - ___ relative strengths
 - ___ support needs
- ___ description of educational needs in prioritized order
- ___ description of the impairment or condition that enables classification
- ___ information sufficient to determine validity of evaluation data including
 - ___ compatibility between student and examiner(s)
 - ___ suitability of the evaluation environment
 - ___ existence of any extraordinary conditions
 - ___ IQ scores not reported or recorded in report
- ___ a description of any discrepancies noted during the evaluation process
- ___ recommendations for determining IEP content including services necessary to
 - ___ meet student's educational needs
 - ___ enable student to be involved in and progress in the general education curriculum
 - ___ participate in appropriate activities (for preschool student)
- ___ summary of the evaluation findings;
- ___ explanation of all evaluation timeline extensions including
 - ___ documentation of parental approval when necessary
- ___ names/signatures of participants
- ___ separate signed dissenting opinion submitted prior to IEP meeting, when appropriate
 - ___ opinion states the disagreement
 - ___ opinion gives supporting data and conclusion(s)
- ___ documentation of the determination of eligibility includes signatures of
 - ___ evaluation team members
 - ___ parents

AUTISM

AU1

CRITERIA FOR ELIGIBILITY (criteria 1 through 4 must be met):

- 1 ___ Communication (minimum of 2 items documented)
 - ___ disturbances in development of spoken language
 - ___ disturbances in conceptual development
 - ___ impairment in ability to attract another's attention, initiate, or sustain socially appropriate conversation
 - ___ disturbances in shared joint attention
 - ___ stereotypical and/or repetitive use of vocalizations, verbalizations and/or idiosyncratic language
 - ___ echolalia with or without communicative intent
 - ___ impairment in use and/or understanding of nonverbal and/or symbolic communication
 - ___ prosody variances (unusual pitch, rate, volume and/or other intonational contours)
 - ___ scarcity of symbolic play
- 2 ___ Relating to people, events, and/or objects: (minimum of 4 items documented)
 - ___ difficulty developing developmentally appropriate interpersonal relationships
 - ___ impairments in social/emotional reciprocity or awareness of others
 - ___ developmentally inappropriate or minimal spontaneous sharing of emotions/interests with others
 - ___ absent, arrested or delayed functional or symbolic use of objects/tools
 - ___ difficulty generalizing/discerning inappropriate vs. appropriate behaviors across settings/situations
 - ___ lack of/minimal varied spontaneous pretend/social imitative play
 - ___ difficulty comprehending others' social/communicative intentions, interests, perspectives
 - ___ impaired sense of behavioral consequences
- 3 ___ Restricted, repetitive and/or stereotyped patterns of behaviors, interests, and/or activities: (minimum of 2 items documented)
 - ___ unusual patterns of interests/topics that are abnormal in intensity or focus
 - ___ marked distress over change/transitions
 - ___ unreasonable insistence on following specific rituals or routines
 - ___ stereotyped and/or repetitive motor movements
 - ___ persistent preoccupation with an object or parts of objects
- 4 ___ student's educational performance is adversely affected

[Initial Evaluation Core Checklist](#) (use for Initial Evaluation Procedures, Components, and Report)

ADDITIONAL PROCEDURES FOR EVALUATION

- ___ comprehensive assessment by a certified school psychologist, licensed psychologist, physician or other qualified examiner
- ___ systematic observations of the student in interaction with others across settings
- ___ referral to audiologist if results of hearing screening not definitive
- ___ speech and language assessment conducted by speech/language pathologist

- _____ for nonverbal communicators, augmentative/alternative communication assessment to determine needs and modes of communication
- _____ educational assessment including a review and analysis of the student's response to scientifically research-based interventions and progress monitoring data, when appropriate
- _____ occupational therapy assessment to address sensory processing and motor difficulties including:
 - _____ visual symptoms;
 - _____ auditory symptoms;
 - _____ tactile symptoms;
 - _____ vestibular (balance) symptoms;
 - _____ olfactory (smell) and gustatory (taste) symptoms;
 - _____ proprioceptive (movement) symptoms;
 - _____ motor planning difficulties; and
 - _____ attention/arousal difficulties
- _____ other assessments) as determined to be appropriate and necessary

DEAF-BLINDNESS

DB1

CRITERIA FOR ELIGIBILITY (criteria 1, 2, and 3 must be met)

- 1 ___ evidence visual impairment meets criteria
- 2 ___ evidence hearing impairment meets criteria
- 3 ___ determination that needs cannot be met in VI or HI program only

[Initial Evaluation Core Checklist](#) (use for Initial Evaluation Procedures, Components, and Report)

ADDITIONAL PROCEDURES FOR EVALUATION

- ___ vision assessment by ophthalmologist or optometrist.
 - ___ when impairment result of documented medical condition, verified by report from ophthalmologist, pediatrician, or pediatric neurologist
 - ___ when condition progressive or unstable, need for yearly eye exam documented in evaluation report
- ___ hearing assessment by audiologist or otologist
- ___ orientation and mobility screening
 - ___ orientation and mobility assessment, when warranted.
- ___ educational assessment verifies that student's combined vision and auditory losses cannot be served by program for students with VI or HI only
- ___ family interview includes investigation of family history of Usher Syndrome and/or other contributing medical difficulties
- ___ speech/language assessment of receptive and expressive language
 - ___ includes student's language level and communication skills
 - ___ examiner fluent in student's primary mode of communication or
 - ___ uses certified interpreter/transliterater, when necessary

DEVELOPMENTAL DELAY_

DD1

CRITERIA FOR ELIGIBILITY (criteria 1 and 2 must be met)

1. child between ages of 3-8
 - delay of 25 percent or more on criterion-based measures or
 - standard score greater than or equal to 1.5 standard deviations below mean on norm-based measures
2. delay(s) evident in one or more of the following areas:
 - physical development
 - gross motor skills
 - fine motor skills
 - sensory (visual or hearing) abilities
 - sensory-motor integration
 - social, adaptive, emotional development
 - play (solitary, parallel, cooperative)
 - peer interaction
 - adult interaction
 - environmental interaction
 - expression of emotions
 - cognitive or communication development
 - language (expressive or receptive)
 - concrete or abstract reasoning skills
 - perceptual discriminations
 - categorization and sequencing
 - task attention
 - memory
 - essential developmental or academic skills

[Initial Evaluation Core Checklist](#) (use for Initial Evaluation Procedures, Components, and Report)

ADDITIONAL PROCEDURES FOR EVALUATION

- examination conducted by a physician when severe medical condition suspected or when deemed necessary by the evaluation coordinator
 - health assessment when necessary
- educational assessment for school aged students includes review of progress monitoring data
- functional/developmental assessment for preschool-aged children to
 - determine levels of performance
 - provide an analysis of child's participation in appropriate activities
- speech/language assessment when a speech or language impairment suspected
- occupational therapy assessment when sensory-motor integration difficulties suspected.

EMOTIONAL DISTURBANCE_

ED1

CRITERIA FOR ELIGIBILITY-(all of the following four criteria must be met)

- 1 ___ functional disability exists (minimum of 1 item documented)
 - ___ inability to exhibit appropriate behavior routinely under normal circumstances
 - ___ tendency to develop physical symptoms or fears associated with personal or school problems
 - ___ inability to learn or work that cannot be explained by intellectual, sensory, or health factors
 - ___ inability to build or maintain satisfactory interpersonal relationships with peers and adults
 - ___ a general pervasive mood of unhappiness or depression
- 2 ___ duration (minimum of 1 item documented)
 - ___ the impairment or pattern of inappropriate behavior(s) has persisted for at least one year
 - ___ there is substantial risk that the impairment or pattern of inappropriate behavior(s) will persist for an extended period
 - ___ there is a pattern of inappropriate behaviors that are severe and of short duration
- 3 ___ educational performance is affected (ALL items must be documented)
 - ___ educational performance must be significantly and adversely affected as a result of behaviors which meet the definition of emotional disturbance
 - ___ behavior patterns consistent with the definition exist after educational assistance and/or counseling
 - ___ behavior patterns consistent with the definition exist after assistance through the RTI process which includes documented evidence that
 - ___ research-based interventions were conducted
 - ___ interventions targeted specific areas of concern
 - ___ interventions were implemented with fidelity
 - ___ interventions did not significantly modify the behavior(s) of concern
 - ___ evidence that the intervention(s) included
 - ___ operationally defined target behaviors
 - ___ systematic measurement of the behaviors of concern
 - ___ establishment of baseline
 - ___ monitoring of student's response
 - ___ graphing/charting of intervention results
 - ___ documentation of length of intervention
 - ___ documentation of changes/adjustments to intervention
- 4 ___ behaviors of concern exhibited in (two different settings, one of which is school)
 - ___ school
 - ___ home
 - ___ community

[Initial Evaluation Core Checklist](#) (use for Initial Evaluation Procedures, Components, and Report)

ADDITIONAL PROCEDURES FOR EVALUATION

___ psycho-social assessment includes

- interview with parent or caregiver
- determination of out-of-home/school or risk of out-of-home/school placement
- need for multi-agency services
- consideration of referral to existing interagency case review process
- review of the functional behavior assessment includes
 - description of
 - intensity of target behaviors and
 - duration of target behaviors and
 - frequency of occurrence of target behaviors
 - antecedent(s) maintaining the behavior(s)
 - consequence(s) maintaining the behavior(s)
 - evidence FBA conducted across settings
 - evidence FBA conducted with multiple informants
 - determination of the function(s) of the behavior(s) of concern
- review of the appropriateness and effectiveness of the documented intervention(s)
- psychological or psychiatric assessment includes:
 - cognitive functioning
 - emotional functioning
 - social functioning
 - self-concept
- recommendations for the provision of counseling, school psychological, or school social work services as a related service.
- other assessment procedures determined to be necessary

HEARING IMPAIRMENT

HI1

CRITERIA FOR ELIGIBILITY (criteria 1 and 2 must be met)

1. hearing loss meets definition of
- deafness
 - unaided pure tone average of 70dB or more in the better ear at 500, 1000, and 2000 Hz
 - student impaired in processing linguistic information through hearing
 - hard of hearing
 - permanent or fluctuating hearing loss
 - unaided pure tone average in the better ear at 500, 1000, and 2000 Hz between 25 and 70 dB
 - loss will impact development of speech/language and/or interfere with learning new information through auditory modality
 - unilateral hearing loss
 - permanent loss with unaided pure tone average in better ear at 500, 1000, and 2000 Hz of 40 dB or greater
 - hearing in better ear is within normal range
 - loss in poorer ear may affect ability to process linguistic information and/or localize sound
 - high frequency hearing loss
 - bilateral loss with unaided pure tone average of 40 dB or greater at any two of 2000, 3000, 4000, or 6000 Hz
 - loss may affect ability to process linguistic information
- student classified as having deaf-blindness if only two disabilities are deafness and blindness
- audiological evidence that student is either deaf or hard of hearing
2. evidence that hearing loss adversely affects educational performance

[Initial Evaluation Core Checklist](#) (use for Initial Evaluation Procedures, Components, and Report).

ADDITIONAL PROCEDURES FOR EVALUATION

- student interview conducted in student's primary mode of communication
- hearing assessment conducted by physician or audiologist includes assessment of
 - hearing sensitivity
 - acuity with amplification
 - acuity without amplification
- student, family and teacher interviews include discussions of:
 - the student's language and communication needs
 - opportunities for direct communication with peers and professional personnel in the student's language and primary mode of communication
 - academic functioning levels
 - opportunities for direct instruction in the student's language and primary mode of communication.
- speech/language assessment of receptive and expressive language
 - includes student's language level and communication skills

_____ examiner fluent in student's primary mode of communication or
_____ uses certified interpreter/transliterater, when necessary
_____ for deafness, description of how impairment impacts ability to process linguistic
Information

MENTAL DISABILITY

MED1

CRITERIA FOR ELIGIBILITY (criteria 1-5 must be met)

- 1 ___ documented evidence that:
 - ___ research-based interventions were conducted
 - ___ interventions were implemented with fidelity
 - ___ interventions did not significantly modify the area(s) of concern
 - ___ intervention(s) included
 - ___ operationally defined target behaviors
 - ___ systematic measurement of the areas of concern
 - ___ establishment of baseline
 - ___ monitoring of student's response
- 2 ___ degree of impairment specified
 - ___ Mental Disability-Mildly Impaired
 - ___ assessed levels of intellectual and adaptive functioning between 2-3 standard deviations below mean
 - ___ Mental Disability-Moderately Impaired
 - ___ assessed levels of intellectual and adaptive functioning between 3-4 standard deviations below mean
 - ___ Mental Disability-Severely Impaired
 - ___ assessed level of intellectual and adaptive functioning greater than 4 standard deviations below mean
- 3 ___ learning problems not due primarily to
 - ___ other disabling conditions
 - ___ lack of appropriate explicit and systematic instruction in reading
 - ___ lack of appropriate instruction in math
 - ___ limited English proficiency
 - ___ lack of educational opportunity
 - ___ emotional stress in home or school
 - ___ environmental or economic disadvantage
- 4 ___ academic/pre-academic functioning levels commensurate with assessed level of intellectual functioning
- 6 ___ deficits occurred during developmental period

[Initial Evaluation Core Checklist](#) (use for Initial Evaluation Procedures, Components, and Report)

ADDITIONAL PROCEDURES FOR EVALUATION

- ___ educational assessment includes
 - ___ informal and formal assessments,
 - ___ review and analysis of assessment results and
 - ___ review and analysis of student's response to scientifically research-based Interventions documented by progress monitoring data.
- ___ assessment of adaptive behavior including information provided by
 - ___ parent(s) and
 - ___ teacher
- ___ psychological assessment includes:
 - ___ appraisal of causal or contributing emotional or cultural/linguistic factors

- _____ standardized individual intellectual assessment
- _____ assessment of language development and/or communication
 - _____ for nonverbal communicators, augmentative/alternative communication
 - _____ assessment to determine needs and modes of communication
- _____ other assessment procedures deemed necessary.

MULTIPLE DISABILITIES

MU1

CRITERIA FOR ELIGIBILITY (criteria 1 and 2 must be met)

- 1 ___ full criteria met for two or more moderate or severe conditions
- 2 ___ needs cannot be met in program designed for one of the impairments with related services for other

[Initial Evaluation Core Checklist](#) (use for Initial Evaluation Procedures, Components, and Report)

ADDITIONAL PROCEDURES FOR EVALUATION

- ___ procedures for evaluation appropriate to each suspected disabling condition
- ___ examiners certify that disabling conditions are each moderate or severe
- ___ educational assessment describes how the severity of needs leads to Multiple Disabilities classification

ORTHOPEDIC IMPAIRMENT

O11

CRITERIA FOR ELIGIBILITY (criteria 1, 2, or 3 must be met)

- 1 ___ muscular/neuromuscular disability
- 2 ___ skeletal deformities/abnormalities
- 3 ___ impaired environmental functioning that significantly interferes with educational performance

[Initial Evaluation Core Checklist](#) (use for Initial Evaluation Procedures, Components, and Report)

ADDITIONAL PROCEDURES FOR EVALUATION

- ___ medical examination within 12 months with
 - ___ description of the impairment,
 - ___ medical implications for instruction or physical education
 - ___ adaptive equipment and support services needed
- ___ health assessment, when medical report indicates need for health technology, management, or treatments
- ___ APE assessment
- ___ OT assessment, when deemed necessary.
- ___ PT assessment, when deemed necessary
- ___ educational assessment includes review and analysis of student's response to scientifically research-based interventions documented by progress monitoring data, when appropriate
- ___ family interview including
 - ___ clarification of parental concerns about educational needs
 - ___ identification of health care providers and/or community resources used in caring for needs

OTHER HEALTH IMPAIRMENT

OH1

CRITERIA FOR ELIGIBILITY (criteria 1 through 3 must be met; criteria 4 must also be met if impairment has behavioral implications shown to respond to behavioral interventions)

- 1 ___ disability reduces school efficiency
- 2 ___ disability limits major life activity
- 3 ___ impaired environmental functioning that adversely affects educational performance
- 4 ___ research-based interventions implemented with fidelity did not significantly modify problem behavior

[Initial Evaluation Core Checklist](#) (use for Initial Evaluation Procedures, Components, and Report)

ADDITIONAL PROCEDURES FOR EVALUATION

- ___ medical examination within previous 12 months that includes:
 - ___ description of the impairment
 - ___ medical implications for instruction
 - ___ medical implications for physical education
- ___ health assessment, when medical report indicates need for health technology, management, or treatments
- ___ when diagnosed impairment has behavioral implications
 - ___ review of the functional behavior assessment includes
 - ___ description of the intensity of target behavior(s)
 - ___ description of the duration of target behavior(s)
 - ___ description of the frequency of occurrence of target behavior(s)
 - ___ description of antecedent(s) maintaining the behavior(s)
 - ___ description of consequence(s) maintaining the behavior(s)
 - ___ evidence FBA conducted across settings
 - ___ evidence FBA conducted with multiple informants
 - ___ assessment includes determination of function of behavior(s) of concern
 - ___ review of research-based interventions
 - ___ interventions targeted specific areas of concern
 - ___ interventions were implemented with fidelity
 - ___ interventions did not significantly modify the behavior(s) of concern
 - ___ evidence that intervention(s) included
 - ___ operationally defined target behaviors
 - ___ systematic measurement of the behaviors of concern
 - ___ establishment of baseline
 - ___ monitoring of student's response
 - ___ graphing/charting of intervention results
 - ___ documentation of length of intervention
 - ___ documentation of changes/adjustments to intervention
 - ___ review of the appropriateness and effectiveness of the documented intervention(s)
 - ___ additional interventions conducted, when necessary
- ___ family interview to
 - ___ clarify parental concerns
 - ___ identify health care providers and/or community resources used

____any additional assessments deemed necessary

SPECIFIC LEARNING DISABILITY

SLD1

CRITERIA FOR ELIGIBILITY-(criteria 1, 2, 3, and 4 must be met)

- 1 ___ learning problems not primarily result of
 - ___ visual, hearing, or motor disability
 - ___ mental disability
 - ___ emotional disturbance
 - ___ cultural factors
 - ___ environmental or economic disadvantage
 - ___ limited English proficiency
- 2 ___ review of
 - ___ evidence-based interventions
 - ___ conducted with fidelity
 - ___ for length of time necessary to determine effectiveness
 - ___ evidence that interventions
 - ___ are appropriate to age
 - ___ are appropriate to academic skill deficits
 - ___ address area(s) of concern presented by SBLC
 - ___ provide sufficient data to determine if student is making adequate progress in general education curriculum
 - ___ include graphing of intervention results
 - ___ documented length of intervention
 - ___ documented changes/adjustments to intervention
 - ___ further assessment with standardized achievement measures when
 - ___ adequate progress not evident
 - ___ interventions require sustained and substantial effort to close achievement gap
 - ___ child/youth does not achieve adequately in
 - ___ oral expression
 - ___ listening comprehension
 - ___ written expression
 - ___ basic reading skills
 - ___ reading fluency skills
 - ___ reading comprehension
 - ___ mathematics calculation or
 - ___ mathematics problem solving
- 3 ___ evidence that prior to or as part of referral process
 - ___ student was provided appropriate instruction in math
 - ___ student was provided explicit and systematic instruction in reading including
 - ___ phonics
 - ___ phonemic awareness
 - ___ fluency
 - ___ comprehension
 - ___ vocabulary
 - ___ instruction delivered by qualified personnel
 - ___ formal assessment of student progress during instruction provided to parents
- 4 ___ evidence of pattern of strengths and low achievement using chronological age norms in one

of the following areas

- oral expression
- listening comprehension
- written expression
- basic reading skills
- reading fluency skills
- reading comprehension
- mathematics calculation or
- mathematics problem solving

low achievement demonstrated by performance:

- greater than 1 ½ standard deviations below mean in grades 1 and 2
- greater than 2 standard deviations below mean in grades 3-12

strength demonstrated by performance:

- no more than ½ standard deviation below mean in grades 1 and 2
- no more than 1 standard deviation below mean in grades 3-12

preponderance of data indicates student has specific learning disability

- explanation and justification provided in report

[Initial Evaluation Core Checklist](#) (use for Initial Evaluation Procedures, Components, and Report)

ADDITIONAL PROCEDURES FOR EVALUATION

student's general education teacher serves on the team

student observed in the learning environment which includes the regular classroom and team may:

- use information from an observation in routine classroom instruction done before the student was referred for evaluation; or
- conduct an observation of the student's academic performance in a regular classroom after the parental consent has been obtained.
- observe the child in an environment appropriate for a child of that age, if student out of school,

student's response(s) to scientifically research-based intervention(s) reviewed and analyzed

documented by progress monitoring data.

formal educational assessment documents

- pattern of strengths and
- areas of low achievement.

psychological assessment when necessary to rule out mental disability

speech/language assessment

assessment by a physician, neurologist, or neuropsychologist, when neurological or other health/medical problems suspected

SPEECH OR LANGUAGE IMPAIRMENT

SL11

CRITERIA FOR ELIGIBILITY (criteria 1, 2, 3 or 4, and 5 must be met)

- 1 ___ articulation
___ intervention data indicate that it is unlikely student will acquire correct use within reasonable period of time
- 2 ___ fluency
___ intervention data indicate that it is unlikely student will attain normal fluency within reasonable period of time
- 3 ___ voice
___ assessment by appropriate medical specialist prior to intervention
___ intervention data indicate that it is unlikely student will attain normal voice quality within reasonable period of time
- 4 ___ language
___ deficit at least 1.5 standard deviations below mean for chronological age
___ intervention data indicate that it is unlikely student will acquire targeted language skills that significantly impact the student's educational performance within reasonable period of time
- 5 ___ documented evidence that impairment significantly interferes with
___ student's educational performance
___ student's developmental functioning
___ when norms are not available or not adequate to describe individual's language
___ language samples analyzed
___ language behaviors described in various settings
___ overall picture of language behavior described
___ non-verbal communicators described using their augmentative and/or alternative communication needs or modes

[Initial Evaluation Core Checklist](#) (use for Initial Evaluation Procedures, Components, and Report)

ADDITIONAL PROCEDURES FOR EVALUATION

- ___ speech-language assessment includes
 - ___ use of standardized test instruments and/or published normative data in speech-language pathology or child development
 - ___ formal or informal analysis of a communication sample
 - ___ additional information gathered from sources such as criterion-referenced materials, communication-related data collected by other professionals (including other pupil appraisal personnel and teachers)
 - ___ observation of communication skills
 - ___ assessment of the structure and function of the oral peripheral mechanism
 - ___ assessment of language processing, when appropriate
 - ___ assessment of augmentative/alternative communication needs when appropriate
 - ___ review and analysis of intervention data for students in grade K or above, and when appropriate for children aged 3-5.
- ___ educational assessment to
 - ___ review academic skills

- _____ determine if impairment significantly interferes with educational performance
- _____ document the effect of the impairment on educational performance
- _____ analyze how the student's disability affects access to and progress in the general curriculum.

- _____ educational assessment may be conducted by the classroom teacher for a student suspected of having an articulation, fluency or voice disability,

- _____ educational assessment shall be conducted by an educational diagnostician or other qualified pupil appraisal member for a student suspected of having a language disability,

- _____ review of the voice assessment when there is suspected voice impairment.

- _____ information from a parent conference

- _____ medical, psychological, and additional educational assessments when appropriate

TRAUMATIC BRAIN INJURY

TBI1

CRITERIA FOR ELIGIBILITY (criteria 1, 2, and 3 must be met)

- 1 ___ medical documentation of external insult to brain
- 2 ___ impaired functioning significantly affects educational performance
- 3 ___ brain injury is not
 - ___ congenital or degenerative
 - ___ induced by birth trauma

[Initial Evaluation Core Checklist](#) (use for Initial Evaluation Procedures, Components, and Report)

ADDITIONAL PROCEDURES FOR EVALUATION

- ___ medical documentation that there has been an external insult to the brain,
 - ___ health assessment when medical report indicates need for health technology, management, or treatments
- ___ psychological assessment to determine status of
 - ___ cognitive functioning
 - ___ behavioral functioning
 - ___ emotional functioning
- ___ speech/language evaluation
- ___ any other assessment procedures deemed necessary

PROCEDURES FOR REEVALUATION

Due to the implications of a traumatic brain injury, a triennial reevaluation should be conducted if there are notable changes in the school setting regarding cognition, language, memory, attention, reasoning, abstract thinking, judgment, problem-solving, sensory, perceptual, or motor abilities, psychosocial behavior, physical functions, information processing, or speech. These changes could be noted by any member of the IEP Team.

VISUAL IMPAIRMENT

VI1

CRITERIA FOR ELIGIBILITY (criterion 1 and either 2, 3, 4, or 5 must be met)

- 1 ___ loss of vision which significantly interferes with ability to perform academically and requires use of specialized textbooks, techniques, materials, or equipment
- 2 ___ visual acuity in the better eye or eyes together with best possible correction of
 ___ blindness-20/200 or less distance and/or near acuity
 ___ partial sight-20/70 or less distance and/or near acuity
- 3 ___ blindness due to a peripheral field so contracted that the widest diameter of such field subtends an angular distance no greater than 20 degrees that affects student's ability to learn
- 4 ___ progressive loss of vision which may in the future affect student's ability to learn
- 5 ___ other blindness resulting from a medically documented condition

[Initial Evaluation Core Checklist](#) (use for Initial Evaluation Procedures, Components, and Report)

ADDITIONAL PROCEDURES FOR EVALUATION

- ___ eye examination conducted by an ophthalmologist or optometrist.
 - ___ when condition progressive or unstable, need for yearly eye examination documented in report
- ___ educational assessment includes
 - ___ functional vision assessment
 - ___ assessment of the student's reading and writing skills
 - ___ assessment of needs in appropriate reading and writing media
 - ___ assessment of future needs for instruction in Braille or use of Braille
 - ___ for non-reader, learning medium assessment
- ___ orientation and mobility assessment, when warranted
- ___ family interview which addresses
 - ___ needs of the family in understanding the student
 - ___ community service agencies currently involved
 - ___ parents' expectations for the student
 - ___ appraisal of self-help and other functional skills exhibited at home

PROCEDURES FOR REEVALUATION

If the visual impairment is progressive or unstable the triennial evaluation must be conducted.

GIFTED

G1

PROCEDURES FOR SCREENING

- ___ sensory screening when
 - ___ vision problems suspected
 - ___ hearing problems suspected
- ___ LEA procedures for screening followed
 - ___ screening criteria do not exceed criteria for eligibility
- ___ two staff members review screening information with student's teacher
- ___ if student meets screening criteria, evaluation conducted

CRITERIA FOR ELIGIBILITY

Preschool and Kindergarten: (criterion 1 or 2 must be met)

- 1 ___ score at or above +3 standard deviations on individual intellectual assessment
- 2 ___ obtain a combined score of 10 on Matrix with at least 4 points earned on intellectual

Grades 1 through 12: (criterion 1, 2, or 3 must be met)

- 1 ___ score at or above +2 standard deviations on intellectual instrument
- 2 ___ obtain a combined score of 7 on Matrix with at least 2 points earned on intellectual
- 3 ___ obtain a score of at least 6 on Matrix with recommendation of team

PROCEDURES FOR EVALUATION

- ___ Preschool and Kindergarten
 - ___ individual intellectual assessment
 - ___ formal reading assessment
 - ___ formal math assessment
 - ___ parent interview
 - ___ teacher interview for enrolled students
- ___ Grades 1 through 12
 - ___ intellectual assessment (individual or group)
 - ___ formal reading assessment
 - ___ formal math assessment
 - ___ parent interview
 - ___ teacher interview
- ___ tests standardized, non-discriminatory, and appropriate for student's cultural background
- ___ report addresses
 - ___ discrepancies between formal test results and customary behaviors/daily activities
 - ___ discrepancies among test results
- ___ recommendation to classify or not classify based on thorough evaluation of abilities

TALENTED

T1

PROCEDURES FOR SCREENING

- ___ appropriate screening instrument completed
 - ___ visual arts
 - ___ music
 - ___ theatre
- ___ LEA procedures for screening followed
- ___ state approved talent screening form used
 - ___ each item scored 4 or above documented with either
 - ___ examples or
 - ___ work samples
- ___ student scores
 - ___ 33-35 on visual arts screening instrument or
 - ___ 33-35 on music screening instrument or
 - ___ 48-50 on theatre screening instrument
- ___ if student meets screening criteria, evaluation conducted

CRITERIA FOR ELIGIBILITY

- ___ student has met local screening criteria.
- ___ creative abilities in visual and/or performing arts documented by criteria below*
 - ___ scores not rounded

***Music** Grades K - 6: (criteria 1 or 2, **plus** 3, and 4 or 5 must be met)
 Grades 7-12: (criteria 3, and 4 or 6 must be met)

- 1 ___ grades K-3: score of 35-40 on state approved music evaluation instrument
- 2 ___ grades 4-6: score of 30-35 on state approved music evaluation instrument
- 3 ___ score of 18-20 on music interview scale
- 4 ___ grades K-12, score of:
 - ___ 27-30 on instrumental music audition scale, for prepared selection
 - ___ 23-25 on instrumental music audition scale, for improvisations
- 5 ___ grades K-6: score of 33-35 on vocal music audition scale
- 6 ___ grades 7-12: score of 47-50 on vocal music audition scale

***Theatre** (criteria 1 and 2, or 1 and 3 must be met)

- 1 ___ score of 12-15 on theatre interview scale
- 2 ___ grades K-6: score of 42-45 on theatre audition scale
- 3 ___ grades 7-12: score of 47-50 on theatre audition scale

***Visual Arts** (criteria 1 and 2, or 3 and 4 must be met)

- 1 ___ grades K-6: score of 12-15 on *Art Recognition Test*
- 2 ___ grades K-6: score of 26-30 on *Narrative Drawing Test*
- 3 ___ grades 7-12: score of 26-30 on *Design Test*

4 ___grades 7-12: score of 42-45 on *Drawing Test*

PROCEDURES FOR EVALUATION

- ___assessment of performance conducted
 - ___simultaneously, independently, and without discussion of results
 - ___by two state-trained evaluators
 - ___using state-approved procedures and instruments
- ___pupil appraisal evaluation coordinator
 - ___attends performance
 - ___integrates results into report that indicates if student is talented
- ___LEA provides transportation to evaluation site when necessary

REEVALUATION CHECKLISTS

RP1

REEVALUATION PROCEDURES (when parent does not consent to triennial waiver)

- evaluation coordinator assigned
- evaluation coordinator or other designated personnel notifies
 - parents
 - teachers
 - related service personnel
 - official designee of the LEA
 - other appropriate personnel
- informed parental consent obtained
- review of
 - evaluations and information provided by parents
 - information provided by the student, when appropriate
 - educational history, including all previous evaluation reports
 - progress monitoring data
 - provided by teacher(s)
 - provided by related service providers
 - used to determine student's involvement and progress in the general education curriculum
 - or development of a functional behavioral assessment, if behavior is a concern
 - data based on observations conducted by
 - teachers
 - related service providers
- completion of any reevaluation requirements for specific disabilities
 - Developmental Delay
 - Hearing Impairment
 - Traumatic Brain Injury
 - Visual Impairment
- review transitional needs after student's 15th birthday
- identify what additional data, if any, are needed to determine
 - if student continues to have the same exceptionality
 - student's educational needs
 - student's present levels of academic achievement
 - student's related developmental needs
 - if student continues to need special education and related services and
 - if additions or modifications to special education and related services needed to enable student to
 - meet annual IEP goals
 - participate, as appropriate, in the general education curriculum

****The above review may be conducted without a meeting****

- WHEN NO ADDITIONAL DATA NEEDED, parent notified of
 - determination and reasons for determination
 - right of parents to request an assessment

___ written notification to parents (provides documentation that reevaluation occurred)

___ WHEN ADDITIONAL DATA ARE NEEDED, reevaluation report documents the following

___ reason for reevaluation

___ new concerns

___ significant change in placement proposed

___ student no longer suspected of having exceptionalty

___ informed parental consent obtained

___ review of

___ evaluations and information provided by parents

___ information provided by the student, when appropriate

___ educational history, including all previous evaluation reports

___ progress monitoring data

___ provided by teacher(s)

___ provided by related service providers

___ used to determine student's involvement and progress in general education curriculum

___ or development of a functional behavioral assessment, if behavior is a concern

___ data based on observations conducted by

___ teachers

___ related service providers

___ completion of any reevaluation requirements for specific disabilities

___ Developmental Delay

___ Hearing Impairment

___ Traumatic Brain Injury

___ Visual Impairment

___ transitional needs after student's 15th birthday

___ completion of additional assessments and other evaluation measures

___ for new concerns, documentation of

___ scientifically research-based interventions

___ any additional data that addressed concerns

___ when new or different exceptionalty suspected

___ initial criteria and procedures for suspected exceptionalty followed

___ systematic observation

___ reevaluation conclusions including

___ exceptionalty

___ impairment or condition

___ determination of

___ whether student continues to have an exceptionalty

___ student's educational needs

___ student's present levels of academic achievement

___ student's related developmental needs

___ whether student continues to need special education and related services

___ whether additions or modifications to special education and related services needed to enable student to

___ meet annual IEP goals

___ participate, as appropriate, in the general education curriculum

- reevaluation team members' names and signatures
- separate signed dissenting opinion, when appropriate
 - opinion states the disagreement
 - opinion gives supporting data and conclusion(s)
- explanation of all evaluation timeline extensions including
 - documentation of parental approval when necessary
- parents' participation in determination of new exceptionality, when appropriate
- disseminated to
 - supervisor/designee
 - parent(s)
 - school
- entered into SER

TRIENNIAL REEVALUATION WAIVER

- sufficient evidence that student
 - is making adequate progress in classroom
 - continues to have a disability
 - continues to need special education and related services
 - is making progress in meeting IEP goals
 - is participating, as appropriate, in general education curriculum
- no additional data needed at this time
- written notification to parent that reevaluation may be requested
- written request to parent to waive triennial
- written parental consent to waive triennial
- data entered into SER (*date of consent may not occur earlier than six months before the evaluation expiration date*)

GIFTED OR TALENTED REEVALUATIONS

- student's only exceptionality is Gifted or Talented
- informed parental consent obtained
- reevaluation may be accomplished through IEP meeting
- discussion documented on IEP
- copy of IEP sent to pupil appraisal

RELATED SERVICES CHECKLISTS

OCCUPATIONAL THERAPY

OT1

CRITERIA FOR ELIGIBILITY

- ___ student is classified and eligible for special educational services AND
- ___ there is documented evidence that occupational therapy is required to enable the student to benefit from special educational services AND
- ___ student demonstrates a motor impairment in **one** of the following three categories:

___ **Developmental**

Ages 3y0m - 5y6m

- ___ a fine motor, visual motor, oral motor or self-help delay greater than 1 standard deviation below functional abilities OR
- ___ a developmental age score demonstrating a delay of at least 6 months below functional abilities

Ages 5y7m - 9y11m

- ___ a fine motor, visual motor, oral motor or self-help delay greater than 1 standard deviation below functional abilities OR
- ___ a developmental age score demonstrating a delay of at least 12 months below functional abilities

Ages 10y0mo - 21y

- ___ a fine motor, visual motor, oral motor or self-help delay greater than 1 standard deviation below functional abilities OR
- ___ a developmental age score demonstrating a delay of at least 18 months below functional abilities

___ **Motor Function**

- ___ student exhibits neurophysiological limitations or orthopedic limitations that affect his or her physical functioning in the educational setting AND
- ___ there is evidence of an ability to improve motor functioning with occupational therapy intervention OR
- ___ there is evidence of an ability to maintain motor functioning with therapeutic intervention OR
- ___ there is evidence of an ability to slow the rate of regression of motor function with therapeutic intervention

___ **Sensorimotor**

- ___ student exhibits an inability to integrate sensory stimuli effectively, affecting his or her capacity to perform functional activities within the educational setting AND

_____ there is evidence of an ability to improve functional activity performance through OT intervention

PROCEDURES FOR EVALUATION

_____ assessment conducted by licensed occupational therapist

_____ review of available medical and educational information, environmental concerns, anecdotal records

_____ observation of motor skills which document the specific concerns causing the referral

_____ assessment of motor abilities

_____ for students ages 6 - 21, assessment conducted in the educational environment

_____ evidence that the problem interferes with the student's ability to benefit from the educational program

_____ evidence that there is a likely potential for change in the student's educational functioning with therapeutic intervention?

ORIENTATION AND MOBILITY SERVICES

OM1

CRITERIA FOR ELIGIBILITY

- ___ student is classified and eligible for special education services as an individual with a visual impairment AND
- ___ there is documented evidence that orientation and mobility services are required to enable the student to benefit from special education services.

PROCEDURES FOR EVALUATION

- ___ assessment conducted by an orientation and mobility instructor recognized by the State Department of Education
- ___ assessment of the student's ability to travel safely and efficiently in a variety of environments and situations with or without the use of special mobility devices and visual aids
- ___ a listing of the student's observed ___ strengths and ___ weaknesses in the area of travel safety and mobility skills
- ___ recommendations concerning the student's demonstrated need for formal orientation and mobility training within the specific areas

PHYSICAL THERAPY

PT1

CRITERIA FOR ELIGIBILITY

- ___ student is classified and eligible for special educational services AND
- ___ there is documented evidence that occupational therapy is required to enable the student to benefit from special educational services AND
- ___ student demonstrates gross motor impairment in **one** of the following two categories

___ **Developmental**

Ages 3y0m - 5y6m

- ___ a gross motor delay of 6 months or more below level of functional abilities

Ages 5y7m - 9y11m

- ___ a gross motor delay of 12 months or more below level of functional abilities

Ages 10y0 m - 21y

- ___ a gross motor delay of 18 months or more below level of functional abilities

___ **Motor Function**

- ___ student exhibits neurophysiological, orthopedic, cardiovascular, respiratory, or sensorimotor limitations that affect his or her gross motor functioning in the educational setting AND
- ___ there is evidence of an ability to improve motor functioning with occupational therapy intervention OR
- ___ there is evidence of an ability to maintain motor functioning with therapeutic intervention OR
- ___ there is evidence of an ability to slow the rate of regression of motor function with therapeutic intervention

PROCEDURES FOR EVALUATION

- ___ assessment conducted by a licensed physical therapist
- ___ review of available medical and educational information, environmental concerns, anecdotal records
- ___ observation of motor skills that document the specific concerns causing the referral
- ___ assessment of gross motor abilities
- ___ for students ages 6-21, the assessment of gross motor abilities conducted in the educational environment
- ___ evidence that problem interferes with the student's ability to benefit from the educational program
- ___ evidence that there is a potential for change in the student's educational functioning with therapeutic intervention

SCHOOL HEALTH SERVICES AND SCHOOL NURSE SERVICES

SH1

CRITERIA FOR ELIGIBILITY

- ___ student is classified and eligible, under Federal or State law, as an individual with a disability AND
- ___ there is documented evidence that special health services are required within the educational setting to enable the student to benefit from the special education program AND
- ___ a prescription from a physician or dentist licensed to practice in Louisiana or adjacent state prescribes the health treatment, technology, and/or health management OR
- ___ there is a documented need for a modification of his or her activities of daily living.

PROCEDURES FOR EVALUATION

- ___ assessment conducted by a school nurse or other qualified personnel
- ___ assessment of the student's health status conducted in the educational setting.
- ___ analysis and interpretation of the special health service needs, health status, stability, complexity of the service, predictability of the service outcome, and risks that may be involved with improperly performed services.

SCHOOL PSYCHOLOGICAL SERVICES

SPS1

CRITERIA FOR ELIGIBILITY

- ___ student is classified and eligible for special education services AND
- ___ there is documented, observable and measurable evidence that school psychological services are necessary for the student to benefit from special education services

PROCEDURES FOR EVALUATION

- ___ assessment conducted by a certified school psychologist
- ___ review, ____, analysis and ___ determination of the appropriateness of evidence documenting the specific referral concern(s)
- ___ a systematic observation in the setting(s) in which the concern is manifested
- ___ any additional procedures judged necessary to determine if the area of concern interferes with the student's ability to benefit from his or her educational program
- ___ provision of recommendations for interventions, strategies and/or services necessary to improve the student's educational performance

SCHOOL SOCIAL WORK SERVICES

SSW1

CRITERIA FOR ELIGIBILITY

- ___ student is classified and eligible for special education services AND
- ___ there is documented, observable and measurable evidence that school social work services are necessary for the student to benefit from special education services

PROCEDURES FOR EVALUATION

- ___ assessment conducted by a qualified school social worker
- ___ review, ___ analysis and ___ determination of the appropriateness of evidence documenting the specific referral concern
- ___ assessment of psycho-social stressors
- ___ family interview
- ___ interview with the student
- ___ interview(s) with the student's teacher(s) and
- ___ review of available mental health and/or health records
- ___ provision of recommendations for interventions, strategies and/or services necessary to improve the student's educational performance.

SPEECH/ LANGUAGE PATHOLOGY SERVICES

SLP2

CRITERIA FOR ELIGIBILITY

___ student is classified as a student having a disability other than Speech or Language Impairment AND

___ student meets the criteria for eligibility for Speech or Language Impairment AND

___ there is documented evidence that speech/language pathology services are required to assist the student to benefit from the special educational services

___ there is documented evidence that non-verbal students with disabilities who have augmentative communication needs are not denied speech/language pathology services as a related service because of an inability to assess using traditional methods.

PROCEDURES FOR EVALUATION

___ assessment conducted by a licensed speech-language pathologist

___ procedures for evaluation under Speech or Language Impairment are conducted

___ evidence that the problem interferes with the student's ability to benefit from an educational program

___ evidence that there is a likely potential for change in the student's educational functioning if he/she receives therapeutic intervention

SPECIAL SERVICES CHECKLISTS

ADAPTED PHYSICAL EDUCATION

APE1

CRITERIA FOR ELIGIBILITY

- student is classified and eligible for special educational services AND
- there is documented evidence that the student may not safely or successfully engage in the regular physical education program on a full-time basis

Ages 3y0m - 5y11m

- student meets 69 percent or less of the State identified motor skills for the level appropriate to the student's chronological age using LAMAP. Skills fall within the
 - Mild deficit range (45 to 69 percent of skills) OR
 - Moderate deficit range (20 to 44 percent of skills) OR
 - Severe deficit range (19 percent or less of skills)
- corroboration of motor deficit and
- need for APE by evaluator based on observation

Ages 6y0mo - 21y

- student meets 69 percent or less of the State identified physical education competencies for the grade level appropriate to the student's chronological using CTAPE. Competencies fall within the
 - Mild deficit range (45 to 69 percent of competencies) OR
 - Moderate deficit range (20 to 44 percent of competencies) OR
 - Severe deficit range (19 percent or less of competencies)
- corroboration of motor deficit and
- need for APE by evaluator based on observation

Students with Autism, Emotional Disturbance, Traumatic Brain Injury, Other Health Impairment

- evidence student is unable to participate in regular physical education class as result of
 - autism
 - serious emotional disorder
 - brain injury
 - chronic or acute health condition
- corroboration of the condition and
- need for APE by evaluator based on observation

PROCEDURES FOR EVALUATION

Ages 3y0m - 5y11m

- ___ assessment conducted by certified adapted physical education teacher using LAMAP
- ___ observation of student in ___ structured and ___ unstructured settings
- ___ observations address motor deficits identified by LAMAP
- ___ recommendations for ___ activities and/or ___ adaptations necessary to meet physical education needs

Ages 6y0mo - 21y

- ___ assessment conducted by certified adapted physical education teacher using CTAPE
- ___ observation of student in ___ structured and ___ unstructured settings
- ___ observations address motor deficits identified by LAMAP
- ___ recommendations for ___ activities and/or ___ adaptations necessary to meet physical education needs

Students with Autism or Emotional Disturbance

- ___ written documentation from
 - ___ certified school psychologist OR
 - ___ licensed psychologist OR
 - ___ psychiatrist AND
 - ___ adapted physical education evaluator
- ___ written documentation verifies
 - ___ significantly reduced performance that
 - ___ prevents safe and successful performance in a regular physical education class
- ___ observation of student in ___ structured and ___ unstructured settings
- ___ observations address motor deficits identified by LAMAP
- ___ recommendations for activities and/or
- ___ adaptations necessary to meet physical education needs

Students with Traumatic Brain Injury or Other Health Impairment

- ___ written documentation from
 - ___ certified school psychologist OR
 - ___ licensed psychologist OR
 - ___ psychiatrist AND
 - ___ adapted physical education evaluator
- ___ written documentation verifies
 - ___ significantly reduced performance that
 - ___ prevents safe and successful performance in a regular physical education class
- ___ observation of student in ___ structured and ___ unstructured settings

____ observations address motor deficits identified by LAMAP
____ recommendations for activities and/or
____ adaptations necessary to meet physical education needs

ASSISTIVE TECHNOLOGY

ATECH3

CRITERIA FOR ELIGIBILITY

- student is classified and eligible for special education services AND
- there is documented evidence that assistive technology is required within the educational setting

PROCEDURES FOR EVALUATION

- assessment conducted by qualified professional with expertise to address specific areas of concern
- observation of the student during daily activities interacting with
 - parents OR
 - teachers OR
 - peers
- interview with
 - primary care providers AND
 - classroom teacher(s)
- interview determines
 - what interventions for assistive technology devices/services have been attempted
 - results of interventions
- assessment of student's current (when applicable)
 - mobility
 - seating
 - positioning
 - neuromotor ability needs
- determination of
 - selection techniques AND
 - methods of access for assistive technology
- assessment of student's further
 - mobility
 - seating
 - positioning needs
- assessment with variety of assistive technology devices
 - involvement of student
 - involvement of parent
- recommendations include
 - personnel who will need training AND
 - technical assistance