

Re: Guidelines for Eligibility and Identification of Students with Developmental Delays (DD) as a Primary Exceptionality

Date: 01/16/06 and revised on 06/20/07 (Draft 7)-see change made at bottom of page 2 and on page 4.

Definition: "Developmental Delay" means such a deviation from average development in one or more of the following areas that special education and related services are required:

- Physical
- Cognitive
- Adaptive behavior
- Communications, or,
- Social or Emotional development

Developmentally Delayed must stand alone as a primary exceptionality. Students who meet the eligibility criteria and are identified with another disability would not use Developmentally Delayed as a primary or secondary exceptionality. **For example**, a student with an initial diagnosis of speech only would be classified as Speech with no secondary identification. **A child identified as a speech only child suspect of having a central auditory processing deficit would be placed with a primary diagnosis of Speech (based on a -1.5 standard deviation) and no secondary diagnosis. In rare instances, the services available to such a child could be speech only, or, could be a combination of speech and resource room services depending on the severity index of the child's disability and the child's ability vs inability to perform successful in academic settings. Another example would be that a child qualifies for PT services, but nothing else. The question then becomes, "Should the child's primary handicapping condition be DD or Physically Impaired?" The answer is, "PT" as a primary diagnosis with no secondary diagnosis. The reason for this is if a child can qualify in any other area other than DD then it automatically becomes the primary diagnosis with no secondary diagnosis.**

"Deviation from Average Development" means that the measurable standard deviation from the norm would be at least -1.5 in one or more of the above mentioned areas.

Age Span: Ages 3yrs. 0 months through 9 years, 11 mos. and 29 days.

Availability of a Single Related Service to a Student: (Regulation: 91-40-1 {JJJ})

- a. "paraeducator services, speech-language pathology services, and any other related service, if it consists of specially designed instruction to meet the unique needs of a child with a disability;
- b. occupational or physical therapy and interpreter services for deaf children if, without any of these services, a child would have to be educated in a more restrictive environment."

Provision "a" above allows EC students identified with a primary exceptionality of speech to be identified as Speech rather than as DD.

Means of Documentation: The deviation from average development shall be documented and measured by appropriate diagnostic instruments (i.e.: Battelle for ages 3-5, and WIPPSI, Stanford-Binet or WISC- IV for a cognitive measure for 6-9 yr. olds, a W-J.III as an achievement measure for 6-9 yr. olds, and the BASC for social-emotional measurement for ages 6-9) and procedures.

Questions to be Addressed In Initial Evaluation/Re-evaluation or Transfer of a Student from One District to Another (whether in-state or out-of-state):

Question # 1: Does the response of the presenting concern to general education interventions (or for preschool students, the results of screening and evaluation) indicate the need for intense or sustained resources?

Question # 2: Are the resources needed to support the student to participate and progress in the general education curriculum (or for preschool students, to participate in activities appropriate for the students of the same age) beyond those available through general education or other resources?

Question # 3: Is there evidence of a severe discrepancy between the performance of the student and his or her peers, or evidence of a severe discrepancy between the student's ability and performance in the area(s) of concern?

Question # 4: Is the presence of an exceptionality substantiated by convergent data from multiple sources?

Footnote: If the answer to one or more of the heretofore questions is a "No" (when making a determination of a transfer student to continue services or not) then the team should move forward with a request to the parent for our team to conduct our own evaluation meanwhile continuing to provide the child services until the team can convene to discuss new test data.

Test Protocol Requirements for Infant/Toddlers Transitioning into ECSE Services:

Children entering services from the Infant/Toddler program are typically evaluated by the Infant/Toddler staff. The testing conducted by Infant/Toddler staff is most typically the Battelle. Speech Pathologists, OT, PT may conduct tests of their choosing based upon historical information. The School Psychologist's role is to monitor the testing, bring all parties together to review the summative results, to assist with the feedback of test results with the child's parents, and to ensure that all parts of the evaluation are collated into one final report. Each member of the team conducting testing (EC teacher, Speech Pathologist, OT/PT) is individually responsible for completing their own report. The final report(s) will then be provided to all parties with a need to know status (to include the parents). The report is also sent to the offices of the Special Services Cooperative for filing purposes in the child's special education records. This report can be sent by the child's new case manager or by the school psychologist. This is typically referred to as the AIM's packet.

Test Protocol Requirements for (EC) Students That Need a 3-Year Re-evaluation:

It is necessary to conduct a re-evaluation as (EC) students' transition into Kindergarten services. This is necessary as child exit preschool services and move into above age 5 services.

Re-evaluations are required no later than 3 years following the initial evaluation date (i.e.: child initially evaluated on 9/15/02, at age 3-years and 0-months will be re-evaluated no later than 9/15/05 at age 6-years and 0-months and no later than 9/15/08 at age 9-years and 0-months.) A placement meeting would be required prior to the **child entering Kdg. and prior to the child's 10th birthday to clarify eligibility criteria based on an exceptionality determination other than DD.** A third re-evaluation would be required just prior to the child's 10th birthday. The same procedures and personnel responsibilities stated above are true in all tri-annual situations referred to in the example just above:

School Psychologists become more active in the re-evaluation process because they administer a cognitive abilities test typically at age 6 or older. They also continue in their role to coordinate the entire battery of tests administered, the date of feedback results to parents and assist in the final determination of eligibility of each student re-evaluated.

Psychological Reports and Other Reports Written by Cooperative Staff: Any official report written by a Cooperative staff member making the determination of eligibility for Developmentally Delayed is required to:

1. identify the standardized test by name
2. identify the dates all tests were given
3. identify the date of the meeting with parents to review test results
4. identify the results of testing in the form of a standard deviation or standard score (SS) by grade (not age based scores for the achievement testing in particular) in all instances possible (i.e.: W-J III, WISC-IV, Stanford-Binet) **see footnote below*
5. Identify the category/ies that the child qualifies for services: physical, cognitive, adaptive behavior, communications, or, social/emotional
6. identify the results of behavior checklists as recommended by the test company (i.e.: BASC)
7. cognitive abilities test results should be identified in terms of the standard score
8. identify the individual administering the test and their certificated/licensure position

**Footnote: Age scores are to be used in rare/extenuating circumstances only (a student that's been retained twice for example).*

Re-evaluation results and the determination of eligibility: It is vitally important to keep in mind that children do not need to meet the rigors of the discrepancy model used in the Cooperative to re-qualify for services. If for example, there is no 1.5 standard deviation in evidence the assumption could be made that the reason for this is **based on "specialized instruction and supports" that could not otherwise be provided in another setting** over the past year or two or three **that** have significantly impacted the child's learning rate and therefore are closing the academic "gap." The most frequently asked question of team members then becomes, "Does this mean that now is the time to discontinue services or not?" followed by the question, "How do we make an informed decision of what to do next?" The IEP team is faced with the decision of whether or not services may still be needed to further close the achievement gap, if so then to continue services, or, elect to place a student on consultative status for a year (with a "wait and see" option), or, elect to dismiss the student from services.

The following questions answered by team members should be used to “guide” team members when faced with this decision-making situation.

- **Do services need to be continued because sustained resources requiring specialized instruction and supports are required and will not be available in the general education environment?**
- **Do team members agree that the child will not be able to continue to make adequate yearly progress without specialized instruction and supports?**
- Although there still remains to be evidence of a discrepancy between the performance of the student and his/her peers and/or evidence of a discrepancy between the student’s ability and performance in the area(s) of concern (the “gap”) there is or is not reason to believe that if **specialized instructional services and other supports** are discontinued that the student will be “at risk” or that the “gap” will begin to increase again?
- Is the presence of an exceptionality **(DD)** substantiated by convergent data from multiple sources?

If the answer to all or most of the above questions is “YES” then the team should consider continuation of services.

If the answer to all or most of the above questions is “MAYBE” then the team should consider placing the student on a consultative IEP for the following year.

If the answer to all or most of the above questions is “NO” then the team should consider dismissing the student from services.

If it is determined that the child needs specific accommodations and/or adaptations rather than “specialized instruction and other supports” then the team should consider the student for a 504 plan.

Source: The items in bold type on the last page were discussed by the Director and Margie Hornback of KSDE , by phone, on 06/20/07.