

## Section 1 – Identification Process

### Special Education Eligibility Requirements & Categories of Eligibility State Board Rule 160-4-7-.05

In order to be eligible to receive special education services, the student must meet the requirements of one or more of the following categories:

- *Autism Spectrum Disorder (AUT)*
- *Deaf-Blind (D/B)*
- *Deaf/Hard of Hearing (D/HH)*
- *Emotional/Behavioral Disorder (EBD),*
- *Mild, Moderate, Severe, or Profound Intellectual Disability (MIID, MOID, SID, or PID)*
- *Orthopedic Impairment (OI)*
- *Other Health Impairment (OHI)*
- *Significant Developmental Delay (SDD)*
- *Specific Learning Disability (SLD)*
- *Speech-Language Impairment (SI)*
- *Traumatic Brain Injury (TBI)*
- *Visual Impairment, including Blindness (VI)*

#### **AUTISM SPECTRUM DISORDER (AUT)**

Autism spectrum disorder is a developmental disability generally evident before age three that adversely affects a child's educational performance and significantly affects developmental rates and sequences, verbal and non-verbal communication and social interaction and participation. Other characteristics often associated with autism spectrum disorder are unusual responses to sensory experiences, engagement in repetitive activities and stereotypical movements and resistance to environmental change or change in daily routines. Autism does not apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance as defined in (d). Children with autism spectrum disorder vary widely in their abilities and behavior. [34 C.F.R. § 300.8(c)(1)(i)] The term of autism spectrum disorder includes all subtypes of Pervasive Developmental Disorder (such as Autistic Disorder; Rett's Disorder; Childhood Disintegrative Disorder; Asperger Syndrome; and Pervasive Developmental Disorder, Not Otherwise Specified) provided the child's educational performance is adversely affected and the child meets the eligibility criteria. Autism spectrum disorder may exist concurrently with other areas of disability.

#### **DEAF/BLIND (DB)**

Deaf/blind means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for children with deafness or children with blindness. [34 C.F.R. § 300.8(c)(2)]

#### **DEAF/HARD OF HEARING (D/HH)**

A child who is deaf or hard of hearing is one who exhibits a hearing loss that, whether permanent or fluctuating, interferes with the acquisition or maintenance of auditory skills necessary for the normal development of speech, language, and academic achievement and, therefore, adversely affects a child's educational performance. [See 34 C.F.R. § 300.8(c)(3) &

(5)] A child who is deaf can be characterized by the absence of enough measurable hearing (usually a pure tone average of 66-90+ decibels American National Standards Institute without amplification) such that the primary sensory input for communication may be other than the auditory channel. A child who is hard of hearing can be characterized by the absence of enough measurable hearing (usually a pure tone average range of 30-65 decibels American National Standards Institute without amplification) that the ability to communicate is adversely affected; however, the child who is hard of hearing typically relies upon the auditory channel as the primary sensory input for communication.

### **EMOTIONAL AND BEHAVIORAL DISORDER (EBD)**

An emotional and behavioral disorder is an emotional disability characterized by the following:

- (i) An inability to build or maintain satisfactory interpersonal relationships with peers and/or teachers. For preschool-age children, this would include other care providers.
- (ii) An inability to learn which cannot be adequately explained by intellectual, sensory or health factors.
- (iii) A consistent or chronic inappropriate type of behavior or feelings under normal conditions. (iv) A displayed pervasive mood of unhappiness or depression.
- (v) A displayed tendency to develop physical symptoms, pains or unreasonable fears associated with personal or school problems. [34 C.F.R. § 300.8(c)(4)(i)(A – E)]

A child with EBD is a child who exhibits one or more of the above emotionally based characteristics of sufficient duration, frequency and intensity that interferes significantly with educational performance to the degree that provision of special educational service is necessary. EBD is an emotional disorder characterized by excesses, deficits or disturbances of behavior. The child's difficulty is emotionally based and cannot be adequately explained by intellectual, cultural, sensory general health factors, or other additional exclusionary factors

### **INTELLECTUAL DISABILITY (ID)**

(a) Intellectual disabilities refer to significantly sub average general intellectual functioning which exists concurrently with deficits in adaptive behavior that adversely affects educational performance and originates before age 18. [34 C.F.R § 300.8(c)(6)]

Significantly sub average general intellectual functioning is defined as approximately 70 IQ or below as measured by a qualified psychological examiner on individually administered, nationally normed standardized measures of intelligence. Intellectual disability does not include conditions primarily due to a sensory or physical impairment, traumatic brain injury, autism spectrum disorders, severe multiple impairments, cultural influences or a history of inconsistent and/or inadequate educational programming.

- Mild Intellectual Disability (MID)-Intellectual functioning ranging between an upper limit of approximately 70 to a lower limit of approximately 55 and deficits in adaptive behavior that significantly limit a child's effectiveness in meeting the standards of maturation, learning, personal independence or social responsibility, and especially school performance that is expected of the individual's age level and cultural group, as determined by clinical judgment.
- Moderate Intellectual Disability (MOID)-Intellectual functioning ranging from an upper limit of approximately 55 to a lower limit of approximately 40 and deficits in adaptive behavior that significantly limit a child's effectiveness in meeting the standards of maturation, learning, personal independence or social responsibility, and especially school performance that is expected of the individual's age-level and cultural group as determined by clinical judgment.
- Severe Intellectual Disability (SID)-Intellectual functioning ranging from an upper limit of approximately 40 to a lower limit of approximately 25 and deficits in adaptive behavior that significantly limit a child's effectiveness in meeting the standards of maturation, learning,

personal independence, or social responsibility and especially school performance that is expected of the individual's age-level and cultural group as determined by clinical judgment.

- Profound Intellectual Disability (PID)-Intellectual functioning below approximately 25 and deficits in adaptive behavior that significantly limit a child's effectiveness in meeting the standards of maturation, learning, personal independence or social responsibility and especially school performance that is expected of the child's age level and cultural group as determined by clinical judgment.

### **ORTHOPEDIC IMPAIRMENT (OI)**

Orthopedic impairment refers to a child whose severe orthopedic impairments adversely affect their educational performance to the degree that the child requires special education.

### **OTHER HEALTH IMPAIRMENT (OHI)**

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 -

(1) Is due to chronic or acute health problems such as asthma, attention deficit disorder or attention deficient hyperactivity disorder, diabetes, epilepsy, or heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia, and Tourette Syndrome, and

(2) Adversely affects a child's educational performance. [34 C.F.R. § 300.8(c)(9)]

In some cases, heightened awareness to environmental stimulus results in difficulties with starting, staying on and completing tasks; making transitions between tasks; interacting with others; following directions; producing work consistently; and, organizing multi-step tasks.

### **SIGNIFICANT DEVELOPMENTAL DELAY (SDD)**

The term significant developmental delay refers to a delay in a child's development in adaptive behavior, cognition, communication, motor development or emotional development to the extent that, if not provided with special intervention, the delay may adversely affect a child's educational performance in age-appropriate activities. The term does not apply to children who are experiencing a slight or temporary lag in one or more areas of development, or a delay which is primarily due to environmental, cultural, or economic disadvantage or lack of experience in age appropriate activities. The SDD eligibility may be used for children from ages three through nine (the end of the school year in which the child turns nine). [See 34 C.F.R. § 300.8(b)]

### **SPECIFIC LEARNING DISABILITIES (SLD)**

(1) Specific learning disability is defined as 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 an imperfect ability to listen, think, speak, read, write, spell or do mathematical calculations. The term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. The term does not apply to children who have learning problems that are primarily the result of visual, hearing or motor disabilities, intellectual disabilities, emotional or behavioral disorders, environmental, cultural or economic disadvantage. [34 C.F.R. §300.8(c)(10)]

(2) The child with a specific learning disability has one or more serious academic deficiencies and does not achieve adequately according to age to meet State-approved grade-level standards. These achievement deficiencies must be directly related to a pervasive processing deficit and to the child's response to scientific, research-based interventions. The nature of the deficit(s) is such that classroom performance is not correctable without specialized techniques that are fundamentally different from

those provided by general education teachers, basic remedial/tutorial approaches, or other compensatory programs. This is clearly documented by the child's response to instruction as demonstrated by a review of the progress monitoring available in general education and Student Support Team (SST) intervention plans as supported by work samples and classroom observations. The child's need for academic support alone is not sufficient for eligibility and does not override the other established requirements for determining eligibility.

### **SPEECH-LANGUAGE IMPAIRMENT (SI)**

Speech or language impairment refers to a communication disorder, such as stuttering, impaired articulation, language or voice impairment that adversely affects a child's educational performance. A speech or language impairment may be congenital or acquired. It refers to impairments in the areas of articulation, fluency, voice or language. Individuals may demonstrate one or any combination of speech or language impairments. A speech or language impairment may be a primary disability or it may be secondary to other disabilities. [34 C.F.R. § 300.8(c)(11)]

### **TRAUMATIC BRAIN INJURY (TBI)**

Traumatic Brain Injury (TBI) refers to 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 the child's educational performance. The term applies to open or closed head injuries resulting in impairments which are immediate or delayed in one or more areas, such as cognition, language, memory, attention, reasoning, abstract thinking, judgment, problem solving, sensory, perceptual and motor abilities, psychosocial behavior, physical functions, speech and information processing. The term does not apply to brain injuries that are congenital or degenerative in nature, brain injuries induced by birth trauma. [34 C.F.R. § 300.8(c)(12)]

### **VISUAL IMPAIRMENT (VI)**

A child with a visual impairment is one whose vision, even with correction, adversely impacts a child's educational performance. [34 C.F.R. § 300.8(c)(13)] Examples are children whose visual impairments may result from congenital defects, eye diseases, or injuries to the eye. The term includes both visual impairment and blindness as follows:

- (1) Blind refers to a child whose visual acuity is 20/200 or less in the better eye after correction or who has a limitation in the field of vision that subtends an angle of 20 degrees. Some children who are legally blind have useful vision and may read print.
- (2) Visually impaired refers to a child whose visual acuity falls within the range of 20/70 to 20/200 in the better eye after correction or who has a limitation in the field of vision that adversely impacts educational progress.

### ***Determination of Eligibility by Eligibility Team:***

- Upon completion of the evaluation, the eligibility team will meet at the specified time and date to determine eligibility. The meeting time and date was decided upon at the referral meeting. The eligibility team will be comprised of qualified professionals and parents. The documentation of the eligibility/ineligibility will include a variety of appropriate sources and will be well documented. A copy of the evaluation report and determination will be provided to the parents.
  - Towns County Schools has 60 calendar days after receiving parental consent to complete the initial evaluation.
    - Completion of the initial evaluation is defined as completion of the evaluation report.
    - An eligibility determination is not required to be made within this 60-day initial evaluation timeline.
    - Towns County Schools will conduct the meeting to determine eligibility within 10 calendar days of the completion of the evaluation report(s).
    - The eligibility team will make a determination of the disability and the need for special education (dismissal) as determined by the results of the evaluation.
- If eligible, an IEP meeting will be scheduled at the eligibility meeting to be within 30 calendar days of the eligibility determination.
  - **Eligibility Report & Initial Placement:** The eligibility report is the documentation that verifies if the student is or is not eligible for special education services. The School Psychologist, along with a special education teacher, general education teacher(s), parent(s) or guardian(s), and school administration take part in evaluating, interviewing, and observing the student and documenting the results in the eligibility report. The final eligibility report is compiled by the school psychologist based on information and reports from the previously stated list. An eligibility team meeting to determine eligibility is required for all disability areas and convenes before an Individual Education Plan (IEP) is developed. The School Psychologist works with all members of the evaluation team to make sure that all evaluations are scheduled and completed in a timely manner in order to meet state and federally mandated timelines. A copy of the psychological report and eligibility report will be given to the parents or guardians of the student. These reports shall be provided regardless of whether the child is eligible for ineligible.

**Categories & Summaries of Evaluation Information Required for Eligibility**

<p><b>Specific Learning Disability</b></p> <ul style="list-style-type: none"> <li>• Psychological Evaluation</li> <li>• Comprehensive Educational Evaluation</li> <li>• Documentation of supplementary instruction that lasts for 12 weeks with 4 data points</li> <li>• Classroom Observation (in deficit areas)</li> <li>• Analyzed Samples of work (in deficit areas)</li> <li>• Relevant medical information</li> <li>• Exclusionary factors* documented</li> </ul>	<p><b>Emotional Behavior Disorder</b></p> <ul style="list-style-type: none"> <li>• Documentation of interventions</li> <li>• Psychological Evaluation</li> <li>• Educational Evaluation</li> <li>• Behavioral Observations</li> <li>• Social History</li> <li>• Documentation of duration, frequency, and intensity</li> <li>• Exclusionary factors* documented</li> </ul>
<p><b>Other Health Impaired</b></p> <ul style="list-style-type: none"> <li>• Medical Evaluation</li> <li>• Developmental/Educational Evaluation</li> <li>• Psychological (if significant cognitive/academic/attention deficits are present)</li> <li>• Exclusionary factors* documented</li> </ul>	<p><b>Speech &amp; Language Disorder</b></p> <ul style="list-style-type: none"> <li>• Documentation of prior evidence based interventions</li> <li>• Oral Peripheral Examination</li> <li>• Articulation Evaluation</li> <li>• Language Evaluation</li> <li>• Voice Evaluation</li> <li>• Fluency Evaluation</li> </ul>
<p><b>Significant Developmental Delay</b> <b>(ages 3-7 initial &amp; 3-9 Re-evaluation)</b></p> <ul style="list-style-type: none"> <li>• Developmental Evaluation (5 skill areas)</li> <li>• Relevant medical information</li> <li>• Exclusionary factors* for kindergarten or older</li> </ul>	<p><b>Autism</b></p> <ul style="list-style-type: none"> <li>• Psychological Evaluation</li> <li>• Educational Evaluation</li> <li>• Communication Evaluation</li> <li>• Behavior Evaluation</li> <li>• Developmental History</li> </ul>
<p><b>Traumatic Brain Injury</b></p> <ul style="list-style-type: none"> <li>• Summary of Pre-Injury Functioning</li> <li>• Medical Evaluation/verification of TBI</li> <li>• Psychological Evaluation</li> <li>• Neuropsychological Evaluation</li> <li>• Psychoeducational Evaluation</li> </ul>	<p><b>Orthopedic Impairment</b></p> <ul style="list-style-type: none"> <li>• Medical Evaluation</li> <li>• Developmental/Educational Evaluation</li> <li>• Psychological (if significant cognitive/academic deficits are present)</li> </ul>
<p><b>Intellectual Disability</b></p> <ul style="list-style-type: none"> <li>• Psychological Evaluation</li> <li>• Educational Evaluation</li> <li>• Structured Observation</li> <li>• Adaptive Behavior Evaluation</li> <li>• Relevant medical information</li> <li>• Exclusionary factors* documented</li> </ul>	<p><b>Deaf/Hard of Hearing</b></p> <ul style="list-style-type: none"> <li>• Audiological Evaluation</li> <li>• Otological Evaluation</li> <li>• Educational Evaluation</li> <li>• Psychological Evaluation (optional)</li> </ul>
<p><b>Deaf-Blind</b></p> <ul style="list-style-type: none"> <li>• Audiological Evaluation</li> <li>• Otological Evaluation</li> </ul>	<p><b>Visual Impairment</b></p> <ul style="list-style-type: none"> <li>• Optometrical Evaluation or</li> <li>• Ophthalmological Evaluation</li> </ul>

• Ophthalmological Evaluation	• Educational Evaluation
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- **Exclusionary Factors:**

- The following exclusionary factors apply to all eligibility categories:
  - Lack of appropriate instruction in reading, including the essential components of reading instruction as defined in section 1208(3) of ESEA or
  - Lack of appropriate instruction in mathematics or
  - Limited English Proficiency
- The following exclusionary factors apply to the eligibility category of SLD
  - Minimum of 12 weeks and 4 data points of reviewed response to scientific, research-based interventions to determine if rate of learning is sufficient