

## Standards for Special Education Evaluation & Eligibility

The following standards for special education evaluation and eligibility shall be effective July 1, 2017.

### INTELLECTUAL DISABILITY

#### I. Definition

Intellectual Disability is characterized by significantly impaired intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period that adversely affects a child's educational performance.

#### II. Evaluation

The characteristics as identified in the Intellectual Disability Definition are present.

#### Evaluation Procedures

A comprehensive evaluation performed by a multidisciplinary team using a variety of sources of information that are sensitive to cultural, linguistic, and environmental factors or sensory impairments to include the following:

- (1) Intellectual functioning, determined by appropriate assessment of intelligence/cognitive abilities that results in significantly impaired intellectual functioning (i.e. two or more standard deviations below the mean), with consideration given to the standard error of measurement (SEM) for the test on an individually administered, standardized measure of intelligence.

In such cases where the SEM is used, there are significantly discrepant scores with a lower verbal index/measure compared to other index scores, or there are language concerns, a nonverbal measure of ability must also be administered.

- (2) Significantly impaired adaptive behavior in the home or community determined by:
  - (a) A composite score or at least one domain score in areas associated with conceptual, social, or practical adaptive functioning on an individual standardized instrument to be completed with or by the child's primary caretaker which measures two standard deviations or more below the mean. Standard scores shall be used. A composite age equivalent score that represents a 50% delay based on chronological age can be used only if the instrument fails to provide a composite standard score; and
  - (b) Additional documentation, when appropriate, which may be obtained from systematic documented observations, impressions, developmental history by an appropriate specialist in conjunction with the principal caretaker in the home, community, residential program or institutional setting.

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- (3) Significantly impaired adaptive behavior in the school, daycare center, residence, or program as determined by:
  - (a) For school aged children (and as appropriate for younger children), an individual standardized instrument completed with or by the primary teacher of the child. A composite score or at least one domain score in areas associated with conceptual, social, or practical adaptive functioning on this instrument shall measure two standard deviations or more below the mean. Standard scores shall be used. A composite age equivalent score that represents a 50% delay based on chronological age can be used only if the instrument fails to provide a composite standard score.
  - (b) Systematic documented observations by an appropriate specialist, which compare the child with other children of his/her chronological age group. Observations shall address age-appropriate adaptive behaviors. Adaptive behaviors to be observed in each age range include:
    1. Birth to six (6) years – communication, self-care, social skills, and physical development;
    2. Six (6) to thirteen (13) years – communication, self-care, social skills, home living, community use, self-direction, health and safety, functional academics, and leisure; and
    3. Fourteen (14) to twenty-one (21) years – communication, self-care, social skills, home-living, community use, self-direction, health and safety, functional academics, leisure, and work.
- (4) When discrepancies occur in adaptive ratings between settings (i.e., home and community/school), a systematic documented observation by an assessment specialist is needed to help provide clinical judgment in regards to adaptive functioning. Observations should include areas of conceptual, social, and practical adaptive functioning;
- (5) Assessment and interpretation of evaluation results shall take into account factors that may affect test performance, including:
  1. Limited English proficiency;
  2. Cultural factors;
  3. Medical conditions that impact school performance;
  4. Environmental factors; and
  5. Communication, sensory or motor disabilities.

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Difficulties in these areas cannot be the primary reason for significantly impaired scores on measures of intellectual functioning or home and school adaptive behavior.

- (6) Developmental history which indicates delays in cognitive/intellectual abilities (intellectual impairment) manifested during the developmental period (birth to 18) as documented in background information and history and a current demonstration of delays present in the child's' natural (home and school) environment.
- (7) Documentation, including observation and/or assessment of how Intellectual Disability adversely affects the child's educational performance in his/her learning environment and the need for specialized instruction and related services (i.e., to include academic and/or nonacademic areas).

### **Evaluation Participants**

Information shall be gathered from the following persons in the evaluation of Intellectual Disability:

- (1) The parent;
- (2) The child's general education classroom teacher;
- (3) A licensed special education teacher;
- (4) A licensed school psychologist, licensed psychologist, licensed psychological examiner (under the direct supervision of a licensed psychologist), licensed senior psychological examiner, or licensed psychiatrist; and
- (5) Other professional personnel, as indicated (e.g., speech language pathologist, occupational therapist, physical therapist).