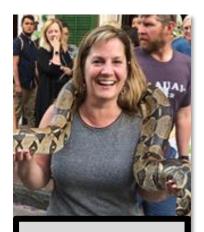
Eligibility Forms

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<u>Agenda</u>

- 1. Introductions
- 2. MUSER Eligibility Criteria
- 3. Overview of Eligibility Forms
- 4. Eligibility Form Compliance





Procedural Manual





https://www.maine.gov/doe/learning/specialed/manual

Maine Unified Special Education Regulations (MUSER)



05-071 Chapter 101

Maine Unified Special Education Regulation Birth to Age Twenty

Effective Date:

August 25, 2017



https://www.maine.gov/doe/cds/muser

What is the Purpose of an IEP?

The Individuals with Disabilities Education Act (IDEA) says the purpose of an *Individualized* Education Program (IEP) is "to ensure that all children with disabilities have available to them a free appropriate public education (FAPE) that emphasizes **special education** and related services designed to meet their *unique needs* and prepare them for further education, employment and independent living", and to promote movement back to general education.



| 2. DISABILITY | | |
|-----------------------------------|--------------------------------------|---|
| ☐ Autism | ☐ Deaf-Blindness | ☐ Deafness |
| ☐ Developmental Delay (3-5) | ☐ Developmental Delay (Kindergarten) | ☐ Emotional Disturbance |
| ☐ Hearing Impairment | ☐ Intellectual Disability | \square Visual Impairment (including Blindness) |
| \square Other Health Impairment | ☐ Orthopedic Impairment | ☐ Speech/Language Impairment |
| ☐ Specific Learning Disability | ☐ Traumatic Brain Injury | ☐ Multiple Disability |
| | | (check all applicable concomitant disabilities) |



A child with a Disability is an Individual Who -

- Has reached the age of 3 years;
- Has neither graduated from a secondary school program with a regular HS diploma nor reached nor reached 20 years of age at the start of the school year;
- Has been observed in the learning environment/classroom setting;
 and
- Has been evaluated according to these rules and has been determined to have a disability which requires the provision of special education and supportive services.
- A child with a disability shall have one or more of the disabilities listed in MUSER VII.2.A-M



An Administrative Letter was issued January 21, 2021, outlining the Change in Ending Age for Special Education Eligibility

https://mainedoenews.net/2021/01/21/administrative-letter-change-in-the-ending-age-for-special-education-eligibility-effective-immediately/



Autism -

Autism means a developmental disability significantly affecting verbal and non-verbal communication and social interaction, generally evident before age 3, that adversely affects 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.

34 CFR 300.8(c)(1)(i-iii)

Procedures for Determination

- Data from general education interventions, if appropriate, utilizing research-based intervention techniques indicate that the response to general education intervention is not adequate.
- Diagnostic impressions will be based upon an evaluation undertaken by a qualified professional who is qualified to make a diagnostic impression under the DSM codes for pervasive developmental disorders.

Deaf-Blindness –

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

34 CFR 300.8(c)(2)

Procedures for Determination

- Deaf-Blindness is a separate eligibility category. These children should not be categorized or counted as multiply disabled, unless there is another distinct disability and the team in unable to determine the primary disability.
- Audiological and medical evaluations are utilized as part of the multidisciplinary evaluation in determination of eligibility.



Deafness -

Deafness means a hearing impairment that is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, that adversely affects the child's educational performance.

34 CFR 300.8 (c)(3)

Procedures for Determination

- Audiological and medical evaluations will determine the diagnosis under this criterion.
- Once deafness is diagnosed, further assessments by specialists in the field of deaf education are needed for the IEP Team's determination of adverse effect on educational performance and language acquisition. These additional assessments may be conducted by a Teacher of the Deaf/Hearing Impaired, a speech-language pathologist, or other qualified personnel, as deemed appropriate by the IEP Team.



<u>Developmental Delay</u> –

A child with a disability aged 3-5, may, at the discretion of the local educational agency, include a child experiencing developmental delays, as defined below and as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical development; cognitive development; communication development; social or emotional development; or adaptive development; and who, by reason thereof needs special education and related services.

20 USC 1401 (a)(3)(B)(i-ii)

- The measured delays must be so significant as to adversely affect the child's educational performance or achievement in age-relevant developmentally, and individually appropriate activities such that the child does not achieve or perform at a level commensurate with that of typically developing children of the same age.
- Every effort will be made to identify a child's primary disability under one of the other Part B eligibility criteria, reserving developmental delay for those situations in which a clear determination cannot be made under any other category.

DD – Procedures for Determination

- A developmental delay will be determined through the use of standardized measures intended to examine all five areas of development, and administered by a qualified individual with formal training in professional standards of the assessment of young children.
- Criteria for identifying significant delays are scores of at least 1.5 standard deviations below the mean in at least two of the five listed domains or 2 standard deviations below the mean in one of the five listed domains.
- The composite standard score of the overall domain will be used to determine a standard deviation below the mean in a developmental area.
- The identification of a young child with a developmental delay will include consideration of an observation of the child in the learning environment or an environment appropriate for a child of that age, to document educational performance and behavior in the areas of difficulty. The observation will be done by a certified special education personnel, other than the child's current provider.
- The IEP Team will determine if the child's delay adversely affects the child's Meducational performance.

Emotional Disturbance –

Emotional Disturbance means a condition which exhibits one or more of the following characteristics over a long period of time and to a marked degree that adversely affects the child's educational performance:

- (a) An inability to learn that cannot be explained by intellectual, sensory, or health factors;
- (b) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
- (c) Inappropriate types of behaviors or feelings under normal circumstances;
- (d) A general pervasive mood of unhappiness or depression;
- (e) A tendency to develop physical symptoms or fears associated with personal or school problems.

Procedures for Determination

- Data from general education interventions. If appropriate, utilizing research based intervention techniques indicate that the response to general education intervention is not adequate.
- Evaluation will be done by qualified personnel who is qualified to make a diagnostic impression under the DSM codes.



Hearing Impairment –

Hearing impairment means an impairment in hearing whether permanent or fluctuating, that adversely affects the child's educational-performance but who is not included under the definition of deafness in Section VII.(2)(C) of this rule.

34 CFR 300.8(c)(5)

Procedures for Determination

- An audiological and a medical evaluation are to be utilized as part of the multidisciplinary determination of eligibility under this criterion.
- The IEP Team will determine if the impairment adversely affects the child's educational performance.



Intellectual Disability –

Intellectual Disability means significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behaviors and manifested during the developmental period that adversely affect the child's educational performance.

34 CFR 300.8(c)(6)

Procedures for Determination

- Diagnostic impression will be based upon an evaluation completed by a professional who is qualified to make a diagnostic impression under current DSM codes, as part of the multidisciplinary evaluation.
- The IEP Team will determine if the impairment adversely affects the child's educational performance.



Multiple Disabilities -

Multiple Disabilities means concomitant impairments the combination of which causes such severe educational needs that the child cannot be accommodated in special educational programs solely for one of the impairments. The term does not include children who have deaf-blindness.

34 CFR 300.8(c)(7)

Procedures for Determination

- A child under this category will have a diagnostic report which specifically articulates the distinct documented disabilities-the combination of which causes such severe educational needs that the child cannot be accommodated in special education programs solely for one impairment. The disabilities are concomitant.
- If the IEP Team is unable to determine a primary disability and the conditions under (a) are met, the child should be categorized as a child with multiple disabilities.



- If a child qualifies as Multiple Disability,
 - o you must identify the *concomitant* disabilities
 - disability as identified by those listed in Section 2 (not by diagnosis)



Multiple Disability Identification:

- ME-DOE Administrative Letter 14 (May 7, 2018)
 - National Percentage: 2.34%
 - State Percentage: 10.77% (3 states/territories higher)
- 2021 National Percentage 1.8%

| SPECIAL EDUCATION BY DISABILITY | | | | | | | | | |
|---------------------------------|---------|-------------------------------|---------|-------------------------------|---------|-------------------------------|---------|-------------------------------|---------|
| 20 | 17 | 20 | 18 | 20 | 19 | 20 | 20 | 20 | 21 |
| SPECIAL EDUCATION COUNT | PERCENT | SPECIAL EDUCATION COUNT | PERCENT | SPECIAL EDUCATION COUNT | PERCENT | SPECIAL EDUCATION COUNT | PERCENT | SPECIAL EDUCATION COUNT | PERCENT |
| 3,196 | 10.79% | 3,385 | 11.13% | 3,318 | 10.80% | 2,988 | 9.63% | 2,693 | 8.83% |

https://www.maine.gov/doe/data-reporting/reporting/warehouse/SpecialEdStateStats



Orthopedic Impairment -

Orthopedic Impairment means a severe orthopedic impairment that adversely affects the child's educational performance. The term includes impairments caused by congenital anomaly, impairments caused by disease (e.g. cerebral palsy, amputations and fractures or burns that cause contractions).

34 CFR 300.8(c)(8)

Procedures for Determination

- A referral shall include a diagnosis from a licensed physician as to the existence of an orthopedic impairment, resulting from a congenital anomaly, disease or other condition.
- The IEP Team will determine if the impairment adversely affects the child's educational performance.



Other Health Impairment -

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, such as asthma, attention deficit disorder, attention deficit hyperactivity disorder, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, or sickle cell anemia, Tourette Syndrome and adversely affects the child's educational performance.

34 CFR 300.8(c)(9)



OHI – Procedures for Determination

- Data from general education interventions, if appropriate, using research based intervention techniques indicate that the response to general education intervention is not adequate.
- The I.E.P Team shall consider any available written diagnoses, and/or educational, psychological or medical evaluation results relevant to the identification process.
- Current diagnostic criteria must have been considered in making the diagnosis or diagnostic impression.
- The I.E.P Team shall review written reports of observations conducted across settings including observations within the educational environment, if the child is participating in an educational environment. These observations must include a comparison of the referred/identified student's behaviors to same-aged peers' behaviors from the same environment.



OHI – Procedures for Determination continued

- When considering eligibility due to an attention deficit hyperactivity disorder, diagnostic impressions of ADHD must be based on a multi-method and multiinformant assessment process conducted across multiple environments including the educational setting for children participating in an educational setting. Methods for ADHD assessment must include at least the following:
 - ✓ psychosocial history
 - ✓ clinical interviews
 - ✓ structured observations of the child's behavior in the educational setting.
 - ✓ Behavior rating scales measuring features of attention, hyperactivity and impulsivity across multiple settings including the educational setting; and
 - ✓ Measure that rule out other disorders that may manifest with similar symptoms.
- A child with a medical condition listed under Other Health Impairment may also be eligible under another category if he or she meets the criteria for that other category and needs special education and related services. All children who have one or more conditions listed under Other Health impairment are not necessarily eligible to
 receive special education services under IDEA.

Procedures for Determination

(All Steps Required)

- Data from general education interventions, if appropriate, utilizing research based intervention techniques indicate that the response to intervention is not adequate.
- For assessments that provide standard scores, the criteria for determining disability will be in the moderate to severe range for the child's age as determined by the rating scale.
- For assessments that do not provide standard scores, criterial for a moderate to severe disability must be met by the quantifiable measure as determined by the rating scales
- For clinical observations documenting the effect of communication on educational performance in evaluation reports, the criteria for meeting a moderate to severe disability must be detailed by the examiner as determined by the rating scales.
- Evaluation data shall entered into a rating scale by the IEP Team which measures a moderate to severe level of speech or language impairment in all levels of assessment.
- Diagnosis will be by a licensed or certified professional who is qualified to make a diagnosis under this criteria.

Speech or Language Impairment –

Speech or language impairment means a communication disorder such as stuttering, impaired articulation, a language impairment, or a voice impairment that adversely affects the child's educational performance.

34 CFR 300.8(c)(11)



Specific Learning Disability –

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 my manifest itself in an imperfect ability to listen, think, speak, read, write, spell or do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. Specific learning disabilities does not include learning problems that are primarily the result of visual, hearing or motor disabilities, of intellectual disability, of emotional disturbance or environmental, cultural or economic disadvantage.

34 CFR 300.8(c)(10)



SLD – Procedures for Determination

- Evidence from multiple viable and reliable sources demonstrates that the child does not achieve adequately for the child's age or State approved grade level standards in oral expression, listening comprehension, written expression, basic reading skill, reading fluency skills, reading comprehension, mathematics calculation, mathematical problem solving; and
- The child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, State approved grade level standards, or intellectual development, that is determined by the group to be relevant to the identification of a specific learning disability, using appropriate assessments.



SLD – Procedures for Determination continued

- To determine a pattern of strengths and weaknesses, the IEP Team must consider the following:
 - data collected when using a process based on the child's response to scientific, research-based intervention; including general education interventions;
 - Classroom performance data;
 - Achievement data based on summative assessments, State assessments or scientifically-based assessments;
 - Psychological processing data from standardized measures to identify contributing factors: and
- The group determines that its findings are not primarily the result of
 - Visual, hearing or motor disability
 - Intellectual disability
 - Emotional disturbance
 - Cultural factors
 - Environmental or economic disadvantage or
 - Limited English proficiency

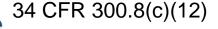


Traumatic Brain Injury –

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 child'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, judgement, problem-solving, sensory, perceptual and motor abilities, psychosocial behavior, physical functions, information processing and speech. The term does not apply to brain injuries that are congenital or degenerative, or bran injuries induced by birth trauma.

Procedures for Determination

- Evaluation will be done by qualified personnel who are qualified to make the diagnosis
- The IEP Team will determine if the impairment adversely affects the child's educational performance.



<u>Visual Impairment</u> <u>Including Blindness</u> –

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

34 CFR 300.8(c)(13)

Procedures for Determination

(All Steps Required)

 A child displays a visual impairment when a visual impairment or progressive vision loss has been diagnosed by a licensed, qualified optometrist or ophthalmologist, and the diagnostic report indicates that the child displays a visual impairment.



MUSER – Maine Unified Special Education Regulations

MUSER II.3

Adverse effect/Adversely affects. The word "adverse" commonly means "harmful, impeding, obstructing, or detrimental." To "adversely affect" means to have a negative impact that is more than a minor or transient hindrance, evidenced by findings and observations based on data sources and objective assessments with replicable results.



- Document the disability based on the initial or reevaluation eligibility decision (identifies areas of need)
- 2. Eligibility requires the use of at least one of these forms:
 - a. Speech or Language Impairment Eligibility Form
 - b. Specific Learning Disability Eligibility Form
 - c. Form for Determination of Adverse Effect on Educational Performance



<u>Procedure for Determination of Adverse Effect</u> <u>on Educational Performance</u> –

This procedure applies only to the following disability eligibility categories:

Autism, Deafness, Developmental Delay, Emotional Disturbance, Hearing Impairment, Intellectual Disability, Orthopedic Impairment, Other Health Impairment, Speech or Language Impairment, Traumatic Brain Injury and Visual Impairment including Blindness.

This section does not apply to the following disabilities where the demonstration of adverse effect is not required as a condition for special education eligibility:

Deaf-Blindness, Multiple Disabilities and Specific Learning Disability.



Eligibility Forms

| Table of Contents | | |
|--|------|--|
| | Page | |
| Advance Written Notice | 3 | |
| Determination of Adverse Effect | 6 | |
| Documentation of Agreement of Non-Attendance for IEP/IFSP Team member whose Curriculum Area IS NOT being Discussed | 12 | |
| Documentation of Agreement of Non-Attendance for IEP/IFSP Team member whose Curriculum Area IS being Discussed | 13 | |
| Individualized Education Program | 14 | |
| Parental Consent for Evaluation | 43 | |
| Parental Consent to Invite Other Agencies to IEP Meetings – Postsecondary Goals & Transition Services | 47 | |
| Referral for Special Education Services. | 49 | |
| Revocation of Special Education Services. | | |
| Seven Day Waiver. | 61 | |
| Specific Learning Disability Eligibility Form | 62 | |
| Speech or Language Impairment Eligibility Form | 74 | |
| Summary of Performance | 82 | |
| Written Notice | 87 | |



Adverse Effect on Educational Performance



Form for the Determination of Adverse Effect on Educational Performance

Maine Unified Special Education Regulations (MUSER VII.3)

| Date of Meeting: | | SAU: | |
|-------------------------------------|--------|------------------|--|
| Child's Name: | | School: | |
| Date of Birth: | Grade: | School Phone: | |
| Parent/Guardian Name: | | School Address: | |
| Parent/Guardian Address: | | City, State Zip: | |
| Parent/Guardian City, State Zip: | | School Contact: | |

Reason for use of form: □ Initial Eligibility □ Continuing Eligibility/Dismissal



This form is used to:

• Provide a written record regarding the determination of adverse effect on educational performance.

Definition – **Adverse effect/adversely effects:** The word "adverse" commonly means "harmful, impeding, obstructing, or detrimental." To "adversely affect" means to have a negative impact that is more than a minor or transient hindrance, evidenced by findings and observations based on data sources and objective assessments with replicable results. An adverse effect on educational performance does not include a developmentally appropriate characteristic of age/grade peers in the general population.

NA=Not Available



Pg. 6 Procedural Manual

Directions:

- The use of the form is limited to:
 - o Determination of eligibility for special education services.
 - Consideration of a change in eligibility for special education services.
 - Dismissal from special education services.

• The procedure for determination of adverse effect applies only to the following eligibility categories: Autism, Deafness, Developmental Delay, Emotional Disturbance, Hearing Impairment, Intellectual Disability, Orthopedic Impairment, Other Health Impairment, Traumatic Brain Injury, and Visual Impairment including Blindness.



Pg. 6 Procedural Manual

SECTION 1.A – ASSESSMENT/DATA SOURCES:

| I.A. The IEP Team has reviewed the following assessment(s) or data source(s) to determine adverse effect resulting from the child's disability [check one of the boxes in each category and provide verification by describing the data that supports the determination as to whether or not adverse effect is demonstrated]: * N/A=not available | | | |
|---|-----|----|------|
| Do standard or percentile scores on nationally-normed, individually- administered achievement test(s), or for children ages 3 to 5, appropriate multi-domain nationally-normed test(s) or rating | Yes | No | N/A* |
| scale(s), demonstrate adverse effect? Verification: | | | |

This section is used to:

• Document data considered and indicate whether it supports a determination of adverse effect.



Directions:

- Examples of data sources for category 1:
 - o For 3-5 year-olds Wechsler Preschool and Primary Scale of Intelligence- Fourth Edition™ (WPPSI-IV), Autism Diagnostic Observation Schedule™ (ADOS™);
 - Grades K-12 Woodcock Johnson, Wechsler Individual Achievement Test, Oral and Written Language Scale, Gray Oral Reading Test, Test of Word Reading Efficiency.
- The IEP Team's determination of adverse effect is based upon the results of assessments and/or data sources determined by the Team to be necessary to verify the effect of the disability on educational performance. In most situations, the Team will consider multiple assessments and/or data sources for determination of adverse effect.

Pg 7. Procedural Manual



| 2. Do standard or percentile scores on nationally-normed, group- administered achievement test(s), including nationally-normed, curriculum- based measures, demonstrate adverse effect? | | |
|---|--|--|
| Verification: | | |
| | | |

- Examples of data sources for category 2:
 - o NWEA, PSAT, SAT.



| Do any reports prepared by the SAU or presented by the parent/guardian that reflect academic or functional performance document adverse effect? Verification: | | | | |
|--|--|--|--|--|
|--|--|--|--|--|

- Examples of data sources for category 3:
 - o 3-5-year-olds Adaptive Behavior Assessment System®-Second Edition (ABAS®-II), CDS Eligibility Observation Summary
 - O Grades K-12 Vineland scores, Adaptive Behavior Assessment System scores, academic grades, reports by parent or outside providers, reports of whether the child meets standards in standards-based system.



| 4. Does the child's performance on comprehensive assessments based on a system of learning results, or the Common Core as of 2014, or | YES | NO | N/A* |
|---|-----|----|------|
| measurements of indicators within the Early Childhood Learning Guidelines, demonstrate adverse effect? | | | |
| Verification: | | | |
| | | | |

- Examples of data sources for category 4:
 - o 3-5-year-olds Assessment, Evaluation, and Programming System for Infants and Children (AEPS®), Second Edition, HighScope® Child Observation Record
 - Grades K-12 MEAs, NWEAs, writing prompts, and curriculum-based measures such as DRA, DIBELS, Everyday Math, AIMSweb, Curriculum Unit Tests (Envisions Math).



| 5. Do criterion-referenced assessments of academic or functional performance demonstrate adverse effect? Verification: | | |
|---|--|---|
| | | 4 |

Examples of data sources for category 5:

o VB-MAPP, ABLLS, Brigance Inventory of Early Development, School Function Assessment, NWEAs, MEAs, Classroom test scores.



| Do child work products, language samples, or portfolios demonstrate adverse effect? Verification: | | |
|--|--|--|
| | | |

Examples of data sources for category 6:

• Writing prompts, handwriting samples, portfolios of work, classroom work samples.



| 7. Does disciplinary evidence, or rating scales based on systemic | | |
|--|--|--|
| observations in more than one setting (whenever possible) by professionals or parents/guardians, demonstrate adverse effect? | | |
| Verification: | | |
| | | |

Examples of data sources for category 7:

O Disciplinary reports/office referrals, Functional Behavioral Assessment (FBA), BASC Rating Scales, BRIEF, behavior data sheets/logs, classroom observation(s).



| 8. Do the child's attendance patterns demonstrate adverse effect? | | |
|---|--|--|
| Verification: | | |
| | | |
| | | |

Examples of data sources for category 8:

• Attendance records (school, program and/or class).



| 9. Do the child's social or emotional deficits (if any), as observed by professionals or parents/guardians in multiple settings (whenever possible), on clinical rating scales or in clinical interviews, demonstrate adverse effect? | | |
|---|--|--|
| Verification: | | |

Examples of data sources for category 9:

BASC, BRIEF, Achenbach, Connors Rating Scales,
 Multidimensional Anxiety Scale for Children, Piers-Harris
 Self-Concept Scale, Autism Rating Scales, observation



| 10. Other (add any other data sources) | | | |
|--|---|---|---|
| Verification: | | | |
| | | | |
| | | | |
| | 1 | 1 | 1 |

SECTION 1.B. - SINGLE ASSESSMENT

| I.B. Was only one assessment/data source considered? | YES | NO 🗆 |
|--|-----|------|
| If the answer to the question is "Yes", state the IEP Team's rationale for the the single assessment/data source is adequate for the determination of educational performance: | | |
| | | |

This section is used to:

 Indicate whether only one assessment or data source was considered and, if so, explain why that was adequate.



SECTION 2- DETERMINATION OF ADVERSE EFFECT

| II. Has the IEP Team determined that there is an adverse effect on | YES | NO |
|--|-----|----|
| educational performance resulting from the child's disability? | | |

If the answer to this question is "Yes", proceed to section III. If the answer to this question is "No", the child does not qualify as a child with a disability under Maine Unified Special Education Regulations and is not entitled to an Individualized Education Program.

This section is used to:

• Indicate whether the IEP Team has determined that there is an adverse effect on educational performance.



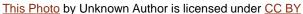
Directions:

- Having completed Section I and considering the findings in each of the data source categories, the Team now determines whether the child's disability results in an adverse effect on educational performance. o If the answer to this question is "Yes", proceed to section III.
- o If the answer to this question is "No", the child does not qualify as a child with a disability under Maine Unified Special Education Regulations (MUSER) and is not entitled to an Individualized Education Program.



• Only complete Section 3 if the answer to Section 2 is "yes".







SECTION 3 – NEED FOR SPECIAL EDUCATION

| III. The adverse effect that results from the child's disability is, (check one) |
|---|
| □ of such a degree or kind that the child requires special education in order to |
| benefit from his/her education program. |
| \square correctible through accommodations in the child's regular education program. |
| |
| Summarize the basis for the determination as to whether the child requires special education in order to benefit from his/her education program or the adverse effect is correctible through accommodation. |
| |
| |
| |

If the first box was checked, the child qualifies as a child with a disability under Maine Unified Special Education Regulations and is entitled to an Individualized Education Program. If the second box was checked, the child does not qualify as a child with a disability under Maine Unified Special Education Regulations and is not entitled to an Individualized Education Program.



SECTION 3 – NEED FOR SPECIAL EDUCATION

This section is used to:

- Indicate whether the child requires special education.
- Summarize the basis for that determination.

Directions:

• The IEP Team should *explain* its decision regarding whether the child needs specialized instruction or whether their needs can be addressed through general education accommodations. The Team should not merely reproduce verbatim the information recorded in Section 1 but should summarize how the culmination of data sources support the Team's determination. This summary should include how the collected data shows an adverse impact on the educational performance of the child.



Important:

 Document in the Written Notice that the team completed the: Determination of Adverse Effect form at the IEP Meeting.







Speech or Language Impairment Eligibility Form

Maine Unified Special Education Regulations (MUSER VII.2.K)

| Date of Meeting: | | SAU: | |
|-------------------------------------|--------|------------------|--|
| Child's Name: | | School: | |
| Date of Birth: | Grade: | School Phone: | |
| Parent/Guardian Name: | | School Address: | |
| Parent/Guardian Address: | | City, State Zip: | |
| Parent/Guardian City, State Zip: | | School Contact: | |

This section is used to:

• Document the pertinent child-related information.



A child must meet at least one of the four criteria listed and to such a degree that it adversely affects educational performance and requires special education for the child to benefit from his/her education program. This form is to be completed by the IEP Team whenever there is a meeting to determine eligibility or consider a change in eligibility (including dismissal from special education).

| Does the child exhibit an articulation impairment based on the | YES | NO |
|---|-----|----|
| articulation severity rating scale? | | |
| Verification: | | |
| | | |
| 2. Does the child exhibit a language impairment based on the | YES | NO |
| language severity rating scale? | | |
| Verification: | | |
| | | |
| 3. Does the child exhibit a fluency impairment based on the | YES | NO |
| fluency severity rating scale? | | |
| Verification: | | |
| | | |
| 4. Does the child exhibit a voice impairment based on the voice | YES | NO |
| severity rating scale? | | |
| Verification: | | _ |



- This section is used to:
- Identify a specific impairment based on the severity rating scales.



Directions:

- In order to answer questions 1 through 4, the IEP Team must first complete the four severity rating scales that follow.
- The results of those rating scales will dictate the answers to these questions.
- o If the Team recorded scores of "Moderate" or "Severe" in each of the categories on a rating scale, then the answer to the corresponding question on this page will be "Yes"
- o If the Team recorded a score of "No Apparent Problem" or "Mild" in any of the categories, or checked "No Assessment Needed," then the answer to the corresponding question will be "No."



Complete the "Verification" box for each of the four questions:

- o Record scores on formal assessments and a short narrative description of results of informal assessments. Sources of data or information would include: standardized assessments, language samples, checklists, criterion-referenced assessments, rating scales (such as the "Observational Rating Scale" or "Pragmatics Activities Checklist" from the "CELF-5").
- Identify the components of the assessments that reveal the presence or degree of impairment.
- O If the answer to a question is "No" due to checking the "No Assessment Needed" box, indicate "Not an area of suspected disability" in the "Verification" box.



If the team has checked YES to any of Questions 1-4, check YES on Question 5, then go to question 6. If not, check NO on Question 5; the child does not qualify as a child with a speech or language impairment.

| 5. Doos g an acab ay languaga impagirmant oxist? | YES | NO |
|--|-----|----|
| 5. Does a speech or language impairment exist? | | |

This section is used to:

• Indicate whether a speech or language impairment exists



| 6. Does the child's speech or language impairment adversely | YES | NO |
|--|-----|----|
| affect his/her educational performance? | | |
| Verification: | - | |
| | | |
| | | |
| | | |

If the answer to Question 6 is YES, go to Question 7. If NO, the child does not qualify as a child with a speech or language impairment.

This section is used to:

• Indicate whether a speech or language impairment adversely affects the education of the child.



Directions:

- The Team records in the "Verification" box for question 6 the data forming the basis upon which the Team determined that the child's speech or language impairment does/does not adversely affect his/her educational performance.
 - O Sources of data may include classroom grades, child work products, measures of attainment of literacy standards, scores on standardized tests of academic achievement (including reading comprehension scores), teacher and parent reports, evidence of functional communication skills, evidence of social cognitive strengths and social pragmatics, records of attendance, disciplinary evidence or behavior rating scales, and observations or ratings of social/emotional functioning.

| 7. If there is a speech or language impairment, the impairment is of such nature and degree that | | | | | | |
|--|--|--|--|--|--|--|
| k one and summarize the basis for that selection in the area marked "Verification"]: | | | | | | |
| a. the child requires special education. | | | | | | |
| □ b. it can be adequately addressed through general education interventions and/or | | | | | | |
| accommodations. | | | | | | |
| Verification: | | | | | | |
| | | | | | | |
| | | | | | | |

If the box in question 7(a) is checked, the child qualifies as a child with a speech or language impairment. If the box in question 7(b) is checked, the child does not qualify as a child with a speech or language impairment.

This section is used to:

• Indicate whether the child requires special education to address the speech or language impairment(s).



Directions:

- If "a", the following must be true:
 - Question 6 must be "YES" AND
 - The disability is of such nature AND degree that it <u>cannot</u> be adequately addressed through general education interventions and/or accommodations and only special education and related services will address it.
- If "b", the following must be true:
 - Question 6 must be "YES" AND
 - The disability is of such a nature AND degree that it <u>can</u> be adequately addressed through general education interventions and/or accommodations; therefore, special education and related services are not needed to address it.



<u>Articulation Severity Rating Scale</u>

• Articulation impairment: The abnormal production of speech sounds including: substitutions, omissions, distortions or additions of speech sounds not commensurate with child's chronological age or cultural linguistic background and not related to dialect.



<u>Articulation Severity Rating Scale</u>

This section is used to:

• Determine the level of articulation impairment.

Directions:

• Check "No articulation assessment needed" when a standardized assessment was not administered because articulation impairment was not part of the referral, and was not raised as an area of suspected disability during referral or as part of a re-evaluation



<u>Articulation Severity Rating Scale</u>

Unless "No articulation assessment needed" is checked, one of the four boxes in each of the three categories must be checked.

- o When completing the "Informal Assessments" category for a child aged 5, use the "Ages 3-5" grid if the child is receiving services through CDS, and the "Ages 5-20" grid if the child is receiving services through the SAU.
- o If either the "Moderate" or "Severe" box is checked in each of the three categories, then the child exhibits an articulation impairment and the "Yes" box for question 1 on page 1 should be checked.
- o If "No apparent problem" or "Mild" is checked for any of the three categories, the child does not exhibit an articulation impairment and the "No" box for question 1 on page 1 should be checked.



Articulation Severity Rating Scale

| No articulation assessment needed. | | Description of A | ticulo | ation, Stand | dardize | an impairment, rating d Assessments and In lerate or severe categ | formal | l Assessments | |
|------------------------------------|---|------------------|--------|--------------|---------|---|--------|---------------|--|
| | | | | | | | | | |
| | П | No apparent | П | Wild | | □ Moderate | Ιп | Severe | |

| | No apparent problem | □ Mild | | □ Severe |
|--------------------------------|---|---|--|---|
| Description of Articulation | No sound errors present or production is developmentally appropriate. | Sound errors are intelligible but noticeable. Errors consist of common types of substitutions and/or distortions. | More numerous articulation errors are present. Intelligibility is difficult for an unfamiliar listener. Excessive use (40% or more) of substitution or omission processes which are inappropriate for age. | Many articulation errors are present. Speech is frequently unintelligible to most listeners. Excessive use (40% or more) of omission processes or unique processes which are inappropriate for age. |



Articulation Severity Rating Scale

| | ☐ No apparent problem | □ Mild | □ Moderate | □ Severe |
|-----------------------------|--|--|---|---|
| Standardized Assessments | A standard score <1.0 standard deviation below the mean. A standard score of ≥86. 16th percentile or above. | 1 to 1.4 standard deviations below the mean. 7-15th percentile. A standard score of 78-85. ≤2 speech sound errors outside developmental guidelines. Children may be stimulable for error sounds. | 1.5 to 1.9 standard deviations below the mean. 2-6th percentile. A standard score of 70-77. Substitutions, distortions and some omissions may be present. There is limited stimulability for the error phonemes. | ≥2 standard deviations below the mean. <2nd percentile. A standard score <70. Deviations may range from extensive substitutions and many omissions to extensive omissions. |
| Informal Assessments | No apparent problem | □ Mild | ☐ Moderate | □ Severe |
| | Intelligible >80% of the time in | Intelligible 61-80% of the time in | Intelligible 40-60% of the time in | Intelligible <40% of the time in |
| Ages 3-4 | connected speech. | connected speech. | connected speech. | connected speech. |
| Ages 4-5 | _ | ne time in connected ech. | Intelligible 60-80% of the time in connected speech. | Intelligible <60% of the time in connected speech. |
| Ages 5-20 | _ | ne time in connected ech. | Intelligible 60-80% of the time in connected speech. | Intelligible <60% of the time in connected speech. |



Language Severity Rating Scale

Language impairment: Any deviation in form of language (phonology, morphology and syntax), the content of language (vocabulary, semantics), and/or the functional use of language (pragmatics) perceived to be outside the allowable range for an individual's communication competence and not related to dialect or linguistic/cultural background. A language impairment adversely affects the child's educational performance as reflected by his/her social interaction, behavior, emotional development, vocational performance, communication, and/or participation in classroom activities as well as academic achievement.



Language Severity Rating Scale

This section is used to:

• Determine the level of language impairment

- Check "No language assessment needed" when a standardized assessment was not administered because language impairment was not part of the referral and was not raised as an area of suspected disability during referral or as part of a re-evaluation.
- Unless "No language assessment needed" is checked, one of the four boxes in each of the two categories must be checked. O If either the "Moderate" or "Severe" box is checked in both of the two categories, then the child exhibits a language impairment and the "Yes" box for question 2 on page 1 should be checked.
- o If "No apparent problem" or "Mild" is checked for either of the two categories, the child does not exhibit a language impairment and the "No" box for question 2 on page 1 should be checked.



Language Severity Rating Scale

No language To find the presence of an impairment, ratings in assessment Standardized Assessments and Informal Assessments needed. MUST fall within the moderate or severe category. No apparent Moderate Mild Severe problem A composite A composite A composite A composite standard score standard score of standard score of standard score of <1.0 standard 1.0 to 1.4 1.5 to 2 standard >2 standard Standardized deviation below standard deviations below deviations below Assessments the mean. deviations below the mean. the mean. Language the mean. Lanauaae Language auotient or auotient or Language auotient or standard score of standard score at standard score of auotient or ≥86. standard score of 71-77. or <70. ≥17th percentile. 78-85. • 3-7th percentile. ≤2nd percentile. • 8-16th percentile. Informal No apparent Mild Moderate Severe Assessments problem The child's Informal Informal assessment Informal assessment Criterion assessment indicates a indicates the pupil language skills are referenced within his/her indicates a language deficit has limited Lanauaae or expected language lanauaae deficit. that usually **functional** speech samples performance range interferes with language skills. Structured on an informal communication. Communication is observation assessment an effort. Child is instrument. nonverbal and coanitive ability has not been ascertained.



• Fluency impairment: Abnormal speech production with reference to continuity, smoothness, rate and effort.



This section is used to:

• Determine the level of fluency impairment.

Directions:

• Check "No fluency assessment needed" when a standardized assessment was not administered because fluency impairment was not part of the referral and was not raised as an area of suspected disability during referral or as part of a re-evaluation.



- o For children in CDS, a standardized assessment is not required; alternative assessment procedures such as clinical observations can be utilized to score the description of fluency.
- o If either the "Moderate" or "Severe" box is checked in each of the two categories, then the child exhibits a fluency impairment and the "Yes" box for question 3 on page 1 should be checked.
- o If "No apparent problem" or "Mild" is checked for either of the two categories, the child does not exhibit a fluency impairment and the "No" box for question 3 on page 1 should be checked.
- Unless "No fluency assessment needed" is checked, one of the four boxes in each of the two categories must be checked.



| No fluency | To find the presence of an impairment, ratings in |
|------------|---|
| assessment | Description of Fluency and Informal Assessments |
| needed. | MUST fall within the moderate or severe category. |

| | No apparent problem | □ Mild | □ Moderate | □ Severe | |
|---|---|--|---|---|--|
| Standardized Assessments/ Description of Fluency | Fluency of speech does not draw attention to the child and is developmentally appropriate. | 3-5% dysfluent syllables of total syllables spoken with two or more speech samples of at least 100 syllables. No secondary characteristics, frustration and avoidance behaviors present. Fluent speech predominates. | 6-10% dysfluent syllables of total syllables spoken with two or more speech samples of at least 100 syllables. Secondary characteristics, frustration and avoidance behaviors may be present. | ≥11% dysfluent syllables of total syllables spoken with two or more speech samples of at least 100 syllables. Secondary characteristics, frustration and avoidance behaviors are present, typically noticeable and distracting. | |
| | No apparent problem | □ Mild | □ Moderate | □ Severe | |
| Informal Assessments | | Transitory dysfluencies are observed in specific situations. | Frequent dysfluencies are observed in many situations. | Habitual dysfluent behaviors are observed in a majority of situations. | |



This section is used to:

Determine the level of voice impairment.

Voice impairment is a medical condition, and the diagnosis from a physician is required

Check "No voice assessment needed" when a physician's
assessment was not obtained because voice impairment was
not part of the referral and was not raised as an area of
suspected disability during referral or as part of a reevaluation.



- Unless "No voice assessment needed" is checked, one of the four boxes in each of the two categories must be checked.
- o If either the "Moderate" or "Severe" box is checked in each of the two categories, then the child exhibits a voice impairment and the "Yes" box for question 4 on page 1 should be checked.
- o If "No apparent problem" or "Mild" is checked for either of the two categories, the child does not exhibit a voice impairment and the "No" box for question 4 on page 1 should be checked.



- When a child is referred for a voice impairment, a medical referral is indicated.
- Voice impairment: The absence or abnormal production of voice characterized by: deviant initiation/duration, tonal quality, pitch, loudness and/or resonance for age or speaking situation.



| No voice assessment needed. | To find the presence of an impairment, ratings in Description of Voice and Informal Assessments <u>MUST</u> fall within the moderate or severe category. | | | | |
|-----------------------------|---|---|---|---|--|
| | | | | | |
| | ☐ No apparent problem | □ Mild | □ Moderate | □ Severe | |
| | Voice production quality (tension, | Inconsistent noticeable | Persistent noticeable | Persistent noticeable | |
| Description of Voice | resonance), pitch and intensity are not unusual. | differences in voice production quality (tension, resonance), pitch or intensity. | differences in voice production quality (tension, resonance), pitch or intensity. | extreme differences in voice production quality (tension, resonance), pitch or intensity. | |
| | No apparent problem | □ Mild | □ Moderate | □ Severe | |
| Informal Assessments | | Voice difference including hoarseness, hypernasality, hyponasality, pitch or intensity is somewhat inappropriate for the child's age. Voice difference is of little or no concern to a physician. | Voice difference including hoarseness, hypernasality, hyponasality, pitch or intensity is significantly inappropriate for the child's age. Voice difference is of concern to a physician. | Voice difference including hoarseness, hypernasality, hyponasality, pitch or intensity is distinctly abnormal for the child's age. Voice difference is of concern to a physician. | |



Important:

 Document in the Written Notice that the team completed the: <u>Speech or Language</u> <u>Impairment Eligibility Form at the IEP</u> Meeting.



This form is used to:

 Determine the child's eligibility for special education services as a child with a Specific Learning Disability.



This section is used to:

Document the pertinent child-related information.



Part A: Qualifying Considerations

I. Does evidence from multiple valid and reliable sources demonstrate that the child is achieving adequately for the child's age and is meeting State-approved grade level standards in <u>all of</u> the areas below? (MUSER VII.2.L(2)(a)(i))

| YES | NO |
|-----|----|
| | |

For children from diverse cultural and/or linguistic backgrounds that place them outside the group on which standardized achievement tests were normed, consider only age or grade equivalent scores, not standardized scores. For such children, determinations in this section should be made using a multi-tiered problem-solving approach such as analysis of work samples and other performance data. (MUSER VII.2.L(2)(a)(c)).

If the answer to Question 1 is **YES**, the child does not qualify as a child with a specific learning disability under MUSER. Provide data supporting that determination in the area below marked "Verification" and proceed to Question 8.

If the answer to Question 1 is **NO**, indicate below the areas in which the child is not achieving adequately. Provide data supporting that determination in the area marked "Verification" and proceed to Question 2.

| Oral expression | Reading fluency skills | |
|-------------------------|-----------------------------|--|
| Listening comprehension | Reading comprehension | |
| Written expression | Mathematic calculation | |
| Basic reading skill | Mathematics problem-solving | |
| Verification: | | |
| | | |
| | | |
| I . | | |



• Sources should include: age normed, standardized assessments of academic achievement, state-wide or district-wide assessments, curriculum-based assessments, and classroom assessments based on state standards. Where indicated, sources could include speech/language assessments.



Directions:

- Consider whether the child is able to be successful when provided with general education curriculum.
- o If so, check "YES" and describe the basis for this conclusion in the "Verification" box. Then go to Question 8.
- o If not, check "NO" and check the areas where the child is not achieving adequately/is not meeting State-approved grade level standards, then describe the basis for this conclusion in the "Verification" box. Then go to Question 2.

Verification should identify the assessments that were considered and the child's scores on those assessments.



 If the child is not achieving adequately in all areas, is the underachievement due to the lack of learning experiences and instruction appropriate for the child's age or state approved grade level standards? (MUSER VII.2.L(2)(a)(1))

| YES | NO |
|-----|----|
| | |

Verification:

In making this determination, the Team must:

- a. Consider whether the child, prior to or as a part of the referral process, was provided appropriate instruction in regular education settings, delivered by qualified personnel (MUSER VII.2.L(2)(b)(i)(l)); and
- For culturally and linguistically diverse children and children from diverse educational backgrounds, consider the
 extent to which the child has been exposed to culturally and linguistically appropriate instruction.

If the answer to Question 2 is **YES**, the child does not qualify as a child with a specific learning disability under MUSER. Provide information supporting that determination in the area below marked "Verification" and proceed to Question 8.

If the answer to Question 2 is **NO**, provide information supporting that determination in the area marked "Verification" and proceed to Question 3.

This section is used to:

• Identify whether any failure to achieve adequately is primarily the result of lack of appropriate instruction



Directions:

• Consider whether the child has received culturally and linguistically appropriate instruction in regular education.

o Section a.

• Appropriate instruction should include, at a minimum, instruction targeted to the child's specific area of academic weakness.



- Appropriate instruction would include general education interventions. If the child received those interventions, the "Verification" should identify the methodologies, not the results.
- A child's attendance record would be considered under this question. (Did the child's extended absences result in a lack of appropriate instruction, and was that lack of instruction a primary cause of the child's failure to achieve adequately?)
- A teacher not being appropriately certified could result in a finding that the child did not receive appropriate instruction, but the Team would then need to consider whether the lack of an appropriately certified teacher was a primary cause of the child's failure to achieve adequately.

o Section b.

- For culturally and linguistically diverse children, appropriate instruction would include instruction consistent with the knowledge and skills embedded in the assessments being used to measure academic achievement.
- If so, check "YES" and describe the basis for this conclusion in the "Verification" box. Then go to Question 8.
- If not, check "NO" and describe the basis for this conclusion in the "Verification" box. Then go to Question 3.



3. If the child is not achieving adequately in all areas, is the child's lack of achievement primarily the result of any of the following factors? Provide evidence supporting each determination in the areas below marked "Verification."

| a. | Visual, hearing | or motor | disability | (MUSER | VII.2.L(2)(a)(iii)(aa)) |
|----|-----------------|----------|------------|--------|-------------------------|
|----|-----------------|----------|------------|--------|-------------------------|

| 1 5 9 | NO |
|-------|----|
| | |

Verification:

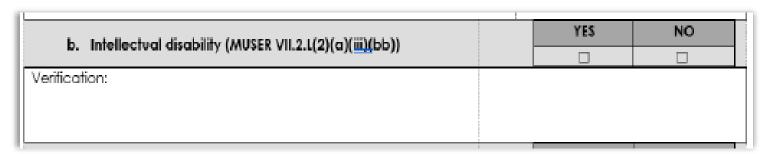
This section is used to

• Indicate whether the lack of adequate achievement is primarily the result of other factors.



- Consider whether the child's failure to achieve adequately is primarily the result of a visual, hearing or motor disability.
- Sources of data include: screening, medical records, observation.
- If so, check "YES" and describe the basis for this conclusion in the "Verification" box.
- -If you have checked "YES", go on to Question 8
- -If not, check "NO" and describe the basis for this conclusion in the "Verification" box. Then go on to the next factor.





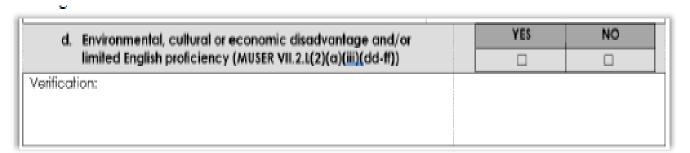
- Consider whether the child's failure to achieve adequately is primarily the result of an intellectual disability.
- Sources of data include: cognitive scores and/or adaptive behavior scales.
 - o If the child does have an intellectual disability, is it a primary cause of the lack of achievement?
- If so, check "YES" and describe the basis for this conclusion in the "Verification" box.
 - If you have checked "YES", go on to Question 8.
- If not, check "NO" and describe the basis for this conclusion in the "Verification" box. Then
 go on to the next factor.



| | YE\$ | NO | |
|---|------|----|--|
| c. Emotional disturbance (MUSER VII.2.L(2)(a)(iii)(cc)) | | | |
| Verification: | | | |
| | | | |
| | | | |

- Consider whether the child's failure to achieve adequately is primarily the result of an emotional disturbance.
- Sources of data include: rating scales, disciplinary records, teacher/parent reports, medical records, observations.
 - Emotional Disability areas that are not part of the referral
- If so, check "YES" and describe the basis for this conclusion in the "Verification" box.
 - If you have checked "YES", go on to Question 8.
- If not, check "NO" and describe the basis for this conclusion in the "Verification" box. Then
 go on to the next factor.





- Consider whether the child's failure to achieve adequately is primarily the result of an
 environmental, cultural or economic disadvantage and/or limited English proficiency.
- Sources of data include: WIDA scores, ACCESS scores, parent/guardian report; documentation of chronic life disruptions.
- If so, check "YES" and describe the basis for this conclusion in the "Verification" box.
 - If you have checked "YES", go on to Question 8.
- If not, check "NO" and describe the basis for this conclusion in the "Verification" box. Then
 go on to the next question.



| b ¹ | rade level standards or intellectual devel y the IEP Team to be relevant to the ident earning disability, using appropriate asses II.2.L(2)(a)(ii)) | ification of a specific | YES | NO |
|----------------|---|---------------------------|-----------------|------------|
| | | Verification of Strengths | Verification of | Weaknesses |
| a. | Data collected when using a process that is based on the child's response to scientific research-based intervention, including general education interventions under MUSER Section III. (MUSER VII.2.L(2)(a)(ii)(aa)) | | | |
| b. | Classroom performance data. (MUSER VII.2.L(2)(a)(ii)(bb)) | | | |
| c. | Achievement data based on summative assessments in the district's core curricula, State assessments and/or published nationally normreferenced assessments. (MUSER VII.2.L(2)(a)(ii)(cc)) | | | |
| d. | Psychological processing data from standardized measures to identify contributing factors, including standardized composite scores from nationally norm-referenced measures of skills such as, but not limited to, phonological processing, information retrieval and processing speed, language, working memory, long-term memory, short-term memory, auditory processing, visual spatial reasoning. | | | |

For culturally and/or linguistically diverse children, consider the patterns of strengths and weaknesses that are consistent with that population, e.g., many English learners struggle with literacy skills but perform better in less language-based skills such as math calculation.

If the answer to Question 4 is **NO**, the child does not qualify as a child with a specific learning disability under MUSER. Proceed to Question 8.

If the answer to Question 4 is YES, proceed to question 5.



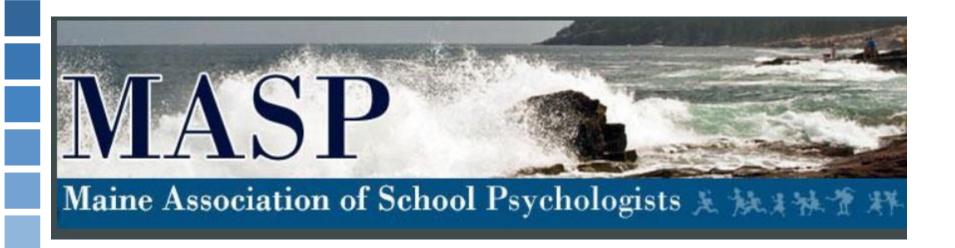
Clinical Guidance on Implementation

For the Identification of Students Suspected of Having a

Specific Learning Disability

Clinical Guidance on Implementation- For the Identification of Students Suspected of Having a Specific Learning Disability-2017 (masponline.net)





www.masponline.net



| 5. | Relevant behavior noted during the observation(s) and its relationsl VII.2.L.(2)(f)). The child must be observed in the learning environme setting) to document the child's academic performance and beha VII.2.L(2)(f)(i)) | ent (including the regular classroom |
|----|---|--------------------------------------|
| NO | OTES; | |

This section is used to:

Document behavior noted during observation as it relates to academic functioning.

- Summarize relevant findings obtained during the observation of the child in the regular education classroom. Examples might include: withdrawal, inattention, disengagement, lack of productivity.
- Go on to Question 6.



| Educationally relevant medical findings (MUSER VII.2.L(2)(g)(j)(IV)) |
|--|
| NOTES: |
| |
| |

This section is used to:

Document any medical findings as they relate to academic functioning.

- Summarize relevant information regarding any medical conditions that may have an
 effect on the child's educational achievement. Relevant medical conditions might
 include ADHD, seizure disorder, tic disorder, mental health diagnoses (depression,
 anxiety, etc.), diabetes, or traumatic brain disorder.
- Go on to Question 7.



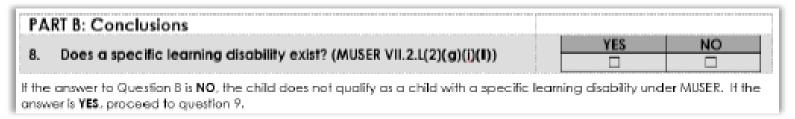
| performed by qualified individuals? (MUSER V.2.C(1)(c)&(d)) | | |
|---|---|--|
| | _ | |
| If NO, provide verification: | | |

This section is used to:

Document evaluation validity and reliability.

- Indicate whether the evaluations being considered are both valid and reliable and were performed by qualified personnel.
 - o If "NO" for any assessment, then provide information about that assessment and why it is not considered valid and/or reliable or was not performed by a qualified person. If, due to cultural, linguistic or physical characteristics of the child assessments were not utilized, provide an explanation for this in the "verification" box.
 - Go on to Question 8.





This section is used to:

Document the Team's conclusions as to the existence of a specific learning disability.

- If "YES", the following must be true
 - Question 1 must be NO, and verification must be provided.
 - Question 2 must be NO, and verification must be provided.
 - All parts of Question 3 must be NO, and verification must be provided.
 - Question 4 must be YES, and verification must be provided.
 - Question 7 must be YES.
 - Go on to Question 9.
- If "NO", the following must be true
 - Either Question 1, 2, or any part of 3, must be YES or Question 4 must be NO.



| If there is a learning disability, the disability is of such nature and degree that [check one and summarize the basis for that selection in the area marked "Summary"]; | | | | | | | |
|--|--|--|--|--|--|--|--|
| | a. the child requires special education and related services. [MUSER V.2.F(2)] | | | | | | |
| | b. it can be adequately addressed through general education interventions and/or | | | | | | |
| Summary | accommodations. | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

If the bax in question 9(a) is checked, the child qualifies as a child with a specific learning disability under MUSER. If the bax

In question 9(b) is checked, the child does not qualify as a child with a specific learning disability under MUSER.

This section is used to:

 Indicate the determination as to whether the child requires special education and related services.



- If "a", the following must be true:
 - Question 8 must be "YES" AND
 - The disability is of such nature AND degree that it <u>cannot</u> be adequately addressed through general education interventions and/or accommodations and only special education and related services will address it
 - If "b", the following must be true:
 - Ouestion 8 must be "YES" AND
 - The disability is of such a nature AND degree that it <u>can</u> be adequately addressed through general education interventions and/or accommodations; therefore, special education and related services are not needed to address it.
 - If a child has been receiving RTI and/or other general education interventions which have enabled the child to make adequate academic progress, check 9b; if a child has failed to make adequate academic progress despite having received such
 - interventions, check 9a. If the child has not received RTI and/or other general education interventions, the Team must determine whether, in view of the nature and degree of the disability, such interventions would likely enable the child to make adequate academic progress



| Team members must certify their agreement or disagreement with this result by signing below: | | | | | | |
|--|---|----------|--|--|--|--|
| I certify my agreement with the re | esult of this report (MUSER VII.2.L(2)(| g) (ii)) | | | | |
| Signature | Printed Name | Title | | | | |
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| | | | | | | |
| I do not agree with the result of th | is report | | | | | |
| Signature | Printed Name | Title | | | | |
| | | | | | | |

This section is used to:

Document the team members' agreement or disagreement with the result of the report.

- Team members who agree with the result of the report should sign, print and date in the designated space indicating agreement.
- Team members who DO NOT agree with the result of the report should sign, print and date in the designated space indicating disagreement; as well as submit a separate statement.



Important:

 Document in the Written Notice that the team completed the: <u>Specific Learning Disability</u> <u>Eligibility Form at the IEP Meeting.</u>





Eligibility Forms –

Remember

Summary of Performance –

- Make sure there are no Blank Boxes/Areas
- Section I and Section II must include data

Specific Learning Disability Eligibility Form –

- Make sure there are no Blank Boxes/Areas
- Verification must include data
- Include Strengths and Weaknesses
- Team Members must sign the document
- Document conversation/completion of form in Written Notice if appropriate

Speech/Language Eligibility Criteria -

- Document the criteria that documents adverse impact
- Verification must include data
- Document and Include all Severity Rating Scales
- Document conversation/completion of form in Written Notice if appropriate

Form for Determination of Adverse Effect on Educational Performance -

- Make sure there are no Blank Boxes/Areas
- Document Reason for Use of Form
- N/A means Not Available
- Verification must include data
- Document conversation/completion of form in Written Notice if appropriate



Eligibility Forms

| | Page |
|---|------|
| Advance Written Notice | 3 |
| Determination of Adverse Effect | 6 |
| Documentation of Agreement of Non-Attendance for IEP/IFSP Team member whose Curriculum Area IS NOT being Discussed | 12 |
| Documentation of Agreement of Non-Attendance for IEP/IFSP Team member whose Curriculum Area IS being Discussed | 13 |
| Individualized Education Program | 14 |
| Parental Consent for Evaluation | 43 |
| Parental Consent to Invite Other Agencies to IEP Meetings – Postsecondary Goals & Transition Services | 47 |
| Referral for Special Education Services. | 49 |
| Revocation of Special Education Services | 60 |
| Seven Day Waiver | 61 |
| Specific Learning Disability Eligibility Form | 62 |
| Speech or Language Impairment Eligibility Form | 74 |
| Summary of Performance | 82 |
| Written Notice | 87 |



Commonly Asked Questions: Specific to Eligibility Forms





Do all the questions on the Adverse Effect form have to be answered?

Yes, all the questions need to be answered by the IEP Team.

<u>Please note</u>: NA means <u>Not Available</u>. Therefore, if there is no data to support a "yes" or "no" then "NA" should be checked.



Do the eligibility forms need to be completed during the IEP Team Meeting?

- Yes, any appropriate eligibility forms must be completed during the meeting and a statement about this must be included in the Written Notice.
- The Specific Learning Disability Form must be signed by all Team members.
- Also, if there is a change in eligibility, it might be necessary to complete multiple eligibility forms.



2022-2023 Office Hours

| <u>Date</u> | <u>Topic</u> | <u>Date</u> | <u>Topic</u> |
|-------------|---|-------------|---|
| 9/14/22 | IEP Quick Reference Sheet | 2/8/23 | Transition Plans and Extended Eligibility Options |
| 9/28/22 | Eligibility – Evaluations, Eligibility Forms, Multiple Disabilities | 2/15/23 | Multi-Lingual Learner Document |
| 10/12/22 | Alignment – Evaluations, Needs/How, Present Level, Goals, Services, LRE | 3/8/23 | Written Notice |
| 10/26/22 | Distinctly Measurable Persistent Academic and Functional Skills/How Statement | 3/22/23 | Federal Indicators – B4, B9, B10, |
| 11/9/22 | Measurable Goals (Avoiding Outcomes) | 4/12/23 | Summary of Performance Document |
| 12/14/22 | Supplementary Aids, Services, Modifications and Supports – Including Consultation and LRE | 4/26/23 | Abbreviated Day |
| 12/22/21 | Disability Alignment – DIB1 | 5/10/23 | Orientation and Mobility |
| 1/11/23 | Transition from CDS to Public School | 5/24/23 | Data Collection |
| 1/25/23 | Alternate Assessment Process | | • |



Resources

Professional Development Calendar –

https://www.maine.gov/doe/calendar

Link for Recordings and Power Points –

https://www.maine.gov/doe/learning/specialed/pl

Special Education Resources –

https://www.maine.gov/doe/learning/specialed/supervision

Special Education Laws and Regulations –

https://www.maine.gov/doe/learning/specialed/law

Special Education Forms and Reporting –

https://www.maine.gov/doe/learning/specialed/forms

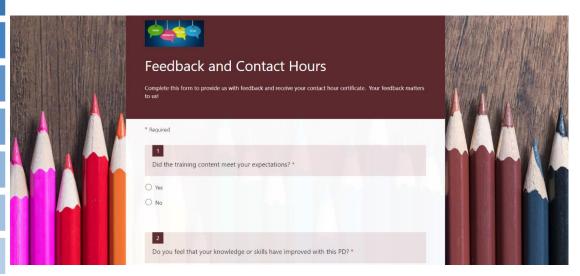


Please take a few minutes to give us some Feedback.



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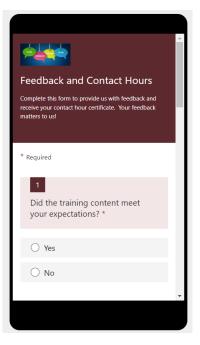


https://forms.office.com/g/by472QQLDJ

Use the link to complete the form on your computer OR

Use the QR code to complete the form on your mobile device







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