Mid-State Special Education Eligibility Criteria

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The Mid-State Special Education Joint Agreement is a joint agreement established under the laws of the State of Illinois and assists each Member School District to comply with all requirements under the Individuals with Disabilities Education Act (the "IDEA") and Article 14 of the Illinois School Code. The "Mid-State Special Education Eligibility Criteria" is hereby adopted by Mid-State Special Education for the use and benefit of its Member Districts.

Adopted: August 22, 2018

Section 1: AUTISM

Federal & State Definition

Autism is a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three, that adversely affects a child's educational performance. (A child who manifests the characteristics of Autism after age 3 could be diagnosed as having Autism if the other criteria of this section are satisfied.) Other characteristics often associated with Autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. The term does not apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance.

These criteria reflect an educational identification of Autism and related areas in the Autism spectrum. These criteria do NOT confirm a medical diagnosis of such disorders.

Students with a medical diagnosis of Autism or related disorders must still meet all of the criteria, including the disability having an adverse effect on educational performance, in order to be eligible for special education services.

ELIGIBILITY CRITERIA

A student is eligible for special education and related services with the identified disability of Autism when the IEP Team determines the presence of at least two behaviors from the Social Interaction Group, one behavior from the Communication Group, and one behavior from the Restrictive and Repetitive Behavior Group. Consider a criterion to be met only if the behavior is abnormal for the child's developmental level and is not caused by some other disability.

Social Interaction characteristics: (2 or more)

- ❑ Lack of responsiveness to other people
- ❑ Lack of facial responsiveness (e.g., fleeting eye contact, averting gaze)
- ❑ Lack of awareness of feelings of others (e.g., does not notice another person's distress, intrudes on others' privacy without realizing it)
- ❑ Failure to make reciprocal responses to physical or social contact (e.g., failure to respond when name is called)
- ❑ Lack of responsiveness to others' stress or distress (e.g., indifference or aversion to affection)
- ❑ Failure to seek comfort in times of stress (e.g., does not come for comfort when ill, hurt, or tired)
- ❑ May utilize others as an extension of self
- ❑ Experience difficulty separating self from others
- ❑ Gross impairment in ability to make peer friendships (e.g., has no interest in making friends, demonstrates a lack of understanding of conventions of social interaction)
- ❑ Absence of or impaired imitation (e.g., does not wave bye, does not copy mother's domestic activities, mechanically imitates others' actions out of context)

Communication characteristics: (1 or more)

- ❑ No mode of communication, such as communicative babbling, pointing at objects with eyes, facial expression, gesture, mime, or spoken language
- ❑ Markedly abnormal nonverbal communication (e.g., use of eye to eye gaze, facial expression, absent or delayed development of appropriate gestures to modulate social interaction)
- ❑ Absence of imaginative activity
- ❑ Marked abnormality in the production of speech (e.g., volume, pitch, articulation, stress, rate, rhythm, intonation, monotonous tone, high pitch, melodious speech inflection)

- ❑ Marked abnormalities in the form or content of speech, including stereotyped and repetitive use of speech (e.g., immediate echolalia or mechanical repetition of television commercial; use of "you" when "I" is meant; immature syntax, idiosyncratic jargon)
- ❑ Marked impairment in the ability to initiate or sustain a conversation with others despite adequate speech (e.g., one sided conversations/monologues/tangential speech, does not initiate conversation)
- ❑ Failure to develop the use of abstract terms, concepts, and reasoning

Restricted and Repetitive Behaviors: (1 or more)

- ❑ Stereotyped body movements (e.g., hand-flicking, rocking, spinning, head banging)
- ❑ Persistent preoccupation with parts of objects or attachment to unusual objects (e.g., sniffing or smelling objects, spinning wheels of toy cars, repetitive feeling of texture of materials)
- ❑ Marked distress over changes in trivial aspects of environment
- ❑ Unreasonable insistence on following routines in precise detail (e.g., insisting that the same route always be followed when shopping)
- ❑ Markedly restricted range of interests and/or preocccupation with one narrow interest
- ❑ Rigid thinking (e.g., inability to understand humor, inability to understand nonliteral aspects of speech such as irony, excessively rigid, inflexible, or rule-bound behavior or thought)

Unusual Response to Sensory Experiences: (1 or more)

- ❑ Tactile symptoms (e.g., high or low tolerance for pain, prolonged rubbing of temperatures, sensitivity to food textures tactile defensiveness, aversion to clothing textures, shoes or socks)
- ❑ Visual symptoms (e.g., close visual inspection of objects, looks at people out of corner of eye, unusual squinting of eyes, interest or fascination for watching movement of other things: spinning of wheels of toys, electric fan, opening and closing of doors)
- ❑ Olfactory and Gustatory Symptoms (taste/smell symptoms: e.g., repetitive sniffing, specific food preferences, mouthing, licking, sniffing, or swallowing inedible objects)
- ❑ Movement/Vestibular symptoms (e.g., whirling without dizziness, preoccupation with spinning objects)
- ❑ Auditory symptoms (e.g., hypersensitivity or aversion to loud noises, close attention to self-produced sounds)
- ❑ Proprioceptive symptoms (e.g., darting, lunging movements, hand flapping, grimacing, posturing)

Section 2: DEAF-BLINDNESS

Federal & State Definition

Deaf-Blindness 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.

ELIGIBILITY CRITERIA

Students must meet the Audiological Criteria, at least one of the Ophthalmologic Criteria, and the Educational Criteria. Students are eligible only if these characteristics interfere with their academic, emotional, or social development.

Audiological Criteria

- ❑ Puretone average greater than 90db in the better ear that precludes the understanding of speech through the ear alone with or without amplification.

Ophthalmologic Criteria

- ❑ Best corrected visual acuity of 20/200 or less in better eye (legally blind)
- ❑ Medical diagnosis of visual impairment

Educational Criteria

- ❑ The child's visual and hearing impairment is such that the child cannot make appropriate educational progress.

Section 3: DEAFNESS

Federal & State Definition

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 a child's educational performance

ELIGIBILITY CRITERIA

Students must demonstrate a hearing loss that is so severe that even with amplification there is significant interference in their learning processes and/or emotional and social development.

Students must meet the Audiological Criteria and at least one of the Educational Criteria. Students are eligible only if these characteristics interfere with their academic, emotional, or social development.

Audiological Criteria

- ❑ Puretone average 90dB or greater in the better ear that precludes the understanding of speech through the ear alone with or without amplification.

Educational Criteria

- ❑ Academic performance is significantly below expectancy as a result of deafness in any of the following areas: reading, spelling, language/English, Content subject areas, vocabulary usage and development.
- ❑ The discrepancy between the student's ability and achievement is determined to be severe (one standard deviation below the mean) as determined by standardized testing.
- ❑ The discrepancy between the student's verbal and performance scores is determined to be severe.

EXCLUSIONARY FACTORS

Student's needs are better identified under other eligibility categories.

Section 4: DEVELOPMENTAL DELAY

Federal & State Definition

Delay in physical development, cognitive development, communication development, social or emotional development, or adaptive development (may include children from three through nine years of age).

ELIGIBILITY CRITERIA

A child who is between the ages of three years old through nine years old who **DOES NOT** meet the criteria of any of the other disability categories, who is experiencing a delay in any of the following domains: physical development, cognitive development, communication, social or emotional development or adaptive development, which significantly interferes with the learning process. A delay in one developmental area is defined as at least 1 ½ standard deviations below the mean as identified by standardized measures and/or at least a 40% delay in one area as identified by criterion-referenced measures. A delay in two or more developmental areas is defined as at least 1 ¼ standard deviations below the mean as identified by standardized measures and/or at least a 30% delay in two or more areas as identified by criterion-referenced measures. The delay(s) must have a direct and substantial adverse effect on the child's ability to make adequate educational progress without special education and related services.

A child may be identified as having the handicapping condition of developmental delay (DD) when delays in **age-appropriate** development adversely affect the child in one or more of the following five major life areas:

- ❑ Physical development in gross motor skills, such as the ability to move around and interact with the environment with appropriate coordination, balance and strength; or fine motor skills, such as manually controlling and manipulating objects such as toys, drawing utensils, and other useful objects in the environment.
- ❑ Cognitive development, such as the ability to acquire, use and retrieve information as demonstrated by the level of imitation, discrimination, representation, classification, sequencing, and problem-solving skills.
- ❑ Communication development in expressive language, such as the production of content, form and use of language; or receptive language, such as listening, receiving and understanding language. The severity of the communication delay would be characteristic of a phonological disorder or of an individual who is non-verbal or has a mean length utterance of 3 words or less.
- ❑ Emotional development, such as the ability to feel and express emotions and develop a positive sense of oneself; or social activity, such as interacting with people, developing friendships with peers, and sustaining bonds with family members and other significant adults.
- ❑ Adaptive development, such as caring for his or her own needs and acquiring independence in eating, toileting, dressing and hygiene tasks.

EXCLUSIONARY FACTORS

An individual will not be considered eligible for services under Developmental Delay if one or more of the following exist:

- ❑ The disability is more accurately described by another category of eligibility (ie., intellectual disability, orthopedic impairment, visual impairment, hearing impairment, specific learning disability, speech and/or language impairment, emotional disability, autism, traumatic brain injury, other health impairment, multiple disabilities, deafness, deaf/blindness).
- ❑ The adverse effect is from a lack of instruction in reading or math that is not related to the developmental delay.
- ❑ The child's functional levels cannot be explained by environmental, cultural, linguistic, or economic influences, or a history of inconsistent educational programs.

EXIT CRITERIA

- ❑ The child has demonstrated adequate functioning over a period of time (minimum of one quarter/9-week period) in a general education classroom with minimally invasive (monitor and/or consult) special education services.
- ❑ The child's disability no longer demonstrates an adverse effect upon educational performance.
- ❑ The child has reached the age of 10 and does not meet eligibility criteria under any other special education category.
- ❑ The child's evaluation results can best be explained by another eligibility category (e.g. Autism, Multiple Disabilities, etc.)
- ❑ The child no longer meets the entrance criteria.

☐ Yes ☐ No The student is 3 years, 0 months through 9 years, 11 months of age.

☐ Yes ☐ No The student demonstrates a significant delay in one or more of the following:

Area	Delay in 1 Area 40% or 1.5 SD	Delay in 2 or more 30% or 1.25 SD
Physical Development	☐	☐
Communication Development	☐	☐
Cognitive Development	☐	☐
Social/Emotional Development	☐	☐
Adaptive Development	☐	☐

Section 5: EMOTIONAL DISABILITY (REVISIONS ADOPTED 8/3/2026)

Federal & State Definition

Emotional Disability *(includes schizophrenia but does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disability)* means a condition exhibiting one or more of the following characteristics over a long/extended period of time and to a marked degree that adversely affects a 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 behavior or feelings under normal circumstances; (D.) A general pervasive mood of unhappiness or depression; or (E.) A tendency to develop physical symptoms or fears associated with personal or school problems.

ELIGIBILITY CRITERIA

Classroom intervention: intervention efforts will have been implemented and documented in the regular school program. These interventions were unsuccessful in sufficiently modifying the student's behaviors and demonstrate the chronic and pervasive nature of the student's problem. There will be a history of marked impairment over a significant period of time and will indicate the frequency, severity, intensity, and duration of the problem(s).

One or more of the following characteristics must be identified:

- ❑ An inability to learn that cannot be explained by intellectual, sensory, or health factors.
- ❑ An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.
  Inability does not indicate an unwillingness to build/maintain satisfactory relationships. This ability/inability is not a choice; these individuals just cannot form/maintain said relationships. Sometimes it is a skill deficit. Behavioral characteristics that impact the ability to build/maintain relationships include:
  (a.) extreme social withdrawal/isolation; (b.) poor reality testing;
  (c.) social or interpersonal deficits;
  (d.) aggressive and authority challenging behaviors; (e.) oppositional tendencies;
  (f.) lack of affect;
  (g.) disorganized/distorted emotions towards others;
  (h.) demands for constant attention from others--either seeking excessive approval or negative attention;
  (i) anxious or fear-driven avoidance of others;
  and (j.) bizarre patterns of interpersonal interaction)

- ❑ Inappropriate types of behavior or feelings under normal circumstances.
  Logically connect the inappropriate behavior/feelings to an emotional condition or diagnosis. A medical diagnosis is not required. Includes abnormal or bizarre behaviors, including behaviors for which no observable reason exists. Does not include general misconduct.

- ❑ A general pervasive mood of unhappiness or depression.
  Occurring across most, if not all, of the student's life situations for an extended period of time:
  (a.) this pattern is not a temporary response to situational specific factors or to a medical condition;

(b.) not a secondary manifestation attributable to substance abuse, medication, or a general medical condition (e.g., hypothyroidism);

(c.) not the effect of normal bereavement which has a pathway process; and

(d.) includes withdrawal from friends, obsession with morbid themes, markedly diminished interest or pleasure in activities, fatigue or loss of energy not medically related.

- ❑ A tendency to develop physical symptoms or fears associated with personal or school problems.

  The physical symptoms/disorder should have no demonstrated organic etiology, and not be under conscious control. Examples include: incapacitating feelings of anxiety; panic attacks; irrational fears of particular objects, activities, individuals or situations; somatic disorders, and/or intense fears or irrational thoughts related to separation from parent(s).

The behaviors above must be:

- ❑ Present over an extended period of time (generally 6 months of documented positive interventions)
- ❑ Present in more than one setting (may also include avoidance of locker room, bathroom, classroom activities, passing periods, or school in general)
- ❑ To a marked degree (i.e. severity/intensity)
- ❑ Adversely affecting educational performance (e.g. academic achievement, acquisition and execution of social skills, and/or interpersonal relationships within a school setting)
- ❑ More than a transient, expected response to stressors in the child's or youth's environment and would persist even with individualized interventions, such as feedback to the individual, consultation with parents or families, and/or modification of the educational environment

EXCLUSIONARY FACTORS

An individual will not be considered eligible for services under Emotional Disability if one or more of the following exist:

- ❑ A determination that the educational problems are primarily the result of social maladjustment (pattern of engagement in purposive antisocial, destructive, and delinquent behaviors), unless the student also has emotional disturbance.
- ❑ Substance abuse only.
- ❑ The disturbance does not affect performance in the educational setting
- ❑ The child's behaviors are primarily a result of mental impairment.
- ❑ Behaviors are primarily the result of Autism characteristics

NEED FOR SPECIAL EDUCATION

A student will not be eligible unless, in addition to meeting the criteria above, the student needs special education as a result of the identified disability. Special education is defined as specially-designed instruction, including adapting, as appropriate to the needs of an eligible child, the content, methodology, or delivery of instruction—(i) To address the unique needs of the child that result from the child's disability; and (ii) To ensure access of the child to the general curriculum, so that the child can meet the educational standards within the jurisdiction of the public agency that apply to all children.

Section 6: HEARING IMPAIRMENT (REVISIONS ADOPTED 8/18/2021)

Federal & State Definition

Hearing Impairment means an impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance but that is not included under the definition of deafness.

ELIGIBILITY CRITERIA

A student must meet the Audiological Criteria and at least one of the Educational Criteria. A student is eligible only if these characteristics interfere with their academic, functional performance, social interaction, or emotional development. A student must have documentation that meets the audiological criteria and one or more educational criteria listed below before an educational eligibility of a hearing impairment can be determined.

Audiological Criteria

❑ Puretone score greater than 21dB.

Educational Criteria

The child's hearing loss is such that the child cannot make appropriate progress in the educational setting without specialized instruction from a Teacher of the Deaf/Hard of Hearing AND there is a delay in one or more of the following areas:

❑ Unaided speech discrimination scores below 80% either in the presence or absence of competing noise

❑ Auditory Functioning – speech perception, noise impact, sound identification and localization

❑ Communication Skills – receptive and expressive language, pragmatics, oral skills, total communication, or sign if appropriate

❑ Academic skills- below average in reading or writing

❑ Functional Skills – self-advocacy, social interaction, amplification use and maintenance, visual attention to details

EXCLUSIONARY FACTORS

A child will NOT be considered eligible for services under Hearing Impairment if:

❑ The hearing loss is determined by a qualified medical professional (MD, AUD, ENT) to be temporary and the duration of the loss is not expected to substantially or permanently impact learning or educational performance (i.e. ear infection).

❑ The child has hearing within the normal range and no medical diagnosis of a hearing impairment, but has auditory processing problems adversely affecting his/her education.

❑ Hearing impairment does not adversely affect educational performance.

❑ The disability is more accurately described by another category of eligibility.

Adverse Educational Effect – Domains that need to be considered include academic achievement, functional performance, social interaction, and behavioral functioning.

Section 7: INTELLECTUAL DISABILITY

Federal & State Definition

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

ELIGIBILITY CRITERIA

Eligibility requires the student to meet both the COGNITIVE and ADAPTIVE BEHAVIOR criteria.

Intellectual Disability manifests before the age of 18 (Adapted from Mental Retardation: Definition, Classification, and Systems of Supports). A certified school psychologist must concur with the child's eligibility based upon the results of a psychological evaluation (23 Illinois Administrative Code, Section 226.135).

Cognitive

- ❑ Significant subaverage **global** intellectual functioning (two or more standard deviations +/- SEM) on an individually administered intelligence test: e.g., an IQ of 70 +/- SEM or below.
    - ❑ For infants, a clinical judgment of significant subaverage intellectual functioning may be used.
    - ❑ Intellectual Disability may be used when there is strong presumption of mental impairment but the individual's intelligence cannot be measured by standard tests: e.g., with individuals too impaired or uncooperative, or with infants.
- ❑ It is required that an individual administered standardized test of cognitive ability be administered by a qualified school psychologist.

Adaptive Behavior

Intellectual Disability exists concurrently with related limitations in 2 or more adaptive behavior skill areas:

- ❑ Significant deficits in **2 or more global adaptive behaviors** (two or more standard deviations +/- SEM or below; *e.g., SS of 70 +/- SEM or below*) on an individually administered adaptive behavior rating scale. *Given a score higher than 70, using the SEM, written justification should be provided, or additional measures demonstrating significant subaverage adaptive behavior should be administered.*

  OR
- ❑ When the global adaptive behavior score is above 70, deficits in adaptive behavior can be defined as limitations (two or more standard deviations +/- SEM; e.g., scaled score of 4 +/- SEM or below) in **2 or more adaptive behavior skills areas / subskills**:
    - ❑ Communication,
    - ❑ Self-Care,
    - ❑ Home Living,
    - ❑ Social Skills,
    - ❑ Community Use,
    - ❑ Self-Direction,
    - ❑ Health and Safety,
    - ❑ Functional Academics,
    - ❑ Leisure, and
    - ❑ Vocational.

Adaptive behavior may be quantified in a manner similar to cognitive levels by use of formal adaptive scales.

Section 8: MULTIPLE DISABILITIES

Federal & State Definition

Multiple Disabilities means concomitant impairments (such as mental retardation-blindness, intellectual impairment-orthopedic impairment, etc.), the combination of which causes such severe educational needs that they cannot be accommodated in special education programs solely for one of the impairments. The term does not include deaf-blindness.

ELIGIBILITY CRITERIA

- ❑ There is evidence of special education eligibility in two or more areas.
- ❑ Impact of each eligibility area is significant enough to stand alone and/or confound determination of primary eligibility.

Section 9: ORTHOPEDIC IMPAIRMENT

Federal & State Definition

Orthopedic Impairment means a severe orthopedic impairment that adversely affects a child's educational performance. The term includes impairments caused by congenital anomaly (e.g., clubfoot, absence of some member, etc.), impairments caused by disease (e.g., poliomyelitis, bone tuberculosis, etc.), and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns that cause contractures).

ELIGIBILITY CRITERIA

- ❑ Evidence of impairment including but not limited to; clubfoot, amputation, poliomyelitis, bone tuberculosis, arthritis, cerebral palsy, spinal bifida, osteogenesis, imperfecta, burns or fractures resulting in contracture.
- ❑ Impact of the impairment significantly interferes with student's ability to participate in the learning process/educational setting.

Section 10: OTHER HEALTH IMPAIRMENT

Federal & State Definition

Other Health Impairment means having limited strength, vitality or alertness, including a heightened sensitivity 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 hyperactivity disorder, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, or sickle cell anemia; and adversely affects a child's educational performance.

ELIGIBILITY CRITERIA

Students with a medical diagnosis must still meet all of the criteria, including the disability having an adverse effect on educational performance, in order to be eligible for special education services (All must be met).

- ❑ Documentation of a medical diagnosis of significant health impairment.

  OR

  For Attention Deficit Hyperactivity Disorder (ADHD), there is documentation in **all three** of the following Areas:

  1. Characteristics associated with ADHD are exhibited in multiple settings.
  2. Significant ratings exist in these multiple environments.
  3. Deficits persist in spite of medical and/or educational interventions.

- ❑ The student's limitation is not due to emotional, behavioral, environmental, cultural, linguistic, sensory (vision/hearing), or cognitive concerns.
- ❑ Deficits are severe enough that the student's educational needs cannot be met in a regular education program without special education services.

Section 11: SPECIFIC LEARNING DISABILITY (REVISIONS ADOPTED 12/13/2023)

Federal & State Definition

Specific Learning Disability means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term does not include learning problems that are primarily the result of visual, hearing, or motor disabilities, of intellectual disability, of emotional disturbance, or of environmental, cultural, or economic disadvantage.

ELIGIBILITY CRITERIA

Upon completion of the administration of assessments and other evaluation measures a group of qualified professionals including (1) the child's regular education teacher; or (2) if the child does not have a regular teacher, a regular classroom teacher qualified to teach a child of his or her age; and (3) at least one person qualified to conduct individual diagnostic examinations of children (such as a school psychologist, speech-language pathologist, or remedial reading teacher); and (4) a special education teacher; and (5) a local education agency representative, and the parent of the child, as well as the child once he/she is age 14 ½, may determine that a child has a specific learning disability if:

- ❑ The child does not achieve adequately for the child's age or to meet state-approved grade-level standards in one or more of the areas stated below, when provided with learning experiences and instruction appropriate for the child's age or state-approved grade-level standards. When administered an individual norm-referenced assessment, the child scores at or below the 10th percentile in one or more of the following areas:
    a. Basic reading skills
    b. Reading fluency skills
    c. Reading comprehension
    d. Mathematical calculation
    e. Mathematical problem solving
    f. Written expression
    g. Oral expression
    h. Listening comprehension

AND

- ❑ The child does not make sufficient progress (level of learning and rate of learning) to meet age or state-approved grade-level standards in one or more of the areas when using a process based on the child's response to scientific, research-based intervention OR is making sufficient progress but that progress is only possible when the student has been provided and continues to need curriculum, instruction, and environmental interventions that are significantly different from general education peers and or an intensity or type that exceed general education resources.

Type of Evidence	Little to No Evidence	Minimal Evidence	Moderate Evidence	Substantial Evidence
Standardized State-Wide Assessment	Level 4&5	Level 3	Level 2	Level 1
Benchmark	25%ile or above	24^{th}-15^{th} %ile	14^{th}-11^{th} %ile	10^{th} %ile and below
Interventions	Tier 1: core instruction	Tier 1 with accommodations in the classroom	Tier 2: Skill targeted small group intervention	Tier 3: additional intervention in very small group
Progress Monitoring Data	Strong Progress At or above 25%ile	Moderate Progress 24^{th}-15^{th} %ile	Some Progress 14^{th}-11^{th}%ile	Little or no progress 10^{th} %ile and below
Rate of Improvement	At or above aim	Approaching aim line	Diverging from aim line	Flat/downward slope
Standardized Achievement	82 and above			81 and below

If the above criteria is met, the team may consider…

- ❑ 23 IAC 226.130(d) allows districts to consider a severe discrepancy between intellectual ability and achievement in addition to using an identification process that determines how a student responds to scientific, research-based intervention. Evaluation teams can consider this information if they find it relevant to an identification of SLD.

THEREFORE

- ❑ As a result of the data and assessments, the IEP team has determined that the child exhibits a disorder in one or more of the basic psychological processes that may manifest itself as an academic skill deficit.

ADDITIONAL CONSIDERATIONS

To ensure that underachievement in a child suspected of having a specific learning disability is not due to lack of appropriate instruction in reading or math, the group MUST consider, as part of the evaluation

- ❑ Data that demonstrate that prior to, or as part of, the referral process, the child was provided appropriate instruction in regular education settings, delivered by qualified personnel; AND
- ❑ Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, which was provided to that child's parents

ADVERSE EDUCATIONAL EFFECT

The disability must have a direct and adverse effect on the child's ability to make adequate educational progress without special education and related services.

Are this student's needs in any areas of concern significantly different from the needs of typical peers and of an intensity or type that exceeds general education resources and requires specially-designed instruction?
(Select One)

☐ No

☐ Yes The student's instructional needs are significantly different and exceed general education resources and requires specially-designed instruction.

If yes, which areas? _____

EXCLUSIONARY FACTORS

1) The student's evaluation results can best be explained by another eligibility category (e.g. Autism, Multiple Disabilities, etc.)
2) The child's functional levels cannot best be explained by:
   - ❑ a visual, hearing, or motor disability; intellectual disability; emotional disability
   - ❑ a lack of scientifically-based instructional practices and programs that contain the essential components of appropriate reading instruction
   - ❑ a lack of instruction in math
   - ❑ limited English proficiency (ACCESS score below 4.8)
   - ❑ a history of inconsistent educational program
   - ❑ environmental, cultural or economic influences

EXIT CRITERIA

- ❑ The student's disability no longer demonstrates an adverse effect on educational performance.
- ❑ The student no longer meets the entrance criteria.

For questions regarding the documentation required for eligibility based on Response to Intervention data, see form "Mid-State Special Education Response to Intervention (RtI) Checklist for Eligibility" as a guide.

Section 12: SPEECH OR LANGUAGE IMPAIRMENT

Federal Definition & State Definition

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

ELIGIBILITY CRITERIA

Articulation/Phonological Criteria

The student with an articulation impairment has a deficiency in his/her ability to produce sounds correctly in conversational speech. This impairment is inconsistent with chronological and/or mental age expectancies. Articulation errors are not related to cultural or dialectical differences.

The IEP team may identify a child as having a speech impairment if the child meets the definition under 1 and meets any of the following criteria under 2 below:

- ❑ The student demonstrates speech sound errors outside of the developmental guidelines.
- ❑ There is an adverse effect on:
    - ❑ Academics or classroom communication due to decreased speech intelligibility.
    - ❑ Sound/symbol development, spelling, reading skills related to distorted phonemes.
    - ❑ Socio-emotional development.

Exclusionary Factors

A student is not eligible for special education and related services when:

- ❑ Sound errors are consistent with developmental age or within normal articulation development.
- ❑ Articulation differences are due primarily to unfamiliarity with the English language, dialectical differences, temporary physical disabilities, or environmental, cultural or economic factors.
- ❑ The articulation errors do not interfere with the student's ability to benefit from education.

Fluency Criteria

A fluency impairment is defined as the abnormal flow of verbal expression at times combined with negative attitudes and feelings about speech. It is characterized by an increase in atypical and typical disfluencies that may also be accompanied by tension and/or secondary characteristics (i.e. body movements, facial grimace, etc.).

The IEP team may identify a child as having a fluency impairment for special education and related services if they exhibit one of the following:

- ❑ The student demonstrates at least 2-4% atypical disfluencies (sound syllable repetition, prolongation and blocks) within a speech sample of at least 100 words. Noticeable tension and/or secondary characteristics may or may not be present.
- ❑ The student demonstrates typical (word and phrase repetitions, interjections, revisions, unfinished words, hesitations) disfluencies within a sample of at least 100 words with one or more of the following:
    - ❑ accompanied by audible and/or visual tension
    - ❑ secondary characteristics
    - ❑ negative attitudes and feelings about their speech

Exclusionary Factors

A student is not eligible for special education and related services when:

- ❑ Disfluencies are part of normal speech development.
- ❑ Disfluencies do not interfere with the student's ability to benefit from education.
- ❑ Rate is the only affected area.

Language Criteria

The student with a language impairment demonstrates impairment and/or deviant development of spoken and/or written symbol system. This may include:

- ❑ Language form-the portion of language that refers to the sentence structure of what is said (phonology, morphology, syntax).
- ❑ Language content-the portion of language that refers to meaning of words and sentences including abstract concepts of language (semantics).
- ❑ Language use-the context in which language can be used and the purpose of communication (pragmatics). Children with pragmatic problems demonstrate difficulty in communicating effectively, although form and content may be intact.

The IEP team may identify a child as having a language impairment if:

- ❑ The student demonstrates a deficit in receptive and/or expressive language.

  and
- ❑ Clinical observations, informal assessment, and consultation with other school personnel are indicative of a language impairment that has an adverse effect on educational performance.
- ❑ In some situations, the nature and/or severity of the disabling condition caused by a language impairment may need to be determined by factors other than standardized tests. In these cases eligibility and severity would need to be determined by the impact of the language impairment on the student's communicative, academic, and social competence, thereby adversely impacting educational performance. Clinical observation, language samples, and consultation with other school personnel are important components in determining eligibility of language-impaired students.

Exclusionary Factors

- ❑ Language differences are primarily due to environmental, cultural or economic factors including non-standard English and regional dialect.
- ❑ Speech/language difficulties result from a second language, unless the child has a language impairment in his or her native language. This can only be assessed through a bilingual assessment.
- ❑ Language performance does not interfere with the student's ability to benefit from education.
- ❑ Language performance is consistent with developmental norms as documented by formal and informal assessment data.
- ❑ Language needs can be addressed:
  - ❑ Within the classroom setting (resource or general education setting).
  - ❑ Through modifications or accommodations made to the classroom environment.
  - ❑ Through adaptations in teacher style to successfully support the student's learning.

Voice Criteria

A voice impairment is defined as any deviation in pitch, intensity, quality, or other attributes which consistently interferes with communication; draws unfavorable attention; adversely affects the speaker or the listener or is inappropriate to the age, sex, or culture of the individual. Voice quality may be affected by either organic or functional factors.

The IEP team may identify a child as having a voice impairment if:

- ❑ The student demonstrates deviant vocal behavior related to pitch, intensity, or quality inappropriate for the student's age or sex that is of concern to parent, student, physician and/or teacher. Frequency and consistency must be considered. **A doctor's order (ENT Exam) is necessary before treatment can begin. A school based SLP cannot diagnose voice disorders.

Exclusionary Factors

- ❑ Is the result of temporary physical factors such as allergies, colds, abnormal tonsils or adenoids, short term vocal abuse or misuse

- ❑ Is the result of regional, dialectic or cultural differences
- ❑ Does not interfere with the student's ability to benefit from education
- ❑ Student's needs are better identified under other eligibility categories
- ❑ Are the result of socio-emotional development

Section 13: TRAUMATIC BRAIN INJURY

Federal Definition & State Definition

Traumatic Brain Injury means an acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a 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; judgment; problem-solving; sensory, perceptual, and motor abilities; psychosocial behavior; psychosocial functions; information processing; and speech. The term does not apply to brain injuries that are congenital or degenerative or to brain injuries induced by birth trauma.

ELIGIBILITY CRITERIA

The student must demonstrate **ALL** of the following:

- ❑ Medical documentation of traumatic brain injury
- ❑ Evidence of educational deficits
- ❑ Educational deficits causally linked to the traumatic brain injury
- ❑ Deficits that are severe enough that the student's educational needs cannot be met in a regular educational program without special education services.

Section 14: Visual Impairment

Federal & State Definition

Visual Impairment means an impairment in vision that, even with correction, adversely affects a child's educational performance. The term includes both partial sight and blindness. Eligibility requires that a child must have impairment in vision that, even with correction, adversely affects the child's educational performance, necessitating specialized instruction and/or services. The visual impairment shall be directly related to reduced acuity or visual fields, and shall NOT be primarily perceptual (pertaining to deficiencies in the visual processing center of the brain) in nature. The term includes both partial sight and blindness.

ELIGIBILITY CRITERIA

To be eligible for special education and related services as a child with a visual impairment, a child must have:

- ❑ Documentation from an optometrist or ophthalmologist of a vision deficit or a progressive vision loss is required before an educational eligibility of visually impairment/blindness can be determined.
- ❑ Visual acuity has been determined to be 20/70 to 20/200 in the better eye with best correction **OR**
- ❑ Visual field measuring 20 degrees or less **OR**
- ❑ Functional vision which is virtually absent or immeasurable for purposes of learning as determined by a Functional Vision Assessment.
- ❑ Teacher of the Visually Impaired reports the results of a Functional Vision Assessment.
- ❑ Documentation supports the IEP team's determination that the visual impairment adversely affects the child's educational performance and requires the use of specialized texts, techniques, materials, and/or assistive technology devices.

EXCLUSIONARY FACTORS

A child will NOT be considered eligible for services under Visual Impairment if:

- ❑ The child is blind or visually impaired in one eye, but the better eye has a best corrected acuity of 20/25 to 20/60.
- ❑ The vision loss is determined by a qualified medical professional (MD, DO, OD) to be temporary and the duration of the loss is not expected to substantially or permanently impact learning or academic performance (i.e. scratched cornea, swollen eye, pink eye).
- ❑ The child has a visual acuity within the normal range (20/20 to 20/60) and no medical diagnosis of a visual impairment, but has visual perception problems adversely affecting his/her education.
- ❑ Visual impairment does not adversely affect educational performance.
- ❑ The disability is more accurately described by another category of eligibility.