Asking the Right Questions, Getting the Right Answers:
Evaluating Young Children for Special Education Services

Best Practices in Early Childhood Assessment/Evaluation
This section provides an overview of the evaluation and assessment process as it applies to young children (ages 3-5 years) who may have disabilities, according to state and federal law. Explanations of the law, process, and specific examples pertaining to early childhood are provided. Much of the information provided in this section comes directly from the Kansas Special Education Process Handbook (February, 2008), a guide developed by the Kansas State Department of Education, Special Education Services to facilitate the understanding and implementation of IDEA in public school systems in Kansas.

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June 2004 (Updated 2008)
Kansas Inservice Training System
Kansas University Center on Developmental Disabilities
2601 Gabriel, Parsons, Kansas 67357
620-421-6550 ext. 1618
kskits.org
INITIAL EVALUATION

REFERRAL RECEIVED FROM SCREENING, GENERAL EDUCATION INTERVENTION PROCESS OR PARENT REQUEST

PARENT RIGHTS PROVIDED AT TIME OF REFERRAL

PRIOR WRITTEN NOTICE PROVIDED AND CONSENT OBTAINED

DEVELOP EVALUATION PLAN
EVALUATION CONDUCTED

ELIGIBILITY DETERMINED BY TEAM

ELIGIBILITY REPORT PROVIDED TO PARENTS

IEP DEVELOPED AND IMPLEMENTED IF THE CHILD IS FOUND ELIGIBLE

CHILD NOT ELIGIBLE
OTHER INTERVENTION PLAN DEVELOPED

Adapted from Special Education Services. (2008, February). Kansas Special Education Process Handbook (p. 3-2 Figure 3-1). Topeka, KS: Kansas State Department of Education.
Asking the Right Questions, Getting the Right Answers: Evaluating Young Children for Special Education Services (Part B)

by
Misty D. Goosen, Ed.S.

Introduction

One role of early childhood professionals is the identification of young children with special needs and the development of appropriate services for those children. An initial evaluation requires many legal and ethical considerations, as evaluation information will be used in a variety of ways for a variety of purposes. Early childhood professionals may be left feeling overwhelmed by the process. To comply with legal mandates, assessment instruments and methods must be selected that help teams determine whether the child’s development is significantly different from other children the same age and how those differences affect the child’s ability to participate in every day activities.

The National Association for the Education of Young Children & the National Association of Early Childhood Specialists in State Departments of Education in their 2003 joint position statement provide the following as indicators of effectiveness in early childhood assessment:

• Ethical principles guide assessment practices
• Assessment instruments are used for their intended purposes
• Assessments are appropriate for ages and other characteristics of children being assessed
• Assessment instruments are in compliance with professional criteria for quality
• What is assessed is developmentally and educationally significant
• Assessment evidence is gathered from realistic settings and situations that reflect children’s actual performance
• Assessments use multiple sources of evidence gathered over time
• Screening is always linked to follow-up
• Use of individually administered, norm-referenced tests is limited
• Staff and families are knowledgeable about assessment

Using the Kansas State Department of Education’s Kansas Special Education Process Handbook (February, 2008) as a guide, the following information is specific to those involved in the evaluation of young children who may be eligible for special education services. The evaluation process begins with the initial referral through the collection of information crucial to the development of meaningful and measurable Individual Education Plan (IEP) goals.
Beginning the Process

Child Find/ Referral Process

Policies and procedures used by the Local Education Agency (LEA) to locate, identify, and serve students with special needs are called Child Find activities. Child Find activities include, but are not limited to, screening, evaluation, and special education services.

Children are identified for an initial evaluation in a variety of ways. Some children are identified through a formal screening process, others are referred through the Part C program prior to their 3rd birthday, while other children are brought for an evaluation at the request of their parents.

Screening:
The purpose of screening is to determine the need for an initial evaluation. Screening is considered to be a quick look at the developmental areas to assist in determining whether a child should be referred for an initial evaluation.

Kansas regulations specify that each school board have policies and procedures that include age-appropriate screening procedures for children from birth to age five (KAR 91-40-7). State requirements also mandate that screening, including hearing and vision screening, must be equally available in all public and private schools within the school district's boundaries. (KSA 72-1204 and 72-5204 et seq.). Young children's needs must be identified as soon as possible, so that early intervention may be provided. While there is no specific timeline set for screening, the state requires that screening occur within a reasonable amount of time after the initial request. As a general rule, no child should have to wait more than 30 calendar days for a screening.

Schools should work with their local tiny-k network to collaborate on Child Find activities that take place for children from birth through two years of age. For information about local tiny k networks, call the Infant-Toddler Services office at the Kansas Department of Health and Environment, 800-332-6262 or 785-296-6135. District staff may also collaborate with other local providers who also conduct screenings, such as Head Start, local health departments, Parents As Teachers, Healthy Start home visitors, or KAN-Be-Healthy screeners through Medicaid. (For information about one or more of these programs, contact the Make A Difference Information Network, 800-332-6262).

Any time it is suspected that a child (birth to age five) may be a child with a disability, school personnel, the family, and/or individuals in the community (e.g., physicians, child care providers, etc.) may refer a child for screening. Screening must include observations, instruments, measures, and techniques that indicate potential developmental delays or disabilities. Screenings must also assess vision (including behavioral and observational signs of vision problems in addition to basic vision screening) and hearing (including middle ear function and behavioral audiometry). Districts must maintain
documentation on results of screenings. If the results of the screening indicate a potential developmental delay or disability, the screening team makes the referral for initial evaluation.

Screening information can also be gathered in less formal ways. Information provided by preschool teachers, doctors, or others who have recent information that indicates the child may be at risk of having a disability can be used to determine if an initial evaluation is necessary, thus bypassing a formal screening.

No matter how screening information is collected, good screening practices will make a correct decision 70% to 80% of the time. That means that 20% of the time children who are referred on for an evaluation will later be found to be developing within normal limits and not in need of special education services. Districts who find that nearly all of the children screened go on to qualify for special education after an initial evaluation, may be conducting screening activities that are to rigorous. Screening activities shouldn’t require the same amount of staff time and effort as evaluation activities, and should over identify children as being at risk.

Referral from Part C:
Each Part C program is required to notify the appropriate LEA at least 90 days before a child, who may be eligible for Part B services, turns three. This 90-day notice constitutes a referral to the Part B program and begins the 60-day timeline for the evaluation, IEP development and services (if eligible). Special consideration must be given to children who turn three during the summer. The referral must be made 90 days before the end of the school year, so that appropriate services will be in place for each child. For all children referred from the Part C system, an IEP must be developed and services begun by the child’s third birthday.

To insure that an IEP is developed and that services are begun before a child’s third birthday, Kansas allows school districts to identify and serve any two-year old child who will turn three during the school year, even if he or she has not been served in the Part C program. Districts may collaborate with the local infant toddler network to initiate the transition process earlier than the minimum 90-day period for those children who will turn three over the summer months. Initiating the evaluation process earlier for these children will allow the district to start services before the third birthday, and avoid the confusion of summer month evaluations.

Parent Request:
Parents who have concerns about their child’s development may request either a screening or formal evaluation for their child. Each LEA must have procedures for parents to make a written referral for an initial evaluation. When parents contact an LEA to discuss their concerns, a contact person from the district should explain to the parents the following:
• They have the right to go directly to an evaluation; and/or
• A screening process is available and may precede an initial evaluation to assist the team in determining the specific concerns and needs of the child.

Parents must be fully informed about the purposes of screening and evaluation. They must understand the specific activities that will take place and the potential outcomes of such activities.

**Actions Required of School Personnel Responsible for Initiating Evaluations**

Once a child has been referred for an initial evaluation, school personnel are required to:

1) provide parents with a copy of their *Parent Rights*
2) prepare the *Prior Written Notice*, including referral information, review of existing information, and an determination of what, if any, data will be collected during the evaluation
3) provide *Prior Written Notice* of their intent to conduct an initial evaluation, or their refusal to conduct an initial evaluation
4) obtain *Informed Written Consent* for the proposed action
5) form the evaluation team
6) conduct the evaluation following the 60 school-day timeline
7) determine eligibility, and provide parents with the eligibility report


The *Kansas Special Education Process Handbook* (February, 2008) states that there is no longer a specified timeline for the initial evaluation itself; however, State regulations specify several time requirements that must be completed within 60 school days unless an agency can justify the need for a longer period of time or has obtained written parent consent for an extension of time. The 60-school-day timeline begins when the agency receives informed written parent consent, continues through gathering the evaluation data and determining eligibility, and ends when IEP services are implemented (should the student be found eligible for special education).

The Evaluation Team

Evaluation Team Responsibilities

After the required actions have been taken, an evaluation team, including the parents, is formed. The primary responsibility of the evaluation team is to analyze assessment data and make decisions based on that information about whether:

a. The child is a child with an exceptionality;
b. The child needs special education and related services; and
c. The present levels of academic achievement and functional performance of the child.

Members of the evaluation team are the same as those who would serve (should the child be found eligible) on the child's IEP Team, including the parents. Other qualified professionals may be included, as appropriate. In Kansas, the additional team members mentioned in 34 CFR 300.540 are considered appropriate for these teams. Thus, team members include:

• The parents of the child;
• At least one general education teacher of the child (if the child does not have a general education teacher, a general education classroom teacher qualified to teach a child of his or her age; or for a child of less than school age, an individual qualified to teach a child of the same age);
• At least one special education teacher or one special education provider of the child;
• A representative of the public agency who is (1) qualified to provide, or supervise the provision of, specially designed instruction to meet the unique needs of children with exceptionalities; (2) knowledgeable about the general curriculum; and (3) knowledgeable about the availability of resources of the public agency;
• An individual who can interpret the instructional implications of evaluation results (may be qualified to conduct individual diagnostic examinations of the child, such as a school psychologist, speech-language pathologist, or remedial reading teacher);
• At the discretion of the parents or the agency, other individuals who have knowledge or special expertise regarding the child, including related services personnel as appropriate;
• Other qualified professionals, as appropriate; and
• If appropriate, the child.

(Federal Regulations Sec. 300-533 which refers to Sec. 300.344. IEP Team).
Parents as Team Members
Parents have not always been included as members of the evaluation team; however, when IDEA was reauthorized parent membership became required. The intent of this addition was to allow families to be equal partners in the process of identification and educational planning for their children.

The role parents choose to take in this process will vary. Some parents may choose to participate in traditional ways such as providing information through interviews and surveys. Others may choose a more active role by participating in play-based and other types of assessments with their child and in the development of goals for their child’s IEP. In either case, it is up to the LEA to provide meaningful opportunities for families to participate as active members of the evaluation team.
REGULAR EDUCATION PRESCHOOL TEACHER AT THE IEP/IFSP MEETING

The following information is provided in Appendix A, Figure 4-1a, pages 1-4 in the *Kansas Special Education Process Handbook* (February, 2008):

IDEA-2004 regulations establish the requirements for IEP/IFSP teams to include a regular education teacher of the child. The IEP/IFSP team of each child must include “at least one regular education teacher of the child (if the child is, or may be, participating in the regular education environment).” (34 CFR 300.321(a)(2))

“A regular education teacher of a child with a disability, as a member of an IEP team, must, to the extent appropriate, participate in the development, review and revision of the child’s IEP. This participation shall include assisting in making the following determination [in order for the child to participate in appropriate activities (general curriculum)]:

1. The appropriate positive behavioral interventions and supports and other strategies for the child;
2. The supplementary aids and services, program modifications, and support for school personnel that will be provided to assist the child to:
   • Advance appropriately toward attaining the annual goals;
   • Be involved in and make progress in the general education curriculum and to participate in extracurricular and other nonacademic activities; and
   • Be educated and participate with other children with disabilities and nondisabled children in these activities.” (34 CFR 300.324(a)(3); 34 CFR 300.320(a)(4))

“Regular education teacher” means a person who, under state standards, is qualified to provide instruction to children without disabilities of the same age as the child with a disability. In the case of preschool age children, the person must be knowledgeable about age-relevant developmental activities or milestones that typically developing children of the same age would be performing or would have achieved. (*The Kansas “State Standard” is that the teacher must meet the requirements of the administering agency.*)

“Regular education teacher of the child” means a regular education teacher who is, or is anticipated to be, the child’s teacher and is knowledgeable about appropriate activities of typically developing peers, so the teacher is able to determine how the child’s disabilities affect the child’s participation (involvement and progress) in those appropriate activities.

“…if the child is, or may be, participating in the regular education environment.”

- If a public agency provides regular education preschool services to children without disabilities, then the teacher for these services would be the regular
education teacher of any preschool age child with a disability in that regular education preschool program, (300.321(a)(2) and 300.324(a)(3))

• If a public agency makes kindergarten available to children without disabilities, then the kindergarten teacher would appropriately be the regular education teacher who would be a member of the IEP/IFSP team for a kindergarten age child with a disability who is, or may be, participating in the regular education kindergarten environment.

• If the child with a disability is or may be participating in a regular education environment for children without disabilities, which is not provided by the public agency, the agency should invite the regular education preschool teacher. However, if the teacher does not attend the IEP/IFSP meeting the public agency shall designate attendance by an appropriate person who, under state standards, is qualified to serve children without disabilities of the same age as the child with a disability.

• The regular education preschool teacher attending the IEP/IFSP meeting shall be the teacher of the child with a disability or the anticipated teacher of the child (such as the kindergarten teacher if a child is transitioning into kindergarten) or a representative kindergarten teacher from the child’s home school. If the child is not in a regular education preschool environment and is not expected to be participating in a regular education preschool environment or Kindergarten during the term of the IEP/IFSP, as determined by the IEP/IFSP team, then a regular education teacher is not required to attend the IEP/IFSP meeting.

• If the child with a disability is receiving special education services in a regular education preschool environment such as Head Start, Even Start, 4 year old at risk, or private educational preschool, the lead teacher of the preschool program shall be the regular education teacher at the IEP/IFSP meeting.

The following information provides guidance for determining the regular education teacher for specific environments where a child with a disability may be receiving special education services, and how the state regulations address the issue of dual representation, “If qualified to do so, an agency member of the IEP/IFSP team may serve in the role of two or more required members of a child’s IEP/IFSP team.” (KAR 91-40-17(i)).

**Home Setting Only**

When a child with a disability receives special education services in the home, or the home of a child care provider, the parent or child care provider is not considered to be a regular education teacher of the child. In this situation, there is no regular education teacher of the child. The parent must be invited to participate in all IEP/IFSP meetings. Also, the parent should consider inviting the child care provider to attend IEP/IFSP meetings in order to share information about the child and to learn of the type of support they might be able to provide in the child care environment.
Community-Based Preschool Setting
For preschool children with disabilities who are enrolled in a community-based early childhood education program, the state has determined that a preschool teacher who meets the administering agency’s requirements is qualified to be the regular education teacher of the child. Therefore, a Head Start teacher, or the teacher of any other public or private early childhood education program who meets the qualifications of the administering agency, is to serve as the regular education teacher at the IEP/IFSP meeting. The preschool teacher must be the lead teacher of the child’s classroom.

If a Head Start teacher, or a regular education teacher in another preschool program who meets the required state standards, is also a certified/licensed ECSE teacher and is providing regular education services and special education services to the child with a disability under an IEP/IFSP (under the supervision of a USD/Cooperative/Interlocal), this teacher may serve as both the regular education teacher and the special education teacher of the child.

When a child with a disability receives special education services in a regular education preschool program that is not operated by the LEA, the LEA is required to invite the regular education teacher of the child. If the regular education teacher of the child is not at the IEP/IFSP meeting the LEA shall designate attendance by an appropriate person who, under state standards, is qualified to serve children without disabilities of the same age as the child with a disability.

School-Based Regular Education Preschool Setting
If the public school operates an early childhood program, in which the child with a disability is enrolled, the teacher of the program would be the regular early childhood teacher at the IEP/IFSP meeting. For a child attending kindergarten, the kindergarten teacher is the regular education teacher of the child.

Reverse Mainstreaming Setting Only
If a child with a disability is served in a reverse-mainstream early childhood special education setting and it is anticipated that the child will continue in that setting, a regular education teacher is not required to attend the IEP/IFSP meeting. If a school determines that a regular education teacher should attend an IEP/IFSP meeting, and the ECSE teacher of a child is also certified/licensed in early childhood education, the teacher may serve in the role of both the special education teacher and the regular education teacher at the IEP/IFSP meeting, so long as there is not another regular education teacher of the child. If it is anticipated that the child will be transitioning to kindergarten during the year the IEP/IFSP is in effect, the kindergarten teacher should be the regular education teacher at the IEP/IFSP meeting.

Early Childhood Special Education Setting Only
If a child with a disability is not in a regular education preschool environment and is not
anticipated to be participating in a regular education preschool environment or Kindergarten during the term of the IEP/IFSP, then a regular education teacher is not required to attend the IEP/IFSP meeting. However, if a school determines that a regular education teacher should attend an IEP/IFSP meeting, and the early childhood special education (ECSE) teacher of a child is also licensed in early childhood education, the teacher may serve in the role of both the special education teacher and the regular education teacher at the IEP/IFSP meeting. If it is anticipated that the child will be transitioning to kindergarten during the year the IEP/IFSP is in effect, the kindergarten teacher should be the regular education teacher at the IEP/IFSP meeting.

**Initial Eligibility for Part B Services, including Transition from Part C**
For an initial IEP/IFSP meeting, if the child with a disability is, or is anticipated to be, participating in a regular education preschool program, the current regular education preschool teacher or anticipated regular education teacher would serve in the role of the regular education teacher. If the child is not in a regular education preschool environment and is not anticipated to be participating in a regular education preschool environment or Kindergarten during the term of the IEP/IFSP, as determined by the IEP/IFSP team, then a regular education teacher is not required to attend the IEP/IFSP meeting.

**Extent of Participation of the Regular Education Teacher**
The federal Office of Special Education Programs (OSEP) indicates that, the regular education teacher of a child with a disability, as a member of the IEP/IFSP team, must, to the extent appropriate, participate in the development, review and revision of the child’s IEP/IFSP, including assisting in, (1) the determination of appropriate positive behavioral interventions and supports and other strategies for the child; and (2) the determination of supplementary aids and services, program modifications, and supports for school personnel that will be provided to assist the child. While a regular education teacher must be a member of the IEP/IFSP team if the child is, or may be, participating in the regular education environment, the teacher need not (depending upon the child’s needs and the purpose of the specific IEP/IFSP team meeting) be required to participate in all decisions made as part of the IEP/IFSP meeting or to be present throughout the entire IEP/IFSP. Depending upon the specific circumstances, however, it may not be necessary for the regular education teacher to participate in discussions and decisions regarding, for example, the physical therapy needs of the child, if the teacher is not responsible for implementing that portion of the child’s IEP/IFSP. The extent to which it would be appropriate for the regular education teacher member of the IEP/IFSP team to participate in IEP/IFSP meetings must be decided on a case-by-case basis.

The Kansas Special Education Process Handbook Appendix A, Figure 4-1b, provides an easy to follow chart listing all the possible positions that can fulfill the role of regular education teacher for preschool aged children within different scenarios. A copy of this chart is provided on page 26 of this section.

**Review of Existing Data**

A preliminary step to conducting the initial evaluation is for the evaluation team, including the parents, to review existing information to determine what additional data may be needed to establish:

a. Whether the child is a child with an exceptionality;

b. Whether the child needs special education and related services; and

c. The present levels of academic achievement and functional performance and educational needs of the child.

Initially, the review of existing data is to help determine what, if any, information will need to be collected to answer the evaluation questions. The LEA must inform the parents exactly what information will be collected in the evaluation process. The data reviewed may include information provided by the parents, current classroom-based assessments and/or observations, teacher and related services providers' observations, and/or information from screening. For children under age five, the team might review information from tiny-k providers, child care providers, Early Head Start or Head Start teachers, other early childhood programs, IFSP teams, performance on screening measures, and other caregiver information. The team then should engage in problem analysis to generate hypotheses regarding possible causes of the concerns. This critical discussion will assist the team in determining the specific data to be collected during the evaluation.

In determining what additional data may be needed, the team should consider what information is needed to be sufficiently comprehensive in determining if the child qualifies to identify all of the child's special education and related services needs. After determining what additional data are needed, the team should also determine what evaluation data each member of the evaluation team is responsible for collecting (*Kansas Special Education Process Handbook*, Page 3-5, February, 2008).

Once the review of existing data is completed parents are informed what, if any, new assessment information will be collected. The consent forms for an initial evaluation should indicate specifically what information will be collected, and who will be responsible for collecting that information. At this time parents are also provided a copy of the Parent Rights document and written consent for the proposed action is obtained.

If the school district does not propose to administer any additional assessments to determine whether the child is a child with a disability, the school district must include in the Prior Written Notice to the child’s parents:
a. A statement of this fact and the reasons for it; and

b. A statement of the right of the parents to request additional assessment to
determine whether the child is a child with an exceptionality.

The school district is not required to conduct any assessment of a child to determine if the
child is a child with a disability, unless requested to do so by the parents. In addition, if
the parents request an assessment of their child, the school district may refuse to do so,
but it must provide the parents with Prior Written Notice of the refusal to conduct the
assessment and the reasons for the refusal. The parents may request mediation or due
process if they want the assessment conducted (Kansas Special Education Process

The Initial Evaluation Process

After obtaining formal written consent for the evaluation from a parent, the evaluation
team is ready to conduct the comprehensive evaluation. The team is charged with a
number of tasks in this process. Not only must they determine if the child is eligible for
special education services, they must also collect enough information to identify how the
child’s disability (if a disability was identified) affects their child’s ability to participate
and progress in age appropriate activities. The team must identify specific strengths/
needs from which an educational plan of action can be created (IEP) and progress from
specialized instruction can be monitored.

The initial evaluation must be completed within 60 school days, unless the district can
justify the need for a longer period of time or has obtained written parent consent for an
extension of time. The 60-school-day timeline begins when the agency receives
informed written parent consent, continues through the evaluation and determination of
eligibility, and ends when an IEP is written and services are implemented, should the
student be found eligible for special education (Kansas Special Education Process

Not everyone on the evaluation team is required to collect assessment information. The
team collectively decides which team members will collect the assessment information
that is needed. All members do, however, participate in the decision making process from
which the assessment information is utilized. Therefore, the team must make sure that
assessment and other evaluation information be organized and shared in such a way that
all members, including the parents, can easily understand the results, and thus use it to
make informed decisions.

Eligibility Determination

Eligibility for Special Education and Related Services: The primary decision that is made
through the initial evaluation process is a child’s eligibility and therefore, entitlement, for
special education and related services. Eligibility is established by answering “yes” to both questions in the following 2-Prong Eligibility Test:

**2- Prong Eligibility Test**

Prong 1: Does the student meet one of the definitions of a student with a disability?

Prong 2: Does the student have an educational need that cannot be met in general education.

In addition to determining eligibility (identified disability + need), the evaluation team must also identify the Present Levels of Academic Achievement and Functional Performance (PLAAFP) for the child.

Therefore, the three major tasks of the evaluation team are to determine:

a. Whether the child is a child with a disability  
b. Whether the child needs special education and related services and;  
c. The present levels of performance and educational needs of the child

Within each of these tasks, the evaluation team must create a more specific list of assessment questions from which an evaluation plan can be created.

**Prong 1: Does the student meet one of the definitions of a student with a disability?**

To determine if the student meets one of the definitions of a student with a disability, the evaluation team must:

a. know the federal and state definitions of disability,  
b. be knowledgeable of typical development in young children,  
c. be able to identify if a child’s development is significantly different from other children the same age, and  
d. determine if this difference requires special education and related services.

This determination must be made using multiple sources of information that verify a delay exists across settings, people, and situations.

**Definitions of a student with a disability**

According to Federal Regulations, there are 13 areas by which a child can be identified as a “child with a disability”.

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<thead>
<tr>
<th>Condition</th>
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<tbody>
<tr>
<td>Autism</td>
<td>Mental retardation</td>
<td>Speech or language impairment</td>
</tr>
<tr>
<td>Deaf-blindness</td>
<td>Multiple disabilities</td>
<td>Traumatic brain injury</td>
</tr>
<tr>
<td>Deafness</td>
<td>Orthopedic impairment</td>
<td>Visual impairment</td>
</tr>
<tr>
<td>Emotional disturbance</td>
<td>Other health impairment</td>
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</tbody>
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Hearing impairment        Specific learning disability

In addition to the 13 Federal categories, Kansas Regulations allow children ages three through nine, to be identified under the category of developmental delay (DD) a definition of disability that is considered non-categorical. Districts can use the DD category for the entire three through nine age-range, or they can use it for ages three through five years only. This decision is left to the discretion of individual districts.

**State Regulation**

**KAR 91-40-1**

(a) “Developmental delay” means such a deviation from average development in one or more of the following developmental areas that special education and related services are required:

(A) physical;
(B) cognitive;
(C) adaptive behavior;
(D) communication; or
(E) social or emotional development.

The deviation from average development shall be documented and measured by appropriate diagnostic instruments and procedures.

In summary, DD is a category used to describe a significant delay in one or more of the developmental areas. Although it is not necessary to assess a child in all developmental areas, all areas related to a suspected disability must be assessed.

**State Regulation:**

**KAR 91-40-9(b)**

(1) Each child shall be assessed in all areas related to a suspected exceptionality, including, if appropriate, the following:

(A) health;
(B) vision;
(C) hearing;
(D) social and emotional status;
(E) general intelligence;
(F) academic performance;
(G) communicative status; and
(H) motor abilities.

Each evaluation shall be sufficiently comprehensive to identify all of the child’s special education and related services needs.

**DD and Significant Difference**

As stated above, a fundamental characteristic of DD is the establishment of a significant delay in one or more developmental areas. Therefore, the evaluation team must identify if a difference exists, and how significant that difference is when compared with other children the same age. To do this the team must have knowledge regarding typical development and understand how to choose assessment tools and techniques that will provide valid information about the child’s developmental status compared to same age peers. The team may choose to use normative data (national and local) in conjunction with professional judgments, observations, and other assessment techniques. No matter which tools and techniques are used, the information collected must provide evidence
that a significant developmental difference is present across situations, activities, and environments, not just in an isolated testing situation.

The following are guiding questions to help determine if a significant developmental difference exists:

- With extra support does the child continue to make minimal/no progress?
- What might be keeping the child from doing what is expected? (lack of experience, physiological)
- Has the problem been present since birth?
- Does information on norm-referenced tools indicate a significant difference?
- Do non-traditional assessments indicate significant difference from peers in community?
- Does the problem exist across settings, people, or situations?

**Prong 2: Does the student have an educational need that cannot be met in general education.**

In order for a child to qualify for special education services, it is not enough for a team to identify a significant difference in the child’s development. The team must also verify: a) the child’s developmental difference has a substantial impact on the child’s ability to do things that other children of the same age would be doing (educational need), and b) that the resources needed for the child to participate and progress are beyond those available through general education, and will therefore require specially designed instruction and related services.

**Appropriate Activities and Educational Need**

For elementary and secondary students, educational need refers to the types of resources needed in order for the child to be successful in the general education curriculum (i.e., reading, writing, math, social skills—as it relates to school relationships, etc.). For preschool children, educational need refers to the types of resources needed for the child to be successful in appropriate activities. Appropriate activities include those activities that children of the same age would take part in if enrolled in preschool, child-care, mother’s day out programs, or even staying home with their family. These activities may include listening to stories/looking at books, dramatic play, participating in small and/or large group activities, playing with friends, singing songs, constructing buildings with blocks, coloring, painting, etc. Age appropriate activities are considered “the general education curriculum” for children three to five years of age.

34 C. F.R. Appendix A. Question 1. p. 12471: Appropriate Activities

*Age appropriate developmental abilities or milestones that typically developing children of the same age would be performing or would have achieved.*
Kansas Early Learning Document – Early Learning Standards (KSELD) & Appropriate Activities

In 2006, the Kansas State Department of Education printed the Kansas Early Learning Document, which includes Early Learning Standards for young children from birth to age five. These standards were developed by a group of early childhood professionals and other stakeholders and set appropriate expectations for what young children should know and be able to do as a result of participating in high quality early childhood program. Early learning standards help guide instructional planning by establishing the core of what should be taught, as well as providing a starting point from which specific curriculum(s) can be developed or identified. Therefore, the KSELD-ELS may also be used to help identify age appropriate activities in the initial evaluation process.

Special Education and Related Services
Special education is specially designed instruction, provided at no cost to the parents, which meets the unique needs of a child with a disability, and may include instruction conducted in their preschool classroom, home, hospitals, and/or other educational settings. Specially designed instruction means adapting, as appropriate to the needs of an individual child, the content, methodology, or delivery of instruction. Therefore, if an evaluation team determines that the only thing necessary for a child to make progress in appropriate activities is to be provided with an opportunity to experience those activities (e.g., participate in a preschool program), this would not be considered “specialized instruction” and the child would not be eligible for special education services. On the other hand, if the evaluation team determined that the child needed instruction using a specific methodology, content to be adapted, and/or that the child needed specifically focused instruction, the team would have justification of a need for special education.

The following are examples of specially designed instruction:

Instruction in sign language
Visual, written, verbal, touch prompts/cues
Modeling
Chunking, chaining
Pre-teaching
Time delay strategies
Social stories
Direct Instruction
Differential reinforcement

Related services are special services that are necessary in order for the child to benefit from the special education program. The related services most often utilized in early childhood settings include, but are not limited to: transportation, speech-language pathology services, audiology, occupational therapy, physical therapy, hearing and vision services, psychological service, social work services, medical diagnostic and evaluation services.
Collecting Assessment Information for Educational Programming

Up to this point, the main focus of the evaluation team has been to determine a child’s eligibility for special education and related services using the two-pronged test. Answers to the two-prong test are generally yes or no (Is there evidence of a disability? Is the disability impacting the child’s ability to participate and progress in appropriate activities? A second, but equally important part of the evaluation process is collecting data and information that can be utilized to develop the Present Levels of Academic Achievement and Functional Performance and to develop an IEP. Questions in this phase of the evaluation process will help the team determine “why” and “how” the child’s disability affects their participation in appropriate activities, as well as the team’s determination of “what” to do in terms of educational planning.

How/ Questions
After the evaluation team has identified that a child has a disability, and that the presence of that disability impacts the child’s participation and progress in appropriate activities, the next step is to develop hypotheses about how the disability is impacting the child. To answer “how” questions, the evaluation team seeks to explain a child’s developmental differences. The team must specifically hypothesize about where the breakdown is occurring and how it affects participation/progress. For example:

*Communication Delay

During group activities, Cindy takes a longer time than her peers to process what is being said, therefore she is unable to follow along with group discussion.

*Small Muscle Delay

Freddy holds his writing utensils with his fist, because the muscles in his hands and fingers are not strong enough to hold utensils between his thumb and fingers. Therefore he cannot participate in drawing/writing activities for extended periods of time, and is limited in the types of drawings he is able to create.

*Cognitive Delay

Limited play schemes keep Harry from playing with same age peers, thus making it difficult for him to establish friendships.

In these examples, the evaluation team looked beyond the broad category of delay to more specific skills to explain how the disability was impacting the child’s participation/progress in appropriate activities.

Assessing Strengths
The evaluation team should use a portion of its time to identify specific strengths of the child. By identifying strengths, the evaluation team has information that will potentially
be used for intervention plans. The following are examples of identified strengths that might prove useful for the IEP team in intervention planning:

<table>
<thead>
<tr>
<th>Strength</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Painting:</td>
<td>Cindy enjoys painting and is able to engage in painting activities for long periods of time.</td>
</tr>
<tr>
<td>Numeracy</td>
<td>Bill is able to count up to 28, he enjoys number games.</td>
</tr>
<tr>
<td>Agility/Balance</td>
<td>Susie is very agile, enjoys dance and movement activities.</td>
</tr>
<tr>
<td>Book Skills</td>
<td>Tommy enjoys looking at books alone and with others. He is able to recall stories and enjoys acting them out.</td>
</tr>
</tbody>
</table>

**Putting it All Together: Present Levels of Academic Achievement and Functional Performance**

Answering “how questions” and identifying individual strengths of the child will provide the evaluation team with the preliminary information needed for the educational planning process. Specifically, this information will be used to develop the Present Levels of Academic Achievement and Functional Performance (PLAAFP). Should an IEP be needed, PLAAFP information will become the cornerstone from which it is developed.

The purpose of the PLAAFP is to identify the child’s needs and establish baseline for the child’s performance in appropriate activities. Information used for the development of the PLAAFP will help prioritize the specific needs of the child from which meaningful and measurable IEP goals can be created. The assessment methods or tools used in this process will be the same methods and tools used to monitor a child’s progress towards specified IEP goals.

The challenge of the evaluation team in this phase of the evaluation is to collect data that can be stated in clear and concise terms, is free of jargon and relates specifically to a child’s performance in appropriate activities. To collect such information the team may use a variety of formal and informal measures, such as published curriculum-based assessments or criterion-referenced tests, structured observations, rating scales, rubrics, portfolio assessments, work sample analysis, language samples and checklists. Information collected using such methods will provide good baseline data to be used in the PLAAFP.

**Assessment Methods/Tools**

The previous sections provided an overview of the evaluation process outlining the three main determinations of the evaluation team:
a. Whether the child is a child with an exceptionality;
b. Whether the child needs special education and related services; and
c. The present levels of academic achievement and functional performance and educational needs of the child.

In order for the team to carry out these duties, they must match the assessment questions with the proper assessment methods/tools. Evaluation teams should not use a standard battery of tests and tools, but rather look at each case individually, carefully selecting the most efficient, effective, and valid measures from which to make their decisions.

The Kansas Special Education Process Handbook, Page 3-8, February 2008, provides a summary of the methods evaluation teams use in the collection of assessment data:

**Record Review:**

- Includes evaluations and information provided by the parents, current classroom-based assessments, information from tiny-k service providers, results of interventions on the Individual Family Service Plan (IFSP), health/medical records, records from previous evaluations, recent developmental screening results, vision and hearing screening results, reports from other agencies, portfolios, cumulative file information, curriculum guides, and other records.

Record reviews can provide a great deal of information in the assessment process. They can provide documentation of the presenting concern, establish the concern as long standing, and provide clues in the development of a hypothesis as to the cause of the concern. Record reviews can also provide information as to what has been tried in the past, the effectiveness of specific interventions, and the amount of support that was needed to help the child participate in appropriate activities. Such information may be used alone or with other data to support the existence of a disability, and possibly the need for special education and related services (e.g., the amount of support necessary).

**Interviews:**

- Includes interviews with parents, teachers, related services personnel, and other caregivers as well as with the student, if appropriate. The information gathered during the interview process may include instructional history, social history, additional medical information, learning preferences, and other data.

Interviews are a great source of information for getting a better understanding of the presenting concerns, providing a historical perspective of the concerns, and information about what has been tried in the past. Interviews can provide information about a child’s temperament, learning rate, and learning environment. They can be used as corroboration with other evidence. Interviews may also provide insight as to how the disability may be impacting the child’s ability to participate and progress in appropriate activities.
Observations:
• Includes structured observations, rating scales, ecological instruments (e.g., EBASS, TIES-II), behavioral interventions, functional analysis of behavior and instruction, anecdotal notes, rubrics, routines-based assessments, ecological assessments, and other observations conducted by parents, teachers, related services personnel, and others.

Like record reviews and interviews, observations can provide corroborating evidence of the presenting concern. In addition, observations can be used to collect information about Present Levels of Academic Achievement and Functional Performance, the effectiveness of specific intervention strategies, and learning rates. Observations can be structured in ways to establish baseline (e.g., frequency counts, duration, event sampling). Checklists and rubrics fall under the category of observation, and can also be used to create a specific score from which baseline can be established.

Teams can also use observational information as an informal measure of “significant difference”. By collecting routine observation data of typical peers, the team can compare that data against the observations of the target child. While this could not be used as the only measure of a significant developmental difference, it could be used to corroborate other more formal evidence.

Tests:
• Includes individual and group measures of ability or aptitude, performance-based assessments, norm-referenced or criterion-referenced/curriculum based achievement measures (national, state, or local), adaptive behavior scales, measures of motor function, speech and language, dynamic testing, and other tests.

Formal and informal tests provide a wide range of information. Generally speaking, formal norm-referenced tests compare how well the target child performs when compared with other children of the same age on the same types of tasks. Norm-referenced tools provide a general look at a child and may provide information from which the team can investigate further. All norm-referenced tests are standardized, that is, they are given in the same manner, with the same material, using the same directives, and scored in the same way. Some norm-referenced tests are administered directly with the child (e.g., BDI, WPPSI-R), while other norm-referenced instruments are checklists or scales that are conducted in interviews with parents, caregivers or educational staff (e.g., Adaptive Behavior Scales, Child Behavior Checklist).

In the past, evaluation teams relied heavily on norm-referenced, standardized tests in the evaluation process. Given that young children go through periods of variable and rapid development, attend for only short periods of time, and are generally more active than sedentary, such tools have limited technical adequacy in the assessment process. The National Association of School Psychologists states that “standardized assessment procedures should be used with a great deal of caution in educational decision making
because such tools are inherently less accurate and less predictive when used with young children” (NASP Position Statement, 2005).

Criterion and curriculum based assessments provide information related to how well a child can perform in relation to a specified criterion or skill identified within the curriculum. This information is most useful to establish the Present Levels of Academic Achievement and Functional Performance from which intervention plans can be established. Statements regarding how the disability is affecting the child may also be gathered through such assessments.

**Office of Special Education Programs (OSEP) Early Childhood Outcomes**

The administration of one of eight approved curriculum based assessments (listed below) during the initial evaluation process is now required by KSDE as a means of reporting early childhood outcome data to the federal government (OSEP):

- Assessment and Evaluation Programming System (AEPS)
- Carolina Curriculum
- Child Observation Record (High Scope)
- Creative Curriculum
- Hawaii Early Learning Profile (HELP)
- Individual Growth and Development Indicators (IGDIs)(Birth to 3 Years only)
- Transdisciplinary Playbased Assessment
- Work Sampling System

For detailed information on each of these assessments, please visit [http://kskits.org/ta/ECOOutcomes/CBA_matrix.pdf](http://kskits.org/ta/ECOOutcomes/CBA_matrix.pdf)

While this assessment activity is conducted simultaneously with the initial evaluation, it has a distinct and separate purpose. Outcome data is used at the federal level to examine the effectiveness of state programs serving children with disabilities from birth through age five. Therefore, IEP teams may choose to use (or not use) this information to establish eligibility and develop an appropriate IEP. Given that curriculum based assessments provide excellent baseline information related to the present levels of academic achievement and functional performance, most teams will likely choose to use this information for both purposes. If the IEP team decides to use the curriculum based assessment information as part of the evaluation, it must be indicated on the Consent for Evaluation form.

**Reviewing Assessment Information/ Making Decisions**

When the evaluation team has completed all the necessary assessments, a meeting is held to share the results among team members, which includes the parents. At this meeting the team reviews all assessment information to determine whether the child is eligible for special education services. Therefore, it is important that the information that has been
collected be presented in an integrated, meaningful and understandable way from which decisions can be made. Professionals should refrain from using jargon. Test terms, including scores, should be explained in language that is understandable to all team members.

After assessment information has been shared, the team uses the information to answer the evaluation questions;

**Prong 1: Does the student meet one of the definitions of a student with a disability?**

a. Is there evidence of a severe discrepancy between the performance of the student and his/her peers or evidence of a severe discrepancy between the student’s ability and performance in the areas of concern?

b. Is the presence of a disability substantiated by convergent data from multiple sources?

If the answer to both (a) and (b) are “yes”, then the student meets one of the definitions of a student with a disability.

**Prong 2: Does the student have an educational need that cannot be met in general education.**

a. Are the resources needed to support the student to participate and progress in appropriate activities for students of the same age beyond those available through general education or other resources?

If the answer to (a) is “yes”, then educational need has been proven.

If the answers to Prongs 1 and 2 are both “yes”, then child meets the definition of a child with a disability and is eligible for special education and related services.

**Evaluation/Eligibility Report**

Upon completion of the evaluation and determination of eligibility, the evaluation team must prepare a written report of their findings. The purpose of this report is to summarize the data collected during the evaluation, to document the eligibility determination and the basis for that determination, and to record the agreement or disagreement of team members regarding that decision. At a minimum, the evaluation/eligibility report must contain the following (KAR 91-40-10):

- Each team member must certify in writing whether the report reflects the member’s conclusion. If it does not reflect the member's conclusion, the team member may submit a separate statement presenting the member's conclusion.
• The determination of whether the child has an exceptionality
• The basis for making the determination
• The relevant behavior noted during observation of the child; the relationship of that behavior to the child’s academic functioning
• Educationally relevant medical findings (if any)
• The determination of whether there is a severe discrepancy between achievement and ability that is not correctable without special education and related services
• The determination of the team concerning the effects of environmental, cultural, or economic disadvantage

Regardless of the decision, the district must provide written notification of the team’s decision of eligibility to the parents. If the child is found to be eligible, the written notice can be part of the Notice of Consent for Services/Placement form. It is important to remember, however, consent for placement and services cannot be made until an IEP is written.

Summary

The initial evaluation is an important activity and should be conducted using best practices. Assessment methods and tools should be selected based on the unique needs of individual children, provide all the necessary information from which to base future decisions, and be conducted in a manner that includes and is respectful to families. Evaluation teams using this guidance will be in a position to provide the best possible services to young children and families.

Bibliography


## Regular Education Preschool Teacher at the IEP Meeting

(Revised 10/12/07)

<table>
<thead>
<tr>
<th>If a child with a disability is enrolled in a...</th>
<th>Is Designee Needed?</th>
<th>If yes, then who will fill that role?</th>
</tr>
</thead>
<tbody>
<tr>
<td>LEA operated regular education preschool.</td>
<td>Yes</td>
<td>The child’s regular education preschool teacher.  This could include a 4 year-old at-risk program or Even Start program, etc., operated by the LEA.</td>
</tr>
<tr>
<td>LEA operated regular education kindergarten.</td>
<td>Yes</td>
<td>The child’s regular education kindergarten teacher.</td>
</tr>
<tr>
<td>Regular education preschool operated by the LEA and transition into kindergarten.</td>
<td>Yes</td>
<td>The child’s current regular ed teacher and/or the anticipated kindergarten teacher.</td>
</tr>
<tr>
<td><strong>Reverse Mainstream</strong> operated by LEA. Child is not participating in a regular preschool during the term of IEP.</td>
<td>No</td>
<td>The school may invite a regular ed teacher; if dually certified or holds an EC unified license (EC and ECSE) the child’s special education teacher can act as both (provided there is not a regular ed teacher).</td>
</tr>
<tr>
<td><strong>Reverse Mainstream</strong> operated by LEA – Child is not in regular education preschool, but is transitioning into kindergarten.</td>
<td>Yes</td>
<td>The child’s anticipated kindergarten teacher or kindergarten teacher from child’s home school.</td>
</tr>
<tr>
<td>Kindergarten age but not in any regular education kindergarten and not participating in regular education kindergarten during the term of the IEP.</td>
<td>No</td>
<td>The school may invite a regular ed teacher; if the child’s special education teacher is dual certified or holds an EC unified license (ECSE and EC/Elem Ed) can act as both (provided there is not a regular ed teacher).</td>
</tr>
<tr>
<td><strong>Early Childhood Special Education Setting Only</strong> and will continue in that setting during the term of the IEP.</td>
<td>No</td>
<td>The school may invite a regular ed teacher; if the child’s special education teacher is dual certified or holds an EC unified license (EC and ECSE) can sign as both (provided there is not a regular ed teacher).</td>
</tr>
<tr>
<td><strong>Early Childhood Special Education Setting Only</strong> and will transition into kindergarten during the term of the IEP.</td>
<td>Yes</td>
<td>The child’s anticipated kindergarten teacher or kindergarten teacher from child’s home school.</td>
</tr>
<tr>
<td>Community-Based Preschool Setting.</td>
<td>Yes</td>
<td>The teacher of the child who meets the community-based program requirements shall be invited. If the teacher does not attend the school shall designate attendance by a teacher qualified to teach children without disabilities of the same age.</td>
</tr>
<tr>
<td>Home Setting Only (includes home child care).</td>
<td>No</td>
<td>There is no regular education teacher (OK for parent to invite child care provider).</td>
</tr>
<tr>
<td>Child Care Center (no specified educational component).</td>
<td>No</td>
<td>There is no regular education teacher (OK for parent to invite child care provider).</td>
</tr>
</tbody>
</table>