**Vermilion Association for Special Education**

**Intellectual Disability Entrance Criteria**



**State Definition**

The child exhibits significantly sub-average general intelligence functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, that adversely affects a child’s educational performance.

**Cooperative Definition**

Intellectual disability refers to significantly below average general intellectual functioning existing concurrently with deficits in academic achievement and adaptive behavior, and manifested during the developmental period.

**Cooperative Eligibility Criteria**

**STEP 1: Identification of Disability**

To be identified as having a disability of Intellectual Disability, the following criteria must be met:

Y N Documentation of significantly delayed intellectual functioning (2.0 standard deviations or more below the mean; for

initial Intellectual Disability referral, two measures of cognitive ability must have been attempted by a school psychologist)

Y N Documentation of significant deficits in academic achievement

Y N Evidence of deficits in two or more areas of adaptive behavior:

 \_\_ Communication \_\_ Health and safety

 \_\_ Social skills \_\_ Functional academics

 \_\_ Work \_\_ Home living

\_\_ Leisure \_\_ Self-direction

 \_\_ Community use \_\_ Self-care

**STEP 2: Determination of Adverse Effect on Educational Performance**

Y N Documentation of adverse effect on educational performance

**STEP 3: Determination of Need for Special Education Services**

Y N The student requires specialized instruction to address educational needs.

**STEP 4: Eligibility**

Y N The student is entitled to special education services.

**DEFINITIONS AND EXAMPLES**

***Significant delay in intellectual functioning***
 Significant delay refers to performance that is approximately two or more standard deviations below the population mean on

individually administered standardized intelligence tests. These intelligence tests should measure, as far as possible, general

cognitive ability, rather than one limited facet of ability such as receptive vocabulary or spatial-analytic skills only. Although a

student with a mental impairment may show a preferred learning mode or a relative strength in one or more processing areas,

the overall cognitive profile suggests relatively evenly developed skill levels.

***Deficits in academic achievement***

The student is achieving below grade and age expectancies in the areas of reading decoding, reading comprehension, math computation, math reasoning, and written expression. Skill levels tend to be relatively the same across all areas.

Skill levels are in the same range as the student’s intellectual abilities.

***Adaptive behavior***

 Adaptive behavior refers to the effectiveness with which individuals meet the standards of personal independence and social

responsibility expected of individuals of their age and cultural group. Adaptive levels, based on a standardized assessment,

are in the same range as the student’s intellectual and academic abilities.

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| **DOMAIN** | **RELEVANT** | **EXISTING INFORMATION ABOUT THE CHILD** | **ADDITIONAL EVALUATION PROCEDURES TO CONSIDER** | **SOURCES FROM WHICH DATA WILL BE OBTAINED** |
| **Yes** | **No** |
| **Academic Achievement**Current or past academic achievement data pertinent to current educationalperformance. |  |  |  | * \*Review of data of academic skills (district assessment, state assessment, classroom performance products)
* Teacher interviews
* Student interviews
* Play-based assessment
* Standardized achievement testing (WIAT, KTEA, Bracken, YCAT, WJ)
* Curriculum-based measurement (STAR, AIMSweb, DIBELS, FISH)
 |  School Psychologist |
| **Functional Performance**Current or past functional performance data pertinent to current functional performance. |  |  |  | * \*Adaptive behavior assessments (Vineland-II, ABAS-II, DP-3)
* Record review (grades, attendance, discipline, special education records, early intervention reports, etc.)
* Teacher interview
* Parent interview
* Student interview
* Observation in multiple environments
* Functional behavior assessment
* Transition assessments
* Play-based assessment
* Independent functioning assessment (FISH)
* Executive functioning assessment
* Attention/concentration assessment
* Behavior rating scales
 | School Social Worker, School Psychologist |
| **Cognitive Functioning**Data regarding cognitive ability, how the child takes in information, understands information and expresses information. |  |  |  | * \*Standardized cognitive testing (verbal, nonverbal, or play-based assessment, WISC, WPPSI, WAIS, WNV, DAS, WJ, SB, C-TONI) to assess thinking/cognitive integration skills
* Review of records
 | School Psychologist |
| **Communication Status**Information regarding communicative abilities (language, articulation, voice, fluency) affecting educational performance. |  |  |  | * Teacher interview
* Observations
* Pragmatic language assessment (Test of Pragmatic Language, 2nd Edition, CASL, Functional Communication Profile, Rossetti)
* Receptive/expressive language assessment (CASL, CEFL, Clinical Evaluation of Language Fundamentals, 5th Edition, E0WPVT, Functional Communication Profile, OWLS, PPVT-4, PLS, TELD, TOLD, Test of Auditory Comprehension of Language, 4th Edition, Test of Semantic Skills, Primary, Rossetti)
* Play-based assessment
* Assistive technology assessment (Test of Aided Communication Symbol Performance)
 | Speech/Language Pathologist |
| **Health**Current or past medical difficulties affecting educational performance. |  |  |  | * \*Parent interview to obtain health history, including current health status (diagnosis, medications, therapies)
* Medical review
* Medical consultation with outside providers
 | School Nurse, School Social Worker |
| **Hearing/Vision**Auditory/visual problems that would interfere with testing or education performance. Dates and results of last hearing/visual test. |  |  |  | * \*Vision screening
* \*Hearing screening
* Audiological evaluation if needed
 | School Nurse, Audiologist, Visual Impairment Instructor, Deaf/Hard of Hearing Instructor |
| **Motor/Sensory Abilities**Fine and gross motor coordination difficulties, functional mobility, orstrength and endurance issues affecting educational performance. |  |  |  | * Teacher interview
* Parent interview
* School observation
* Consultation with outside providers
* Motor assessment (fine and gross motor)
* Sensory assessment (Sensory Profile)
* Play-based assessment
* Assistive technology assessment
 | Occupational Therapist, Physical Therapist |
| **Social/Emotional Status**Information regarding how the environment affects educational performance (life history, adaptive behavior, independent function, personal and social responsibility, cultural background). |  |  |  | * \*Social Developmental Study
* \*Adaptive behavior assessments (Vineland, ABAS-II, DP-3)
* Record review (grades, attendance, discipline)
* Teacher interview
* Parent interview
* Student interview
* Consultation with outside providers
* Observation in multiple environments
* Play-based assessment
* Behavior rating scales
 | School Social Worker, School Psychologist |