Assessing Students with Special Needs

Effie P. Kritikos | James A. McLoughlin | Rena B. Lewis

EIGHTH EDITION



ASSESSING STUDENTS WITH SPECIAL NEEDS

Eighth Edition

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In honor of our parents
Kathleen and Peter McLoughlin
Margaret and Willard Bishopp
Aglaia and Tom Papoutsis

And with love to our spouses
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PREFACE

Assessment is at the center of all good teaching, and this book is designed to provide a clear, comprehensive guide to the assessment of students with mild disabilities. This book will give you an understanding of the assessment process as well as the practical skills needed to assess students with special needs successfully so that you can teach them well. To structure the process, we offer an assessment question model, and we have developed the idea of the Individualized Assessment Plan (IAP). Our basis for the assessment questions and suggested procedures is a combination of best professional practices and legal mandates. This approach allows you sufficient flexibility to explore the areas and types of assessment in which you are particularly interested. In accordance with our belief that educators need useful information, we maintain a strong educational orientation toward assessment.

THE EIGHTH EDITION

This is the eighth edition of Assessing Students with Special Needs, and it reflects many changes in professional thought and practice in both special education and general education. Among the topics new to or enhanced in this edition are updated research and assessment tools in each chapter. This already successful book in previous editions builds on a quality book from the last edition and takes it to a new level.

NEW TO THIS EDITION

- Learning objectives are introduced at the beginning of each chapter and summarized at the end of every chapter.
- Breakpoint practices allow students to check their understanding.
- Diversity is addressed in each chapter as related to chapter context.

- Adaptive behavior skills and intellectual performance have been separated into different chapters.
- In addition, oral language and English-language learners have been separated into chapters in order to take a deeper dive into content areas. These in-depth areas of content allow for more detail than competing books.
- Assessments and research articles have been updated.
 In addition, examples have been added and figures renewed. Legal information has also been updated.

The strengths of this book include the comprehensive nature of the chapter content. This edition presents reviews of dozens of tests, research articles, figures, tables, and legislation in each chapter. This feature allows students to be up to date with current practices and responsibilities.

An in-depth

authentic case study allows for application of the chapter material. These assessment-to-instruction learning materials allow students to practice learned concepts before entering the classroom. In addition, several short videos are provided to reinforce material throughout the chapters. Multimodal methodology allows for tapping into student learning styles for optimum learning. These features enrich the textbook and provide superior, robust chapters as compared to textbooks by the competition.

Part I, Introduction to Special Education Assessment, includes information on the purposes of assessment, laws and regulations governing assessment, the team approach to assessment, the organization of the assessment process using the Assessment Question Model, and the steps in assessment. Embracing parents and families as a focal point in the assessment process is new to Part I and provides a framework for this text.

Part II, Skills for Special Educators, contains chapters on selecting the tools for assessment, administration, and scoring of standardized tests, and design and use of informal assessment techniques and procedures. All chapters have been updated and revised to increase coverage of techniques for evaluating student progress in classroom instruction.

Part III, Assessment for Special Education Eligibility, centers on the areas most relevant to eligibility assessment: intellectual performance, adaptive behavior, learning disabilities, and classroom behavior and behavioral disorders. In this update, adaptive behavior assessment has its own chapter dedicated to this assessment area.

Part IV, Assessment of Academic Skills, focuses on the assessment of academic, English-language learners, reading, mathematics, writing, and oral language. In this edition, diversity is highlighted in the entire text, with a separate chapter concentrating on English-language learners.

Part V, Important Considerations, provides information on the topics of assessment during the early childhood years and assessment for transition education planning.

This edition also features new tests and assessment procedures, many of which are revised versions of measures described in earlier editions. Approximately 50 new published measures are included. Among the new instruments discussed are:

- Woodcock-Johnson IV Tests of Achievement
- Kaufman Test of Educational Achievement—Third Edition
- TerraNova SUPERA
- Wechsler Intelligence Scale for Children—Fifth Edition
- Wechsler Intelligence Scale for Children—Fifth Edition (Spanish)
- Woodcock-Johnson IV Tests of Cognitive Abilities
- Diagnostic Adaptive Behavior Scale
- Gray Oral Reading Tests—Fifth Edition
- Woodcock Reading Mastery Tests—Third Edition
- Analytical Reading Inventory—Tenth Edition
- Test of Word Reading Efficiency
- Informal Reading Inventory—Eighth Edition
- Oral and Written Language Scales-II
- Test of Early Written Language—3
- Test of Written Spelling—5

- Woodcock-Muñoz Language Survey—Revised Normative Update
- BRIGANCE[®] Diagnostic Inventory of Early Development—III
- BRIGANCE® Comprehensive Inventory of Basic Skills–II
- BRIGANCE® Transition Skills Inventory

FEATURES

Our goal in this book is to provide you with a foundation for understanding the assessment process and with the skills necessary for carrying out meaningful assessments. The chief strength of this text remains its balanced coverage of formal eligibility assessment and the assessment practices that teachers carry out in classrooms. Critiques of the strengths and weaknesses of formal tests and informal procedures help you to select the tools that will supply the information you need.

We have chosen to speak about popular assessment procedures as well as less well-known, but distinctive, measures. On the one hand, popular instruments are discussed in some depth, not necessarily because they are always the best techniques, but because they reflect current practice. On the other hand, information about less well-known tests and techniques is provided to acquaint you with promising procedures. With this comprehensive coverage, you will find out not only what is currently being done (and how well) but also what needs to be changed and how to do that.

In addition, we provide the connection between gathering assessment information and using it to make decisions. There are regular reminders to consider assessment data in relation to the classroom setting and suggestions for making sense out of all the information gathered. This process is described in the context of a team approach to educational assessment but with particular emphasis on the role of the special education teacher.

To make our book a more practical classroom resource, we have included several useful *Assessment in Action* student profiles, sample test profiles, checklists, and illustrations. Also, information boxes throughout the chapters summarize the important characteristics of tests discussed in depth. We have tried to give you a feel for the procedures you will use in assessment and to critique and relate them to one another so that you can better understand how to use them. Each chapter begins with a brief topical outline of its contents and ends with a summary of the important points in the chapter.

SUPPLEMENTAL MATERIALS FOR STUDENTS AND INSTRUCTORS

Online Instructor's Manual with Test Questions 0134254600/9780134254609

Each chapter of the Online Instructor's Manual with Test Questions contains the following: chapter overview, chapter outline, glossary terms, class discussion questions, resources, and suggested activities. In addition, the manual contains test questions (multiple choice, true/false, short answer, and essay) as well as a set of instructional aids that can be used in teaching an assessment course to prospective special educators.

Online PowerPoint Presentations 0134254708/9780134254708

The lecture presentations (in PowerPoint) prepared for the eighth edition highlight the key concepts and content of each chapter.

Instructor Resource Center

To access both the online Instructor's Manual with Test Questions and the Online PowerPoint Presentations, go to www.pearsonhighered.com, click on the Instructor's Support button, and then go to the Download Supplements section. Here you will be able to log in or complete a one-time registration for a user name and password. The Instructor Resource Center opens the door to a variety of print and media resources in downloadable, digital format. As a registered faculty member, you can log in directly to premium online products and download resource files directly to your computer.

AUTHORS AND CONTRIBUTORS FOR THE EIGHTH EDITION

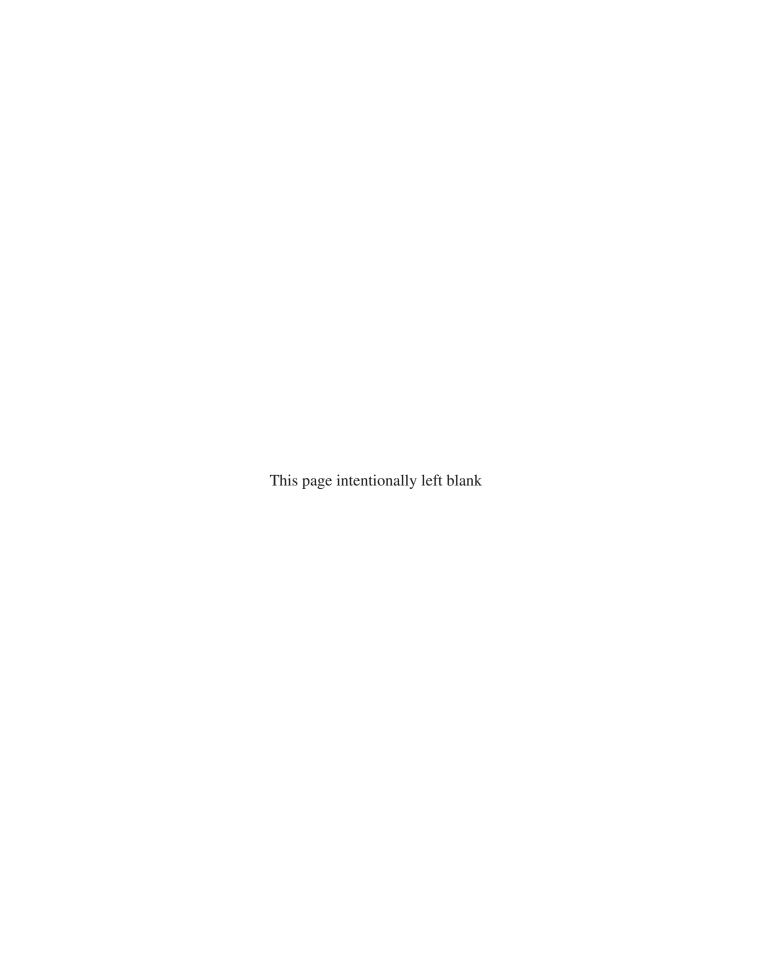
Revisions for the eighth edition were completed primarily by Rena B. Lewis, one of the co-authors of the first four editions and primary author of the fifth and sixth. The contributions of James A. McLoughlin to previous editions continue to add to the strength of this book.

Three contributors also participated in the development of the seventh edition, and we thank them for their willingness to share their perspectives and expertise. They are Eleanor W. Lynch, author of Chapter 3, Including Parents and Families in the Assessment Process; Laura J. Hall, author of Chapter 16, Early Childhood Assessment; and Bonnie R. Kraemer, author of Chapter 17, Assessment for Transition Education and Planning.

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Note: Every effort has been made to provide accurate and current Internet information in this book. However, the Internet and information posted on it are constantly changing, so it is inevitable that some of the Internet addresses listed in this textbook will change.



1

Special Education Assessment

LEARNING OUTCOMES

After reading this chapter, you will be able to:

- Define assessment
- Provide examples of how assessments in the present differ from assessments in the past.
- List the three major purposes of assessment.
- Discuss proper assessment procedures (outlined by IDEA or another organization).
- Compare and contrast the difference between IEPs and 504 plans for general and special education assessment.
- Name members of the collaboration team involved in special education assessment.
- Explain the major components and framework of special education assessment.

KEY TERMS

assessment individualized education program (IEP) individual transition plan (ITP) individual family service plan (IFSP) prereferral strategies

formal assessment standardized tests norm-referenced tests informal assessment mild disabilities

ssessment* is the process of gathering information for the purpose of making a decision. Everyone engages in assessment. As human beings, we all gather information, sift and weigh that information, and make decisions based on our judgments and conclusions. When we wake up in the morning, we look outdoors to assess the weather. When we meet friends, loved ones, or acquaintances, we study their demeanor to assess their moods. Before we make a purchase, we weigh the merits of various products. Before we enter the voting booth, we investigate the worthiness of political candidates. And, as teachers, we assess our students.

Educational assessment is an integral part of the instructional process. Teachers observe their students as they enter the classroom, take their seats, and begin (or do not promptly begin) to work. Teachers ask questions and evaluate students' answers. They monitor students' behavior in the classroom and in the other environments of the school.

Sometimes assessment is more structured and systematic. Teachers give quizzes and exams. They assign a written paper or project, and they evaluate the results. Teachers also take part in the school-, district-, and/or statewide administration of standardized tests to evaluate students' progress in mastering the curriculum.

Although assessment is an important skill for all teachers, it is particularly important for special educators—teachers who serve students with disabilities. General education is designed to serve typical learners; special education, in contrast, is designed to meet the individual needs of students with school performance difficulties. The instructional plans for students with disabilities must be highly individualized, which means that special education teachers require precise information about their students' educational strengths and needs. Special education assessment is at the core of this process.

WHAT IS ASSESSMENT?

Special education assessment is the assessment of students to determine strengths and needs. In addition, it is used to determine student eligibility for services, strategies to support students and families, and progress with respect to goals. It can be defined as the systematic process of gathering educationally relevant information to make legal

^{*}Words appearing in boldface in the text are defined in the Glossary.

and instructional decisions about the provision of special services. There are many important aspects to this definition. First, assessment is an ongoing process, not a one-time event. Assessments take place when students experience difficulty meeting the demands of the general education curriculum and are referred for consideration for special education services. Once students are found eligible for special education services, assessment continues in the special education classroom and other school environments where the special education teacher and others gather information related to the everyday concerns of instruction.

Second, special education assessment is systematic. In the early stages of the assessment process, an interdisciplinary team meets to plan strategies for the collection of useful information. Professionals—such as special educators, psychologists, and speech-language clinicians—work together to ensure that sufficient information is gathered to answer important questions. Classroom assessment of students with disabilities is also systematic. Teachers regularly monitor students' progress toward important instructional goals and, when necessary, modify instructional strategies.

Third, special education assessment focuses on the collection of educationally relevant information. School performance is a major concern, and teachers and other professionals evaluate students' progress in all pertinent areas of the school curriculum. In addition to academic achievement, professionals are interested in students' language, social, and behavioral skills. Students' learning abilities and strategies for learning are concerns, as are the characteristics of the learning environments in which students are asked to participate. All of these factors contribute to a better understanding of students' strengths and weaknesses and the types of support they may require to succeed in school.

Fourth, special education assessment is purposeful. Information is collected in order to make important decisions about schooling for students with special needs. Those decisions concern issues such as determining whether students meet legal criteria for special education services, selecting the most appropriate program and placement for students, setting instructional goals, choosing instructional methods and

materials, and monitoring student progress and the effectiveness of instructional approaches.

Special education assessment extends beyond the school years because infants, preschoolers, and young adults with disabilities are served by special education. In the preschool years, assessment focuses on development in important skill areas such as language, cognition, social-emotional behavior, and sensory and motor skills. In young adulthood, the concern is successful transition from the world of school into the world of work, higher education, careers, and other areas of adult life.

The term assessment is sometimes confused with two other terms: testing and diagnosis. Tests are one type of assessment technique, and, as such, they are one of the many strategies used to gather information about students with special needs. Assessment is much broader; it is the entire data collection process and the decisions that result from that process. Testing is only one of the activities that takes place in assessment, just as the use of textbooks or any other instructional tool is only one small part of the teaching process.

Diagnosis is a term borrowed from the medical profession. In a medical context, the cause of a condition is identified or diagnosed so that appropriate treatment can be offered. The diagnosis typically results in a label such as "autism," and that label is linked to treatment. In contrast, educational assessment is not designed to establish causes, assign labels to students, or determine educational treatments based on labels. When students are identified as having disabilities, that designation is given only to document eligibility for special services. Furthermore, special instructional programs are developed for individual students based on their strengths and weaknesses in school learning, not on labels for global syndromes or conditions. In other words, special educators would conclude from an assessment that a student has needs in the area of reading, rather than labeling the student with dyslexia.

ASSESSMENT PAST AND PRESENT

Educational assessment practices for students with disabilities have been shaped by a variety of disciplines, forces, and trends. Changes in education,

psychology, and medicine, and in the beliefs that society holds regarding the educational process continue to influence how schools gather assessment information to make decisions about the students they serve.

While the measurement of personality and other psychological factors was a topic of study in the late 1800s, the work of Alfred Binet (1857–1911) and others led to the major development of assessment techniques in the early 1900s. Assessments were created to meet a variety of needs, including the screening of students in public schools and the evaluation of military personnel and potential employees. These early efforts became the prototypes for many current group and individual tests in psychology and education.

Controversy over the nature of intelligence has affected the assessment practices used with students with disabilities. One debate centers on whether intelligence is one entity or whether it is made up of a set of factors. Some tests attempt to address a variety of factors that comprise intelligence; these factors are then analyzed to identify individual strengths and weaknesses within the global set of abilities that make up intellectual performance.

Another cause for discussion is the question of whether intelligence is modifiable. Most professionals consider intelligence a product of the interaction between people and their environment and, therefore, subject to change. Educational assessment of students with disabilities now incorporates procedures that analyze the environment as well as the person's abilities.

The field of medicine has had a profound effect on the development of educational assessment procedures. Many of the pioneers in special education were physicians who identified and described children with various types of disabilities and began the search for the causes and treatments of those disabilities. Some of these searches were successful, such as the development of vaccines to prevent diseases like polio. Others continue today in areas such as gene therapy and the use of sophisticated medical technologies to study the brain functioning of persons with dyslexia and attention-deficit/hyperactivity disorders.

For many years, educators were hampered by the use of a medical model in the assessment of students with disabilities. Students were diagnosed with a condition (e.g., intellectual disabilities or learning disabilities) and an educational treatment was prescribed based upon knowledge about that condition rather than the characteristics of the individual student. In some cases, the condition was assumed to be permanent; in others (most notably, learning disabilities), educators sought to cure the disability through educational remediation. Considerable progress has been made toward developing an assessment model that is more relevant to educational concerns. While identification of a specific disability is still part of current practice, the focus in assessment is the study of the individual student, his or her strengths and weaknesses, and the ways in which the instructional environment can be adapted to address the student's educational needs.

Other fields have also contributed to the assessment practices in special education. Tests of perception allow the study of how information is processed through vision, hearing, and other senses. Psychoeducational test batteries combine the analysis of psychological and educational factors. Applications of behavioral psychology have resulted in the use of several systems for behavioral observations of students in their school environments, including a special interest in the curriculum and the instructional tasks with which students interact. Other forms of informal assessment, like interviewing, have been borrowed and adapted from fields such as anthropology and sociology.

With the end of World War II and the baby boom in the 1950s, services for students with disabilities grew tremendously, with a subsequent growth in assessment procedures, particularly tests. Tests designed for administration to individual students were developed in all academic areas—and in language, social skills, and vocational skills—with the help of commercial publishers. In addition, special educators and other professionals created informal procedures directly related to classroom needs. Criterion-referenced testing played a major role in linking assessment and instructional programming.

Unfortunately, many misuses and abuses of assessment procedures accompanied this growth. Invalid and unreliable measures were used,

sometimes administered by untrained individuals. Some assessments were too narrow; some discriminated on the basis of the student's language, cultural background, or gender. Results were used inappropriately, with students erroneously labeled with a disability. The rights of students with disabilities and of their parents to due process under law were violated (Birnbaum, 2006).

In 1975, the passage of PL 94-142, the Education for All Handicapped Children Act, exerted a strong, positive influence on the content and procedures used in the assessment of students with disabilities. The individualized education program (IEP) required a statement of (1) the child's current level of educational performance; (2) annual goals, including short-term objectives; (3) specific special education and related services to be provided; (4) the degree to which a child was able to participate in the general curriculum; (5) the dates for the beginning of services and the anticipated length the services would be in effect; and (6) appropriate objective criteria and evaluation procedures and schedules for determining how well the short-term objectives were being attained (Murdick, Gartin, & Crabtree, 2002).

In 1990, through the Individuals with Disabilities Education Act (IDEA), also known as PL 101-476, transition services were more clearly defined so that services to children between the ages of 18 and 21 could be further described and applied. An individual transition plan (ITP) was also required, with discussion involving school-to-adult transition beginning by age 14 and no later than age 16. In addition, the student's IEP was to contain a statement of the transition services needed before the student left school.

In 1991, IDEA or PL 102-119 was reauthorized in order to reauthorize Part H, the section that deals with young children and funding for their services. Federal funds were allocated to help states educate infants, toddlers, preschoolers, children, and youth with disabilities (Murdick et al., 2002). Rather than require an IEP for children between birth and 3 years of age, an individual family service plan (IFSP) was required. Professionals were to support the family and the child in determining its needs and deciding how those needs could best be met. The IFSP included information about the child's status, family

information, outcomes, early intervention services, dates, duration of services, service coordinator(s), and transition information (Murdick et al., 2002).

The changes introduced in PL 94-142 are maintained and extended throughout the years by new versions such as PL 108-446, the Individuals with Disabilities Education Improvement Act of 2004 (IDEA 2004). First and foremost, this law guarantees that students with disabilities shall receive a free, appropriate, public education in the least restrictive educational environment. In the area of assessment, the law mandates a set of due process procedures to protect students and their parents and detailed guidelines to correct past problems. A team must adequately assess students with disabilities, and an IEP must be developed. In addition, state departments of education must comply with federal requirements to receive funding for special education programming.

IDEA 2004 places special emphasis on assessment of students' involvement with and progress in the general education curriculum. These areas must be addressed in the development of IEPs as well as how students will participate in state and district assessments of school achievement. The IEP team must also consider a range of special factors, including positive behavioral interventions and supports for students with behavioral problems, the language needs of students who are not proficient in English, and any requirements students might have for assistive technology devices and services.

Trends within the fields of education and special education have also influenced the development of assessment techniques and procedures. In the early years of special education, assessment focused solely on students and their deficits. That approach gave way to increased emphasis on the school curriculum and the specific instructional tasks with which students were experiencing difficulty. At present, the approach is more balanced. Both the student and the educational environment are of interest, particularly the ways in which interactions occur between individuals and

school demands. In addition, influences from educational theories such as constructivism have contributed to special educators' perspectives on assessment. In the constructivist view, students construct their own knowledge by building on the prior knowledge they bring with them to the learning situation (Bell, 2010; Bransford, Brown, & Cocking, 2000; Cegelka, 1995a).

One challenge that special education continues to face is the development of appropriate procedures to assess culturally and linguistically diverse students who are suspected of having a disability (Benson, 2003; Waitoller & Artiles, 2013). Unsolved problems in this area have contributed to overrepresentation of some groups in special education programs and underrepresentation of others (Artiles & Trent, 1994; Losen & Orfield, 2002; Patton, 1998; Sullivan, 2011). This issue is likely to persist as the population of the United States becomes more diverse in the next decades.

The movement to educate students with disabilities in more inclusive settings has created a greater need for both general and special education teachers to have tools to assess these students in multiple environments, including the general education classroom. Educators of students with disabilities are held accountable for ongoing evaluation of learning. They need to monitor student progress frequently, without the necessity of administering standardized tests. Such tests are too costly in terms of both time and money, and their results do not translate directly to classroom interventions. Instead, educators have turned to curriculum-based assessments, that is, procedures and techniques that evaluate student growth in relation to the current classroom curriculum. Curriculum-based approaches such as criterion-referenced assessment, curriculum-based measurement, and portfolio assessment produce results that assist in the development of instructional goals, objectives, and procedures.

Major educational reforms in the United States are making profound changes in the assessment and evaluation of all students, including those with disabilities. By the mid-1990s, most states had adopted sets of academic standards and begun to link assessment of educational outcomes

to these standards (American Federation of Teachers, 1996; Olson, 2006). In this evaluation model, results of standards-based assessments are used as the basis for judging student performance, deciding whether schools and teachers are functioning appropriately, and even forcing fundamental changes in teaching methods and the structure of schools.

The standards movement became even more prominent with passage of President George W. Bush's education initiative, "No Child Left Behind." According to Bush (2001), this initiative has four major goals:

- Increase Accountability for Student Performance: States, districts, and schools that improve achievement will be rewarded. Failure will be sanctioned. Parents will know how well their child is learning, and that schools will be held accountable for their effectiveness with annual state reading and math assessments in grades 3–8.
- Focus on What Works: Federal dollars will be spent on effective, research-based programs and practices. Funds will be targeted to improve schools and enhance teacher quality.
- Reduce Bureaucracy and Increase Flexibility: Additional flexibility will be provided to states and school districts, and flexible funding will be increased at the local level.
- *Empower Parents:* Parents will have more information about the quality of their child's school. Students in persistently low-performing schools will be given choice.

As states, districts, and schools face increasing pressure to provide comparative data about the scholastic abilities of American students, the issues surrounding inclusion of students with disabilities in high-stakes testing become a major concern. Federal special education laws require that students with disabilities participate in state and local assessments of academic achievement alongside their general education peers. Although it is important to ensure that students with disabilities are not excluded, at the same time, appropriate test accommodation and modifications as well as alternative measures must be provided to guarantee valid and reliable evaluation.

In summary, special educational assessment today can be described in the following ways:

- Special education assessment, like special education instruction, is individualized. It is tailored to the needs of each student with disabilities.
- Assessment data are used to make decisions about the eligibility of students for special education services and about the types of services that are provided. Thus, decisions are both legal and instructional.
- Assessment focuses on educationally relevant information so that an appropriate IEP can be developed, implemented, and monitored.
- Assessment also focuses on the student's involvement with and progress in the general education curriculum.
- The student is not the only subject of assessment. The learning environment is also evaluated as well as the student's interactions with classroom tasks.
- A variety of procedures are used in assessment.
 Assessment is not limited to the administration of standardized tests.
- Assessment is characterized by a team approach.
 Parents and both special and general educators are important members of that team.
- Professionals strive for nonbiased assessment of all students, particularly those from culturally and linguistically diverse groups.
- Assessment does not stop when instruction starts. Instructional programs are continuously monitored and evaluated.

PURPOSES OF ASSESSMENT

Special education assessment has several purposes because it plays a role in each phase of programming for students with disabilities. From the first indication of a learning problem, special education teachers and others gather information to aid in decision making. In general, this information is used to document eligibility for special education services and/or adaptations of the general education curriculum and to plan and monitor the effectiveness of an IEP. The main purposes of

assessment are directly related to the steps in the special education assessment process: identification and referral, determination of eligibility, program planning, and program implementation and evaluation. These steps are described briefly in the paragraphs that follow. A more detailed discussion can be found in Chapter 2.

Identification and Referral

Identification of students who may have disabilities is the first purpose of assessment. Two identification procedures are used: screening and prereferral strategies. Screening is a large-scale data collection activity used to quickly identify those students out of the entire school population who may be in need of further study. For example, most schools administer vision and hearing screening tests at regular intervals throughout the grades. When potential problems are detected, students are referred for a more in-depth evaluation.

Prereferral strategies, in contrast, are aimed at solving the school performance problems of individual students. Prereferral interventions begin when a general education teacher consults with others at the school site about a student experiencing difficulty in school. Information is gathered about the student's performance in areas of concern and about the instructional environment. In most cases, the prereferral team will develop a set of adaptations and modifications in an attempt to meet the student's academic and behavioral needs. These interventions are implemented, and data are collected to determine their effectiveness. If the results suggest a persistent learning problem, the student may be referred for consideration for special education services.

Determination of Eligibility

Second, special education assessment is performed to determine whether a student meets eligibility criteria for special education services. Eligibility is based on two interrelated criteria: the student must have a school performance problem, and that problem must be related to a disability. Each state develops its own eligibility requirements based upon federal laws, and individual districts

may set additional guidelines for assessment. Eligibility assessment is much more thorough than assessment for screening or prereferral. Also, it is individualized: the assessment team determines what types of information it needs to gather for each individual student. Then, students are assessed to determine their present levels of performance in areas related to the suspected disability. Typically, this involves investigation of the student's school skills, intellectual performance, hearing and vision, social and behavioral status, and language abilities. Information is also collected about the student's school history, current classroom performance, and the characteristics of the learning environment. Special attention is paid to the student's progress in the general education curriculum and the types of support needed to maximize the student's probability of success in the general education classroom.

Program Planning

Third, educational assessment data are used to plan the IEP. After the student's educational needs are identified and prioritized, annual goals are developed. The IEP team decides what types of special education and related services the student will receive and what kinds of supplementary aids and services will be needed to maintain the student within the general education classroom, if at all possible. The IEP indicates who will accomplish the goals and objectives, the settings in which services will take place, and the amount of time services will require. The plan also outlines how the student's progress will be monitored and how parents will be informed about their child's progress.

Program Implementation and Evaluation

The fourth reason for assessment is to monitor the student's progress in the educational program. Information is gathered by teachers (and others, as appropriate) about the effects of instruction and other types of interventions. This type of assessment is usually performed at frequent intervals, perhaps weekly or even daily. A variety of procedures are used, although the most common are informal techniques such as observation of student behavior, review of student work, and direct

measurement of performance in skill areas of interest. At this stage in the process, assessment and instruction blend together, with assessment data providing the information needed to guide instructional modifications.

The final purpose of special education assessment is program evaluation. Federal special education laws require that the IEP of all students with disabilities be reviewed periodically. School staff and parents examine the program and decide if special education services should be continued as is, modified, or discontinued. In addition, the student's eligibility for special education services is typically reviewed every 3 years. These types of program evaluation are designed to ensure that students with disabilities receive appropriate interventions and that those interventions continue only as long as they are required.

TYPES OF ASSESSMENT PROCEDURES

Many types of assessment procedures are available, and they vary along several dimensions, including the amount of professional expertise

required for their use. In general, special education assessment techniques can be divided into two major types: formal and informal strategies. Both are employed in all phases of assessment, although formal strategies are often considered more useful for gathering information for eligibility decisions and informal strategies are more useful for classroom instructional decisions.

Formal assessment strategies are structured assessment procedures with specific guidelines for administration, scoring, and interpretation of results. The most common example, standardized tests, sometimes referred to as norm-referenced tests, are designed to compare the performance of one individual to that of a normative group. Thus, their use is limited to students who are very similar to the group used in developing the test.

Norm-referenced tests may be designed for group or individual administration and are available for most academic subjects, intellectual performance, and other areas of learning. Directions for administration, scoring, and interpretation of these measures are usually very explicit. As a result, professionals require training before they can be considered skilled in the use of a specific test. Test results are expressed in quantitative scores such as standard scores and percentile ranks, and as Chapter 5 explains, the test manual provides information about factors such as the development of the test, the standardization sample, and quality of the test as a measurement tool. Results of norm-referenced tests are used in a number of ways, including documentation of eligibility for special education and identification of general strengths and weaknesses in school learning.

Tests can be designed for administration to a group of individuals or to one person. Group procedures often penalize students with disabilities because they may require students to read, follow directions independently, and work under timed conditions. Because students with disabilities often lack these skills, results of group tests tend to underestimate their abilities. However, group tests are the norm in general education because they are more efficient and require much less time to administer. When students with disabilities participate in such assessments, accommodations are often necessary.

Tests that are individually administered are preferred in special education. The professional administering the test (usually called the examiner or tester) establishes rapport with the student and makes sure he or she understands the directions for the test tasks. Skills are measured separately, so that it is possible to separate out a student's performance in reading from his or her skills or knowledge in other areas such as mathematics, science, or social studies. In many cases, students respond orally, so that poor writing skills are not penalized when writing is not the object of assessment. In addition, professionals can carefully observe students as they interact with test tasks to gain further insight into their strengths, weaknesses, and general work behaviors.

The Assessment Tool Table of Contents at the start of this book lists each of the individual and group tests (and other published measures) discussed in depth in this text. Informal assessment strategies are also included in the Index. Inclusion of a test or strategy should not be considered an endorsement: some of the measures that we have described, though popular, do not meet recommended standards for technical adequacy. Test descriptions throughout this book include information about technical adequacy as well as the training required by examiners. In some cases, administration is limited to members of certain professional groups. For example, most states restrict the use of individual aptitude measures to licensed school psychologists.

Informal assessment procedures are used in educational assessments to determine current levels of performance, document student progress, and direct changes in the instructional program. A distinction is often made between the formal measures just described and these less formal techniques.

Informal procedures are usually less structured or are structured differently from standardized tests. Rather than administering a formal test, a teacher might observe a student with behavior problems, give the class a test on the spelling words studied that week, or assign mathematics homework. Like most informal measures, these are designed by the teacher rather than by a commercial publisher. Also, their purpose is to gather information directly related to instruction. There is an element of subjectivity in the design

of informal measures as well as in their administration, scoring (if they are scored), and interpretation. In fact, interpretation is often quite difficult because of a lack of guidelines.

Although informal procedures lack the kinds of scores yielded by standardized tests, their results are relevant to instruction because they can be expressed in instructional terms. Informal assessment tools vary in how directly they measure student performance and instructional conditions. Some involve the student directly, whereas others rely on informants such as teachers and parents. Observation, curriculum-based assessments, and other informal procedures are discussed in detail in Chapter 6, the chapter on classroom assessment.

Because informal assessment strategies have a clear connection to the curriculum, the potential usefulness of the results they produce is high. However, it is important to point out that just because an assessment technique is informal does not mean that it is appropriate for all students with disabilities. Informal measures may contain barriers like those in group, formal tests. For example, a classroom quiz might be timed or a math assignment might require reading and writing skills. As is the case with formal measures, accommodations are often necessary.

504 PLANS, IEPS, AND STUDENTS WITH SPECIAL NEEDS

Special educational assessment involves students with disabilities. As defined by federal law, these disabilities include:

intellectual disability, a hearing impairment (including deafness), a speech or language impairment, a visual impairment (including blindness), a serious emotional disturbance (hereinafter referred to in this part as "emotional disturbance"), an orthopedic impairment, autism, traumatic brain injury, other health impairment; a specific learning disability, deaf-blindness, or multiple disabilities who, by reason thereof, needs special education and related services. (IDEA 2004 Final Regulations, §300.8(a)(l))

Students qualifying for services are entitled to receive a free and appropriate education from special educators and other professionals.

IDEA 2004, like its 1997 predecessor, expands the definition of "child with a disability" to include young children ages 3 through 9 who are "experiencing developmental delays . . . and who, by reason thereof, need special education and related services" (IDEA 2004, Part A, Section 602(3)(B)). This allows young children to receive special services without the need to label them as having a specific disability. The law requires that delays be documented in one or more of these areas: physical, cognitive, communication, social or emotional, or adaptive development.

Another group of students benefiting from federal protections are those identified as having attention-deficit/hyperactivity disorders (ADHD). This disorder involves issues with attention and behaviors of impulsivity and overactivity. A student with ADHD could be distractible, often moving around. A student with attention-deficit disorder (ADD) has issues of attention without impulsivity and overactivity. The student with ADD appears inattentive. The U.S. Department of Education ruled in 1991 that students with ADHD are eligible for services under Section 504 of the Rehabilitation Act of 1973. The regulations for IDEA 2004 include both ADHD and ADD in the list of conditions covered under the "other health impairment" disability category. According to the federal definition, other health impairment "means having limited strength, vitality or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment" (IDEA 2004 Final Regulations, §300.8(c)(9), emphasis added). This limitation may be due to a variety of health problems, including both attention-deficit disorder and attention-deficit/ hyperactivity disorder. It is important that students with ADHD or ADD who need a 504 plan are provided this plan. This is different from an IEP because a 504 plan is not special education, whereas an IEP is. When a student qualifies for a 504 plan, accommodations are made in the classroom. This plan is required under civil rights law. The student does not meet a special education classification but requires accommodations.

This book focuses on educational assessment of students with mild disabilities. Mild disabilities include intellectual disabilities, emotional disturbance, speech-language impairments, and learning disabilities. Because their disabilities are mild, these students are often members of general education classrooms and receive special education services on a part-time basis. As Table 1–1 indicates, federal laws recognize the need for special education services for students with disabilities in the aforementioned areas. Students with specific learning disabilities comprise the largest group of all students with disabilities, followed

TABLE 1–1 Mild Disabilities

Intellectual Disability

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. (IDEA 2004 Final Regulations, §300.8(c)(6))

Emotional Disturbance

A condition exhibiting one or more of the following characteristics over a long period of time, to a marked degree, that adversely affect 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.
- (E) A tendency to develop physical symptoms or fears associated with personal or school problems.

Emotional disturbance includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance (IDEA 2004 Final Regulations, §300.8(c)(4))

Specific Learning Disabilities

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 the imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. . . . Specific learning disability does not include learning problems that are primarily the result of visual, hearing, or motor disabilities, of mental retardation, of emotional disturbance, or of environmental, cultural, or economic disadvantage. (IDEA 2004 Final Regulations, §300.8(c)(10))

by students with speech-language impairments, students with autism, and students with intellectual disabilities (National Center for Educational Statistics, 2015).

From an educational perspective, students with mild disabilities share many common psychological, academic, and social-behavioral problems that require assessment. Students with attention-deficit/hyperactivity disorder also share these characteristics. The educational assessment strategies described in this book apply to these types of students. Many of the procedures are also useful for students with other types of disabilities; however, educational assessment for students with severe disabilities and those with sensory and physical disabilities requires special considerations beyond the scope of this text.

This book is primarily concerned with schoolaged students with classroom-related learning problems. However, procedures for the assessment of preschool children and their families are described in Chapter 16 and those for the assessment of adolescents and young adults in transition programs in Chapter 17.

COLLABORATION AND THE TEAM APPROACH IN SPECIAL EDUCATION ASSESSMENT

Important educational decisions about students with disabilities are made by teams rather than by a single individual. The team approach brings together individuals from different perspectives who contribute their expertise to the decisionmaking process. The team may be composed of the student's parents and professionals representing general education, special education, psychology, speech and language disorders, medicine, and other areas as needed. Each team member gathers data about the student and interprets them from his or her perspective, sharing the data with others on the team. The team then analyzes all contributions, including those of the student's parents, in an attempt to make the most appropriate decision.

The team approach is not new to special education, although it has gained impetus in recent

years. Federal laws such as the Individuals with Disabilities Education Act and its amendments explicitly require that teams rather than individuals make the following decisions:

- 1. Evaluation of the eligibility of students for special education and related services;
- 2. Formulation of IEPs:
- 3. Evaluation and modification of IEPs; and
- 4. Periodic review of the need for special education and related services.

The membership of educational decision-making teams varies. Different purposes require different numbers of team members and the representation of different disciplines. For example, the team that assesses a student for eligibility for special services is likely to have more members than the team responsible for formulating the IEP for the same student. The needs of the student also influence team membership. A student with several severe disabilities is likely to require a larger team representing more disciplines than a student with a mild disability.

Federal laws require that team decisions take into consideration several areas of student functioning, if those areas are pertinent to the educational needs of a specific student. Table 1–2 lists several possible areas of concern and the team members who are the primary sources of information for each area. Although certain team members take major responsibility for assessment in certain areas, any team member may provide additional information.

This book is written from the perspective of one member of the team, the special educator. Although many of the assessment procedures described here can be used by other professionals, the special educator is the team member who focuses on the needs of students with disabilities. Having the dual responsibilities of assessment and instruction, the special educator is in a unique position to maintain an educational focus in the special education assessment process.

School Personnel

General and special education teachers who are involved directly with the student on a day-today basis are necessary team members. Teachers

TABLE 1–2 Primary Sources of Information about Student Functioning

TEAM MEMBER			TY	PE OF INFOR	MATION		
	Health	Social and Emotional Status	General Ability	School Performance	Communicative Status	Motor Skills	Transition Factors
Educators		*		*	*		*
Parents	*	*			*	*	*
Students		*		*			*
Psychologists		*	*	*			
Speech-Language Pathologists					*		
Medical Personnel	*					*	
Counselors and Social Workers		*					
Transition Specialists							*
Motor Skills Specialists						*	*

are able to provide information on all aspects of student development, especially academic performance and social and emotional status.

General education teachers contribute valuable information about students' social skills in dealing with their peers. They are also the major source of information about the instructional programs and procedures used in their classroom and have firsthand knowledge about the student's response to those programs and procedures. Their assessment procedures often consist of group-administered achievement tests, informal tests and inventories, classroom observations, and portfolios. Consequently, they can describe how well the student with a disability is progressing in the general education curriculum compared to others in the classroom. These types of information are particularly useful in determining the kinds of adaptations and accommodations the student will need to succeed in the regular classroom environment.

Special educators offer a somewhat different perspective. Their assessment procedures are generally more individualized; they gather formal and informal data not only about academic skills but also about performance in areas such as language and behavior. This information, when added to that of general educators, helps the team to make decisions about the types of services needed by students with disabilities.

Special education teachers are often members of school-based teams that collaborate with and provide consultation to classroom teachers. In this role, special educators may perform classroom observations and work with the team to develop possible strategies to address learning and behavioral problems in the general education environment. When students are referred for consideration for special education services, special educators play a major role in the assessment process, serving as important members of the team, with responsibility for gathering information about the student's current levels of performance in a number of areas.

School administrators on educational decision-making teams may include building principals, directors of special education, or other supervisory personnel. Building principals or vice principals are often included to enlist their cooperation in the education of students with disabilities at the school site and to encourage their support of special education and inclusion programs. Special education administrators and other supervisory personnel are able to share their knowledge of the

special education programming options available in the school district or division.

Families and Students

The intent of federal special education laws is to encourage the meaningful participation of parents of students with disabilities and the students themselves, when appropriate, in the educational decision-making process. Parents and other family members have much to contribute to the team. They are knowledgeable about their child's behavior and have acted as the child's teacher as part of their caregiving role.

Like educators, parents provide information on many aspects of the student's current performance. However, parents and other family members have a somewhat different perspective because their observations take place in the home, neighborhood, and community. Another important contribution of parents is information about their student's past educational experiences, health history, and progress through the stages of development. Parents can complete questionnaires about their children or be interviewed by school personnel. They can be observed at home while interacting with their child, or they can be asked to gather informal observational data about their child in the home environment. When parents become full participants in the team process, they contribute to better educational decisions and are more likely to support their child's instructional program.

Students themselves are also members of some educational teams, particularly in the higher grades. Students can contribute information about all aspects of school performance as well as their feelings, attitudes, goals, and aspirations for the future. Students assist in the data collection process in many ways. In addition to participating in assessment procedures such as formal tests and informal inventories, they may answer interview questions, complete rating scales, or answer questions on a questionnaire.

School Support Personnel

Psychologists, speech-language pathologists, and assistive technology specialists often support general and special educators, and they are

frequently members of educational decisionmaking teams. During assessment, school psychologists gather data to help determine whether students are eligible for special education programs. In this role, the school psychologist is usually the professional responsible for administering and interpreting results of formal tests to determine the general intelligence level.

Assessment reports prepared by the psychologist address concerns about the student's level of general ability, the status of specific skills involved in learning, and emotional and behavioral status. When combined with results of academic reports from teachers, psychological reports allow the team to compare a student's actual classroom performance with expected levels of achievement. In planning the educational program, psychologists can assist in establishing reasonable goals and provide information about the student's specific learning abilities.

Speech-language pathologists are involved in the assessment and instruction of students with speech and language disorders. They are responsible for evaluating the communication skills of students, referring students to other specialists as needed, providing direct instructional services, and consulting with other professionals working with those students.

The assessment procedures used by speechlanguage professionals are both formal and informal; they frequently solicit input from educators about a student's classroom speech and language performance. Special educators may screen students for speech and language problems, and then refer students with suspected problems to speech-language pathologists for more in-depth evaluation. Speech-language pathologists provide speech-language diagnoses. Furthermore, knowledge of the communicative status of a student helps the team understand academic and behavioral problems with speech or language components. In planning the IEP, speech-language pathologists specify goals for the student and indicate how others can support those goals. For some students with disabilities, speech-language instruction is the only special service received; for others, it is one of several services.

Assistive technology (AT) specialists are relatively new members of educational teams.

Their role involves the use of assistive technology to increase the student's ability to participate in the educational program. IDEA 2004 specifically requires that the IEP team "consider whether the child needs assistive technology devices and services" (IDEA 2004 Final Regulations, §300.324(a)(2)(v)). The AT specialist assists by evaluating the current functioning levels of the student and the ways in which devices such as adapted computers, communication devices, and aids for students with visual and hearing impairments might improve current performance.

Medical Personnel

Medical information about the student is obtained from the student's physician, the school nurse, and other medical specialists. This information may include results of vision and hearing screenings, the student's health history, as well as his or her current physical status.

All students should be screened for possible visual and hearing impairments. This screening is generally carried out by the school nurse (or the school health aide), who then refers students with possible problems to the appropriate specialists. The results of screening and any subsequent evaluations are reported to the team by the school

nurse. Of particular interest to the team is how vision and hearing problems affect assessment performance and subsequent programming.

The school nurse or physician may also report information about any relevant health problems, conditions, or diseases. Pediatricians, neurologists, psychiatrists, and other physicians may be involved. Also of interest is whether the student is currently receiving any medical treatment, such as drug therapy. All medical information should be reported so that the educational implications are clear. The team must consider data from the assessment of classroom performance and other areas of functioning in light of any medical problems.

Social Workers and Counselors

Social workers and school counselors provide information about the social and emotional status of the student. In the schools, social workers assist by preparing a social or developmental history of the student conducting group and individual counseling with the child and his or her family, working with problems in a student's living situation that affect adjustment in school, and mobilizing school and community resources.

The assessment procedures used by social workers include interviews and home visits. Data gathered regarding a student's background and home environment could help the team interpret other assessment data. Social workers may also assist team members, particularly parents, in identifying goals and strategies for action at home and in the community.

Counselors also help in the area of emotional development. Counseling services, according to federal special education laws, may be provided by a variety of professionals such as social workers, psychologists, school counselors, and vocational rehabilitation counselors. Counselors use both formal and informal procedures to gather information about the emotional and social development of the student and sometimes that of other family members. Counselors can add important information to the student profile. For instance, data from counseling may indicate the need for specific goals or may shape decisions about placement or instructional strategies.

Transition Specialists

Current federal laws require that the IEPs for older students contain a description of the transition services needed by the students to meet postsecondary goals "related to training, education, employment, and, where appropriate, independent living skills" (IDEA 2004 Final Regulations, §300.320(b)(1)). Professionals who contribute to assessment and instruction in this area include vocational rehabilitation counselors; special education teachers at the secondary level who provide instruction in areas related to transition; and persons with special training in the assessment, instruction, and coordination skills needed for the provision of transition services. While transition specialists focus on this area in assessment, other team members—such as teachers, parents, and students themselves—can also contribute valuable information.

Motor Skills Specialists

Information about the motor development of the student may be obtained from adaptive physical education teachers, physical therapists, and occupational therapists. In addition, the school nurse or a physician, such as an orthopedic surgeon, may also provide information about motor skills.

The adaptive physical education teacher is involved with the instruction of students who require special physical education programs, and he or she can provide information about the student's current motor abilities. Teachers, psychologists, and others may also have input about the student's gross and fine motor skills. In some cases, motor skill problems may be related to other kinds of difficulties, such as poor handwriting. Adaptive physical education teachers specify goals for the student and assist team members in programming for motor needs.

Physical and occupational therapists also contribute information. Some authors distinguish between physical therapists, who are concerned with gross motor development, and occupational therapists, who work with fine motor development. According to the American Physical

Therapy Association (2013), physical therapists assist individuals with limited movement and performance of activities due to medical or health problems. In contrast, occupational therapists provide assistance to help students in body functions and body structures involved in everyday life activities (American Occupational Therapy Association, 2011). Both kinds of therapists use specialized assessment procedures; their data may be supplemented by results of interviews or experiences of other team members.

Teachers can report on classroom demands for motor skills and their observations of the student's strengths and weaknesses. Parents may also have useful data. The IEP contains goals related to motor development, if necessary, and allows the therapists to suggest strategies that are useful in the development of better motor coordination or realistic transition goals.

Other Personnel

Occasionally, team members other than those just described are needed to present important information about the student. Tutors or paraprofessional aides who work closely with the student may provide insight based on their experiences. Members of the community, such as employers or work supervisors, may be able to give the team a better understanding of realistic vocational goals and needed transition services. Other family members, such as grandparents, can sometimes supplement input from the parents and student.

In summary, the purpose of the team approach is to assemble all the information necessary for educational decision making through members' combined skills, knowledge, experience, and expertise. Teams are viewed as being more objective than individuals because they represent multiple viewpoints. Teams differ in size depending on the types of decisions under consideration. However, as a general rule, teams should be kept as small as possible so that parents feel comfortable making contributions. In some cases, such as some IEP teams, only the parents and educators may participate. In others, there is a need for wider representation because several different types of information are required.

A FRAMEWORK FOR SPECIAL EDUCATION ASSESSMENT

One of the best ways to ensure effective practice in special education assessment is to use a systematic structure or framework to guide the process of collecting data, analyzing results, and making important educational decisions. In this book, the framework is based on the steps in the assessment process and the important assessment questions that must be addressed in each step. As Figure 1–1 illustrates, the four steps in the assessment process are related to five major assessment questions.

Is There a School Performance Problem?

This major question is asked in the first step of the assessment process—identification of potential problems and possible referral for in-depth special education assessment. Students with possible school problems are identified through routine screening procedures or through teacher referral. The student's general education teacher may bring the student to the attention of a school-based team in an attempt to find solutions for the student's learning problems. Several types of assessment data can be collected, including school history data (e.g., past grades and results of tests of achievement); information from parents about family background and the student's medical, developmental, and educational history; current

grades and classroom work samples; and reports of current teachers about the types of instructional approaches used and their success.

Classroom assessment procedures can also be used to determine whether a learning problem exists. Systematic behavioral observations may identify a pattern of events affecting the student's achievement. Teachers may see a pattern of difficulty when they systematically analyze classroom activities and subsequent student responses. The general education curriculum itself serves as the framework for assessment as the student's proficiency in component skills and performance at different levels are examined.

Based on this information, teachers may make instructional and environmental modifications and note an immediate change in the student's school performance. In this way, any student with temporary or situational learning problems will be identified, and further concern and assessment can be avoided. Students who do not respond to these efforts and whose learning difficulties are clearly documented are then referred for in-depth assessment. The outcome of the questioning is the identification of general problem areas, an assessment of their approximate severity, and a clear indication of the need for further assessment.

Is the School Performance Problem Related to a Disability?

After a student has been formally referred for consideration for special education services, an assessment team forms to determine the student's eligibility. Students with learning problems qualify for special education only if they meet the criteria for a disability as set forth in federal, state, and local guidelines. Although these criteria differ somewhat from one location to another, two major requirements must be met: the student has a school performance problem and that problem is related to a disability. According to federal special education laws, the disability must have an adverse effect on school performance. The presence of a disability alone, without an accompanying school problem, is not sufficient. Likewise, students with school performance problems that are not related to disabilities are not eligible for special education.

Steps in Assessment	Assessment Questions
Identification and Referral	Is there a school performance problem?
Determination of Eligibility	Is the school performance problem related to a disability?
	What are the student's levels of academic achievement and strengths and weaknesses in school learning?
	What are the student's levels of intellectual performance and adaptive behavior?
	What are the student's levels of development of specific learning abilities and learning strategies?
	What is the status of classroom behavior and social-emotional development?
Program Planning	What are the student's educational needs?
	What is the level of achievement and strengths and weaknesses inReading?Mathematics?Written and oral language?
	What is relationship of learning problems to classroom demands?
	What educational program is required to meet those needs?
	What are the annual goals?
	What special factors must be considered?
	What types of special education and related services are needed?
	What types of supplementary aids, services, modifications, and supports are needed? What types of testing accommodations?
	What transition services are needed?
Program Implementation	How effective is the educational program?
and Monitoring	Is the student making adequate progress in the educational program?
	How does the educational program need to be modified?
	Does the student continue to require special education services?

FIGURE 1–1 Framework for Special Education Assessment

Students with all types of disabilities show school performance problems. These problems are documented with referral information, results of academic achievement tests, and data concerning the student's ability to conform to classroom behavioral requirements. All students are also assessed to determine general aptitude for learning. In the case of most mild disabilities, students show average or above-average intellectual performance. However, in the case of intellectual disabilities, intellectual performance as well as adaptive behavior skills are below average. A learning disability is documented by poor performance in one or more specific learning abilities or learning strategies. Students identified as being emotionally disturbed must meet criteria related to classroom behavior, interpersonal relationships, and social-emotional development. To gather the information necessary to make these types of decisions, four assessment questions are asked.

What Are the Student's Levels of Academic Achievement and Strengths and Weaknesses in School Learning?

The information needed here is an individualized assessment of the student's current school achievement. Although there is already strong indication of possible learning problems, additional data are gathered to describe the student's strengths and weaknesses. Norm-referenced achievement tests. administered individually, indicate the student's overall achievement level in relationship to other students of the same age or in the same grade. These results help to determine whether a serious problem exists. Other procedures, such as interviews, classroom observations, and analysis of student work samples, help to describe the student's current skill levels. An academic assessment should identify global areas of need for further assessment and indicate the more severe problem areas.

What Are the Student's Levels of Intellectual Performance and Adaptive Behavior?

These two areas are assessed to determine general aptitude for learning. Intellectual functioning involves a composite of skills related to thinking, problem solving, and general academic aptitude. Adaptive behavior involves the ability to cope

with environments other than the school classroom. Included are self-help, communication, and social and interpersonal skills. Normative data are needed in each area. The team must determine how students perform in comparison with their peers and whether that performance falls within average ranges. This information must be related to academic and other performance data before final judgments are made.

Norm-referenced tests, administered individually, provide information about intellectual performance. Both formal and informal procedures are appropriate for assessing adaptive behavior skills. Parents, teachers, and others familiar with the student may be interviewed or asked to complete adaptive behavior rating scales. School and home observations and examination of cultural practices contribute to a clearer understanding of the student's mastery of functional skills. Results of these assessments indicate whether students are markedly different from peers in global cognitive skills and adaptive behavior. This information is useful in making decisions about the presence of mild disabilities and in designing the IEP.

What Are the Student's Levels of Development of Specific Learning Abilities and Learning Strategies?

Specific learning abilities are generally considered to underlie academic skills and other areas of development. Examples are specific abilities such as attention, perception, and memory. Learning strategies, in contrast, relate to the ways in which students use their learning abilities in the completion of school tasks. Students with learning disabilities often experience difficulty not only in one or more specific abilities but also in strategies for learning.

There are several formal procedures for the evaluation of specific learning abilities. These include both norm-referenced tests and standardized rating forms for teachers. Learning strategies, in contrast, are typically studied with less formal measures and procedures. Examples are observations, checklists and rating scales, and interviews of teachers and students themselves. Results of these assessments are used to determine whether

students have significant problems in specific learning abilities or strategies. This information may shed light on problems the student is encountering in academic and behavioral areas; it is also necessary for documentation of the disability of learning disabilities.

What Is the Status of Classroom Behavior and Social-Emotional Development?

To answer this question, the team assesses the student's classroom behavior, including conduct problems, interactions with teachers and peers, and the influences of the physical and instructional environments on the student's ability to meet expectations. Of interest is whether the student currently has the necessary social and behavioral skills to engage in learning activities in a general education classroom setting.

Many types of procedures are used in the assessment of behavioral status. For example, results of norm-referenced rating scales completed by parents, teachers, and others are used to identify which behaviors at school and in other environments are considered inappropriate for the student's age, grade, and gender. Systematic behavioral observations are used to study specific behaviors; particular attention is paid to the conditions under which the problem behavior occurs and the consequences of the behavior. Other procedures include sociograms, analyzing interactions between the student and the teacher, and examining any relationships between behavior and medical and psychological considerations. Results of these assessments identify problems in the area of behavior and contribute to decisions about whether the student meets criteria for disabilities such as emotional disturbance. In addition, information about specific behavioral problems is useful for planning intervention programs.

What Are the Student's Educational Needs?

Once it has been established that the student is likely to meet the criteria for special education services, questions about educational needs should be considered. Two major assessment questions are asked. The first relates to the basic school skills: reading, mathematics, written language, and oral language. Students with disabilities frequently have difficulties in one or more of these areas, and their problems with skill acquisition impede the learning of other school subjects, such as science and history. The second major question related to the student's educational needs asks about the relationship between school performance problems and the demands of the student's classroom or classrooms.

What Are the Student's Educational Needs in Reading? Mathematics? Written and Oral Language?

The needed information in each skill area is the same: (a) an indication of the current level of performance and whether achievement is below average compared to other students; (b) specific strengths and weaknesses; and (c) the relationship of skills in one area to skills in other areas, such as the influence of reading upon mathematics. Both formal and informal devices and procedures are needed to gather this information.

Three main areas of concern in assessment of reading achievement are the student's ability to recognize or decode words, to comprehend what is read, and to use reading as a tool to learn new material. Formal tests provide information about the student's overall level of reading performance in relation to peers; these tests also help pinpoint skill areas that are possible strengths or potential weaknesses for the student. These skill areas are then studied in more detail using informal procedures such as criterion-referenced tests, informal reading inventories, teacher-made checklists, and analyses of reading errors and reading materials.

In mathematics, the areas of concern in the assessment of educational needs are computation, problem solving, and application skills. Like reading, both formal and informal techniques are used. For example, assessment may begin with a diagnostic mathematics test. Informal procedures such as classroom observations and analyses of student work samples are then used to gather additional information about areas of need.

Spelling, handwriting, and composition skills are the major concerns in the study of written language. Assessment often begins with a broad-based

test of writing skills that includes collection of a student-writing sample. Rating scales may be used to evaluate handwriting, formal tests to evaluate spelling skills, and informal procedures to gain more information about the student's ability to write connected text. As with other academic skills, both formal and informal procedures contribute to the team's understanding of the student's educational needs.

In oral language, the major areas to be assessed relate to the student's ability to understand and express the four dimensions of oral language: phonology, syntax, semantics, and pragmatics. These dimensions are concerned with the sound system of language, language rules, the meaningful aspects of language, and the use of language for communication. Also of interest with regard to students who speak languages other than English is their proficiency in English and in the other language spoken. Again, both formal and informal measures are used in the assessment of educational needs. In many cases, assessment duties in oral language are shared with speech-language pathologists and bilingual educators.

The outcome of the assessment of educational needs is a clear statement about the student's levels of performance, strengths, and weaknesses in each important area. When reviewing results, it is important to examine how task demands influence performance. For example, a student might do well in written computation but have difficulty with mental computation. The learning strategies of the student become more apparent when performance varies based on the characteristics of the task.

It is also important to ask how problems in one area might influence performance in another area. For example, poor oral reading skills might be related to poor spelling skills. Relationships such as this may suggest a common underlying factor and lead to a plan for an instructional intervention.

The results of academic assessments should be considered in relation to the results of assessment for specific disabilities. Information about the student's general aptitude for learning, specific learning abilities and strategies, and classroom behavior and social-emotional development may aid the analysis of his or her educational needs, thereby facilitating the program planning process. For example, classroom conduct problems interfere with all types of learning, and interventions for students with these needs may focus on different skills than interventions for students whose difficulties are primarily academic. The educational plan for a student who does not complete assignments despite having the necessary skills, for instance, might address work completion first, rather than acquisition of new skills.

Medical, social, and cultural factors may also affect student performance. Among the medical considerations are the student's general health status, vision, hearing, and motor development. Important social factors may include characteristics of the family constellation (e.g., primary caregivers in the home, the number and age of siblings), emphasis on literacy at home, and provisions for doing homework. Cultural factors include linguistic differences, forms of communication, and cultural perceptions of the value of school learning.

What Is the Relationship of Learning Problems to Classroom Demands?

To obtain a clear picture of educational needs, the student's current school performance must be considered within the context of classroom demands: the physical environment of the classroom and the tasks, methods, and materials used in instruction. Task analysis is a useful technique to determine what aspects of a learning task are creating difficulty for the student. If the student lacks prerequisite skills, these can become part of instruction. Sometimes it is also necessary to modify the task itself; for example, allowing students to answer questions orally rather than in writing may dramatically improve their performance on a science test.

The classroom learning environment can be studied through observations, interviews, and analysis of instructional materials. Possible questions the assessment team might ask are:

1. What are the features of instructional materials? What prerequisite skills are required? What objectives do the materials address? Is the pace of instruction appropriate? Is the format clear? Do these materials match the learning needs of the student?

- 2. What instructional procedures are used by the teacher? Does the teacher use modeling, prompting, and reinforcement? Are the methods of instruction appropriate for the needs of the student?
- 3. Are the physical surroundings (lighting, heating, work space, noise level) conducive to learning? Will the physical environment facilitate the student's learning rather than impede it?

Poor student performance in one or more skill areas may be directly related to inappropriate classroom conditions. If this is the case, then the problem lies with the environment, not with the student. Environmental modifications become a priority, and these data can guide the changes.

The assessment team can make better decisions when planning the instructional program by noting interrelationships between the different types of information gathered and integrating the findings of the various members of the assessment team. This helps to put the results of the assessment in context. For example, although poor vision may partially explain a reading disability, both corrective lenses and an instructional program in reading may be necessary. Or a problem in academic achievement may be considered less extreme if the student's general ability to learn is low, if he or she is inattentive in class, if the tasks in the classroom have an inappropriate response requirement, or if the student has a hearing loss. Noting interrelationships produces a clearer understanding of the student's educational needs.

What Educational Program Is Required to Meet Those Needs?

The team of concerned professionals and the student's parents (as well as the student in some cases) is now ready to develop an educational plan. For students with disabilities, there are several areas to consider. Requirements for the IEP, spelled out in federal laws such as IDEA 2004, form the basis for this group of assessment questions.

What Are the Annual Goals?

The first step in development of the plan is a description of the student's most pressing

educational needs and identification of priority goals. First, the student's current levels of performance in important areas are described. Second, the team determines which problems identified in the assessment process constitute the most important educational needs. To do this, it is necessary to consider the student's age and grade in school, the concerns and priorities of the parents and those of the student, and the family's culture and value system. For example, if a junior in high school is concerned about preparing for a career, instruction in basic phonics skills may not be considered as important as learning to read job-related vocabulary words.

Next, the team sets annual goals for the student. These goals shape the direction of the student's program and become the guidelines for evaluation of its effectiveness. In the language of IDEA 2004, the IEP must contain "a statement of measurable annual goals, including academic and functional goals" (IDEA 2004, §614(d)(i)(II)). Benchmarks or short-term objectives may then be identified for each goal. Although no longer required by federal law, these objectives represent the intermediate steps the student must complete to reach the annual goals; as such, they guide teachers and others responsible for implementing the program.

What Special Factors Must Be Considered?

In developing the educational plan, the team must consider several special factors when identifying goals and making decisions about services. These factors are:

- The needs of students with behavioral problems, including the need for positive behavioral interventions and supports;
- The language needs of students with limited proficiency in English;
- The need for instruction in Braille for students who are blind or visually impaired;
- The communication needs of all students, including those who are deaf or hard of hearing; and
- The need for assistive technology devices and services for all students.

These factors focus on important dimensions, although it is unlikely that all will apply to any one individual.

What Types of Special Education and Related Services Are Needed?

The next step involves making decisions about the special education and related services needed to implement the educational program. A range of special education services is available, depending on the severity of the student's needs. These services include full-time placement in a special classroom, part-time services outside the general education classroom from a resource or itinerant teacher, and instruction provided in the general education classrooms by special education personnel. The last two options are the most common because the majority of students with disabilities spend at least part of the school day in the general education environment.

Related services are other types of services required by the student in order to benefit from special education. Included in this category are speech-language pathology and audiology services, physical and occupational therapy, social work services, and counseling.

What Types of Supplementary Aids, Services, Modifications, and Supports Are Needed?

Federal special education law requires that the IEP specify the ways in which the educational environment is to be modified to support the participation of the student with disabilities. The intent is to make the educational environment, including the general education classroom, more accessible to students with disabilities. Supplementary aids and services are defined as "aids, services, and other supports that are provided in regular education classes, other education-related settings, and in extracurricular and nonacademic settings to enable children with disabilities to be educated with nondisabled children to the maximum extent appropriate" (IDEA 2004 Final Regulations, §300.42).

Thus, the team must consider how best to include the student in the general education program and develop strategies to make that inclusion successful. Examples of some of the types of supports that might be provided are consultation to the general education teacher, special learning materials, in-class instruction delivered by special education personnel, and

modification of assignments or tests by the classroom teacher.

What Types of Accommodations Are Needed for Testing?

IDEA 2004 requires that students with disabilities participate in state and district assessments of academic achievement administered to general education students. In developing the IEP, the team decides what types of modifications are needed, if any, in the administration of these tests. The team can also determine that these assessments are not appropriate for a particular student; in that case, an alternative assessment procedure must be described.

What Transition Services Are Needed?

According to IDEA 2004, transition services are "a coordinated set of activities for a child with a disability that is designed to be within a resultsoriented process, . . . to facilitate movement from school to post-school activities" (§602(34) (A)). When the student reaches the age of 16, the IEP must contain appropriate postsecondary goals and a description of the transition services needed to attain those goals. The types of services to be provided may include "(i) Instruction; (ii) Related services; (iii) Community experiences; (iv) The development of employment and other post-school adult living objectives; and (v) If appropriate, acquisition of daily living skills and provision of a functional vocational evaluation" (IDEA 2004 Final Regulations, §300.43(a)(2)).

How Effective Is the Educational Program?

Once the IEP is implemented, its evaluation begins. The question here concerns the effectiveness of the educational program. Teachers and others responsible for implementation collect data as they provide services. At periodic intervals, parents receive progress reports, and the IEP is reviewed most typically on an annual basis. Every few years, the student's need for special education services is reconsidered. All of these actions require assessment information, and all are directed toward one goal—modification of the

program, if necessary. Three assessment questions relate to the evaluation process.

Is the Student Making Adequate Progress in the Educational Program?

Assessment of the student's progress begins when instruction begins. Teachers observe the student during instruction, analyze the responses the student makes, and evaluate performance on classroom learning tasks, assignments, and tests. These data are collected to gauge the effectiveness of instructional strategies. If the student is not progressing at the expected rate, the instructional approach must be modified.

The IEP for each student contains not only annual goals but also a plan for measuring progress toward those goals. The assessment procedures outlined in that plan may be limited to the curriculum-based measures most often used by teachers or may include other more formal measures. In any event, teachers must inform parents of their child's progress on a regular basis. IDEA 2004 requires that parents receive progress reports at least as often as report cards are issued for general education students.

How Does the Educational Program Need to Be Modified?

Under current law, the IEP team must evaluate the educational plan at least once each year and modify it as needed. Prior to the IEP meeting, assessment information is collected in order to describe the student's current level of performance in each annual goal area. The team reviews the student's progress and discusses the effectiveness of the instructional program. Then a decision is made about whether the program should continue and, if so, how it should be modified. Typical modifications are a revised set of annual goals and changes in the types of services and supports provided.

Does the Student Continue to Require Special Education Services?

Every 3 years, or more often if necessary, the student's eligibility for special education services must be reevaluated. This process may require the

collection of assessment data about the student's disability if the team believes such information is necessary. The purpose of this evaluation is to ensure that special education services are not provided when they are no longer needed—and that students who continue to require assistance from special education will receive that assistance.

In this textbook, students with mild disabilities are the focus, although both formal and informal assessment procedures and strategies can be used with all students. The assessment process is implemented by a team of professionals, with the special educator playing a central role. Educational assessment questions are used to structure this process (as well as this textbook). That is, they guide the choice of assessment procedures and the ultimate use of the information that is gathered.

Assessment in Action

Meet Sandy

Sandy is 10 years old and in the fifth grade. She was referred for special education because of poor academic performance throughout her school years. Sandy is in your classroom, and you have identified that she has problems processing information and paying attention to directions. You have attempted prereferral strategies in the classroom, and she still exhibits difficulties. Sandy's mother has left you a message with questions regarding the evaluation process, including the paperwork and her legal rights. Sandy is also bilingual. Her mother has requested involvement of an interpreter or a bilingual professional in Spanish.

What information do you provide Sandy's mother?

What other individuals should be involved in the discussion?

What are Sandy's rights?

Sandy's family should be informed of their rights in writing and in their native language. Sandy's mother should be informed about safeguards that will be used during the evaluation process. Furthermore, all participants in the evaluation of Sandy should be actively involved in the process. Participants include the psychologist, the social worker, occupational and speech therapists, as well as special education

and inclusion teachers. Teachers should list prereferral strategies used in the classroom. More input should also be obtained from Sandy.

Sandy has the right to a free, appropriate public education in the least restrictive environment based on a nondiscriminatory assessment. The informal and formal assessment tools should be written in her native language. They should be administered by properly trained administrators, and the instruments should be standardized for the purpose for which they are being used. Any variation in the standardization procedures should be noted and described in the evaluation report. Her family members should have a voice in the decision-making process. Sandy is entitled to due process and to protections under the law that will provide her an individualized education based on her needs.

Multicultural Considerations

Multicultural considerations and discriminatory practices have shaped and continue to shape the field of special education in relation to changes in the law. Cases have changed the rules regarding special education services, and specific aspects of assessment are addressed within these laws. Students should be tested in their native and primary language. The parents should also be informed of

their rights and are provided interpretation of test results in their native language. Cultural rules are provided in the laws so that students are given every opportunity to succeed. These considerations include bias-free testing and placement.

Researchers have supported the use of prereferral of students in need of special education services to reduce overidentification and underidentification of students who are culturally or linguistically diverse (Nelson, Smith, Taylor, Dodd, & Reavis, 1991; Sullivan, 2011). Important considerations during the prereferral process include carefully choosing the individuals on the prereferral team and addressing proactively differences in language that can affect communication and collaboration. Also, learning styles must be considered, as well as concepts of time (importance of being exactly on time) and cooperation (working in groups versus competition) during the process (Dodd, Nelson, & Spint, 1995).

Standardized tests are also flawed when evaluating students who are culturally and linguistically diverse. Many of these tests do not provide fair opportunities for the students who speak a language other than English. Using performance-based, curriculum-based, and dynamic assessment could increase the validity of the assessment process (Salend, Garrick-Duhaney, & Montgomery, 2002; National Joint Committee on Learning Disabilities, 2010).

SUMMARY

As you reflect on this chapter and the impact that practice and application has on learning, consider the following main points:

- Assessment is a systematic process for gathering information about the educational needs of children and adolescents with disabilities. Special education assessment is the assessment of students to determine strengths and needs. In addition, it is used to determine student eligibility for services, strategies to support students and families, and progress with respect to goals.
- In the past, assessments were created to meet a variety of needs, including the screening of students in

- public schools and the evaluation of military personnel and potential employees. Today, assessment focuses on educationally relevant information so that an appropriate individualized education program can be developed, implemented, and monitored.
- The main purposes of assessment are directly related to the steps in the special education assessment process: identification and referral, determination of eligibility, program planning, and program implementation and evaluation.
- Special education assessment techniques may utilize formal and informal strategies. Both strategies are employed in all phases of assessment, although

formal strategies are often considered more useful for gathering information for eligibility decisions and informal strategies more useful for classroom instructional decisions.

- A 504 plan is different from an IEP because a 504 plan is not special education, whereas an IEP is special education. When a student qualifies for a 504 plan, accommodations are made in the classroom. This plan is required under civil rights law. The student does not meet a special education classification but requires accommodations.
- The collaboration team involved in special education assessment may be composed of the student's

- parents and professionals representing general education, special education, psychology, speech and language disorders, medicine, and other areas as needed. Each team member gathers data about the student and interprets it from his or her perspective, sharing it with others on the team.
- A framework for special education involves the use of a systematic structure to guide the process of collecting data, analyzing results, and making important educational decisions. This framework could include the identification and referral, determination of eligibility, program planning, and program implementation and monitoring.



2

The Assessment Process

LEARNING OUTCOMES

After reading this chapter, you will be able to:

- Name and describe two main types of decisions made by special educators in the assessment process.
- Name and describe the four main steps in the assessment process.
- Provide examples of three identification and referral stages special educators use in special education assessment.
- Define the individualized assessment plan professionals use in discussion regarding determination of eligibility.
- Discuss elements of the IEP professionals use in program planning.
- Provide definitions of two monitoring techniques in program implementation and monitoring.

KEY TERMS

individualized education program (IEP) due process individualized assessment plan (IAP) least restrictive environment (LRE)

curriculum-based assessments curriculum-based measurement (CBM) response to intervention (RTI) pecial education assessment is a systematic process designed to gather the information needed to make important decisions about students' educational programs. The types and number of assessment procedures vary at different stages in that process because the reasons for gathering data are different. This chapter text describes the entire assessment sequence, beginning with identification of possible learning problems and ending with the monitoring and evaluation of special education services. First, however, it is useful to describe the types of decisions that educational teams must make and the ways in which these decisions influence the collection of assessment data.

Assessment in Action

William and the Challenges of Second Grade

William is a 7-year-old student in the second grade. His teacher, Ms. Trapp, is concerned about his behavior in school and his achievement. On the group tests administered to all students, William scored in the average range in reading but experienced difficulty with mathematics. He has trouble remembering number facts from one day to the next and often becomes confused when trying to solve a computational problem. William's classroom behavior is also a concern. He doesn't seem to attend to directions and is often disruptive when he is supposed to be working independently. His assignments, both in-class and homework, are rarely completed.

Ms. Trapp is an experienced teacher who is familiar with the signs of learning problems in young children. She is worried about William and seeks help from the student study team at her school. She collects response to intervention data and tries various instructional interventions. She uses manipulatives, peer tutors, and additional resources for home use prior to lessons (i.e., outlines, notes, and additional manipulatives). While examining the academic and environmental demands in the classroom, she decides to slow the pace of William's lessons and add more visual cues and prompts. She also tells William that he'll be able to visit the classroom computer center only if he completes all of his work and is less disruptive. Ms. Trapp carefully observes William to see if changes occur but sees only minimal improvements in his behavior.

William's mother is also concerned about his school problems and his behavior at home. It upsets her that he doesn't listen and won't do what he's told to do. She's tried to help him with his schoolwork at home, but he refuses to work on assignments and study his math facts. William's mother wonders if there is something wrong with him. When Ms. Trapp talks with William's mother, they agree that further study of William's school problems is needed. Ms. Trapp refers William for assessment.

TYPES OF DECISIONS

Special education assessment provides the information needed to make two types of decisions: legal decisions and instructional decisions. These decisions differ in several important ways.

Legal Decisions

The determination of eligibility for special services and the reevaluation of eligibility are essentially legal decisions. These decisions concern the person who will receive special education services. Their purpose is to determine whether individual students meet the legal requirements for one or more disabilities to allow allocation of special education funds, resources, and personnel.

Federal special education laws such as IDEA 2004 specify two major eligibility criteria: The student must be determined to have a disability, and that disability must have an adverse effect on the student's educational performance. These criteria guide the assessment process by indicating the essential information needed. Federal laws and state regulations also define each disability. However, federal definitions tend to be general descriptions of conditions, as can be seen in Table 1-1 in Chapter 1. State guidelines may provide more specificity, although they usually do not mandate particular assessment procedures. In most cases, these decisions are left to the professional judgment of team members. Considerable expertise is needed to put legal definitions into operation.

Legal decisions about mild disabilities require the contributions of several team members, including parents, general and special educators, school psychologists, speech-language pathologists, and school nurses. Other professionals—such as physicians, adaptive physical education teachers, school social workers, and assistive technology specialists—participate when necessary.

In making decisions about the existence of mild disabilities, most states require assessment information about three areas of functioning: (1) general intellectual performance, (2) educational performance, and (3) performance related to specific disabilities. Table 2–1 compares the general criteria for the various mild disabilities in these three areas. Note that the terms behavioral disorder is used instead of emotional disturbance and intellectual disability instead of mental retardation; the latter terms are legal terms not favored by educators.

General intellectual performance is assessed in all mild disabilities. It is assessed by individual tests of intelligence and, in cases where intellectual disability is suspected, measures of adaptive behavior. Intellectual disability is indicated when performance falls within the below-average range. In other mild disabilities, the opposite is true. Intellectual performance must be at least average.

Educational performance is also a concern for all mild disabilities (Zentall & Beike, 2012). In intellectual disability, the pattern is typically poor performance in most or all areas. In contrast, other mild disabilities require low or

TABLE 2–1 Comparison of Eligibility Criteria

DISABILITY	GENERAL INTELLECTUAL FUNCTIONING	EDUCATIONAL PERFORMANCE	INDEX OF DISABILITY
Intellectual Disability	Below average	Below average in most areas	Low or below average in adaptive behavior and most other areas
Learning Disability	Average or above	Low or below average in at least one area	Low or below average in at least one specific learning ability or learning strategy
Behavioral Disorder	Average or above	Low or below average in at least one area	Low or below average in at least one area of behavior
Attention-Deficit/ Hyperactivity Disorder (OHI)	Average or above	Low or below average in at least one area	Low or below average in attention, activity level, or both

below-average performance in only one area. However, it is not uncommon for older students with learning disabilities, behavioral disorders, and other health impaired (OHI) disorders to show poor performance in several school skills.

The third major area of concern, the index of disability, differs across the four mild disabilities. Intellectual disability is a comprehensive disability affecting school skills, adaptive behavior, and most other areas of functioning. Learning disabilities are indicated when students have deficits in one or more specific learning abilities or learning strategies, despite adequate general intellectual performance. Both behavioral disorders and attention-deficit/hyperactivity disorders require evidence of specific types of behavioral problems. Like learning disabilities, these disabilities occur despite adequate intellectual performance.

Eligibility decisions rely heavily on results of norm-referenced measures such as standardized tests. These instruments provide information that allows the team to compare a student's performance with that of other students. For example, results of academic achievement measures may indicate that the student's school performance is sufficiently different from that of age or grade peers to warrant considering it to be a problem. Salvia, Ysseldyke, and Bolt (2006) maintain that norm-referenced tools could provide data that could protect students from inappropriate labeling, if used correctly. Guidelines for interpreting standardized test results for eligibility decisions are presented in Chapter 4.

Informal assessment procedures also play a role in legal decisions. Checklists, interviews, rating scales, observations, portfolios, criterion-referenced tests, and other informal measures are used to confirm the results of norm-referenced tests and to provide information not available from standardized measures. The team approach to making legal decisions helps to ensure that all important areas of functioning are considered and that the assessment procedures selected are the most appropriate for the task at hand.

Instructional Decisions

Planning, monitoring, and evaluating the student's special education program require instructional decisions. In fact, once a student has been found eligible for special education services, the majority of decisions to be made are instructional rather than legal. The major concerns are the content of the student's curriculum (i.e., what to teach), the instructional methods used to implement the curriculum (i.e., how to teach), and the overall effectiveness of the instructional program.

The first step is preparation of an individualized education program, or IEP, for the student. Results of the eligibility assessment are reviewed, and additional information is gathered as needed. The student's current levels of performance in important skill areas then serve as a basis for identifying annual goals and short-term objectives, selecting appropriate services and curricular modifications for the student, and planning strategies for evaluation of the individualized program.

Once the IEP is implemented, the teacher and other professionals responsible for delivering educational services continue to make instructional decisions. These decisions are an integral part of the teaching process; data collection is ongoing, and instructional decisions are made on a regular and frequent basis. Instruction takes place, the teacher gathers data on the student's response to instruction, and modifications are made based on the student's progress. This cycle is repeated continuously as the teacher monitors the effects of the intervention.

More formal evaluations of the instructional effort also take place. Several times during the school year, the teacher communicates with the student's parents about progress toward the annual goals specified in the IEP. This typically occurs when report cards are prepared for all students in the school. In present practice, the entire IEP is reviewed at least once each year by the student's parents and teachers. Progress toward the student's goals is reported, the effectiveness of the educational program is discussed, and a new plan is developed for the coming year. Instructional decisions require specific information about the student's performance in relation to the classroom program. Because of this requirement, informal

assessment strategies are more useful than formal measures. Although standardized test results may help the assessment team identify areas of strength and weakness for the IEP, these measures are not designed for frequent assessment of progress toward specific instructional goals. Informal techniques such as observation, informal inventories, portfolios, and criterion-referenced tests are more appropriate.

STEPS IN THE ASSESSMENT PROCESS

Table 2–2 presents the steps in the assessment process. There are four main phases in assessment: identification and referral; determination of eligibility; program planning; and program implementation and evaluation. Each phase is made up of several steps, and the overall sequence parallels the purposes of assessment, the types of educational decisions to be made, and the assessment questions introduced in Chapter 1.

Two major factors influence the steps in assessment: (1) special education laws and regulations at the national, state, and local levels and (2) professional beliefs about preferred assessment practices. IDEA 2004 and its predecessors guarantee free, appropriate, public education to all students with disabilities. This guarantee requires that all students with possible disabilities be identified and, if appropriate, assessed. Accompanying this guarantee are strict guidelines for the ways in

TABLE 2-2

Steps in Educational Assessment

Identification and Referral

- Screening and teacher identification of students with school problems
- Prereferral intervention strategies
- Referral and notification of parents

Determination of Eligibility

- Design of the individualized assessment plan (IAP)
- Parental permission for assessment
- Administration, scoring, and interpretation of assessment procedures
- · Reporting results
- Decisions about eligibility

Program Planning

- Design of the individualized education program (IEP)
- Parental agreement to the IEP

Program Implementation and Evaluation

- Implementation of the IEP
- · Ongoing monitoring of student progress
- Annual review of the IEP
- Periodic reevaluation of eligibility

which assessments must be carried out. Students and their parents are protected by legal requirements for due process, procedural safeguards, non-discriminatory assessment, placement in the least restrictive educational environment, confidentiality of information, and development and regular monitoring of the IEP. States must conform to these regulations to receive federal aid for special education services.

Due process procedures are designed to safeguard the rights of students with disabilities and their parents (O'Halloran, 2008). This legal requirement has been described as a practice that balances fairness for both families and educational professionals in the outcome of special education assessment (Turnbull, Strickland, & Brantley, 1982). Due process provides protection to the consumers of the assessment process—for example, by requiring that parents give their consent before their child is assessed.

Although laws and regulations provide the general structure for assessment, specific procedures must be developed at the state and local levels. For example, there is considerable variation among states in the terminology used to identify the different disabilities; within states, there are differences in the forms that local districts develop to document referrals, parental consent for assessment, and IEPs. This flexibility allows professionals to consider local needs and act upon their beliefs about preferred practices in assessment.

IDENTIFICATION AND REFERRAL

The first phase in the assessment process is the identification of students with possible disabilities. This phase involves the largest number of students. However, identification does not necessarily result in referral for special education assessment. In some cases, students are referred for consideration for other types of services, such as bilingual education. In others, school problems are resolved through classroom interventions during the prereferral stage. When problems persist despite such efforts, students may be referred for assessment to determine their eligibility for special education.

Screening and Teacher Identification

According to federal special education laws, state education agencies are responsible for "child find," that is, the identification, location, and evaluation of all students with disabilities. States use several types of child find strategies, including mass media information campaigns, in an attempt to make the general public more aware of the needs of individuals with disabilities. These campaigns stress the signs and symptoms of disabilities as well as the availability of services within the state or a particular region.

School districts and other educational agencies also participate in child find activities. Screening procedures are used to gather information about large groups of students to identify those in need of more in-depth assessment. Teachers and other staff members are alerted to signs of various disabilities as well as the prereferral and

referral processes. Teachers may be asked to complete checklists or rating forms for each of their students to help identify those with potential problems. School records may be examined to locate students with poor report card grades or low performance on group achievement tests.

Anyone within the community may identify a child with a possible disability. In the preschool years, parents often bring their child to the attention of education professionals. Once the child has entered the elementary grades, it is typically the general education teacher who first notices a potential problem. This is particularly true for mild disabilities because these disabilities often first become apparent when students are unable to meet classroom academic and behavioral expectations. When teachers identify students with problems in school, the first step is not referral. Instead, prereferral strategies are used in an attempt to ameliorate the problem.

Prereferral Strategies

General education teachers are expected to make modifications in a student's instructional program before beginning formal procedures for referring that student for special education assessment. The purpose of this prereferral intervention stage is twofold. First, many students who experience minor or transitory learning and behavior problems can be helped to succeed by relatively simple adaptations of the standard curriculum, of instructional procedures, or of the behavior management program within the general education classroom. Also, there may be resources within the school, in addition to special education, that can assist the student; examples are peer tutoring programs and bilingual education. Second, when prereferral strategies are not effective in improving the student's performance, the information gathered during this stage provides direction for the special education team in its decisions about eligibility, intervention strategies, and placement options.

In many schools, the prereferral intervention stage is coordinated by a team of professionals (e.g., a child study or student assistance team) that includes general educators as well as special educators. A teacher with a student who is experiencing

difficulty in school may ask the team for assistance in identifying strategies for modifying the classroom learning environment to improve the student's chances for success. Prereferral strategies can take many forms: conferences with students and parents, review of school records and results of medical screenings, changes in instruction, introduction of learning aids, and modifications of the classroom behavior management system. Checklists such as this are used to document the adaptations made in general education so that their effectiveness can be evaluated.

When prereferral interventions do not bring about desired changes, one option open to the team is referral for special education assessment. The team or the student's classroom teacher may institute the referral. Others interested in the student's welfare can also make referrals: parents, tutors, physicians, or even the student himself or herself. However, general education teachers remain the most common source of special education referrals.

Referral and Parental Notification

Referrals are initiated when the parent, teacher, or another professional completes a referral form. Although forms differ from district to district, most require the person making the referral to describe the student's problem, tell how long the problem has been occurring, and discuss the types of classroom modifications that have been introduced in an attempt to solve the problem.

Once a student is formally referred for special education assessment, a chain of events is set in motion. School districts usually have an individual or team that receives referrals from schools in the district or, in the case of new students, from other agencies or individuals. A team forms and processes the referral by alerting the student's parents and by gathering all available data.

Federal special education law requires that parents be informed of any referral in writing. They must also be informed whenever any testing for possible special education program changes will take place. Parents have the right to participate in the assessment and in subsequent decisions about their child's program. They must give

their permission for assessment and should receive an explanation of the results and any proposed action. They can ask for an independent evaluation, inspect all school records, and request a mediation due process hearing whenever they disagree with a proposed action, such as placement in special education.

Students with disabilities have the right to be represented in assessment and other matters. When no parent or guardian can be identified, when his or her whereabouts are unknown, or when the student is a ward of the state, the state or local education agency can assign a surrogate parent. The person chosen must be qualified to serve the best interests of the child. He or she represents the student in all the matters mentioned here and cannot be employed by the school district.

DETERMINATION OF ELIGIBILITY

The eligibility determination stage of assessment begins with careful planning. Parents are informed of the assessment plan, and their participation in team deliberations is encouraged. When the assessment has been carried out, results are reported, and team members, including the student's parents, make legal decisions about eligibility for special education services.

Design of the Individualized Assessment Plan

Assessment of students with suspected disabilities must be systematic. To ensure this, a plan of action should be developed by the professionals responsible for the assessment. In this text, we call that plan an individualized assessment plan, or IAP. Although it is not a legal requirement, the IAP serves to individualize the assessment process so that each student's unique needs are addressed. Standard sets of assessment procedures, administered by some districts to all students referred for special education assessment, are neither appropriate nor useful.

An IAP describes the steps in assessment and the procedures used in each step. It should address the reason the student was referred for assessment, focus on areas relevant to education, and provide information needed for decisions concerning instructional design, placement, and other aspects of the educational program. The three main concerns are (1) the student's skills and abilities (including performance in the areas related to the suspected disability), (2) the general education curriculum and the tasks with which the student is having difficulty, and (3) the classroom learning environment. The IAP may also consider physical, social, and behavioral characteristics as they relate to the student's educational needs. For example, a student may have a severe reading disability due in part to a vision disorder.

Chapter 1 presented a framework for special education assessment that suggested important assessment questions for each stage of the process. Those questions can be used to develop the IAP. Questions are arranged in sequential order, and each major question is followed by a set of more detailed questions. For example, depending on the answers to broad questions such as "What are the student's levels of achievement and strengths and weaknesses in school learning?" the team might also ask, "What are the student's strengths and weaknesses in mathematics?"

IAPs include formal and/or informal assessment procedures, depending on the questions under consideration. The questions may address any area relevant to education; examples are academic skills (e.g., reading), social-emotional concerns (self-concept), and the physical environment of the classroom (seating arrangement). The types of information needed to answer the assessment question often influence the choice of assessment procedures. For example, norm-referenced tests provide information to answer questions about level of proficiency, but they do not describe specific skill deficits. A parent interview, rather than a formal test, would be used to gather data about a student's family history and medical background. Other criteria for the selection of appropriate assessment procedures are described in Chapter 4.

Federal special education laws make several specific provisions for evaluation. Before a student receives special education services, a team of qualified professionals must assess the student to determine eligibility. This team is made up of individuals similar to those who serve on the IEP team. According to IDEA 2004, such teams should include:

- The student's parents;
- A general education teacher if the student is or may be participating in general education;
- A special education teacher;
- A representative of the educational agency who can provide or supervise special education services and who is knowledgeable about the general curriculum and resources available within the agency;
- An individual able to interpret assessment results and their educational implications (this individual may be one of the professionals just listed);
- Others, as needed, with special expertise or knowledge about the student; and
- If appropriate, the student.

The law makes clear that one of the major purposes of the evaluation is to gather information for program planning. IDEA 2004 also places great emphasis on the general education curriculum. In development of the educational program, the team must describe how the disability affects the student's involvement with and progress in the general curriculum.

In designing the IAP, the evaluation team should follow these principles:

- Focus assessment on the education of the student; consider noneducational factors only as they contribute to understanding the educational problem.
- 2. Plan the assessment by asking important assessment questions, and then select procedures that will gather the information needed to answer those questions.
- 3. Choose assessment procedures of the highest quality.
- 4. Coordinate the efforts of team members. Avoid duplication and take advantage of the expertise of persons with different perspectives.
- Begin assessment in each area of interest by surveying general performance; continue assessment with more in-depth procedures only if a problem is identified.

- Consider not only the student but also the learning tasks and the instructional environment.
- 7. Compare findings from different procedures to confirm the accuracy of assessment results. Be sure to include information about the student's current classroom performance in this comparison.

Decisions about eligibility for special education and program planning are important. These principles help to ensure that students are assessed accurately, fully, and fairly so that useful information is available for decision making.

Parental Permission for Assessment

Once an assessment plan has been developed, the student's parents must give their permission before the assessment can take place. Federal special education laws require that parents be notified in writing. The notice must be given a reasonable time before the school proposes to do the assessment, and it must include information about procedural safeguards, a clear explanation of the reasons for the assessment, and a description of each assessment procedure to be used.

There are additional legal requirements. The request for permission for assessment and all related communications must be clearly written in understandable language. When necessary, the notice must be translated into the parents' native language or other mode of communication (e.g., Braille), unless this is not feasible. If the parents do not use a written language for communication, the notice must be translated orally. The educational agency must document that these procedures have been followed. The goal is to ensure that, when parents agree to the assessment, the consent they give is an informed consent.

Administration, Scoring, and Interpretation of Assessment Procedures

Guidelines for administration, scoring, and interpretation of formal assessment procedures such as norm-referenced tests are discussed in detail in Chapter 5. These guidelines are supplemented by the specific directions that appear in the manuals that accompany published tests.

Chapter 6 describes similar procedures for informal assessment procedures such as observations, interviews, and inventories. Although manuals are not available for most informal measures, principles of good practice guide professionals in their use of these assessment tools.

Like other aspects of the assessment process, special education laws govern the selection and use of assessment procedures. For example, assessment devices must be technically sound, and standardized tests must be administered by trained professionals who follow the directions provided by the test producer. A more complete discussion of these legal requirements appears in Chapter 4.

Reporting Results

When students are assessed for possible special education services, results must be reported to parents, whether or not the student is ultimately found to be eligible for services. The results are presented at a meeting of the evaluation team, and parents are to serve as members of this team. Parents must be clearly told if the student has a disability and is eligible for special education services. If so, the components of an IEP are developed.

Federal special education laws also specify that parents must be informed of their right to have access to all school records concerning their child's identification, assessment, and placement in special education. In some cases, parents may wish to examine the records to better understand the school's basis for concern. In addition, the school system must provide information about where parents can obtain an independent educational evaluation, if requested.

Decisions About Eligibility

Decisions about eligibility are usually made at the team meeting when results are reported. These legal decisions are based on the eligibility criteria in federal laws and regulations as well as state and district policies. According to federal guidelines, the team must decide whether the student has a disability and, if so, if that disability adversely affects school performance. The disability must be

one covered by federal law. Also, students with school performance problems due to limited proficiency in English or lack of appropriate instruction in reading or math are not considered disabled.

PROGRAM PLANNING

The team now turns its attention to instructional matters and meets to develop the educational plan for the student. Once the student's parents have agreed to the proposed plan, the student's special education program can begin.

Design of the Individualized Education Program

The IEP meeting must take place within 30 days of the determination that the student has a disability and is in need of special education services. The IEP must be developed before the student begins to receive special services and must be implemented without any undue delay after the meeting. Furthermore, a similar meeting must be held regularly (most typically annually) to reexamine the appropriateness of the IEP and revise it, if necessary.

The IEP team is composed of the same members as the assessment team. Thus, the team includes the student's parents and the professionals who will provide services to the student, such as special education teachers, general education teachers, and others as needed. Other required team members include a representative of the educational agency who has knowledge about special education, the general curriculum, and school resources (often the school principal or vice principal) and a person who is knowledgeable about the interpretation of assessment results (often the special education teacher or school psychologist). Students themselves may serve as members of the IEP team, when appropriate.

Schools must take steps to encourage parents to attend IEP meetings and participate in the development of their child's IEP.

- 1. Parents must be notified early enough in advance of the meeting that they have an opportunity to attend.
- 2. Parents must be informed of the purpose of the meeting, its time and location, and the persons who will attend.
- 3. Meetings must be scheduled at a mutually agreed-upon time and place.
- 4. When parents cannot attend, the school must use other means of communication to ensure parental participation (e.g., individual and conference telephone calls).
- 5. An IEP meeting may be held without the student's parents if the parents choose not to attend. In this case, the school must keep detailed records of all attempts to communicate with the parents and any responses.
- 6. At the meeting, every effort must be made to ensure that parents understand the proceedings. This may involve the use of interpreters for parents who are deaf or those who speak languages other than English.
- 7. Parents must receive a copy of their child's IEP at no cost.

Professionals and parents make decisions about the student's educational program based on the data gathered in the assessment. Many types of assessment data are needed to develop the components of the IEP. In fact, the full array of educational assessment procedures described in Chapter 1 may be used to make these instructional decisions.

TABLE 2-3

IEP Requirements

Content of the IEP ($\S 300.320(a)$)

- (a) General. As used in this part, the term *individualized education program* or IEP means a written statement for each child with a disability that is developed, reviewed, and revised in a meeting in accordance with \$\$300.320 through 300.324, and that must include—
 - (1) A statement of the child's present levels of educational achievement and functional performance, including—
 - (i) How the child's disability affects the child's involvement and progress in the general curriculum (i.e., the same curriculum as for nondisabled children); or
 - (ii) For preschool children, as appropriate, how the disability affects the child's participation in appropriate activities;
 - (2) (i) A statement of measurable annual goals, including academic and functional goals designed to—
 - (A) Meet the child's needs that result from the child's disability to enable the child to be involved in and make progress in the general education curriculum; and
 - (B) Meet each of the child's other educational needs that result from the child's disability;
 - (ii) For children with disabilities who take alternate assessments aligned to alternate achievement standards, a description of benchmarks or short-term objectives;
 - (3) A description of—
 - (i) How the child's progress toward meeting the annual goals described in paragraph (2) of this section will be measured; and
 - (ii) When periodic reports on the progress the child is making toward meeting the annual goals (such as through the use of quarterly or other periodic reports, concurrent with the issuance of report cards) will be provided;
 - (4) A statement of the special education and related services and supplementary aids and services, based on peer-reviewed research to the extent practicable, to be provided to the child, or on behalf of the child, and a statement of the program modifications or supports for school personnel that will be provided to enable the child—
 - (i) To advance appropriately toward attaining the annual goals;
 - (ii) To be involved in and make progress in the general curriculum . . . and to participate in extracurricular and other nonacademic activities; and
 - (iii) To be educated and participate with other children with disabilities and nondisabled children in the activities described in this section;
 - (5) An explanation of the extent, if any, to which the child will not participate with nondisabled children in the regular class and in the activities described paragraph (a)(4) of this section;
 - (6) (i) A statement of any individual appropriate accommodations that are necessary to measure the academic achievement and functional performance of the child on State and district wide assessments. . . .
 - (ii) If the IEP Team determines that the child shall take an alternate assessment on a particular State or district wide assessment of student achievement, a statement of why—
 - (A) The child cannot participate in the regular assessment; and
 - (B) The particular alternate assessment selected is appropriate for the child; and
 - (7) The projected date for the beginning of the services and modifications described in paragraph (a)(4) of this section, and the anticipated frequency, location, and duration of those services and modifications.

TABLE 2-3 continued

Transition (§300.320(b))

- (b) Transition services. Beginning not later than the first IEP to be in effect when the child is 16, or younger if determined appropriate by the IEP Team, and updated annually, thereafter, the IEP must include—
 - (1) Appropriate measurable postsecondary goals based upon age-appropriate transition assessments related to training, education, employment, and, where appropriate, independent living skills; and
 - (2) the transition services (including courses of study) needed to assist the child in reaching those goals.

Consideration of Special Factors (§300.324(2))

- (i) In the case of a child whose behavior impedes the child's learning or that of others, consider the use of positive behavioral interventions and supports, and other strategies, to address that behavior;
- (ii) In the case of a child with limited English proficiency, consider the language needs of the child as such needs relate to the child's IEP;
- (iii) In the case of a child who is blind or visually impaired, provide for instruction in Braille and the use of Braille unless the IEP Team determines, after an evaluation of the child's reading and writing skills, needs, and appropriate reading and writing media (including an evaluation of the child's future needs for instruction in Braille or the use of Braille), that instruction in Braille or the use of Braille is not appropriate for the child;
- (iv) Consider the communication needs of the child, and in the case of a child who is deaf or hard of hearing, consider the child's language and communication needs, opportunities for direct communications with peers and professional personnel in the child's language and communication mode, academic level, and full range of needs, including opportunities for direct instruction in the child's language and communication mode; and
- (v) Consider whether the child needs assistive technology devices and services.

Source: Building the Legacy US Department of Education.

Specific guidelines govern the content of the IEP. According to current federal laws, the IEP must contain information about:

- 1. The student's present levels of educational achievement and functional performance;
- 2. Measurable annual goals;
- 3. Needed special education and related services, supplementary aids and services, and program modifications and supports;
- 4. The extent to which the student will not participate with nondisabled students in the general education classroom and other school activities:
- Procedures for the student's participation in state- or districtwide assessments of student achievement;
- Strategies for measuring progress toward annual goals and informing parents of that progress;
- 7. Transition services for older students; and

8. When appropriate, special factors such as behavioral needs, language needs, instruction in Braille, communication needs, and assistive technology devices and services.

Table 2–3 presents excerpts from the Final Regulations for IDEA 2004 that address the content of the IEP.

Although federal laws mandate the components of the IEP, the IEP form itself is not. The form is developed by individual school districts or other educational agencies, causing some variation from one locale to another.

Several components of the IEP focus on the general education curriculum and the student's access to and participation in that curriculum. In describing the student's present levels of educational performance, the team must address the effects of the disability on the student's ability to participate in the general curriculum. The team must develop annual goals related to involvement

and progress in the general curriculum. The team can specify several types of services for the student, if these are needed. These services include not only special education and related services, but also services and supports in the general education classroom. In addition, the team must describe how the student will participate in the state- or districtwide assessments of achievement (or, if participation is not considered appropriate, the alternative assessment procedures). The IEP must identify strategies for measuring the student's progress toward annual goals and specify a schedule for notifying parents of that progress; that schedule must be at least as frequent as the report card schedule for students without disabilities. Finally, the IEP team must explain any placement that constitutes a removal from the general education classroom. Although current federal laws do not require that students with disabilities remain in the general education classroom at all times, the IEP team must justify any removal to another educational setting or any action that curtails students' ability to participate in extracurricular activities or other nonacademic school activities.

Placement of students with disabilities is governed by the principle of least restrictive environment (LRE). The IDEA 2004 Final Regulations define LRE in this way:

To the maximum extent appropriate, children with disabilities . . . are educated with children who are nondisabled, and special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily. (§300.114(a)(2))

These regulations also require that local educational agencies maintain a continuum of alternative placements for students with disabilities. This continuum must include services provided in conjunction with regular class placement (e.g., resource rooms and itinerant instruction) as well as separate placements, such as special classes, special schools, home instruction, and instruction in hospitals and institutions. Although these

requirements appear somewhat contradictory, they are not. In fact, they underscore one of the most important assumptions underlying the provision of special education services: All decisions about students with disabilities, including decisions about placement, must be made on an individual basis. Thus, the IEP team considers the needs of an individual student in order to design an educational program tailored to that student's unique needs.

Parental Agreement to the IEP

After parents and professionals work together to design the student's educational program, the parents must give their consent before the IEP can be implemented. Parents must approve the provisions of the IEP, including the educational services to be provided to the student. As with other important decisions, parents must give informed consent. This means that the IEP must be explained to parents in clear, understandable language with written or oral translations, as needed. The school must document that this and all other due process procedures have been followed.

Sometimes the parents and the school do not agree on one or more aspects of the IEP, such as the amount of support to be provided or the placement recommended for the student. In such cases, several options are available to both parties in the dispute. The first is voluntary mediation. In mediation, the parents and the educational agency meet with an impartial mediator in an attempt to resolve the dispute. If the conflict is resolved, a written mediation agreement must result.

If mediation does not end in an agreement, or if either party does not choose to participate, the next option is an impartial due process hearing. At such hearings, parents have the right to be advised by legal counsel and by persons knowledgeable about students with disabilities. The educational agency must inform the parents of free or low-cost legal services and other relevant services, if available in the area. An impartial hearing officer presides over the deliberations; that officer may not be an employee of the state or local educational agency. At the hearing, both parties have the right to present evidence, confront and cross-examine witnesses, and call their

own witnesses. Both parties must disclose evaluations and recommendations they plan to present at least 5 days prior to the hearing. A record of the hearing, the finding of facts, and the decision must be provided to parents at no cost.

Decisions made in impartial due process hearings are final, unless the parents and/or school wish to appeal to the state educational agency. The decision made by the state is final, unless either party wishes to take civil action. Civil actions can be brought in a state or U.S. district court.

Federal special education laws set up timelines for conducting both the impartial due process hearing and the state-level review so that decisions are made in an expeditious manner. In most cases, the student remains in the current educational placement during this period, unless the parents and the school system agree to an alternative placement. However, there are special procedures for placement in alternative educational settings for students charged with serious offenses such as use of illegal drugs or carrying a weapon to school.

Several modifications to IDEA took place in regards to eligibility and IEPs. Students with disabilities must have accessible materials. In addition, several language changes to parental consent are included in the updated law. For example, the phrase "reasonable efforts to obtain consent from the parent for an initial evaluation" was added. Language regarding "special education environment" was changed to "special class." In addition, stronger language was added to encourage districts to purposefully involve family members in the IEP meetings. Clarification language was added in regards to transfer students. Also, a requirement was added to inform the IEP team, if changes were made to the IEP (Wright, 2006).

PROGRAM IMPLEMENTATION AND MONITORING

Once the student's parents have given their consent, the IEP can be implemented. The student's progress in the program is monitored, and the IEP is reviewed and revised on a regular basis, typically annually. Also, at least every 3 years, the student's eligibility for special education is reconsidered. The purpose of these evaluation strategies

is to determine whether the student's educational program is effective and, if it is not, to modify the program so that it more adequately meets the student's needs.

IEP Implementation and Ongoing Monitoring of Progress

The IEP must be implemented as soon as possible after it has been designed by the team and approved by the student's parents. All persons with responsibility for delivering services must have access to the IEP and be informed of their specific responsibilities in its implementation. This includes general education teachers involved in the student's education as well as special education teachers and others such as counselors and speech-language pathologists. In particular, professionals must be made aware of the supports, accommodations, and modifications to be provided to the student.

The IEP sets forth the annual goals for the educational program, and these goals become the framework for evaluation of the student's progress. The IEP must specify how the team will assess progress toward annual goals and how that progress will be reported to parents. Several types of assessment procedures are used to gather the data needed to monitor progress, but in most cases, informal assessment strategies are preferred. For example, observations, analysis of work samples, criterion-referenced tests, and informal inventories provide information about student performance and help professionals determine whether changes should be made in the instructional program.

In addition, the IEP describes the student's participation in state- or districtwide assessments of student achievement. There are three possible options. First, the student can participate in the assessments under conditions identical to those for typical students. Second, modifications may be made in administration procedures. For example, the student may be given extra time to complete a test or be allowed to type, rather than handwrite, essays. Third, if the IEP team determines that participation in such assessments is not appropriate for the student, the team must explain why and describe how the student will be assessed to monitor his or her progress in the

general curriculum. Strategies for making decisions about test accommodations and modifications are discussed later in this book in Chapter 4.

Annual Review of the IEP

At minimum, the IEP must be reviewed on an annual basis. In this review, the team evaluates the student's progress toward the annual goals. Both formal and informal assessment procedures may be used to gather data for this review. Normreferenced tests may be administered to determine whether the student's performance has improved in relation to the performance of age or grade peers. Teachers and other team members may report results of classroom observations, portfolio assessments, criterion-referenced testing, and interviews with students and parents. These data are used to decide whether the educational program described in the IEP should be continued, modified, or discontinued. If the annual goals have been achieved and no further special education needs are apparent, the student may be dismissed from special education. However, if all goals have not been fully accomplished or if additional goals are necessary, the IEP is revised and the student continues to receive special education services.

Schools must provide the special education and other services listed on the IEP and make a good-faith effort to assist students to meet their annual goals and objectives. However, schools and teachers may not be held accountable if students fail to meet those goals. When students do not achieve as expected, parents have the right to ask that the IEP be revised. For example, parents might request a change in the types of services provided to their child or an increase in the amount of services.

Although the law now requires annual review of the IEP, IDEA 2004 authorizes a feasibility study of multiyear IEPs in a limited number of states. Multiyear IEPs would address no more than 3 years and would focus on natural transition points for students (e.g., the transition from middle school to high school). Gartin and Murdick (2005) explain that this change is in response to criticisms of the amount of paperwork required in special education.

Curriculum-Based Measurements

Over the past few years, curriculum-based measurements (CBMs) have been used often in the classroom for purposes of continuous assessment tied to instruction. Although CBMs are utilized in the classroom, they are not necessarily informal assessment (Hosp, Hosp, & Howell, 2012). CBMs are criterion-based measurements and generally have reliability and validity established. In addition, standardized procedures are used.

Curriculum-based measurement (CBM) is a measurement tool used for assessing students' academic growth repeatedly over time, providing additional strategies to support students' needs, and ascertaining the need for additional diagnostic testing (Howell & Nolet, 1999). Curriculum-based measurement was developed to utilize formative measurement information in evaluating and improving instructional efficacy (Deno, 1985). This avenue of repeated measures provides teachers with the data as tools to monitor and adjust their instruction (Deno & Mirkin, 1977).

Deno (2003) studied the literature and offered the general characteristics and uses of CBM. General characteristics include reliability and validity,

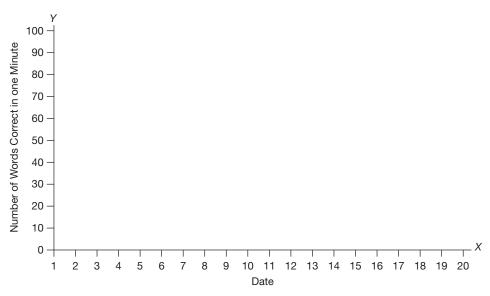


FIGURE 2–1 Aim Line

standard tasks, specific instructional materials, specifics in terms of administration and scoring, sampling through direct observation, repeated sampling, time efficiency, and ease of teaching. General uses include improving instructional programs, predicting performance, developing normative samples, increasing collaboration, identifying high-risk students, appraising prereferral interventions, decreasing bias, finding different identification systems, investigating inclusion placements, predicting performance on high-stakes tests, looking at content area growth, evaluating English language learners (ELLs) (Esparza, Brown & Sanford, 2011), and predicting performance in the early grade levels.

Fuchs and Fuchs (1999) offered criteria for successful measurement structures, which include meeting standards for reliability and validity; modeling growth over time; being affected by instructional adaptations quickly; not involving just one specific instructional program; and being quick, inexpensive, and efficient.

CBM is progress monitoring rather than mastery measurement (Fuchs, 2006b). Safer and Fleischman (2005) also tap into the concept of monitoring instruction through continuous assessment. They discuss a rate of progress through the

use of probes and their connection to improved instruction. That is, the teacher looks at samples of skills the student is expected to learn by the end of the year. The teacher examines the probes on a weekly, biweekly, or monthly basis. Teachers can then graph the students' progress to see if instruction must be altered. Altered instruction would then yield better student outcomes. Students could also be involved in graphing and self-monitoring. Students can take responsibility for meeting with the teacher if the aim line is not reached three days in a row (see Figure 2–1). Data would be shared with family members.

Swain (2005) tapped into the students' self-monitoring, that is, the self-determination aspect of CBM. She studied goal-setting awareness, knowledge, and setting daily reading goals in students with learning disabilities. Students in the goal-setting treatment group increased knowledge but had difficulty setting realistic goals.

Progress monitoring has been tied into standards-based assessment and connected positively to accountability, expectations, and outcomes (Quenemoen, Thurlow, Moen, Thompson, & Morse, 2003). Monitoring of the student's progress provides a continuous feedback loop to the teacher and student, which improves assessment

and instruction outcomes (Fuchs & Fuchs, 1986a, 1986b). Furthermore, this method provides graphic displays of each individual's data and qualitative accounts of student demonstrations of skills (Fuchs & Fuchs, 2002). More specifically, this method can be used for designing effective individualized programs, including setting goals and monitoring progress toward goals (Fuchs, 2006a).

In concentrating on the instructional or intervention aspect of this CBM process, response to intervention* (RTI) (Gresham, 1991) is a concept that is critical to the discussion of students with and without disabilities (Fuchs, 2006b). Gresham (1991) referred to RTI as a change in performance due to intervention. He also described resistance to intervention as academic performance that does not change in response to research-based intervention.

RTI has also been discussed as a possible alternative to using a questioned discrepancy model (VanDerHeyden & Jimerson, 2005; Vellutino, Scanlon, & Lyon, 2000) when identifying learning disabilities (Massanari, 2004; Fuchs, Fuchs, & Compton, 2012). Researchers included issues such as variability in the number of standard deviations used in this model, differentiation and difficulties with reliability, and waiting until student failure occurs (Vaughn & Fuchs, 2003). Mellard (2004) notes the following as strengths of RTI: high-quality instruction, instruction grounded in research, students' assessment in the classroom curriculum, universal screening, progress monitoring, interventions grounded in research, progress monitoring during interventions, and technical adequacy.

RTI looks at student performance after educational interventions (Hoover, 2010). Instruction is changed based on what the data reveal regarding the effectiveness of those interventions. Different methods work for different students. Several tiers of this method reveal useful information regarding the student. As we progress in the three-tier continuum of interventions, intensity increases (Barnett, Daly, Jones, & Lentz, 2004), and identification of difficulties becomes more evident (Fuchs, 2006b). Those tiers include tier one, where the student fails to show improvement

(even with research-based interventions) in the general education classroom. In tier two, a multi-disciplinary team attempts to problem-solve different and more intense interventions regarding the student in question. In tier three, an eligibility evaluation for special education services takes place (CASP Board of Directors, 2003).

Therefore, CBMs provide us not only with tools for monitoring and enhancing student growth and reflecting and changing our instructional practices, but also with information in the area of diagnostic evaluation. Fuchs and Fuchs (2002) described identifying students with disabilities and the notion of nonresponders. In their dual discrepancy approach, they refer to this notion as students who are nonresponsive to otherwise effective instruction. Traditionally, special educators have looked at a discrepancy between achievement and intelligence measures. However, we can look at learning disabilities from a different perspective. We are providing specialized instruction to students who perform below expectations and show a significantly lower learning rate. Utilizing CBM, we can identify and enhance learning in nonresponders.

In terms of showing a need for special education services, a CBM must show that discrepancies exist in performance and growth rate between the student and his or her peers, the student's learning rate with adaptations is below level, and special education services result in enhanced progress (Fuchs & Fuchs, 1997; Tindal, 2013).

Periodic Reevaluation of Eligibility

A review of each student's eligibility for special education must be held every 3 years, or more often if requested by the student's parent or teacher. The purpose of this review is to determine whether the student continues to require special education services. As with the initial eligibility decision, a team meets to plan the data collection process. Existing information about the student is reviewed, an assessment plan is prepared, and parents are asked for their consent before the assessment is conducted. In some cases, the team may decide that no