
Special Education Disability Specific Eligibility Standards

The Background:

A work group was formed to review and/or revise the definitions of the fourteen federal disability categories and two state disability categories (Functional Delay and Intellectually Gifted). The group, composed of parents with disabilities, representatives of disability organizations, other state agencies, local education agencies, assessment specialists, and department staff, was convened and met between January 2007 and March 2007. The mission of this group was to align the final regulations of the IDEA 2004 with the Tennessee Disability Specific Eligibility Standards.

There were few changes in the definitions of most disability categories. The condition of Tourette's Syndrome was added to the definition of Other Health Impairment. The term 'adverse affect' was included in most of the disability definitions.

The definition and final regulations for eligibility of students with Specific Learning Disabilities (SLD) is significantly changed, for the first time in over twenty years, and significant effort was devoted to revising the SLD Definition and Eligibility Standards. The revisions for the Intellectually Gifted category are included in this set and the Intellectually Gifted criteria have been revised since the Board last considered the criteria.

The Master Plan Connection:

This item supports the Board's Master Plan by providing access to **quality curriculum** to children with disabilities. It supports early intervening services provided to Title I Schools through the Reading First Program to all students with learning problems. It supports **effective teaching** by providing data on student learning styles, strengths, weaknesses, and supports and adaptations required for the student's success in the general curriculum.

The Recommendation:

The Department of Education recommends that the current Disability Specific Eligibility Standards referenced in the current Rule 0520-1-9 be replaced in its entirety by the Proposed Disability, Specific Eligibility Standards, and that this recommendation be accepted on first reading. The SBE staff concurs with this recommendation.

Intellectually Gifted

1. Definition

Intellectually Gifted refers to children whose intellectual abilities and potential for achievement are so outstanding that the child's educational performance is adversely affected.

- a. Evaluation of Intellectually Gifted shall include:
 - (1) Assessment through a multi-modal identification process, wherein no singular mechanism, criterion or cut-off score is used for determination of eligibility; and
 - (2) Evaluation and assessment of the following components:
 - (a) Educational Performance;
 - (b) Creativity/Characteristics of Intellectual Giftedness; and
 - (c) Cognition/Intelligence.
- b. Eligibility for an individual child is based on analysis of this information. The screening and comprehensive assessment results must meet specific eligibility standards based on multiple criteria and multiple assessment measures.
- c. For intellectually gifted students, "adverse affect" means the general curriculum alone is inadequate to appropriately meet the student's educational needs..

2. Evaluation Procedures

Evaluation shall include the following:

- (1) Systematic Child Find to include at least one grade level screening and opportunities for Individual Screening in grades K-12 in the areas of:
 - (a) Educational Performance, and
 - (b) Creativity/Characteristics of Giftedness;
- (2) a team review of individual screening results;
- (3) referral for Individual Comprehensive Assessment based on information gathered from the Individual Screening. Individual evaluation procedures shall include appropriate use of instruments that are sensitive to cultural, linguistic, environmental and economic factors, or sensory impairments. The Individual Comprehensive Assessment shall include:
 - (a) Individual evaluation of Cognition or Intellectual Ability; and
 - (b) Individual evaluation of Educational Performance and Creativity/Characteristics of Intellectual Giftedness. The need for expanded assessment and evaluation in Educational Performance and Creativity/Characteristics of Giftedness is determined based on the results of the individual screening;
- (4) assessment procedures in the three component areas of evaluation completed for program and services planning regardless of the standards used to make the final eligibility determination; and

- (5) documentation including observation and/or assessment of how intellectual giftedness adversely affects educational performance.
3. Evaluation Participants
- a. Information shall be gathered from the following persons in the evaluation of intellectual giftedness:
 - (1) parent
 - (2) the child's referring teacher, or a general classroom teacher qualified to teach a child of his/her age, who is familiar with the student (with a child of less than school age, an individual qualified to teach a child of his/her age, who is familiar with the child); and when appropriate, in collaboration with the ESL teacher, when the child is an English Language Learner;
 - (3) an appropriately licensed school psychologist, licensed psychological examiner¹, or licensed psychologist;
 - (4) a licensed special education teacher and/or a licensed teacher who meets the employment standards in gifted education.
 - (5) other professional personnel, as indicated.
 - b. At least one of the evaluation participants (a2-a5) must be trained in the characteristics of gifted children.

¹

Includes Senior Psychological Examiner

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AUTISM

1. Definition

Autism means a developmental disability, which significantly affects verbal and nonverbal communication and social interaction, generally evident before age three (3) that adversely affects a child's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experience. The term does not apply if a child's educational performance is adversely affected primarily because the child has an Emotional Disturbance, as defined in this section.

- (1) After age three (3), a child could be diagnosed as having Autism if the child manifests the above characteristics.
- (2) The term of Autism also includes students who have been diagnosed with an Autism Spectrum Disorder such as Autism, Pervasive Developmental Disorder—Not Otherwise Specified (PDD-NOS) or Asperger's Syndrome when the child's educational performance is adversely affected. Additionally, it may also include a diagnosis of a Pervasive Developmental Disorder such as Rett's or Childhood Disintegrative Disorder. Autism may exist concurrently with other areas of disability.

2. Eligibility Standards

- a. Children with Autism demonstrate the following characteristics prior to age 3:
 - (1) difficulty relating to others or interacting in a socially appropriate manner;
 - (2) absence, disorder, or delay in verbal and/or nonverbal communication; and
 - (3) one or more of the following:
 - (a) insistence on sameness as evidenced by restricted play patterns, repetitive body movements, persistent or unusual preoccupations, and/or resistance to change;
 - (b) unusual or inconsistent responses to sensory stimuli.
- b. The characteristics as defined above are present and cause an adverse effect on educational performance in the classroom or learning environment.

3. Evaluation Procedures

Evaluation shall include the following:

- (1) parental interviews including developmental history;
- (2) behavioral observations in two or more settings (can be two settings within the school);
- (3) physical and neurological information from a licensed physician, pediatrician or neurologist who can provide general health history to evaluate the possibility of other impacting health conditions;

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- (4) evaluation of speech/language/communication skills, cognitive/developmental skills, adaptive behavior skills and social skills; and
- (5) documentation, including observation and/or assessment, of how Autism Spectrum Disorder adversely affects educational performance in the classroom or learning environment.

4. Evaluation Participants

Information shall be gathered from the following persons in the evaluation of Autism Spectrum Disorders:

- (1) the parent;
- (2) the child's general education classroom teacher (with a child of less than school age, an individual qualified to teach a child of his/her age);
- (3) a licensed school psychologist, licensed psychologist, licensed psychological examiner (under the direct supervision of a licensed psychologist), licensed senior psychological examiner, or licensed psychiatrist;
- (4) a licensed physician, neurologist, pediatrician or primary health care provider; and
- (5) a certified speech/language teacher or specialist; and other professional personnel as needed, such as a special education teacher, occupational therapist, physical therapist or guidance counselor.

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DEAF-BLINDNESS

1. Definition

Deaf-Blindness means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs by addressing any one of the impairments.

2. Eligibility Standards

- a. A child shall meet one of the following:
 - (1) a child who meets criteria for Deafness/Hearing Impairment and Visual Impairment;
 - (2) a child who is diagnosed with a degenerative condition or syndrome which will lead to Deaf-Blindness, and whose present level of functioning is adversely affected by both hearing and vision deficits; or
 - (3) a child with severe multiple disabilities due to generalized central nervous system dysfunction, and who exhibits auditory and visual impairments or deficits which are not perceptual in nature.
- b. The characteristics as defined above are present and cause an adverse affect on educational performance in the classroom or learning environment.

3. Evaluation Procedures

- a. A child with Deaf-Blindness shall be evaluated by the procedures for Hearing Impairment/Deafness and Visual Impairment.
 - (1) Deafness/Hearing Impairment Procedures:
 - (a) audiological evaluation;
 - (b) evaluation of speech and language performance;
 - (c) school history and levels of learning or educational performance;
 - (d) observation of the child's auditory functioning and classroom performance; and
 - (e) documentation, including observation and or assessment, of how Deafness/Hearing Impairment adversely affects educational performance in the classroom or learning environment.
 - (2) Visual Impairment Procedures:
 - (a) Eye exam and evaluation completed by an ophthalmologist or optometrist that documents the eye condition with the best possible correction and includes a description of etiology, diagnosis, and prognosis of the Visual Impairment evaluation;
 - (b) a written functional vision and media assessment, completed or compiled by a licensed teacher of students with visual impairments that includes:

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- i. observation of visual behaviors at school, home, or other environments;
 - ii. educational implications of eye condition based upon information received from eye report;
 - iii. assessment and/or screening of expanded core curriculum skills (orientation and mobility, social interaction, visual efficiency, independent living, recreation and leisure, career education, assistive technology, and compensatory skills) as well as an evaluation of the child's reading and writing skills, needs, appropriate reading and writing media, and current and future needs for Braille; and
 - iv. school history and levels of educational performance.
- (c) documentation, including observation and/or assessment, of how Visual Impairment adversely affects educational performance in the classroom or learning environment.
- b. Evaluation of a child with a suspected degenerative condition or syndrome which will lead to Deaf-Blindness shall include a medical statement confirming the existence of such a condition or syndrome and its prognosis.
- c. Additional evaluation of Deaf-Blindness shall include the following:
- (1) expanded core curriculum skills assessment that includes Deafness/Hearing Impairment;
 - (2) assessment of speech and language functioning including the child's mode of communication;
 - (3) assessment of developmental and academic functioning; and
 - (4) documentation, including observation and or assessment, of how Deaf-Blindness adversely affects educational performance in the classroom or learning environment.

4. Evaluation Participants

Information shall be gathered from those persons designated as evaluation participants for both Deafness/Hearing Impairment and Visual Impairment in the evaluation of Deaf-Blindness including:

- (1) the parent;
- (2) the child's general education classroom teacher;
- (3) a licensed physician or audiologist;
- (4) a licensed speech/language teacher or specialist;
- (5) an ophthalmologist or optometrist;
- (6) a licensed teacher of students with Visual Impairments; and
- (7) other professional personnel, as indicated (e.g., low vision specialist, orientation and mobility instructor, school psychologist).

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DEAFNESS

1. Definition

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

2. Eligibility Standards

- a. A child shall have one or more of the following characteristics:
 - (1) inability to communicate effectively due to Deafness;
 - (2) inability to perform academically on a level commensurate with the expected level because of Deafness;
 - (3) delayed speech and/or language development due to Deafness.
- b. The characteristics as defined above are present and cause an adverse affect on educational performance in the classroom or learning environment.

3. Evaluation Procedures

Evaluation shall include the following:

- (1) audiological evaluation;
- (2) evaluation of speech and language performance;
- (3) school history and levels of learning or educational performance;
- (4) observation of classroom performance; and
- (5) documentation, including observation and or assessment, of how Deafness adversely affects educational performance in the classroom or learning environment.

4. Evaluation Participants

Information shall be gathered from the following persons in the evaluation of Deafness:

- (1) the parent;
- (2) the child's general education classroom teacher;
- (3) a licensed physician or audiologist;
- (4) a licensed speech/language teacher or specialist; and
- (5) other professional personnel, as indicated.

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DEVELOPMENTAL DELAY

1. Definition

Developmental Delay refers to children aged three (3) through nine (9) who are experiencing developmental delays, as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical, cognitive, communication, social or emotional, or adaptive development that adversely affects a child's educational performance. Other disability categories shall be used if they are more descriptive of a young child's strengths and needs. Local school systems have the option of using Developmental Delay as a disability category.

2. Eligibility Standards

- a. A child is evaluated through an appropriate multi-measure diagnostic procedure, administered by a multi-disciplinary assessment team in all of the following areas (not only areas of suspected delays):
 - (1) physical development, which includes fine and gross motor skills combined;
 - (2) cognitive development;
 - (3) communication development, which includes receptive and expressive language skills combined;
 - (4) social/emotional development; and
 - (5) adaptive development.
- b. A child shall demonstrate a significant delay in one or more of the above areas which is documented by:
 - (1) performance on a standardized developmental evaluation instrument which yields 1.5 standard deviations below the mean, or 25% delay based on chronological age in two or more of the developmental areas;
 - (2) performance on a standardized developmental evaluation instrument which yields 2.0 standard deviations below the mean or 40% delay based on chronological age in one of the developmental areas;

Note: When one area is determined to be deficit by 40% or more, the existence of other disability categories that are more descriptive of the child's learning style shall be ruled out.
- c. Initial eligibility as Developmental Delay shall be determined before the child's seventh birthday.
- d. Continued eligibility as Developmental Delay after the child's seventh birthday shall be determined through an appropriate multi-measure diagnostic procedure, which includes a comprehensive psycho-educational assessment.
- e. The characteristics as defined above are present and cause an adverse effect on educational performance in the classroom or learning environment.

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3. Evaluation Procedures

Evaluation shall include the following:

- (1) documentation of identifiable atypical development by the appropriate team member(s);
- (2) measurement of developmental skills using individually administered procedures;
- (3) when continued eligibility is determined (past the child's seventh birthday), a licensed school psychologist, licensed psychological examiner or licensed psychologist shall conduct a comprehensive psycho-educational evaluation which measures developmental skills, cognitive functioning, and/or additional areas as determined by the child's IEP Team,
- (4) examination of developmental strengths and needs of the child gathered from observation(s);
- (5) observation by a qualified professional in an environment natural for the child which may include the school, child-care agency, and/or home/community to document delayed or atypical development,
- (6) interview with the parent to discuss and confirm the noted strengths and needs in the child's development;
- (7) a review of any existing records or data; and
- (8) documentation, including observation and/or assessment, of how Developmental Delay adversely affects educational performance in the classroom or learning environment.

4. Evaluation Participants

Information shall be gathered from the following persons in the evaluation of Developmental Delay:

- (1) the parent;
- (2) the child's general education classroom teacher (with a child of less than school age, an individual qualified to teach a child of his/her age), and two or more of the following persons:
 - (a) a licensed school psychologist, licensed psychologist, licensed senior psychological examiner, or licensed psychological examiner;
 - (b) a licensed early childhood special education teacher or special education teacher with pre-school experience;
 - (c) a licensed speech/language specialist;
 - (d) licensed related services and medical specialists; and
 - (e) other personnel as indicated.

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EMOTIONAL DISTURBANCE

1. Definition

Emotional Disturbance means a disability exhibiting one or more of the characteristics as listed in the State adopted eligibility criteria over a long period of time and to a marked degree that adversely affects a child's educational performance. The term includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an Emotional Disturbance.

2. Eligibility Standards

- a. A child shall manifest to a marked degree and over an extended period of time (during which time documentation of informal assessments and interventions are occurring) one or more of the following characteristics:
 - (1) inability to learn which cannot be explained by limited school experience, cultural differences, or intellectual, sensory, or health factors;
 - (2) inability to build or maintain satisfactory interpersonal relationships with peers and school personnel;
 - (3) inappropriate types of behavior or feelings when no major or unusual stressors are evident;
 - (4) general pervasive mood of unhappiness or depression;
 - (5) tendency to develop physical symptoms or fears associated with personal or school problems.
- b. The term may include other mental health diagnoses. The term does not apply to children who are socially maladjusted, unless it is determined that they have an Emotional Disturbance. Social maladjustment includes, but is not limited to, substance abuse related behaviors, gang-related behaviors, oppositional defiant behaviors, and/or conduct behavior problems.
- c. The characteristics as defined above are present and cause an adverse effect on educational performance in the classroom or learning environment.

3. Evaluation Procedures

Each child shall have a multifaceted evaluation for initial placement that includes, but is not limited to, the following:

- (1) visual or auditory deficits ruled out as the primary cause of atypical behavior(s);
- (2) physical conditions ruled out as the primary cause of atypical behavior(s);
- (3) specific behavioral data, including documentation of previous interventions and an evaluation of the locus of control of behavior to include internal and external factors;
- (4) direct and anecdotal observations over time and across various settings by three or more licensed professionals;

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- (5) individual assessment of psycho-educational strengths and weaknesses, including intelligence, behavior, and personality factors, taking into account any exceptionality of the individual in the choice of assessment procedures;
- (6) individual educational assessment (criterion- or norm-referenced) including direct measures of classroom performance to determine the student's strengths and weaknesses;
- (7) review of past educational performance;
- (8) comprehensive social history collected directly from the child's parent/guardian, custodial guardian, or if necessary, from an individual with intimate knowledge of the child's circumstances, history, or current behaviors. A comprehensive social assessment shall include family history, family-social interactions, developmental history, medical history (including mental health), and school history (including attendance and discipline records); and
- (9) documentation, including observation and/or assessment, of how Emotional Disturbance adversely affects educational performance in the classroom or learning environment

4. Evaluation Participants

Information shall be gathered from the following persons in the evaluation of Emotional Disturbance:

- (1) the parent;
- (2) the child's general education classroom teacher(s);
- (3) a licensed school psychologist, licensed psychologist, licensed psychological examiner (under the direct supervision of a licensed psychologist), licensed senior psychological examiner, or licensed psychiatrist; and
- (4) other professional personnel (mental health service providers, special education teachers, school social workers), as indicated.

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FUNCTIONAL DELAY

1. Definition

Functional Delay means a continuing significant disability in intellectual functioning and achievement which adversely affects the student's ability to progress in the general school program, but adaptive behavior in the home or community is not significantly impaired and is at or near a level appropriate to the student's chronological age.

2. Eligibility Standards

a. A child shall meet all of the following:

(1) significantly impaired intellectual functioning which is two or more standard deviations below the mean, with consideration given to the standard error of measurement for the test at the 68th percent confidence level, on an individually administered, standardized measure of intelligence; Interpretation of evaluation results shall take into account factors that may affect test performance including:

- (a) limited English proficiency;
- (b) cultural factors;
- (c) medical conditions that impact school performance;
- (d) environmental and economic factors;
- (e) communication, sensory or motor disabilities.

Difficulties in these areas cannot be the primary reason for significantly impaired scores on measures of intellectual functioning;

(2) deficient academic achievement which is at or below the fourth percentile in two or more total or composite scores in the following areas:

- (a) basic reading skills;
- (b) reading fluency skills;
- (c) reading comprehension;
- (d) mathematics calculation;
- (e) mathematics problem solving;
- (f) written expression.

(3) home or school adaptive behavior scores that fall above the level required for meeting Mental Retardation eligibility standards.

b. The characteristics as defined above are present and cause an adverse effect on educational performance in the classroom or learning environment.

3. Evaluation Procedures

Evaluation shall include the following:

- (1) intellectual functioning determined by the appropriate evaluation of cognitive/intellectual abilities;

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- (2) evaluation of achievement with individually administered assessments in the areas of basic reading skills, reading fluency skills, reading comprehension, mathematics computation, mathematics problem solving, and written expression;
- (3) adaptive behavior determined by scores on appropriate standardized individual instruments from the home or school, with scores that fall above the level required for meeting Mental Retardation eligibility standards; and
- (4) documentation, including observation and assessment, of how functional delay adversely affects educational performance in the classroom or learning environment.

4. Evaluation Participants

Information shall be gathered from the following persons in the evaluation of Functional Delay:

- (1) the parent;
- (2) the child's general education classroom teacher;
- (3) the special education teacher;
- (4) a licensed school psychologist, licensed psychologist, licensed senior psychological examiner, or licensed psychological examiner; and
- (5) other professional personnel, as indicated.

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HEARING IMPAIRMENT

1. Definition

Hearing Impairment means an impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance but does not include Deafness.

2. Eligibility Standards

- a. A child shall have one or more of the following characteristics:
 - (1) inability to communicate effectively due to a Hearing Impairment;
 - (2) inability to perform academically on a level commensurate with the expected level because of a Hearing Impairment;
 - (3) delayed speech and/or language development due to a Hearing Impairment.
- b. The characteristics as defined above are present and cause an adverse effect on educational performance in the classroom or learning environment.

3. Evaluation Procedures

Evaluation shall include the following:

- (1) audiological evaluation;
- (2) evaluation of speech and language performance;
- (3) school history and levels of learning or educational performance;
- (4) observation of classroom performance;
- (5) documentation, including observation and or assessment, of how Hearing Impairment adversely affects educational performance in the classroom or learning environment.

4. Evaluation Participants

Information shall be gathered from the following persons in the evaluation of Hearing Impairment:

- (1) the parent;
- (2) the child's general education classroom teacher (with a child of less than school age, an individual qualified to teach a child of his/her age);
- (3) an audiologist or licensed physician;
- (4) a licensed speech/language teacher or specialist; and
- (5) other professional personnel, as indicated.

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INTELLECTUALLY GIFTED

1. Definition

“Intellectually Gifted” means a child whose intellectual abilities and potential for achievement are so outstanding that the child’s educational performance is adversely affected.

2. Eligibility Standards

- a. Evaluation of Intellectually Gifted shall include the following:
 - (1) assessment through a multi-modal identification process, wherein no singular mechanism, criterion or cut-off score is used for determination of eligibility;
 - (2) evaluation and assessment of the following components:
 - (a) educational performance or aptitude;
 - (b) creativity/characteristics of intellectual giftedness, and;
 - (c) cognition/intelligence.
- b. Eligibility for an individual child is based on analysis of this information. The screening and comprehensive assessment results must meet specific eligibility standards based on multiple criteria and multiple assessment measures.
- c. “Adverse affect” means the general curriculum alone is inadequate to appropriately meet the student’s educational needs.

3. Evaluation Procedures

Evaluation shall include the following:

- (1) systematic child-find to include at least one grade level screening and opportunities for individual screening in grades K-12 the areas of:
 - (a) educational performance or aptitude, and
 - (b) creativity/characteristics of giftedness.
- (2) a team review of individual screening results.
- (3) referral for individual comprehensive assessment based on results from individual screening information. Individual evaluation procedures shall include appropriate use of instruments that are sensitive to cultural, linguistic, and economic differences or sensory impairments. The comprehensive assessment shall include:
 - (a) individual evaluation of cognition or intellectual ability; and
 - (b) individual evaluation of educational performance and creativity/ characteristics of giftedness. The need for expanded assessment and evaluation in each of these areas is determined based on the results of the individual screening.
- (4) assessment procedures in the three component areas of evaluation shall be completed for program and services planning regardless of the standards used to make the final eligibility determination.

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- (5) assessment and documentation of how the child's Intellectual Giftedness adversely affects educational performance in the general education curriculum or learning environment.

4. Evaluation Participants

- a. Information shall be gathered from the following persons in the evaluation of Intellectual Giftedness:
 - (1) the parent;
 - (2) the child's referring teacher, or a general classroom teacher qualified to teach a child of his/her age, who is familiar with the student (with a child of less than school age, an individual qualified to teach a child of his/her age, who is familiar with the child); and when appropriate, in collaboration with the ESL teacher, when the child is an English Language Learner;
 - (3) a licensed school psychologist, licensed psychological examiner, licensed senior psychological examiner, or licensed psychologist;
 - (4) a licensed special education teacher and/or a licensed teacher who meets the employment standards in gifted education;
 - (5) other professional personnel, as indicated.
- b. At least one of the evaluation participants [4.a.(2), 4.a.(3), and 4.a.(5)] must be trained in the characteristics of gifted children.

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MENTAL RETARDATION

1. Definition

Mental Retardation is characterized by significantly impaired intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period that adversely affect a child's educational performance.

2. Eligibility Standards

a. A child shall meet all of the following:

- (1) significantly impaired intellectual functioning, which is two or more standard deviations below the mean, with consideration given to the standard error of measurement for the test at the 68th percent confidence level, on an individually administered, standardized measure of intelligence.
- (2) significantly impaired adaptive behavior in the home or community as determined by:
 - (a) a composite score on an individual standardized instrument to be completed with or by the child's principal caretaker which measures two standard deviations or more below the mean. Standard scores shall be used. A composite age equivalent score that represents a 50% delay based on chronological age can be used only if the instrument fails to provide a composite standard score.
 - (b) additional documentation, when appropriate, which may be obtained from systematic documented observations, impressions, developmental history by an appropriate specialist in conjunction with the principal caretaker in the home, community, residential program or institutional setting.
- (3) significantly impaired adaptive behavior in the school, daycare center, residence, or program as determined by:
 - (a) systematic documented observations by an appropriate specialist, which compare the child with other children of his/her chronological age group. Observations shall address age-appropriate adaptive behaviors. Adaptive behaviors to be observed in each age range include:
 - i. birth to 6 years – communication, self-care, social skills, and physical development;
 - ii. 6 to 13 years – communication, self-care, social skills, home living, community use, self-direction, health and safety, functional academics, and leisure;
 - iii. 14 to 21 years – communication, self-care, social skills, home-living, community use, self-direction, health and safety, functional academics, leisure, and work.
 - (b) when appropriate, an individual standardized instrument may be completed with the principal teacher of the child. A composite score on this instrument shall measure two standard deviations or more below the

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mean. Standard scores shall be used. A composite age equivalent score that represents a 50% delay based on chronological age can be used only if the instrument fails to provide a composite standard score.

- (4) Assessments and interpretation of evaluation results in evaluation standards 2.a.(1), 2.a.(2), and 2.a.(3) shall take into account factors that may affect test performance, including:
 - (a) limited English proficiency;
 - (b) cultural factors;
 - (c) medical conditions that impact school performance;
 - (d) environmental and economic factors;
 - (e) communication, sensory or motor disabilities;

Difficulties in these areas cannot be the primary reason for significantly impaired scores on measures of intellectual functioning, home, and school adaptive behavior.

- b. Developmental history (birth to age 18) which indicates delays in cognitive/intellectual abilities and a current demonstration of delays present in the child's' natural (home and school) environment.
- c. The characteristics as defined above are present and cause an adverse effect on educational performance in the classroom or learning environment.

3. Evaluation Procedures

Evaluation shall include the following:

- (1) intellectual functioning, determined by appropriate assessment of intelligence/cognitive abilities, adaptive behavior, norm- or criterion-referenced measures of academic achievement and relevant observations;
- (2) intellectual impairment manifested during the developmental period (birth to 18) as documented in background information and history; and
- (3) documentation, including observation and assessment of how Mental Retardation adversely affects educational performance in the classroom or learning environment.

4. Evaluation Participants

Information shall be gathered from the following persons in the evaluation of Mental Retardation:

- (1) the parent;
- (2) the child's general education classroom teacher;
- (3) the special education teacher;
- (4) a licensed school psychologist, licensed psychologist, licensed senior psychological examiner, or licensed psychological examiner; and
- (5) other professional personnel, as indicated.

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MULTIPLE DISABILITIES

1. Definition

Multiple Disabilities means concomitant impairments (such as Mental Retardation-Deafness, Mental Retardation-Orthopedic Impairment), the combination of which causes such severe educational needs that they cannot be accommodated by addressing only one of the impairments. The term does not include Deaf-Blindness.

2. Eligibility Standards

A child shall have the following characteristics:

- (1) meet the standards for two or more identified disabilities; and
- (2) have a combination of two or more disabilities, the nature of the combination of disabilities requiring significant developmental and educational programming that cannot be accommodated with special education programs by addressing any one of the impairments.

3. Evaluation Procedures

A child with Multiple Disabilities shall be evaluated by the procedures for each disability and shall meet the standards for two or more disabilities.

4. Evaluation Participants

Information shall be gathered from those persons designated for each disability in the evaluation of Multiple Disabilities.

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ORTHOPEDIC IMPAIRMENT

1. Definition

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

2. Eligibility Standards

A child shall meet the following:

- (1) medical documentation of Orthopedic Impairment;
- (2) the characteristics as defined above are present and cause an adverse effect on educational performance in the classroom or learning environment.

3. Evaluation Procedures

Evaluation shall include all of the following:

- (1) appropriate medical evaluation obtained from a licensed physician;
- (2) both social and physical adaptive behaviors (mobility and activities of daily living) which relate to Orthopedic Impairment;
- (3) documentation, including observation and/or assessment, of how Orthopedic Impairment adversely affects educational performance in the classroom or learning environment.

4. Evaluation Participants

Information shall be gathered from the following persons in the evaluation of Orthopedic Impairment:

- (1) the parent;
- (2) the child's general education classroom teacher(s);
- (3) a licensed physician; and
- (4) other professional personnel as indicated (e.g. special education teacher, OT, PT, assistive technology specialist).

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OTHER HEALTH IMPAIRMENT

1. 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, that is due to chronic or acute health problems such as asthma, Attention Deficit Hyperactivity Disorder, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia; Tourette Syndrome that adversely affects a child's educational performance.

2. Eligibility Standards

- a. A child is Other Health Impaired who has chronic or acute health problems that indicate a need for special education participation due to one of the following:
 - (1) impaired organizational or work skills;
 - (2) inability to manage or complete tasks;
 - (3) difficulty interacting with others;
 - (4) excessive health related absenteeism; or
 - (5) medications that affect cognitive functioning.
- b. The characteristics as defined above are present and cause an adverse effect on educational performance in the classroom or learning environment.

3. Evaluation Procedures

- a. Evaluation for initial eligibility shall include the following:
 - (1) a medical evaluation from a licensed physician that includes:
 - (a) the diagnosis and prognosis of the child's health impairment;
 - (b) information, as applicable, regarding medications;
 - (c) special health care procedures, special diet and/or activity restrictions.The evaluation report used for initial eligibility shall be current within one year.
 - (2) a comprehensive developmental or educational assessment that indicates how Other Health Impairment affects the student's educational performance and documents at least one of the following deficit skills:
 - (a) pre-academics or academic functioning;
 - (b) adaptive behavior;
 - (c) social/emotional development; or
 - (d) motor or communications skills.
- b. When assessment information indicates significant deficits in cognitive/academic functioning, a psycho-educational evaluation shall be considered.

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- c. documentation, including observation and/or assessment, of how Other Health Impairment adversely affects educational performance in the classroom or learning environment.

4. Evaluation Participants

Information shall be gathered from the following persons in the evaluation of Other Health Impairment:

- (1) the parent;
- (2) the child's general education classroom teacher;
- (3) a licensed physician;
- (4) a special education teacher; and
- (5) other professional personnel as indicated.

PROPOSED DISABILITY STANDARDS

SPECIFIC LEARNING DISABILITIES

1. Definition

- a. The term Specific Learning Disability means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations, and that adversely affect a child's educational performance. Such term includes conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. Specific Learning Disability does not include a learning problem that is primarily the result of visual, hearing, or motor disabilities; Mental Retardation; Emotional Disturbance; limited English proficiency; environmental, cultural, or economic disadvantage.
- b. When determining whether a child has a Specific Learning Disability, a State Education Agency must not require but may permit the use of a severe discrepancy between achievement and intellectual ability in oral expression, listening comprehension, written expression, basic reading skills, reading fluency skills, reading comprehension, mathematics calculation, or mathematics problem solving.

2. Eligibility Standards

For any child suspected of having a Specific Learning Disability, ***all of the following standards must be met:***

- (1) To ensure that underachievement in a child is not due to a lack of appropriate,¹ scientifically-validated instruction² in reading and math, the following must be considered as part of the evaluation:
 - (a) data that demonstrate that prior to, or as a part of, the referral process, the child was provided appropriate, scientifically-validated instruction in regular education settings, delivered by appropriately-trained personnel; and
 - (b) progress monitoring data (data-based documentation of repeated assessments of achievement at frequent³ intervals), and provided⁴ to the child's parents which reflect formal assessment of student progress during instruction.
- (2) Documentation from one of two assessment/identification methods:
 - (a) Responsiveness to Intervention (RTI) Method of Identification:
Response to Intervention (RTI) is a set of systematic and data-based

¹§ 300.309(a)(1) "...for the child's age or State-approved grade-level standards." For purpose of documenting interventions in general education prior to referral "appropriate" refers to the child's State-approved grade-level standards.

² Rigorous, well-designed, objective, and systematic studies validated in the settings where they are to be implemented and assessed with positive results through some type of peer review. *Specific Learning Disabilities: Finding Common Ground*. Learning Disabilities Roundtable Report. July 25, 2002, page 10

³ At least one data point per week in each area of academic concern

⁴ Every 3 to 4 weeks at a minimum

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instructional processes for identifying, defining, and resolving students' academic and/or behavioral problems. Response to Intervention is a multi-tiered approach to provide services and interventions to struggling learners at increasing levels of intensity. The Response to Intervention method of identifying Specific Learning Disabilities must include at a minimum:

- i. documentation of a state-approved systematic process using a continuum of intervention options to determine if the child responds to scientific, research-based interventions.
- ii. high-quality instruction and behavioral supports provided by appropriately trained personnel;
- iii. scientifically-validated interventions appropriate for suspected area of disability;
- iv. frequent, ongoing progress monitoring to evaluate the effectiveness of the interventions and inform instruction that includes:
 - data-based documentation to illustrate the student's response to the intervention(s);
 - data-based documentation of intervention integrity, fidelity to design, and intensity; and
- v. periodic collaborative team review of student outcome data taking into account LEA-determined decision points.

OR

- (b) Discrepancy Method of Identification: A severe discrepancy between educational performance and predicted achievement that is based on the best measure of cognitive ability. A severe discrepancy between educational performance and predicted achievement that is based on the best measure of cognitive ability is defined by at least 1.5 Standard Deviations (considering Standard Error of the Estimate) when utilizing regression-based discrepancy analyses described in Tennessee's guidelines for evaluation of Specific Learning Disabilities (*Specific Learning Disabilities Assessment Resource Packet* on web at: <http://www.state.tn.us/education/speced/seassessment/>).
- (3) The child does not achieve at a level or rate adequate for the child's age or to meet State-approved grade level standards in one or more of the following areas when provided with learning experiences and instruction appropriate for the child's age or State-approved grade-level standards:
- (a) Oral expression;
 - (b) Listening comprehension;
 - (c) Written expression;
 - (d) Basic reading skills;
 - (e) Reading fluency skills;
 - (f) Reading comprehension;

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- (g) Mathematics calculation;
- (h) Mathematics problem solving.
- (4) The child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, State-approved grade-level standards, or intellectual development that is determined to be relevant to the identification of a Specific Learning Disability.
- (5) There shall be evidence that the child's learning problems are not due *primarily* to visual, hearing, or motor disabilities; Mental Retardation; Emotional Disturbance; environmental, cultural, or economic disadvantage; limited English proficiency; motivational factors; or situational trauma (i.e., temporary, sudden, or recent change in the student's life).
- (6) The characteristics as defined above are present and cause an adverse effect on educational performance in the classroom or learning environment.

3. Evaluation Procedures

Evaluation shall include ***all*** of the following:

(1a) RTI Method of Identification:

- (a) non-responsiveness to scientifically-based interventions supported by comprehensive curriculum-based data; and
- (b) rule-out other disabilities or factors through administration of an individual, standardized brief scale of intelligence;

OR

(1b) Discrepancy Method of Identification:

- (a) progress monitoring data in the identified deficit academic area(s) from sources such as group or individually administered achievement tests, criterion-referenced assessments, or curriculum/performance-based assessments;
 - (b) an individual standardized multifactorial assessment of cognitive ability; and
 - (c) an individual standardized assessment of academic achievement;
- (2) at least two documented observations of the child's educational performance in the general education classroom including:
- (a) an indirect observation by the child's general education classroom teacher; and
 - (b) a direct observation by a professional other than the person providing the indirect observation (observations shall address the child's academic behaviors, academic performance, and relevant work samples);
- (3) parental input and, as appropriate, the child's input;
- (4) documentation that the child's learning problems are not *primarily* due to:
- (a) lack of appropriate instruction in reading and math;
 - (b) limited English proficiency;

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- (c) visual, hearing, or motor disability;
 - (d) Mental Retardation;
 - (e) Emotional Disturbance;
 - (f) environmental, cultural, or economic factors;
 - (g) motivational factors;
 - (h) situational trauma.
- (5) documentation, including observation and assessment of how Specific Learning Disabilities adversely affect educational performance in the classroom or learning environment.

4. Evaluation Participants

Information shall be gathered from the following persons in the evaluation of a Specific Learning Disability:

- (1) the parent;
- (2) the child's general education classroom teacher;
- (3) a licensed school psychologist, licensed psychological examiner, licensed senior psychological examiner, or licensed psychologist;
- (4) at least one person qualified to conduct an individual diagnostic evaluation such as a licensed special education teacher, licensed speech-language teacher/therapist or licensed remedial reading teacher/specialist; and
- (5) other professional personnel as indicated.

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SPEECH OR LANGUAGE IMPAIRMENT

1. Definition

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

2. Eligibility Standards

- a. Speech or Language Impairment shall be determined through the demonstration of impairments in the areas of language, articulation, voice, or fluency.
 - (1) Language Impairment – A significant deficiency not consistent with the student's chronological age in one or more of the following areas:
 - (a) a deficiency in receptive language skills to gain information;
 - (b) a deficiency in expressive language skills to communicate information;
 - (c) a deficiency in processing (auditory perception) skills to organize information.
 - (2) Articulation Impairment – A significant deficiency in ability to produce sounds in conversational speech which is not consistent with chronological age.
 - (3) Voice Impairment – An excess or significant deficiency in pitch, intensity, or quality resulting from pathological conditions or inappropriate use of the vocal mechanism.
 - (4) Fluency Impairment – Abnormal interruption in the flow of speech by repetitions or prolongations of a sound, syllable, or by avoidance and struggle behaviors.
- b. Speech or Language deficiencies identified cannot be attributed to characteristics of second language acquisition and/or dialectical differences.
- c. The characteristics as defined above are present and cause an adverse effect on educational performance in the classroom or learning environment.

3. Evaluation Procedures

- a. Language Impairment – a significant deficiency in language shall be determined by:
 - (1) an analysis of receptive, expressive, and/or composite test scores that fall at least 1.5 standard deviations below the mean of the language assessment instruments administered; and
 - (2) a minimum of two measures shall be used, including criterion-referenced and/or norm-referenced instruments, functional communication analyses, and language samples. At least one standardized comprehensive measure of language ability shall be included in the evaluation process.Evaluation of language abilities shall include the following:
 - (a) hearing screening;

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- (b) receptive language: vocabulary, syntax, morphology;
 - (c) expressive language: mean length of utterance, syntax, semantics, pragmatics, morphology; and
 - (d) auditory perception: selective attention, discrimination, memory, sequencing, association, and integration.
- (3) documentation, including observation and/or assessment, of how Language Impairment adversely affects educational performance in the classroom or learning environment.
- b. Articulation Impairment – a significant deficiency in articulation shall be determined by one of the following:
 - (1) articulation error(s) persisting one year beyond the highest age when 85% of students have acquired the sounds based upon current developmental norms; or
 - (2) evidence that the child’s scores are at a moderate, severe, or profound rating on a measure of phonological processes; or
 - (3) misarticulations that interfere with communication and attract adverse attention.

Evaluation of articulation abilities shall include the following:

 - (a) appropriate formal/informal instrument(s);
 - (b) stimulability probes;
 - (c) oral peripheral examination; and
 - (d) analysis of phoneme production in conversational speech.
 - (4) documentation, including observation and/or assessment, of how Articulation Impairment adversely affects educational performance in the classroom or learning environment.
- c. Voice Impairment – evaluation of vocal characteristics shall include the following:
 - (1) hearing screening;
 - (2) examination by an otolaryngologist;
 - (3) oral peripheral examination; and
 - (4) documentation, including observation and/or assessment, of how Voice Impairment adversely affects educational performance in the classroom or learning environment.
- d. Fluency Impairment – evaluation of fluency shall include the following:
 - (1) hearing screening;
 - (2) information obtained from parents, students, and teacher(s) regarding non-fluent behaviors/attitudes across communication situations;
 - (3) oral peripheral examination; and
 - (4) documentation, including observation and/or assessment, of how Fluency Impairment adversely affects educational performance in the classroom or learning environment.

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4. Evaluation Participants

Information shall be gathered from the following persons in the evaluation of a Speech or Language Impairment:

- (1) the parent;
- (2) the child's general education classroom teacher;
- (3) a licensed speech/language teacher or therapist;
- (4) a licensed otolaryngologist (for voice impairments only); and
- (5) other professional personnel, as indicated.

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TRAUMATIC BRAIN INJURY

1. Definition

Traumatic Brain Injury means an acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a child's educational performance. The term applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual, and motor abilities; psychosocial behavior; physical functions; information processing; and speech. The term does not apply to brain injuries that are congenital or degenerative, or to brain injuries induced by birth trauma.

2. Eligibility Standards

- a. A child shall meet all of the following:
 - (1) an insult to the brain caused by an external force that may produce a diminished or altered state of consciousness; and
 - (2) the insult to the brain induces a partial or total functional disability and results in one or more of the following:
 - (a) Physical impairments such as, but not limited to:
 - i. speech, vision, hearing, and other sensory impairments,
 - ii. headaches,
 - iii. fatigue,
 - iv. lack of coordination,
 - v. spasticity of muscles,
 - vi. paralysis of one or both sides,
 - vii. seizure disorder.
 - (b) Cognitive impairments such as, but not limited to:
 - i. attention or concentration,
 - ii. ability to initiate, organize, or complete tasks,
 - iii. ability to sequence, generalize, or plan,
 - iv. flexibility in thinking, reasoning or problem solving,
 - v. abstract thinking,
 - vi. judgment or perception,
 - vii. long-term or short term memory, including confabulation,
 - viii. ability to acquire or retain new information,
 - ix. ability to process information/processing speed.
 - (c) Psychosocial impairments such as, but not limited to:
 - i. impaired ability to perceive, evaluate, or use social cues or context appropriately that affect peer or adult relationships,

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- ii. impaired ability to cope with over-stimulation environments and low frustration tolerance,
 - iii. mood swings or emotional lability,
 - iv. impaired ability to establish or maintain self-esteem,
 - v. lack of awareness of deficits affecting performance,
 - vi. difficulties with emotional adjustment to injury (anxiety, depression, anger, withdrawal, egocentricity, or dependence),
 - vii. impaired ability to demonstrate age-appropriate behavior,
 - viii. difficulty in relating to others,
 - ix. impaired self-control (verbal or physical aggression, impulsivity); inappropriate sexual behavior or disinhibition; restlessness, limited motivation and initiation,
 - x. intensification of pre-existing maladaptive behaviors or disabilities.
- b. The term does not apply to brain injuries that are congenital or degenerative, or to brain injuries induced by birth trauma.
- c. The characteristics as defined above are present and cause an adverse effect on educational performance in the classroom or learning environment.

3. Evaluation Procedures

Evaluations shall include the following:

- (1) appropriate medical statement obtained from a licensed physician;
- (2) parent/caregiver interview;
- (3) educational history and current levels of educational performance;
- (4) functional assessment of cognitive/communicative abilities;
- (5) social adaptive behaviors which relate to Traumatic Brain Injury;
- (6) physical adaptive behaviors which relate to Traumatic Brain Injury; and
- (7) documentation, including observation and/or assessment of how Traumatic Brain Injury adversely affects educational performance in the classroom or learning environment.

4. Evaluation Participants

Information shall be gathered from the following persons in the evaluation of Traumatic Brain Injury:

- (1) the parent;
- (2) the child's general education or special education teacher, as appropriate;
- (3) a licensed physician; and
- (4) other professional personnel, as indicated.

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VISUAL IMPAIRMENT

1. Definition

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

2. Eligibility Standards

- a. The child shall meet at least one of the following:
 - (1) visual acuity in the better eye or both eyes with best possible correction:
 - (a) legal blindness – 20/200 or less at distance and/or near;
 - (b) low vision – 20/50 or less at distance and/or near.
 - (2) visual field restriction with both eyes:
 - (a) legal blindness – remaining visual field of 20 degrees or less;
 - (b) low vision – remaining visual field of 60 degrees or less;
 - (c) medical and educational documentation of progressive loss of vision, which may in the future affect the student's ability to learn visually.
 - (3) other Visual Impairment, not perceptual in nature, resulting from a medically documented condition.
- b. The characteristics as defined above are present and cause an adverse effect on educational performance in the classroom or learning environment.

3. Evaluation Procedures

Evaluation of Visual Impairment shall include the following:

- (1) evaluation by an ophthalmologist or optometrist that documents the eye condition with the best possible correction;
- (2) a written functional vision and media assessment, completed or compiled by a licensed teacher of students with visual impairments that includes:
 - (a) observation of visual behaviors at school, home, or other environments;
 - (b) educational implications of eye condition based upon information received from eye report;
 - (c) assessment and/or screening of expanded core curriculum skills (orientation and mobility, social interaction, visual efficiency, independent living, recreation and leisure, career education, assistive technology, and compensatory skills) as well as an evaluation of the child's reading and writing skills, needs, appropriate reading and writing media, and current and future needs for braille;
 - (d) school history and levels of educational performance; and
- (3) documentation, including observation and/or assessment, of how Visual Impairment adversely affects educational performance in the classroom or learning environment.

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4. Evaluation Participants

Information shall be gathered from the following persons in the evaluation of Visual Impairment:

- (1) the parent;
- (2) an ophthalmologist or optometrist;
- (3) a licensed teacher of students with Visual Impairments;
- (4) a general education classroom teacher; and
- (5) other professional personnel, as indicated (e.g., low vision specialist, orientation and mobility instructor, school psychologist).