

Eligibility Determination and Writing Reports

Speech Language Pathologists and
Speech Therapists Webinar Series

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VISION

To create a world-class educational system that gives students the knowledge and skills to be successful in college and the workforce, and to flourish as parents and citizens

MISSION

To provide leadership through the development of policy and accountability systems so that all students are prepared to compete in the global community

1. All Students Proficient and Showing Growth in All Assessed Areas
2. Every Student Graduates from High School and is Ready for College and Career
3. Every Child Has Access to a High-Quality Early Childhood Program
4. Every School Has Effective Teachers and Leaders
5. Every Community Effectively Uses a World-Class Data System to Improve Student Outcomes
6. Every School and District is Rated “C” or Higher

SLP Webinar Series

- The MDE and MSHA are collaborating on this series to bring SLP/SLT-specific topics in a convenient format.
- Join the SLP listserv to receive registration links and other relevant news.
- The next webinar will be on April 4.

Evaluation Procedures

Parental Permission

- Parental permission must be obtained before screening individual students.
- Parental permission is not necessary for universal screeners such as STAR, Dyslexia screening, or K-1 language/speech screening.

Hearing Screening

- Should be conducted by a health care professional (may include SLP)
- Shall include pure tone screening at 1000, 2000, and 4000 Hz at 25db
- Optional: 6000 and 8000 Hz at 25dB and 500 Hz at 30 dB

Hearing Screening

- If the child fails the first screener, a second screener may be rescheduled for 7 calendar days later.
 - A second screening is not required if there is evidence that the child is unable to hear or if it is unlikely s/he will be able to be conditioned.
- If the child fails the second screening, or is unable to be conditioned, a follow up must be made with a qualified professional, such as an audiologist or otolaryngologist.
 - If the child passes with the audiologist or otolaryngologist, a statement of adequate hearing by this professional is sufficient to proceed forward.

Hearing Screening

- If the child's hearing cannot be formally determined by a qualified professional but there is evidence that a disability exists:
 - MET can continue with the comprehensive assessment and eligibility determination while taking the results of the audiological assessment into consideration.
 - Use appropriate assessment tools and methods.
 - Report any deviations from the standard assessment procedures.

Hearing Screening

- An evaluation of a child's hearing by a licensed or certified audiologist or otolaryngologist shall include all of the components of a complete hearing evaluation to be used in determining the eligibility of Hearing Impairment as defined by MDE policy.
- These evaluation guidelines can be found on page 308 at http://www.mde.k12.ms.us/docs/special-education-library/part-34-rule-74-19_20160614161027_365113.pdf?sfvrsn=2.

Hearing Screening

- Note: If the child can not be conditioned, Part II-A of MDE's Hearing/Vision Screening Report or some other developmentally appropriate quantitative description of the child's hearing may be used. This must be completed by someone who a) works with the child, b) has knowledge of the child's hearing, and c) is trained in recognizing developmentally appropriate hearing behavior. If the child can not be conditioned after 2 attempts, *even if the quantitative checklist is utilized*, the child must be referred to a qualified examiner before the comprehensive evaluation can continue.

Language/Speech Screening

- SLP may conduct a screening during the assessment process (ST may conduct an articulation screening). The screening may include:
 - Observation(s)
 - Review of records, data and other information specific to the student
 - Administration of a published and/or non-published screener(s) and other screening methods (i.e. non-word repetition tasks, rapid word recall tasks, checklist(s), etc.)

K-1 Speech/Language Screening

The law requires that the LEA:

- Adopt a policy to ensure that students will be screened by a 215AA licensed Speech-Language Pathologist by the end of grade 1 in the areas of articulation, language, voice, and fluency.
- Notify parents if the student fails the screener.

K-1 Speech/Language Screening

- If a student fails the screener, the school district, at its discretion, may perform a comprehensive evaluation.
- If the parent chooses to get an outside evaluation by a qualified professional, the district must consider the evaluation for purposes of determining eligibility.
- Parents may opt out of the screening if they choose.

Multi-Disciplinary Evaluation Team (MET)

The MET should include an SLP when:

- further language/speech assessment is needed
- any of the following are a suspected disability:
 - Autism
 - Developmentally Delayed
 - Hearing Impairment (if applicable)
 - Language/Speech Impairment
 - Specific Learning Disability
 - Traumatic Brain Injury

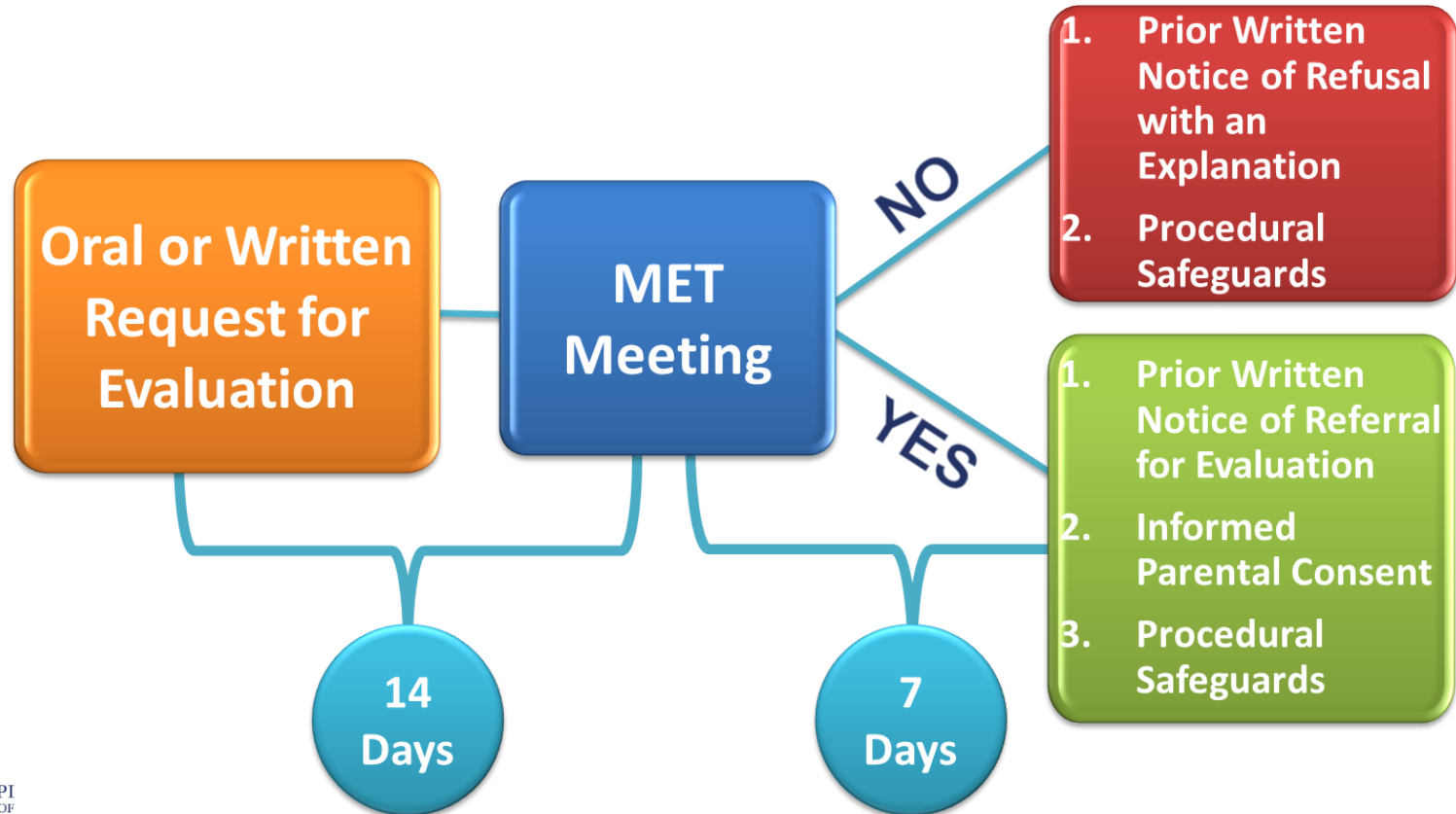
Evaluation Procedures

- MDE Special Education policies and procedures **MUST** be followed when conducting an evaluation. This includes but is not limited to State Board Policy 74.19:
 - Child with a Disability (300.8) and Special Education (300.39)
 - Evaluation Procedures, Additional Requirements for Evaluations and Reevaluations, Determination of Eligibility, Specific Learning Disabilities, Additional Group Members, Determining the Existence of a Specific Learning Disability (SLD), Observation, and Specific Documentation for the Eligibility Determination (300.304 through 300.311)
 - Special Education Eligibility Determination Guidelines

Best Practice

It is always recommended that SLPs refer to the American Speech-Language-Hearing Association (ASHA) for best practices.

Referral to Assessment Process



Definition of Current Data

Definition of Current	Types of Existing Records
No more than one (1) year old at the time the parent signs consent	<ul style="list-style-type: none">• Intelligence measures• Hearing screening and follow-up evaluations• Vision screening and follow-up evaluations• Physical examinations
Definition of Current	Types of Existing Records
No more than six (6) months old at the time the parent signs consent	<ul style="list-style-type: none">• Teacher Narrative (Appendix EE.I)• Achievement measures• Social, behavioral, adaptive, and emotional measures• Language/speech assessments• Motor assessments• Curriculum-based assessments
No more than three (3) months old at the time the parent signs consent	<ul style="list-style-type: none">• Developmental History (Appendix EE.H)• Developmental instruments

Standardized Test Selection

SLP Test Comparison

Tests were selected for inclusion in this publication because of reported use by Virginia School SLP manuals and examine diagnostic accuracy (sensitivity and specificity) and normative samples prior to 2010. Tests were selected for inclusion in this publication because of reported use by Virginia School SLP manuals and examine diagnostic accuracy (sensitivity and specificity) and normative samples prior to 2010. *Explanation of the terms used in the table:*

TEST	LANGUAGE AREAS	LITERACY AREAS	DIALECT CONSIDERATIONS	RACE/ETHNICITY OF NORMING SAMPLE
Clinical Evaluation of Language Fundamentals, 5th (CELF-5)	Semantics, Morphology, Syntax, Pragmatics	Supplementary Ages 8-21; Reading Comprehension Structured Writing	African American English (AAE), Southern English, Spanish-Influenced English, Asian-Influenced English (Pg. 277)	White (56.8%), Hispanic (20%), African American (13.8%), Asian (3.6%), Other (5.9%)
Assessment of Literacy and Language (ALL)	Semantics, Phonology, Morphology, Syntax	Letter Knowledge, Rhyming, Print Awareness	African American English	Spring Sample: African American (15.3%), Hispanic (18%), White (61.3%), Other (5.3%)
Test for Examining Expressive Morphology (TEEM)	Morphology	None	Not Reported	Not Reported
Structured Photographic Expressive Language Test – Third Edition (SPELT-III)	Morphology	None	African American English	African American (16.1%), White (65.5%), Hispanic (11.2%), Other (7.2%)
Structured Photographic Expressive Language Test – Second Edition, Preschool (SPELT-P2)	Morphology	None	African American English	African American (12.5%), White (72.8%), Hispanic (8.6%), Other (6.1%)
Preschool Language Scales – Fifth Edition (PLS-5)	Semantics, Morphology, Syntax	Print Awareness; Alphabet Knowledge; Initial Sounds, Rhyming, Morphological Awareness	African American English, Appalachian English, Southern English, English Influenced By Chinese, English Influenced By Spanish	African American (11.6%), Asian (4%), Hispanic (18%), White (60.7%), Other (5.7%)
Test of Language Development – Primary: Fourth Edition (TOLD-P:4)	Semantics, Phonology, Morphology, Syntax	Syllable Segmentation	None	European American (78%), African American (15%), American Indian/Eskimo (1%), Asian/Pacific Islander (4%), Two Or More (2%), Other (<1%)
Test of Language Development – Intermediate: Fourth Edition (TOLD-I:4)	Semantics, Syntax, Morphology	None	None	European American (78%), African American (14%), American Indian/Eskimo (1%), Asian/Pacific Islander (5%), Two Or More (2%), Other (<1%)

Report Writing

Assessment Report

- The following **MUST** be addressed in the Assessment Report:
 1. A statement indicating if the child's communication difficulties are impacted by a cultural/dialectical difference, maturational development, lack of stimulation in the child's environment, lack of educational instruction, and/or limited English proficiency
 2. Results of the hearing screening and any follow up information, if applicable

Assessment Report

3. Observation of communication in the classroom or current setting and/or report of the child's effectiveness from the classroom teacher/childcare provider
4. Parent interview/report regarding communication abilities
5. Report of child's overall performance in the classroom or current setting
6. Scores of any standardized test completed by an SLP (articulation may be completed by an ST)

Assessment Report

7. Additional assessments completed by an SLP/ST should include at least one of the following:
 - Criterion-referenced language measures
 - Curriculum-based language assessments, and/or
 - Assessment of overall communicative ability
8. Formal and/or informal assessment of communication in conversational speech

Educational Impact

9. Documentation of the adverse impact that communication has on academic, social/behavioral or vocational performance:
 - Oral performance
 - Listening/comprehension
 - Pre-literacy/literacy
 - Pre-writing/writing
 - Pragmatic interaction with others
 - Reaction of self, peers, and/or others
 - For preschool children, how communication affects the child's participation in appropriate activities

Additional Assessment Requirements

- Additional documentation is required when the following are areas of concern:
 - Fluency
 - Description of the types of dysfluencies
 - Documentation on the severity of the dysfluencies
 - Documentation of any secondary characteristics
 - Documentation of when and where the dysfluencies occur

Additional Assessment Requirements

- Voice
 - Oral-peripheral examination
 - Documentation that a 10 calendar-day interval between measures were observed
 - Formal or informal measures including observation during or prior to the assessment process
 - Documentation of a physical examination/voice evaluation conducted by the appropriate medical specialist (Report of Physical Observation)

Additional Assessment Requirements

- Articulation/Phonology
 - Oral-peripheral examination
 - Documentation of intelligibility based on a standardized measure AND/OR conversation/elicited speech throughout the evaluation
 - Documentation of stimulability
 - If the child does not respond to a formal articulation test, conduct an articulation inventory including sounds in the child's repertoire and phonemes elicited through imitation

Additional Considerations

- Optional: For moderate or severe articulation, an assessment of phonological processes may be warranted (may use standardized testing instruments)
 - In this case, noted phonological processes should be identified, documented, and described in the language/speech evaluation.
 - If the child does present with a phonological processing disorder, this may suggest a possible language disorder and may warrant additional testing in language.**

****Articulation may be assessed by a Speech Therapist (216); however, phonological processing assessments should be completed by a Speech-Language Pathologist (215).**

Additional Considerations

- Language
 - Documentation of the type of language deficit (i.e. syntax, pragmatics, etc.)
 - After data has been collected, the DYNAMIC ASSESSMENT APPROACH may be utilized during the remainder of the 60-day testing timeline (Dynamic Assessment will be defined on the next slide)
 - Include Dynamic Assessment data in the report/SLP's portion of the report to assist with appropriate eligibility determination

Dynamic Assessment

- The SLP may train a designated teacher, teacher assistant or other appropriate personnel to address specific targets using a specific method in the general education setting.
 - Instruction may be individual or whole group
- This data is analyzed and reviewed with the classroom teacher on a weekly basis
- The SLP may also collect data using dynamic assessment during the 60-day assessment period

Dynamic Assessment

- If the child makes sufficient progress:
 - The SLP and teacher may reduce the amount of support instruction the child is receiving.
 - Maintain data and analyze it with the teacher every week for progress.
- If the child has made little or no progress:
 - Review the strategies and methods being used for support
 - Are they being effectively implemented? Make adjustments as needed.
 - Maintain data and include this information in the eligibility determination.

Other Considerations

- Autism
 - As part of the comprehensive evaluation for a child suspected of having Autism, the language/speech evaluation shall be completed by a Speech - Language Pathologist (215).
 - Documentation of prosody - a statement that either unusual or typical prosody was observed is sufficient.
 - Pragmatic language must also be assessed.

Other Considerations

- Developmentally Delayed
 - If the child is suspected of having a developmental delay and exhibits language deficits, the SLP (215) should determine if further language assessments are warranted based on previous data collections, such as screening, observations, etc.
 - All previously included evaluation components are to be included in the report (slides #5-6).

Other Considerations

- Specific Learning Disability
 - When a language/speech evaluation is warranted, include all 9 previously mentioned evaluation components (slides #5-6)
- Other Health Impairment and/or Hearing Impairment
 - The SLP (215) may be consulted when a child presents with a complex medical condition that impacts motor control and/or swallowing or a diagnosed hearing loss.
 - The MET or IEP committee shall determine whether a child needs the SLP consultation in this case

Other Considerations

- Augmentative/Alternative Communication (AAC):
 - When an AAC evaluation is considered necessary, it should be documented as part of a comprehensive communication assessment.
 - If the MET decides to evaluate for AAC, this may be addressed by a Speech-Language Pathologist (215).

Additional Evaluation Considerations

- Interventions are NOT required for the eligibility determination in language/speech.
- The SLP (215) may be a member of the MET, and shall complete the language evaluation.

Assessment Report

- At the completion of the data collection, all findings should be put into the evaluation report.
- The report must be provided to the parent at least seven (7) calendar days prior to the meeting, unless the parent gives a written waiver in advance of the eligibility meeting.
- The evaluation report must not include any statements that would pre-determine the child's eligibility category. This decision is left to the MET team at the eligibility meeting.

Report Formats

1. Individual Report - Each examiner collects the data specific to their assessment area and describes and interprets the data in his/her report - each report is submitted to the MET Chair; each individual examiner signs their report, along with anyone else involved in writing the report. The report should be dated for the completion date.
2. Comprehensive Report - Includes all information integrated and interpreted into one report; this report would be submitted by the MET Chair and should include signatures of all examiners and individuals involved in writing the report and the date the report was completed.

Report Components

Both types of report must include the following:

- Date of assessments
- Name, title, and qualifications of examiners(s), informants, and/or observers;
- Testing conditions and behaviors noted during testing observations;
- Results and interpretations of assessments;
- Explanations of any deviations from standardized testing procedures; and
- Justifications of use of instruments that are not age-appropriate.

60-Day Timeline

- The date of the last report submitted to the MET Chair serves as the date the evaluation is completed; therefore, it must be within 60 days of initial informed parental consent for the comprehensive evaluation
- The MET has an additional 14 days from the date of the last report in which to hold the eligibility meeting.

Evaluation to Eligibility Timeline



Resources

- MS Handbook for Speech/Language Pathologists
<http://www.mdek12.org/OSE/IP>
- Predictive Early Assessment of Reading and Language (PEARL)
<https://www.languagedynamicsgroup.com/products/pearl-screener/pearl-overview.html>
- MDE Procedures Manual – Volume 1: Child Find/Evaluation and Eligibility <http://www.mdek12.org/OSE/IP>



MISSISSIPPI
DEPARTMENT OF
EDUCATION

Ensuring a bright *future* for every child

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