

Ventura County SELPA Special Education Eligibility Guidelines

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FOREWORD

This document is a compilation of Federal and State legal references regarding special education eligibility criteria. Also included are suggested assessment and educational considerations for each handicapping condition.

This document is not meant to deviate from Federal or State criteria. It is important to remember that regardless of eligibility, special education *programming* is determined only after an IEP Team has convened and determined goals and objectives.

In addition to eligibility criterias noted, please note that California Code of Regulations (CCR) Title 5 states:

3030. *A pupil shall qualify as an individual with exceptional needs, pursuant to Section 56026 of the Education Code, if the results of the assessment as required by Section 56320 demonstrate that the degree of the pupil's impairment as described in Section 3030 (a through j) requires special education in one or more of the program options authorized by Section 56361 of the Education Code. The decision as to whether or not the assessment results demonstrate that the degree of the pupil's impairment requires special education shall be made by the individualized education program team, including assessment personnel in accordance with Section 5634(d) of the Education Code. The individualized education program shall take into account all the relevant material which is available on the pupil. No single score or product of scores shall be used as the sole criterion for the decision of the individualized education program team as to the pupil's eligibility for special education. (Underlines added.)*

Also, Code of Federal Regulations (CFR) Section 300.7(a) 1 states:

As used in this part, the term child with a disability means a child evaluated in accordance with §§300.530-300.536 as having mental retardation, a hearing impairment including deafness, a speech or language impairment, a visual impairment including blindness, serious emotional disturbance (hereafter referred to as emotional disturbance), an orthopedic impairment, autism, traumatic brain injury, an other health impairment, a specific learning disability, deaf-blindness, or multiple disabilities, and who, by reason thereof, needs special education and related services.

AUTISM

A. Definitions

1. Federal

P.L. 105-17 (IDEA), Title 34, CFR, 300.7 (c)(1)(i-ii)

"Autism" means a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age 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 experiences. 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 paragraph (b)(4) of this section.

A child who manifests the characteristics of "autism" after age 3 could be diagnosed as having "autism" if the criteria in paragraph (c)(1)(i) of this section are satisfied.

2. State

CCR, Title 5, Section 3030(g)

A pupil exhibits any combination of the following autistic-like behaviors, to include but not limited to:

- (1) An inability to use oral language for appropriate communication.
- (2) A history of extreme withdrawal or relating to people inappropriately and continued impairment in social interaction from infancy through early childhood.
- (3) An obsession to maintain sameness.
- (4) Extreme preoccupation with objects or inappropriate use of objects or both.
- (5) Extreme resistance to controls.
- (6) Displays peculiar motoric mannerisms in motility patterns.
- (7) Self-stimulating, ritualistic behavior.

3. Diagnostic Statistical Manual (DSM) IV Definition

According to the Diagnostic and Statistical Manual of Mental Disorder, Fourth Edition (DSM-IV)

A. A total of six (or more) items from (1), (2), and (3). With at least two from (1), and one each from (2) and (3):

(1) Qualitative impairment in social interaction, as manifested by at least two of the following:

- (a) Marked impairment in the use of multiple nonverbal behaviors such as eye-to eye gaze, facial expression, body postures, and gestures to regulate social interaction.
- (b) Failure to develop peer relationships appropriate to developmental level
- (c) A lack of spontaneous seeking to share enjoyment, interests, or achievements with other people (e.g., by a lack of showing, bringing, or pointing out objects of interest)
- (d) Lack of social or emotional reciprocity

(2) Qualitative impairments in communication as manifested by at least one of the following:

- (a) delay in, or total lack of, the development of spoken language (not accompanied by an attempt to compensate through alternative modes of communication such as gesture or mime)
- (b) in individuals with adequate speech, marked impairment in the ability to initiate or sustain a conversations with others
- (c) stereotyped and repetitive use of language or idiosyncratic language
- (d) lack of varied, spontaneous make-believe play or social imitative play appropriate to developmental level

(3) Restricted repetitive and stereotyped patterns of behavior, interests, and activities, as manifested by at least one of the following:

- (a) encompassing preoccupation with one or more stereotyped and restricted patterns of interest that is abnormal either in intensity or focus
- (b) apparently inflexible adherence to specific, nonfunctional routines or rituals
- (c) stereotyped and repetitive motor mannerisms (e.g., hand or finger flapping or twisting, or complex whole-body movements)
- (d) persistent preoccupation with parts of objects

B. Delays or abnormal functioning in at least one of the following areas, with onset prior to age 3 years: (1) social interaction, (2) language as used in social

communication, or (3) symbolic or imaginative play.

C. The disturbance is not better accounted for by Rett's Disorder or Childhood Disintegrative Disorder.

B. Assessment Standards

1. Assessment will be conducted by a multidisciplinary team as specified in the Assessment Plan, and may include:
 - a. A comprehensive developmental history conducted by a credentialed school nurse or other qualified individual. (To determine age of onset.)
 - b. A current psychological assessment conducted by a credentialed school psychologist or other qualified individual.
 - c. A current language assessment conducted by a speech therapist or other qualified individual.
 - d. Previous school history and education progress (when applicable).
2. Assessment of young children with autism.
 - a. A thorough assessment of young children with autism is *essential* for planning an appropriate program for the child and family.
 - b. At the infant program level (ages birth through 2), assessment may be conducted by a combined team of school district infant specialist and regional center personnel, in conjunction with the family.
 - c. At the preschool level, a school district team consisting of appropriate personnel will assess children. Family members are included as an essential part of them team, and are encouraged to participate in assessment at a level that they choose.

The following **ASSESSMENT DATA** is essential:

Medical History

Team obtains and reviews all medical information, including previously completed reports, for the child.

Audiological and vision screenings are completed.

Assessment Process

Team, including family, conducts a play-based assessment to determine the following information:

- Individual Sensory Issues
- Individual Behavioral Issues

- Developmental Level of Child
 - Social/Emotional
 - Adaptive/Self-Help
 - Communication
 - Motor
 - Cognitive
- Learning Styles Summary (including implications for classroom programming)

C. Educational Considerations of Handicapping Condition

1. Significant interference with educational and/or developmental performance.
2. Intervention is needed to help the child reach his/her academic and developmental potential.
3. Instructional goals and objectives based on individual student needs as specified on the student's IEP.
4. The extent to which the pupil needs special education services to ameliorate the disability.
5. The least restrictive environment.
6. Opportunities for development of a functional usage of language.
7. Accommodations for sensory differences.
8. Opportunities for planned generalization and transfer of skills into other settings.
9. Encouragement of social skills.
10. Structured environment with emphasis on concrete visual cues.

D. References

Best Practices for Designing and Delivering Effective Programs for Individuals with Autistic Spectrum Disorders, California Department of Education, copyright 1997.

DEAFNESS

A. Definitions

1. Federal

P.L. 101-476 (IDEA), Title 34, CFR, 300.7(c)(3)

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

2. State

CCR, Title 5, Section 3030(a)

A pupil has a hearing impairment whether permanent or fluctuating, which impairs the processing of linguistic information through hearing, even with amplification, and which adversely affects educational performance. Processing linguistic information includes speech and language reception and speech and language discrimination.

B. Assessment Standards

The following are guidelines for individual assessment:

1. The assessment will be conducted by a multi-disciplinary team as specified on the Assessment Plan.
2. Current audiological measures of auditory functioning with and without amplification as determined by a qualified audiologist who documents the loss will be available. Initial entry and triennial assessment shall include tests (and/or modifications of tests as appropriate) which measure air and bone conduction threshold sensitivity, speech audiometry (including measure of speech discrimination and/or auditory comprehension of connected language), impedance measurements, and tests to determine suitability and benefit obtained from personal and group amplification. Ensure that hearing aids worn by pupil are functioning properly.
3. Current level of receptive and expressive communication skills.
4. Measures of academic functioning as well as previous school reports are crucial in evaluating the effects of hearing loss on educational performance.
5. Psychological assessment should be part of the initial assessment process. The cognitive part of the testing may need to be reassessed when the child reaches first or second grade as it is very difficult to assess small deaf children. The psychological assessment should include the following background information:

- a. Onset and Detection of Hearing Loss
 - b. Amplification History
 - c. Additional Handicaps
 - d. Medical and Educational History
 - e. Communication at Home and at School
 - f. Home Language
 - g. Effect of Child's Deafness on Other Family Members
6. Motor Skills - Because meningitis, rubella and other neurologically based deafness may result in vestibular damage, gross and fine motor skills should be assessed by physical education specialists or other qualified professionals.

C. Educational Considerations of Handicapping Condition

Sensory deprivation of hearing from the prelingual years may result in a handicap in language learning. Besides language difficulties, deaf pupils frequently have a significant amount of academic delay. Such delays may be three or more years for the deaf pupil. As the pupil grows older, social/emotional growth and development may become a significant factor in determining educational needs.

The type, degree, and configuration of the hearing impairment, the age of onset, the stability of the loss, history of the use of amplification, medical diagnosis and treatment reports, and interpretation of the level of auditory comprehension of connected language are significant and should be included in assessment reports. Parental use or non-use of English and sign language has significant bearing on language acquisition.

Service options should consider:

1. Instructional goals and objectives based on the individual student needs as specified on the student's IEP.
2. The extent to which a pupil needs special education to remediate or develop language.
3. The least restrictive environment.

D. References

Program Guidelines for Hearing Impaired Individuals, California State Department of Education; copyright 1986.

DEAF/BLINDNESS

A. Definitions

1. Federal

P.L. 105-107 (IDEA), Title 34, CFR, 300.7(c)(2)

"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 solely for with deafness or children with blindness.

2. State

CCR, Title 5, Section 3030(b)

A pupil has concomitant hearing and visual impairments, the combination of which causes severe communication, developmental, and educational problems.

B. Assessment Standards

See eligibility assessment standards for Deaf and Visually Handicapped.

C. Educational Considerations of Handicapping Condition

See educational considerations of handicapping condition for Deaf and for Visually Handicapped.

D. References

Program Guidelines for Individuals Who Are Deaf-Blind, California State Department of Education; copyright 1990.

EMOTIONAL DISTURBANCE

A. Definitions

1. Federal

P.L. 105-17 (IDEA), CFR, 300.7(c)(4)

"Emotional Disturbance" is defined as follows:

- a. The term means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree, that adversely affects educational performance:
 - (1) An inability to learn which cannot be explained by intellectual, sensory, or health factors.
 - (2) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.
 - (3) Inappropriate types of behavior or feelings under normal circumstances.
 - (4) A general pervasive mood of unhappiness or depression.
 - (5) A tendency to develop physical symptoms or fears associated with personal or school problems.
- b. The term includes schizophrenia. The term does not include children who are socially maladjusted, unless it is determined that they have an emotional disturbance.

2. State

CCR, Title 5, Section 3030(I)

Because of a serious emotional disturbance, a pupil exhibits one or more of the following characteristics over a long period of time and to a marked degree, which adversely affects educational performance:

- a. An inability to learn which 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 exhibited in several situations.

- d. A general pervasive mood of unhappiness or depression.
- e. A tendency to develop physical symptoms or fears associated with personal or school problems.

B. Assessment Standards

1. The assessment shall be conducted by a multi-disciplinary team as specified on the Assessment Plan, including a School Psychologist, and may include:
 - a. Summaries of the health and developmental history, school history and educational progress of the pupil.
 - b. A description of the steps previously taken to assist the pupil in the areas of her/his learning, behavioral and/or emotional difficulty and the results of such assistance.
 - c. A report of an observation of the pupil in her/his school situation and a description of the environmental factors and peer and teacher interactions affecting her/his functioning. If the child is less than school age or out of school, the observation shall take place in an environment appropriate for an individual of that age.
 - d. An assessment of the pupil's level of academic performance including measured achievement and classroom functioning.
 - e. An assessment of the pupil's intellectual functioning.
 - f. Consideration of other medical, psychiatric and/or psychological reports, when available. These reports shall not be the basis for final decision of Severely Emotionally Disturbed unless they clearly satisfy the educational assessment requirements as outlined herein.
2. The student's handicapping condition is such that she/he cannot benefit from a regular program or modification of the regular education program.
3. The student must exhibit one or more of the following characteristics:
 - a. An inability to learn which 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 exhibited in several situations;
 - d. A general pervasive mood of unhappiness or depression; or
 - e. A tendency to develop physical symptoms or fears associated with personal or school problems.

4. The handicapping condition has been exhibited over a long period of time when:
 - a. The behavioral characteristics presently existing have been observed for more than six months;
 - b. The behavioral characteristics are not due to situational stress, crisis reaction or temporary adjustment problems;
 - c. The age of onset is from age 30 months to 12 years and appears to relate to the serious emotional disturbance **or** the condition has existed for at least two years.
5. The handicapping condition has been exhibited to a marked degree as follows:
 - a. The behavioral characteristics are present in all situations and conditions including in the school, community and home.
 - b. The behavioral characteristics are severe as indicated by their **rate** of occurrence, **intensity** and **variety**.
6. The handicapping condition is such that it adversely affects the student's educational performance as:
 - a. Measured by standardized achievement tests reported in scores and compared to measured ability; and
 - b. Teacher observations, work samples and grade reports reflecting classroom functioning.
7. The handicapping condition cannot be defined as a discipline problem as per *Education Code Section 48900* or the manifestation of a social maladjustment. In general, the socially maladjusted student exhibits:
 - a. Social competency and ability to follow social mores but is contrary to community mores as evidence in:
 - (1) strong ego; feels is in control;
 - (2) self-reliance; self-confidence to leave home and shift for self for periods of time;
 - (3) functions in school and community as opposed to being helpless, confused or disoriented.
 - b. Defective social relationships as evidenced in:
 - (1) irritating, disappointing and distressing to others;
 - (2) quick ability to rationalize and project the blame for socially disapproved

behavior;

- (3) rejection of constituted authority and discipline;
- (4) in conflict with parents;
- (5) out of parental control.

c. Hedonism combined with unrealistic goals as evidenced in:

- (1) egocentric, impulsive and irresponsible behavior;
- (2) low frustration tolerance;
- (3) poor judgment;
- (4) lives on pleasure principle.

d. Inadequate conscience development as evidenced in:

- (1) lack of anxiety or guilt;
- (2) inability to profit from mistakes or correction.

C. Educational Considerations of Handicapping Condition

1. Instructional goals and objectives based on individual student needs as specified on student's IEP.
2. The extent to which the pupil needs special education services to ameliorate the disability.
3. Least restrictive environment.

D. References

California Programs and Services for Students with Serious Emotional Disturbances, Resources in Special Education; Copyright 1991.

Identification and Assessment of the Seriously Emotionally Disturbed Child: A Manual for Educational and Mental Health Professionals, California State Department of Education; Copyright 1986.

HEARING IMPAIRMENT

A. Definitions

1. Federal

P.L. 105-17 (IDEA), CFR, 300.7(c)(5)

"Hearing Impairment" means an impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance but that is not included under the definition of "deafness" in this section.

2. State

CCR, Title 5, Section 3030(a)

A pupil has a hearing impairment whether permanent or fluctuating, which impairs the processing of linguistic information through hearing, even with amplification, and which adversely affects educational performance. Processing linguistic information includes speech and language reception and speech and language discrimination.

B. Assessment Standards

The following are guidelines for individual assessment:

1. The assessment will be conducted by a multi-disciplinary team as specified on the Assessment Plan.
2. Current audiological measures of auditory functioning with and without amplification as determined by a qualified audiologist who documents the loss will be available. Initial entry and triennial assessment shall include tests (and/or modifications of tests as appropriate) which measure air and bone conduction threshold sensitivity, speech audiometry (including measure of speech discrimination and/or auditory comprehension of connected language), impedance measurements, and tests to determine suitability and benefit obtained from personal and group amplification. Ensure that hearing aids worn by pupil are functioning properly.
3. Current level of receptive and expressive communication skills.
4. Measures of academic functioning as well as previous school reports are crucial in evaluating the effects of hearing loss on educational performance.
5. Psychological assessment should be part of the initial assessment process. The cognitive part of the testing may need to be reassessed when the child reaches first or second grade as it is very difficult to assess small deaf children. The psychological assessment should include the following background information:

- a. Onset and Detection of Hearing Loss
 - b. Amplification History
 - c. Additional Handicaps
 - d. Medical and Educational History
 - e. Communication at Home and at School
 - f. Home Language
 - g. Effect of Child's Deafness on Other Family Members
6. Motor Skills - Because meningitis, rubella and other neurologically based deafness may result in vestibular damage, gross and fine motor skills should be assessed by physical education specialists or other qualified professionals.

C. Educational Considerations of Handicapping Condition

Sensory deprivation of hearing from the prelingual years may result in a handicap in language learning. Besides language difficulties, deaf pupils frequently have a significant amount of academic delay. Such delays may be three or more years for the deaf pupil. As the pupil grows older, social/emotional growth and development may become a significant factor in determining educational needs.

The type, degree, and configuration of the hearing impairment, the age of onset, the stability of the loss, history of the use of amplification, medical diagnosis and treatment reports, and interpretation of the level of auditory comprehension of connected language are significant and should be included in assessment reports. Parental use or non-use of English and sign language has significant bearing on language acquisition.

Service options should consider:

1. Instructional goals and objectives based on the individual student needs as specified on the student's IEP.
2. The extent to which a pupil needs special education to remediate or develop language.
3. The least restrictive environment.

D. References

Program Guidelines for Hearing Impaired Individuals, California State Department of Education; copyright 1986.

MENTAL RETARDATION

A. Definitions

1. Federal

P.L. 105-17 (IDEA), Title 34, CFR 300.7(c)(6)

"*Mental Retardation*" means 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.

2. State

CCR, Title 5, Section 3030(h)

A pupil has significantly below average general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, which adversely affects a pupil's educational performance.

B. Assessment Standards

The following are guidelines for individual assessment:

1. The assessment will be conducted by a multi-disciplinary team as specified on the Assessment Plan.
2. A student shall be identified as Mentally Retarded when all of the following exist:
 - a. The student's general cognitive functioning is significantly below average in comparison to same age peers.*
 - b. The student's adaptive behavior in school and the community is significantly below average compared to his/her normative age group.
 - c. Based on a comprehensive developmental history, the foregoing were manifested during the developmental period.
 - d. The combination of significant deficits in adaptive behavior and cognitive functioning adversely affects the pupil's educational performance.

* The term "*significantly below average*" can be interpreted as being at least two standard deviations below the mean.

C. Educational Considerations of Handicapping Condition

1. Instructional goals and objectives based on individual student needs as specified on the

student's IEP.

2. The extent to which the pupil needs special education services to ameliorate the disability.
3. The least restrictive environment.

MULTIPLE DISABILITIES

A. Definitions

1. Federal

P.L. 105-17 (IDEA), Title 34, CFR, 300.7(c)(7)

“Multiple Disabilities” means concomitant impairments (such as mental retardation-blindness, mentally retardation-orthopedic impairment, etc.), the combination of which causes such severe educational needs that they cannot be accommodated in special education programs solely for one of the impairments. The term does not include deaf-blindness.

B. Assessment Standards

Assessment will be conducted by a multidisciplinary team as specified on the Assessment Plan.

C. Educational Considerations of Handicapping Condition

Dependent upon nature of multiple disabilities. In general:

1. Need for intense supervision, adaptation or modification of physical environment for health or safety reasons.
2. Instructional goals and objectives based on the individual student needs as specified on the student’s IEP.
3. The extent to which a pupil needs special education services to ameliorate the disability.
4. The least restrictive environment.

ORTHOPEDIC IMPAIRMENT

A. Definitions

1. Federal

P.L. 105-17 (IDEA), Title 34, CFR, 300.7(c)(8)

“*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., clubfoot, absence of some member, etc.), impairments caused by disease (e.g., poliomyelitis, tuberculosis, etc.), and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns that cause contractures).

2. State

CCR, Title 5, Section 3030(e)

A pupil has a severe orthopedic impairment which adversely affects the pupil’s educational performance. Such orthopedic impairments include impairments caused by congenital anomaly, impairments caused by disease, and impairments from other causes.

B. Assessment Standards

1. Medical - Written verification of serious orthopedic impairment.
2. Educational - Assessment will be conducted by a multidisciplinary team as specified on the Assessment Plan.

C. Educational Considerations of Handicapping Condition

1. Need for intense supervision, adaptation or modification of physical environment for health or safety reasons.
2. Severe restriction of physical activity.
3. Instructional goals and objectives based on the individual student needs as specified on the student’s IEP.
4. The extent to which the pupil needs special education services to ameliorate the disability.
5. The least restrictive environment.

D. References

Educational Occupational Therapy and Physical Therapy Service Guidelines, Ventura

County SELPA; 1996.

Guidelines for Occupational Therapy Services in School Systems; California Department of Education Copyright 2nd Edition 1989.

Inclusive Physical Education Fun and Games for Everyone!, Ventura County SELPA; 1996.

Integration of Students with Physical Disabilities, Ventura County SELPA; 1996.

Program Guidelines for Severely Orthopedically Impaired Individuals, California State Department of Education; Copyright 1992.

OTHER HEALTH IMPAIRMENT

A. Definitions

1. Federal

P.L. 105-17 (IDEA), Title 34, CFR, 300.7(c)(9)

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 –

(i) Is due to chronic or acute health problems such as asthma, attention deficit disorder or attention deficit hyperactivity disorder, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, and sickle cell anemia; and

(ii) Adversely affects a child's educational performance.

2. State

CCR, Title 5, Section 3030(a)

A pupil has limited strength, vitality or alertness, due to chronic or acute health problems, including but not limited to a heart condition, cancer, leukemia, rheumatic fever, chronic kidney disease, cystic fibrosis, severe asthma, epilepsy, lead poisoning, diabetes, tuberculosis and other communicable infectious diseases, and hematological disorders such as sickle cell anemia and hemophilia which adversely affects a pupil's educational performance. In accordance with *Section 56026(e) of the Education Code*, such physical disabilities shall not be temporary in nature as defined by *Section 3001(v)*.

B. Assessment Standards

1. Medical

Written verification of health impairment by the student's primary health provider.

2. Educational

a. Assessment will be conducted by a multidisciplinary team as specified on the Assessment Plan.

b. The following information shall be reviewed by the Individualized Education Program Team:

(1) The type of chronic illness.

- (2) The possible medical side effects and complications of treatment that could affect school functioning.
 - (3) The educational and social implications of the disease and treatment to include but not be limited to the likelihood of fatigue, absences, changes in physical appearance, amputations, or problems with fine and gross motor control.
 - (4) Special considerations necessitated by outbreaks of infectious diseases, if applicable.
- c. The Individualized Education Program Team shall designate the school's liaison with the pupil's primary health provider.
 - d. Other psychoeducational assessment as appropriate.

C. Educational Considerations of Handicapping Condition

1. Instructional goals and objectives based on the individual student needs as specified on the student's IEP.
2. Intense supervision, adaptation or modification of physical environment for health or safety reasons.
3. Severe restriction of activity.
4. Least restrictive environment.
5. The extent to which the pupil needs special education services to ameliorate the disability.

D. References

Guidelines and Procedures for Meeting the Specialized Physical Health Care Needs of Pupils, California Department of Education, Sacramento; Copyright 1990.

ADHD: After the Label..., Ruth Graham-Moniot and Patricia Kingsley, VUSD 1992

SPECIFIC LEARNING DISABILITY

A. Definitions

1. Federal

P.L. 105-17 (IDEA), Title 34, CFR, 300.7(c)(10)

“*Specific learning disability*” is defined as follows:

General. The term means 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 an 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.

Disorders not included. The term 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.

2. State

a. California Education Code 56337

A pupil shall be assessed as having a specific learning disability which makes him or her eligible for special education and related services when it is determined that all the following exist:

- (1) A severe discrepancy exists between the intellectual ability and achievement in one or more of the following academic areas:
 - (a) Oral expression
 - (b) Listening comprehension
 - (c) Written expression
 - (d) Basic reading skills
 - (e) Reading comprehension
 - (f) Mathematics calculation
 - (g) Mathematics reasoning
- (2) The discrepancy is due to a disorder in one or more of the basic psychological

processes and is not the result of environmental, cultural, or economic disadvantages.

- (3) The discrepancy cannot be corrected through other regular or categorical services offered within the regular instructional program.

b. California Education Code 56338

As used in *Section 56337*, “Specific Learning Disability” includes, but is not limited to, disability within the function of vision which results in visual perceptual or visual motor dysfunction.

c. California Education Code 56337.5

- (a) A pupil who is assessed as being dyslexic and meets eligibility criteria specified in *Section 56337* and subdivision (j) of *Section 3939* of Title 5 of the California Code of Regulations for the federal Individuals with Disabilities Education Act (20 U.S.C. Sec. 1400 and following) category of specific learning disabilities is entitled to special education and related services.
- (b) If a pupil who exhibits the characteristics of dyslexia or another related reading dysfunction is not found to be eligible for special education and related services pursuant to subdivision (a), the pupil’s instructional program shall be provided in the regular education program.

d. CCR, Title 5, 3030 (j)

A pupil has 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 an *impaired* ability to listen, think, speak, read, write, spell, or do mathematical calculations, and has a severe discrepancy between intellectual ability and achievement in one or more of the *academic* areas specified in *Section 56337(a) of the Education Code*. For the purpose of *Section 3030(j)*:

- (1) Basic psychological processes include attention, visual processing, auditory processing, sensory-motor skills, cognitive abilities including association, conceptualization and expression.
- (2) Intellectual ability includes both acquired learning and learning potential; and shall be determined by a systematic assessment of intellectual functioning.
- (3) The level of achievement includes the pupil’s level of competence in materials and subject matter explicitly taught in school, *and* shall be measured by standardized achievement tests.
- (4) The decision as to whether or not a severe discrepancy exists shall be made by the Individualized Education Program Team, including assessment personnel in accordance with *Section 56341(d)*, which takes into account all relevant material which is available on the pupil. No single score or product of scores,

test or procedure shall be used as the sole criterion for the decisions of the Individualized Education Program Team as to the pupil's eligibility for special education. In determining the existence of a severe discrepancy, the Individualized Education Program Team shall use the following procedures:

- (a) When standardized tests are considered to be valid for a specific pupil, a severe discrepancy is demonstrated by: first, converting into common standard scores, using a mean of 100 and standard deviation of 15, the achievement test score and the ability test score to be compared; second, computing the difference between these common standard scores; and third, comparing this computed difference to the standard criterion which is the product of 1.5 multiplied by the standard deviation of the distribution of computed differences of students taking these achievement and ability tests. A computed difference which equals or exceeds this standard criterion, adjusted by one standard error of measurement, the adjustment not to exceed four common standard score points, indicates a severe discrepancy when such discrepancy is corroborated by other assessment data which may include other tests, scales, instruments, observations and work samples, as appropriate.
- (b) When standardized tests are considered to be invalid for a specific pupil, the discrepancy shall be measured by alternative means as specified on the Assessment Plan.
- (c) If the standardized tests do not reveal a severe discrepancy as defined in *subparagraphs (a) or (b)* above, the Individualized Education Program Team may find that a severe discrepancy does exist, provided that the team documents in a written report that the severe discrepancy between ability and achievement exists as a result of a disorder in one or more basic psychological processes. The report shall include a statement of the area, the degree, and the basis and method used in determining the discrepancy. The report shall contain information considered by the team which shall include, but not be limited to:
 - Data obtained from standardized assessment instruments;
 - Information provided by the parent;
 - Information provided by the pupil's present teacher;
 - Evidence of the pupil's performance in the regular and/or special education classroom obtained from observations, work samples, and group test scores;
 - Consideration of the pupil's age, particularly for young children; and
 - Any additional relevant information.
- (d) The discrepancy shall not be primarily the result of limited school

experience or poor school attendance.

B. Assessment Standards

The assessment shall be conducted by a multidisciplinary team as specified on the Assessment Plan.

1. Education Code Section 56327:

The personnel who assess the pupil shall prepare a written report, or reports, as appropriate, of the results of each assessment. The report shall include, but not be limited to, all of the following:

- a. Whether the pupil may need special education and related services.
- b. The basis for making the determination.
- c. The relevant behavior noted during the observation of the pupil in an appropriate setting.
- d. The relationship of that behavior to the pupil's academic and social functioning.
- e. The educationally relevant health and development, and medical findings, if any.
- f. For pupils with learning disabilities, whether there is such a discrepancy between achievement and ability that it cannot be corrected without special education and related services.
- g. A determination concerning the effects of environmental, cultural, or economic disadvantage, where appropriate.
- h. The need for specialized services, materials, and equipment for pupils with low incidence disabilities, consistent with guidelines established pursuant to Section 56136.

2. Education Code Section 56341(e):

For pupils with suspected learning disabilities, at least one member of the Individualized Education Program Team, other than the pupil's regular teacher, shall be a person who has observed the pupil's educational performance in an appropriate setting. If the child is younger than five years or is not enrolled in a school, a team member shall observe the child in an environment appropriate for a child of that age.

C. Educational Considerations of Handicapping Condition

1. The extent to which a pupil needs special education services to ameliorate the disability.
2. Goals and objectives needed to meet the student's needs.

3. Least restrictive environment.

SPEECH OR LANGUAGE IMPAIRMENT

A. Definitions

1. Federal

P.L. 105-17 (IDEA), CFR, 300.7 (c)(11)

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

2. State

California Education Code 56333:

A pupil shall be assessed as having a language or speech disorder which makes him or her eligible for special education and related services when he or she demonstrates difficulty understanding or using spoken language to such an extent that it adversely affects his or her educational performance and cannot be corrected without special education and related services. In order to be eligible for special education and related services, difficulty in understanding or using spoken language shall be assessed by a language, speech, and hearing specialist who determines that such difficulty results from any of the following disorders:

- a. Articulation disorders, such that the pupil’s production of speech significantly interferes with communication and attracts adverse attention.
- b. Abnormal voice, characterized by persistent, defective voice quality, pitch, or loudness. An appropriate medical examination shall be conducted, where appropriate.
- c. Fluency difficulties which result in an abnormal flow of verbal expression to such a degree that these difficulties adversely affect communication between the pupil and listener.
- d. Inappropriate or inadequate acquisition, comprehension, or expression of spoken language such that the pupil’s language performance level is found to be significantly below the language performance level of his or her peers.
- e. Hearing loss which results in a language or speech disorder and significantly affects educational performance.

CCR Title 5, Section 3030(c):

- c. A pupil has a language or speech disorder as defined in Section 56333 of the

Education Code, and it is determined that the pupil's disorder meets one or more of the following criteria:

- (1) Articulation disorder.
 - (A) The pupil displays reduced intelligibility or an inability to use the speech mechanism which significantly interferes with communication and attracts adverse attention. Significant interference in communication occurs when the pupil's production of single or multiple speech sounds on a developmental scale of articulation competency is below that expected for his or her chronological age or developmental level, and which adversely affects educational performance.
 - (B) A pupil does not meet the criteria for an articulation disorder if the sole assessed disability is an abnormal swallowing pattern.
- (2) Abnormal Voice. A pupil has an abnormal voice which is characterized by persistent, defective voice quality, pitch, or loudness.
- (3) Fluency Disorders. A pupil has a fluency disorder when the flow of verbal expression including rate and rhythm adversely affects communication between the pupil and listener.
- (4) Language Disorder. The pupil has an expressive or receptive language disorder when he or she meets one of the following criteria:
 - (A) The pupil scores at least 1.5 standard deviations below the mean, or below the 7th percentile, for his or her chronological age or developmental level on two or more standardized tests in one or more of the following areas of language development: morphology, syntax, semantics, or pragmatics.
 - (B) The pupil scores at least 1.5 standard deviations below the mean or the score is below the 7th percentile for his or her chronological age or developmental level on one or more standardized tests in one of the areas listed in subsection (A) and displays inappropriate or inadequate usage of expressive or receptive language as measured by a representative spontaneous or elicited language sample of a minimum of fifty utterances. The language sample must be recorded or transcribed and analyzed, and the results included in the assessment report. If the pupil is unable to produce this sample, the language, speech and hearing specialist shall document why a fifty utterance sample was not obtainable and the contexts in which attempts were made to elicit the sample. When standardized tests are considered to be invalid for the specific pupil, the expected language performance level shall be determined by alternative means as specified in the assessment plan.

B. Assessment Standards

The following are guidelines for individual assessment:

1. The assessment will be conducted by a multidisciplinary team as specified on the Assessment Plan. In cases where the student is suspected of having a handicap requiring only DIS Speech/Language Services, the assessment may be conducted solely by the LSH Specialist (*Education Code Section 56333*). Other knowledgeable personnel; e.g., parents or teacher must participate in interpretation and discussion of test results. This may occur at the IEP Meeting. In cases where the LSH Specialist does not speak the primary language of the student, a trained interpreter/translator may assist in the data collection process. (*See Program Guidelines.*)
2. A minimum number of two complete standardized instruments must be used to determine the type and severity of the student's speech and/or language handicap. Alternative means of assessment must be used when instruments are invalid or unavailable for a particular student and include, but are not limited to, use of criterion referenced test, behavioral observations and a structured interview.
3. Data should be gathered in all areas of language either through administration of standardized tests, criterion referenced tests or observation of a student's speech or language performance. Obtaining a language sample is a comprehensive way of determining communicative competence. The language sample must be recorded, transcribed and analyzed.
4. Eligibility Guidelines for Non-English Background Students

Indicators as follows:

- a. A language disorder exists in the student's native language (corroborated by a combination of specialist's assessment, interpreter or translator, and parent).
- b. The student is slow to acquire English despite ESL and school interventions (verified by ESL personnel, regular classroom teacher, and so forth).
- c. Cultural or experiential difference and economic disadvantages are not the primary cause of the student's learning problems (verified by interview).
- d. The student is noticeably slower than siblings are in rate of learning at home (verified by interview).
- e. Poor academic progress was noted in the student's native country (if applicable, verified by interview).
- f. The student's academic achievement is significantly below his or her English language proficiency (certified by ESL and special education alternative assessment).

C. Educational Considerations of Handicapping Condition

1. Instructional goals and objectives based on individual student needs as specified on the student's IEP.

2. The extent to which the pupil needs special education services to ameliorate the disability.
3. The least restrictive environment.

TRAUMATIC BRAIN INJURY

A. Definitions

1. Federal

P.L. 105-17 (IDEA), Title 34, CFR, 300.7(c)(12)

“*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. State

No California code reference.

B. Assessment Standards

Assessment shall be conducted by a multidisciplinary team as specified on the Assessment Plan.

1. Medical

- a. Documentation of the results of and treatment for a traumatic brain injury from outside agencies, when available.

2. Educational Assessment

- a. Comprehensive review of developmental history with emphasis on pre- and post-trauma behaviors.
- b. Assessment of cognitive strengths and weaknesses, and perceptual-motor processing skills.
- c. Assessment of speech and language functioning.
- d. Assessment of psychosocial adjustment in different settings such as classroom, playground and home.
- e. Assessment of academic achievement.

C. *Educational Considerations of Handicapping Condition*

1. Instructional goals and objectives based on the individual student needs as specified on the student's IEP.
2. The extent to which a pupil needs special education services to ameliorate the disability.
3. The least restrictive environment.
4. Need for intense supervision adaptation or modification of physical environment for health or safety reasons.

VISUAL IMPAIRMENT – (including blindness)

A. Definitions

1. Federal

P.L. 101476 (IDEA), CFR, 300.5(b)(11)

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

2. State

CCR, Title 5, Section 3030(d)

A pupil has a visual impairment which, even with correction, adversely affects a pupil’s educational performance.

California Education Code 56350

- a. A “*functionally blind pupil*” means a pupil who relies basically on senses other than vision as major channels for learning.
- b. A “*pupil with low vision*” means a pupil who uses vision as a channel for learning, but who may also benefit from instruction in braille.
- c. A “*visually impaired pupil*” means a pupil who is functionally blind or a pupil with low vision. For purposes of this article, a “*visually impaired pupil*” does not include a pupil who is eligible for special education and related services based on a specific learning disability identified pursuant to Section 56338.

B. Assessment Standards

1. Medical

Written verification should be provided by an ophthalmologist or optometrist describing the extent of visual impairments.

2. Educational Assessment

Assessment will be conducted by a multi-disciplinary team as specified in the Assessment Plan. Assessment of functional visual acuity will be conducted by a teacher for the visually impaired. This may include data from the following areas:

- a. Orientation and mobility at school, home and community, when appropriate.
 - b. Tracking, fixed gaze, scanning, binocularity, visual discrimination, peripheral acuity, color vision, condition of eye, field of vision, visual efficiency, classroom implications and prognosis.
 - c. Other psychoeducational assessment as appropriate, including the need for materials and equipment.
3. California Education Code 56352
- a. A functional vision assessment conducted pursuant to Section 56320 shall be used as one criterion in determining the appropriate reading medium or media for the pupil.
 - b. An assessment of braille skills shall be required for functionally blind pupils who have the ability to read in accordance with guidelines established pursuant to Section 56136.
 - c. Braille instruction shall be provided by a teacher credentialed to teach pupils who are visually impaired.
 - d. The determination, by a pupil's individualized education program team, of the most appropriate medium or media, including braille, for visually impaired pupils shall be in accordance with guidelines pursuant to Section 56136.
 - e. Each visually impaired pupil shall be provided with the opportunity to receive an assessment to determine the appropriate reading medium or media, including braille instruction, if appropriate, for that pupil.

C. **Educational Considerations of Handicapping Condition**

California Education Code 56351

School districts, special education local plan areas, or county offices of education shall provide opportunities for braille instruction for pupils who, due to a prognosis of visual deterioration, may be expected to have a need for braille as a reading medium.

- 1. The IEP Team must determine that the visual impairment results in and/or warrants one of the following:
 - a. Adversely affects educational performance.
 - b. Appropriate interventions to facilitate the successful development and achievement of each student within his/her educational setting according to potential and maturity.
- 2. Vision services shall be provided by a credentialed teacher of the visually handicapped and should be based on:

- a. goals and objectives in student's IEP;
- b. extent of handicapping conditions;
- c. least restrictive environment.

And may include:

- a. consultative services to pupils, parents, teacher and other school personnel;
- b. adaptations in curriculum, media and/or the environment necessary for the successful mainstreaming of visually handicapped students;
- c. direct instruction in special skills provided in Vision Resource Rooms or self-contained Vision Classrooms;
- d. instruction provided in special schools for the visually handicapped.

D. References

Program Guidelines for Visually Impaired Individuals - 1987 Revised Edition, California State Department of Education; Copyright 1987.

***ELIGIBILITY CRITERIA FOR
INDIVIDUALS WITH EXCEPTIONAL NEEDS
BETWEEN THE AGES OF
THREE AND FIVE YEARS, INCLUSIVE***

A. Definitions

1. Federal

P.L. 105-17 (IDEA), CFR 300.7(b)

The term “*children with disabilities*” for children aged three to five, inclusive, may, at a State’s discretion, include children experiencing developmental delays, as defined by the State and as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development; and who, by reason thereof, need special education and related services.

2. State

California Education Code 56441.11:

- a. Notwithstanding any other provision of law or regulation, the special education eligibility criteria in subdivision (b) shall apply to preschool children, between the ages of three and five years.
- b. A preschool child, between the ages of three and five years, qualifies as a child who needs early childhood special education services if the child meets the following criteria:
 - (1) Is identified as having one of the following disabling conditions, as defined in Section 300.7 of Title 34 of the Code of Federal Regulations, or an established medical disability, as defined in subdivision (d):
 - (A) Autism.
 - (B) Deaf-blindness.
 - (C) Deafness.
 - (D) Hearing impairment.
 - (E) Mental retardation.
 - (F) Multiple disabilities.
 - (G) Orthopedic impairment.
 - (H) Other health impairment.
 - (I) Serious emotional disturbance.
 - (J) Specific learning disability.
 - (K) Speech or language impairment in one or more of voice, fluency, language and articulation.

- (L) Traumatic brain injury.
 - (M) Visual impairment.
 - (N) Established medical disability.
- (2) Needs specially designed instruction or services as defined in Sections 56441.2 and 56441.3.
 - (3) Has needs that cannot be met with modification of a regular environment in the home or school, or both, without ongoing monitoring or support as determined by an individualized education program team pursuant to Section 56431.
 - (4) Meets eligibility criteria specified in Section 3030 of Title 5 of the California Code of Regulations.
- c. A child is not eligible for special education and services if the child does not otherwise meet the eligibility criteria and his or her educational needs are due primarily to:
 - (A) Unfamiliarity with the English language.
 - (B) Temporary physical disabilities.
 - (C) Social maladjustment.
 - (D) Environmental, cultural, or economic factors.
 - d. For purposes of this section, “established medical disability” is defined as a disabling medical condition or congenital syndrome that the individualized education program team determines has a high predictability of requiring special education and services.

B. Assessment Standards

California Education Code 56441.11

When standardized tests are considered invalid for children between the ages of three and five years, alternative means, for example, scales, instruments, observations, and interviews shall be used as specified in the Assessment Plan.

California Education Code 56445

- a. Prior to transitioning an individual with exceptional needs from a preschool program to kindergarten, or first grade as the case may be, an appropriate reassessment of the individual shall be conducted pursuant to Article 2 (commencing with Section 56320) of Chapter 4 to determine if the individual is still in need of special education and services.
- b. It is the intent of the Legislature that gains made in the special education program for individuals who received special education and services, in accordance with this chapter, are not lost by too rapid a removal of individualized programs and supports for these individuals.
- c. As part of the transitioning process, a means of monitoring continued success of the child shall be identified by the individualized education program team for those children of

kindergarten or first grade equivalency who are determined to be eligible for less intensive special education programs.

C. Educational Considerations of Handicapping Conditions

1. Instructional goals and objectives based on individual student needs as specified on the student's IEP.
2. The extent to which the pupil needs special education services to ameliorate the disability.
3. The least restrictive environment.

D. References

1. *Preschool Special Education Program Handbook: A Resource to the Field (A.B. 2666 and P.L. 99-457)*, Resources in Special Education (RiSE); Copyright 1988.
2. *What's Next After Early Start?*, Ventura County SELPA; 1997.

**INDIVIDUALS WITH EXCEPTIONAL NEEDS
BIRTH THROUGH TWO YEARS OLD**

A. Definitions

1. Federal

34 CFR 303.16

Infants and Toddlers with a Disabilities

(a) As used in this part, *infants and toddlers with disabilities* means individuals from birth through age two who need early intervention services because they –

(1) Are experiencing developmental delays, as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas:

- (i) Cognitive development.
- (ii) Physical development, including vision and hearing.
- (iii) Communication development.
- (iv) Social or emotional development.
- (v) Adaptive development; or

(2) Have a diagnosed physical or mental condition that has a high probability of resulting in developmental delay.

(b) The term may also include, at a State’s discretion, children from birth through age two who are at risk of having substantial developmental delays if early intervention services are not provided.

(Authority: 20 U.S.C. 1472(1))

Note 1: The phrase “a diagnosed physical or mental condition that has a high probability of resulting in developmental delay.” As used in paragraph (a)(2) of this section, applies to a condition if it typically results in developmental delay. Examples of these conditions include chromosomal abnormalities; genetic or congenital infections; disorders secondary to exposure to toxic substances, including fetal alcohol syndrome; and severe attachment disorders.

Note 2: With respect to paragraph (b) of this section, children who are at risk may be eligible under this part if a State elects to extend services to that population, even through they have not been identified as disabled.

Under this provision, States have the authority to define who would be “at risk of having substantial developmental delays if early intervention services are not provided.” In defining the “at risk” population, States may include well-known biological and environmental factors that can be identified and that place infants and toddlers “at risk” for developmental delay. Commonly cited factors include low birth weight, respiratory distress as a newborn, lack of oxygen, brain hemorrhage, infection, nutritional deprivation, and a history of abuse or neglect. It should be noted that “at risk” factors do not predict the presence of a barrier to development, but they may indicate children who are at higher risk of developmental delay than children without these problems.

2. State

CCR Title 5, 3031(a)(2)

- a. A child, age birth through two years old shall qualify as an individual with exceptional needs pursuant to Education Code Section 56026(c)(1) and (2) if the Individualized Family Service Plan Team determines that the child meets the following criteria:
- (1) Is identified as an individual with exceptional needs pursuant to Section 3030, and
 - (2) Is identified as requiring intensive special education and services by meeting one of the following:
 - (A) The child is functioning at or below 50% of his or her chronological age level in any one of the following skill areas:
 1. gross or fine motor development;
 2. receptive or expressive language development;
 3. social or emotional development;
 4. cognitive development; and
 5. visual development.
 - (B) The child is functioning between 51% and 75% of his or her chronological age level in any two of the skill areas identified in Section 3031(2)(A).
 - (C) The child has a disabling medical condition or congenital syndrome which the Individualized Education Program Team determines has a high predictability of requiring intensive special education and services.

CCR Title 17 Public Health, Division 2, Chapter 2, Article 2.

Eligibility for California’s Early Start Program

Section 52020. General

An infant or toddler shall be eligible for early intervention services if he or she is between birth up to thirty-six months of age and meets one of the criteria specified in Section 52022 as determined by means of evaluation pursuant to Section 42082 of these regulation and needs early intervention services.

Section 52022. Eligibility Criteria

(a) Developmental Delay

A developmental delay exists if there is a significant difference pursuant to 52082(d) between the infant's or toddler's current level of functioning and the expected level of development for his or her age in one or more of the following developmental areas:

- (1) Cognitive;
- (2) Physical: including fine and gross motor, vision, and hearing
- (3) Communication;
- (4) Social or emotional;
- (5) Adaptive.

(b) Established Risk

- (1) An established risk condition exists when an infant or toddler has a condition of know etiology which has a high probability of resulting in developmental delay; or
- (2) An established risk condition exists when an infant or toddler has a solely low incidence disability.

(c) High Risk for Developmental Disability

- (1) High risk for a developmental disability exists when a multidisciplinary team determines that an infant or toddler has a combination of two or more of the following factors that requires early intervention services based on evaluation and assessment pursuant to section 52082 and section 52084:
 - (A) Prematurity of less than 32 weeks gestation and/or low birth weight of less than 1500 grams.
 - (B) Assisted ventilation for 48 hours or longer during the first 28 days of life.

B. Assessment Standards

1. Federal

CFR 303.322

a. *Definitions of evaluation and assessment.* As used in this part--

- (1) *Evaluation* means the procedures used by appropriate qualified personnel to determine a child's initial and continuing eligibility under this part, consistent with the definition of "infants and toddlers with disabilities" in §303.16, including determining the status of the child in each of the developmental areas in paragraph (c)(3)(ii) of this section.
- (2) *Assessment* means the ongoing procedures used by appropriate qualified personnel throughout the period of a child's eligibility under this part to identify-
 - (i) The child's unique strengths and needs and the services appropriate to meet those needs; and
 - (ii) The resources, priorities, and concerns of the family and the supports and services necessary to enhance the family's capacity to meet the developmental needs of their infant or toddler with a disability.

b. *Evaluation and assessment of the child.* The evaluation and assessment of each child must--

- (1) Be conducted by personnel trained to utilize appropriate methods and procedures;
- (2) Be based on informed clinical opinion; and
- (3) Include the following:
 - (i) A review of pertinent records related to the child's current health status and medical history.
 - (ii) An evaluation of the child's level of functioning in each of the following developmental areas:
 - (A) Cognitive development.
 - (B) Physical development, including vision and hearing.
 - (C) Communication development.
 - (D) Social or emotional development.
 - (E) Adaptive development.
 - (iii) An assessment of the unique needs of the child in terms of each of the developmental areas in paragraph (c)(3)(ii) of this section, including the identification of services appropriate to meet those needs.

c. *Family assessment.*

- (1) Family assessments under this part must be family-directed and designed to

determine the resources, priorities, and concerns of the family related to enhancing the development of the child.

- (2) Any assessment that is conducted must be voluntary on the part of the family.
- (3) If an assessment of the family is carried out, the assessment must--
 - (I) Be conducted by personnel trained to utilize appropriate methods and procedures;
 - (ii) Be based on information provided by the family through a personal interview; and
 - (iii) Incorporate the family's description of its resources, priorities, and concerns related to enhancing the child's development.

d. *Timelines.*

- (1) Except as provided in paragraph (e)(2) of this section, the evaluation and initial assessment of each child (including the family assessment) must be completed within the 45-day time period required in 303.321(e).
- (2) The lead agency shall develop procedures to ensure that in the event of exceptional circumstances that make it impossible to complete the evaluation and assessment within 45 days (e.g., if a child is ill), public agencies will--
 - (i) Document those circumstances; and
 - (ii) Develop and implement an interim IFSP, to the extent appropriate and consistent with 303.345 (b)(1) and (b)(2).

2. *State*

CCR Title 17, Public Health, Division 2, Chapter 2
Article 2 - Evaluation and Assessment

52082. Procedures for Evaluation and Assessment to Determine Eligibility.

- (a) The determination of eligibility for an infant or toddler shall be made with the participation of the multidisciplinary team including the parent.
- (b) Evaluation and assessment shall be based on informed clinical opinion and include:
 - (1) A review of pertinent records related to the infant or toddler's health status and medical history provided by qualified health professionals who have evaluated or assessed the infant or toddler;
 - (2) Information obtained from parental observation and report; and,
 - (3) Evaluation by qualified personnel of the infant's or toddler's level of functioning in each of the following areas:

- (A) Cognitive development;
 - (B) Physical and motor development, including vision and hearing;
 - (C) Communication development;
 - (D) Social or emotional development; and,
 - (E) Adaptive development.
- (c) No single procedure shall be used as the sole criterion for determining an infant's or toddler's eligibility.
- (d) Standardized tests or instruments may be used as part of the evaluation specified in 52082(b) above, and, if used, they shall:
- (1) Be selected to ensure that, when administered to an infant or toddler with impaired sensory, motor or speaking skills, the tests produce results that accurately reflect the infant's or toddler's aptitude, developmental level, or any other factors the test purports to measure and not the infant's or toddler's impaired sensory, motor or speaking skills unless those skills are the factors the test purports to measure;
 - (2) Be validated for the specific purpose for which they are used.
- (e) If standardized, normed or criterion referenced instruments are used as part of the evaluation specified in 52082(b) above, a significant difference between an infant's or toddler's current level of functioning and the expected level of development for his or her age shall be established when an infant's or toddler's age equivalent score falls one third below age expectation.
 - (f) Procedures and materials for evaluation and assessment of infants and toddlers shall be selected and administered so as not to be racially or culturally discriminatory.
 - (g) Infants or toddlers with solely low incidence disabilities shall be evaluated and assessed by qualified personnel of the LEA whose professional preparation, license or credential authorization are specific to the suspected disability.
 - (g) Regional centers, LEAs and multidisciplinary teams shall not presume or determine eligibility, including eligibility for medical services provided through the Department of Health Services, for any other state or local government program or service when conducting evaluations or assessments of an infant or toddler or their family.

[Authority cited: Section 95009 and 95028, Government Code]
 [Reference: Section 303.300(b) and (c), 303.322, 303.344, and 303.323(b)and(c), Title 34 Code of Federal Regulations; Sections 95014(a)(1), and 95016, Government Code]

52084. Assessment for Service Planning.

- (a) Assessment for service planning for eligible infants or toddlers shall identify all of the following:
 - (1) The infant's or toddler's unique strengths and needs in each of the five areas specified in Section 52082(b)(3);
 - (2) Early intervention and other services appropriate to meet the needs identified in (a)(1) of this subsection; and,
 - (3) If the family consents to a family assessment, the resources, priorities and concerns of the family and the support and services necessary to enhance the family's capacity to meet the developmental needs of an infant or toddler with a disability.
- (b) For purposes of service planning, regional centers and LEAs may use existing evaluation materials if the multidisciplinary team agrees that the existing materials adequately describe the levels of development and service needs for the infant or toddler.
- (c) Assessment for service planning shall be based on age appropriate methods and procedures which may include any of the following:
 - (1) A review of information related to the infant's or toddler's health status and medical history provided by qualified health professionals who have evaluated or assessed the infant or toddler;
 - (2) Developmental observations by qualified personnel and the parent;
 - (3) Other procedures used by qualified personnel to determine the presence of a developmental delay, established risk condition, or high risk for a developmental disability; and,
 - (4) Standardized test or instruments.
- (d) Assessments of family resources, priorities and concerns related to enhancing the development of the infant or toddler shall be voluntary on the part of the family. The family assessment shall:
 - (1) Be conducted by qualified personnel trained to utilize appropriate methods and procedures
 - (2) Be based on information provided by the family through a personal interview;
 - (3) Incorporate the family's description of its resources, priorities and concerns related to enhancing the development of the infant or toddler; and
 - (4) Be conducted in the language of the family's choice or other mode of communication unless it is not feasible to do so.
- (e) Evaluations pursuant to Section 52082 and assessments for service planning shall be

conducted in natural environments whenever possible.

C. **Educational Considerations of Handicapping Condition**

Services which must be considered based on the IFSP:

- Home-based early educational services.
- Home-based and group services.
- Related services as defined in Section 300.13 of Title 34 of the Code of Federal Regulations, as that section read on April 1, 1986.

***DYSLEXIA –
WHEN DO CHILDREN WITH THIS
DISABILITY QUALIFY FOR
SPECIAL EDUCATION?***

California Education Code 56337.5

- a. A pupil who is assessed as being dyslexic and meets eligibility criteria specified in Section 56337 and subdivision (j) of Section 3030 of Title 5 of the California Code of Regulations for the federal Individuals with Disabilities Education Act (20 U.S.C. Sec. 1400 and following) category of specific learning disabilities is entitled to special education and related services.
- b. If a pupil who exhibits the characteristics of dyslexia or another related reading dysfunction is not found to be eligible for special education and related services pursuant to subdivision (a), the pupil's instructional program shall be provided in the regular education program.

California Education Code 56245

The Legislature encourages the inclusion, in local inservice training programs for regular education teachers and special education teachers in school districts, special education local plan areas, and county offices of education, of a component on the recognition of, and teaching strategies for, specific learning disabilities, including dyslexia and related disorders.

***ATTENTION DEFICIT DISORDERS –
WHEN DO CHILDREN WITH THIS
DISABILITY QUALIFY FOR
SPECIAL EDUCATION?***

California Education Code 56339

- a. A pupil whose educational performance is adversely affected by a suspected or diagnosed attention deficit disorder or attention deficit hyperactivity disorder and demonstrates a need for special education and related services by meeting eligibility criteria specified in subdivision (f) or (i) of Section 3030 of Title 5 of the California Code of Regulations or Section 56337 and subdivision (j) of Section 3030 of Title 5 of the California Code of Regulations for the federal Individuals with Disabilities Education Act (20 U.S.C. Sec. 1400 and following) categories of “other health impairments,” “serious emotional disturbance,” or “specific learning disabilities,” is entitled to special education and related services.
- b. If a pupil with an attention deficit disorder or attention deficit hyperactivity disorder is not found to be eligible for special education and related services pursuant to subdivision (a), the pupil’s instructional program shall be provided in the regular education program.
- c. It is the intent of the Legislature that local educational agencies promote coordination between special education and regular education programs to ensure that all pupils, including those with attention deficit disorders or attention deficit hyperactivity disorders, receive appropriate instructional interventions.
- d. It is further the intent of the Legislature that regular education teachers and other personnel be trained to develop an awareness about attention deficit disorders and attention deficit hyperactivity disorders and the manifestations of those disorders, and the adaptations that can be implemented in regular education programs to address the instructional needs of pupils having these disorders.

“LOW INCIDENCE DISABILITIES”

A. Definitions

State – California Education Code 56026.5

“*Low Incidence Disability*” means a severe disabling condition with an expected incidence rate of less than one percent of the total statewide enrollment in kindergarten through grade 12. For purposes of this definition, severe disabling conditions are hearing impairments, vision impairments, and severe orthopedic impairments, or any combination thereof. For purposes of this definition, vision impairments do not include disabilities within the function of vision specified in Section 56338.

B. Assessment Standards

California Education Code 56320(g)

“The assessment of a pupil, including the assessment of a pupil with a suspected low incidence disability, shall be conducted by persons knowledgeable of that disability. Special attention shall be given to the unique educational needs, including, but not limited to, skills and the need for specialized services, materials, and equipment consistent with guidelines established pursuant to Section 56136.” (See also Section 44265.5 cited on the following page.)

California Education Code 56327(h)

“The personnel who assess the pupil shall prepare a written report, or reports, as appropriate of the results of each assessment. The report shall include, but no be limited to, all of the following:

The need for specialized services, materials, and equipment for pupils with low incidence disabilities consistent with guidelines established pursuant to Section 56136.”

C. Educational Considerations of Handicapping Condition

California Education Code 56345(b)(7)

“When appropriate, the individualized education program shall also include....

For pupils with low incidence disabilities, specialized services, materials, and equipment, consistent with guidelines established pursuant to Section 56136.”

California Education Code 56136

Requires the Superintendent of Public Instruction to “develop guidelines for each low incidence disability area and provide technical assistance to parents, teachers, and administrators regarding the implementation of the guidelines.”

California Education Code Section 56201

“As part of the local plan submitted pursuant to Section 56200 each special education local plan area shall describe how specialized equipment and services will be distributed within the local plan area in a manner that minimizes the necessity to serve pupils in isolated sites and maximizes the opportunities to serve pupils in the least restrictive environments.”

Education Code Section 44265.5 outlines credential requirements for specialized teachers serving students with low incidence disabilities:

- (a) Pupils who are visually impaired, as defined in Section 56350, shall be taught by teachers whose professional preparation and credential authorization are specific to that disabling condition.
- (b) Pupils who are deaf or hard of hearing shall be taught by teachers whose professional preparation and credential authorization are specific to that disabling condition.

The Individuals with Disabilities Education Act (IDEA) now requires that the IEP team shall “consider whether the child requires assistive technology devices and services” for all students with disabilities. New IEP requirements also include the need for “Braille” for students who are “blind or visually impaired”, and “language and communication needs...” for students who are “deaf or hard of hearing”. The Special Education Division’s website contains a memorandum regarding assistive technology and details on these and other changes in federal and state requirements resulting from reauthorization of IDEA, AB 602 and other legislation. The website also contains a Low Incidence Directory, which includes a listing of public school programs and a directory of non-profit agencies, individuals and organizations which can provide services, knowledge, expertise of other resources: <http://www.cde.ca.gov/spbranch/sed/index.htm>

D. Guidelines – Specialized Books, Materials and Equipment and Specialized Services

Funds may be used for all pupils with low incidence disabilities (birth through age 21) as defined in law, even though they may have been counted in another category in the pupil count. For example, a pupil who is deaf and also mentally retarded would still be eligible even if the pupil was reported in the latter category or as multi disabled.

Also, pupils counted as orthopedically impaired may not be eligible because they are not “severely orthopedically impaired.” A student has a severe orthopedic impairment when such an impairment is persistent, significantly restricts the pupil’s normal physical development, movement and activities of daily living and requires highly specialized services, materials and equipment, as determined by the IEP per Education Code Section 56345 (b)(7).

**DEFINITION OF
“SEVERELY DISABLED”**

California Education Code 56030.5

“*Severely Disabled*” means individuals with exceptional needs who require intensive instruction and training in programs serving pupils with the following profound disabilities: autism, blindness, deafness, severe orthopedic impairments, serious emotional disturbances, severe mental retardation, and those individuals who would have been eligible for enrollment in a development center for handicapped pupils under Chapter 6 (commencing with Section 56800) of this part, as it read on January 1, 1980.

**VENTURA COUNTY SELPA
GUIDELINES FOR INTERPRETING THE
LARRY P. JUDGMENT
Adopted 3/8/88**

Ventura County SELPA is committed to ensuring that the rights of all children to appropriate educational programs are followed and protected. Therefore, it encourages its participating school districts to adhere to the legal mandate of the recent Larry P. Judgment which bans the use of I.Q. tests for Black children for any special education purpose.

A. **Legal References**

1. **Larry P. et al vs. Wilson Riles Order Modifying Judgment** No. C-71-2270 RFP dated 9/25/96 states:

“...School districts are not to use intelligence tests in the assessment of Black pupils who have been referred for special education services...”

“...In lieu of I.Q. tests, districts should use alternative means of assessment to determine identification and placement...”

“...An I.Q. test may not be given to a Black pupil even with parental consent...”

“...the prohibition on I.Q. tests goes further and prohibits **any** use of an I.Q. test as part of an assessment which could lead to special education placement or services...”

“...When a school district receives records containing test protocols from other agencies such as regional centers, out-of-state school districts, military facilities, or independent assessors, these records shall be forwarded to the parent. I.Q. scores contained in the records shall not become a part of the pupil’s current school record...”

“...This directive supersedes all previous notices as to the meaning and effect of the Court’s decision in **Larry P. v. Riles...**”

2. **Larry P. Litigation: Directive to State Special Educators**, Dr. Shirley Thornton, Deputy Superintendent, Specialized Programs Branch, dated 12/3/86 states:

“...This directive is intended to reconfirm the Federal Court’s 1979 decision, and to implement another order of the Court...”

“...The proper purpose of this notice is to clarify the use of I.Q. tests in the assessment of Black pupils for special education services...”

3. **Recommended Disposition of Larry P. Records Generated Prior to September 1986**

A memorandum dated October 15, 1987 from Patrick Campbell, Assistant

Superintendent and Director, Special Education Division, California State Department of Education states that:

“Before a Black special education student is re-evaluated for special education or transfers to a new district, all prior records of I.Q. scores, or references to information from I.Q. tests, should be permanently sealed. The records are to be opened only for litigation purposes, official state or federal audits, or upon parent request. The parent shall be given copies of the sealed records upon request. The sealed records shall be maintained for a period of five years.

Prior to sealing the records of these students, the parents shall be notified that the records will be sealed because of a court decision which prohibits the use of intelligence tests for Black students for any purpose related to special education. Additionally, prior to sealing the records a qualified professional should identify appropriate data to be copied and purged of all I.Q. scores or references to information from I.Q. tests. The remaining data should then be transferred to the student’s current record. In no case shall the I.Q. test information be made available to the IEP team for any purpose.”

B. Eligibility Criteria

In compliance with Federal and State requirements, specific eligibility criteria will need to be followed in determining whether or not a Black student is eligible for special education services.

C. Assessment Standards

Based on the legal directives, the following shall be the minimal guidelines for assessing the cognitive function of Black students to determine eligibility for special education services. The assessment of cognitive function:

1. Shall use alternative means of assessment in lieu of I.Q. tests. These techniques should include, and would be limited to, assessment of the student’s:
 - a. personal history and development
 - b. adaptive behavior
 - c. classroom performance
 - d. academic achievement
 - e. abilities and inabilities in a specific skill area based on other evaluative instruments designed to point out specific information.
2. May employ one or more of the following theoretical frameworks currently being used to assess Black students in California:
 - a. psychological and information processing

- b. neuropsychological
- c. developmental
- d. ecological
- e. criterion referencing
- f. curriculum based

D. **Considerations and Recommendations**

1. Definition of I.Q. Test

- a. Any test which uses the term intelligence in its title, claims to be a test of intelligence or general intellectual functioning in its manuals, or results in a standard score labeled I.Q. should not be used.
- b. Tests which are used in practice as if they measure intelligence and tests which have been validated primarily through correlation with identified tests of intelligence should be used with caution or not at all.
- c. The subtests from identified I.Q. tests cannot be used.
- d. Basic list of intelligence tests from the 1979 Larry P. decision:
 - Stanford-Binet
 - Wechsler Intelligence Scale for Children (WISC)
 - Wechsler Intelligence Scale for Children-Revised (WISC-R)
 - Wechsler Adult Intelligence Scale (WAIS)
 - Wechsler Pre-School and Primary Scale of Intelligence (WPPSI)
 - Leiter International Performance Scale
 - Arthur Point Scale of Performance Test, Revised Form II
 - Catell Infant Intelligence Scale
 - Columbia Mental Maturity Scale, Revised Edition
 - Draw-a-Person (Goodenough)
 - Gessell Development Schedule
 - Goodenough-Harris Drawing Test
 - Merrill-Palmer Pre-School Performance Test
 - Peabody Picture Vocabulary Test
 - Raven Progressive Matrices
 - Slosson Intelligence Test
 - Van Alstyne Picture Vocabulary Test
- e. Other intelligence tests include:
 - Kaufman Assessment Battery for Children (KABC)
 - Woodcock-Johnson Psychoeducational Battery-Part I Test of Cognitive Ability

- McCarthy Scales of Children's Abilities
- Wechsler Adult Intelligence Scale - Revised (WAIS-R)
- Stanford Binet - Fourth Edition
- Detroit Test of Learning Aptitude - Revised (the portion used in determining I.Q.)
- (DTLA-R)

2. Assessment process for Special Education Services

- a. Parents of Black students shall not be asked if they want to consent to the use of an I.Q. test.
- b. An I.Q. test may not be given to a Black student even with parental consent.
- c. The standard practices for a thorough assessment continue to apply.
- d. School districts may find it necessary to provide additional resources for:
 - (1) conducting assessments.
 - (2) conducting research to develop local norms, alternative assessment methods and predictive validity for new instruments.
 - (3) providing inservices to school psychologists regarding more comprehensive preassessment screening and consultation strategies and alternative assessment methods.

3. I.Q. Scores and Records

a. Records Generated Prior to September 1986

I.Q. scores contained in the records shall not become part of the student's current school record. Therefore, current school records should not contain any references to I.Q. scores and tests. Based on the memo from Patrick Campbell, State Director of Special Education, dated October 15, 1987, the following steps should be taken:

- (1) notify parents of the availability of unaltered records prior to the date of sealing. If a response is received from the parents, send them a copy of the sealed records.
- (2) remove protocols, original reports and documents containing references to I.Q. scores and tests. (These may or may not include IEP documents and psychoeducational reports.)
- (3) copy the above mentioned reports and documents and purge of I.Q. scores, tests and/or references to same and place in student's file.
- (4) place unaltered protocols, reports and documents containing references to I.Q. tests and scores in a sealed file.

b. Records Received From Other Districts and Agencies

When a school district receives records containing references to I.Q. scores, tests and protocols from out-of-state school districts, military facilities, independent assessors, or other agencies, these records shall not become part of the student's current school file. Based on this, the following steps should be taken:

- (1) notify parents of the availability of unaltered records prior to the date of sealing. If a response is received from the parents, send them a copy of the sealed records.
- (2) remove protocols and original reports containing references to I.Q. scores and tests. (These may or may not include IEP documents and psychoeducational reports.)
- (3) copy of the above mentioned reports and documents and purge of I.Q. scores, tests and/or references to same and place in student's file.
- (4) place unaltered protocols, reports and documents containing references to I.Q. tests and scores in a sealed file.

4. **References**

In order to provide technical data for each psychological report for Black children, the following references are recommended:

APA, AERA, NCME. (1985). **Standards for Educational and Psychological Tests**. Washington: American Psychological Association.

CASP. (1987) **Larry P. Documentation and Recommendations**. Millbrae, California: California Association of School Psychologists.

Elliott, Rogers. (1987). **Litigation Intelligence: I.Q. Tests, Special Education and Social Science in the Courtroom**. Auburn House Publishing Company; Dover, Massachusetts.

Johnson, Orval G. (1976). **Tests and Measurements in Child Development: Handbook II, 2 Vols**. San Francisco, CA. Jossey-Bass.

Keyser, D. J. and Sweetland, R. C. (1985). **Test Critiques, vols. I-V**. Kansas City, Missouri. Test Corporation of America.

Mitchell, J. V., Jr. (1985) **The Ninth Mental Measurements Yearbook, 2 Vols**; University of Nebraska Press, Lincoln, Nebraska.

Salvia, J. and Ysseldyke, J. E. (1985). **Assessment in Special and Remedial Education, 3rd Edition**. Boston: Houghton Mifflin.

Sweetland, R. L. and Keyser, D. J. (1986). **Tests, 2nd Edition**. Kansas City, Missouri; Test Corporation of America.

Watson, D. L., Omark, D., Grouell, S. L., and Heller, B. (1980). **Nondiscriminatory Assessment, 2 Vols.** San Diego: Los Amigos Research Associates.

REFERENCES

1. *ADHD After the Label...*, Ruth Graham-Moniot and Patricia Kingsley, VUSD 1992
2. *Best Practices for Designing and Delivering Effective Programs for Individuals with Autistic Spectrum Disorders*, California Department of Education 1997
3. *California Programs and Services for Students with Serious Emotional Disturbances*, Resources in Special Education; Copyright 1991.
4. *Educational Occupational Therapy and Physical Therapy Service Guidelines*, Ventura County SELPA; 2002.
5. *Guidelines and Procedures for Meeting the Specialized Physical Health Care Needs of Pupils*, California State Department of Education, Sacramento; Copyright 1990
6. *Guidelines for Individual Evaluation of California Students with Disabilities Birth through Age twenty-one*, California Department of Education, 1999
7. *Guidelines for Occupational Therapy Services in School Systems*; (CDE) Copyright 2nd Edition 1989.
8. *Identification and Assessment of the Seriously Emotionally disturbed Child: A Manual for Educational and Mental Health Professionals*, California State Department of Education; Copyright 1986.
9. *Inclusive Physical Education Fun and Games for Everyone!*, Ventura County SELPA; Copyright 1996.
10. *Integration of Students with Physical Disabilities*, Ventura County SELPA; Copyright 1996.
11. *Preschool Special Education Program Handbook: A Resource to the Field (A.B. 2666 and P.L. 99-457)*, Resources in Special Education (RiSE); Copyright 1988.
12. *Program Guidelines for Hearing Impaired Individuals*, California State Department of Education; Copyright 1986.
13. *Program Guidelines for Individuals Who Are Deaf-Blind*, California State Department of Education; Copyright 1990.
14. *Program Guidelines for Severely Orthopedically Impaired Individuals*, California State Department of Education; Copyright 1985.
15. *Program Guidelines for Visually Impaired Individuals - 1987 Revised Edition*, California State Department of Education; Copyright 1987.
16. *What's Next After Early Start?*, Ventura County SELPA, 1997