

EXECUTIVE Summary

Guidelines

for Identifying
Children
with Intellectual
Disability
2006

CT State Department of Education
Bureau of Special Education



Connecticut State Department of Education

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RATIONALE

This revision of the *Guidelines for Identifying Children with Intellectual Disability/Mental Retardation* (2000) is intended to clarify and improve special education identification, as well as placement policies and practices for professionals serving children with intellectual disability (ID) or children suspected of having an intellectual disability in Connecticut schools. The term intellectual disability continues in this revision rather than the parallel term, mental retardation. The purpose of the original guidelines remains and is to:

- promote appropriate assessments of children suspected of having an intellectual disability;
- promote consistency across the state in the process of determining eligibility;
- foster and enhance the awareness of intellectual disability as a heterogeneous condition;
- incorporate recent developments in the professional literature and field; and
- promote "intellectual disability" as the nationally accepted nomenclature for thinking about and providing service to students with mental retardation.

In addition, the 2006 revision seeks to improve outcomes for students with intellectual disability by:

- objectively defining the intellectual disability classification and improving placement procedures and practices of children who are economically disadvantaged and of children by race/ethnicity;
- ensuring that children classified with intellectual disability receive nonbiased assessment and evaluation procedures that yield useful information for educational programming; and
- preventing inappropriate intellectual disability classification and placement decisions by race/ethnicity while, simultaneously, ensuring that children with intellectual disability are appropriately identified and provided with the necessary supports and services in the least restrictive environment.

EXECUTIVE SUMMARY

The Connecticut State Department of Education defines intellectual disability (ID) as:

Significant limitations both in intellectual functioning and in adaptive behavior as expressed in conceptual, social and practical adaptive skills.

This document, *Guidelines for Identifying Children with Intellectual Disability* (2006), is a revision to an earlier State Department of Education document, titled *Guidelines for Identifying Children with Intellectual Disability/Mental Retardation* (2000), and is intended to provide current best practice criteria and procedures to assure appropriate, nonbiased assessment and identification of children with intellectual disability, ages 3-21.

These revised guidelines are sequenced to emphasize appropriate identification using nonbiased assessment procedures. A nonbiased assessment approach, as outlined in this document, is a process of gathering information and making decisions that are sensitive to cultural differences and educationally appropriate. The document begins with a description of a key feature of nonbiased assessment—a problem solving approach that begins with early intervening services and multiple levels of prevention, and then proceeds to guide the reader sequentially through the process of referral, evaluation and eligibility determination.

These guidelines emphasize that nonbiased assessment requires the provision of appropriate instruction in preschool and/or general education classes, with ongoing parent and school collaboration from the beginning of a child's education. The guidelines proceed in discussing the use of proactive preventive measures for a child in the early stages of experiencing difficulties before a referral to special education. Critical features in the development and administration of a comprehensive, nonbiased assessment are then delineated. The guidelines provide school personnel with the appropriate and necessary steps to take to determine a child eligible as intellectually disabled as stipulated in the Individuals with Disabilities Education Improvement Act (IDEA, 2004). Criteria used in this process are considered best practice in the field of educational identification. Information is also provided on determining a free appropriate public education in the least restrictive environment for children with intellectual disability.

Identification Process for Intellectual Disability:

1. Provision of Appropriate Instruction
 - Providing appropriate instruction that is explicit and systematic
 - Providing culturally responsive teaching/pedagogy
 - Using early intervention—early intervening services as a proactive preventative approach to addressing students' needs
2. Referral and Evaluation
 - Engaging the participation of families early in the process

- Designing and administering a comprehensive evaluation assuring the use of nonbiased assessment procedures and the requirements for evaluation in IDEA
3. Eligibility Determination
 - Reviewing a variety of sources to inform the decision of eligibility
 - Using the Connecticut ID Eligibility Documentation form
 - Using eligibility criteria that addresses intellectual and adaptive behavior functioning, onset within the developmental period (before age 18); and adverse effect on educational performance resulting in need for special education
 4. Determining the Least Restrictive Environment
 - Developing an Individualized Education Program (IEP) and deciding placement based on IDEA requirements for the least restrictive environment
 - Using *Points to Consider in Determining the LRE* (Appendix H) to assist in appropriate placement

Criteria for Eligibility

(adapted from Luckasson, Brothwick-Duffy, Buntinx, Coulter, Craig, Reeve, Schalock, Snell, Spitalnik, Spreat & Tasse, 2002)

Each of the following criteria must be met to identify a child with an intellectual disability in Connecticut's schools.

1. A significant limitation in intellectual functioning requiring a composite or total test score of two (2.0) standard deviations below the population mean, with consideration given to the standard error of measurement (SEM), on a valid and reliable test of intellectual functioning.

In some cases it may be necessary to consider part scores. Guidance in their use is provided in a later section titled Classification Criteria for Intellectual Functioning. Other information on intellectual functioning must be obtained and considered, resulting in decisions about intellectual functioning that are based on the principle of convergent validity. Convergent validity is defined as examining a wide variety of information to determine if a consistent pattern is apparent that supports identifying a significant limitation in intellectual functioning.

2. A significant limitation in at least one of the three areas of conceptual, social and practical adaptive skills or in the composite score must be evident. Functional limitations must equate to deficits scores of at least one and one-half (1.5) standard deviations below the mean on the standardized assessment tool used, taking into account the SEM.

As with intellectual functioning, different sources of adaptive behavior information must be considered across different reporters (teachers, parent, peers); multiple settings (in-school and out-of-school); and using different methods to collect information (review records, interviews, observations and assessments), which confirm or deny significant

limitations in adaptive behavior. A single adaptive behavior score should never be the sole basis for either confirming or rejecting the possible existence of a significant limitation in adaptive behavior. The principle of convergent validity also should be applied to decisions about adaptive behavior limitations.

3. Evidence of significant limitations in intellectual functioning and adaptive behavior must appear during the developmental period (before age 18). The diagnosis of an intellectual disability does not have to be determined by age 18, but evidence of significant limitations in the appropriate areas must be present before age 18.

For example, a 19-year-old high school student referred for an evaluation might be validly identified as intellectually disabled in Connecticut if substantial evidence of significant limitations in general intellectual functioning and adaptive behavior appeared before the age of 18, even though the actual diagnosis did not occur until after age 18.

4. The disability must adversely affect the student's educational performance and, as a result, the student requires special education to address his/her unique educational needs.

Once the four prior criteria are met, the Planning and Placement Team (PPT) must then determine that the child requires specialized instruction in order to receive an appropriate education.

Further Information: Intellectual Functioning and Adaptive Behavior

Intellectual functioning has been a challenge to define during the past 100 years. However, common to the various definitions are the following four statements:

- Intellectual functioning is a hypothetical construct that is inferred from behavior.
- Intellectual functioning is significantly, but imperfectly, correlated with a wide range of important outcomes including achievement, career success, health and lifestyle choices, and social responsibility.
- Intellectual functioning is related to the speed and complexity of information processing, spontaneous organization of events and experiences into human memory, and the availability of strategies to solve problems.
- Intellectual functioning is related to the *spontaneous* application of thinking and problem solving strategies as well as volitional control of their application to everyday situations.

Adaptive behavior is defined according to the most recent American Association on Mental Retardation (AAMR) manual as “the collection of conceptual, social and practical skills that have been learned by people in order to function in their daily lives” (Luckasson et al., 2002 p. 41). This formulation rests on recent factor and theoretical analysis that suggest three broad domains of adaptive behavior: conceptual, social and

practical (Greenspan, Switzky, & Granfield, 1997; Luckusson et al., 2002). The following descriptions of each domain appeared in Luckusson et al (2002, p. 42).

Conceptual: Language (expressive and receptive), reading and writing, money concepts and self-direction

Social: Interpersonal skills, responsibility, self-esteem, gullibility (vulnerability to being tricked or manipulated), naïveté, ability to follow rules, ability to obey laws, ability to avoid victimization

Practical: Daily living activities (eating, mobility, toileting, dressing); instrumental activities of daily living (meal preparation, housekeeping, using public transportation, taking medication, managing money, using the telephone); occupational skills; and maintaining safe environments

The practical and social domains have obvious and well-established status as critical components of adaptive behavior. The conceptual domain represents competencies that are essential to everyday successful functioning in the larger community, neighborhood, home and school. Significant limitations in the conceptual domain can lead to serious coping disadvantages and informal recognition of adaptive behavior limitations by others. For example, adolescents who cannot apply literacy skills in everyday situations, such as finding a number in a phone directory or comparing prices between different sizes of some commodity, are at a serious disadvantage and show deficits that are readily recognized by peers and adults.

For the purposes of identification of a student with an intellectual disability, it must be determined that the student has significant limitations in both intellectual functioning and adaptive behavior. It is not sufficient nor is it an appropriate practice to identify a student with an intellectual disability based on a sole criterion.

Other Considerations

There may be reluctance by multidisciplinary teams to identify students as having a mild intellectual disability. Students with intellectual disability are frequently identified as specific learning disabled (Macmillan, Gresham, Siperstein, & Bocian, (1996). Moreover, across the country, the prevalence of mental retardation has declined by more than 40 percent and the prevalence of learning disabilities has increased by more than 240 percent since 1977 (Reschly, Myers and Hartel, 2002). Misdiagnosing children and youth into what are perceived as more acceptable categories raises ethical issues and may create long-term problems for individuals and those agencies designed to assist clients who have the particular category of disability. Many individual cases of this nature have emerged in recent years in Social Security Supplemental Security Income (SSI) eligibility cases and in other agencies making decisions about services for adults.

Careful evaluation and analysis by evaluators and thoughtful discussions by the PPT need to be held in circumstances where the child may have concomitant conditions or

disabilities. These situations create a challenge for the PPT in accurately determining the child's eligibility as intellectually disabled, another disability or multiple disabilities. Guidance is provided in the document to assist the team when this occurs.

In rare cases when a student is either very young or determined by a team well-informed about assessment practices to be either "untestable" or not appropriate for any available tests, the PPT may make a decision to forgo administration of a particular test of cognitive assessment. In these cases, there should be sufficient objective information consistent with the identification of intellectual disability, and both school personnel and parents must agree with that decision. Given the importance of a cognitive assessment for the identification of students with intellectual disabilities, it is imperative in these instances that the PPT must determine the most appropriate measure of cognitive ability. This may be a developmental assessment of the cognitive domain or other such assessment that would provide objective cognitive information to the team, ensuring an informed determination of intellectual disability as well as useful information for programming.

When determining eligibility at times of reevaluation, the PPT needs to be attentive to the age of the child at the previous evaluation to determine if a more comprehensive evaluation is needed at the time of reevaluation. The PPT also needs to consider the impact of the duration, intensity and type of services that the student has received since the last eligibility determination. A revision to a child's determination at the later stages of a child's educational career needs careful consideration.

Programming in the Least Restrictive Environment

Once a determination is made that a student has an intellectual disability and requires specialized instruction, the team develops the IEP. Decisions regarding the delivery of services must ensure that, independent of the label of intellectual disability, the child receives a free and appropriate public education (FAPE) in the Least Restrictive Environment (LRE).

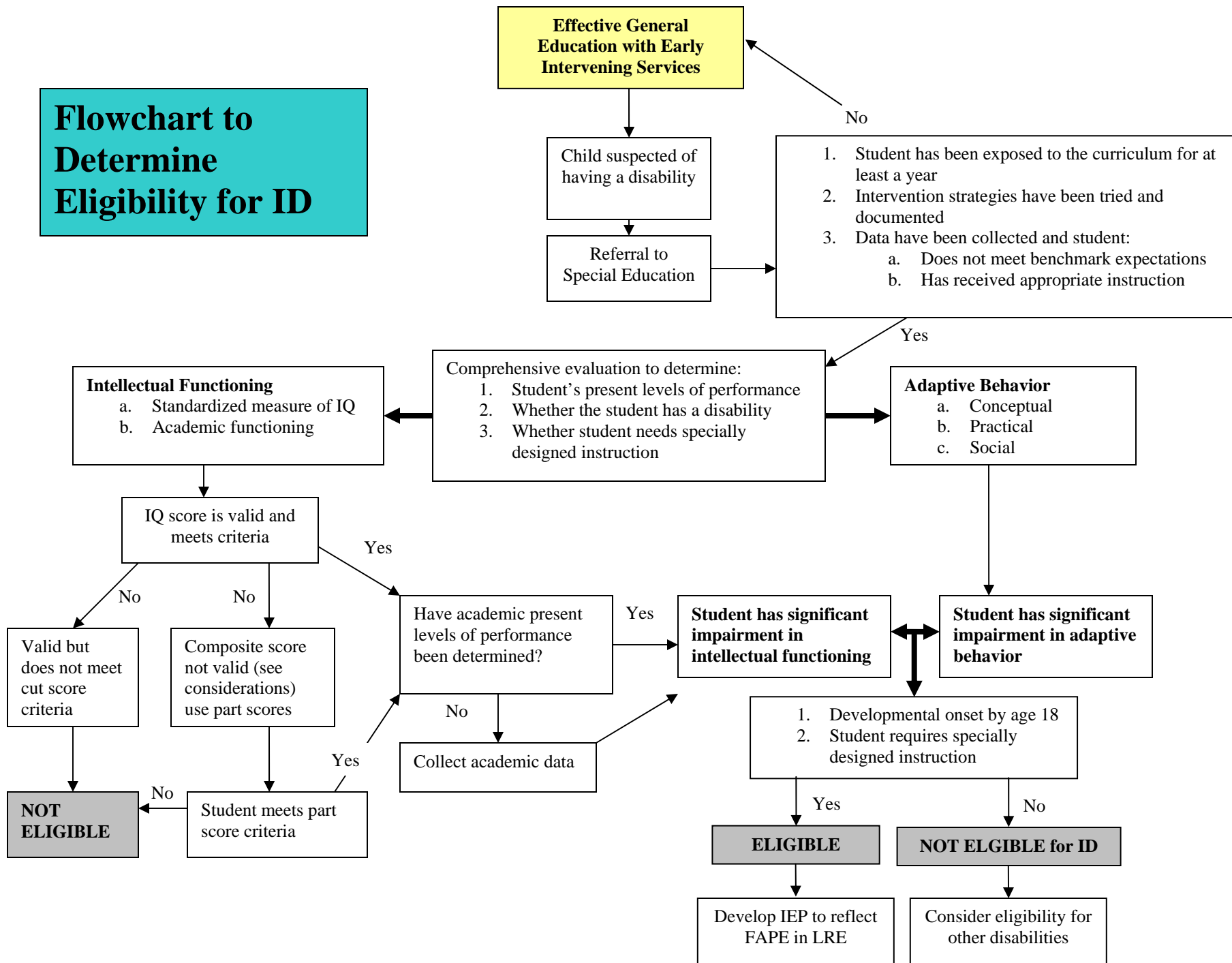
The goal for all students with intellectual disability is that, to the "maximum extent appropriate," they are educated with students who are not disabled in the general education setting, engaged in learning activities from the general education curriculum, with appropriate accommodations and modifications.

Available Forms and Other Sources of Information

Following are the forms and other information available that are referenced throughout this document to assist in appropriate nonbiased identification of a child with an intellectual disability. Appendix A and B are included in this Executive Summary. Appendices A through H are included in the complete revision of the *Guidelines for Identifying Children with Intellectual Disability*.

- Appendix A:** Flowchart of Determining Eligibility (attached)
- Appendix B:** Intellectual Disability Eligibility Documentation form (attached)
- Appendix C:** Reviewed Adaptive Behavior Scales
- Appendix D:** Evaluation and Determination of Eligibility (IDEA, 2004)
- Appendix E:** Understanding Disproportionality
- Appendix F:** Checklist for Intervention Quality Indicators
- Appendix G:** Synopsis of the Settlement Agreement- *P.J., et al. v. State of CT, et al.*
- Appendix H:** Points to Consider in Determining Programming in the LRE

Flowchart to Determine Eligibility for ID



Appendix B

Intellectual Disability Eligibility Documentation

Name of Student: _____ Date of Birth: ___/___/___ Age: _____
 District: _____ School: _____ Grade: _____
 Date of PPT Determining and Documenting Eligibility: _____

Eligibility Standards and Procedures Documentation		Standard Met?	
		Yes	No
1. Intellectual Functioning			
a. Is there significantly limited intellectual functioning, that is 2 standard deviations below the mean on an individually administered, standardized measure of intelligence?		<input type="checkbox"/>	<input type="checkbox"/>
b. Did interpretation of evaluation results consider factors that may affect test performance including:			
i. Limited English proficiency		<input type="checkbox"/>	<input type="checkbox"/>
ii. Cultural background and differences		<input type="checkbox"/>	<input type="checkbox"/>
iii. Medical conditions that affect the student's performance at school		<input type="checkbox"/>	<input type="checkbox"/>
iv. Communication, sensory or motor abilities		<input type="checkbox"/>	<input type="checkbox"/>
c. Are the factors above documented in the written report?		<input type="checkbox"/>	<input type="checkbox"/>
2. Adaptive Behavior – Home (Standardized)			
a. Is there documentation of adaptive behavior of home or community skills from the child's principal caretaker?		<input type="checkbox"/>	<input type="checkbox"/>
b. Is the adaptive behavior composite score 1.5 standard deviations below the mean of the instrument on at least one of the domains?		<input type="checkbox"/>	<input type="checkbox"/>
c. Did interpretation of evaluation results consider factors that may affect test performance including:			
i. Limited English proficiency		<input type="checkbox"/>	<input type="checkbox"/>
ii. Cultural background and differences		<input type="checkbox"/>	<input type="checkbox"/>
iii. Medical conditions that affect the student's performance at school		<input type="checkbox"/>	<input type="checkbox"/>
iv. Communication, sensory or motor abilities		<input type="checkbox"/>	<input type="checkbox"/>
d. Are the factors above documented in the written report?		<input type="checkbox"/>	<input type="checkbox"/>
e. Additional documentation of adaptive behavior:			

3. Adaptive Behavior – School (Systematic Observations and Curriculum-based Assessments)			
a. Do significant limitations exist in adaptive behavior as determined by systematic observations in the school, daycare center, residence or program that compares the child with same-age peers?		<input type="checkbox"/>	<input type="checkbox"/>
b. Do the observations address age-appropriate adaptive behaviors for the child's chronological age?		<input type="checkbox"/>	<input type="checkbox"/>
c. Results of additional documentation of adaptive behavior skills, when appropriate (e.g., standardized school adaptive behavior, reading, math or writing skills assessment):			

4. Was intellectual impairment manifested during the developmental period (birth through 18)?		<input type="checkbox"/>	<input type="checkbox"/>
5.			
a. Was the student provided appropriate instruction?		<input type="checkbox"/>	<input type="checkbox"/>
b. Was the student provided early intervening services? Please describe on a separate page (EIP, SAT, multi-tiered interventions, etc.).		<input type="checkbox"/>	<input type="checkbox"/>
c. Based on the above, is student's performance due to lack of appropriate instruction?		<input type="checkbox"/>	<input type="checkbox"/>
6. Is there current demonstration of limitations in the student's functioning across multiple contexts?		<input type="checkbox"/>	<input type="checkbox"/>
7. Does the student's intellectual functioning cause adverse effects on education performance in the general education classroom or other learning environment and require individually designed instruction in order for the child to receive educational benefit from a free and appropriate public education?		<input type="checkbox"/>	<input type="checkbox"/>
8. Is this student eligible as a student with intellectual disability?		<input type="checkbox"/>	<input type="checkbox"/>

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