

# SLD FACT SHEET #3

## Q & A

**Question:** What normative information are we using to determine appropriate rate of improvement?

**Answer:** Guidance on decision-making specific to Criterion 4 (insufficient rate of progress) will be delivered within Module 3 training of the MTSS cohorts, and will also be found in the SLD Implementation Guide, to be published by Winter of 2017-2018 academic year.

**Question:** For Criterion #2 of the SLD definition, how can an intellectual ability be ruled out without conducting a psychological evaluation?

**Answer:** Within the context of a student's educational performance (academic and functional), existing data reviewed by the problem-solving team would inform decisions regarding whether an intellectual disability is suspected. Through reviewing classroom performance across academic areas, language development and adaptive functioning across settings, a team often has enough information to determine whether an intellectual disability may be, or clearly is not, the reason for the academic struggles. A measure of intellectual ability may be conducted if screening measures and other data sources indicate a possible intellectual disability.

**Question:** Could you provide additional information and guidance on when parent permission is required when using diagnostic assessments?

**Answer:** Diagnostic assessment(s) conducted to assist in determining disability and need for specially designed instruction require written parental consent. Diagnostic assessments used by a teacher or specialist to determine appropriate instructional strategies for general education curriculum implementation do not require written parental consent. However, parent involvement in their child's educational progress is essential and absence of parental written consent should not be interpreted as absence of parent participation and communication.

**Question:** With implementation of new SLD eligibility processes, how will parent referrals be impacted?

**Answer:** The requirements in addressing parent referrals do not change. If a parent requests an evaluation, the IEP team must convene to determine whether or not the child will be referred for consideration of special education through an initial evaluation.

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**Question:** Do these formal assessments need parent consent? Are these only done at the evaluation stage?

**Answer:** If it is suspected that a child's difficulties are the result of a disability as defined by the IDEA, the IEP team is obligated to identify the academic and/or functional areas in need of further investigation and promptly seek parental consent to conduct a full and individual evaluation.

**Question:** RIOT data sources? What is that acronym?

**Answer:** RIOT = Review, Interview, Observe, Test. This acronym is most often used within the context of what is referred to as a RIOT/ICEL matrix. The ICEL = Instruction, Curriculum, Environment, Learner. This matrix is not itself a data collection instrument. Instead, it is an organizing framework that increases schools' confidence both in the quality of the data that they collect and the findings that emerge from the data. Utilization of this type of organizing framework assists school teams in ensuring that they are addressing the academic and functional needs of students through the use of multiple sources of data.

**Question:** Would you discuss Criterion 1 with regards to schools, grade levels, or classes being significantly below grade level as indicated by multiple indicators, thus giving pause to 'lack of appropriate instruction.'

**Answer:** When schools have a large number of students who are performing below grade level, it is critical that core instruction, curriculum and environment are analyzed and plans for improvement are put into place with frequent monitoring of response to these changes. When considering "lack of appropriate instruction" in this context, individual student data when compared to similar peers receiving the same instruction/intervention can be informative. Are the majority of students responding to the changes in core instruction, curriculum and/or environment? How does this student's performance and response to instruction compare to students receiving similar instruction/intervention? Lack of appropriate instruction is considered a "determinant factor" that results in a student's inadequate achievement and insufficient progress. All data must be considered when determining if a student is a student with a disability.

**Question:** Is someone looking at universal screening and interventions for secondary students, particularly at the high school level?

**Answer:** Students at the high school level have a history of academic and behavioral performance that reduces the need for screening every student. At the high school level, universal screening is most often referred to as an Early Warning System. An Early Warning System includes examining attendance, behavioral (office discipline referrals and suspensions) and academic data including core class failures, poor credit earning behavior, multiple course failures, historical repeated failures on summative assessments and grade retention. Additional information on Early Warning Systems can be found in the MTSS livebinder at <http://www.livebinders.com/media/get/MTQ3NjY1MTQ=>

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**Question:** Our team struggles to try and define "lack of adequate instruction" in regard to students with a high number of absences. Is there a recommendation or a specific number of absences that could be used (10%?) to more consistently address this question when it comes to referred students? Any research on the number of days missed and the

**Answer:** This does not mean the school team must completely rule out each of these factors. It is entirely possible for one or more of these factors to be influencing a student's lack of achievement and response to intervention and for the student to have SLD. Therefore, the school team must determine the degree to which each factor affects the student's performance. The existence of the factors is not the issue; the issue is the degree to which each factor adversely affects performance. The fundamental question is whether the poor performance is primarily the result of any of these factors. Research has identified attendance risk levels. Chronic absenteeism is defined as missing 10% or more of the school year for ANY reason, including a combination of unexcused absences, excused absences, and suspensions. Any student who misses 2 days in the first 20 days of school, 6 days in the first 60 days of school, and so on should be identified as falling within a level of risk. Teams should use these levels as a starting point when examining aggregate data. In particular, when looking at individual student data, it is also necessary to look at group and school wide data to determine if this is a problem unique to the individual student or is indicative of a larger problem. If a larger group or school wide problem exists, it will be important to examine core practices first to ensure the system is responsive to student needs. In a well-functioning MTSS system, students with attendance levels that meet the threshold for risk would be identified early so appropriate interventions and supports could be put into place and resolved. Once a student's attendance stabilizes and appropriate instruction and intervention is delivered, teams will be able to measure a student's response to instruction/intervention to begin to discern whether the student's difficulties are the result of lack of access to appropriate instruction/intervention due to attendance as a primary factor for the students inadequate achievement. Excused absences for a chronic and/or medical condition should always be given special consideration to ensure an evaluation in all areas of a suspected disability is conducted. For additional research on the impact of attendance on achievement, see [www.attendanceworks.org](http://www.attendanceworks.org)