



**The Blind Brook-Rye
Committee on Special Education and
Section 504 Handbook**

2022-2023

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Introduction

The purpose of this handbook is to provide information regarding the process governing referral, evaluation, timelines, plan development, and programs pertaining to the delivery of special education services to children with disabilities in the Blind Brook Schools. This handbook also explains the differences between eligibility for specialized instruction under the federal Individuals with Disabilities Education Act (IDEA) and New York State Part 200 of the Commissioner's Regulations and protections afforded to students with disabilities in accordance with Section 504 of the Rehabilitation Act of 1973 (§504).

Our goal is to provide our community with a roadmap to ensure that all students with disabilities receive a free and appropriate public education (FAPE) and equal access to our programs and activities. With a common understanding of the process, we hope this handbook will serve to provide clear information regarding the delivery of special education services and supports to students with disabilities in the District and to further collaboration, cooperation, and understanding among all members of the Blind Brook-Rye School District.

Wishing everyone a healthy, safe, and productive school year,

Mr. Harry Burg
Director of Pupil Services

Ms. Amelia Carpanzano
Assistant Director of Pupil Services

CHILD FIND

"Child Find" requires all public school districts to have in place a system to identify, locate, and evaluate all children with disabilities who reside in the district, including children who are homeless or in foster care, and students whose parents choose to enroll them in nonpublic schools located within the district. In order to meet our Child Find obligations, our District pursues multiple avenues, including publication on our website regarding the referral process and ongoing training for staff regarding our obligations.

If a parent or guardian suspects that his/her child may have a disability that adversely affects the student's education or access to school, the parent or guardian may initiate a referral to the Committee on Special Education (CSE) or the §504 Committee by sending a letter requesting an evaluation either to the child's building principal or to the Director of Pupil Services.

School professionals, in cooperation with the building level Response to Intervention Team (RTI), also refer students suspected of having a disability to the CSE or §504 Committee, as applicable. Building principals and chairpersons of both the CSE and the §504 Team are authorized to initiate such referrals directly. In addition, school personnel, a child's physician and judicial officers may request a referral to the CSE. In cases where a request is denied, the CSE must notify the child's parent, in writing, of the right to initiate a referral directly.

Regardless of the source of a referral, a parent must provide written consent to enable the District to conduct an initial evaluation. Upon receipt of the parents' written consent, the District has 60 calendar days to complete the evaluation process and to convene a meeting of the CSE or the §504 Team, where applicable.

The CSE has 60 school days from the date of written consent to conduct an evaluation to implement an IEP, in those cases where the CSE recommends that the student be classified as a child with a disability and recommends placement in the public schools.

The Response to Intervention Team, the Committee on Special Education, and the §504 Committee

The Blind Brook-Rye School District recognizes that there are many reasons that students encounter difficulties in school. Some students may have disabilities that must be addressed through specialized instruction and or accommodations and supports. The District has a CSE and a §504 Team to conduct evaluations and to develop specialized plans to address them.

In most cases, student difficulties are episodic and require special supports that are properly addressed through remedial building level supports and services. In the District, these services are provided via a Multi-Tiered System of Supports (MTSS) and may include: Teacher academic assistance periods, Academic Intervention Services, Counseling, and other short-term interventions.

Academic Intervention Services (AIS) are intensive academic services primarily offered to support students to develop reading, writing and/or math skills. Students who score below the statewide reference point on state tests are automatically eligible. In addition, students may be referred and recommended for AIS by the Response to Intervention Team (RTI). AIS are typically provided in English Language Arts and Mathematics. The parents of any student referred and/or eligible for AIS will receive written notification from the school principal.

Our District also has a mandated framework entitled **Response to Intervention (RTI)** which is designed to provide students who are functioning below grade level with intensive, scientifically based reading instruction, additional instruction in mathematics, and/ or additional behavioral supports. Students receiving services in the RTI framework are closely monitored and assessed in order to track progress. All students in grades K-8 are assessed at a minimum of three times yearly in the areas of reading and mathematics. When a child is referred to receive services, parents are notified in writing and receive regular progress reports. In cases where a student is making appropriate progress while in the RTI framework, the service continues until the student is performing on grade level. In cases where the progress does not occur at the expected rate, the student is referred to the CSE to determine whether the difficulty is due to a learning disability.

It is well-documented through research that, nationally, many children previously identified as learning disabled were improperly classified because their difficulties were not due to a disability but due to the lack of intensive and targeted reading instruction. By offering services to all students who are not performing on grade level before referring them to the CSE, the District provides intensive instruction to rule out the lack of scientifically based instruction before considering, through a formal referral to the CSE, whether the student's difficulties are due to a disability.

The Response to Intervention Team (RTI)

The Response to Intervention Team (RTI) is a building level group consisting of administrators and faculty that meets in each school building to review students referred by their teachers or building administrators who are experiencing difficulties in school. The RTI Team first reviews the student's record and the presenting information to determine whether building level supports can address the identified problem. When building level supports are put in place, the RTI Team also sets a date to review the student's progress. In cases where the RTI Team suspects that the difficulties are due to a disability, the RTI Team initiates an appropriate referral to either the 504 Committee or to the CSE. In both cases, parents are notified of such referrals in writing.

Students receiving specialized instruction and/ or supports under an Individualized Education Program (IEP) or a §504 Accommodation Plan, may also be referred to the RTI Team to address building level concerns. If they involve questions pertaining to the student's IEP or Accommodation Plan, or involve the need for additional evaluation, the student is referred back to the appropriate Committee.

Committee on Special Education (CSE)

The federal Individuals with Disabilities Education Act (IDEA) and NYS Part 200 of the Commissioner's Regulations require a multidisciplinary team, which includes the student's parents, to determine a student's initial eligibility for special education and to propose an Individualized Education Program (IEP) for students found eligible.

The CSE is required to meet annually to review and update every child's IEP. In addition, the Committee must provide each parent a copy of the child's current IEP prior to the first day of school and provide teachers and others involved in its implementation access to the child's IEP with a description of responsibilities.

In New York, the mandatory multidisciplinary team is referred to as the Committee on Special Education (CSE). In most instances, New York law also permits Subcommittees on Special Education to convene meetings. The CSE consists of: the student's general education teacher and special education teacher/provider(s) (except that a general education teacher need not attend where the child will not be receiving any services in general education); the parents of the child; the school psychologist; an additional parent of a child with a disability and/or the school physician, upon the parents' request 72 hours prior to the meeting; and the student beginning in the school year the student turns 15 or earlier, as appropriate. Subcommittees include only the student's direct teachers and service providers.

Section 504 Committee (§504)

The §504 Committee is responsible for evaluating a student to determine whether the student has a disability that substantially interferes with a major life activity and, if so, to prepare a §504 Plan that provides accommodations and supports to give the student equal access to the school's programs and activities. Please see Appendix B for a Checklist for Determining Disabilities under §504.

For those students who manifest no symptoms, whether due to remission or the ameliorative effects of medication, the District remains obligated to determine whether the disability, if not controlled, would substantially limit a major life activity and if so, recognize the student as disabled with protection against discrimination. In cases where a student requires accommodations and/or supports to access the District's program/services, including education, the Team must prepare a §504 Accommodation Plan.

Unlike the Committee on Special Education, where both membership and the initial assessments are prescribed by law, §504 provides flexibility in terms of both its membership and testing. The §504 Team requires, as members, a person familiar with the District's programs and services, knowledgeable about the child and his/her needs and the child's parent. Under §504, evaluations may involve a review of existing information, records, observations and formal assessments only where necessary to determine the nature of the student's disability and the extent of the student's needs.

Unlike the IDEA that provides 60 calendar days from the date of consent to conduct an initial evaluation to offer an IEP, the Rehabilitation Act requires that the evaluations and plans be completed within a reasonable time. As a matter of practice, however, it remains our goal to have §504 determinations and reviews completed within the same timelines that apply to the IDEA. Unlike the IDEA that requires an annual review meeting once a year, the §504 Team is only required to meet periodically and prior to any significant change in placement. The referral process to the §504 Team in Blind Brook is similar to the CSE process described in the next section of this handbook.

The Difference between the Committee on Special Education (IDEA) and Section 504 of the Rehabilitation Act of 1973

IDEA	§ 504
13 Disabilities	Physical or Mental Impairment
Adverse impact on educational performance	Substantial limitation on a major life activity
The student requires specialized instruction/related services to benefit from instruction.	The student requires accommodations, supports and/or services to gain comparable access to district programs or services as nondisabled peers.

(Karen Norlander, 2011)

Referral, Student Evaluation, Eligibility, IEP Development and Review

Referral

Students may be referred to the CSE by their parents, their guardians or by a designee of the district where the student resides. In Blind Brook, designees include the building principals, the Assistant Director of Pupil Services, and the Director of Pupil Services. In addition, professional staff, a physician or a judicial officer may request a referral on behalf of a student suspected of having a disability. All referrals must be in writing to the attention of:

Mr. Harry Burg
Director of Pupil Services
Blind Brook-Rye Office of Pupil Services
390 North Ridge Street
Rye Brook, NY 10573

Referrals may also be made in writing to the principal of the student's school.

Upon receipt of a referral, the CSE provides the parent with a notice of the referral, a copy of the procedural safeguards, and a request for consent to conduct mandatory evaluations. Once the signed consent form is received by the Office of Pupil Services, the consent form is date stamped, evaluations are assigned, and a meeting date is scheduled. With limited exceptions, evaluations and eligibility determinations must be completed within 60 days of receipt of parental consent to begin the evaluation process.

Student Evaluation

Initial evaluations consist of: a social history and interview, an educational evaluation, a psychological (if recommended by the school psychologist), a classroom observation, and a physical examination. Other evaluations may be requested or recommended by the evaluation team as well. Such additional evaluations include, but are not limited to: speech and language, occupational therapy, physical therapy, audiological, psychiatric, augmentative communication, and assistive technology. The tests and evaluations are matched to the child's needs. All evaluations are provided at no cost to the family unless the family chooses to secure private evaluations.

Each evaluator is required to write a report identifying the evaluation tools used, the results of the testing, and the child's strengths and needs identified. Many reports include an assessment of where the child stands in comparison to his/her peers. A normal distribution curve is included in Appendix C for further information on the meaning of test scores. Prior to a CSE meeting, the evaluators share their findings and the results of the evaluations with the parents/guardians. The information may be shared in a conference, a telephone call, or by sharing and offering to discuss the report. This offers an important opportunity for parents, before the formal CSE meeting, to ask questions of the evaluator to ensure understanding of the results. Any unresolved issues or concerns may then be addressed when the CSE convenes. Recommendations for services are made by the Committee as a whole, upon its review and consideration of the evaluations conducted and other information shared.

Parents have the right to secure their own evaluations at any time which must be reviewed by the Committee, upon request. At the same time, the District retains its right to arrange its own evaluations. To avoid duplication or unreliable results, parents are therefore encouraged to discuss first with the District any plans to secure evaluations on their own.

Right to an Independent Education Evaluation (IEE) at District Expense

If a parent disagrees with the results of an evaluation conducted by the CSE, the parent has the right to request an IEE at public expense in accordance with Board policy. Board policy establishes maximum rates for all IEEs and provides for a waiver, where necessary to secure one. In addition, the CSE retains a list of independent evaluators who have agreed to accept the approved rates which can be sent to parents, in response to an IEE request.

In any case, parents seeking an IEE based on a disagreement with the District's evaluation are encouraged to first contact the Director of Pupil Personnel Services to discuss their concerns. If the District believes its evaluation is appropriate or the parent independently secures an outside evaluation that does not meet the District's criteria, the District may deny payment and will offer to schedule a hearing if necessary. A copy of the District's IEE Policy is available on the District's website and the list of approved independent evaluators may be obtained from the Director of Pupil Services, on request.

Eligibility

To be identified as a student with an educational disability by the CSE a student must meet criteria for classification in accordance with one of thirteen defined disabilities that is found to adversely impact the student's educational performance and requires specialized instruction and/or related services to access the District's educational program. The thirteen disability categories are listed in Appendix A.

IEP Development

The Individualized Education Program (IEP) is a legal document mandated by state and federal law required for all students identified as a student with a disability. At a minimum, an IEP includes: *demographic information; a list of assessments and other information* reviewed by the Committee; identification of *the student's strengths and weaknesses; present levels of performance* in academic/functional development, social development, physical development and management needs, including statements of the child's special educational needs in each area, where applicable; *annual goals* designed to address them with objective criteria to measure progress; *accommodations* including testing accommodations, where necessary; and *transition needs plans and goals* for students in the school year in which they turn 15 and every year thereafter as long as eligible.

By law, a student with a disability is entitled to receive specialized instruction in the least restrictive environment appropriate to meet the student's educational needs. Therefore, students may not be removed from regular education classrooms unless the Committee finds it necessary to provide meaningful access to the general curriculum and as necessary to provide

opportunities to develop the skills to meet the student's identified annual goals. Where a student's behavior interferes with the education of other students and/or the ability of the teacher to provide instruction, a student may require a more restrictive placement, as well. In any case, a child may not be removed from regular classes without having the Committee first consider the reasons a child cannot succeed there with special supports and accommodations. In those cases where removal is under consideration, the Committee will first seek consent to conduct a functional assessment and where appropriate put in place an individual behavior plan.

The IEP is a confidential document that requires written parental consent, in most cases, to share it with others beyond those individuals in the District, not including District consultants, who, in accordance with Board policy, are deemed to have a legitimate educational interest to review it. The format of the NYS mandated IEP can be found at:

<http://www.p12.nysed.gov/specialed/formsnotices/IEP/memo-Jan10.htm>

Annual Review

IEPs must be reviewed annually by the CSE and must be available to parents, educators and others working with the student by the start of each school year.

Reevaluation

Once a student is found eligible for specialized instruction and receives an IEP, the Committee must arrange for a reevaluation every three years or upon the formal request of a parent or teacher based on concerns regarding the student's current needs and/or program. The reevaluation is a process in which committee members and parent(s) review existing data to determine whether formal assessments are necessary to assess the nature of the student's disability, the student's abilities and needs and/or to develop appropriate goals for the student's program. When the Team determines that a formal assessment is necessary to complete the reevaluation process or the parent requests one, the Committee will arrange for the necessary testing. In either case, the Committee must provide the parent with a written notice that explains the parents' rights and seek parental consent for those assessments, if any, the Committee proposes to conduct.

Dispute Resolution

If a parent is not in agreement with the recommendations of the Committee, parents should first contact the Director of Pupil Services to discuss their concerns. If they are not resolved, the parent may request mediation, file a due process complaint or file a complaint with the State Education Department. In such cases, it remains the District's goal to work with parents to resolve conflict by developing a plan to move forward built on consensus, wherever possible. A copy of the Procedural Safeguards which explains parents' rights is available on the District's website at:

<https://www.blindbrook.org/cms/lib/NY01913277/Centricity/Domain/62/NYSED%20Procedural%20Safeguards%20Notice%20July%202017.pdf>

The Continuum of Special Education Services in Blind Brook

Please find below services and programs currently available in the Blind Brook School District which are consistent with state and federal regulations.

Related Services are those that assist a student in benefiting from other special education services or assist the student in accessing the general curriculum. Related services mean developmental, corrective, and other supportive services as are required to assist a student with a disability.

Related services include, but are not limited to speech-language pathology, audiology services, interpreting services, psychological services, physical therapy, occupational therapy, counseling services, including rehabilitation counseling services, orientation and mobility services, evaluative and diagnostic medical services to determine if the student has a medically related disability, parent counseling and training, school health services, school nurse services, school social work, assistive technology services, appropriate access to recreation, including therapeutic recreation, other appropriate developmental or corrective support services, and other appropriate support services and includes the early identification and assessment of disabling conditions in students. Where recommended by the CSE, related services are available to students with disabilities in grades K-12 in Blind Brook.

Consultant Teacher Services (CT) (minimum two hours per week) - are defined as direct and/or indirect services provided to a school-age student with a disability in the student's general education classes, including career and technical education classes, and/or to the student's general education teachers. Consultant Teacher Services, both direct and indirect is an available service to students in grades K-12 in the District where deemed appropriate by the CSE.

Direct CT services mean ***specially designed instruction*** provided to an individual student with a disability or to a group of students with disabilities by a certified special education teacher to aid the student(s) to benefit from regular instruction. Direct and indirect CT services may be combined.

Indirect CT services mean ***consultation*** provided by a certified special education teacher to a general education teacher to assist the general education teacher in adjusting the learning environment and/or modifying his/her instructional methods to meet the individual needs of a student with a disability who attends the general education class. Indirect CT may be combined with direct CT services.

Specially Designed Instruction means adapting, as appropriate, to the needs of an eligible student, the content, methodology, and/or delivery of instruction to address the unique needs that result from the student's disability, and to ensure access of the student to the general curriculum, so that he or she can meet the same educational standards that apply to all students.

Resource Room (minimum three hours per week) is a special education program for a student with a disability registered in either a special class or general education class who is in need of specialized supplementary instruction in an individual or small group setting for a portion of the school day. Resource room programs are for the purpose of supplementing the general education or special education classroom instruction of the students with disabilities who are in need of such supplemental programs. This means that instruction is not provided in place of the student's regular academic instruction. Where found appropriate by the CSE, the Blind Brook School District makes resource room services available to students with disabilities in grades K-12.

Integrated Co-Teaching (for up to 12 students with disabilities in a regular education class or more students with a variance from the NYSED) means the provision of specially designed instruction and academic instruction provided to a group of students with disabilities and nondisabled students. This service is provided in regular education classes and is taught together by a general education teacher and a special education teacher. Though Integrated Co-Teaching is not a required part of the special education continuum, Blind Brook offers this program in select classes at the Middle School and is beginning its implementation at the Elementary School in grades K-4 for the 2022-2023 school year.

Special Class means a class consisting of students with disabilities who have been grouped together because of similarity of individual needs for the purpose of receiving specially designed instruction in a self-contained setting, meaning that such students are receiving their primary instruction separate from their nondisabled peers. Blind Brook offers special classes for those students identified by the Committee to require special education to foster Communications Development (Grades K to 2) as well as in English Language Arts and Mathematics (Elementary, Middle, and High School).

These descriptions are from the NYSED Special Education Continuum Memo (April 2008 – Updated November 2013). The rest of the memo with more information related to the provision of these services may be found at:

<http://www.p12.nysed.gov/specialed/publications/policy/schoolagecontinuum-revNov13.htm>

Accommodations, Aide Services and Foreign Language Exemption

The CSE and the §504 Team can recommend both program modifications and testing accommodations, where necessary to enable the student to learn and to demonstrate knowledge.

Accommodations

Program Supports and Accommodations/Supplementary Aides and Services involve accommodations and supports necessary to enable the student to meet annual goals and to be involved and progress in the general education curriculum.

Testing Accommodations are changes in the manner, design or presentation of the test to enable the student to demonstrate his/her knowledge. For more information on accommodations, please see:

<http://www.p12.nysed.gov/specialed/publications/test-accommodations-guide-february-2018.html>

Aide Services

Shared Aide Services - In Blind Brook, the CSE and the §504 Team can recommend a shared aide, where necessary, to assist students with remaining on task, behavior management, and/or physical/health-related activities.

One-to-One Aide Services - In Blind Brook, the CSE and the §504 Team can recommend a one-to-one aide for students with intensive management needs that cannot otherwise be met and are necessary to provide the student with access to education and other school activities. For more information, refer to NYSED's memorandums:

<http://www.p12.nysed.gov/specialed/publications/2016-memos/documents/new-regs-for-one-to-one-aides.pdf>

<http://www.p12.nysed.gov/specialed/publications/1-1aide-jan2012.htm>

Foreign Language Exemption

The District recommends, wherever possible, that students with disabilities strive to meet the foreign language requirement for graduation. Although the CSE can waive the requirement for students with disabilities, when applicable, several private colleges impose a foreign language requirement for admission. Nonetheless, for those students with disabilities that result in significant core deficits in language, the CSE is authorized to exempt them from the foreign language graduation requirement. Exemptions are considered only in those cases where a student's disability adversely impacts the student's ability to learn the foreign language. If a student is ineligible for a second language exemption, the CSE and the §504 Team may recommend that the student take it as a "pass/fail" course, where appropriate.

Appendices

Appendix A

New York State Disability Categories Regulations of the Commissioner, Part 200.1.zz.1-13

(1) *Autism* means a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age 3, that adversely affects a student'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 student's educational performance is adversely affected primarily because the student has an emotional disturbance as defined in paragraph (4) of this subdivision. A student who manifests the characteristics of autism after age 3 could be diagnosed as having autism if the criteria in this paragraph are otherwise satisfied.

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

(3) *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 students with deafness or students with blindness.

(4) *Emotional Disability* 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 a student's educational performance: (i) an inability to learn that cannot be explained by intellectual, sensory, or health factors. (ii) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; (iii) inappropriate types of behavior or feelings under normal circumstances; (iv) a generally pervasive mood of unhappiness or depression; or (v) a tendency to develop physical symptoms or fears associated with personal or school problems. The term includes schizophrenia. The term does not apply to students who are socially maladjusted, unless it is determined that they have an emotional disturbance.

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

(6) *Learning Disability* means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which manifests itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, as determined in accordance with section 200.4(j) of this Part. The term includes such conditions

as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. The term does not include learning problems that are primarily the result of visual, hearing or motor disabilities, of an intellectual disability, of emotional disturbance, or of environmental, cultural or economic disadvantage.

(7) *Intellectual Disability* means significantly subaverage general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, that adversely affects a student's educational performance.

(8) *Multiple Disabilities* means concomitant impairments (such as intellectual disability-blindness, intellectual disability-orthopedic impairment, etc.), the combination of which cause such severe educational needs that they cannot be accommodated in a special education program solely for one of the impairments. The term does not include deaf-blindness.

(9) *Orthopedic Impairment* means a severe orthopedic impairment that adversely affects a student'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, bone tuberculosis, etc.), and impairments from other causes (e.g., cerebral palsy, amputation, and fractures or burns which cause contractures).

(10) *Other Health-Impairment* means having limited strength, vitality or alertness, including heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment, that is due to chronic or acute health problems, including but not limited to a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, diabetes, attention deficit disorder or attention deficit hyperactivity disorder or tourette syndrome, which adversely affects a student's educational performance.

(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 student's educational performance.

(12) *Traumatic Brain Injury* means an acquired injury to the brain caused by an external physical force or by certain medical conditions such as stroke, encephalitis, aneurysm, anoxia or brain tumors with resulting impairments that adversely affect educational performance. The term includes open or closed head injuries or brain injuries from certain medical conditions resulting in mild, moderate or severe impairments in one or more areas, including 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 include injuries that are congenital or caused by birth trauma.

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

Appendix B

Checklist for Determining Disabilities under §504 (Based on Regulations - May 24, 2011) 29 FR Part 1630

1) EVIDENCE OF A PHYSICAL OR MENTAL IMPAIRMENT? Yes___ No___

A **physical impairment** is a physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological; musculoskeletal; special sense organs; respiratory, including speech organs; cardiovascular; reproductive; digestive; genito-urinary; hemic and lymphatic; skin; and endocrine (e.g., diabetes, epilepsy, heart conditions, environmental allergies, Epstein Barre Syndrome; fibromyalgia; attention deficit disorder, peanut allergies, etc.)

A **mental impairment** is a mental or psychological disorder, such as intellectual disability, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

★ **IF THE TEAM CONCLUDES THAT THE PERSON HAS A PHYSICAL OR MENTAL IMPAIRMENT PROCEED TO NEXT QUESTION→**

2) DOES THE IDENTIFIED DISABILITY IMPACT A MAJOR LIFE ACTIVITY? Yes___ No___

Examples: Caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, working, eating, sleeping, standing, lifting, bending, reading, concentrating, thinking, communicating, and interacting with others;

Major bodily functions including: functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions.

Mental or psychological disorder, such as intellectual disability, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

NOTE: The list is not exhaustive. According to federal regulations a major life activity need not be of "central importance to most people's daily lives" and should not be strictly interpreted to create a demanding standard.

★ **IF THE TEAM CONCLUDED THAT THE IMPAIRMENT AFFECTS A MAJOR LIFE ACTIVITY PROCEED TO QUESTION 3 →**

3) DOES THE PHYSICAL OR MENTAL IMPAIRMENT SUBSTANTIALLY LIMIT THE STUDENT'S ABILITY TO ENGAGE IN A MAJOR LIFE ACTIVITY? Yes___ No___

NOTE: Test for determining Substantial Limitation: Does the disability substantially limit the individual from performing a major life activity **as compared to most people in the general population?** The federal regulations also recognize that the impact of the impairment on the **condition and manner** in which the performance of a major life activity affects the individual **or duration** (i.e. the time it takes the individual to perform the activity or the time the individual is able to perform the activity) be relevant to determining **how** an individual is substantially limited.

NOTE: Described as a common sense approach, federal regulations advise that making this determination should not require extensive analysis and does not require scientific, medical or statistical analysis.

According to the federal regulations to be substantially limiting, an impairment need not prevent, or significantly or severely restrict an individual from performing a major life. In determining whether an impairment substantially limits a major life activity the focus of the inquiry is on **HOW** the impairment limits the activity **not** on the outcomes the individual achieved. As an example, the federal guidance explains that an individual who has performed well academically may nonetheless be substantially limited in a major life activity such as learning, reading, writing, thinking or speaking.

An impairment that is episodic or in remission is a qualifying disability if, when active, it substantially limits a major life activity.

The duration of an impairment under §504 is not determinative. An impairment of short duration, may be substantially limiting and/or sufficiently severe to qualify as a disability under §504.

The determination of whether an impairment substantially limits a major life activity **may not consider** the ameliorative effects of mitigating measures. Examples of mitigating measures include but are not limited to:

- Medications, medical supplies, equipment low vision devices (**EXCEPT** ordinary eyeglasses or contact lenses intended to fully correct visual acuity or eliminate refractive errors) prosthetics, hearing aid(s) and cochlear implants, mobility devices, oxygen therapy;
- Assistive technology,
- Reasonable accommodations or auxiliary aids or services,
- Learned behavioral or adoptive neurological modifications,
- Psychotherapy, behavior or physical therapy.

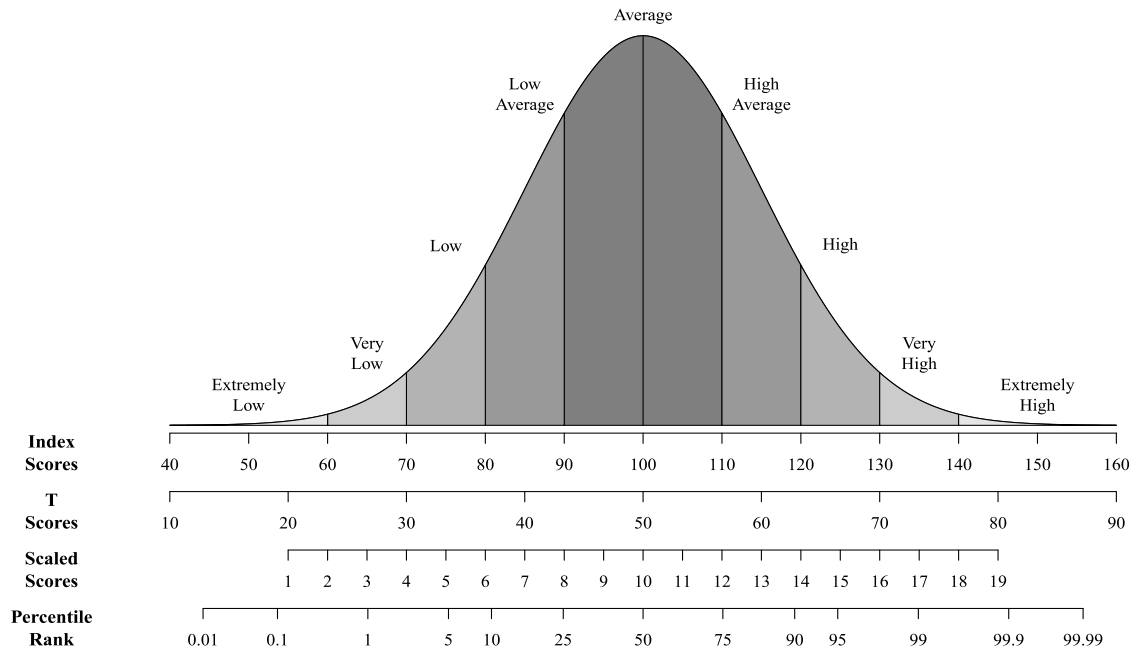
Examples of impairments that substantially limit major life activities include: deafness, blindness, intellectual disabilities, partially or completely missing limbs or mobility impairments requiring the use of wheelchair, autism cancer, cerebral palsy diabetes, epilepsy, HIV multiple sclerosis, muscular dystrophy, major depressive disorders, bipolar disorders, post traumatic stress disorder, obsessive compulsive disorder and schizophrenia

★ IF THE §504 TEAM DETERMINES BASED ON AN EVALUATION THAT THE IDENTIFIED DISABILITY SUBSTANTIALLY LIMITS THE STUDENT'S ABILITY TO PARTICIPATE IN A MAJOR LIFE ACTIVITY, THE STUDENT IS PROTECTED AGAINST DISCRIMINATION UNDER §504.

(Karen Norlander, 2011)

The Normal Distribution Curve

Standard Scores



<https://assessingpsyche.wordpress.com/2014/01/26/standard-scores-in-psychological-evaluation-reports/>