

Missouri Alternate Assessment Decision Making Guidance Document

An IEP team may use the following guidance for each participation criterion to assist in the decision making process for determining eligibility for participation in alternate assessments. It is important to remember appropriate decisions should not be based upon one isolated factor, but based upon a more longitudinal and overall analysis of the student's educational performance as compared to each of the participation criterion.

1. The student has been evaluated and found eligible under IDEA.

Only students who have been identified under the Individuals with Disabilities Education Act (IDEA) are eligible to participate in the alternate assessment. Students who only have a medical diagnosis or a 504 plan are NOT eligible to participate in the alternate assessment.

The IEP team for eligible students must make an individualized decision regarding the student's participation in either the regular assessment or alternate assessment using the Missouri Alternate Assessment Decision Making Checklist or Flowchart. This decision must be documented in the IEP.

2. The student demonstrates the most significant cognitive disabilities and limited adaptive skills that may be combined with physical or behavioral limitations.

While there is no one method of determining if a student demonstrates the most significant cognitive disability, it is clear this decision must be made by comparing the student to the entire population of other students of the same age – not just other students within the district or school building.

The most significant cognitive disability range can be evidenced by standardized assessments or pervasive supports. In addition to demonstrating the most significant cognitive disabilities, the student must also demonstrate adaptive skills that are significantly limited as compared to same age peers.

While IDEA does not provide any guidance on determining the most significant cognitive disabilities, it does state, under Section 300.304(3)(c)(1) “Assessments and other evaluation materials used to assess a child under this part— (i) are selected and administered so as not to be discriminatory on a racial or cultural basis; (ii) are provided and administered in the child’s native language or other mode of communication and in the form most likely to yield accurate information on what the child knows and can do academically, developmentally, and functionally, unless it is clearly not feasible to so provide or administer; (iii) are used for the purposes for which the assessments or measures are valid and reliable; (iv) are administered by trained and knowledgeable personnel; and, (v) are administered in accordance with any instructions provided by the producer of the assessments.”

Intelligence tests including, but not limited to, the Wechsler Scales, the Leiter International Performance Scale, and the Stanford-Binet Intelligence Scales all yield standard scores and provide a system of classification to assist trained personnel in determining a level of cognitive functioning.

The following ranges, based on standard scores of standardized intelligence tests, reflect the categories of the American Association on Intellectual and Developmental Disabilities, the Diagnostic and Statistical Manual of Mental Disorders, and the International Classification of Diseases.

These ranges include four (4) levels of support:

- IQ 50–55 to 70; children require mild support;
- IQ 35–40 to 50–55; children require moderate supervision and assistance;
- IQ 20–25 to 35–40; can be taught basic life skills and simple tasks with supervision;
- IQ below 20–25; usually caused by a neurological condition; require constant care.

While an IQ score is not the sole criterion to determine if a student should participate in the Missouri Alternate Assessment, it would be expected that students taking the alternate assessment would score significantly lower than their peers with or without disabilities on standardized tests of knowledge and cognition, or that these students may not achieve a valid score on the standardized test. IEP teams will need to refer to the standardized test manual for guidance on what would be considered the most significant cognitive disability for that particular test.

If a standardized cognitive assessment instrument cannot be utilized with the student, information must be provided to show the pervasive level of support required by the student. This information must come from multiple sources of information (not just an adaptive behavior assessment) and include both skills the student is capable of performing as well as those areas in which he/she has difficulty. A comprehensive review would be expected to include each of the following areas: communication; self-care; daily living; social skills; access to community; self-direction; health and safety; functional academics; leisure; and, work.

In addition to the above, adaptive skills as measured by tests of adaptive functioning **MUST** be commensurate with the scores from the cognitive evaluation and must also indicate that the student is functioning in the most significant classification ranges.

3. The most significant cognitive disability impacts the student's access to the curriculum and requires specialized instruction.

The student's daily instruction on the chronologically age appropriate academic content standards and the grade level benchmarks is substantively different from that of peers with or without disabilities. The student requires intensive instructional strategies which may include, but are not limited to, repeated drill/practice in multiple settings, skills taught in substantially smaller steps than peers with frequent prompts, and guidance from adults. The student also requires intensive supports in the school setting as evidenced by individualized instruction, adult supervision, and assistance throughout the school day. The student's modified curriculum may consist of functional life skills such as: pre-academics, communication, self-care, daily-living, and social skills.

The student requires information to be obtained primarily through methods other than reading due to limited reading ability and also utilizes alternate methods to express or share oral or written ideas and information with others.

4. The most significant cognitive disability impacts the student's post-school outcomes.

The student's post-secondary outcomes for independent living will likely require supported or assisted living. The student may have a guardian when he/she turns age 18. The student would require moderate to significant supervision in order to access the community for recreation, employment, training, and daily living. The student's post-secondary outcomes for education/training will likely include on-the-job training for sheltered or supported employment, as well as, skill acquisition for social, communication, and/or behavior. The student's post-secondary outcomes for employment will likely result in sheltered or supported employment, part-time employment, participation in day activity centers, or home.

5. Additional factors that must be considered for the student.

The student's difficulty in the general education curriculum is NOT primarily the result of excessive absences; visual or auditory disabilities; or, social, cultural, language, or economic differences. The student's difficulty in the general education curriculum is due primarily to the impact of the student's most significant cognitive disability and limited adaptive skills.