

- Describe the instructional implications of the assessment results to enable the student to participate and make progress in the general education curriculum (or for a prekindergarten child to participate in age appropriate activities);
- Provide any other information useful to the team's decision making; and
- Describe the extent to which assessment procedures were not conducted under standard conditions.

The written report shall be provided to the parents in accordance with HCPSS 5 business day procedures prior to the IEP team meeting and the reports must be available at the IEP team meeting. It is best practice to discuss the written assessments with the parents prior to the IEP team meeting. This practice facilitates meaningful participation by the parent in the upcoming meeting. This can be accomplished through an informal meeting or a telephone conference. It must be made clear, however, that the IEP team determines the need for special education and related services.

Independent Educational Evaluations

An independent educational evaluation conducted by a qualified examiner who is not employed by the school district or another public agency responsible for the education of the student in question. The IDEA grants parents an automatic right to obtain an IEE at their own expense at any time during their student's education. To trigger the parent's right to the IEE at public expense, the district must have conducted an evaluation with which the parent disagrees. The IEE must be conducted subject to "agency criteria" which includes the location of the evaluation and the qualifications of the examiner and must be the same as the criteria the agency uses in conducting its own evaluations. If a parent requests an IEE at public expense, the district has two options:

- File a due process complaint to request a hearing to show that its evaluation is appropriate or
- Ensure that an independent educational evaluation is provided at public expense, unless the agency demonstrates that the evaluation obtained by the parent did not meet agency criteria.

If a parent requests an IEE, the IEP team should complete [this form](#) and contact the Coordinator for Compliance, Nonpublic Services, and Family Support.

Consideration of Independent Document

If a parent presents an Independent Assessment to the IEP team, the team should use the *Consideration of Independent Document* form in TIENET to consider the assessment and next steps for the IEP team. For reviewing recommendations use a self-created chart or one of the provided Google charts:

[Recommendations Chart \(Google Docs\)](#)

[Recommendations Chart \(Google Sheets\)](#)

Directions for filling out the form in TIENET:

Step 1: Enter date of report and the date of the IEP team meeting. If there is no date of the report, enter the current date and document in the meeting notes.

Team Consideration of Independent Documentation			
Student Name: High Sampled	DOB: 05/05/2008	Service School: Central MS High	SIS ID: 1044561.00P
Grade: 10	Age: 15	Date Considered by IEP or SDA Team: [REDACTED]	
Date of Document: 	<input type="checkbox"/> Date not provided		

Step 2: Enter the staff who is reviewing the report as well as the name of the report. If there is not a name, briefly describe the report being reviewed.

Name(s) and title(s) of HCPES qualified personnel assisting the IEP or SDA Team in review:	
Staff Name	Title
[REDACTED]	
Name of document being considered:	
[REDACTED]	

Step 3: Enter the Name(s) and Title(s) of the professionals who completed the assessment or document. Also indicate the parent/guardian's reason for submitting the report.

Name(s) and title(s) of person who completed the document:	
Name	Title
[REDACTED]	[REDACTED]
Parent/Guardian's stated reason for submitting document:	
[REDACTED]	

Step 4: Indicate whether or not the assessment data from the report (if provided) is consistent with data from the school. Click "no" if there is any discrepancy. Details can be provided in the "additional notes" section.

Part 1: Consideration of Independent Documentation by the IEP or SDA Team	
The IEP or SDA Team determines that assessment data, if available, are consistent with existing data collected by the school team:	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> No assessment data provided	
Additional Notes:	
[REDACTED]	

Step 5: This is not a required field. Only click this if there are inconsistencies that you feel are necessary to document. There may be inconsistencies that are not worth documenting (such as minor clerical errors or errors that are irrelevant to the process), in which case you would not click this button.

Are there inconsistencies with the assessment procedures including administration, conclusions, etc?	
[REDACTED]	

Step 6: Click 'yes' if there are school-based recommendations. Go through these one-by-one on a separate chart. Indicate the discussion on the meeting notes and update the IEP as necessary.

The documentation includes school-based recommendations for consideration by the IEP or SDA team. See attached chart for specific information on the recommendations, if applicable.	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Additional Notes:	
[REDACTED]	

Step 7: There are only three options once this form is complete- select one. The discussion surrounding this part should go in the team report.

Part 6: Determinations by the IEP or SDA Team	
<input checked="" type="checkbox"/> Option 1: IEP/SDA team will conduct additional data and/or conduct additional assessments. <input type="checkbox"/> Option 2: The IEP/SDA team will determine the student's eligibility based on information in this document, along with other data available. <input type="checkbox"/> Option 3: Based on existing information the IEP/SDA team has no further questions or actions for eligibility or outcome. Recommendations will be considered by the IEP or SDA team, if applicable.	

*Document discussion/determination on IEP/SDA team meeting report**

REVIEWING AN OUTSIDE ASSESSMENT- FAQs

When should an IEP team use this form?

This form should be used whenever a parent brings the IEP team a document from an outside provider.

Examples may include:

- Neuropsychological assessment
- Vision screening
- Note from Doctor with a new diagnosis
- Hospital discharge report

What if some data is consistent and some is not consistent?

Click “no” and provide any required explanation in the “Additional Notes” Section.

Am I required to click the “Are there inconsistencies...” button?

It is not a required section; however, it should be used at the discretion of the individual fill out the document. When clicked, a box opens that the user can type in additional notes.

What are some examples of inconsistencies that may be documented?

Example of inconsistencies include clerical errors (wrong names, pronouns, etc.), inaccurate scoring (i.e. scores reported do not match assessment), inaccurate scoring procedures (i.e. reporting descriptors not in alignment with the published assessment guidelines), using an outdated assessment that is not the current version, using assessments that are not appropriate for the disability.

How do I deal with the recommendation chart if we are not collecting additional data?

Go through the recommendations and note the next steps for each recommendation. Next steps might include adding to the IEP, collecting additional data, providing on a trial basis, etc.

Does the team have to review home-based (or non school-based recommendation).

The team may decide to document each home-based recommendation on the recommendation chart and simply note “home-based recommendation”. If there are a significant number of home-based recommendations, the team could use one line on the chart to document that they will not be reviewing the non school-based recommendations.

When does the IEP team review the relevant supplement forms?

If the IEP team is questioning a disability that requires a supplement form, the relevant supplement form must be completed before determining whether or not the student qualifies (or continues to qualify) for that specific disability. For example, if the team reviews the outside assessments and determines there is enough data to answer the question regarding if a student has a Specific Learning Disability, the SLD supplement should be completed.

Should each assessor fill out a different form?

If the IEP team is reviewing multiple assessments, it would be preferable to each person to complete a separate form.

When deciding if the assessment data from the outside report is consistent with school-based data, what kind of school data does that include? For example, if the assessment provides parent-only data on Autism and the school has never looked at Autism, do we say "no" to this question? Or if the team has observed characteristics of Autism but not formally assessed for them, do we say the data is consistent?

In the first scenario, you would select 'no' because you do not have data therefore it is not consistent. You would then determine in Part 2 what your next step is- either collect additional data, determine eligibility based on the outside assessment, or do neither. In the second scenario, you would compare the data from the outside assessment to the informal data you do have. You would then move on to step 2 to determine your next steps.

REVIEWING AN OUTSIDE ASSESSMENT- SCENARIOS

Scenario 1

Dion is a 4th grade student who does not currently have an IEP. The parent requested an IEP meeting to review an outside assessment that includes a cognitive (WISC V) and educational assessment (WJ IV). The school team comes to the IEP meeting with data including teacher reports, standardized test scores, informal assessments (including a QRI), and work samples. The assessment includes a list of school-based recommendations.

At the IEP meeting, the School Psychologist and the Special Education Teacher each go through the form. Both assessments were conducted properly and include information that suggests the student has deficits in reading and writing that may suggest a Specific Learning Disability. The team selects "Yes" for Part 1. The team reviews current school based data and in Part 2 selects the second box indicating that the team will determine eligibility based on the outside assessments and current data. The team completes the SLD Supplement and finds the student is eligible for special education services under the educational disability of SLD.

Scenario 2

Sarah is a 7th grader with an IEP for OHI due to ADHD. The parent brings in a note from her psychiatrist that states she has Disruptive Mood Dysregulation Disorder, General Anxiety Disorder, and Post Traumatic Stress Disorder. Recommendations are included that are related to social/emotional issues. The student currently does not have goals in this area.

The team reviews the form and under Part 1 selects "no assessment data provided". The team reviews the recommendations and most require additional data. Under Part II, the team selects "Option 1" and

recommends a psychological and educational assessment to determine if the student qualifies as a student with an Emotional Disability. The team also asks the questions: "Does the student qualify for an educational disability of OHI due to ADHD?" and "What is the student's primary educational disability?"

Scenario 3

Jose is an 11th grader with an educational disability of Autism. The parent brings the IEP team a note from the Ophthalmologist stating that the student has an astigmatism that requires glasses (that the student currently wears). The team asks this be reviewed at an IEP meeting so it is in his record.

The team holds an IEP meeting and goes through the form. They select "No assessment data provided" for Part 1 and "Option 3" for Part II.

Scenario 4

Brian is a 1st grader without an IEP or 504. The parent asks for an IEP meeting to review an outside assessment. The team reviews the outside assessments which includes the language battery of the NEPSY-II which indicates that the student has a phonological processing disorder and the recommendations state that the student requires services for Dyslexia. The parent is also asking for an IEP for Dyslexia. The school team brings school-based data including work samples, teacher reports, informal assessments (such as the QRI), data related to response to current general ed reading interventions, report cards, and standardized assessment scores.

The team reviews the form. For Part 1, the team selects "No" as the school based data suggests that the student is making progress with the current interventions. The team selects "Are there inconsistencies..." and notes inconsistencies including concerns with the improper assessment procedures for the NEPSY and the lack of a formal educational assessment. The school-based team selects "Option 2" and completes the SLD Supplement with current data OR selects "Option 3" and determines to conduct additional assessments and/or collect additional data.

Is observation of the student required for a SLD determination?

Yes. The IEP team must ensure that the student has been observed in the student's learning environment (including the general education classroom setting) to document academic performance and behavior in the areas of difficulty. The IEP team may: 1) use information from an observation before the student was referred for an evaluation; or 2) have at least one member of the IEP team, other than the student's general education teacher, conduct an observation after the referral was made. In the case of a child of less than school age or out of school, an IEP team member must observe the child in an environment appropriate for a child of that age.

So in this situation where the parent brings an outside assessment and the team is required to have an observation to complete the SLD Supplement the team has two options:

#1 - Use an already available observation. We discussed that there would be a pretty narrow requirements for this, as we would want the observation to be written down/documented somewhere AND inform the evaluation process. For example, there may be a teacher observation written and documented in the SST minutes. This observation would need to directly relate to the diagnostic questions that were asked in regards to the Specific Learning Disability. This observation would also need to be relatively recent to be relevant to the issues being evaluated. The parent would NOT need to provide written consent to use this information on the SLD Supplement form, as this observation already occurred; however, it may benefit the team to discuss and receive and document oral permission at the meeting to proceed in this manner.

#2- This would be the preference because the team could gather an observation that directly supports the diagnostic questions and areas of concern related to the SLD. This would require consent as previously mentioned in the following portion of IDEA
IDEA 34 CFR §300.310 [b][2], *"Have at least one member of the group described in §300.306(a)(1) conduct an observation of the child's academic performance in the regular classroom after the child has been referred for an evaluation and parental consent, consistent with §300.300(a), is obtained."*

The process would involve getting consent, conducting the observation, and coming back to finish the SLD supplement. The team would need to do this quickly in order to stay within timeline OR obtain a written agreement to extend the timeline (this would not be recommended in most cases).

Scenario 5 - English is not the primary language

Rory is an ELD PreKindergarten student who does not currently have an IEP. The parent completed a Child Find referral packet containing an independent assessment. The assessment makes no mention of the ELD, does not include an interpreter in the process, and provides scores for a standardized assessment. The Child Find screening team comes to the IEP meeting with additional data submitted with the referral packet including data from developmental screenings (Ages and Stages), teacher reports/ work samples. The independent assessment includes a list of school-based recommendations.

At the IEP meeting, the Qualified Examiner(s) completes the form. For example; if it is a speech language assessment, a speech language pathologist completes the form. Occupational therapy assessment, an occupational therapist completes the form, physical therapy assessment, a physical therapist completes the form, etc.

The assessment was not conducted properly and suggests that the child has a delay or atypicalities. The student is an ELD student and there was no interpreter present. In addition, the assessment provides standard scores. The team selects **"No"** for Part 1 (Step 4 of QRC above). The Qualified Examiner completes the section **"Are there inconsistencies with the assessment procedures including administration, conclusions, etc?"** (Step 5 of QRC above). Examples of inconsistencies include inaccurate scoring and inaccurate scoring procedures.

The independent assessment contains school-based recommendations, the team selects **"YES."** In the **"Additional Notes"** section, the IEP team can document that these may be considered if the child is determined eligible for special education.

The IEP Team chooses **“Option 1”** as we screen the child at these appointments and determine if we are suspecting a delay. Even if we do not suspect a delay, we collected additional data at that IEP Team Meeting for the screening.

Scenario 6 - Outdated report

Alaina is a PreKindergarten student who does not currently have an IEP. The parent completed a Child Find referral packet containing an independent assessment. The assessment is more than a year old and the IEP Team member determines it outdated. The Child Find screening team comes to the IEP meeting with additional data submitted with the referral packet including data from developmental screenings (Ages and Stages), teacher reports/ work samples. The independent assessment includes a list of school-based recommendations.

At the IEP meeting, the Qualified Examiner(s) completes the form. For example; if it is a speech language assessment, a speech language pathologist completes the form. Occupational therapy assessment, an occupational therapist completes the form, physical therapy assessment, a physical therapist completes the form, etc.

The assessment was conducted properly and suggests that the child has a delay or atypicalities; however it is outdated. The team selects **“No”** for Part 1 (Step 4 of QRC above). The Qualified Examiner completes the section **“Are there inconsistencies with the assessment procedures including administration, conclusions, etc?”** (Step 5 of QRC above). Examples of inconsistencies include outdated assessments. The independent assessment contains school-based recommendations, the team selects **“YES.”** In the **“Additional Notes”** section, the IEP team can document that these may be considered if the child is determined eligible for special education.

The IEP Team chooses **“Option 1”** as we screen the child at these appointments and determine if we are suspecting a delay. Even if we do not suspect a delay, we collected additional data at that IEP Team Meeting for the screening.

Scenario 7 - Report results may not be reflective of PLP due to ongoing therapy services

Poppy is a PreKindergarten student who does not currently have an IEP. The parent completed a Child Find referral packet containing an independent assessment. The assessment is more than a year old. The child has been receiving services and since the assessment has made progress. The present level of performance of the child is no longer actively reflected in the assessment. The Child Find screening team comes to the IEP meeting with additional data submitted with the referral packet including data from developmental screenings (Ages and Stages), teacher reports/ work samples. The independent assessment includes a list of school-based recommendations.

At the IEP meeting, the Qualified Examiner(s) completes the form. For example; if it is a speech language assessment, a speech language pathologist completes the form. Occupational therapy assessment, an occupational therapist completes the form, physical therapy assessment, a physical therapist completes the form, etc.

The assessment was conducted properly and suggests that the child has a delay or atypicalities; however it is clear that the child's current present level of performance is not accurately reflected in the assessment. The team selects **"No"** for Part 1 (Step 4 of QRC above). The Qualified Examiner completes the section **"Are there inconsistencies with the assessment procedures including administration, conclusions, etc?"** (Step 5 of QRC above). Examples of inconsistencies include outdated assessment results and changes in present levels of performance.

The independent assessment contains school-based recommendations, the team selects **"YES."** In the **"Additional Notes"** section, the IEP team can document that these may be considered if the child is determined eligible for special education.

The IEP Team chooses **"Option 1"** as we screen the child at these appointments and determine if we are suspecting a delay. Even if we do not suspect a delay, we collected additional data at that IEP Team Meeting for the screening.

Scenario 8 - No scores or sufficient summary of findings

Jack is a PreKindergarten student who does not currently have an IEP. The parent completed a Child Find referral packet containing an independent assessment. The assessment reports no standard scores or a summary of sufficient findings. The Child Find screening team comes to the IEP meeting with additional data submitted with the referral packet including data from developmental screenings (Ages and Stages), teacher reports/ work samples. The independent assessment does not include a list of school-based recommendations.

At the IEP meeting, the Qualified Examiner(s) completes the form. For example; if it is a speech language assessment, a speech language pathologist completes the form. Occupational therapy assessment, an occupational therapist completes the form, physical therapy assessment, a physical therapist completes the form, etc.

The assessment reports no standard scores or a summary of sufficient findings. The team selects **"No"** for Part 1 (Step 4 of QRC above). The Qualified Examiner completes the section **"Are there inconsistencies with the assessment procedures including administration, conclusions, etc?"** (Step 5 of QRC above). Examples of inconsistencies include inaccurate scoring and inaccurate scoring procedures. The independent assessment does not contain school-based recommendations, the team selects **"NO."**

The IEP Team chooses **"Option 1"** as we screen the child at these appointments and determine if we are suspecting a delay. Even if we do not suspect a delay, we collected additional data at that IEP Team Meeting for the screening.

Scenario 9 - Current report with scores and summary of areas tested. May just need ELSG.

Oni is a PreKindergarten student who does not currently have an IEP. The parent completed a Child Find referral packet containing an independent assessment. The assessment reports standard scores and a summary of sufficient findings. The Child Find screening team comes to the IEP meeting with additional data submitted with the referral packet including data from developmental screenings (Ages and

Stages), teacher reports/ work samples. The independent assessment does not include a list of school-based recommendations or educational impact.

At the IEP meeting, the Qualified Examiner(s) completes the form. For example; if it is a speech language assessment, a speech language pathologist completes the form. Occupational therapy assessment, an occupational therapist completes the form, physical therapy assessment, a physical therapist completes the form, etc.

The assessment reports standard scores and a summary of sufficient findings. The team selects **“YES”** for Part 1 (Step 4 of QRC above). The Qualified Examiner does not need to complete the section **“Are there inconsistencies with the assessment procedures including administration, conclusions, etc?”** (Step 5 of QRC above).

The independent assessment does not contain school-based recommendations, the team selects **“NO.”** In the **“Additional Notes”** section, the IEP team can document that these may be considered if the child is determined eligible for special education.

The IEP Team chooses **“Option 1”** as we screen the child at these appointments and determine if we are suspecting a delay. In addition, if the qualified examiner needs educational impact, they may complete informal information using the ELSG to document educational impact, if needed. Even if we do not suspect a delay, we collected additional data at that IEP Team Meeting for the screening.

Scenario 10 - Report current but test not on HCPSS list

Amy is a PreKindergarten student who does not currently have an IEP. The parent completed a Child Find referral packet containing an independent assessment. The assessment reports standard scores and a summary of sufficient findings. The Child Find screening team comes to the IEP meeting with additional data submitted with the referral packet including data from developmental screenings (Ages and Stages), teacher reports/ work samples. The independent assessment includes a list of school-based recommendations or educational impact. The independent assessment is not on the HCPSS approved test list BUT it does provide all the information that the examiner needs.

At the IEP meeting, the Qualified Examiner(s) completes the form. For example; if it is a speech language assessment, a speech language pathologist completes the form. Occupational therapy assessment, an occupational therapist completes the form, physical therapy assessment, a physical therapist completes the form, etc.

The assessment reports standard scores and a summary of sufficient findings. The team selects **“YES”** for Part 1 (Step 4 of QRC above). The Qualified Examiner does not need to complete the section **“Are there inconsistencies with the assessment procedures including administration, conclusions, etc?”** (Step 5 of QRC above).

The independent assessment does contain school-based recommendations, the team selects **“YES.”** In the **“Additional Notes”** section, the IEP team can document that these may be considered if the child is determined eligible for special education.

The IEP Team chooses **“Option 1”** as we screen the child at these appointments and determine if we are suspecting a delay. Even if we do not suspect a delay, we collected additional data at that IEP Team Meeting for the screening.

Scenario 11 - Outdated PT report

Bruno is a PreKindergarten student who does not currently have an IEP. The parent completed a Child Find referral packet containing a physical therapy 90-Day reevaluation independent assessment. The assessment does not report standard scores or a summary of sufficient findings. The child continues to receive outside therapy. The Child Find screening team comes to the IEP meeting with additional data submitted with the referral packet including data from developmental screenings (Ages and Stages), teacher reports/ work samples. The independent assessment does not include a list of school-based recommendations or educational impact.

At the IEP meeting, the Qualified Examiner(s) completes the form. For example; if it is a speech language assessment, a speech language pathologist completes the form. Occupational therapy assessment, an occupational therapist completes the form, physical therapy assessment, a physical therapist completes the form, etc.

The assessment does not report standard scores or a summary of sufficient findings. The team selects **“NO”** for Part 1 (Step 4 of QRC above). The Qualified Examiner completes the section **“Are there inconsistencies with the assessment procedures including administration, conclusions, etc?”** (Step 5 of QRC above). Examples of inconsistencies include inaccurate scoring and inaccurate scoring procedures. The independent assessment does not contain school-based recommendations, the team selects **“NO.”**

The IEP Team chooses **“Option 1”** as we screen the child at these appointments and determine if we are suspecting a delay. Even if we do not suspect a delay, we collected additional data at that IEP Team Meeting for the screening. If PT is conducting a new assessment as this one is 60 days past due, and needs scores then we would be conducting additional assessments which fall under **“Option 1”**.

Scenario 12 - Parent brings in a PT assessment for a child who is functioning at a low level in the area of gross motor. It is clinical in nature and does not describe how a child would function in an educational environment, but a PT reading the report could gather educational information from the technical information.

Patty is a PreKindergarten student who does not currently have an IEP. The parent completed a Child Find referral packet containing a physical therapy independent assessment. The assessment is clinical in nature and does not address functional mobility within an educational environment. The PT reviewing the independent assessment can gather educational information from the technical information. The Child Find screening team comes to the IEP meeting with additional data submitted with the referral packet including data from developmental screenings (Ages and Stages), teacher reports/ work samples.

At the IEP meeting, the Qualified Examiner(s) completes the form. For example; if it is a speech language assessment, a speech language pathologist completes the form. Occupational therapy assessment, an occupational therapist completes the form, physical therapy assessment, a physical therapist completes the form, etc.

The assessment does report standard scores and a summary of sufficient findings. The team selects “YES” for Part 1 (Step 4 of QRC above). The Qualified Examiner does not need to complete the section “Are there inconsistencies with the assessment procedures including administration, conclusions, etc?” (Step 5 of QRC above).

The independent assessment does not contain school-based recommendations, the team selects “NO.” Under “Additional Notes,” section, the PT can document that although the assessment does not specifically address functional mobility within an educational environment, the PT reviewing this information can gather educational information from the technical information and then list what that is.

The IEP Team chooses “Option 1” as we screen the child at these appointments and determine if we are suspecting a delay. Even if we do not suspect a delay, we collected additional data at that IEP Team Meeting for the screening.

If the independent assessment is used to determine eligibility for any then we need to document this in the collaborative assessment under **BIRTH/MEDICAL/DEVELOPMENTAL HISTORY/PARTICIPATION IN OTHER SERVICES**

IEP Meeting to Review Assessments and Determine Initial Eligibility

All assessments for initial special education services must be recommended and completed concurrently within 90-calendar days from the receipt of the referral to the completion of the IEP meeting to determine eligibility OR 60-calendar days from receipt of parental consent of the IEP team meeting to determine eligibility. Whichever date comes first must be followed.

Refer to the [IEP Meeting Checklist: Review of Assessments to Determine Initial Eligibility](#) for details regarding the IEP meeting process.

Disability Categories

Under IDEA and COMAR there are fourteen (14) disability categories, or codes, that align with the process to determine if a student qualifies for special education. The categories are the following:

- Autism
- Deaf-blindness
- Deafness
- Developmental Delay
- Emotional Disability
- Hearing Impairment
- Intellectual Disability