

# Comprehensive Assessment and Evaluation of Students With Learning Disabilities

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The National Joint Committee on Learning Disabilities (NJCLD)<sup>1</sup> strongly supports comprehensive assessment and evaluation of students with learning disabilities by a multidisciplinary team for the identification and diagnosis of students with learning disabilities. Comprehensive assessment of individual students requires the use of multiple data sources. These sources may include standardized tests, informal measures, observations, student self-reports, parent reports, and progress monitoring data from response-to-intervention (RTI) approaches (NJCLD, 2005). Reliance on any single criterion for assessment or evaluation is not comprehensive, nor is a group assessment, such as universal screening or statewide academic assessment tests, sufficient for comprehensive assessment or evaluation.

This paper is intended to inform administrators, educators, parents, and others concerned about the effective identification and education of students with learning disabilities about the components, processes, and participants necessary for comprehensive assessment and evaluation, as well as optimal practices that should further enhance the education of students with learning disabilities. The NJCLD has long recognized that inappropriate assessment and evaluation practices may result in questionable incidence rates for learning disabilities (NJCLD, 2001a). Similarly, the NJCLD (2001a, 2001b) has provided a solid foundation for addressing the issues of assessment, evaluation, identification, and eligibility of students with learning disabilities.

### Differentiating Assessment and Evaluation

The purpose of a comprehensive assessment and evaluation is to accurately identify a student's patterns of strengths and needs. The term *assessment* is used in many different contexts for a variety of purposes in educational settings including individual and group, standardized and informal, and formative and summative. Some professionals use *assessment* broadly to include both assessment and evaluation. For this paper, we are differentiating *assessment* and *evaluation* to underscore the sequence, procedures, and decisions involved in a comprehensive process.

*Assessment* is used in this paper to refer to the collection of data through the use of multiple measures, including standardized and informal instruments and procedures. These measures yield comprehensive quantitative and qualitative data about an individual student. The results of continuous progress monitoring also may be used as part of individual and classroom assessments. Information from many of these sources of assessment data can and should be used to help ensure that the comprehensive assessment and evaluation accurately reflects how an individual student is performing.

*Evaluation* follows assessment and incorporates information from all data sources. In this paper, *evaluation* refers to the process of integrating, interpreting, and summarizing the comprehensive assessment data, including indirect and preexisting sources. The major goal of assessment and evaluation is to enable team members to use data to create a profile of a student's strengths and needs. The student profile informs decisions about identification, eligibility, services, and instruction. Comprehensive assessment and evaluation procedures are both critical for making an accurate diagnosis of students with learning disabilities. Procedures that are not comprehensive can

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<sup>1</sup>This is an official document of the National Joint Committee on Learning Disabilities (NJCLD). The following are the member organizations of the NJCLD: American Speech-Language-Hearing Association, Association of Educational Therapists, Association on Higher Education and Disability, Council for Learning Disabilities, Division for Communicative Disabilities and Deafness, Division for Learning Disabilities, International Dyslexia Association, International Reading Association, Learning Disabilities Association of America, National Association of School Psychologists, National Center for Learning Disabilities, and Recording for the Blind & Dyslexic.

result in identification of some individuals as having learning disabilities when they do not, and conversely, exclude some individuals who do have specific learning disabilities.

### **A Decade of Change in Legislation, Research, and Education**

Over the past two decades since completion of NJCLD papers in 1987 and 1997, changes in legislation, research, and education have not only brought change to many aspects of assessment and evaluation of all students, including students with learning disabilities, but also stimulated continued efforts to further enhance the assessment and evaluation process, as well as link it to instruction.

**Legislation.** Two U.S. federal education laws, the Elementary and Secondary Education Act (ESEA—recently called the No Child Left Behind Act of 2001) and the Individuals with Disabilities Education Improvement Act of 2004 (IDEA 2004), have had a major impact on instruction, as well as on the assessment, evaluation, identification, and eligibility of students suspected of having learning disabilities. A main goal of IDEA 2004 was to align special education law more closely with ESEA, the general education law, so the two could work together. Although both laws address the education of students who are struggling and students with disabilities, each law has a different On ESEA provides for a group entitlement (i.e., providing programming regulations for all learners), while IDEA is an entitlement for states to provide individual students who are found eligible with special education and related services.

ESEA recognizes the importance of aligning curriculum and assessment at the state and school levels by requiring that all students, including those with learning disabilities, participate in both the general education curriculum and statewide achievement tests, although some flexibility is permitted through alternate and modified assessment procedures for students with disabilities. In addition, ESEA emphasizes school achievement for all students by specifying that subgroups (disability subgroup, low socioeconomic status subgroup, race/ethnicity subgroup, and English language learner [ELL] subgroup) be considered in the calculation of a school district's adequate yearly progress (AYP). Students identified as having learning disabilities are part of the disability subgroup. With more students with learning disabilities receiving their education in general education settings, a majority now participate in the standards-based curriculum and statewide achievement tests (U. S. Department of Education, 2009).

Now IDEA 2004 and ESEA complement each other. IDEA requires students with learning disabilities to have academic and/or functional individualized education programs (IEP) goals and participate in the general education curriculum. ESEA requires measurement of student progress in that curriculum. As a result, participation in state assessment programs measures student performance both in the general curriculum and on state standards that can provide helpful data as part of a student's special education assessment and evaluation process.

ESEA and IDEA also have a joint focus that has greatly strengthened the alignment of curriculum and assessment. ESEA calls for the use of research-based instruction and appropriate accommodations in assessment and instruction, while IDEA addresses the need for assessment and evaluation procedures that are intended to rule out underachievement due to inadequate instruction, modifies the basis for determining specific learning disabilities, and permits the use of data from research-based interventions during the assessment/evaluation process and prior to determining eligibility. Teams assessing individual students should provide assurance that appropriate core reading and mathematics instruction was received prior to determination of a learning disability.

In addition, IDEA now permits state and local agencies "to use a process that determines if the child responds to scientific, research-based interventions" as part of the evaluation procedures for identifying children with specific learning disabilities (34 CFR 300.307(a)(2)). Data from such a process usually include the results of universal high-risk screening and use of an RTI approach, coupled with continuous progress monitoring. These represent new tools that previously were not specified for use when determining eligibility for special education services. Instead of eligibility being based primarily on a student's performance on individual standardized measures, IDEA has permitted states to expand the assessment and evaluation process to include information about the student's learning rate and level of performance.

IDEA also modified the basis for determining that a student has a specific learning disability and added *reading fluency* as an eighth instructional area to be considered as a criterion for determining eligibility. The 2004

reauthorization states that a child may be determined to have a specific learning disability only when the child does not achieve adequately for the child's age or to meet State-approved grade-level standards in one or more of the following areas, when provided with learning experiences and instruction appropriate for the child's age or State-approved grade-level standards:

- (i) oral expression
  - (ii) listening comprehension
  - (iii) written expression
  - (iv) basic reading skill
  - (v) reading fluency skills
  - (vi) reading comprehension
  - (vii) mathematics calculation
  - (viii) mathematics problem solving
- (34 CFR 300.309 (a)(1))

When conducting a multidisciplinary team assessment for IDEA purposes, the requirement for observation has been broadened to include "the child's learning environment," but a written evaluation report continues to be a required part of the evaluation process.

These changes in ESEA and IDEA legislation clearly provide opportunities for students to participate in quality core instruction in reading and mathematics designed to ensure that poor achievement is not a result of inappropriate or inadequate instruction. Thus, recent legislation has provided an alternative to reliance on a model based primarily on a severe discrepancy between achievement and ability in the learning disabilities identification and eligibility process.

Other legislative changes have influenced the assessment and evaluation process. These include provision for funding early intervening services as well as recognition of the importance of assistive technology, universal design for learning, and postsecondary transition to educational success for many students with disabilities, including learning disabilities.

IDEA also has led to other changes in educational practices. The emphasis on use of state standards for educational planning and participation in accountability systems for all students has led to increased use of inclusive practices. The link to accountability is evident in IDEA requirements that incorporate statewide assessment results into the development of IEPs. In addition, goals for IEPs also are standards-based, and monitoring the progress toward these goals is often based on classroom formative and summative assessments.

**Research.** Several areas of research have influenced comprehensive assessment and evaluation components and processes. These focused on use of the discrepancy model, skills critical to reading success in the early grades, and development of a team-based problem-solving approach to assist students who are struggling academically. More recent research has emerged in many areas, including, but not limited to, implementation of response-based problem-solving models in literacy, complexities of reading, noncognitive influences, brain function, genetics, and accountability measures. These advances in research show promise for further enhancing effective comprehensive assessment and evaluation of students with learning disabilities, as well as impacting future assessment and instruction processes.

Because research did not support the rigid application of the commonly used discrepancy formula as the sole criterion for determination of specific learning disabilities (Fletcher et al., 1998; Foorman, Francis, Fletcher, & Lynn, 1996; Francis, Fletcher, & Stuebing, 2005; Stanovich & Siegel, 1994), alternative approaches to classification decisions were needed. In the late 1990s, clinical research on critical beginning reading skills such as phonemic awareness, phonics, and explicit instruction (e.g., Foorman, Francis, Fletcher, Schatschneider, & Mehta, 1998; Fuchs & Fuchs, 2000; Fuchs et al., 2001; Fuchs & Fuchs, 2005; Torgesen, 2004; Torgesen et al., 1999) demonstrated that earlier identification and quality instruction could make a difference for students struggling with reading. As a result, RTI and other approaches to support student success prior to the determination of learning disabilities were proposed (Bradley, Danielson, & Hallahan, 2002; Gresham, 2002; Hallahan & Mercer, 2002; President's Commission on Excellence in Special Education, 2002; Ysseldyke, 2002). A key feature of RTI and similar approaches is assessment through universal screening and frequent monitoring of student progress that links to instruction (Fletcher, Lyons, Fuchs, & Barnes, 2007, pp. 263–264).

The call for a response-based problem-solving process has raised new questions about the role of RTI in a comprehensive assessment and evaluation process. A growing body of research concerns specific aspects of the process, including frequency of monitoring; intervention fidelity and intensity; effects in scaled-up models;

longitudinal results; cost effectiveness; and maintenance of change over time. For example, a recent study comparing RTI continuous progress monitoring procedures (Jenkins, Graff, & Miglioretti, 2009) found that frequent, brief, timed assessments were no more useful in predicting success than assessments conducted two or three times per year. In mathematics, the specific language, cognitive processes, and academic skills, which may or may not be impaired in students with learning disabilities, are not as well developed as those in reading and writing (Fletcher et al., 2007, p. 208). However, research is emerging on how mathematical computation and problem solving can be effectively integrated into an RTI or problem-solving process. Such research is reported to be “just beginning” based on careful review of nine studies of procedures intended to be implemented in Tier 2 (Newman-Gonchar, Clarke, & Gersten, 2009, p. 30).

Emerging reading research is providing new understanding about how specific complex reading components interact with language (Fletcher et al., 2007). For example, the fluency component of reading is often narrowly defined as automatic, and therefore, rapid word recognition, but “...there is a growing consensus that accuracy, automaticity, and [pitch, or] prosody all...” contribute to fluency and comprehension (Kuhn, Schwanenflugel, & Meisinger, 2010). In a recent related study, Wanzek, Roberts, and Linan-Thompson (2010) compared oral reading fluency performance in primary grade students with third grade reading comprehension measured on both state and nationally normed tests. Earlier data demonstrating that oral reading fluency has predictive validity for reading comprehension (Stage & Jacobson, 2001; Wiley & Deno, 2005) was not only confirmed, but extended to both assessments. However, students were more likely to show proficiency on state-normed than on nationally-normed tests, suggesting that students passing a state test may still be at risk for problems in reading achievement.

In contrast, literacy research has evolved beyond reading and writing to include how oral and written language interacts with cognitive processes within classroom, family, and community contexts. The focus also has expanded to address literacy across the age-span from early and emerging literacy, to adolescent, adult, workforce, and lifelong literacy. Because assessment instruments and data are developed to reflect the ways in which reading is defined (Altwerger, Jordan, & Shelton, 2007), continued research focusing on the components and interconnectedness of language, reading, and literacy and their components promises to influence the assessment and evaluation process, as well as intervention from primary grades through high school and beyond.

Sensitivity to cultural and linguistic diversity in assessments and assessment procedures is another factor that is receiving attention in reading and literacy research (Figueroa & Newsome, 2006; Wilkinson, Ortiz, Robertson, & Kushner, 2006). Although assessment instruments are now translated into Spanish, Chinese, and other languages, particular care must be taken when assessing ELL students whose native language is not English. Identifying learning disabilities in such students requires sensitivity, knowledge, and skill on the part of team members (Klingner & Harry, 2006; Macswan & Rolstad, 2006). Recent research has begun to address the importance of understanding the interactive factors of language and literacy development in bilingual students (Petrovic, 2010).

Other recent research is exploring how noncognitive variables such as motivation (Marinak & Gambrell, 2008), engagement (Guthrie & Wigfield, 2000), students’ interests and self-efficacy (Hampton & Mason, 2003), influence student learning, including reading and literacy development (Afflerbach, 2007). In addition to confirming the complexity of learning and literacy processes, research suggests the need for a variety of assessment instruments, tools, and procedures to determine if, when, and how such variables affect learning in students with learning disabilities, as well as ensuring that instructional approaches are selected that enhance noncognitive variables in students.

New advances in medical research in areas such as brain function and genetics are also contributing to the understanding and identification of learning disabilities. For example, the use of brain imaging as a tool to relate brain activity to specific language behaviors is showing promise in contributing information to the learning disabilities identification process (Price & McCrory, 2005; Pugh et al., 2000; Shaywitz et al., 2002). Similarly, recent progress in research on genetic influences is contributing to a greater understanding of the bases of learning disabilities (Olson, 2005; Tapia-Páez, Tammimies, Massinen, Roy, & Kere, 2008).

IDEA also has stimulated cutting-edge research on applying new statistical models to document changes in student proficiency more clearly than the model mandated by ESEA for determining accountability and adequate yearly progress (AYP). There is particular interest in growth models that incorporate changes in achievement of individual

students into statewide accountability data for calculation of AYP (Goldschmidt et al., 2005). Following pilot programs in two states during the 2005–2006 school year, nine states submitted proposals for implementing growth models in the 2007–2008 school year (U. S. Department of Education, 2008). The chosen pilot programs can vary in method and characteristics, but must meet nine specific required design characteristics. Careful examination of data from large scale pilot projects is intended to guide states with basic questions such as “How much growth is enough?” and “How do we report growth?” and with technical issues such as precision, reliability, stability, and validity (Auty et al., 2008, p. 16).

The increased attention to research in these and other new and challenging assessment contexts can be expected to continue shedding new light on the assessment/instructional process for all students, including those with learning disabilities.

**Education.** Growth in the number of students receiving special education services and who are identified as having disabilities remained relatively stable for a number of years (60 million in 1995 and 65 million in 2004). During the same period, the percentage of students with learning disabilities in the general school age population (ages 6–21 years) dropped from 4.3 % in 1995 to 4.2% in 2004 (U.S. Department of Education, 2009). Concomitantly, the number of students from “minority backgrounds” identified with intellectual disabilities, behavior disorders, and to a lesser degree, learning disabilities, has been found to be disproportionately represented in special programs (Gamm, 2007). The issue of disproportionality has led to increased attention to RTI and other approaches intended to reduce over identification.

Given the increasing diversity of the population in the United States, educators and related service providers are becoming familiar with nonbiased assessment techniques, assessment tools that are available in different languages, and protocols for selecting assessment tools that include norms that are sensitive to cultural and linguistic differences. Professionals also are becoming more aware of the need to be able to interpret assessment results for parents and families, as well as other professionals on the team. Professional development opportunities are available that include more training in multicultural issues and nonbiased assessments for school personnel. Increasing recruitment of professionals from culturally and linguistically diverse backgrounds is another means of improving services for an increasingly diverse student population.

Other educational practice trends have implications for appropriate comprehensive assessment and evaluation practices. These include the following:

1. Increased access to and participation in the general education curriculum requires that assessment personnel and related service providers are familiar with academic achievement standards and expectations.
2. Increased emphasis on the use of instructionally linked assessments, such as the progress-monitoring data component of RTI and formative and summative classroom and school assessments, in addition to individualized standardized assessment measurement tools, means that team members must understand the nature, purpose, potential, and limitations of such data for instruction.
3. Increased understanding of how students learn and demonstrate their knowledge and skills has resulted in the development of evidence-based instructional strategies, techniques, and curricula, which may either prevent the need for eligibility determination or enhance instructional access following such determination.
4. Increased attention to individual differences in learning has improved our understanding of how to individualize help for low achieving students. Following the earlier work of many educators, recent practitioners (e.g., Clay, 1998, 2002; Goodman, Watson, & Burke, 2005) have recognized that no two children take the same path to becoming independent readers and writers and have developed assessment tools and instructional guides for teachers. Systematic standardized observations of emergent and struggling readers are used to map literacy growth. Areas such as oral language, concepts about print, phonemic awareness, vocabulary knowledge, reading text, reliance on semantic or syntactic clues in oral reading, and use of strategies in written expression are assessed and often also linked to or embedded in instruction (e.g., Clay, 2002; Goodman et al., 2005). Thus, educators are more aware that group assessments are not sufficient to guide instruction, but must be supplemented by assessments that illuminate individual differences, including authentic learning materials observed in natural conditions.

5. Ongoing recognition of issues related to assessment of ELLs includes factors such as a lack of valid and reliable assessment tools, limited English skills masking disabilities, and the poor match of cultural/linguistic characteristics with instruction or significant life events (Liu, Ortiz, Wilkinson, Robertson, & Kushner, 2008).
6. The age at which each student receiving special education services must have an individual transition plan (ITP) has changed from age 14 to age 16 years (IDEA 2004). Because states may retain the earlier required age for an ITP, or move to the later age, the timing of re-evaluations for students varies from state to state. The possibility of delaying ITP decisions until age 16 brings concerns about the usefulness of the assessment and evaluation processes. Delay in linking assessment to timely decisions about courses, curriculum, services, and postsecondary options also raises questions about the shorter planning time to support a successful transition from high school for each student.
7. The shift to the development of a summary of performance (SOP) for reporting student academic achievement and functional performance instead of the previously mandated re-evaluation means that school personnel need to be aware of their state's SOP requirements. IDEA now mandates that the SOP include recommendations to assist the student in meeting individual postsecondary goals. Because the SOP must meet the needs of all students with disabilities, the format states adopt requires a breadth of academic and functional information that can reflect individual performance and recommendations for students with mild, moderate, and severe learning disabilities. In addition, teachers, related service providers, families, and students (as appropriate) will need to be prepared to work together to describe academic achievement and behavioral and functional skills, and recommend accommodations for postsecondary education and/or employment goals.
8. A provision of IDEA 2004 that discourages the use of a severe discrepancy between achievement and ability as a criterion for identification of students with learning disabilities has led to less reliance on a single data source. As a result, a broader range of measurement tools and data is used to inform assessment, evaluation, and eligibility processes. Important questions of the occurrence of other special learning needs along with learning disabilities also can be more clearly delineated with such assessment procedures.
9. Increased access to technological advances serves to simplify, streamline, and standardize data collection for assessment and data interpretation for evaluation. In some places, teachers are using technological devices to record and store progress-monitoring data. Computer software provides online achievement testing, automated interpretations of standardized test data, and banks of goals that can be incorporated into IEPs, individualized family service plans (IFSPs), and ITPs. Some teachers are using software to generate or select instructional objectives and activities that are correlated with state standards. However, teachers still need to individualize objectives based on a combination of evaluation reports, state-specific general education curriculum objectives, and the particular needs and interests of the student. In addition, use of principles of universal design for learning and accommodations using assistive technology are changing the landscape of both assessment instruments and instructional material options.
10. Recent efforts spearheaded by the Council of Chief State School Officers (CCSSO) and the National Governors Association (NGA) have focused on the need for Common Core State Standards (CCSSO, 2009). The standards would initially address (1) English-language arts and mathematics for grades K–12 and (2) College and Career-Readiness. As noted by Phillips and Wong (2010), “Having a set of common standards ... lays the groundwork for developing assessments aligned with those college-ready standards and for developing teaching tools that are aligned with both the standards and the assessments” (p. 37).

### **Guiding Principles for Comprehensive Assessment and Evaluation**

The NJCLD views adherence to the following guiding principles as vital to a comprehensive assessment and evaluation for students with learning disabilities:

1. Assessment and evaluation are guided by a consistent understanding of learning disabilities that recognizes intra-individual differences, wide variation in severity, and the need for specialized instruction and accommodations to inform instruction.
2. No single data source is sufficient for identifying students with learning disabilities; this includes the data from any one quantitative formula such as a discrepancy between standardized ability and achievement scores.
3. Professionals with expertise in learning disabilities are necessary to conduct a comprehensive assessment and evaluation system for students suspected of having learning disabilities. These professionals from

various disciplines make up a multidisciplinary team along with the family, and the student (as appropriate). To make identification and eligibility decisions, the team must possess the range of competencies necessary for evaluation and identification.

4. Multidisciplinary teams that include the child's parents are expected to consider all aspects of a student's learning and behavior that assist or interfere with school performance. Following eligibility determination, the development of goals based on identified needs will lead to selection of appropriate services. Development of specialized instruction should be a collaborative process that ensures meaningful participation of families under the guidance and direction of a person designated as a team chair, case manager, service coordinator, or similar position. Such a person should ensure that germane content from the evaluation is shared with and considered by all relevant parties for implementation.
5. Comprehensive assessment measures, procedures, and practices are necessary to enable multidisciplinary teams to differentiate learning disabilities from underachievement and other types of learning and behavior problems. Underachievement is common among students with learning disabilities, but it is not synonymous with learning disabilities.
6. Multidisciplinary teams need the information, opportunity, and time to consider and integrate assessment findings in order to engage in a team evaluation that informs identification, eligibility, services, and instruction.
7. Multidisciplinary teams work to ensure that administrators and families recognize the benefit of an accurate diagnosis to inform instruction. Historically, NJCLD (2001a) noted that, at times, families or teams may choose to select an eligibility category for purposes of special education identification that seems preferable to another eligibility category that may seem to be less desirable (e.g., learning disability vs. mental retardation).

### **Response to Intervention**

The shift from use of a discrepancy model to an RTI model is still in progress across the country. How RTI is used when determining whether a student has learning disabilities and in what ways to alter interventions when student responses are inadequate remain emerging areas of practice. A key feature of an RTI process is the use of continuous progress monitoring in general education classrooms to provide frequent, brief, direct assessment of individual students (NJCLD, 2005). Typically, such intervention is in the area of reading and mathematics or behavior and includes criteria to indicate whether the student is making sufficient progress. Performance on such assessment tasks is intended to determine when academic or behavioral instruction should be provided in a smaller group, with greater intensity, using a different method, or if additional comprehensive assessment is indicated.

Although RTI data can provide useful information about specific early reading skills, it cannot be used as the sole basis for determining whether a student has learning disabilities. Indeed, IDEA 2004 regulations specify that RTI data can be a component of the identification process for learning disabilities. As indicated in the analysis of comments and changes that accompanied the IDEA 2004 regulations, an RTI process does not replace the need for a comprehensive evaluation. A public agency must use a variety of data gathering tools and strategies even if an RTI process is used. The results of an RTI process may be one component of the information reviewed as part of the [required] evaluation procedures (Assistance to States for the Education of Children with Disabilities and Preschool Grants for Children with Disabilities; Final Rule, 2006, pp. 46648).

Whenever RTI processes are considered for implementation in various states and localities, in academic and behavioral areas beyond reading, and at levels beyond the primary grades, it is also important to note that an effective RTI process can provide valuable, but not sufficient data for the comprehensive assessment and evaluation required to identify learning disabilities. Data from an RTI process should be part of the analysis, synthesis, and recommendations used for evaluation, identification, eligibility, and program planning.

### **Instruments and Procedures for Comprehensive Assessment and Evaluation**

To obtain a comprehensive set of quantitative and qualitative data, accurate and useful information about an individual student's status and needs must be derived from a variety of assessment instruments and procedures including RTI data, if available. A comprehensive assessment and evaluation should

1. Use a valid and the most current version of any standardized assessment.

2. Use multiple measures, including both standardized and nonstandardized assessments, and other data sources, such as
  - case history and interviews with parents, educators, related professionals, and the student (if appropriate);
  - evaluations and information provided by parents;
  - direct observations that yield informal (e.g., anecdotal reports) or data-based information (e.g., frequency recordings) in multiple settings and on more than one occasion;
  - standardized tests that are reliable and valid, as well as culturally, linguistically, developmentally, and age appropriate;
  - curriculum-based assessments, task and error pattern analysis (e.g., miscue analysis), portfolios, diagnostic teaching, and other nonstandardized approaches;
  - continuous progress monitoring repeated during instruction and over time.
3. Consider all components of the definition of specific learning disabilities in IDEA 2004 and/or its regulations, including
  - exclusionary factors;
  - inclusionary factors;
  - the eight areas of specific learning disabilities (i.e., oral expression, listening comprehension, written expression, basic reading skill, reading comprehension, reading fluency, mathematics calculation, mathematics problem solving);
  - the intra-individual differences in a student, as demonstrated by “a pattern of strengths and weaknesses in performance, achievement, or both relative to age, State-approved grade level standards or intellectual development” 34 CFR 300.309(a)(2)(ii).
4. Examine functioning and/or ability levels across domains of motor, sensory, cognitive, communication, and behavior, including specific areas of cognitive and integrative difficulties in perception; memory; attention; sequencing; motor planning and coordination; and thinking, reasoning, and organization.
5. Adhere to the accepted and recommended procedures for administration, scoring, and reporting of standardized measures. Express results that maximize comparability across measures (i.e., standard scores). Age or grade equivalents are not appropriate to report.
6. Provide confidence interval and standard error of measure, if available.
7. Integrate the standardized and informal data collected.
8. Balance and discuss the information gathered from both standardized and nonstandardized data, which describes the student’s current level of academic performance and functional skills and informs decisions about identification, eligibility, services, and instructional planning.

### **Diagnosis: Determining Whether a Student Has Learning Disabilities**

**Consideration of Learning Disability Characteristics.** A comprehensive assessment is conducted to determine eligibility for special education and to identify the specific areas of strength and unique educational needs. The reason that comprehensive assessment and evaluation procedures are needed is because learning disabilities may be manifested differently among individuals over time, in severity, and across settings. Furthermore, the manifestations of learning disabilities are often subtle and may be hidden when students use compensatory or avoidance strategies. Consequently, it is important for the team to consider the following characteristics of learning disabilities in the course of the assessment and evaluation processes:

1. Learning disabilities, like other disabilities, vary with the individual. Intra-individual differences may include strengths and weaknesses in performance, achievement, or both. In addition, each of these differences must be considered relative to age, grade, or intellectual level across and within areas pertinent to learning (e.g., listening, reading, writing, reasoning, and mathematics).
2. Learning disabilities exist on a continuum from mild to severe.
3. Learning disabilities can appear differently in various academic and nonacademic settings.
4. Learning disabilities vary in their manifestations depending on task demands and may include difficulties in language (i.e., listening, written and oral expression, spelling, reading), mathematics, handwriting, memory, perception, cognition, fine motor expression, social skills, and executive functions (e.g., attention, organization, reasoning).
5. Learning disabilities can occur in students who are also gifted and/or talented. These “twice exceptional” students often achieve at age and grade expectations and are thus not considered to be struggling in school



(Callard-Szulgit, 2008), despite showing academic and social problems characteristic of students with learning disabilities. Often these students can perform above age- and/or grade-based achievement levels, if provided with needed individualized learning opportunities.

**Distinguishing Between Learning Disabilities and Other Conditions.** Differential diagnosis is necessary to distinguish among disorders, syndromes, and factors that can interfere with academic performance. Teams including the child's parents need to determine the nature of the presenting problem and factors contributing to academic or behavioral difficulties. The following factors need to be considered to make an accurate differential diagnosis:

1. Definitions of learning disabilities always include acknowledgment of exclusionary factors, meaning that the students' learning needs are not due primarily to intellectual disabilities, sensory impairments, emotional/social difficulties, cultural and linguistic factors, or adverse environmental conditions.
2. Documentation of underachievement in one or more areas is a necessary, but not a sufficient criterion, for the diagnosis of learning disabilities.
3. Cultural and linguistic differences do not preclude the possibility that an individual also has learning disabilities.
4. Continued learning problems following high-quality, research-based instruction can be an indication of learning disabilities; however, inadequate instruction does not preclude the possibility that a student has learning disabilities.
5. Factors such as poor self-regulatory behaviors (e.g., inattention, lack of motivation, and impulsivity), poor social perception (e.g., inappropriate social judgment), and inappropriate social interaction (e.g., problems relating to peers) are not in themselves considered learning disabilities, but they may be concomitant with learning disabilities. A comprehensive assessment must address all areas of suspected disability, so if these conditions exist it is presumed that they would have been considered and addressed during the assessment. If this is the case, such information would be integrated into the comprehensive assessment report and may affect the program, curriculum, and/or instructional recommendations for the individual student.
6. Students with other conditions (e.g., autism, sensory impairment, emotional disturbance) also may be diagnosed as having concomitant learning disabilities.
7. Evidence of intra-individual differences in skills and performance can suggest learning disabilities.
8. Although a student with learning disabilities may show a severe discrepancy between ability and achievement, discrepancy formulas cannot be the sole basis for determining a learning disability under IDEA 2004.
9. Because scores on intelligence tests may not be an accurate reflection of intellectual ability, they may not be needed for a comprehensive assessment to determine the presence of a learning disability. Language impairment, for example, can reduce performance on intelligence tests and other achievement measures. Caution must be used in the selection of intelligence tests and interpretation of results for learning disability determination.
10. Sensitivity to validity and reliability issues must be considered when assessing students from culturally and linguistically diverse backgrounds, including ELLs.

### **Eligibility: Determining Whether a Student Needs Special Education and Related Services**

Comprehensive assessment and evaluation processes are intended to assist the IEP team in determining whether an individual should be identified or diagnosed as having a learning disability or disabilities (i.e., meets eligibility criteria). Eligibility criteria should guide the assessment team. If the student does meet criteria, the results of the assessment will be used to assist the team in identifying strengths and needs, establishing goals and, finally, determining the combination of services that might best meet the identified needs. The multidisciplinary team conducting the assessment and evaluation is expected to identify a student without regard to the prospects of the services needed to address the student's identified needs. Therefore, the decision about diagnosis should not be based on any of the following factors:

1. Absence of an appropriate placement or availability of services;
2. Lack of funds or resources;
3. Desire or intention to generate special education funds.

**Diagnostic Summary and Eligibility Decision.** The data from the comprehensive assessment and evaluation are key elements for making the decision about eligibility of an individual who is identified as having learning disabilities. The decision-making alternatives include the following:

1. If the student is found eligible for special education and in need of special education and/or related services, that determination is communicated to the team responsible for developing the IEP for the student, if this team is not the same team as the one conducting the assessment.
2. If the student is determined not to meet criteria or be in need of special education and/or related services, pertinent curricular and instructional information should be forwarded to the student's general education classroom with specific, practical suggestions for implementation in appropriate educational/behavioral areas.
3. If the student is found not to require special education and related services under IDEA 2004 at the time, the possibility of requiring support or services under Section 504 of the U.S. Vocational Rehabilitation Act of 1973 may need to be explored. However, 504 eligibility should not be a default of not meeting IDEA criteria.
4. If it is decided that the student needs no special considerations at the present time, the parents, student (if appropriate), and teacher are so informed. The assessment team should make instructional and other recommendations, if needed, for students who do not qualify for IDEA services based on the information gathered during the assessment.

**Multidisciplinary Team Documentation.** IDEA 2004 requires a written evaluation report as part of the assessment and evaluation processes. Teams may develop an integrated multidisciplinary assessment report that contains all of the information on assessments completed by the various professionals. This allows for integration of all perspectives. The multidisciplinary team at the IEP meeting must make a determination of eligibility using the criteria set forth under IDEA and applying any appropriate state criteria. Once eligibility is determined, teams need to identify areas of strength and need, set goals to address each area of need and capitalize on strengths, and determine appropriate services from a continuum of options.

The documentation developed from the comprehensive assessment and evaluation by the multidisciplinary team should be linked directly to the IEP, IFSP, ITP, and implementation of interventions and instruction. Data from continuous progress monitoring and curriculum-based measures, as well as data concerning developmental, cognitive, communication, learning, academic, and behavioral/social areas are important in program planning for young children. For older students, functional, organizational, self-advocacy, intrapersonal, work-related, and independent living areas also should be summarized to inform the program planning process.

The documentation should include both quantitative and qualitative data from both broad and specifically targeted assessment instruments and techniques appropriate to the individual student. The data should reflect the multiple perspectives of general education curricular and academic skills, as well as more specific areas that can create the unexpectedly low performance typical of individuals with learning disabilities despite appropriate instruction.

### **Linking Evaluation With Instruction and Transition**

Data from the assessment and evaluation should guide both instruction and transition as appropriate. If the eligibility determination is made at a transition point from early childhood, elementary, middle, or secondary school (NJCLD, 2007), or from public to private school, the data also should be used to inform the IFSP, IEP, ITP, or SOP.

As various service options and interventions emerge through discussion, each professional should represent his or her own discipline-specific expertise and strive to integrate it with the multiple perspectives of other professionals. The variety of perspectives provided by multidisciplinary input into the evaluation should suggest multiple implications and assist in projecting student goals and plans.

Team members including the child's parents participating in the assessment and evaluation processes should provide suggestions about student strengths and needs, accommodations, and assistive technology, support from related service providers, as well as suggested instructional, classroom management, and motivational strategies on

the IEP. Recommendations about how and why specific instructional settings and teaching approaches might be beneficial also should be addressed.

When each professional's own background and expertise is brought to and respected by the team and valued along with input from the child's parents, the team maximizes the integration of individual contributions. In this way, the multidisciplinary identification/eligibility/educational planning processes are greatly enhanced by the collegial thoroughness of multiple, comprehensive input at every level. Sufficient time should be provided to allow a thorough and thoughtful analysis and synthesis of relevant content so that the evaluation can be shared among participating parties.

The instruction and transition plans developed from the evaluation should be based on information about both the student's learning strengths and learning needs, as well as information about mismatches between the student's abilities and expectations in the educational context. Plans should be relevant to meeting specific contextually based needs.

### **Recommendations**

Strides have been made over the past decade in legislation, research, and education to refine and enhance the comprehensive assessment and evaluation process. The requirements for comprehensive assessment and evaluation are codified in the special education regulations of every State Education Agency (SEA), according to IDEA 2004. The assessment and evaluation process is an integral part of educational decisions concerning students who may have learning disabilities.

To assure the continued advancement of professional practice in comprehensive assessment and evaluation of students with, or suspected of having, learning disabilities, the NJCLD strongly supports and advocates for the following recommendations:

#### **Research**

1. Researchers should conduct studies to guide the selection of the most relevant and appropriate battery of assessment measures to identify students with learning disabilities and inform instruction.
2. Ongoing research should be undertaken to identify and expand approaches to alternative models of assessment of students with learning disabilities (e.g., dynamic assessment, principles of universal design for learning, growth models).
3. Developmental data should be collected on older students on a variety of complex skills, such as subsystems of language, literacy, and academic content areas.
4. Significant attention should be given to research in the development of assessment measures with adequate sensitivity and specificity for students with learning disabilities across ages. Such research should include a focus on the critical issue of disproportionality in special education, especially the overrepresentation of students from culturally and linguistically diverse backgrounds.
5. Large scale, longitudinal studies across states and local districts are needed to systematically explore comprehensive assessment and evaluation processes. This research would include collecting and examining RTI data, making comparisons to previously relied-upon data, and implementing needed changes.
6. Additional research in RTI is needed in such areas as intervention fidelity, effects in scaled-up models, longitudinal results, cost effectiveness, and maintenance of change over time.
7. Researchers and school district personnel should collaborate to establish and expand the longitudinal data bases to inform the field about optimal assessment protocols that are linked to student progress and outcomes.
8. Researchers and educators should continue to examine new technologies, including universal design characteristics, that may enhance the gathering and use of accurate, meaningful, and reliable data for the assessment and evaluation processes. New technologies that increase the amount, types, and complexity of assessment data may lead to greater understanding of relationships between data collection and effectiveness of instructional decision making.

### **Professional Development**

1. Ongoing education should occur for all professionals who are expected to participate in team decision making so they may consistently demonstrate the ability to partner with other professionals, families, and students in all phases of the assessment, evaluation, and program planning processes.
2. Administrative, teaching, and related service providers should be made aware of the potential impact of cultural and linguistic diversity on the selection, administration, and interpretation of assessment measures, as well as on identification, eligibility, and instructional processes. Planned, periodic professional development activities, including, but not limited to, opportunities for video observations, discussions, and interactive sessions, along with printed information, written reminders on relevant documents, and other experiences are needed to ensure both understanding and application by all professionals in education settings.
3. Professional development should be provided for middle and secondary school personnel that focuses on the implications of recent legislation and increased practical assessment information that supports families and students as they prepare for transition from high school to postsecondary options. Understanding the role of assessment in shaping student goals, courses, and curriculum; and in developing and finalizing the SOP under IDEA mandates is critical. Equally important are knowing the protections of the Americans with Disabilities Act Amendment Act of 2008 (ADAAA), meeting admission criteria including a psycho educational or medical evaluation, and accessing needed support services such as accommodations, assistive technology, and universal design for learning.
4. State and local agencies should provide professional development for all educators, including general education teachers and school and district administrators, to ensure understanding of the parameters for the determination of learning disabilities, comprehensive assessment and evaluation, and instructional practices.
5. Educators should keep up-to-date about legislation, research, and education that impact their level of involvement in such areas as data collection, assessment, and evaluation components. An individual professional growth plan developed in collaboration with appropriate education personnel may be useful.

### **Families and Advocates**

1. School district personnel should expand meaningful ways in which families and other advocates can be involved in the comprehensive assessment and evaluation of learning disabilities for their children.
2. School districts and other entities should increase information and training for families and other advocates of both mandated and recommended components of the comprehensive assessment and evaluation process for individual students whose learning difficulties may be due to learning disabilities.
3. School districts should ensure that educational personnel understand and can communicate to families the necessity for early, collaborative, and focused transition assessment and planning. Families of students who may seek admission to postsecondary education need to be aware that although the SOP document required under IDEA can be helpful, “most colleges still require a current psycho educational evaluation or a medical report from a qualified physician to determine eligibility and protection under the ADA” (Shaw, Madaus, & Dukes, 2010, p. 239).

### **Administration/Leadership**

1. School administrators must provide the infrastructure and resources for effective assessment and evaluation (e.g., appropriate and current assessment tools, current materials, continuing professional development), data-driven and high quality instruction, time for data collection and analysis, and collaboration (e.g. sufficient joint planning time for teams).
2. School and district administrators should provide needed leadership and logistical support to multidisciplinary assessment team members to ensure the appropriate application of the comprehensive assessment and evaluation processes.
3. Educators should critically examine the relationship between curriculum, standards, and accountability measures and the multidimensional nature of comprehensive assessment and evaluation to ensure that meaningful information is available for decision making.

4. Researchers, educators, and policy makers should examine assessment practices to ensure that students from culturally and linguistically diverse backgrounds, particularly ELLs, are provided with nonbiased assessment measures.
5. School districts should take responsibility for providing school administrators with experiences, information, and supports that foster implementation of positive school practices based on research.
6. Policy makers, administrators, and educators should examine assessment, evaluation, and services practices to ensure that gifted students with learning disabilities are provided with learning opportunities to perform at achievement levels beyond their chronological age or grade.
7. State and district administrators need to clarify that intra-individual differences occur as a pattern of strengths and weaknesses in performance and/or achievement within specific domains, such as behavior, cognition, communication, and academics. IDEA 2004 does not specify the areas of performance and/or achievement that constitute these intra-individual differences or patterns.

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