

# Special Education Coding Criteria 2014/2015

ECS to Grade 12 Mild/Moderate Gifted and Talented Severe

Aberta Government

# Special Education Coding Criteria 2014/2015

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This document is intended for:

Teachers	$\checkmark$
Administrators	~

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### Introduction

*The Ministerial Order on Student Learning (#001/2013)* provides an overview of the goals, expectations and outcomes for an inclusive Kindergarten to Grade 12 education. This framework supports enabling all students to succeed and work toward high school completion. School authorities determine the level of support required to ensure student success in an educational program based on the programs of study.

Special Education Coding Criteria 2014/2015 outlines criteria within specific categories to help teachers and administrators in school authorities to identify those students/ECS children who require specialized supports and services. The need for specialized supports and services may be determined at any time. Schools need to have the documentation to support the assignment of a special education code. This includes a diagnosis of a disability or disorder by a qualified professional. In addition to this diagnosis, it is essential to have a clear indication of how the disability/disorder affects the student's/ECS child's learning in an educational environment.

School authorities are expected to include a special education code, where appropriate, as part of a 2014/2015 registration. Each category is given a code for the purpose of reporting special education data to Alberta Education. Use of the codes allows Alberta Education to collect one of many pieces of demographic information that can assist the ministry in better planning for the overall improvement of the education system. This information is not used by the ministry to determine a student's eligibility for particular types of placement and/or programming.

The Diagnostic and Statistical Manual of Mental Disorders – Fifth Edition (DSM-5) has been considered in the updates to Special Education Coding Criteria 2014/2015. However, Special Education Coding Criteria 2014/2015 is not intended to provide diagnostic criteria for clinicians but rather to provide educators with information to help identify and program for students/ECS children with an identified need.

For further information about programming, refer to:

- Ministerial Order on Student Learning (#001/2013)
- Standards for Special Education, Amended June 2004
- Standards for the Provision of Early Childhood Special Education (2006)
- Requirements for Special Education in Accredited Funded Private Schools (2006)
- Handbook for the Identification and Review of Students with Severe Disabilities 2014/2015
- The Inclusive Education Library: <u>www.learnalberta.ca/content/ieptLibrary/index.html</u>
- Regional Collaborative Service Delivery information: <u>www.education.alberta.ca/admin/supportingstudent/collaboration/rcsd.aspx</u>.

# Mild/Moderate including Gifted and Talented (ECS to Grade 12)

#### UPDATE MILD COGNITIVE (INTELLECTUAL) DISABILITY

(ECS: Code 30; Grades 1-12: Code 51)

A student/ECS child identified as having a mild cognitive (intellectual) disability:

- has been diagnosed by a qualified professional as demonstrating:
  - deficits in intellectual functioning, such as reasoning, problem solving, planning, abstract thinking, judgment, academic learning, and learning from experience
  - adaptive behaviour skills in the mild range as measured on an adaptive behaviour scale<sup>1</sup>
- receives support/intervention for behaviours that interfere with learning, for example: demonstrated delays in intellectual functioning in most academic subjects, and social behaviours as compared to his or her same-age peers

#### UPDATE MODERATE COGNITIVE (INTELLECTUAL) DISABILITY

(ECS: Code 30; Grades 1-12: Code 52)

A student/ECS child identified as having a moderate cognitive (intellectual) disability:

- has been diagnosed by a qualified professional as demonstrating:
  - deficits in intellectual functioning, such as reasoning, problem solving, planning, abstract thinking, judgment, academic learning, and learning from experience
  - adaptive behaviour skills in the moderate range as measured on an adaptive behaviour scale<sup>2</sup>
- receives support/intervention for behaviours that interfere with learning and requires
  programming that reflects significant modifications to basic curriculum and instruction
  in literacy, numeracy and living/vocational skills

#### EMOTIONAL/BEHAVIOURAL DISABILITY

UPDATE (ECS: Code 30; Grades 1–12: Code 53)

A student/ECS child identified with a mild to moderate emotional/behavioural disability exhibits chronic and pervasive behaviours that interfere with the learning and safety of the student/ECS child, other students/ECS children and staff.

Typically, behaviour disabilities are characterized by a number of observable behaviours that could include:

- an inability to establish or maintain satisfactory relationships with peers or adults
- a general mood of unhappiness, moodiness, irritability, withdrawal, temper outbursts, fearfulness, avoidance

<sup>&</sup>lt;sup>1</sup> American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

<sup>&</sup>lt;sup>2</sup> American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

- inappropriate behaviour or feelings under ordinary conditions
- continued difficulty in coping with the learning situation in spite of remedial intervention
- physical symptoms or fears associated with personal or school problems
- difficulties in accepting the realities of personal responsibility and accountability
- physical violence toward other persons and/or physical destructiveness toward the environment.

In addition to a diagnosis by a qualified professional, school authorities are required to have documentation completed by school staff indicating the quality, nature, frequency and severity of the disability.

#### **LEARNING DISABILITY** (Grades 1–12: Code 54)

Learning Disabilities refer to a number of disorders which may affect the acquisition, organization, retention, understanding or use of verbal or nonverbal information.<sup>3</sup>

The DSM-5 uses the term "Specific Learning Disorder" to identify various types of learning disabilities. The determination of a Learning Disability/Specific Learning Disorder must be based on a diagnosis by a professional.

Learning disabilities range in severity (mild, moderate, or severe) and may result in difficulties in one or more of the following areas:

- oral language (e.g., listening, speaking, understanding)
- reading (e.g., decoding, phonetic knowledge, word recognition, comprehension)
- written language (e.g., spelling and written expression)
- mathematics (e.g., computation, problem solving)<sup>4</sup>

To help individuals with learning disabilities be successful, it is necessary to ensure early identification and provide interventions, as appropriate, involving home, school, community and workplace settings. The interventions need to be appropriate for each individual's type of learning disability and, at a minimum, include the provision of:

- specific skill instruction
- accommodations
- compensatory strategies
- self-advocacy skills

For more information on programming for students with learning disabilities, please visit the Inclusive Education Library at:

www.learnalberta.ca/content/inmdict/html/learning\_disabilities.html

<sup>&</sup>lt;sup>3</sup> Learning Disabilities Association of Canada, Official Definition of Learning Disabilities. Retrieved in 2014 from: <u>http://www.ldac-acta.ca/learn-more/ld-defined/official-definition-of-learning-disabilities</u>.

<sup>&</sup>lt;sup>4</sup> Learning Disabilities Association of Canada, Official Definition of Learning Disabilities. Retrieved in 2014 from: <u>http://www.ldac-acta.ca/learn-more/ld-defined/official-definition-of-learning-disabilities</u>.

#### HEARING DISABILITY (ECS: Code 30; Grades 1–12: Code 55)

A student/ECS child identified with a mild to moderate hearing disability is one who:

- has a hearing condition that affects speech and language development, and interferes with the ability to learn
- according to one of the more commonly used classification systems, has a mild hearing loss of 26 to 40 decibels, or a moderate hearing loss of 41 to 70 decibels unaided in the better ear over the normal speech range of 500 to 4000 Hz.<sup>5</sup>

VISUAL DISABILITY (ECS: Code 30; Grades 1-12: Code 56)

A student/ECS child identified with a mild to moderate visual disability is one who:

- has vision so limited that it interferes with the ability to learn, and requires modification of the learning environment
- is designated as having limited vision with a visual acuity of less than 20/70 (6/21 metric) in the better eye after correction, and/or a reduced field of vision

#### COMMUNICATION DISORDER/DELAY (ECS: Code 30)

A child identified with a mild to moderate communication disorder/delay is one who:

- has a diagnosed mild or moderate disorder or identified delay in expressive and/or receptive language; or
- has a diagnosed disorder/delay in articulation, phonology, voice, fluency and/or social (pragmatic) communication; or
- is at risk for learning difficulties as demonstrated by education-based assessments, which may include tests of phonological awareness

<u>Communication Code 30: Questions and Answers:</u> <u>http://education.alberta.ca/media/6734589/2013%20clarification%20of%20spec%20ed</u> <u>%20coding.pdf</u>

#### COMMUNICATION DISABILITY (Grades 1-12: Code 57)

A student identified with a communication disability communicates ineffectively with peers and adults because of a diagnosed mild to moderate disability in:

- language: expressive and/or receptive; and/or
- speech sound: articulation, phonology, voice and/or resonance quality
- fluency stuttering
- pragmatics social use of verbal and nonverbal communication <sup>6</sup>

<sup>&</sup>lt;sup>5</sup> Canadian Academy of Audiology. Retrieved in 2014 from: <u>http://www.canadianaudiology.ca/consumer/degree-of-hearing-loss.html</u>.

<sup>&</sup>lt;sup>6</sup> American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

#### PHYSICAL OR MEDICAL DISABILITY (ECS: Code 30; Grades 1–12: Code 58)

A student/ECS child identified with a mild to moderate physical or medical disability is one whose physical, neurological or medical condition interferes significantly with the ability to learn and requires adjustments to the learning environment.

#### MULTIPLE DISABILITY (ECS: Code 30; Grades 1–12: Code 59)

A student/ECS child identified with a multiple disability has two or more non-associated mild to moderate disabilities which have a significant impact upon his or her ability to learn. Some disabilities are closely associated, so would not be designated under this category. For example, students/ECS children with hearing disabilities frequently have communication disabilities, and students/ECS children with cognitive disabilities almost always have communication disorders.

#### GIFTED AND TALENTED (ECS to Grade 12: Code 80)

Giftedness is exceptional potential and/or performance across a wide range of abilities in one or more of the following areas:

- general intellectual •
- specific academic •
- creative thinking
- social •
- musical
- artistic •
- kinesthetic

For more information on programming for students who are gifted and talented, please visit the Inclusive Education Library at:

www.learnalberta.ca/content/ieptLibrary/lib08.html .

## Severe (ECS to Grade 12)

#### UPDATE

Schools are encouraged to use a variety of assessment techniques and strategies in order to assess a student's/ECS child's current level of functioning in the learning environment. In some instances, students/ECS children with severe disabilities may be assessed by the use of a functional assessment rather than a traditional, standardized assessment. Functional assessments by a qualified professional will be considered in cases where the disabilities of the student/ECS child preclude a standardized assessment.

**Functional assessment** – includes both formal (objective data such as a standardized behavioural checklist) and anecdotal and/or direct observations. In addition to a description of clinically relevant behavior, the assessment should provide information on the student's/ECS child's functioning in the educational environment in such areas as:

- social functioning
- organization/independent work skills related to both academic and non-academic tasks
- life skills
- safety and support needs

#### SEVERE COGNITIVE (INTELLECTUAL) DISABILITY (Code 41)

#### UPDATE

A student/ECS child identified as having a severe to profound cognitive (intellectual) disability:

- has been diagnosed by a qualified professional as demonstrating:
  - significant deficits in intellectual functioning, such as reasoning, problem solving, planning, abstract thinking, judgment, academic learning, and learning from experience
  - adaptive behaviour skills in the severe or profound range as measured on an adaptive behaviour scale<sup>7</sup>
- receives support/intervention for behaviours that interfere with learning and requires
  ongoing support or is dependent on others for all aspects of daily living

#### SEVERE EMOTIONAL/BEHAVIOURAL DISABILITY (Code 42)

A student/ECS child with a severe emotional/behavioural disorder is one who:

 displays chronic, extreme and pervasive behaviours and requires close and constant adult supervision, high levels of structure, and other intensive support services in order to function in an educational setting. The behaviours significantly interfere with both the learning and safety of the student/ECS child and other students/ECS children. For example, the student/ECS child could be dangerously aggressive and destructive (to self and/or others), violent, extremely compulsive; withdrawn, delusional, paranoid; and

<sup>&</sup>lt;sup>7</sup> American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

- (for Grades 1–12 students) has a diagnosis such as: conduct disorder, schizophrenia, bi-polar disorder, severe chronic depressive disorder, obsessive/compulsive disorders, trauma and stressor-related disorders, feeding and/or eating disorders, and may display self-stimulation or self-injurious behaviour. In the most extreme and pervasive instances, severe oppositional defiant disorder may be included under this code; <sup>8</sup> or
- (for ECS children) has either a diagnosis or a statement by a qualified professional indicating that the child experiences severe behavioural difficulties

A clinical diagnosis of a severe emotional/behavioural disorder by a psychiatrist, registered psychologist, or a developmental pediatrician is required, in addition to extensive documentation of the quality, nature, frequency and severity of the disorder by school authorities.

In the case of ECS children who are not currently placed in an educational environment, extensive documentation of the nature, frequency, and severity of the disorder by the referring specialist may provide sufficient documentation. Where the professional is unable to provide a diagnosis, the school authority should maintain records of the nature of the behaviour exhibited by the child. The effects of the disability on the student's/ECS child's functioning in an educational setting should be described.

An ongoing treatment plan/behaviour plan should be available and efforts should be made to ensure that the student/ECS child has access to appropriate mental health and therapeutic services.

Students diagnosed with a primary diagnosis of attention-deficit/hyperactivity disorder (ADHD), or attention deficit disorder (ADD) are not included in this category.

Note: Students/ECS children diagnosed with fetal alcohol spectrum disorder (FASD) should be reported under Code 44 rather than Code 42.

#### SEVERE MULTIPLE DISABILITY (Code 43)

A student/ECS child with multiple disabilities is one who:

- has two or more non-associated moderate to severe cognitive and/or physical disabilities that, in combination, result in the student functioning at a severe to profound level; and
- requires significant special programming, resources and/or therapeutic services.

Students/ECS children with a severe disability and another associated disability should be identified under the category of the primary severe disability.

<sup>&</sup>lt;sup>8</sup> American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

The following mild or moderate disabilities cannot be used in combination with other disabilities to qualify under Code 43:

- a) attention deficit/hyperactivity disorder (ADHD) (ECS to Grade 12)
- b) emotional/behavioural disabilities (ECS to Grade 12)
- c) learning disability (LD) (Grades 1 to 12 only)
- d) speech and language-related disabilities (ECS to Grade 12)

#### SEVERE PHYSICAL OR MEDICAL DISABILITY (Code 44)

#### UPDATE

A student/ECS child with a severe physical, medical or neurological disability, including autism spectrum disorder and fetal alcohol spectrum disorder, is one who:

- has a medical diagnosis of a physical disability, specific neurological disorder or medical condition which creates a significant impact on the student's/ECS child's ability to function in the school environment (Note: some physical or medical disabilities have little or no impact upon the student's/ECS child's ability to function in the school environment); and
- requires extensive adult assistance and modifications to the learning environment in order to benefit from schooling.

#### Autism Spectrum Disorder (ASD)

A student/ECS child with severe autism spectrum disorder may be included in this category. Individuals with a well-established DSM-IV diagnosis of autistic disorder, Asperger's disorder, or pervasive developmental disorder not otherwise specified would also be included in this category.<sup>9</sup> A clinical diagnosis by a psychiatrist, registered psychologist, or medical professional specializing in the field of autism spectrum disorder is required.

For more information on the coding criteria for autism spectrum disorder please see the *Handbook for the Identification and Review of Students with Severe Disabilities* 2014/2015.

#### Fetal Alcohol Spectrum Disorder (FASD)

A student/ECS child with fetal alcohol spectrum disorder (FASD) may have fetal alcohol syndrome (FAS) or alcohol-related neurodevelopmental disorder (ARND) and may be included in this category. A clinical diagnosis by a multidisciplinary diagnostic team is recommended. Students/ECS children diagnosed with FASD who exhibit significant impairment in the areas of social functioning, life skills, behaviour, learning, attention and concentration will require extensive intervention and support.

For more information on coding criteria for fetal alcohol spectrum disorder please see the Handbook for the Identification and Review of Students with Severe Disabilities 2014/2015.

Note: ECS children diagnosed with Down syndrome in the most severe cases should be reported under Severe Multiple Disability (Code 43).

<sup>&</sup>lt;sup>9</sup> American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

#### DEAFNESS (Code 45)

A student/ECS child with a severe to profound hearing loss is one who:

- according to one of the more commonly used classification systems, has a hearing loss of 71 decibels (dB) or more unaided in the better ear over the normal speech range (500 to 4000 Hz) that interferes with the use of oral language as the primary form of communication, or has a cochlear implant preceded by a 71 dB hearing loss unaided in the better ear; <sup>10</sup> and
- requires extensive modifications and specialized educational supports; and
- has a diagnosis by a clinical or educational audiologist.

Note: New requests for approvals for Program Unit Funding or Severe Disabilities Funding in private or charter schools require an audiogram within the past three years.

#### BLINDNESS (Code 46)

A student/ECS child with severe vision impairment is one who:

- has corrected vision so limited that it is inadequate for most or all instructional situations, and information must be presented through other means; and
- has a visual acuity ranging from 6/60 (20/200) in the better eye after correction, to having no usable vision or a field of vision reduced to an angle of 20 degrees.

For those students/ECS children who may be difficult to assess (e.g., cortical blindness– developmentally delayed), a functional visual assessment by a qualified specialist in the field of vision or a medical professional may be sufficient to support eligibility.

#### UPDATE SEVERE DELAY INVOLVING LANGUAGE (Code 47) – For ECS children only.

A child with a severe delay involving language is one who has difficulty communicating with peers and/or adults because of a **severe delay in expressive, receptive or total language.** 

The following characteristics are used to determine eligibility in this category:

- a) The child displays a severe delay in expressive, receptive or total language; OR
- b) The child displays a severe speech sound delay/disorder (phonological, articulation, fluency) AND at least a moderate expressive, receptive or total language delay; OR
- c) The child displays at least a moderate to severe expressive, receptive or total language delay **AND** at least a moderate delay in one or more of the following areas of development: fine motor, gross motor, vision, hearing.

A severe delay involving language is assessed by a speech-language pathologist (SLP). A SLP may use a combination of standardized assessment tools, parent

<sup>&</sup>lt;sup>10</sup> Canadian Academy of Audiology. Retrieved in 2014 from: <u>http://www.canadianaudiology.ca/consumer/degree-of-hearing-loss.html</u>.

completed checklists and/or observational measures by a qualified professional to determine eligibility.

NOTE: If the severe delay involving language is a result of a primary disability, assign the code for the primary disability to the child's registration (e.g. a child diagnosed with autism spectrum disorder should be assigned code 44).