Determining Eligibility

Marie A. Lynch
Rhode Island College, mlynch@ric.edu

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Determining Eligibility:
Utility of School & Private Special Education Evaluations

Marie A. Lynch
Rhode Island College
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Running Head: Determining Eligibility

Marie A. Lynch, Ph.D.
Assistant Professor of Special Education
Rhode Island College
600 Mount Pleasant Avenue
Providence, RI 02908-1991
401-456-8763
mlynch@ric.edu
Abstract

This investigation examined the relationship between school-based evaluations and private-agency educational evaluation (IEEs) written reports regarding the identification of children with specific learning disabilities (SLD). Analyses included determining the level of agreement between evaluations, and the procedures used to evaluate the special educational needs of the students assessed. Satisfactory agreement between evaluations was found when a broader spectrum of disability categories was compared, while less agreement was indicated when identifying SLD. The private agency used almost twice as many assessment tools than school-based evaluators to determine eligibility. The need for definitive assessment criteria, and the importance of collaboration among evaluators to enhance student achievement and family understanding of need were noted as implications. The utility of evaluation reports for school-based practitioners as they determine eligibility for special education services, which affects educational programs/interventions designed to support children/adolescents in school, was viewed as additional implications of the study.

About the Author:

Marie A. Lynch, Ph.D., is an Assistant Professor of Special Education at Rhode Island College. Her research interests center on the identification of learning-based and other disabilities, effective practices to better include students with disabilities in mathematics classrooms, and the actions of language brokers (children/adolescents) who translate/interpret for their non-English speaking parents.
Nationally, the issues of identification, eligibility, and implementation of special education services have been growing concerns to schools trying to best serve all students (Stuebing, Fletcher, LeDoux, Lyon, Shaywitz, & Shaywitz, 2002; Yell, 1998; Ysseldyke & Marston, 1999). The utilization of appropriate criteria for identifying children with special needs is one of the prevailing issues affecting currently special education (Graham, 2005; Hehir, 2005; National Research Council [NRC], 2002; President’s Commission on Excellence in Special Education [President’s Commission], 2002). The issues have raised significant concerns about how to create a more accurate system of disability determination that results in special education eligibility when warranted, appropriate decision-making about necessary services, and improved outcomes for students in schools.

Various researchers contend that stricter federal and state eligibility parameters are necessary in order to help identify students with the most significant educational need (NRC, 2002; President’s Commission, 2002). These researchers also suggest that by improving the identification and eligibility process, schools could lessen academic and behavioral problems for students throughout their school careers.

Over the last twenty years, there has been a significant rise in the number of students served in special education (NRC, 2002; President’s Commission, 2002). “More than 1 in 10 students is now identified for special education services: in the past decade alone, there has been a 35% increase in the number of children served under the Individuals with Disabilities Act” (NRC, 2002, p2).

The process under which students are determined eligible in schools is guided by federal regulations. IDEA states that a student must have a suspected disability that adversely affects their achievement in school, which warrants special education services (Garda, 2006; IDEA 34
C.F.R. §300.502). Moreover, determining eligibility under the federal law means that school based or other evaluators must identify one of 13 disability categories that affect a student’s educational performance in school. (Garda, 2006; IDEA 34 C.F.R. §300.502; Zirkel, 2009).

The federal categorical system has two distinct disability groups: high-incidence (those that occur most frequently) and low-incidence (those that occur least frequently). It has long been thought that low-incidence types (e.g., visual or hearing impairments) of disabilities are more readily quantifiable (e.g. objectively measured) and thus easier to identify (Ysseldyke & Marston, 1999). In contrast, however, the high-incidence disability categories, (e.g. emotional disturbance, specific learning disabilities) are more challenging to define, evaluate and ultimately identify (Ysseldyke & Marston, 1999).

Yet, the high-incidence group represents the largest number of students served under special education in the country (NRC, 2002). As can be expected, this presents significant challenges that ultimately affect the potential educational programs/interventions designed to support children/adolescents in school (NRC, 2002; President’s Commission, 2002). Perhaps, understanding the nature and needs of two of the most controversial high incidence disabilities: (emotional disturbance [ED] and specific learning disabilities [SLD]) may help illuminate this issue further.

Kauffman (2004) and others suggest that defining and identifying ED is problematic because of the numerous ways children and adolescents can demonstrate social/emotional/behavioral challenges (Gresham, 2005; Lopes, 2005). Preventive measures are often sought in schools as well, which may not be helpful or realistic for students with organic emotional or behavioral disorders (Kauffman, 2004). Researchers have long surmised that many of these students may go without support that’s needed because ED does not impact their
achievement or exists with other disabling conditions and is not considered primary (Kauffman, 2004; Gresham, 2005; Lopes, 2005).

Similarly, Kavale & Forness (2000) point out that clearer definitions of SLD have been difficult because of failure “to provide significant insight into the nature of the condition” and that the “descriptions and relationships are vague, and no explicit conceptualization [of SLD] emerges” (p240). Despite this difficulty in identification, however, there has been a significant increase in the number of students identified with SLD, deeming it one of the fastest growing categories since 1976 (NRC, 2002; President’s Commission, 2002; Ysseldyke & Marston, 1999). In fact, close to three million children/adolescents are or have been labeled with a “specific learning disability” which represents 44-50% of those who utilize special educational services in schools (Cortiella, 2009; NRC, 2002; President’s Commission, 2002). This dramatic increase has suggested the potential for under and over-identification of children with SLD nationwide (Bradley, Danielson, & Hallahan, 2002; Cortiella, 2009; NRC, 2002; Ysseldyke & Marston, 1999).

There has been much discussion about the under- or over-identification of students labeled as ED or SLD in school that is worth further study (Cortiella, 2009; Gresham, 2005). However, for the purposes of this paper, how students are evaluated, identified with SLD, and determined eligible for special education services will be the focus. This is critical due to the vast number of students served under this label, as school practitioners intervene in learning based issues that affect children/adolescents’ performance in school.

Evaluation Procedures

The complex process of determining eligibility requires a formal psycho-educational evaluation, derived from numerous assessment instruments, of a student’s present level of
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performance. Federal regulations define evaluation as the “procedures used to determine whether a child has a disability and the nature and extent of the special education and related services that the child needs” (IDEA Regulations, § 300.500 (2)). Assessment refers to the “tools and strategies (that) are used to gather relevant functional and developmental information about the child, including information provided by the parent, and information related to enabling the child to progress in the general education curriculum (or for a preschool child, to participate in appropriate activities)” (IDEA Regulations, § 300.530 (b)).

Public Law 94-142, renamed the Individuals with Disabilities Education Act (IDEA) of 1990, has mandated “protection in evaluation procedures” (PEP procedures). PEP requires schools to use fair tests that are valid measures of educational need, and employ individuals who can appropriately interpret test results (Martin, 1999; Yell, 1998). Schools must test students in their native languages, and assess students in all areas of a suspected disability. The PEP procedures also state, that “no single procedure can be used as the sole criterion for determining the presence of a disability, the student’s program, or placement” (IDEA Regulations, 34 C.F.R.§ 300.530 p.12456; Martin, 1999; Yell, 1998).

In order to begin to investigate school-based problems for children/adolescents, an initial screening or pre-referral process is suggested prior to a formal evaluation. This is done to determine whether a student’s performance differs markedly from their peers, and thus warrants further assessment (Friend & Bursuck, 2002; Yell, 1998). Informally, this may start with observations, interviews, a review of classroom assessments and student work (Friend & Bursuck, 2002; Yell, 1998). This process may also involve determining if a student’s hearing, vision, or overall health is not a primary cause of the learning problems in school (Overton, 2003). Many schools have also recently embarked on a Response-to-Intervention (RTI) tiered
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approach, whereby various academic and/or behavioral interventions may be implemented before formal referral to a special education evaluation is initiated, especially in light of the latest IDEA revisions (Fuchs & Fuchs, 2003; Gresham, 2005; IDEA, 2006).

When additional study is justified and parental consent is granted, a formal evaluation may take place to determine whether the student has a disability, the nature and extent of this disability, and whether the student is eligible for special education services (Garda, 2006; Turnbull, 1993; Yell, 1998). Upon written consent by the parent or guardian, evaluative procedures can be initiated by a school’s Teacher Assistance Team (TAT), (Papalia-Berardi & Hall, 2007), or a pre-referral intervention team (Cohen & Spenciner, 2003; IDEA Regulations, § 300.533; Lane, Pierson, & Roberston, 2004; Overton, 2003; Pierangelo & Giuliani, 2002; Yell, 1998). This team often consists of a general educator, a teacher or specialist in the area of the suspected disability, school psychologist or person qualified to administer diagnostic tests, parent/guardian, and the student if they are at least 14 years-old (IDEA Regulations, § 300.540; Yell, 1998).

A formal psycho-educational evaluation regarding SLD often includes psychological, achievement, speech and language tests, and a home assessment. Formal assessments include norm-referenced tests that are commonly used to help determine the presence of a disability, such as the Weschler Intelligence Scale for Children-III (1991), the Woodcock-Johnson III Tests of Achievement (2001), and the Test of Language Development (1997). These are designed to assess overall cognitive abilities, current levels of achievement in various content strands, and to help identify strengths and weaknesses in language development, respectively (Wechler, 1991; Woodcock, McGrew & Mather, 2001; Hammil & Newcomer, 1997). Informal assessments can include observations and interviews with the student and their families (Cohen & Spenciner,
After the assessments have been completed, a team must consider the data compared to the criteria that is set forth under federal and state special education law. This involves identifying certain criteria to determine the existence of SLD, often coupled with the completion of a formal written evaluation report (Cohen & Spenciner, 2003; Overton, 2003; Pierangelo & Giuliani, 2002; Yell, 1998).

As stated in the Federal and State law, the criteria for this determination includes

(a) A Team may determine that a child has a specific learning disability if—

1) The child does not achieve commensurate with his or her age and ability levels in one or more areas listed in paragraph (a)(2) of this section, if provided with learning experiences appropriate for the child’s age and ability levels; and.

2) The Team finds that a child has a severe discrepancy between achievement and intellectual ability in one or more areas:

   (i) oral expression.
   (ii) listening comprehension.
   (iii) written expression.
   (iv) basic skill reading.
   (v) reading comprehension.
   (vi) mathematics calculation.
   (vii) mathematics reasoning.

(b) The team may not identify a child as having a specific learning disability if the severe discrepancy between ability and achievement is primarily the result of—

   1) visual, hearing, or motor impairment
   2) mental retardation
3) emotional disturbance

4) environmental, cultural, or economic disadvantage.

(IDEA Regulations, § 300.541; Rhode Island Board of Regents for Elementary and Secondary Education Regulations §300.541, p78.)

It must be noted that the reauthorization of IDEA (2004), has offered states new options regarding SLD identification. States now have choice about using the severe discrepancy measure and can employ a problem-solving approach instead, such as Response-to-Intervention (RTI), to counter issues of over-referral, over-identification, and subsequent over-reliance on special education as a means for meeting students’ learning needs (Cortiella, 2009; Fuchs & Fuchs, 2003; IDEA Regulations, § 300.541).

Families have had additional evaluation rights since the inception of the All Handicapped Children’s Act of 1975, to seek a private educational evaluation (IEE) at public expense (Etscheidt, 2003; Imber, 2004; IDEA 34 C.F.R. §300.502; Zirkel, 2009). This procedural safeguard is provided to families when there is a justifiable disagreement with the school’s evaluations (IDEA 34 C.F.R. §300.502; RI Board of Regents §300.502; Yell, 1998; Zirkel, 2009). Families can, however, seek a second opinion or an IEE on their own if they so choose. In either instance, schools must consider the results of an IEE when they determine the appropriate educational placement for students with disabilities (IDEA 34 C.F.R. 300.502[c][1]). Despite whether or not schools pay for these IEEs, they are obligated to consider them as they plan for students’ needs.

An IEE is defined as “an evaluation conducted by a qualified examiner who is not employed by the public agency responsible for the education of the child in question” (IDEA 34
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C.F.R. §300.502[3][i], p.12448). The qualified examiner must meet the same criteria that the school employs when executing an evaluation (IDEA 34 C.F.R. §300.502[e][1]).

Challenges with Evaluation Procedures

Although having the right to an IEE seems appropriate and just, there are several potential conflicts for schools, families, and private evaluators that arise from this procedural safeguard. First, schools must determine whether a student has a disability that negatively impacts achievement in school in order to determine eligibility for special education services (Cohen & Spenciner, 2003; Overton, 2003; Pierangelo & Giuliani, 2002). The private evaluator does not have to fulfill this obligation.

Second, IEEs are offered at both profit and non-profit organizations such as private psycho-educational agencies, hospitals, and universities. There is little information about the average national costs of IEEs at these agencies, and who is/is not qualified to do them. In some cases, schools bear a considerable financial burden because they must complete an initial evaluation and then incur substantial costs for an IEE when a parent successfully disputes the school’s evaluation (Estsheidt, 2003).

Third, there are assumptions that families might seek an IEE to “buy” an SLD diagnosis that would allow for extended time on high-stakes tests (e.g. college entrance exams) or to receive academic accommodations in post-secondary settings. Given the rise in students requesting test-based accommodations, there is speculation about the documentation used to request such need (Brinckerhoff & Banjerjee, 2007). Others theorize too, that “Many postsecondary students who request academic accommodations for learning disabilities are subsequently found not to have a documentable disability. Some of these students show a discrepancy between their intellectual ability and their achievement aspirations (i.e., a "yearning
disability") rather than discrepancy between their ability and their achievement (i.e., a learning disability)”, (Stewart, 1994, p11).

Finally, there is a lack of empirical research about the relationship between school-based evaluations and private agency IEEs and how well or similarly they assess the same students. Currently, no data exists about the relationship between school and private agency evaluations and the assessment processes used by each organization to identify students with SLD, which help determine their eligibility for special educational services in schools. Thus, we do not know how the assessment approaches employed by school districts and private evaluators of the same students compare to one another, and how much, if any, agreement exists between these two evaluations.

Of particular significance is the fact that schools need to consider both evaluations in their decision-making and educational planning for students considered eligible for special education services. This is coupled with inconsistencies across districts and states that results in some students being eligible and others not, despite the need for special services (Reschly, Hosp, & Schmied, 2003). This has resulted in very different percentage patterns nationally and statewide of who is and is not SLD (Center for Special Education Finance, 2002; NRC, 2002; President’s Commission, 2002; Reschly, et al., 2003; Stuebing et al., 2002). These data suggest that students are more likely to be identified as having SLD in some cities, towns, or states than in others (Center for Special Education Finance, 2002; NRC, 2002; President’s Commission, 2002; Reschly et al., 2003).

Thus, this study analyzed archival data from 1999-2004 collected by a private evaluation agency in Southern New England. This agency evaluated students from Rhode Island and Massachusetts. It must be noted that during the time of this investigation, Rhode Island (21%)
and Massachusetts (18%), had the highest national percentage of students served in special education programs in the country (Rhode Island KIDS COUNT, 2005). Conversely, in 2001-2002 the Office of Special Education Programs estimated that the national average of special education enrollment was 12%, (US Department of Education, 2002, June 5).

Moreover, SLD students comprised approximately 50% of the national, Rhode Island, and Massachusetts’ populations at that time as well (Cortiella, 2009; Rhode Island KIDS COUNT, 2005). It seemed necessary to gather information about how private agency IEEs and school-based evaluations compared to determine how, if at all, they contribute to this ongoing challenge of SLD identification and eligibility determination. Numerous questions arose regarding the efficacy and appropriateness of school and private agency evaluations and whether one or the other better identifies student needs leading to better outcomes. This investigation sought to answer some questions to provide more definitive information about how to improve the evaluation processes for schools, students, families, and private evaluators. The primary questions investigated were:

1) What are the stated reasons for the evaluation referrals?

2) What procedures does each employ to arrive at SLD identification, and how do they differ from one another if at all?

3) How much agreement exists between these two evaluations in terms of disability identification that help determine special educational eligibility?

Method

This study involved a review of archival data from 1999-2004 collected by a private agency not affiliated with a school system. It must be noted that the author was not
professionally affiliated with this agency, but was aware of their evaluations through school-based employment. The private agency offers fee-for-service, insured-reimbursements, and pro bono psycho-educational evaluations for families from Southern New England. Statistical analyses were employed to assess the decisions that school districts and the private agency made to identify students with learning disabilities specifically, and/or any disability generally. Procedures used in the evaluations were also analyzed.

Data Collection

Fifty private agency files, representing various Southern New England school systems, were reviewed from July 2004-January 2005, and thus coincided with IDEA 1997. Purposive sampling was used to choose agency files that contained both the private agency and school-based psycho-educational evaluations of the same students in order to compare them quantitatively. Fifty case files, which included the review of numerous test protocols, interviews, and background information, were considered statistically for this investigation. The private agency maintains thousands of files, up to seven years, which made comparisons quite possible.

Data were quantitatively assessed by Cohen’s (1960) Kappa Coefficient of Agreement to measure the statistical significance of the level of agreement between the private agency and school-based evaluation raters in terms of disability identification. The raters in this case were the school evaluator(s) and the private agency evaluator(s). To check the level of inter-rater reliability for the agreement conducted, an additional coder coded 10% of the data considered. A small random sample of the data was assessed by a second coder to seek agreement of at least .70 between raters as noted as acceptable in the literature (Denzin & Lincoln, 2000; Krippendorf, 1980).
The procedural processes used by both schools and the private agency were analyzed with the paired *t*-test measure. An index was created of the assessments used by the school and the private agency to compare the results of the two reports, and should indicate significance at least at the <.05 level (Hopkins, Hopkins, & Glass, 1996).

**Data Analyses**

Case files offered descriptive data from both of the school and private agency evaluations. Initially, the ‘face sheet’ in the private agency file determined which files were considered. The ‘face sheet’ offered demographic information such as gender, family address (e.g. urban or suburban), school (e.g. public or private), grade, method of payment, and referral source. The intake form also included the ‘referral reason’ with comments like ‘testing’, not doing well in school’, ‘SLD testing’, ‘dyslexia?’, ‘not working up to his potential’, and ‘reading comprehension issues’ which helped identify which files to use. Files were not considered if they included words such as ‘counseling’, because this indicated that a psycho-educational evaluation was not being sought. Observations, background information, teacher reports, and school policies regarding the evaluations were also reviewed when such additional documents were available.

Each case was read through once before data were collected. Successive readings occurred to identify key words or phrases that were common descriptions of student’s historical learning problems, overall assessment performance, and included interpretive statements that did or did not indicate the presence of a specific disability. For example, in order to name the criteria used to identify specific learning disability, the words used to describe ‘SLD’ and those used to describe ‘no SLD’ for students were examined. Based on general evaluative practices and legal requirements, the severe discrepancy measurement has been used as an indicator of a
learning disability by school district personnel and is considered by the agency. Phrases such as “a severe discrepancy exists” or “a severe discrepancy does not exist” were noted in the evaluations. This was then compared with the overall decision to label a student with or without a learning disability.

Other language in these reports indicated the presence of some type of learning disability or are viewed as synonymous SLD terms in the literature are “reading disability”, “dyslexia”, “non-verbal learning disability”, “language-based learning disability”, “dysgraphia, and/or dyscalculia”, were also coded (Catts & Kamhi, 1999; Cortiella, 2009; Lyon, 1994; Lyon & Moats, 1993; Sternberg & Grigorenko, 1999). These terms coupled with such phrases as “not performing comparable to peers” or “below grade level achievement” indicated the likelihood that the student had a learning disability that impacted their achievement in school.

Conversely, terms described in these evaluations that suggested that no learning disability existed were “achieving comparable to peers”, “despite some limitations, performance is not negatively impacted”, and/or “no need for academic support”. Generally, there was no description of any type of disorder or disability found within the report.

Results

Descriptive Analyses

The gender of the students whose files were reviewed was predominantly male (80%, n=40). The grade of the students studied ranged from K to 11, and their ages ranged from 5.7 to 17.0. Children in grades K-8 (94%) between the ages 5-12 (80%) made up the majority of the cases reviewed.
Twenty-eight percent of the files had urban family addresses, while 72% were suburban. Families who resided in Rhode Island made up 64% of the cases, while 36% lived in Massachusetts. Similarly, 24% of the schools were located in urban areas, and 76% were suburban. These schools were identified as either public (62%) or private (38%).

Public schools do not require direct payment for psycho-educational evaluations. They are assumed to be a taxpayer expense. Numerous district professionals are often involved in conducting evaluations in schools to determine the presence of SLD or any disability. For instance, a school psychologist administers cognitive assessments, a diagnostic or special education teacher conducts achievement testing, and the general education teacher may complete observations, surveys, and/or questionnaires about student performance. If a language-based problem is suspected, the speech/language pathologist may do additional testing. Younger students may also require an occupational and/or physical therapy assessment as part of their overall evaluation.

Payment is required for an evaluation conducted at the private agency, with an approximate cost of $1800. The psychological portion of the evaluation is often reimbursable by private insurance plans, which represent almost half of the total cost. Eighty-six percent of the cases reviewed were either designated as 42% self-pay or 44% private insurance paid. Ten percent of the evaluations were paid for by a school when a family sought an IEE at public expense, and 4% were paid for by the state Medicaid program. No pro bono services were noted.

The standard format of formal psycho-educational reports includes a section called “Reason for Referral”. This was often one of the first paragraphs in the school or private agency evaluations. Although reasons for referral varied, they often contained similar phrases such as “poor academic performance”, “not achieving academic potential”, “not achieving comparable to
peers”, and/or “below grade level achievement”. Some families also sought second opinions. This information was also included in the referral section. Table 1. indicates the referral reasons and the general academic, affective, or cognitive concerns to be evaluated.

Data are shown as percentages of the 50 observations completed. Fifty-eight percent of the cases reviewed stated the need to update or clarify information as the main focus of the referral to the agency. Sixteen percent indicated dissatisfaction with the school evaluation, or the need for a second opinion as the referral reason. Either a school or another party recommended an additional evaluation in 20% of the files reviewed. In 6% of the cases, it was difficult to determine the reason for the IEE referral because it was not clearly stated.

Table 1.

Referral Reason & Overall Concern

<table>
<thead>
<tr>
<th>Units of Analyses</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reason</strong></td>
<td></td>
</tr>
<tr>
<td>Dissatisfied with school evaluation</td>
<td>4</td>
</tr>
<tr>
<td>Seeking 2nd opinion</td>
<td>12</td>
</tr>
<tr>
<td>School recommendation</td>
<td>8</td>
</tr>
<tr>
<td>Updating/Clarifying Information</td>
<td>58</td>
</tr>
<tr>
<td>Other Recommendation</td>
<td>12</td>
</tr>
<tr>
<td>Not stated</td>
<td>6</td>
</tr>
<tr>
<td><strong>Academic concerns</strong></td>
<td></td>
</tr>
<tr>
<td>Reading</td>
<td>4</td>
</tr>
<tr>
<td>Writing</td>
<td>10</td>
</tr>
<tr>
<td>Math</td>
<td>14</td>
</tr>
<tr>
<td>Reading/Writing Combined</td>
<td>38</td>
</tr>
<tr>
<td><strong>Affective concerns</strong></td>
<td></td>
</tr>
<tr>
<td>Organization</td>
<td>24</td>
</tr>
<tr>
<td>Attention/distractibility</td>
<td>44</td>
</tr>
<tr>
<td>Social Skills</td>
<td>8</td>
</tr>
<tr>
<td>Task Completion</td>
<td>16</td>
</tr>
<tr>
<td><strong>Cognitive concerns</strong></td>
<td></td>
</tr>
<tr>
<td>Cognitive processes</td>
<td>20</td>
</tr>
<tr>
<td>Expressive/Receptive</td>
<td>8</td>
</tr>
<tr>
<td>Memory</td>
<td>6</td>
</tr>
</tbody>
</table>
The overall concern suggested in either the school or private agency evaluations is also shown in Table 1. These were categorized as academic (what students learn), affective (how they act), or cognitive (how they learn). Although some files listed multiple learning problems, it was difficult to determine the priority issue(s), so percents will exceed 100 in this review. This made cross comparisons difficult.

Academic issues included reading, writing, and mathematics. These areas were not elaborated on in the referral section. Reading and writing were stated together as the overall concern in 38% of the cases, while an additional 14% listed these as separate academic concerns. Math made up 14% of the concerns listed.

Organization, attention or distractibility, social skills, and task completion were noted as affective problems. Attention or distractibility were listed as the highest concern at 44%. Organization made up 24% of the concerns. Task completion and social skills were listed as 16% and 8% of the concerns, respectively.

Cognitive descriptors included information processing, expressive/receptive language skills, and memory. Processing issues were identified in 20% of the case files, expressive/receptive language represented 8% and memory 6% of the concerns noted.

Data were collected regarding how the client was referred for an evaluation to the school or independent agency, and results are listed in Table 2. Teachers referred almost twice as many students for the school evaluations (22%) when compared to the private agency evaluations (12%). In 36% of the school cases parents were the referral source, and parents referred 44% of the private agency cases. A significant difference was found between school and agency when comparing professional referrals, (e.g., physician, psychologist): 2% of the school referrals were made by outside professionals and 34% of the agency referrals were from outside professionals.
The school cases also indicated other referral sources such as re-evaluation (2%), early intervention (8%), IEE (2%), with a large number (28%) not clearly stated in the school reports.

Table 2. 
*Referral Source*

<table>
<thead>
<tr>
<th>Units of Analyses</th>
<th>School</th>
<th>Private Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher</td>
<td>22</td>
<td>12</td>
</tr>
<tr>
<td>Parent</td>
<td>36</td>
<td>44</td>
</tr>
<tr>
<td>Friend</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>Physician/Psychologist</td>
<td>2</td>
<td>34</td>
</tr>
<tr>
<td>Re-evaluation</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Early Intervention</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>Other IEE</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Not Stated</td>
<td>28</td>
<td>0</td>
</tr>
</tbody>
</table>

*Statistical Analyses*

The level of agreement between the school and private agency evaluators was determined by a statistical analysis that used Cohen’s Kappa Coefficient of Agreement as the measure of inter-rater reliability. From 50 cases, agreement was reached in 38 (76%) of the cases. The value of Cohen’s kappa was .52 (less than the commonly applied criteria of .70), which indicated unsatisfactory inter-rater reliability among evaluators.

Another analysis compared the level of agreement between school and the private agency regarding disability, without specifically identifying SLD. This was done because it appeared that both the school and the private agency identified some problem (e.g. Speech/Language, Attention Deficit Disorder), which was affecting the student’s achievement in school. Agreement was reached in 47 (94%) of these cases. The value of Cohen’s kappa increased to .88, which indicated satisfactory inter-rater reliability among evaluators.
Additionally, 10% of the cases (n=5) were reviewed by another rater to assess inter-rater reliability with respect to levels of agreement. Agreement was reached in .80 of the cases reviewed, indicating a satisfactory level of reliability.

A paired t-test statistic was generated regarding the procedures followed by both school and private evaluators. This included a comparison of the number of formal (e.g. standardized tests) and informal measures (e.g. observations, interviews) that each evaluator employed.

An index was created of informal and formal measures named by either the school or private agency. For instance, items named that were considered informal were Record Review, Parent and/or Student Interview, Classroom and/or Behavioral Observations (e.g. behaviors noted during testing), and a general (undefined) category called “Informal Evaluation Procedures”. Formal measures were standardized assessments, such as the Weschler Intelligence Scales for Children, Woodcock-Johnson: Tests of Achievement, and other norm-referenced or criterion-referenced tests (e.g., Brigance). The formal measures were categorized into subsections in the agency reports: psychological, achievement, executive functioning, speech/language development, sensory-perceptual, visual/perceptual/motor, and attention/memory processes. Examples of each of the tests used are provided below.

**Informal Measures**

- Review of Records
- Interviews
- Observations
- Children’s Background Form
- Informal Evaluation Procedures

**Formal Measures**

- Psychological
  - Weschler Intelligence Scale for Children
  - Stanford-Binet
  - Woodcock Cognitive
Cognitive Screening
Tower of London
Hooper Visual Organization Test
Denckla Cancellation Tests
Symbol Digit Modalities Test

Achievement
Woodcock-Johnson: Tests of Achievement
Weschler Individual Achievement Tests
Peabody Picture Vocabulary Test
Brigance Oral Reading Paragraphs
Key Math
Test of Written Language
Test of Auditory Perception
Boston Naming Test
Beery Developmental Test of Visual Motor Integration

Executive Functions/Behavioral Assessment
Stroop Color Word Test
Trail Making Test
Clock Drawing Test
Connors Scale
Child Behavior Checklist
Reynolds Adolescent Depression Scale
Revised Children’s Manifest Anxiety Scale
Piers-Harris Children’s Self-Concept Scale
Beck Depression Inventory

Sensory-Perceptual Processes
Reitan-Klove Sensory-Perceptual Examination
Lateral Dominance Examination

Speech/Language
Test of Oral Language
Comprehensive Test of Phonological Processing

Memory Processes
Wide Range Assessment of Memory and Learning

Visual/Perceptual/Motor Functions
Bender Gestalt Test of Visual Motor Integration
Rey Osterrieth Complex Figure Design Test
These standardized tests are frequently used to help determine the presence of a learning disability (Cohen & Spenciner, 2003; Overton, 2003; Pierangelo & Giuliani, 2002). Each of these tests have been found to be reliable and valid indicators of student cognition, achievement, and language development respectively (Cohen & Spenciner, 2003; Overton, 2003; Pierangelo & Giuliani, 2002). Additional informal assessments, such as classroom observations, review of student work, and interviews, can also be considered in the context of school and agency evaluations.

From 50 observations, the agency mean of the number of informal/formal assessments was 16.1 while the school mean was 9.14, \(t(1,49)=8.27, p<.05\). The agency used almost twice as many measures as schools did to determine SLD identification. Despite this contrast, the agency rarely conducted Speech/Language assessments, and only did one in-school observation.

Although not formally analyzed, it was noted that the private agency reports were often longer and more descriptive than school-based evaluations. If school evaluations were of equal or greater length, it was noticed that many of the pages were not text-based, but computer-generated scores of formal measures. In other high-number paginated school evaluations, it was due to many school-based professionals involved, coupled with their respective formal test score pages as well (e.g. Psychologist, Educational assessor, Speech/Language Pathologist, Physical, and/or Occupational Therapists).

Discussion

This study critically analyzed archival data from 1999-2004 that coincided with IDEA 1997 collected by a private evaluation agency not affiliated with a particular school system.
Fifty cases were statistically reviewed that contained both school-based and private agency-based evaluations, to assess the decisions that were made to identify students with SLD.

Of particular significance, is that there was satisfactory agreement (.88) regarding the identification of students with a disability of some kind. This indicates that both school and the private agency were able to describe a problem that was affecting a student’s achievement in school because of some kind of disabling condition. Agreement in this case may point to an evaluation system that reflects the struggles that a student may have with respect to learning, language, and attention. The identification of some disabling condition would deem the student eligible for special education services when coupled with adverse affect on academic performance.

However, there was unsatisfactory agreement (.52) when comparing the identification of SLD more specifically. The lack of agreement may illustrate the difficulty in uniformly naming SLD as a specific problem. It may also suggest that the variation that exists across districts and states is also evident between private agencies and schools.

The assumption that families may seek a private evaluation to “buy” an SLD diagnosis was not confirmed from this research. Data suggested that the majority of the school and agency-based evaluations captured historical academic problems for the students named. Despite the original inquiry of SLD, however, consideration of all disability categories was evident in the reports. It also must be noted that not all of the completed evaluations yielded a disability diagnosis at all.

As indicated, the agency used twice as many assessment instruments as the schools in defining SLD, and appeared to write almost twice the length in the psycho-educational evaluations. School and private agency evaluators need to consider the requirements made on
families to read lengthy reports filled with psycho-educational jargon in these formal written reports. Also, computerized score sheets are often challenging to read, and are not terribly informative.

Often, when a child/adolescent is referred for a special educational evaluation families experience a great deal of grief and/or anxiety about their child’s/adolescent’s learning difficulties. The descriptions included in these reports, however, may or may not provide the relief families seek. It seems important then to summarize the evaluative data in ways that allow families access to understanding the nature of their child’s/adolescent’s needs, and offer concrete strategies to help at home.

Although SLD is assumed to be an organic, life-long problem, the notion of what is and is not a learning disability is diffuse. This lack of specificity is often coupled with numerous and sometimes confusing terms associated with the larger concept of a learning disability. The label of SLD often represents a host of learning issues that are given other names as well, e.g. dyslexia, non-verbal learning disability, written output disorder, dyscalculia. All of these terms are viewed as different kinds of learning problems that fall under the huge umbrella of SLD. Moreover, school and private agency evaluators may have varied levels of expertise and training that contribute to or hinder the evaluative processes regarding this diffuse conceptualization of SLD.

From case analyses of the level of agreement, it appeared that schools viewed the severe discrepancy criteria as the determinant factor in these cases. Although the discrepancy criterion is listed in the regulations as part of the identification of SLD, it is contrary to the Protection in Evaluation Procedures to use a sole criterion for judgment of the presence of any disability.
Fortunately, IDEA (2004) now allows states to consider RTI as a valid approach in their decision-making processes about SLD.

The findings regarding level of agreement suggest different identification procedures and definitional approaches between the agency and schools. There is also ample evidence in the literature that supports the idea that districts often avoid the SLD label in the early primary years (NRC, 2002; President’s Commission, 2002; Stuebing et al., 2002). They often identify students in the later elementary years, such as in grades 3-5, when reading and instruction become more complex in nature. In this study, the agency did not appear to be limited by this notion.

It was not surprising that teachers and parents were the primary referral sources for these evaluations, which represented up to two-thirds of the sources named. Given their intimate knowledge of a specific child/adolescent’s academic and/or affective needs, this points to the importance of these school-based practitioners and family members working together to better intervene and promote worthwhile outcomes.

Limitations of the Study

Although additional questions have arisen from these reports that would suggest further inquiry, interviews or observations of the students profiled were not conducted. Teachers, evaluators, and/or family members were not contacted. The reports were the only source of data used.

The files reviewed may or may not have included all school-based data. Notes from actual team meetings were not part of the agency file. In some instances, school decisions had to be inferred based on data collected and/or written by the agency evaluators. Also, although RTI is now part of IDEA 2004 regulations and school-based decision-making, the data reviewed did not coincide with this legislation.
The complex reasons that prompt families to seek a private evaluation are also not fully known. In some cases, it appeared that families sought multiple evaluations from numerous sources. In other cases, the families decided on an IEE before the school conducted its evaluation.

Comparisons were made of specific files that contain both a school evaluation and an IEE. However, no assumptions can be made about families who chose to seek an outside opinion through an IEE. It should also be noted that these families may not be a representative sample of families receiving special education services in Rhode Island and in southern Massachusetts.

No assumption is made that the private agency is representative of other private agencies. In fact, not all agencies that conduct IEEs are private entities. At the private agency, it is recognized that the psycho-educational evaluations were completed by one of three psychologists and one of two educational assessors.

This investigation was conducted in Southern New England. Some school evaluations were completed in Rhode Island and others were administered in Massachusetts. Numerous school district evaluations were compared to one private evaluation agency. Thus, the results have the potential to point out discrepancies across districts and not within the agency. The totality of the data was considered as it answered the questions posed regarding the level of agreement between evaluations and the procedures used.

**Implications**

This study contributes to the ongoing discussion about how to best identify students’ needs and serve them in schools. Although the identification process is fraught with inconsistencies, students, families, and school-based practitioners need to know whether these
evaluations are comparable, worth the cost, inform instructional practices, and can help design better programs to meet students’ educational needs.

The findings suggest that there are distinct differences in the interpretations of who and who should not be identified as SLD, which suggest further study. For example, the Federal criteria state that a learning disability is a problem with one or more psychological processes that affect language understanding and use, with substantial attention given to exclusionary disabilities. The private agency can and often does consider the possibility of co-morbidity, which presents a complex eligibility dilemma in schools.

Although this investigation did not determine whether or not a student was provided special education services, there are important implications that affect students’ eligibility under the SLD label. Ultimately, the information gathered from this study contributes to the overall discussion about identification procedures and the eligibility of students in special education as well.

Despite the fact that IDEA asks schools to consider IEEs, there is little information available regarding what schools do with this information that warrants additional study. It is unclear how, if at all, schools incorporate the set of recommendations made by the agency into educational planning for students. Potentially, failure to incorporate recommendations could have negative effects on overall instruction, achievement, and assessment needs of students. This could also create confusion for families about what their child/adolescent needs.

Conversely, further investigation is warranted about how agencies can align their very specific diagnoses and recommendations to the realities of classroom and school life. IDEA requires that schools provide “educational benefit” for students with special educational needs.
Private agencies, however, may suggest a host of exemplary recommendations that are not possible in the context of most public or independent schools.

Further, recognition must be given to students and their families for the significant effort made to undergo both evaluations. Students face extensive testing and assessment, potentially affecting their overall classroom participation and creating additional academic problems. There is concern too about how this testing affects students’ perceptions of themselves as learners.

Perhaps, more conversation and cohesion can occur between schools and private agencies that might better help students in school and families at home. This has the potential to contradict the integrity of the private evaluation process. However, the school’s general knowledge of the student coupled with the agency’s specificity of the issues the student faces could create a more appropriate approach in which to identify students with learning-based and other disabilities. Thus, the utility of these psycho-educational evaluations is necessary to consider further as they impact eligibility decisions regarding special education services that primarily affect school-based practitioners and students/families. This ultimately influences the potential educational programs/interventions designed to support children/adolescents and lead to better educational outcomes for them in school.
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