

SECTION ONE

INTERPRETER'S RESPONSIBILITIES

- **QUALIFICATIONS**
 - **TRAINING**
- **AREAS OF RESPONSIBILITY**
 - **CONFIDENTIALITY**
 - **LEGAL ISSUES**

INTRODUCTION

The federal regulations make it very clear how important it is that parents be meaningful partners in helping make decisions about the education for their child with disabilities. One of the places in the federal regulations says, “The public agency shall make reasonable efforts to ensure that the parents understand, and are able to participate in, any group discussions relating to the educational placement of their child, including arranging for an interpreter for parents with deafness, or whose native language is other than English.” 34 CFR §300.501 (c)(5)

The use of an interpreter may be necessary to make sure that the parents are able to effectively communicate with school staff members, and school staff members are able to effectively communicate with parents in all areas of school communications.

An interpreter may be asked to interpret in many situations involving information about students with disabilities. This manual will give basic information about different aspects of special education to give you the background you may need. Before being asked to interpret it would be helpful if the interpreter could conference with school staff members to get as much background information as possible. This would allow the interpreter ample time to consider how certain concepts would be phrased in the parent’s native language prior to the meeting.

QUALIFICATIONS OF AN INTERPRETER

According to the Texas Education Agency, an interpreter should have the following qualifications:

1. Should be bilingual
2. Should be biliterate
3. Should be proficient in both English and the target language
4. Should be able to adjust to different levels of language use (technical, colloquial, etc.)

TRAINING THAT MAY BE NEEDED

Interpreters should be adequately trained. Inadequately prepared interpreters may interpret information inaccurately adding confusion to school/home interactions. According to the 2002-2003 DEC Reference Guide, Part II, S10.1 (a) notes, interpreters:

1. Should be familiar with appropriate educational terms, forms, procedures, techniques, and tests utilized by those with whom they work.
2. Should be familiar with the culture of the school and the culture of the student.
3. Should be familiar with the dynamics and the ethics of interpretation, including maintenance of confidentiality of information and interpreting responses and questions without personal input.

School professionals should be familiar with the skills needed by interpreters and the skills they themselves need to work successfully with interpreters.

AREAS OF RESPONSIBILITIES

Trained interpreters may be needed in various situations involving services to children with disabilities. Some of these situations are:

1. **PARENT CONFERENCES**

Interpreters may be needed for conferences with school personnel.

2. **REFERRAL PROCESS**

Forms must be provided in the native language of the parent or other mode of communication used by the parent. If it is clearly not feasible to do so, an interpreter must be used. Documentation must include the signature of an interpreter, which has been adequately trained.

3. **EVALUATION**

While an interpreter may be needed to assist school staff members in evaluating a child for special education services, this training manual, in itself, was not designed to train interpreters to work with school professionals to administer evaluation instruments.

4. **ADMISSION, REVIEW, DISMISSAL (ARD) MEETINGS**

- Notice sent and, if necessary, contact made by interpreter in native language.
- Careful interpretation of ARD proceedings between parents and school personnel.
- If the child's parent is unable to speak English, the district shall provide the parent with a written or audiotaped copy of the child's individualized educational program translated into Spanish if Spanish is the parent's native language; or if the parent's native language is a language other than Spanish, the district must make a good faith effort to provide the parent with a written or audiotaped copy of the child's individualized education program translated into the parent's native language. (TEC §29.005 (d))

CONFIDENTIALITY

A student's records are private, and districts, with some exceptions, must get parental consent before showing the records to anyone not involved in the student's education. The federal regulations require all persons who have access to confidential student information have training in confidentiality rules and regulations. The federal regulations say, "All persons collecting or using personally identifiable information in public education institutions must receive training on confidentiality requirements." (34 CFR §300.572 (c)) This would certainly include interpreters.

This training manual does not include training in confidentiality, and should be covered by the district with other training materials.

LEGAL ISSUES

In 1975, Congress enacted the Education for All Handicapped Students Act, known as Public Law 94-142. This law guaranteed the educational rights of individuals with disabilities to receive a free appropriate public education (FAPE). In 1990, Congress reauthorized the Act and renamed the federal law the Individuals with Disabilities Education Act (IDEA). In 1997, IDEA was reauthorized. The reauthorized law is referred to as Public Law 105-17.

SECTION TWO

ELIGIBILITY CATEGORIES

- **DEFINITIONS**
- **POSSIBLE STUDENT CHARACTERISTICS**
- **SOME EDUCATIONAL IMPLICATIONS**

ELIGIBILITY CATEGORIES

One of the most important parts of communication with parents can be how their child qualifies for special education services. In Texas there are thirteen (13) different eligibility categories. While you may not be asked to interpret the entire content of the definitions that follow, the vocabulary that is contained in the definitions may arise in meetings. It is not necessary that you be familiar with all eligibility categories at any one meeting. However, when you have a pre-meeting conference with school staff members, you may wish to ask which one or more eligibility categories will be discussed so you may review those prior to the meeting.

In the section for each disability will be found the official definition for Texas, found in the Texas Administrative Code (TAC), as well as the federal definition found in the Code of Federal Regulations (CFR) for your reference. There are also some possible characteristics and some educational implications listed to give you some background information that may be discussed.

AUTISM

DEFINITION:

The Texas definition is, “A student with autism is one who has been determined to meet the criteria for autism as stated in 34 CFR, §300.7(c)(1). Students with pervasive developmental disorders are included under this category. The team's written report of evaluation shall include specific recommendations for behavioral interventions and strategies.” (TAC §89.1040 (c)(1))

The federal definition is, “Autism means a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age 3, that adversely affects a child's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. The term does not apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance, as defined in paragraph (b)(4) of this section. A child who manifests the characteristics of "autism" after age 3 could be diagnosed as having "autism" if the criteria in paragraph (c)(1)(i) of this section are satisfied.” (CFR §300.7(c)(1)(i)(ii))

POSSIBLE CHARACTERISTICS:

- IQ ranges from mentally retarded to gifted
- Communication skills range from nonverbal to verbal, but communication problems are present to varying degrees
- Probable behavior problems
- Lack of interest in others, or interest in unusual aspects (smell, sounds, textures)
- Use of objects in ritualistic fashion and/or in a way other than the object was intended (spinning, dropping)
- Facial unresponsiveness (unable to get child's attention)
- Involvement passively with others but without same goals as others, i.e., running, playing
- Absence of normal social give-and-take between people.
- Uneven patterns of intellectual functioning
- Bizarre speech, intonation or echolalia (repetition of others' words)
- Catastrophic reactions to minor events or changes in the environment or routine
- Underreactions to major events or changes in the environment or routine
- Appearance of an aloof, standoffish manner
- May self-inflict pain or harm

SOME EDUCATIONAL IMPLICATIONS:

- Supply extra opportunity to participate in socially meaningful give-and-take play
- Communicate assurances that people/events in environment are as predictable as possible
- Maintain instruction at concrete level
- Remember the student is literal
- Give additional emphasis to language arts curricula
- Have consistent routine, structure, and implementation of procedures
- Use natural consequences approach to discipline
- Use symbol system (picture or words) for daily events, especially schedule changes
- Promote use of technology
- Use visual/picture cues and/or sign language
- Teach specific social skills

DEAF-BLINDNESS

DEFINITION:

The Texas definition is, “A student with deaf-blindness is one who has been determined to meet the criteria for deaf-blindness as stated in 34 CFR, §300.7(c)(2). In meeting the criteria stated in 34 CFR, §300.7(c)(2), a student with deaf-blindness is one who, based on the evaluations specified in subsections (c)(3) and (c)(12) of this section:

- (A) meets the eligibility criteria for auditory impairment specified in subsection (c)(3) of this section and visual impairment specified in subsection (c)(12) of this section;
- (B) meets the eligibility criteria for a student with a visual impairment and has a suspected hearing loss that cannot be demonstrated conclusively, but a speech/language therapist, a certified speech and language therapist, or a licensed speech language pathologist indicates there is no speech at an age when speech would normally be expected;
- (C) has documented hearing and visual losses that, if considered individually, may not meet the requirements for auditory impairment or visual impairment, but the combination of such losses adversely affects the student's educational performance; or
- (D) has a documented medical diagnosis of a progressive medical condition that will result in concomitant hearing and visual losses that, without special education intervention, will adversely affect the student's educational performance.” (TAC §89.1040 (c)(2))

The federal definition is, “Deaf-blindness means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for children with deafness or children with blindness.” (CFR §300.7(c)(2))

POSSIBLE CHARACTERISTICS:

- Birth-2 years of age experiencing developmental delays in hearing and vision; at risk of substantial developmental delays in hearing and vision if early intervention services are not provided
- Have diagnosed physical or mental condition with high probability of resulting in developmental delays in hearing and vision
- Both deaf and blind with acuities measured or estimated and supported by a description of pathology and adaptive functioning
- Have hearing and visual impairments of a mild to severe degree with additional learning and/or language disabilities which result in the need for special services

- Have been diagnosed with syndromes or as having a degenerative pathology or a disease affecting vision and/or hearing
- Severely multihandicapped due to generalized central nervous system dysfunction, exhibit auditory and visual impairments or deficits in auditory-visual functioning and who may demonstrate inconclusive responses during hearing and/or vision evaluations or inconsistent responses to auditory and/or visual stimuli in the environment

SOME EDUCATIONAL IMPLICATIONS:

- See Auditory Impairment
- See Visual Impairment
- See Multiple Disabilities

AUDITORY IMPAIRMENT

DEFINITION:

The Texas definition is, “A student with an auditory impairment is one who has been determined to meet the criteria for deafness as stated in 34 CFR, §300.7(c)(3), or for hearing impairment as stated in 34 CFR, §300.7(c)(5). The evaluation data reviewed by the multidisciplinary team in connection with the determination of a student's eligibility based on an auditory impairment must include an otological examination performed by an otologist or by a licensed medical doctor, with documentation that an otologist is not reasonably available. An audiological evaluation by a licensed audiologist shall also be conducted. The evaluation data shall include a description of the implications of the hearing loss for the student's hearing in a variety of circumstances with or without recommended amplification.” (TAC §89.1040 (c)(3))

The federal definition is, “Deafness means a hearing impairment that is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, that adversely affects a child's educational performance.” (34 CFR §300.7(c)(3))

“Hearing impairment means an impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance but that is not included under the definition of deafness in this section.” 34 CFR §300.7(c)(5)

POSSIBLE CHARACTERISTICS:

- Difficulty, even with amplification, processing directions given verbally
- Distractibility possibly due to lack of effective auditory filtering system in aids
- Difficulty gauging appropriate social distance
- Speech processing affected (word endings omitted, difficulty with many consonant blends)
- Apparent hyperactivity which may be due to constant visual monitoring of environment, and fluctuations on corrective aid
- Absence of normal social give-and-take between people (or if present, only due to compliance)
- Atypical speech, i.e., intonation, volume
- Preference for solitary or single companion play
- Difficulty relating socially with others
- Slower pace for acquiring learning
- Resistance to wearing aids
- Hearing problems may range from mild to total loss
- Severe communication delays possible
- The student often perceives English as a “foreign language”, especially if the student uses sign language as the main means of communication

- Hearing aids may be used, but do not do the same thing for hearing that glasses do for vision. Adjustment to hearing aids is often much more difficult since hearing aids amplify all sounds, not just speech.

SOME EDUCATIONAL IMPLICATIONS:

- Use oral directions as specified for speech impairment
- Provide extra opportunity for socially meaningful give-and-take play
- Increase emphasis on language arts curricula
- Have consistent routine, structure, and implementation of procedures
- Use visual/picture cues and/or sign language
- Provide opportunity to communicate with peers and adults who sign well and speak well
- Face student when communicating
- Monitor noise levels for some activities
- Support multi-sensory input, i.e., auditory and/or visual cues
- Use concrete approach
- Label classroom
- Promote use of technology

EMOTIONAL DISTURBANCE

DEFINITION:

The Texas definition is, “A student with an emotional disturbance is one who has been determined to meet the criteria for emotional disturbance as stated in 34 CFR, §300.7(c)(4). The written report of evaluation shall include specific recommendations for behavioral supports and interventions.” (TAC §89.1040 (c)(4))

The federal definition is,

- “(i) The term means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance:
 - (A) An inability to learn that cannot be explained by intellectual, sensory, or health factors.
 - (B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.
 - (C) Inappropriate types of behavior or feelings under normal circumstances.
 - (D) A general pervasive mood of unhappiness or depression.
 - (E) A tendency to develop physical symptoms or fears associated with personal or school problems.
- (ii) The term includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance. (34 CFR §300.7(c)(4))

POSSIBLE CHARACTERISTICS:

- Inability to establish or maintain interpersonal relationships with peers, teachers, and family both at home and in the community
- Various behaviors including: aggressiveness, shyness, fearfulness, aloofness, remoteness, or uncooperativeness
- Confused verbalizations, fantasizing not typical of a young child's imagination
- Preoccupation with emotional conflicts in drawings and/or play
- General or chronic mood of unhappiness or depression
- Catastrophic reactions to minor events or changes in the environment or routine
- Physical symptoms or fears associated with personal or school work
- Schizophrenic - thoughts/actions may not be reality based

- Poor impulse control
- Preoccupation with themes
- Attention-getting behavior
- Low self-esteem
- Defiance of authority figures
- Poor conflict resolution
- Low attention span
- Hyperactivity
- Insecurity
- Personal struggle for self control
- Aggressiveness
- Immaturity
- Classroom behaviors may range from silent and withdrawn to dangerous to themselves or others
- Behavior of a student who is ED may resemble that of a student who is socially maladjusted who does not qualify for special education

SOME EDUCATIONAL IMPLICATIONS:

- Use oral directions, including: visuals, such as gestures, pictures; limited abstract phraseology; repetition; close proximity to student when communicating
- Have extra opportunity to participate in socially meaningful give-and-take play
- Promote use of technology
- Have added emphasis to language arts curricula
- Provide consistent routine, structure, and implementation of procedures
- Maintain predictable environment including routine assurances that people/events in environment are as predictable as possible
- Use symbol system (picture or words) for daily events
- Maintain instruction at concrete level
- Use visual/picture cues and/or sign language
- Integrate speech therapist into instructional setting
- Behavior management plans that differ from the regular school rules may be specified

MENTAL RETARDATION

DEFINITION:

The Texas definition is, “A student with mental retardation is one who has been determined to meet the criteria for mental retardation as stated in 34 CFR, §300.7(c)(6). In meeting the criteria stated in 34 CFR, §300.7(c)(6), a student with mental retardation is one who has been determined to be functioning at two or more standard deviations below the mean on individually administered scales of verbal ability, and either performance or nonverbal ability, and who concurrently exhibits deficits in adaptive behavior.” (TAC §89.1040 (c)(5))

The federal definition is, “Mental retardation means significantly subaverage general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, that adversely affects a child's educational performance.
34 CFR §300.7(c)(6)

POSSIBLE CHARACTERISTICS:

- Difficulty in transferring knowledge learned in one setting to another
- Difficulty in articulating needs and wants
- Brief memory retention
- Difficulty in adjusting to change
- Easily distractible
- Impulsive
- Visual perception difficulty
- Immaturity
- Adaptive behavior is tested to ensure the student functions in the mental retarded range in all aspects of his or her life, not just academically
- A student who is mildly mentally retarded may perform similarly in the classroom as a “borderline” student who does not qualify for special education
- It is often difficult to judge degree of intellectual functioning of those students who have multiple impairments
- The larger the degree of mental retardation, the more problems encountered in communication, following directions, retention of all information, etc.

SOME EDUCATIONAL IMPLICATIONS:

- Give extra opportunity to participate in socially meaningful give-and-take play
- Recognize child's need for slower progression and additional time to interact with materials
- Maintain consistent routine, structure, and implementation of procedures
- Promote use of technology
- Use concrete approach

- Utilize individual and group activities
- Give immediate feedback
- Use multi-sensory approach

MULTIPLE DISABILITIES

DEFINITION:

The Texas definition is,

“(A) A student with multiple disabilities is one who has been determined to meet the criteria for multiple disabilities as stated in 34 CFR, §300.7(c)(7). In meeting the criteria stated in 34 CFR, §300.7(c)(7), a student with multiple disabilities is one who has a combination of disabilities defined in this section and who meets all of the following conditions:

(i) the student's disability is expected to continue indefinitely; and

(ii) the disabilities severely impair performance in two or more of the following areas:

(I) psychomotor skills;

(II) self-care skills;

(III) communication;

(IV) social and emotional development; or

(V) cognition.

(B) Students who have more than one of the disabilities defined in this section but who do not meet the criteria in subparagraph (A) of this paragraph shall not be classified or reported as having multiple disabilities.” (TAC §89.1040 (c)(6))

The federal definition is, “Multiple disabilities means concomitant impairments (such as mental retardation-blindness, mental retardation-orthopedic impairment, etc.), the combination of which causes such severe educational needs that they cannot be accommodated in special education programs solely for one of the impairments. The term does not include deaf-blindness.”

34 CFR §300.7(c)(7)

POSSIBLE CHARACTERISTICS:

- Refer to characteristics of disabilities for which the student meets the criteria.

SOME EDUCATIONAL IMPLICATIONS:

Refer to educational implications of disabilities to which the student meets the criteria.

Other possibilities:

- Give extra opportunity to participate in socially meaningful give-and-take play
- Focus instruction on enhancing communication, self-care, socialization, recreation
- Use various communication methods, i.e., sign language, verbalization, symbol systems, augmented communication
- Encourage independence wherever possible, i.e., roll, walk, blink, use wheelchair, swallow, eat, toilet needs, etc.
- Use daily life items
- Modify materials, i.e., larger print, bigger buttons and buttonholes, etc.
- Make appropriate arrangements to accommodate the student's physical needs- catheterization, availability of instructional assistant or nurse, toileting with dignity, i.e., private and as independent as possible
- Have a clear understanding of the medication needs of the student: type of medication, when it is administered, who administers it, its effect on student, etc.
- Use multi-sensory approach
- Label classroom
- Promote use of technology

ORTHOPEDIC IMPAIRMENT

DEFINITION:

The Texas definition is, “A student with an orthopedic impairment is one who has been determined to meet the criteria for orthopedic impairment as stated in 34 CFR, §300.7(c)(8). The multidisciplinary team that collects or reviews evaluation data in connection with the determination of a student's eligibility based on an orthopedic impairment must include a licensed physician.” (TAC §89.1040 (7))

The federal definition is, “Orthopedic impairment means a severe orthopedic impairment that adversely affects a child's educational performance. The term includes impairments caused by congenital anomaly (e.g., clubfoot, absence of some member, etc.), impairments caused by disease (e.g., poliomyelitis, bone tuberculosis, etc.), and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns that cause contractures).”
34 CFR §300.7(c)(8)

POSSIBLE CHARACTERISTICS:

- Poor head control
- Poor ability to use arms and hands: for support, for reaching out, for grasp and manipulation of objects
- Poor balance and control of posture especially in sitting, standing, and walking
- Poor ability to reach out and protect self with hands when falling
- Difficulty with self-help or motor activities
- Difficulty with dressing and toileting skills
- Lack of ability to form words for clear speech in spite of adequate intelligence
- Grimacing or uncontrolled facial movements
- Paralysis or weakness
- Temperature, pain, pressure, loss of feeling
- Loss of feeling of a full bowel or bladder and loss of ability to control these functions
- Poor eating or self-feeding skills: drooling, inability to keep food in mouth or to close mouth, gagging, uncontrolled biting on the spoon, choking, poor chewing, poor tolerance to textured food, poor fingerfeeding or spoon-use skills, poor control of cup

SOME EDUCATIONAL IMPLICATIONS:

- Secure information as to physical activities which should be limited or avoided
- Recruit a peer assistant to help with self-care needs
- Arrange room to ensure student has access to all areas
- Modify tools and equipment to require less pressure, strength, etc.
- Modify routine for personal needs, i.e., braces, walker, crutches, wheelchair, stander, etc.

- Promote independence; refrain from doing anything for the student which he/she can do for him/herself; encourage student to use physical skills to maximum level
- Focus on accomplishments rather than deficits
- Streamline activities and materials to decrease fatigue
- Promote use of technology
- Provide additional rest periods
- Increase parental communication
- Use variety of active experiences

OTHER HEALTH IMPAIRMENT

DEFINITION:

The Texas definition is, “A student with other health impairment is one who has been determined to meet the criteria for other health impairment as stated in 34 CFR, §300.7(c)(9). Students with attention deficit disorder or attention deficit hyperactivity disorder are included under this category. The multidisciplinary team that collects or reviews evaluation data in connection with the determination of a student's eligibility based on other health impairment must include a licensed physician.” (TAC §89.1040 (c)(8))

The federal definition is, “Other health impairment means having limited strength, vitality or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment, that—

- (i) Is due to chronic or acute health problems such as asthma, attention deficit disorder or attention deficit hyperactivity disorder, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, and sickle cell anemia; and
- (ii) Adversely affects a child's educational performance. (34 CFR §300.7(c)(9))

POSSIBLE CHARACTERISTICS:

- Tires easily
- Frequent absences
- Physical ailments, i.e., hearing, blood, lung, or metabolic disorders
- Seizures
- Difficulty with self-help or motor activities
- Difficulty maintaining alertness
- Usually takes medications which may influence performance
- Fluctuating skills
- Timidity

SOME EDUCATIONAL IMPLICATIONS:

- Arrange additional rest periods
- Secure information as to physical activities which should be limited or avoided
- Recruit a peer assistant to help with self-care needs
- Promote use of technology
- Increase parental communication
- Arrange room to ensure child has access to all areas
- Modify tools and equipment to require less pressure, strength, etc.

- Modify routine to adjust for any personal needs, i.e., catheterization, toileting with dignity
- Promote independence, refrain from doing anything for the student which he/she can do for him/herself
- Focus on accomplishments rather than deficits
- Streamline activities and materials to decrease fatigue
- Chronically ill students may attend school only part-time or receive homebound services, as the physical condition will allow.
- Normal pregnancy is not considered a handicapping condition for special education services. A student who is pregnant and experiences medical complications due to that pregnancy is eligible to be served by special education for the duration of those complications.

LEARNING DISABILITY

DEFINITION:

The Texas definition is,

- “(A) A student with a learning disability is one who has been determined by a multidisciplinary team to meet the criteria for specific learning disability as stated in 34 CFR, §300.7(c)(10), and in whom the team has determined whether a severe discrepancy between achievement and intellectual ability exists in accordance with the provisions in 34 CFR, §§300.540-300.543. A severe discrepancy exists when the student's assessed intellectual ability is above the mentally retarded range, but the student's assessed educational achievement in areas specified in 34 CFR, §300.541, is more than one standard deviation below the student's intellectual ability.
- (B) If the multidisciplinary team cannot establish the existence of a severe discrepancy in accordance with subparagraph (A) of this paragraph because of the lack of appropriate evaluation instruments, or if the student does not meet the criteria in subparagraph (A) of this paragraph but the team believes a severe discrepancy exists, the team must document in its written report the areas identified under subparagraph (A) of this paragraph and the basis for determining that the student has a severe discrepancy. The report shall include a statement of the degree of the discrepancy between intellectual ability and achievement.” (TAC §89.1040 (9))

The federal definition is, “Specific learning disability is defined as follows:

- (i) General. The term means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia.
- (ii) Disorders not included. The term does not include learning problems that are primarily the result of visual, hearing, or motor disabilities, of mental retardation, of emotional disturbance, or of environmental, cultural, or economic disadvantage.” (34 CFR §300.7(c)(10))

POSSIBLE CHARACTERISTICS:

- IQ is above the mentally retarded range, ranging from “borderline” to gifted
- There is significant difference between the child’s ability to learn (IQ) and the actual academic performance

- Many students with borderline IQ levels (usually between 70 and 85) will experience major academic problems but not qualify for special education because the academic performance is in line with the IQ, thus not showing a severe difference between the two.
- Learning problems may center in one area only (i.e., math), or may impact multiple academic areas.
- Inability to perform academically solely because of lack of command of the English language does not qualify a student to receive services through special education
- More students in special education have this handicapping condition than any other
- Hyperactivity, unable to control impulses
- Poor coordination
- Difficulty with thinking/memory
- May easily qualify as speech impairment
- Poor eye-hand coordination
- Perceptual-motor difficulties
- Poor attention
- Mood swings

SOME EDUCATIONAL IMPLICATIONS:

- Implement oral directions as for speech impairment
- Use natural consequences approach to discipline
- Provide extra prompting to aid comprehension
- Promote use of technology
- Rely on the concrete
- Arrange extra time to complete task
- Use multi-sensory approach
- Be consistent
- Failure of TAAS does not, by itself constitute an educational need, and does not qualify a student to receive services through special education.

SPEECH IMPAIRMENT

DEFINITION:

The Texas definition is, “A student with a speech impairment is one who has been determined to meet the criteria for speech or language impairment as stated in 34 CFR, §300.7(c)(11). The multidisciplinary team that collects or reviews evaluation data in connection with the determination of a student's eligibility based on a speech impairment must include a certified speech and hearing therapist, a certified speech and language therapist, or a licensed speech/language pathologist.” (TAC §89.1040 (10))

The federal definition is, “Speech or language impairment means a communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment, that adversely affects a child's educational performance.” (34 CFR §300.7(c)(11))

POSSIBLE CHARACTERISTICS:

- Acting as if deaf
- Little effective verbal communication, even if child speaks
- Lack of interest in others; primarily solitary play
- Difficulty in sequencing (sounds in words, words in sentences, sentences in stories)
- Facial unresponsiveness (unable to get child's attention)
- Absence of normal social give-and-take between people
- Poor use of grammar, particularly pronouns and prepositions
- Unusual or inconsistent response to sensory stimuli in one or more of the areas of sight, hearing, touch, pain, balance
- Fine motor difficulties
- No speech
- Difficulty following directions
- Poor memory for specific details
- Slow learner/at-risk
- Dysfluent speech
- Breathy or harsh voice
- Low vocabulary
- Low self-esteem/self-concept
- Problems range from mild to non-verbal

SOME EDUCATIONAL IMPLICATIONS:

- Use oral directions, including: visual, such as gestures, pictures; limited abstract phraseology; repetition; close proximity to student when communicating
- Have extra opportunity to participate in socially meaningful give-and-take play
- Promote use of technology

- Have added emphasis to language arts curricula
- Provide consistent routine, structure, and implementation of procedures
- Maintain predictable environment including routine assurances that people/events in environment are as predictable as possible
- Use symbol system (picture or words) for daily events
- Maintain instruction at concrete level
- Use visual/picture cues and/or sign language
- Integrate speech-language pathologist into instructional setting

TRAUMATIC BRAIN INJURY

DEFINITION:

The Texas definition is, “A student with a traumatic brain injury is one who has been determined to meet the criteria for traumatic brain injury as stated in 34 CFR, §300.7(c)(12). The multidisciplinary team that collects or reviews evaluation data in connection with the determination of a student's eligibility based on a traumatic brain injury must include a licensed physician, in addition to the licensed or certified practitioners specified in subsection (b)(1) of this section.” (TAC §89.1040 (11))

The federal definition is, “Traumatic brain injury means an acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a child's educational performance. The term applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual, and motor abilities; psychosocial behavior; physical functions; information processing; and speech. The term does not apply to brain injuries that are congenital or degenerative, or to brain injuries induced by birth trauma.” (34 CFR §300.7(c)(12))

POSSIBLE CHARACTERISTICS:

- May have no visible impairments after a head injury
- Can vary greatly depending upon the extent and location of the brain injury
- Impairment in one or more areas (such as cognitive functioning, physical abilities, communication, or social/behavioral disruption) are common
- May be either temporary or permanent in nature and may cause partial or total functional disability as well as psychosocial maladjustment
- May experience a complex array of problems, including:
 - Physical impairments: speech, vision, hearing, and other sensory impairments; headaches; lack of fine motor coordination; spasticity of muscles; paresis or paralysis of one or both sides; seizure disorders; and balance and other gait impairments.
 - Cognitive impairments: Short and long-term memory deficits, impaired concentration, slowness of thinking, and limited attention span, as well as impairments of perception, communication, reading and writing skills, planning, sequencing, and judgment. May have difficulty in seeing relationships, understanding abstract levels of meaning, considering a variety of possible solutions, holding several words or thoughts in mind at one time, recalling pre-injury information, recalling events from earlier in the day or previous days, setting goals, perceiving strengths and weaknesses in an objective manner, focusing attention and filtering out distractions, maintaining attention, organizing objects into appropriate groups, perceiving the spatial orientation of objects, recognizing objects if too much is presented at once or too rapidly.

- Psychosocial, behavioral, or emotional impairments: Fatigue, mood swings, denial, self-centeredness, anxiety, depression, lowered self-esteem, sexual dysfunction, restlessness, lack of motivation, inability to self-monitor, difficulty with emotional control, inability to cope, agitation, excessive laughing or crying, and difficulty relating to others

SOME EDUCATIONAL IMPLICATIONS:

- Provide repetition and consistency
- Demonstrate new tasks, state instructions, and provide examples to illustrate ideas and concepts
- Avoid figurative language
- Reinforce lengthening periods of attention to appropriate tasks
- Probe skill acquisition frequently and provide repeated practice
- Teach compensatory strategies for increasing memory
- Be prepared for students' reduced stamina, and provide rest breaks as needed
- Keep the environment as distraction-free as possible
- Initially, may need to gauge whether the student can follow one-step instructions well before challenging the student with a sequence of two or more directions
- Provide opportunities for success to maximize the student's strengths/self-esteem

VISUAL IMPAIRMENT

DEFINITION:

The Texas definition is,

“(A) A student with a visual impairment is one who has been determined to meet the criteria for visual impairment as stated in 34 CFR, §300.7(c)(13). The visual loss should be stated in exact measures of visual field and corrected visual acuity at a distance and at close range in each eye in a report by a licensed ophthalmologist or optometrist. The report should also include prognosis whenever possible. If exact measures cannot be obtained, the eye specialist must so state and provide best estimates. In meeting the criteria stated in 34 CFR, §300.7(c)(13), a student with a visual impairment is one who:

(i) has been determined by a licensed ophthalmologist or optometrist:

(I) to have no vision or to have serious visual loss after correction; or

(II) to have a progressive medical condition that will result in no vision or a serious visual loss after correction.

ii) has been determined by the following evaluations to have a need for special services:

(I) a functional vision evaluation by a professional certified in the education of students with visual impairments or a certified orientation and mobility instructor. The evaluation must include the performance of tasks in a variety of environments requiring the use of both near and distance vision and recommendations concerning the need for a clinical low vision evaluation and an orientation and mobility evaluation; and

(II) a learning media assessment by a professional certified in the education of students with visual impairments. The learning media assessment must include recommendations concerning which specific visual, tactual, and/or auditory learning media are appropriate for the student and whether or not there is a need for ongoing evaluation in this area.

(B) A student with a visual impairment is functionally blind if, based on the preceding evaluations, the student will use tactual media (which includes Braille) as a primary tool for learning to be able to communicate in both reading and writing at the same level of proficiency as other students of comparable ability.” (TAC §89.1040 (12))

The federal definition is, “Visual impairment including blindness means an impairment in vision that, even with correction, adversely affects a child’s educational performance. The term includes both partial sight and blindness.” (34 CFR §300.7(c)(13))

POSSIBLE CHARACTERISTICS:

- Students range from partially sighted to totally blind
- Late in developing language
- Blindisms such as rocking
- Use of objects in inappropriate way
- Corrective lenses
- Appearance of frowning/grimacing or squinting while trying to focus
- Difficulty in mobility
- Delay in motor skills
- Catastrophic reactions to minor changes in the environment and/or routine
- Vision problems often accompany other disabilities
- May self-inflict pain or harm
- Tactilely defensive

SOME EDUCATIONAL IMPLICATIONS:

- Hands-on experiences
- Provide extra time
- Promote use of technology
- Activities may need to be shortened
- Consistent routine, structure, and implementation of procedures
- Use of natural consequences approach to discipline
- Assurances that people/events in environment are as predictable as possible
- Provide extra storage space
- Maintain instruction at concrete level
- Use such words as “look” and ”see” in usual way
- Have students avoid taking advantage of situations by expecting too much help
- Describe events, activities in detail
- Use tactile demonstrations
- Partially sighted students may read regular print or require large print
- Be consistent

NON-CATEGORICAL EARLY CHILDHOOD

DEFINITION:

The Texas definition is, “A student between the ages 3-5 who is evaluated as having mental retardation, emotional disturbance, a specific learning disability, or autism may be described as noncategorical early childhood.” (TAC §89.1040 (13))

There is no federal definition for this category.

POSSIBLE CHARACTERISTICS:

Children who are eligible for noncategorical are those who meet the eligibility criteria for one or more of the disabilities listed below, but who, for various reasons, the ARD committee decides that it would not be appropriate at this time to label the child.

- See mental retardation
- See emotional disturbance
- See learning disability
- And/or autism

SOME EDUCATIONAL IMPLICATIONS:

See the educational implications for the disabilities listed above.

SECTION THREE

SPECIAL EDUCATION PROCESS

- **REFERRAL**
- **NOTICE**
- **FULL AND INDIVIDUAL EVALUATION REPORT**
 - **ARD/IEP MEETING**

REFERRAL PROCESS

Students who may need special education come to the attention of school officials in a number of ways. Parents may contact their child's teacher or other school professional to ask that their child be evaluated. A referral may also be made by a doctor, a community agency (such as an Early Childhood Intervention program), an individual, a group or an organization that may have worked with the student or school.

This request may be verbal or in writing and initiates a **referral** for the child to be considered for special education and related services.

If the school decides to test the child, they notify the parent(s) in writing about the evaluation process and get written consent before the evaluation starts.

NOTICE

Each time the district proposes to initiate or change the identification, evaluation, or educational placement of the child or provision of a free appropriate public education (FAPE) to the child, or refuses to initiate or change the identification, evaluation, or educational placement of the child or the provision of FAPE to the child, the parents must be given written notice. This notice consists of two parts: Notice of Procedural Safeguards and a more specific notice for that activity. An interpreter may be needed to interpret and assist in explaining these documents. Interpreters should be given these documents, and all documents that will involve their assistance, in advance so they may be studied for accurate interpretation to occur.

Notice of Procedural Safeguards

The Texas Education Agency developed a pamphlet called "An Explanation of Rights and Procedural Safeguards of a Parent with a Child with Disabilities in School". It must be made available to the parent in their native language in writing or through an interpreter. School districts use this pamphlet to give parents general notice of their rights. If a parent cannot read or write, the school must give the information orally, on cassette tapes, in Braille or in any other way that the parent can understand. If the parent does not understand the meaning of the pamphlet, they must explain it to the parent. A copy of the procedural safeguards notice must be given to the parent of a child with a disability at a minimum:

- upon initial referral for evaluation
- upon each notification of an ARD committee meeting
- upon reevaluation of the child
- upon receipt of a request for a due process hearing
- upon a manifestation determination review
- if a removal is contemplated that constitutes a change of placement

Specific Notice

In addition to general notice of rights outlined in the pamphlet described above, IDEA also says the school must give more specific notice about some actions. At the referral process, and at each significant decision-making step after the referral, the district must send written notice telling about the actions the school wants to take and about the parents' rights.

The school must give specific notice about proposed actions before they:

- make decisions about whether the child has a disability, or change his/her disability category;
- conduct an evaluation;
- change the current education program
- change the placement
- consider transition

Parents have the right to receive specific written notice at least five (5) school days before the school takes action. The school must give specific written notice if the parent asks them to make any of these changes and they refuse. For any actions described above, the parent must be told in writing about:

- the action the school wants to take;
- why the school wants to take that action;
- what other options the school considered;
- why those other options were rejected; and
- evaluation, tests and other information supporting the school's position; and
- sources for parents to contact for assistance in understanding what the law says.

If the referral process indicates that a student **may** need special education and/or related services, the school must do a **full and individual evaluation** (testing), at no cost to the parent.

The school district must notify the parent, get parental consent before testing, complete the evaluation and have a written report within **60 calendar** days after the first referral.

FULL AND INDIVIDUAL EVALUATION

A team of trained and knowledgeable professionals must do the evaluation. The evaluation must cover all areas of suspected disability and may consist of printed tests, observations, parent input and other forms of information. The team should analyze what is required of students without disabilities of the same age and determine how these requirements could be completely or partially fulfilled by the student being evaluated if that student had access to appropriate assistive technology.

Understanding the Evaluation Results

Once the district completes the evaluation reports, they must give the parent a copy. The parent has a right to inspect and review the results of all evaluation administered to the child.

The evaluation report will show whether a student's behavior is a problem at school. If so, the report would include recommendations on how to manage the behavior so the student can learn and get along with others. These recommendations will be considered as the ARD committee develops the Individualized Education Program (IEP) and may become a part of the IEP called the Behavior Intervention Plan (BIP).

There are many times an interpreter may be needed to assist in evaluating a child when the assessment staff do not speak the language of the child. However, this manual does not cover the training that would be needed for the interpreter and the school staff for that to be an effective means of assessment.

ARD MEETING/IEP DEVELOPMENT

Once the full and individual evaluation shows the child has a disability and is eligible for services, a committee meeting is called that is referred to as the Admission, Review, and Dismissal Committee (ARD). The parent is a very important member of the child's ARD committee. The ARD committee will meet the first time to establish that the child is eligible for services, and then to plan what those services need to be. In addition, the ARD committee meets at least once a year to review and revise the child's IEP.

It is important to remember that the ARD committee meeting can be a confusing process for anyone not familiar with rules and regulations, including the interpreter. All persons present at the ARD committee meeting should be encouraged to ask questions. The interpreter should be asking questions that relate to accurate conveying of information to the parent.

Information should be provided to the interpreter prior to the ARD to assist in following the ARD process. This information consists of such documents as:

- An ARD agenda or a blank copy of the ARD report.
- A copy of the IEP (Individualized Education Program).
- A copy of the modification sheet.

Be sure that the interpreter is introduced to all members of the ARD committee.

Notice of ARD Meeting

As a parent and member of the ARD committee, the parent has a right to be an equal participant in developing the child's IEP. Current rules say the school must give written notice **at least five (5) school days before** the ARD meeting. The notice should include the purpose, time and place of the ARD meeting and a list of the people attending.

If the date, time or place is not convenient for the parent, the parent should request the school to reschedule the meeting. The school must attempt to schedule the meeting at a time and place agreeable to the parent and school officials. If the parent cannot attend the ARD meeting, the school must use other methods, such as telephone conference calls, to give the parent a chance to

participate. However, the school district **can** hold the ARD meeting without the parent if the parent does not attend and does not reschedule.

At the meeting, the parent has a right to an **interpreter** (e.g., American Sign Language or Spanish) paid by the school. If an interpreter is needed the parent must tell the school before the meeting. If the child's parent is unable to speak English, the district must provide the parent with a written or audiotaped copy of the child's IEP translated into Spanish, if Spanish is the parent's native language. If the parent's native language is a language other than Spanish, the district must make a good faith effort to provide the parent with a written or audiotaped copy of the child's IEP translated into the parent's native language. Thus the interpreter may be asked to assist by interpreting during the ARD meeting, or audiotaping the results of the ARD committee proceedings if the parent was unable to attend. The ARD document could also be translated in written format for the parent.

Parents have the right to request an ARD meeting any time they believe one is needed to address specific concerns. If there are problems, parents do not have to wait for the required annual ARD meeting. The district will either schedule the meeting at a mutually agreeable time or they will ask for mediation from TEA on whether they must grant the parents' request.

Other Members of the ARD Committee

The current rules and regulations specify, in addition to parent(s) or a parent representative and the student, who are required or appropriate members of the ARD committee. In addition to these, parents have the right to invite other people. For example, they may bring someone who has worked with their child in another setting, or may bring a friend or parent advocate along for support. Because the role of the committee is to develop a plan for just that child, the intent of the membership requirements is to have members in attendance who are familiar with that child.

IEP Process

The **Individualized Education Program (IEP)** is a program, designed just for one student. It is an agreement between the school and parents on how the student will be educated. Although the IEP is not as detailed as a teacher's lesson plan, it must contain **annual goals** in each area of need as well as steps called **objectives** the student should take to reach each goal. The IEP states what special education and related services the school will provide, when and where those services will be provided, and how progress will be measured.

All decisions in the child's IEP must be individualized; that is why it is called an **Individualized Education Program**. Individualized means that the program is made especially for the child and is tailored to meet the child's needs. The child's special education needs are likely to be different from those of another student, even one with the same disability. The child's IEP should reflect those differences and not be exactly the same as that of any other student. The federal laws and regulations require the ARD committee to develop an IEP before a student receives special education and related services. For students already receiving special education, an IEP must be in effect at the beginning of each school year. This IEP could be one that was in effect at the end of the previous school year, as long as the ARD committee meets at least once a year to review the IEP. For new students, a temporary IEP can be developed while the evaluation is being completed.

If a student is placed in a non-public school by the public school district, an IEP is also required, and the public school is responsible for protecting the student's rights.

Review of Evaluation Data

The ARD committee must review existing evaluation reports, including full and individual evaluation reports (FIER) evaluations and information provided by the parents of the child, current classroom-based evaluations and observations, related services reports, LPAC reports by the Language Proficiency Assessment Committee (LPAC) and independent education evaluations (IEEs). The report must document the committee's review of existing evaluation data and must summarize the basis of their decisions about whether additional data, if any, are needed.

Once a child has been fully evaluated the first time and a decision has been rendered that a child is eligible for special education services, any subsequent evaluation of the child is called a reevaluation.

Functional Behavioral Assessment (FBA)

A functional behavioral assessment may be needed for those children who are exhibiting many behavior problems at school. The purpose of the FBA is to determine under what conditions the problem behavior occurs, what causes it, what reinforces (maintains) it, and what time of day or other patterns can be detected. This assessment is then used to create a Behavior Intervention Plan (BIP) for the student.

Functional Vocational Evaluation (FVE)

Transition services for students with disabilities could include a functional vocational evaluation (FVE), if appropriate. A FVE is information collected regarding work-related behavior including the student's vocational strengths and limitations.

Transition Planning

The federal regulations define **transition services** as "a coordinated set of activities for a student with a disability that—

1. is designed within an outcome-oriented process, that promotes movement from school to post-school activities, including postsecondary education, vocational training, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation;
2. is based on the individual student's needs, taking into account the student's preferences and interests; and
3. includes—
 - instruction;
 - related services;
 - community experiences;
 - the development of employment and other post-school adult living objectives; and

- if appropriate, acquisition of daily living skills and functional vocational evaluation.”

The federal regulations require that a student’s IEP begin including transition service needs by age 14, and a statement of needed transition services by age 16.

State law requires a transition plan for each student age 16 and over receiving special education services. Students and parents should assist in development of the **Individual Transition Plan (ITP)**, and some or all of it should become a part of the IEP. The ITP must address services the student needs to move successfully to adult life after leaving school. Transition services include services the district and other state agencies will provide before the student leaves the school setting. Those services to be provided by the school district should also be put into the IEP.

Good transition planning can help the student leave school with the skills needed to work and live in the community.

An interpreter may also be needed to assist in ITP meetings. ITP meetings are separate and apart from ARD meetings and maybe include persons from other agencies. It may be held on the same day.

Communication Needs of the Student

The ARD report must document consideration of the communication needs of the student.

If the student is deaf or hard of hearing, the ARD committee must complete an ARD supplement form to address those issues.

In the case of a child with limited English proficiency, the ARD report documents consideration of the language needs of the child as these needs relate to the child’s IEP.

Eligibility

There must be appropriate disability eligibility documentation for students receiving special education services. There are 13 eligibility categories, and these are addressed in another section of this manual.

Reviewing Present Level of Performance (PLOP)

If the student has been found eligible for the first time, the committee reviews evaluation information and summarizes the student’s strengths and needs. These will be the basis for developing the student’s goals and objectives. If the student has been eligible and receiving services for some time, the ARD committee also reviews the student’s progress on each IEP objective and explains the special education and related services the student has been receiving.

Behavior Management and Discipline

For students exhibiting behaviors that interfere with their learning or the learning of others, a functional behavior evaluation (FBA) and/or a behavioral intervention plan (BIP) may be

necessary. The BIP will describe what actions the school will take in disciplining the child, as well as positive reinforcers to assist the child in maintaining appropriate behavior.

Texas law outlines procedures required before sending a student to an Alternative Education Program (AEP) and specifies offenses for which a special education student can be placed in an AEP for more than the 10 days allowed under federal law (TEC §37.004, 37.009).

Language Needs for LEP Students

In the case of the child with limited English proficiency (LEP), the ARD committee must consider the language needs of the child as these needs relate to the child's IEP. This is based on information presented by the Language Proficiency Assessment Committee (LPAC) and concerns the language of the child, not the parent.

Students with Autism

Texas rules require that the ARD committee consider, and when needed, address: extended educational programming; prioritized behavioral objectives; daily schedule reflecting minimum unstructured time; in-home training or viable alternatives; pre-vocational and vocational needs of students age 12 or older; parent training; and suitable staff-student ratio for students diagnosed with autism.

Developing Goals and Objectives

Goals are statements about what the student will do in a year. **Objectives** are the short-term steps the student will take to reach the annual goal. During this part of the process the ARD committee decides whether the student will address all, most or part of the Texas Essential Knowledge and Skills (TEKS) (the core of knowledge, skills, and competencies that Texas established for each student at each grade level). Other goals or objectives can also be included. Any modifications will be written in the IEP.

School staff may have met **before** the ARD meeting, either with or without the parent, to write a draft of the goals and objectives or benchmarks.

During this part of the meeting, the committee develops a clear picture of what the student will be doing and learning over the school year. As part of each goal and objective or benchmark, the ARD committee must say how the child's progress will be measured and how parents will be notified of progress, what type of support the child will need to reach each goal and who will provide each service.

The IEP should contain goals and objectives or benchmarks not only for academics, but for all services a student needs including behavior, related services, Extended School Year Services (ESY) and vocational programming. They should be written clearly and include how progress will be measured and reported to the parent. Written IEP progress reports must be sent to parents of students with disabilities on the same timely basis as those provided to parents of students in general education (at the time of report cards).

Assistive Technology Devices or Services (ATD)

Assistive technology or devices are any objects or "things", pieces of equipment, or systems that are used to enable an individual with a disability to function better. These may be acquired commercially off the shelf, modified, or customized. As examples: hearing aids for individuals with hearing loss, a Braille printer for someone who is blind, a notebook computer/keyboard for a student who has severely impaired handwriting, voice dictation software for someone who can't write, etc. Assistive technology services are those services that directly assist a child with a disability in the selection, acquisition, or use of an assistive technology device.

Texas Assessment Program

The Texas Assessment Of Knowledge and Skills (TAKS) and State Developed Alternative Assessment (SDAA) are the state's legislatively mandated assessment instruments. The TAKS tests are standardized, criterion-referenced achievement tests. These tests measure higher-level thinking and problem-solving skills and the academic content of Texas' legislatively mandated statewide curriculum (TEKS). The TAKS is appropriate for many, but not all, students served in special education. For some students only parts of the test are appropriate. Some students need modifications in the way the TAKS is given. The ARD committee must address these issues and document them in the IEP.

If the ARD Committee determines that the TAKS is not an appropriate measure of their academic achievement, even with allowable accommodations, some students in special education will participate in the SDAA. This assessment has been developed specifically for students in special education.

Students who are not being instructed in the state curriculum at any grade level in an area tested by TAKS will be exempted from TAKS and from the SDAA.

Each ARD Committee now has three options for testing students receiving special education services. The ARD committee may choose the TAKS, SDAA, or another Locally Developed Alternate Assessment (LDAA) (e.g., Brigance, CLASS, etc.).

Other Assessments

The district must make the same decisions for any other assessments given to all students as they do for TAKS. If the test is not appropriate for the student to take, then an alternate assessment must be specified.

Placement in the Least Restrictive Environment (LRE)

Federal law requires school districts to educate students with disabilities in the **Least Restrictive Environment (LRE)**. This means the student must be placed in the setting that puts the fewest limits on his/her opportunities to be educated with students who do not have disabilities. If the ARD committee places the child somewhere other than the general education classroom, they must **specify in the IEP why a more restrictive placement is needed.**

To assure the child's placement in the LRE, ARD committee members should begin by considering placement in a regular class or classes at the student's home school. The discussion

should include which modifications and/or supplementary aids and services (behavior interventions; paraeducators, assistive technology, equipment, environmental modifications, etc.) could allow the student to achieve a satisfactory education in general education classes. If placement in general education is rejected, the committee should document why the placement, even with the use of modifications and supplementary aids and services, is not appropriate.

Extracurricular Activities

A student's IEP **must** contain both the criteria and schedule for evaluating progress and determining eligibility for participation in extracurricular activities.

Harmful Effects

The ARD committee must document its discussions of any potential harmful effects on the student if the student is removed from general education classes as well as discussions of any potential harmful effects on the quality of services provided to the student.

Deciding on Related Services

Many students who receive special education also need related services in order to benefit from special education. Though there are others, the most common related services are:

physical therapy	occupational therapy
psychological services	special transportation
counseling	orientation and mobility training
audiology services	

The ARD committee decides whether a student is eligible for each related service. The decision will be based on written reports from related service professionals. Every service the school district provides must be written into the IEP, including information about how often the services will be provided, how long each session will last, the type of related service professional needed and when the services will begin and end. Written IEP progress reports for each related services, except for transportation, must be sent to parents of a student with a disability on the same timely basis as those provided to parents of students in general education.

Extended School Year Services (ESY services)

The ARD committee should also discuss whether a student needs an extension of the school program into the summer. Some students experience significant regression in their learning and/or behavior during the summer break. Others need services such as physical therapy during the summer so they do not lose the progress they have made during the school year.

Deciding on Placement

After ARD committee members agree on the IEP, the next step is to determine placement or **where** the special education and related services will be provided. The state has determined different kinds of placements, depending on the amount of time in special education, and the types of services provided. The interpreter will need to be familiar with the names and basic definitions for the placements that might be discussed at the ARD committee meeting.

Coming to Mutual Agreement

All members of the ARD committee who are part of the decision-making team will sign the IEP and indicate their agreement or disagreement. If any member disagrees, a statement of the disagreement and reasons for it should be attached to the IEP.

If a parent or the adult student disagrees with one or more required elements of the IEP, the district must offer a recess of no more than 10 school days unless the district has proposed expulsion or placement in an AEP or the student presents a danger of physical harm. The committee members must also agree on a date, time and place to finish the meeting.

If, after the recess, parent or student members of the ARD committee still do not agree, school members can use the IEP they think is best. A second statement about the disagreement must be written into the IEP, and members who disagree must be allowed to write their own statements.

IEP Review

The ARD committee can revise the IEP whenever the need arises. It must be reviewed at least once a year. The required meeting is often called the “**annual ARD.**”

Termination of Services

A district can stop providing special education when:

- the student no longer meets the age requirements. A student is entitled to services through the end of the school year in which the student reaches his/her 22nd birthday
- the student is eighteen years old and decides on his/her own to withdraw from school.
- the student graduates under requirements that make him/her no longer eligible for services
- the student no longer qualifies for special education based on eligibility requirement for the 13 categories listed in this document

Transportation

The federal regulations entitle a student to transportation services to and from school if they are necessary for the student to receive an appropriate education. The ARD committee makes the initial decision as to whether a student is eligible for special transportation and the type and kind of special transportation that will be provided.

The ARD committee should first talk about having the student use the transportation services used by students without disabilities. If a student is unable to use regular transportation services, the ARD committee must consider special transportation. State laws that limit transportation to students who live a certain distance from school do not apply to students for whom an ARD committee has determined a need.

Private School Placement by Parents

Services to students placed by their parents in private schools or facilities are governed by Texas regulations (TAC §89.1096). If an ARD committee is going to be held for a student placed in a private school or facility by the parent, the district may wish to discuss this with the interpreter prior to the ARD committee meeting.

Contracting Placements

When the school district cannot meet a student's educational needs in its own program, it can contract with other programs such as Regional Day School Programs for the Deaf (RDSPD) or cooperative programs with other school districts. The district should not contract for any part of a student's education if it can meet the needs in its own program. The ARD committee must decide whether to contract for services from another program or district. Even if the district contracts with a non-public school, the district's responsibility for the student continues.

Residential Placement

ARD committees will consider residential placements for students with very severe disabilities if the district cannot provide the services locally and the student cannot benefit from education without the support provided in a residential facility. A residential facility is one in which the student will both live and go to school. If the ARD committee determines a student needs 24-hour residential placement, the district must provide it at no cost to the parent. Residential placement must be reviewed and reapproved annually.

The school district can only provide for a residential placement with parental consent.

TEA Mediation

Mediation can be a way for parents and school districts to work out disagreements without going through the time, trouble, expense and stress of a due process hearing. If the parent and the district both agree, a mediator will talk with the parent and school personnel, separately and/or together, in person or by telephone. The mediator may suggest compromises, may advise one side or the other that it is clearly wrong or may take another approach.

TEA Complaints Management System

If the parents feel the district is violating the educational rights of their child, the parent can file a complaint with TEA. Under federal regulations, TEA must review, investigate and resolve any complaints about a school district's education program within sixty (60) calendar days. TEA is required to make sure the district complies with the law.

ARD SUMMARY

It is not likely that all of the above topics will be discussed at all ARD meetings. That why it is important for the interpreter to have an overall understanding of the process, and to have a pre-ARD meeting with the school staff to discuss issues that might arise at that meeting.

SECTION FOUR

RESOURCES

- **GLOSSARY OF COMMONLY USED TERMS**
 - **COMMONLY USED
ACRONYMS/ABBREVIATIONS**
 - **ENGLISH / SPANISH
SPECIAL EDUCATION TERMS**

GLOSSARY

Achievement Test

A test designed to measure a child's knowledge, skills and understanding in subject areas. For instance, these tests may measure the child's reading comprehension, math calculation, or spelling capability as compared to other children in the same grade or same age.

Adaptive Behavior

The ability to socially function in school, home or community environment. It involves skills such as: making friends, bathing and dressing appropriately, being punctual for appointments, budgeting, etc.

Admission, Review and Dismissal Committee (ARD Committee)

This committee determines a child's eligibility to receive special education services and plans the educational program of the student. The committee is composed of the child's parent(s) or surrogate parent(s) and school personnel who are involved with the child.

Age/Grade Equivalent

The scores from tests given to a student are defined in years and months that are equal to the average score of children of that age/grade group.

American with Disabilities Act (ADA)

A Federal law passed in 1990 that prohibits discrimination against persons with disabilities. Public schools are covered by the ADA.

Alternative Education Program (AEP)

Disciplinary programs run by school districts in which students are placed for a variety of offenses specified in state law and in the districts code of conduct. Students in AEPs are educated separately from other students.

Annual Goals

These are goals the child is to accomplish for the year. Goals may be academic, address social or behavioral needs, relate to physical needs, or address other educational needs. These goals must be measurable and must address the student's involvement and progress in the general curriculum.

Annual Review

A review of a student's special education program each year, which includes an update of the student's progress, a review of the current IEP, and development of the new IEP for the upcoming year.

Asperger's Syndrome

A separate and distinct clinical entity from autism, but is included under the category of Pervasive Developmental Disorders and within the autistic spectrum of disabilities.

Assessment

A comprehensive individual assessment is done to decide if a student is eligible for special education services. Assessments may include intellectual, social, emotional, education achievement, physical, auditory, speech, language, etc. For most commonly used tests see Appendices – Evaluation Instruments.

Assistive Technology Devices and Services

Assistive technology devices are any items, equipment, or products that are used to help a student function in the educational setting. Assistive technology services help a student select, obtain, or use the device. These services can include evaluating the student's needs, providing the devices and services to match student needs, and training for the student, family, and school personnel in using the device. These services and devices must be available to any student who needs them to benefit from instruction. They can be provided as special education services, related services, or as supplementary aids and services to the general education program.

Audiological Services

This related service includes the evaluation of hearing ability and recommendation of certain types of hearing equipment for a child with hearing impairment.

Auditory Trainer

A wireless FM device used by a teacher and a hearing impaired student to amplify sound and allow both the teacher and student to move about freely.

Augmentative Communication

Alternative ways of communicating that do not use speech.

Battery of Tests

A group of tests given to a child to determine strengths and weaknesses.

Behavior Disorders

Behavior characteristics that deviate from what is generally considered normal and that interfere with the functioning of a student and others.

Behavior Intervention Plan (BIP)

A written plan developed as part of the Individualized Education Program (IEP) to address behavioral concerns affecting the student's educational progress. It is based on a functional behavioral assessment of the student's behavior, describes the interventions to be used, and methods of evaluation.

Bilingual Education (BE)

The goal of bilingual education programs is to enable limited English proficient students to become competent in the comprehension, speaking, reading, and composition of the English language through the development of literacy and academic skills in the primary language and English. Such programs emphasize the mastery of English language skills, as well as mathematics, science and social studies, as integral parts of the academic goals

for all students to enable limited English proficient students to participate equitably in school.

Braille

A system using raised dots that allows students who are blind to “read” using their fingertips.

Code of Federal Regulations

The *Code of Federal Regulations* (CFR) is a codification of the general and permanent rules published in the *Federal Register* by the Executive departments and agencies of the Federal Government.

Central Nervous System

The brain and spinal cord.

Cerebral Palsy

A developmental disability resulting from brain damage before, during or soon after birth; characterized by weakness or paralysis of the extremities, poor coordination and other motor problems.

Child Find

A network of professionals involved in finding children who need special help.

Cognitive

Intellectual abilities, such as memory and the ability to solve problems and make judgments.

Commissioner’s Rules

The Texas Commissioner of Education’s Rules for Special Education are usually referred to as the “Commissioner’s Rules.” The Commissioner of Education develops and adopts the majority of the rules explaining how Texas school districts are to provide special education services.

Conduct Disorder

A disorder characterized by acting-out, aggressive, and disruptive behavior.

Confidentiality

Confidentiality means protecting all personally identifiable data, information and records collected, used, or kept by the school district about a student. Confidentially requirements also apply to discussions about a student and the student’s record.

Consent

Before a child can be tested or placed in a special education program, a parent must give written permission for these services to take place.

Content Mastery

A type of service where students can get extra help outside the regular classroom. Content Mastery is defined and used differently from district to district. Always ask for a description of what services will be provided and where.

Continuum of Services

A range of placement required to be available, as appropriate, for placement of children with disabilities, including general education classroom, general education classroom with itinerate or resource teachers, resource classes, self-contained classes, home instruction, and instruction in hospital or residential institution.

Criteria

The measurement of whether or not an educational goal is being met. For example, a 'criteria ' for spelling achievement is spelling correctly 9 out of 10 words.

Cumulative Record

All the child's educational records. The records begin when a child enters school, and follows the child from school to school. It includes information about health records, grades, attendance, achievement tests, and special education programs (if any).

Curriculum

The subject matter a school is going to teach the child by using special activities and materials to help the child learn.

Down Syndrome

It is the most common genetic cause of developmental disabilities. It is the result of a chromosomal disorder that causes physical and cognitive differences.

Due Process

A guarantee of rights and privileges that neither the government nor other public agency can take away. For example, the right to be notified before any action can be taken concerning the child.

Due Process Hearing

A formal legal procedure used to solve disagreements concerning the education of students' special education services. An impartial hearing officer conducts the hearing and makes decisions about the issues at hand.

Dyslexia

Impaired reading ability.

Early Childhood Education

Public school education can begin at age 3 years for young children with a disability. The Early Childhood Education programs focus on the enhancement of communication, social and motor skills of three to six year olds.

Early Childhood Intervention (ECI)

A statewide program for children from birth to age three who have developmental delays. ECI must make services available for every eligible child.

Educational Diagnostician

A professional in special education who gives tests to determine the academic and intellectual abilities of children. In other states, a school psychologist may fulfill this role.

Education Service Center (ESC)

One of 20 regional offices within Texas to provide consultation, professional development and assistance to local school districts. Our local region is ESC VIII.

Epilepsy

A seizure disorder caused by abnormal, excessive brain discharges.

Expressive Language

Describes how a child uses spoken or written language to communicate with others. Expressive language can also include gestures or hand signs.

Extended School Year Services (ESY services)

An individualized instructional program beyond the regular school year for eligible students with disabilities. The need for ESY services must be determined on an individual basis by the ARD Committee.

Evaluation (also known as Assessment)

The collection of information about a student's special learning needs, strengths, and interest which help the ARD committee make informed decisions regarding the development of the student's IEP.

Eye-Hand Coordination

The ability to use the eye and hand simultaneously to effectively complete a task. Activities of eye-hand coordination include copying designs from a book, cutting with scissors on a line, or painting with a brush.

Facilitated Communication

A technique for assisting a person who does not speak (or does not speak clearly) so he can communicate. A facilitator uses hand-over-hand and/or other physical touch as the student points to or types letters and constructs words or sentences. Facilitated communication is most commonly used for students with autism or severe physical disabilities.

Family Educational Rights and Privacy Act (FERPA)

A federal law which gives parents and eligible students access to and control over their child's school records.

Fetal Alcohol Syndrome

A group of physical findings that result from maternal consumption of alcohol during pregnancy.

Fine Motor Development

The skills developed by a child that involve precision tasks done with the hands such as writing, gripping an object, playing with puzzles, stringing beads, etc.

Fluency Disorders

Interruptions of the natural, smooth flow of speech by inappropriate hesitations, pauses or repetitions.

Free Appropriate Public Education (FAPE)

Federal law mandates that students have the right to a free, appropriate public education, including special education and related services. The public school provides these services at the preschool, elementary, and secondary levels at no cost to parents. Students with visual or hearing impairments may receive services from birth. The programs and services must follow goals and objectives stated in the student's individualized education program (IEP).

Functional Behavior Assessment (FBA)

A way to systematically identify positive and negative behaviors by observing a student to develop behavior intervention strategies.

Functional Vocational Evaluation (FVE)

Information collected regarding work-related behavior including the student's vocational strengths and limitations. The FVE can be used in the development of the Individual Transition Plan (ITP).

General Curriculum

The content of the curriculum adopted by the governing board of each school district. In Texas the state curriculum is the Texas Essential Knowledge and Skills (TEKS).

Graduation

Graduation is the completion of all required parts of an educational program. A student with disabilities may graduate by completing the requirements of their IEP or graduate by completing the same program required of general education students.

Gross Motor Development

A person's large muscle development exhibited in such skills as crawling, walking, jumping, throwing, etc.

Guardian

A person who has legal authority to make decisions for a minor. The parent is the legal guardian of a minor child.

Hearing Officer

An impartial person in charge of a due process hearing who issues a written decision based upon the evidence and witnesses presented at the hearing.

Homebound Program

An instructional arrangement for special education in which the teacher instructs the student at the hospital or home.

Impulsivity

The tendency to react quickly and inappropriately to a situation rather than to take the time to consider alternatives and to choose carefully.

Inclusion

An educational philosophy in which children with disabilities are educated in regular education classrooms. The special services needed by the child would be provided within the regular class setting as well.

Independent Educational Evaluation (IEE)

Educational evaluations of a student by an evaluator who does not regularly work for the school district. Parents who are not satisfied with the school's evaluation can request an IEE.

Individualized Education Program (IEP)

A program developed by the ARD Committee that includes educational goals and objectives for the student and documents the services a student needs, how the services will be provided, and how progress will be measured.

Individualized Family Service Plan (IFSP)

A plan that identified the needs of the exceptional child, his/her family, and the program developed to meet their needs, used by Early Childhood Intervention (ECI) programs for infants, 0-3, and sometimes by districts.

Individual Transition Plan (ITP)

A long range planning document designed to identify the services a student needs to make a successful transition to adult life once he leaves school. It addresses the following areas: employment, education, independent living, recreation/social/leisure activities and general considerations such as transportation, income/resources and medical services. It is reviewed every year. The ITP must be developed for each student with a disability on or before the student's 16th birthday as a separate document from the IEP.

Individuals with Disabilities Act (IDEA)

The federal law requiring school districts to provide students with disabilities a free appropriate public education. Also known as P. L. 105-17.

Itinerant Teacher

A teacher who serves the needs of several schools.

Least Restrictive Environment (LRE)

A provision in federal law that provides students with disabilities the right to be educated with students without disabilities as well as have access to the same educational opportunities as their nondisabled peers.

Licensed Specialist in School Psychology (LSSP)

Licensed professional who may only practice school psychology in a public school district.

Locally Developed Alternative Assessment (LDAA)

Students receiving special education services shall take any state or district wide assessments unless that student's ARD Committee determines that any such test is an inappropriate measure of the student's academic progress as outlined in the student's IEP. In such event, the student's ARD Committee must specify an appropriate alternative assessment (LDAA).

Mainstream

A child with disabilities is placed in all general education classes with no regularly scheduled special education services.

Managing Conservator

A suitable, competent adult, parent or authorized agency appointed by the court to have responsibilities and rights of a parent. When a public agency is managing conservator of a child with a disability, a surrogate parent must be appointed.

Mediation

A step in the procedural safeguards to assist parents and school personnel to try to settle disagreements with the help of a trained mediator provided by the Texas Education Agency.

Mental Age

A child's mental ability compared to children of the same chronological age. For example a child with mental retardation may have a mental age of 4 years but be 18 years old.

Modifications

Instructional supports determined by the ARD Committee that will assist the student in mastering the goals of his/her IEP.

Multidisciplinary Team

More than two educational professionals working together to evaluate and help a child with special needs.

Notice

The school must let parents know in writing, within a reasonable time, about actions or proposed actions being considered related to the special education program of a student with a disability. Texas defines reasonable time as five (5) school days.

Occupational Therapist (OT)

A licensed professional in the area of occupational therapy.

Occupational Therapy (OT)

A related service to help a child develop fine motor skills. The Occupational Therapist (OT) may also suggest equipment to help children in daily activities such as special feeding equipment.

Office for Civil Rights (OCR)

OCR looks into complaints about discrimination based upon disability.

Parent/Guardian

The term parent means a natural or adoptive parent or guardian, surrogate parent, or someone who is legally responsible for the student.

Phenylketonuria (PKU)

A rare hereditary condition in which the amino acid phenylalanine is not properly metabolized; this can cause severe mental retardation. Because PKU can be easily detected by a simple blood test and it is a treatable disease, most states require a screening test for all newborns.

Physical Therapist (PT)

A licensed professional in the area of physical therapy.

Physical Therapy (PT)

A related service provided to a child who has difficulty using motor skills (large and fine muscles).

Placement

The educational setting where the identified special education, related services and educational program needs of the student with a disability are provided.

Preschool Program for Children with Disabilities (PPCD)

Public school services for children between the ages of three and five who qualify for special education services.

Psychological Services

A related service that may include evaluation of social and emotional behaviors of a child. A psychologist may provide counseling therapy to the child or consult with the family or teachers on working on the child's behavior problems

Receptive Language

Describes how a child receives and understands information from others.

Reevaluation

An evaluation that must be considered every three years, or more if needed to determine continued eligibility for special education services. Once a child has been fully evaluated a first time and a decision has been rendered that he/she is eligible for special education services, any subsequent evaluation of the child would constitute a reevaluation.

Referral

If a disability is suspected, the process of requesting that a student be evaluated for eligibility to receive special education and related services. Any concerned person may refer a student, including teachers, principals, parents, other agency personnel, or the student.

Regression and Recoupment

How long it takes a student to relearn something after a break from school (such as summer vacation or Christmas break). Tracking a student's regression and recoupment time is the way the ARD committee determines whether a student needs special education in the summer months (Extended School Year Services or ESY services). The school will often collect data before and after long breaks in the school year. If a student loses or could lose significant skills (regression) and takes a long time to get them back (recoupment), the district must provide ESY services.

Related Service

Special services a child can receive if she/he needs special help or support in learning. These services may include occupational therapy, physical therapy, audiology services, psychological services, interpreter services, orientation and mobility training, transportation, and others.

Residential School

A public or private institution at which a group of children with disabilities live and go to school.

Resource Room

A special educational arrangement where a student can spend a minor part of their school day receiving special instruction. The majority of the student's instruction will be from regular education teachers.

Respite Care

Temporary relief provided the primary care giver on a weekly or monthly basis.

Schedule of Services

A schedule of the student's classes that designates whether the class is special or regular education and the amount of time the class meets.

Screening

A quick assessment of a child to determine whether a more thorough evaluation is needed.

Section 504

That part of the *Vocational Rehabilitation Act of 1973* requiring that people with disabilities have reasonable access to jobs, education, housing and public facilities.

Self-Contained Classroom

An instructional arrangement in which a student receives the major portion of daily instruction from a special education teacher.

Self-Help Skills

Skills that a child uses in daily living, such as eating, dressing, and toileting.

Short-Term Objective

Small instructional steps that lead to the accomplishment of the child's annual goal. These objectives must be observable and measurable.

Speech and Language Therapy

Therapy that includes evaluation and instruction in articulation, fluency (stuttering), voice stress, or speaking or understanding language.

State Board of Education (SBOE)

The SBOE is an elected board of individuals who determine policies and priorities for public education in Texas. They develop and adopt some of the rules school districts must follow for providing a free appropriate public education to students with disabilities.

State-Developed Alternative Assessment (SDAA)

The State-Developed Alternative Assessment (SDAA) assesses special education students in grades 3-8 who are receiving instruction in the Texas Essential Knowledge and Skills (TEKS) but for whom TAKS is an inappropriate measure of their academic progress. This test assesses the areas of reading, writing, and mathematics. Students will be assessed at their appropriate instructional levels, as determined by their ARD Committee, rather than at their assigned grade level. The SDAA is administered on the same schedule as TAKS and will be designed to measure annual growth based on appropriate expectations for each student as decided by the student's ARD committee. The alternative assessment will be designed in such a way as to bridge into TAKS and is expected to become a part of the school accountability system in the 2002-2003 school year.

Student Success Initiative (SSI)

2003 will also be the first year of implementation of the Student Success Initiative (SSI). Students in grade 3 that year must pass the state assessment in reading to be promoted without the consultation of a grade placement committee. Beginning in 2005, students in grade 5 must pass the state assessments in reading and mathematics to be promoted;

beginning in 2008, students in grade 8 must pass the state assessments in reading and mathematics to be promoted.

Surrogate Parent

A surrogate parent is a person appointed to represent the interests of a child with a disability in the educational decision-making process when no parent is known, the district, after reasonable efforts, cannot locate the child's parents, or the child is a ward of the state under the laws of the state. The school district decides when a surrogate parent is needed and assigns one to the student.

Task Analysis

Breaking down problems and tasks into smaller, sequenced components.

Tourette's Syndrome

Characterized by chronic tics of the face and body accompanied by vocal aberrations, such as bursts of profanity, barking, and noises.

Texas Administrative Code (TAC)

The State Board of Education (SBOE) is assigned specific rulemaking authority under the Texas Education Code. SBOE rules are codified under the Texas Administrative Code (TAC). The TAC is the official compilation of all final state agency rules published in the *Texas Register*. Following its effective date, a SBOE rule is entered into the TAC under Title 19, Part II. Title 19 is Education, and Part II is the Texas Education Agency.

Texas Assessment of Academic Skills (TAAS)

The TAAS was renamed the TAKS (Texas Assessment of Knowledge and Skills). See Texas Assessment of Knowledge and Skills.

Texas Assessment of Knowledge and Skills (TAKS)

As mandated by the 76th Texas Legislature in 1999, the Texas Assessment of Knowledge And Skills (TAKS) will be administered beginning in the 2002-2003 school year. The TAKS measures the statewide curriculum in reading at grades 3 through 9; in writing at grades 4 and 7; in English Language Arts at grades 10 and 11; in mathematics at grades 3 through 11; in science at grades 5, 10, and 11; and social studies at grades 8, 10, and 11. The Spanish TAKS is administered at grades 3 through 6. Satisfactory performance on the TAKS at grade 11 is prerequisite to a high school diploma.

Texas Education Agency (TEA)

The state agency that is responsible for administering all educational programs in Texas. The Agency works with local schools to ensure that all public education laws, rules, and regulations are followed.

Texas Essential Knowledge & Skills (TEKS)

The required curriculum for each grade level used in Texas public schools. TEKS should be considered the "general curriculum" referenced in the IDEA.

ACRONYMS/ABBREVIATIONS

AAR – ACADEMIC ACHIEVEMENT RECORD
ADA – AMERICANS WITH DISABILITIES ACT
ADA – AVERAGE DAILY ATTENDANCE
ADD – ATTENTION DEFICIT DISORDER
ADHD – ATTENTION DEFICIT HYPERACTIVITY DISORDER
AEP – ALTERNATIVE EDUCATION PLACEMENT/PROGRAM
AI – AUDITORY IMPAIRMENT
APD – AUDITORY PROCESSING DISORDER
APE – ADAPTIVE PHYSICAL EDUCATION
ARC – ASSOCIATION FOR RETARDED CITIZENS
ARD - ADMISSION, REVIEW, DISMISSAL
ARD COMMITTEE – ADMISSION, REVIEW, DISMISSAL COMMITTEE
AT – ASSISTIVE TECHNOLOGY
AU – AUTISM
AUD – ALCOHOL USE DISORDER
BE – BILINGUAL EDUCATION
BD – BEHAVIOR DISORDER
BIA – BUREAU OF INDIAN AFFAIRS
BIP – BEHAVIOR INTERVENTION PLAN/PROGRAM
BMP – BEHAVIOR MANAGEMENT/MODIFICATION PLAN
BPD – BIPOLAR DISORDER
CA – CHRONOLOGICAL AGE
CAT – CALIFORNIA ACHIEVEMENT TEST
CATE – CAREER AND TECHNOLOGY EDUCATION
CBI – COMMUNITY-BASED INSTRUCTION
CBWT – COMMUNITY-BASED WORK TRAINING
CCC – CERTIFICATE OF CLINICAL COMPETENCY
CD – CONDUCT DISORDER
CEC – COUNCIL FOR EXCEPTIONAL CHILDREN
CFR – CODE OF FEDERAL REGULATIONS
CIA – COMPREHENSIVE INDIVIDUALIZED ASSESSMENT
CLASS – COMPREHENSIVE LEARNER ADAPTIVE SCOPE & SEQUENCE
CM – CONTENT MASTERY
CMC – CONTENT MASTERY CENTER
CP – CEREBRAL PALSY
CPI – CRISIS PREVENTION INTERVENTION
CPR – CARDIO PULMONARY RESUSCITATION
CVAE – COOPERATIVE VOCATIONAL ACADEMIC EDUCATION
DAS – DIFFERENTIAL ABILITY SCALES
DB – DEAF BLIND
DD – DEVELOPMENTALLY DELAYED

DEC – DISTRICT EFFECTIVENESS & COMPLIANCE
DSM IV- DIAGNOSTIC & STATISTICAL MANUAL OF MENTAL DISORDERS
DNR – DO NOT RESUSCITATE
ECE – EARLY CHILDHOOD EDUCATION
ECI – EARLY CHILDHOOD INTERVENTION
ED – EMOTIONAL DISTURBANCE
EOC – END-OF-COURSE (EXAM)
ESC – EDUCATION SERVICE CENTER
ESL – ENGLISH AS A SECOND LANGUAGE
ESY – EXTENDED SCHOOL YEAR
FAPE – FREE APPROPRIATE PUBLIC EDUCATION
FBA – FUNCTIONAL BEHAVIOR ASSESSMENT
FERPA – FAMILY EDUCATIONAL RIGHTS & PRIVACY ACT
FIE – FULL & INDIVIDUAL EVALUATION
FIER - FULL & INDIVIDUAL EVALUATION REPORT
FVE – FUNCTIONAL VISION EVALUATION
GT – GIFTED & TALENTED
HI – HEARING IMPAIRMENT
HLS – HOME LANGUAGE SURVEY
IDEA – INDIVIDUALS WITH DISABILITIES ACT
IEE – INDEPENDENT EDUCATIONAL EVALUATION
IEP – INDIVIDUALIZED EDUCATION PROGRAM
IFSP – INDIVIDUALIZED FAMILY SERVICE PLAN
ISD – INDEPENDENT SCHOOL DISTRICT
ISS – IN SCHOOL SUSPENSION
ITBS – IOWA TEST OF BASIC SKILLS
ITP – INDIVIDUAL TRANSITION PLAN
JJAEP – JUVENILE JUSTICE ALTERNATIVE EDUCATION PROGRAM
JTPA – JOB TRAINING PARTNERSHIP ACT
K-ABC – KAUFMAN ASSESSMENT BATTERY FOR CHILDREN
LD – LEARNING DISABILITY
LDAA – LOCALLY DEVELOPED ALTERNATIVE ASSESSMENT
LEA – LOCAL EDUCATION AGENCY
LEP – LIMITED ENGLISH PROFICIENT
LMA – LEARNING MEDIA ASSESSMENT
LPAC – LANGUAGE PROFICIENCY ASSESSMENT COMMITTEE
LRE – LEAST RESTRICTIVE ENVIRONMENT
LSSP – LICENSED SPECIALIST IN SCHOOL PSYCHOLOGY
MD – MULTIPLE DISABILITIES
MHMRA – MENTAL HEALTH & MENTAL RETARDATION AUTHORITY
MOU – MEMORANDUM OF UNDERSTANDING
MR – MENTAL RETARDATION
MTA – MULTISENSORY TEACHING APPROACH
NCEC – NONCATEGORICAL EARLY CHILDHOOD
OCR – OFFICE FOR CIVIL RIGHTS
ODD – OPPOSITIONAL DEFIANT DISORDER

OHI – OTHER HEALTH IMPAIRMENT
OI – ORTHOPEDIC IMPAIRMENT
OJT – ON-THE-JOB TRAINING
O & M – ORIENTATION & MOBILITY
OSEP – OFFICE OF SPECIAL EDUCATION PROGRAMS
OT – OCCUPATIONAL THERAPIST
OT – OCCUPATIONAL THERAPY
PAARD – PRE-ASSESSMENT ADMISSION, REVIEW, DISMISSAL (MEETING)
PDD – PERVERSIVE DEVELOPMENTAL DISORDER
PE – PHYSICAL EDUCATION
PECS – PICTURE EXCHANGE COMMUNICATION SYSTEM
PEIMS – PUBLIC EDUCATION INFORMATION MANAGEMENT SYSTEM
PIAT-R – PEABODY INDIVIDUAL ACHIEVEMENT TEST – REVISED
PKU - PHENYLKETONURIA
PPCD – PRESCHOOL PROGRAMS FOR CHILDREN WITH DISABILITIES
PRS – PROTECTIVE & REGULATORY SERVICES
PT – PHYSICAL THERAPIST
PT – PHYSICAL THERAPY
PTSD – POST-TRAUMATIC STRESS DISORDER
RCF – RESIDENTIAL CARE FACILITY
RDSPD – REGIONAL DAY SCHOOL PROGRAM FOR THE DEAF
SAT – SCHOLASTIC ACHIEVEMENT TEST
SBOE – STATE BOARD OF EDUCATION
SDAA – STATE DEVELOPED ALTERNATIVE ASSESSMENT
SEMS – SPECIAL EDUCATION MANAGEMENT SYSTEM
SI – SENSORY INTEGRATION
SI – SPEECH IMPAIRMENT
SIBS – SELF-ABUSIVE BEHAVIORS
SLD – SPECIFIC LEARNING DISABILITY
SLP – SPEECH LANGUAGE PATHOLOGIST
SSI – SUPPLEMENTAL SECURITY INCOME
SUD – SUBSTANCE USE DISORDER
TAAS – TEXAS ASSESSMENT OF ACADEMIC SKILLS
TAC – TEXAS ADMINISTRATIVE CODE
TAKS – TEXAS ASSESSMENT OF KNOWLEDGE & SKILLS
TASP – TEXAS ACADEMIC SKILLS PROFICIENCY
TBI – TRAUMATIC BRAIN INJURY
TCB – TEXAS COMMISSION FOR THE BLIND
TEA – TEXAS EDUCATION AGENCY
TEACCH – TREATMENT & EDUCATION OF AUTISTIC & RELATED
COMMUNICATION HANDICAPPED CHILDREN
TEDA – TEXAS EDUCATIONAL DIAGNOSTICIANS ASSOCIATION
TEKS – TEXAS ESSENTIAL KNOWLEDGE & SKILLS
TLI – TEXAS LEARNING INDEX
TONI – TEST OF NONVERBAL INTELLIGENCE

TSBVI – TEXAS SCHOOL FOR THE BLIND & VISUALLY IMPAIRED
TWC – TEXAS WORKFORCE COMMISSION
TXMHMRA – TEXAS DEPARTMENT OF MENTAL HEALTH & MENTAL
RETARDATION AUTHORITY
TYC – TEXAS YOUTH COMMISSION
VAC – VOCATIONAL ADJUSTMENT COORDINATOR
VEH – VOCATIONAL EDUCATION FOR THE HANDICAPPED
VI – VISUAL IMPAIRMENT
WIAT II – WECHSLER INDIVIDUAL ACHIEVEMENT TEST
WISC III– WECHSLER INTELLIGENCE SCALE FOR CHILDREN III
WJ-III – WOODCOCK-JOHNSON III
WRAT – WIDE RANGE ACHIEVEMENT TEST

SAN JOSE STATE UNIVERSITY

DIVISION OF SPECIAL EDUCATION & REHABILITATIVE SERVICES

GLOSSARY OF SPECIAL EDUCATION TERMS

GLOSARIO DE TERMINOS QUE SE USAN EN LA EDUCACIÓN ESPECIAL

By Olga Vasquez Brooks

ENGLISH

SPANISH

Ability test	Prueba de habilidad
Above average	Sobre el promedio
Abstract reasoning	El razonamiento abstracto
Achievement test	Test de aprovechamiento escolar o prueba de aptitud académica
Adaptive behavior	Conducta de adaptación
Adaptive physical education	Educación física adaptive
Affective level	Nivel afectivo
Age equivalent	Equivalente de edad
Age norms	Normas de edad
Agnosia	Agnosia
Agraphia	Agrafia,

	Incapacidad de escribir
Alexia	Alexia
Amino acid	Aminoácido
Annual goals	Metas anuales
Aphasia	Afasia
Apraxia	Apraxia
Aptitude	Potencia, Capacidad, Aptitud
Arithmetic mean	Media aritmética
Asphyxia	Asfixia
Assessment	Evaluación educative
Asthma	Asma
Ataxia	Ataxia
Attitude	Actitud
Audiogram	Audiograma
Audiologist	Audiólogo
Auditory Association	Asociación Auditiva
Auditory Blending	Síntesis Auditiva Enlace fonético
Auditory closure	El cierre auditivo
Auditory discrimination	Discriminación auditiva
Auditory memory	Memoria auditiva
Auditory recall	Evocación auditiva
Auditory reception	Recepción auditiva
Auditory sequential memory	Memoria de secuencia auditiva

Autism	Autismo
Autistic	Niño Autista
Average	Media, promedio, típico, ordinario
Aversive stimulus	Estímulo aversivo
Avoidance behavior	conducta de evitación
Avoidance response	Respuesta de evitación
Basal Reader Approach	Enseñanza de Lectura Basal
Battery (test)	Batería (serie de exámenes)
Behavior	Conducta
Behavior disorder	Desordenes o Trastornos de conducta
Behavior model	Modelo de conducta
Behavior modification	Modificación de conducta
Behavior problems	Problemas de conducta
Below average	Bajo la norma
Bilingual	Bilingüe
Blind	Ciego
Biofeedback	Retroalimentación biológica
Body awareness	Conciencia del esquema corporal
Brain damage	Daño cerebral
Catastrophic reaction	Reacción catastrófica
Ceiling	Tope o punto máximo
Central nervous system	Sistema nervioso central
Central tendency	Tendencia central

Cephalic	Cefálico
Cerebral palsy	Parálisis cerebral
Cerebrospinal fluid	Líquido cerebroespinal
Chromosome	Cromosoma
Chronological age	Edad cronológica
Classical conditioning	Condicionamiento clásico
Cleft lip	Hendida del labio
Cleft palate	Abertura del paladar
Clinical teaching	Enseñanza clínica
Closure	Cierre
Cognition	Conocimiento o cognición
Cognitive development	Desarrollo del cognocitivo
Communication disorders	Trastornos de comunicación
Conceptual	Conceptual
Conceptual disorders	Disordenes o Trastornos conceptuales
Conditioning	Condicionamiento
Conduct disorder	Disordenes o Trastornos de conducta
Conductive hearing loss	Sordera conductive
Congenital	Congénito
Conservation	Conservación
Consulting teacher	Maestra o Consultora
Contingency contracting	Contrato de contingencia
Converted score	Puntaje convertido

Correlation coefficient	Coeficiente de correlación
Criteria	Criterio
Criterion referenced test	Test en referencia a los criterios Establecidos
Cross-modality perception	Percepción que cruza entre las modalidades
Cultural differences	Diferencias culturales
Culture-fair test	Prueba que toma en cuenta la cultura
Culture free test	Prueba libre de influencia cultural
Cumulative curve	Curva acumulativa
Deaf	Sordo
Decode	Descifrar
Deficit	Deficiencia
Delayed reaction	Reacción demorada
Delivery systems	Sistema de distribución
Developmental disabilities	Desarrollo atrasado/retardado
Deviation	Desviación
Dexterity	Agilidad, destreza
Diagnosis	Diagnosis
Diagnostic test	Prueba, o Test diagnóstico
Differentiation	Diferenciación
Directionality	Direccionalidad
Discrimination	Discriminación
Distractibility	Distractibilidad

Dominant trait	Rasgo dominante
Due Process	Procedimiento Debido
Dysarthria	Disartria
Dyscalculia	Discalculia
Dysgraphia	Disgrafía
Dyslexia	Dislexia
Ecolalia	Ecolalia
Ecological model	Modelo Ecológico
Electroencephalograph	Electroencefalograma
Emotionally disturbed	Perturbación emocional
Emotional problems	Problemas emocionales
Endogenous	Endógeno
Environment	Ambiente
Epilepsy	Epilepsia
Equilibrium	Equilibrio
Error of measurement	Error de medición
Evaluation	Evaluación
Exceptional child	Niño excepcional
Exogenous	Exógeno
Expressive language skills	Destrezas expresivas del lenguaje
Extinction	Extinción
Face validity	Validez del contenido
Factor analysis	Análisis factorial

Familial	Familial
Field dependent	Dependiente del campo
Figure-ground disturbance	Dificultades con la figura y el fondo
Fine motor sequencing	Secuencia de motriz fino
Fluency	Fluidez de palabra, Facilidad del lenguaje
Genetic	Genético
Grade equivalent	Equivalente del grado escolar
Grade norms	Normas de grado
Grammatic closure	Cierre Gramatical
Gran mal	Gran mal
Gross-motor test	Test de motor “grosso”
Group test	Prueba o Test para grupo
Handicapped	Desventajado (a), incapacitado (a)
Haptic	Háptico
Hard of hearing	Sordez
Hearing impaired	Impedimento auditivo
Hemophilia	Hemofilia
Hydrocephalus	Hidrocefalia
Hyperactivity	Hiperactividad
Hyperkinesis	Hiperquinesia
Hypertonicity	Hipertoniacidad
Hypoactive	Hipoactivo

Hypoglycema	Hipoglicemia
Impulsivity	Impulsividad
Incidence	Incidencia
Individualized Education Program (IEP)	Programa Individualizado de Educación
Individual test	Prueba o Test individual
Independent variable	Variable independiente
Informal test	Test informal
Innate response system	Sistema de respuesta inato
Inner language	Lenguaje interno Auto lenguaje
Integration	Integración
Intelligence Quotient (IQ)	Coficiente Intelectual
Intelligence test	Prueba o Test de inteligencia
Intonation	Entonación
Inventory	Inventario
I.Q.	Coficiente intelectual
Itinerant teachers	Maestros itinerantes
Jaundice	Ictericia
Language disorder	Trastorno o desorden del lenguaje
Language pathologist	Terapista de Lenguaje
Lateral confusion	Confusión lateral
Laterality	Lateralidad
Learning disability	Problemas de aprendizaje

Learning handicapped	Impedimiento en el aprendizaje
Least Restrictive Educational Listening comprehension	El ambiente escolar menos restringido Comprensión auditiva
Literal comprehension	Comprensión literal
Long term memory	Memoria a largo plazo
Mainstreaming	Reingreso
Mandate	Mando o Mandato
Master Plan	Plan Maestro
Maturation lag	Retraso de madurez
Measurement	Medición
Meningitis	Meningitis
Mental Age	Edad Mental
Mentally Gifted	Niños Superdotados
Mentally Retarded	Retardado o Retrasado Mental
Mental Retardation	Retardación o Retraso Mental
Minimal Brain Dysfunction	Disfunción Cerebral Mínima
Modality-Processing Approach	Enseñanza via la Modalidad de Procesar
Mode	Modo
Morpheme	Morfema
Morphology	Morfología
Motor Development	Desarrollo motriz
Muscular dystrophy	Distrofia muscular
Myopia	Miopía
Native language	Lengua Materna

Neurological Exam	Examen neurológico
Neurophysiological	Neurofisiológico
Neuropsychological	Neuropsicológico
Nondiscriminatory testing	Examen o Test No Discriminativo
Nonverbal test	Test no verbal
Normalization	Normalización
Norm referenced test	Test en referencia a las normas
Normal curve	Curva hipotética de normalidad
Numerical ability	Habilidad numérica
Objective	Objetivo
Objective test	Test objetivo
Observation	Observación
Occupational therapy	Terapia ocupacional o vocacional
Ophthalmological	Oftalmológico
Ophthalmologist	Oftalmólogo
Organic	Orgánico
Orthopedically handicapped	Impedim_ ento ortopédico
Otologist	Otólogo
Paralysis	Parálisis
Paraprofessional	Paraprofesional
Patterning	Condicionamiento
Perception	Percepción
Perceptual disorder	Trastornos de percepción

Perceptual motor development	Desarrollo perceptivo motriz
Perinatal	Perinatal
Performance test	Test de ejecución
Perserveration	Perserveración
Personality Test	Pruebas de Personalidad
Petit mal	Petit mal
Pharynx	Faringe
Phenylketonia (PKU)	Fenilquetonuria
Phonation	Fonación
Phoneme	Fonema
Phonetic	Fonético
Phonology	Fonología
Physical therapy	Terapia física
Placement	Asignación
Poliomyelitis	Poliomelitis
Position in Space	Posición Espacial
Positive reinforcement	Reforzamiento positivo
Postnatal	Postnatal
Precision teaching	Enseñanza precisa
Prenatal	Prenatal
Prevalence	Predominio
Prognosis	Prognóstico
Program Specialist	Especialista de programas

Protocol	Protocolo
Psycholinguistic	Psicolingüístico
Psychologist	Psicólogo
Psychomotor epilepsy	Epilepsia psic_omotriz
Psychotic	Psicótico
Punishment	Castigo
Random-interval schedule	Programa de intervalo aleatorio
Random Sample	Muestra al azar
Range	Rango
Rapport	Rapport´
Raw Score	Puntaje Obtenido
Readability level	Nevel de la lectura
Readiness test	Test de disposición
Receptive language	Lenguaje receptivo
Recessive trait	Rasgos recessivos
Recognition	Reconocimiento
Referral	Referimiento
Rehabilitation	Rehabilitación, Reeducación
Reinforcement	Reforzamiento
Reliability	Confiabilidad
Remediation	Remediación, terapia, entrenamiento
Resonance	Resonancia
Resource Specialist	Especialista de Recursos

Response	Respuesta
Sample	Muestra
Schema	Esquema
Schizophrenia	Esquizofrenia
School Appraisal Team	Comité Escolar de Evaluación
School phobia	Fobia Escolar
School Social Work Service	Servicio de Trabajo Social Escolar
Score	Puntaje
Self-acceptance	Auto/aceptación
Self-concept	Concepto propio, autoconcepto
Self-direction	Autodirección
Self-esteem	Autoestimación
Sensorimotor	Sensomotriz
Sensory	Sensorial
Sensory-neuroal hearing loss	Pérdida auditiva sensorial
Sensory perception	Sensopercepción
Short term memory	Memoria inmediata o de termino corto
Skills sequence approach	Enseñanza de destrezas en sequencia
Social integration	Integracion social
Social perception	Percepción social
Social skills	Destrezas sociales
Soft neurological signs	Signos neurológicos leves
Sound blending	Síntesis, de sonido

Spacial perception	Percepción especial
Spasticity	Espasticidad
Spatial relations	Relaciones espaciales
Special class	Clase de educación especial
Special teacher	Maestro de educación especial
Speech Clinician	Terapista de lenguaje
Standard deviation	Desviación estandar
Standardized test	Test o prueba estandarizada
State aid	Ayuda Estatal
State institution	Hospital o institución estatal
State plan	Plan estatal
Strauss Syndrome	Síndrome de Strauss
Stigma	Estigma
Stimulus	Estímulo
Stuttering	Tartamudeo
Support Services	Servicios de Apoyo
Surrogate Parent	Padre Subrogado
Survey test	Test de escuestas
Stanine	Estanin
Syndrome	Síndrome
Syntax	Sintáxis
Synthesis	Síntesis
Tact	Tacto

Tactile	Tactil
Tactile perception	Percepción táctil
Tactile perception	Percepción táctil
Task analysis	Análisis de tarea
Temperament	Temperamento
Test	Test, Prueba, Examen
Therapy	Terapia
Time perception	Percepción del tiempo o noción temporal
Token economy	Economía de fichas
Token reinforcement system	Sistema de reforzamiento con fichas
Trauma	Trauma
Treatment	Mejoramiento, Tratamiento
Trial analysis	Análisis de intento
Trait	Rasgo
Underachiever	No trabaja a su nivel
Usage	Uso
Validity	Validez
Variable	Variable
Variance	Variación
Verbal expression	Expresión verbal
Verbal reasoning	Razonamiento verbal
Verbal test	Test o prueba verbal

Visual association	Asociación visual
Visual closure	El cierre visual
Visual fusion	Fusión visual
Visually impaired	Impedimento visual
Visual-motor	Motriz-visual
Visual perception	Percepción visual
Visual reception	Recepción visual
Visual sequential memory	Memoria de secuencia visual
Vocabulary	Vocabulario
Vocational Education	Educación Vocacional

APPENDICES

- **LIST OF EVALUATION INSTRUMENTS**

- **CERTIFICATE**

- ***FORMS**

***Each district would need to include their special education forms when training interpreters within their district.**

TESTING INSTRUMENTS

ACHIEVEMENT (LEVELS OF PERFORMANCE)

- Diagnostic Achievement Battery – 2
- Peabody Individual Achievement Test – R
- Woodcock-Johnson Psycho-Educational Battery – III
- Woodcock Language Proficiency Battery
- Key Math
- Woodcock Reading Mastery Tests
- Wide Range Achievement Test – R
- Kaufman: Test of Educational Achievement
- Diagnostic Achievement Test for Adolescents – 2

ADAPTIVE BEHAVIOR

- Conners Behavior Rating Scale
- Vineland Adaptive Behavior Scale
- Burks Behavior Rating Scale
- Behavior Evaluation Scale
- Adaptive Behavior Inventory
- Adaptive Behavior Evaluation Scale

EMOTIONAL/BEHAVIORAL

- Personality Inventory for Children
- Children's Thematic Apperceptive Test
- Rorschach
- Draw-a-Person
- House-Tree-Person

INTELLIGENCE (LEVELS OF ABILITY)

- McCarthy Scales of Children's Abilities
- Wechsler Intelligence Scales (WPPSI-R, WISC III, WAIS-R)
- Stanford-Binet-R
- Slosson Intelligence Test – R
- Raven Progressive Matrices
- Leiter International Performance Scale

- Columbis Mental Maturity Scale
- Kaufman Assessment Battery for Children
- Test of Nonverbal Intelligence – 2
- Cattell Infant Development Scales
- Battelle Developmental Inventory
- Birth to Three Assessment Inventory
- Developmental Profile II
- Kaufman Brief Intelligence Test

LEARNING COMPETENCIES (LEVELS OF LEARNING)

- Inventory of Readiness Skills
- Test of Early Language Development
- Expressive One Picture Vocabulary
- Peabody Vocabulary & Test – R
- Bender Visual Motor Gestalt Test
- Motor Free Visual Perception Test
- Wepman Test of Auditory Discrimination
- Goldman-Fristoe-Woodcock Test of Auditory Discrimination
- Receptive One Word Picture Vocabulary

SPEECH

- Wepman Auditory Discrimination
- Goldman-Fristoe Articulation Test
- Denver Articulation Screen
- Fluency Checklist
- Test of Auditory Comprehension of Language
- Test of Language Development (1)
- Say What I Say Test of Expressive Language
- Photo Articulation Test
- Fluharty Preschool Speech & Language Test
- Templin-Darley Test of Articulation
- Preschool Language Scale
- Test of Adolescent Language

OTHER TESTS TO BE ADMINISTERED

- Dvorine Pseudo-Isochromatic Plates

**CERTIFICATION
OF
INTERPRETER TRAINING**

I, _____, certify that the

Interpreter's Training Manual was reviewed with me on

_____ by _____
(date) (name of special education staff)

_____.
(title)

(signature of interpreter)

(signature of trainer)