

Understanding NC Special Education Policy for Evaluation and Eligibility of Autism Spectrum Disorder (ASD)

This document is to help parents and community members understand the current special education policy on the evaluation and identification of Autism Spectrum Disorder (ASD). The policy was approved by the North Carolina State Board of Education on September 5, 2019 and is **effective as of January 1, 2020**.

Note: This document contains only a summary of the policy. Please refer to [Policies Governing Services for Children with Disabilities](#) and respective citations provided throughout this document for the complete policy information.

- <https://ec.ncpublicschools.gov/policies/nc-policies-governing-services-for-children-with-disabilities>

What is ASD?



North Carolina Autism Spectrum Disorder (ASD) Definition:

- (i) Autism means a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three, which poorly affects a child's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotypical movements, restricted interests, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences.
- (ii) Autism does not apply if a child's educational performance is adversely affected primarily because the child has an emotional disability, as described in paragraph (c)(4) of this section.
- (iii) A child who manifests the characteristics of autism after age three could be identified as having autism if the criteria in paragraph (c)(1)(i) of this section are satisfied.



Resources on early warning signs of ASD

- Center for Disease Control - Milestone Checklist: https://www.cdc.gov/ncbddd/actearly/pdf/checklists/Checklists-with-Tips_Reader_508.pdf
- Center for Disease Control - "Learn the Signs. Act Early." Materials: <https://www.cdc.gov/ncbddd/actearly/freematerials.html>
- Autism Society of North Carolina - Autism Statistics and Signs: <https://www.autismsociety-nc.org/signs-statistics/>
- Autism Speaks - Learn the Signs: <https://www.autismspeaks.org/learn-signs-autism>

Child Find	
	<p><i>What is Child Find?</i></p> <p>(Federal Register 300.111; NC 1501-2.9; NC 1503-2.1)</p> <p>These are policies and procedures that ensure that all children with disabilities in North Carolina, ages 3-21, who need special education and related services, are identified and evaluated. School staff, parents, agencies and community programs who provide services to children can help by making a written referral (request) for a special education evaluation if they suspect that a child may have a disability.</p>
	<p><i>How do I express Child Find concerns?</i></p> <p>When parents, school staff, or other professionals suspect that a child may have a disability, they shall make a <i>written</i>* referral that:</p> <ul style="list-style-type: none"> • Describes their specific concerns about the child • Identifies the child's current strengths and needs. • Is given to the principal of the school, the child's teacher or other school professional, or the Superintendent or other appointed official of the LEA. <p><i>* If a parent makes an oral request for an evaluation, the school should provide any assistance needed to complete a written referral.</i></p>

What happens next?

After receiving a referral, the Public School Unit will hold a meeting to determine if a special education evaluation is needed. Parents are important members of the meeting and must give their consent before an evaluation can take place.

Screening/Evaluation: (NC 1500-2.29; NC 1500-2.11)

- A full evaluation of the child's needs must be conducted before any decisions are made about placing a child in a special education program for the first time,
- The decision about needed screenings and evaluations is based upon the unique needs of the student, and not solely on the requirements for the suspected disability category.

Evaluation Procedures: (NC 1503-2.5)







In the evaluation, the Public School Unit must use a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information about the child. This includes information provided by the parent that may assist in determining:



- Whether the child is considered to have a disability under NC 1500-2.4; and
- The content of an eligible child's Individualized Education Program (IEP). This includes information related to helping the child participate and succeed in the general education curriculum (or for a preschool child, to participate in appropriate activities).

Notes:

- Initial evaluations and consideration of eligibility for special education services must be completed within 90 days of referral.
- As part of the evaluation process (for initial evaluation and reevaluation), the IEP Team must review existing information which includes evaluations and information provided by the parents of the child.
 - Clinical evaluation reports provided by the parent provide relevant information but are different from school evaluations. Some information from the clinical evaluation may satisfy needed screenings and evaluations, but the school team may request and conduct screenings and evaluations based on policy requirements and the individual strengths and needs of the student.
- The updated policy does not change existing **reevaluation** policy/procedures. The IEP Team, which includes the parent, will meet, review their existing information and decide if they need additional evaluation information to determine continued eligibility or needed services. IEP Teams must use the most current eligibility criteria whenever eligibility is considered. Reevaluations must be completed by the student's three-year reevaluation due date.

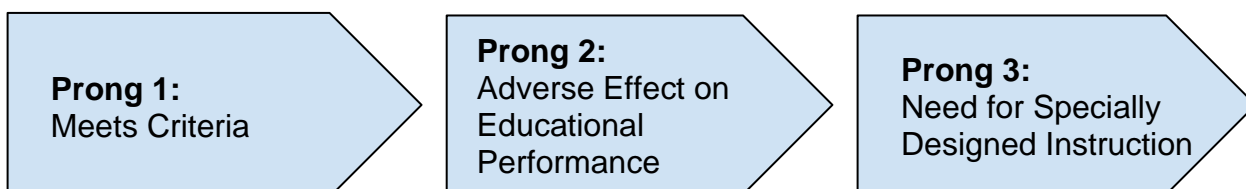
Required screenings and evaluations specific to ASD: (NC 1502-2.5)

	Vision and Hearing screenings
	Motor screening includes: 1) reviewing written and verbal information; 2) observing the child in a variety of settings; and/or, 3) administering screening instruments to see if the child's motor skills are adequate or if further evaluation is needed. Persons who screen motor skills are psychologists, specially trained teachers of children with disabilities including adapted physical education teachers, occupational therapists, physical therapists, and other health professionals.
	Observation across settings, to assess academic and functional skills
	Summary of meetings with parents or documentation of attempts to meet with parents
MODIFIED	Social/developmental history Note: The investigation of Autism Spectrum Disorder symptoms present in the early developmental period will rely on information about the child's functioning from birth to age 3 (when available).
	Educational evaluation
	Adaptive behavior evaluation
MODIFIED	Psychological evaluation. It is not necessary to get an overall intellectual score and this should be considered on a case-by-case basis. Note: This modification acknowledges that an overall intellectual score provides meaningful information <u>only</u> when there is minimal scatter across measured abilities. Children with ASD often have cognitive skills that vary widely.

	<p>Sensory processing evaluation</p> <p>Sensory evaluations are performed by occupational therapists. A sensory processing evaluation looks at how a student's current level of sensory processing impacts how they engage in a wide range of activities and participate at school. This information may be gathered in several ways: 1) review of educational and medical records; 2) interviews with the student, teachers, parents, and others; 3) detailed observations; and, 4) the administration of formal tests. A sensory processing evaluation should include, but is not limited to, the areas listed below as appropriate: (i) intensity of response to various sensory experiences, including sight, sound, smell, taste, touch and movement, and (ii) sensory-motor coordination</p>
	<p>Speech-language evaluation which includes, but is not limited to, measures of language semantics and pragmatics (the ability to use language for a variety of purposes, including social interaction).</p> <p>Note: A thorough evaluation in this area is necessary when exploring the eligibility category of ASD. This includes a complete look at pragmatic skills in addition to syntax, semantics, phonology, and morphology. The evaluation should use, if possible, a variety of non-standard, curriculum-based, and standard assessment tools.</p>
<p>MODIFIED</p>	<p>Behavioral assessment related to Autism Spectrum Disorder:</p> <p>An assessment conducted by trained and knowledgeable personnel <i>using behavior rating tools that measure the range of characteristics associated with Autism Spectrum Disorder</i>, providing information about the child's functioning across environments. Individually administered instruments that assess characteristics associated with ASD may be included.</p>

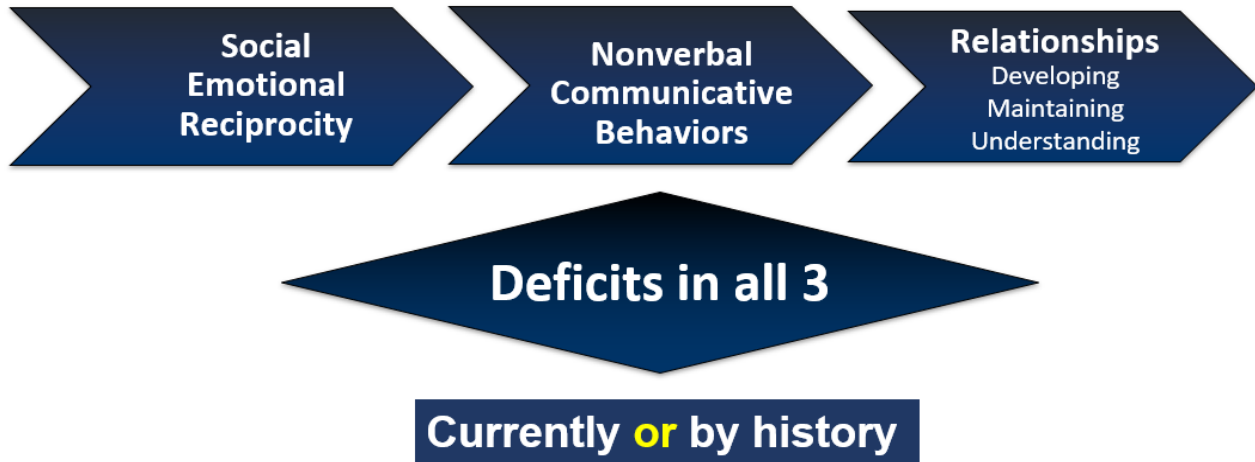
Determination of Eligibility: (NC 1503-2.7)

- A team that includes qualified professionals and the parent, determines whether the child qualifies for special education services.
- The team must carefully consider information from a variety of sources. This may include aptitude and achievement tests, parent input (e.g., outside evaluations, medical reports, etc.), and teacher recommendations. Information about the child's physical condition, social or cultural background, and adaptive behavior may also be considered.
- For a child to be eligible, the team must determine that the child meets the criteria for one or more of the fourteen disabling conditions, that the disability has an adverse effect on educational performance, and that the child is in need of specially designed instruction. This is often referred to as "the three prongs" for eligibility determination.



To be determined eligible in the disability category of Autism Spectrum Disorder, the following must be demonstrated currently or by history:

- (A) Persistent deficits in social communication and social interaction across multiple settings, and displayed in ALL THREE of the following:



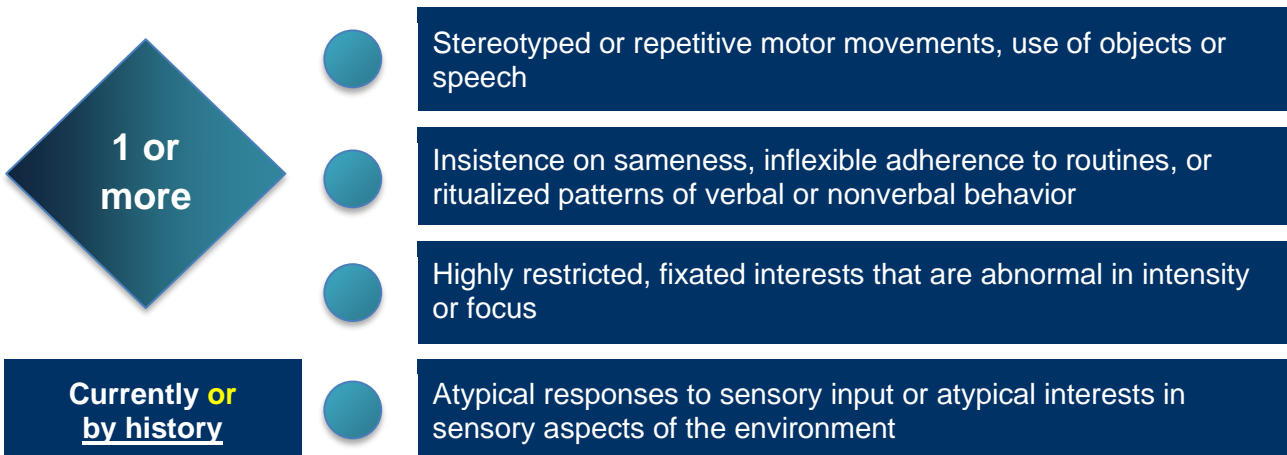
Examples of deficits in **social-emotional reciprocity** may include abnormal social approach and failure of normal back-and-forth conversation, reduced sharing of interests, emotions, or affect, overly social response/interaction or failure to initiate/respond to social interactions.

Examples of deficits in **nonverbal communicative behaviors** used for social interaction may include poorly incorporated verbal and nonverbal communication, abnormalities in eye contact and body language, deficits in understanding and use of gestures or lack of facial expressions and nonverbal communication.

Examples of deficits in **developing, maintaining, and understanding relationships** may include difficulties adjusting behavior to suit various social contexts, difficulties in sharing imaginative play or in making friends, absence of interest in peers.

AND

- (B) Restricted, repetitive patterns of behavior, interests, or activities, demonstrated by one or more of the following:





- IEP Teams should be aware that students may use strategies (learned or developed) to suppress stereotypical and or repetitive behaviors in the school environment, which then manifest in other ways or in other environments. Restricted interests are sometimes more subtle in girls as they may not be “unusual” as much as they are restricted.
- When considering atypical sensory responses. IEP teams should consider both under-responsivity and over-responsivity.

AND

(C) Symptoms generally present in the early developmental period, (but may not show up until social demands exceed coping capacities or may be masked by learned strategies in later life). A child who manifests the characteristics of autism after age three could be identified as having Autism Spectrum Disorder if the criteria in (A) and (B) are satisfied.

Prong 2
Adverse
Effect

The disability must have an adverse effect on educational (academic and/or functional) performance



Areas to consider include, but are not limited to:

Academic performance	Communication functioning
Social functioning	Pragmatic language
Organizational skills	Group work skills
Problem solving skills	Emotional regulation
Hygiene	Behavior
Attention challenges	Daily living skills/adaptive behavior
Transition	

Prong 3
Need for SDI

The disability must require specially designed instruction.

Specially designed instruction means adapting the content, method, or delivery of instruction—

- To address the unique needs of the child that result from the disability; and
- To ensure the child has access to the general curriculum,

IDEA Part 300(A)300.39; NC 1500-2.34(b)(3)

**Rule
Outs**

A child must not be determined to be a child with a disability if the primary factor for that determination is:

- Lack of appropriate instruction in reading or math; or
- Limited English proficiency.



Based on the federal and state definition, Autism Spectrum Disorder does not apply if a child's educational performance is negatively impacted mainly because of an emotional disability.

Individualized Education Program (IEP): (34CFR 300.320(a)(4) and NC 1503-4.1)

For an eligible child, the IEP includes a statement of the special education and related services, and supplementary aids and services, to be provided to the child. These should be based on proven research to the extent practicable.

Important! A student's eligibility category does not determine how they are served! Special education services are determined by the IEP Team, based on the student's unique strengths and needs.

Placement Decisions: (NC 1501-3.3)

The educational placement of a preschool or school-age child with a disability is made by the IEP Team, which includes the parents and other persons who have knowledge about the child, the meaning of the evaluation data, and the placement options, including Least Restrictive Environment.

What happens to students who are not eligible for special education services?

Eligibility for special education and related services within public schools is distinct and separate from a **diagnosis** of ASD from a community provider. When a child is not eligible for special education, it does not mean that the school does not accept their diagnosis.

Students who are not eligible for special education services may be helped by:

- Interventions provided through a school's multi-tiered system of support (MTSS) or a similar process that matches strategies and resources to students' academic or social-emotional needs.
- Accommodations and/or supports provided through Section 504 of the Rehabilitation Act (if determined eligible for Section 504)
 - [Parent and Educator Resource Guide to Section 504](#)

*** If you have a child with ASD, meet with school staff to discuss the available resources and supports.**

For more information, contact the EC staff at your child's school, or Exceptional Children's Assistance Center (ECAC) 1-800-962-6817 www.ecac-parentcenter.org.

ECAC is an independent organization, staffed by parents of disabilities. ECAC helps families navigate the special education system. All services for families are free.