

Mandated Special Education Assessments During the Covid-19 Shut Down

At this time there is a great deal of uncertainty and many questions regarding how California School Psychologists should proceed with respect to mandated Special Education assessments. Given this unprecedented situation, CASP is recommending the following answers to questions received from our membership based on Federal and State laws, regulations and best practices of the profession of school psychology.

1. Question: Should school psychologists be conducting any initial or triennial testing that has been designed and normed to be administered in person?

Answer: No. In an effort to ensure public safety, California has instituted a shelter in place order and public schools are to remain closed for the rest of this academic school year. While distance learning can and should take place, standardized testing should not. The instruments used by school psychologists (cognitive ability/intelligence tests, processing tests, neuropsychological tests, achievement tests, etc.), have not been normed or validated to be used under these conditions. Telehealth testing that has been validated requires a trained on-site proctor to be in the room with the student to:

- 1. Verify the positioning and functioning of the technological requirements;
- 2. Verify the ambient environmental conditions;
- 3. Verify confidentiality/privacy condition; and
- 4. Properly proctor the exam.

For further information see Rationale 1 below.

2. Question: I see online test company(s) saying their tests are reported to be reliable and valid. Should we be using these companies?

Answer: No. There are testing companies using tests that are online only, claiming to be based on a current theory of cognitive ability (Cattell-Horn-Carroll) and purporting to be reliable and valid. Upon close inspection, the cognitive abilities these tests measure are only fluid and crystallized abilities, while some other assessments appear to be designed to measure processing areas such as attention and/or processing speed. These limitations are a problem in California as their battery of online only tests would leave out several basic processing areas required under CCR 3030(b)(10) such as: visual processing, auditory processing, phonological processing, sensory-motor skills, and significant aspects of cognitive association, conceptualization and expression, therefore a comprehensive evaluation cannot be completed. For further information see Rationale 2 below.



3. Question: What can school psychologists do regarding Special Education assessments and IEP meetings in the meantime?

Answer: While a district is in shelter in place, we recommend that the school psychologist consult with district/school administrators to determine assessment priority. Some possibilities to consider:

- 1. Complete as much of any open signed initial and triennial assessments you are able, which may include background review, writing observations and interviews that have already been conducted, and completing reports of assessment results that have already been collected.
- 2. Complete triennial assessments that can be conducted as a record review per district policy and parent consent.
- 3. Conduct record reviews on any initial evaluation plans that were being developed (not signed) prior to the shelter in place in preparation for them being signed as soon as the policy is lifted.
- 4. Conduct as many initial, triennial IEP meetings as are possible until the end of the academic year per district policy on distance meetings to ensure confidentiality and informed consent. As well as continue to process 1-3.

4. Question: Everyone is just so focused on assessments and IEPs, what else can we be doing?

Answer: CASP acknowledges that catching-up with mandated assessments and IEP meetings can take precedence because they are mandated activities. However, as school psychologists we are more than just Special Education assessors. Initially, we may be called upon to help counsel staff, students, and families to help them manage continued psychological and emotional turmoil stemming from pre-crisis issues (and or exacerbated by crisis), or caused by the crisis, and to help students re-integrate into school. You also may be called to provide resources, many of which you can find on CASP's website and NASP's website.

During the current crisis we can revive some neglected knowledge and skills as well as take the opportunity to gain new skills and knowledge through self-study and online webinars. During online meetings with our fellow educators we can reintroduce to them the vast training and services that school psychologists can offer beyond Special Education. While attention to crisis intervention might be needed right away, the importance of and need for developing resiliency as well as crisis prevention may be more embraced. Other school-wide prevention programs may be considered, such as Positive Behavioral Interventions and Supports (PBIS) or Social Emotional Learning (SEL). School psychologists are ideal personnel to take leadership roles in these undertakings.

5. Question: What are we to do once we are allowed back in schools? I feel like a flood is coming and I want to be prepared for it.

Answer: Catching up with all of these and other assessments, even with delayed timelines, will be stressful. CASP wants to remind all school psychologists that this is a good opportunity to review your assessment practices. For example, are you over-testing (i.e. can data be obtained in other ways)?



Are you effectively utilizing your multi-disciplinary team members (i.e. delegating aspects of the assessment plan)? Are you able to complete collaborative report writing using online technology (i.e. learned during shelter in place)?

When a district's shelter in place policy has been lifted and school psychologists can conduct inperson assessment with students again, we recommend that the school psychologist consult with district/school administrators to determine assessment priority. Some considerations:

- 1. Complete/finish any signed initial and triennial assessments.
- 2. Begin initial assessments of students whose school staff recognize there is an urgent need as soon as possible.
- 3. Begin assessments of students who come from outside of the district and who, based on their current IEPs, do not appear to be appropriately placed.
- 4. Review any initial assessment plans that were in development prior to shelter in place, including preschool transition evaluations that had been put on hold (in order of birthday oldest child first).
- 5. Complete triennials in order of due date (oldest past due is first).
- 6. Question: What happens to timelines once schools are back in session? We are very concerned with the backlog of testing (and therefore incomplete assessments and delayed initial and triennial IEPs) and getting them done within the existing timelines. Some of us were understaffed prior to the crisis, so this will definitely exacerbate the problem.

Answer: CASP's executive committee is also very concerned and taking this issue up within the state hierarchy. CASP is making the recommendation that during and after this pandemic (and future disasters impacting LEAs for lengthy periods of time) the authorities extend timelines. The US Department of Education has reminded us all that while they do not have the authority to change IDEA, the states have the ability to amend this section of Ed Code.

7. Question: CDE, as part of its "Special Education Guidance for COVID-19" asks and answers the following question:

"What should an LEA do if it has closed school sites due to COVID-19 and is unable to meet the obligation to have an IEP or an Individual Family Service Plan (IFSP) in effect for a child transitioning from Part C to Part B no later than the child's third birthday?

34 C.F.R. §§ 300.101(b) and 300.124(b) require that an IEP or IFSP is developed and is being implemented by the third birthday of a child participating in Part C programs and who will participate in Part B preschool programs. The U.S. Department of Education has not waived or exempted this requirement. Either an IEP or IFSP must be developed and implemented by the child's third birthday. To meet this obligation, teams may conduct meetings virtually via telephone, videoconference, or other means."



This statement from CDE implies that the assessment (testing) has to be completed because it is required that an IEP or IFSP is developed and is being implemented by the third birthday. How can we complete our testing to be able to develop and implement an IEP or IFSP by a child's third birthday, as the COVID-19 shelter in place will go at least through the end of this academic year 2019-2020?

Answer: CASP acknowledges that a significant portion of preschool assessment includes activities that do not have to be done in person: a thorough review of records including the latest IFSP assessment report, recent health/medical reports, and other relevant service provider reports; conducting interviews and filling out questionnaires with IFSP team members and parents. However, if the assessment team feels it cannot collect meaningful data, such as in situations where direct face to face testing and observations need to be done, the preschool assessment team will have the same problem as the k-12 school psychologists in the answer to question 1. Often it is during face to face testing and observations that assessment teams are able to observe parent-child interactions and how the child interacts with their environment to inform estimations of language, pre-academic and cognitive ability, and social-emotional development.

Therefore, it is recommended that the LEA hold a transition IEP for children receiving early start services before their 3rd birthday and adopt the goals and services of the IFSP until an in-person assessment can be completed and special education eligibility can be properly determined. This ensures students are documented as being served by the district and they now have a method to keep track of them.

OSEP's March 21, 2020 guidance titled "Supplemental Fact Sheet Addressing the Risk of COVID-19 in Preschool, Elementary and Secondary Schools While Serving Children with Disabilities," provides the following:

"Initial eligibility/Individual Family Service Plan (IFSP)
Under 34 C.F.R. §303.310, the initial evaluation and assessments of child and family, as well as the initial IFSP meeting, must be completed within 45 days of the lead agency receiving the referral. However, under 34 C.F.R. §303.310(a), the 45-day timeline does not apply if the family is unavailable due to "exceptional family circumstances that are documented" in the child's early intervention (EI) records."

"The Department [US Department of Education] has previously provided guidance to states indicating that weather or natural disasters may constitute 'exceptional family circumstances.'" The COVID-19 pandemic could be considered an "exceptional family circumstance." Which is consistent with our answer to question 1, because these identified assessments cannot be completed.

CASP recognizes the important fact that these children have been receiving services from the Department of Developmental Services or Regional Centers before they turned three years old. Because of this, it is highly recommended that LEAs, DDS and RCs hold remote/distance IEP transition meetings with parents to discuss the continuation of IFSP services. This could lead the



DDS, RC or LEA in good faith, to continue with goals and services outlined in the latest IFSP once the child turns three years old. DDS and RCs, like LEAs, are having to modify service delivery and make accommodations to provide services throughout the distance learning required by the county health department for the protection and safety of all children's health. This continuation of IFSP service would continue until the LEA can complete the required assessment to determine eligibility for an IEP and, if found eligible, develop appropriate goals and provide service.

For LEAs that are going to be providing this service coverage, as well as providing services for their own preschool programs, The Early Childhood Technical Assistance Center has <u>some videos</u> on how they are providing service which give ideas for service delivery that LEAs could modify and implement for their programs.

In conclusion please remember to stay safe and take care of your physical and mental health.

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Rationale

1. Under current circumstances, even Presence Learning Inc., trained school psychologists would not be able to administer these tests as their trained proctors would not be able to attest to examinee-side conditions. "The physical and mechanical setup on the examinee's side is extremely important. The examinee should be working on a computer with no smaller than a 15-inch screen, with a headset with a microphone and a separate mouse (not a track pad). The examinee should have a reliable, high speed internet connection (upload and download speeds of at least 500 kbps, though optimally broadband). He or she should be seated in a space that has the computer screen and mouse close enough to comfortably respond to stimuli, but also has some space for writing on the tests that require it. The examinee's space requires two cameras. The first one must be high definition and pointed at the student's face (this allows for connection to be developed, as well as facial behavioral observations to be observable by the examiner). The second must be a high-quality document camera that is pointed at the examinee's writing workspace. This camera must be a high-quality document camera in order for the quality to be good enough to clearly see and score written items (such as on the Spelling test)."

"Pearson and its Q-Interactive system were designed to use technology to administer assessments, but not virtual delivery through telehealth. Third party providers, such as Presence Learning, have been given the exclusive rights to develop online administration of the Woodcock-Johnson IV assessments, for which online assessment is the primary focus...Presence Learning, a company that has the sole exclusive provider rights to online administration of the Woodcock-Johnson IV assessments, provides training for both the school psychologist and the aide who is in the room with the student. Presence Learning also requires the use of specific technological platforms that are HIPAA-compliant to ensure confidentiality, speed, bandwidth, pixel/clarity, and high-quality sound. Other companies provide less guidance and training." From "Considerations for Delivery of School Psychological Telehealth Services" National Association of School Psychologists and echoed in Table 1. Specific Telepractice Considerations by WISC-V Subtest from Pearson.

Also, Pearson informs, "During the COVID-19 pandemic, however, the only facilitator available may be someone in the examinee's home. If using an onsite facilitator who is not in a professional role (e.g., parent/guardian), the examiner should use their professional judgment about the capacity of the facilitator to perform the required functions correctly and without interfering in the testing session." This exercise of professional judgment places the school psychologist in the inappropriate position of having to evaluate not only the parent's level of competence with technology from a distance, but the parent's ethics as well (e.g. will this parent be able to stop themselves from helping their child who is struggling with an answer.) "If the onsite facilitator is a parent/guardian, follow the guidelines outlined in the administration and scoring manual regarding the presence of a parent or guardian in the room to ensure adherence to standard administration procedures. As specified in the manual ["As a rule, no one other than you and the child should be in the room during testing. Try to administer the test to the child without an accompanying adult (e.g., parent or guardian) present. Some children may be accustomed to being alone with a stranger and may be fearful or shy. On rare occasions, and at your discretion, an accompanying adult may be permitted in the room to facilitate



testing. Advise him or her to sit quietly (preferably reading) in the background and out of the child's view. Instruct the accompanying adult to remain silent throughout the test and to refrain from urging the child and from repeating or rewording any questions. If necessary, assure the parent or guardian that you will meet with him or her after testing to answer questions and to discuss the child's performance." page 21 of WISC-V Administration and Scoring Manual], it is very rare that the parent/guardian stays in the room during testing." Given the current physical restrictions, there is no way for a school psychologist to be certain that "The parent/guardian may only make audiovisual adjustments and, if deemed appropriate, manage response booklets," or be able to ensure, "The onsite facilitator can play an even more limited role without managing response booklets if necessary. For example, the facilitator may operate audiovisual equipment only."

2. Please see 5 CA ADC § 3030, available at:

https://govt.westlaw.com/calregs/Document/I373AB03442904938AF3AC9CC81652730?viewType=FullText&originationContext=documenttoc&transitionType=CategoryPageItem&contextData=(sc.Default)



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