**SCHOOLS**

**SPECIAL EDUCATION DEPARTMENT**

 New Mexico

**ELIGIBILITY DETERMINATION FOR REEVALUATION**

**Other Health Impairment**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | **Student Number:** |  |
| **Date of Birth:** |  | **Registered School:** |  |
| **Age** (at time of REED) |  | **Residence School:** |  |
| **Exceptionality:** |  | **Grade:** |  |
| **Gender:** |  | **Number of Retentions:** |  |
| **Parent/Guardian:** |  | **Ethnicity 1:** |  |
| **Address:** |  | **Ethnicity 2:** |  |
|  |  |  |  |
| **Home Phone:** |  | **Home Language:** |  |
| **Other Phone:** |  | **Student’s Primary Language:** |  |
| **Date of Consent:** |  | **Date of Reed:** |  |

Other health impairment (OHI) 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 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, sickle cell anemia, and Tourette Syndrome; and adversely affects the child’s educational performance. (34 CFR Sec. 300.8(c)(9))

The NMPED highly recommends that the Eligibility Determination Team (EDT) use the following information in determining continued eligibility under the category of other health impairment.

**Review of evaluation data.** The EDT reviewed and/or completed the following evaluations and/or assessments as part of the reevaluation process according to the recommendations established in the NM TEAM (2011):

[x]  current classroom-based, short-cycle, and/or state assessments Date:

[x]  classroom-based observations Date:

[x]  observations and information provided by teachers and related service providers Date:

[x]  observations, information, and/or evaluations provided by the child’s parents Date:

[ ]  Other assessment information included:

[ ]  academic achievement assessment Date:

[ ]  behavior rating scales/checklists Date:

[ ]  direct observations across multiple settings Dates:

[ ]  functional behavioral assessment Date:

[ ]  transition assessment, as appropriate Date:

[x]  other \_Date:

[ ]  other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

[ ]  other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

**Determine the continued presence of a disability**. The assessment and evaluation data documented above must demonstrate that the child continues to be a child with other health impairment according to the requirements of IDEA (34 CFR Sec. 300.8(c)(9)). The questions below should be answered to help the EDT determine whether or not the child continues to have a disability as defined by IDEA (2004).

1. Has the EDT determined that the assessment and evaluation data demonstrate that the child continues to be a child with other health impairment as defined by IDEA (2004)? [ ]  YES [ ]  NO

Documentation:

√ If answered NO, the child is no longer eligible under the other health impairment category.

2. Has the EDT determined that no other eligibility category better describes this child’s disability? [ ]  YES [ ]  NO

Documentation: **OHI is his secondary exceptionality due to seizure disorder.**

√If answered NO, the child is no longer eligible under the other health impairment category.

NOTE: There are no specific reevaluation eligibility criteria, therefore, it is up to the EDT to determine whether or not the child continues to have a disability, based on the REED process. However, if upon review of existing and newly gathered evaluation data (as appropriate), there is consideration of a change or addition of eligibility, the EDT must follow the guidelines and procedures for initial eligibility for the newly considered eligibility category.

**Determine continued need for specially designed instruction**. The assessment and evaluation data documented above must demonstrate that the child continues to require specially designed instruction as a result of the disability according to the requirements of IDEA (34 CFR Sec. 300.39(b)(3)). The questions below should be answered to help the EDT determine whether or not the child continues to require specially designed instruction as defined by IDEA (2004).

To answer the following questions, the EDT should consider (a) the child’s present levels of academic achievement and functional performance, (b) the child’s educational needs, and (c) any necessary changes to the child’s educational program.

1. As a result of the disability, does the child continue to require specially designed instruction in order to be involved in and make progress in the general education curriculum or developmentally appropriate activities, as appropriate? [ ] YES [ ]  NO

Rationale/Documentation:

2. As a result of the disability, does the child continue to require specially designed instruction in order to participate in extracurricular and other nonacademic activities? [ ]  YES [ ]  NO

Rationale/Documentation:

3. As a result of the disability, does the child continue to require specially designed instruction in order to be educated and participate with other children with and without disabilities? [ ]  YES [ ]  NO

Rationale/Documentation:

√Answering “yes” to one or more of the above statements (1, 2, 3) indicates that the child continues to needs specially designed instruction.

**Determination of continued eligibility for special education and related services.** The EDT has reviewed the referral and evaluation sources relevant to this child and has made the following determination:

[ ]  The child continues to be eligible under the eligibility category of other health impairment.

[ ]  The results of the evaluation documents that the child continues to be eligible for and in need of special education services under the eligibility category of other health impairment as defined by IDEA (2004).

[ ]  The child is no longer eligible under the eligibility category of other health impairment.

[ ]  The results of the evaluation indicate that the child no longer has other health impairment as defined by IDEA (2004), and the child is not eligible for special education and related services under any other eligibility category.

[ ]  The results of the evaluation indicate that the child no longer has other health impairment as defined by IDEA (2004), but the child is eligible for special education and related services under the category of \_\_\_\_\_\_\_\_\_\_\_. (Complete appropriate eligibility determination form for that category.)

[ ]  The results of the evaluation indicate that the child has other health impairment as defined by IDEA (2004); however, the EDT has determined that the eligibility category of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (as defined by IDEA, 2004) better describes the child’s primary disability that results in a need for specially designed instruction. (Complete appropriate eligibility determination form for that category.)

[ ]  The results of the evaluation indicate that although the child has other health impairment as defined by IDEA (2004), the EDT has determined that the child’s educational needs can be met without specially designed instruction.

[ ]  The EDT is unable to determine continued eligibility under the eligibility category of other health impairment. The following information is needed in order for the EDT to reconvene and make a continued eligibility determination:

[ ]  Current classroom-based observations/assessments

[ ]  Additional information from:

[ ]  Additional assessments in the following areas:

[ ]  Other:

**Española Public Schools – Special Education Department**

 **Prior Written Notice of Proposed Actions**

Federal and State Legislation require that the public agency provide the parent/guardian with notification a reasonable amount of time before actions occur that would initiate or change the identification, the evaluation, the educational placement or the provision of a free appropriate public education for this student. If the student is under 18 the parent/guardian is provided a copy of this notice. If the student is 18 years of age or over and does not have a legal guardian, it is his/her right to accept or refuse these proposed actions.

At this EDT meeting, the following proposals were made by the **public agency** and/or the **parent(s)/guardian(s)**.

|  |  |  |  |
| --- | --- | --- | --- |
| Proposal | Accept | Reject | Rationale |
| Parent was given a copy of the Procedural Safeguards | [x]  | [ ]  | Parents accepted and had no questions at this time regarding parental rights.  |
| Parent was given a copy of the REED report and the results were reviewed with the parent. | [x]  | [ ]  | To ensure parent understands the REED report and has a thorough understanding of the eligibility requirements. |
| Parent was informed of their right to request an assessment to determine if student continues to be eligible and in need of special education and related services. | [x]  | [ ]  | Parent agreed that enough data was available and further testing was not necessary at this time. |
| Student continues to qualify as a student with Other Health Impaired (OHI). | [x]  | [ ]  | REED information and EDT determined that student continues to qualify for special education services and continues to require accommodations, modifications and specially designed instruction to be successful in the general education classroom.  |

 **Meeting Participants**

|  |  |  |
| --- | --- | --- |
| Title/Name | Signature | Date |
| Parent/Guardian |  |  |
| Parent/Guardian |  |  |
| Student |  |  |
| Special Education Teacher |  |  |
| General Education Teacher |  |  |
| District Representative/Principal |  |  |
| Educational Diagnostician/Qualified Interpreter of Evaluation Report Results  |  |  |
| Other |  |  |
| Other |  |  |
| Other |  |  |