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## Assessing Academic Needs and Partnering With Schools for Children with Neurological Disorders

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The [video of the following presentation](#) has been made available for free by UT Health Austin Pediatric Neurosciences at Dell Children's at:

<https://youtu.be/Cm0h3Hw0SY?feature=shared>

To see all event presentations, please use this link for the 6<sup>th</sup> Annual Practical Pediatric Neuroscience Symposium [presentation playlist](#):

<https://youtube.com/playlist?list=PLPPnZ7QxWdeR-cpRyBnU2C2eEVh1bW1YR&feature=shared>

# Interprofessional Continuing Education

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***Karen Evankovich, PhD***

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# Objectives

- Recognize the process by which children with neurological disorders are deemed eligible for school supports and services
- Identify the ways academic needs are determined and accessed
- Describe the continuum of educational supports and services available in schools
- Share a list of resources that you or your patients' families may find helpful

# Steps for Determining School Supports

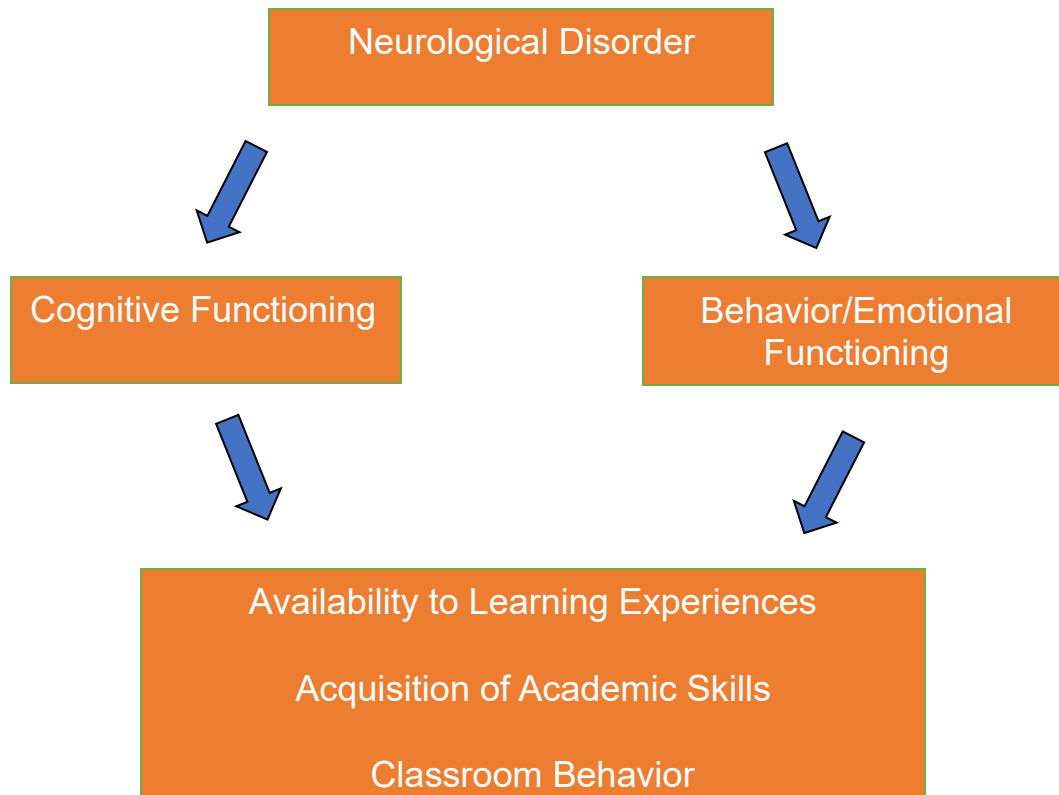
Neurological  
Disorder



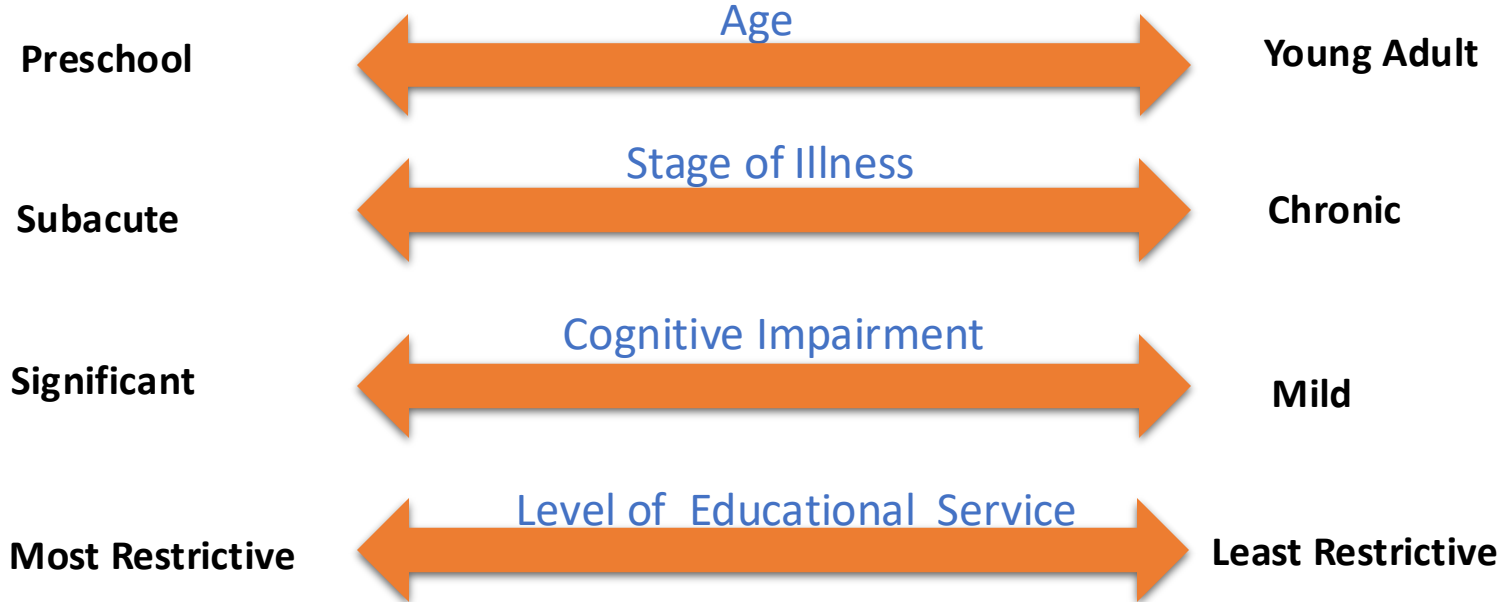
Educational  
Need

1. Does the student meet eligibility criteria for a disability?
1. Are there educational needs resulting from the disability?

# Neurological Disorders & the Development of Educational Needs



# Factors Related to Variability in Educational Need





# Components of a Neuropsychological Evaluation

## Direct Assessment of the Child

- Intelligence
- Language
- Visual-Spatial Ability
- Fine Motor/Visual-Motor Skills
- Memory
- Attention
- Processing Speed
- Planning and Organization
- Academic Skills
- Emotional Functioning

## Information from Parents & Teachers

- Behavioral Functioning
- Social-Emotional Functioning
- Academic Functioning
- Adaptive Functioning



# Partnering with Schools: The Full and Individual Evaluation

## Full and Individual Evaluation (FIE)

The child is assessed in all areas of concern:

The parent's request in writing triggers these timelines:

- 15 school days to provide parents with an opportunity to give written consent for the FIE
- 45 school days to conduct the FIE after receiving signed consent from the parent
- 30 calendar days after completing an evaluation to schedule an Admission, Review, & Dismissal (ARD) meeting to review the results to determine eligibility and develop the Individualized Education Program (IEP)



# Example FIE Request Letter

Date:

School Name:

School District:

Dear Campus Administration and SPED Coordination Team:

I am the parent of \_\_\_\_\_ (Date of Birth: \_\_\_\_\_), a student at your school. My child's medical team at Dell Children's Neurosciences and I have concerns that my child may have a disability and is in need of special education services. I am requesting that my child be assessed for both special education under the Individuals with Disabilities Education Act (IDEA) as well as whether they have a disabling condition under Section 504 of the Rehabilitation Act.

I am requesting a full individual evaluation of my child and understand that there are specific timelines I can expect per IDEA. I am also requesting that general education interventions, such as Response to Intervention (RtI), be done concurrently with the assessment process so as to not delay the evaluation of and implementation of services.

I would like to provide my written consent for this evaluation at the time this letter is submitted to your team so we may continue onto the next step in the evaluation process.

I appreciate your assistance and look forward to partnering with your team.

Sincerely,

Printed Name:

My direct contact information (phone, email, postal address):



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# 13 Educational Conditions

*Does the student meet eligibility criteria for a disability?*

- Other Health Impaired (OHI)
- Traumatic Brain Injury
- Orthopedic Impairment
- Deaf/Hard of Hearing
- Visual Impairment Including Blindness
- Deaf-Blindness
- Speech or Language Impairment
- Specific Learning Disability
- Intellectual Disability
- Autism
- Multiple Disabilities
- Emotional Disturbance
- Noncategorical Early Childhood



## Other Health-Impaired Eligibility

### “OHI Form”

- ADHD
- Medical Conditions

### Needs Physician Signature

#### Physician's Report: Other Health Impaired

Student: \_\_\_\_\_ Permnum: \_\_\_\_\_

School: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

PROFESSIONAL EVALUATOR: Licensed Physician (specialty): \_\_\_\_\_

Please check one of the following:

- ☐ NO impairment exists.
- ☐ Impairment **DOES NOT** adversely affect educational performance.
- ☐ Based on my examination, the student appears to have 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 and which adversely affect the student's educational performance

Type of Impairment (i.e., diagnosis):

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> ADHD: type _____ | <input type="checkbox"/> Sickle Cell Anemia | <input type="checkbox"/> Tuberculosis    |
| <input type="checkbox"/> Heart Condition  | <input type="checkbox"/> Diabetes           | <input type="checkbox"/> Rheumatic Fever |
| <input type="checkbox"/> Asthma           | <input type="checkbox"/> Epilepsy           | <input type="checkbox"/> Cancer/Leukemia |
| <input type="checkbox"/> Hemophilia       | <input type="checkbox"/> Lead poisoning     |  |
| <input type="checkbox"/> Nephritis        |   |  |
| <input type="checkbox"/> Other: _____     |   |  |

#### EDUCATIONAL IMPLICATIONS

Functional implications of the impairment **at school** (e.g., precautions regarding the student's mobility, activity, cognitive ability, need for rest periods and special equipment, effects of any medication, need for medical updates):

- ☐ may require assistance or additional time to accomplish self-help skills (i.e., feeding, dressing, toileting)
- ☐ difficulty performing activities within the classroom (i.e., cutting, writing, etc.) and may require special adaptations to the regular program including: \_\_\_\_\_
- ☐ difficulty maintaining alertness in the classroom: \_\_\_\_\_
- ☐ difficulty transferring on and off the bus independently
- ☐ difficulty with mobility and seating within a general classroom: \_\_\_\_\_
- ☐ may require additional rest periods: \_\_\_\_\_
- ☐ taking the following medication(s): \_\_\_\_\_
- which is/are expected to have the following effects on classroom functioning: \_\_\_\_\_
- \_\_\_\_\_
- ☐ seizure precautions: \_\_\_\_\_
- ☐ dietary restrictions: \_\_\_\_\_
- ☐ other: \_\_\_\_\_

Sources of educational information relied upon to make this determination:

Signature of Licensed Physician: \_\_\_\_\_ Name (please print): \_\_\_\_\_




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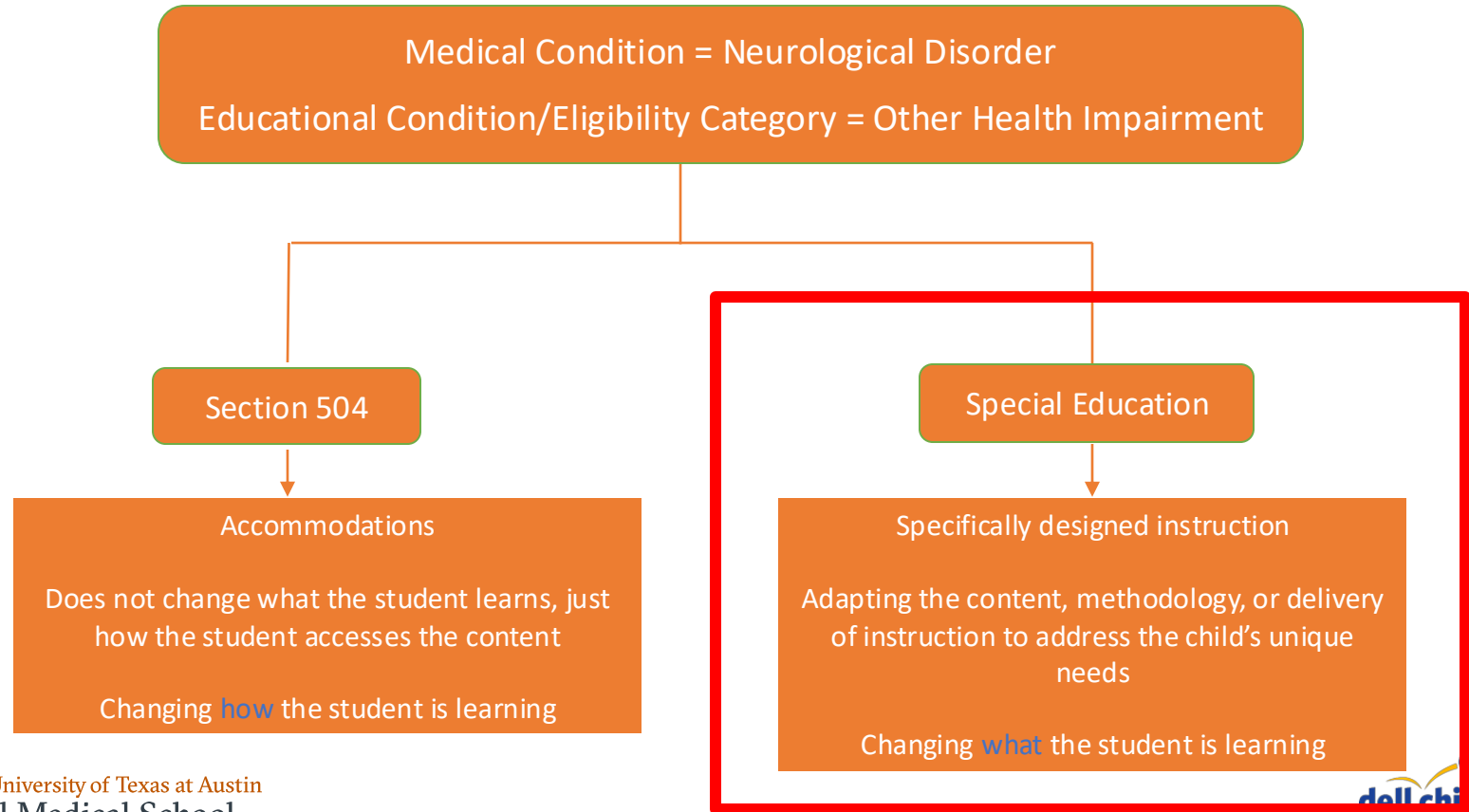


# Special Education:

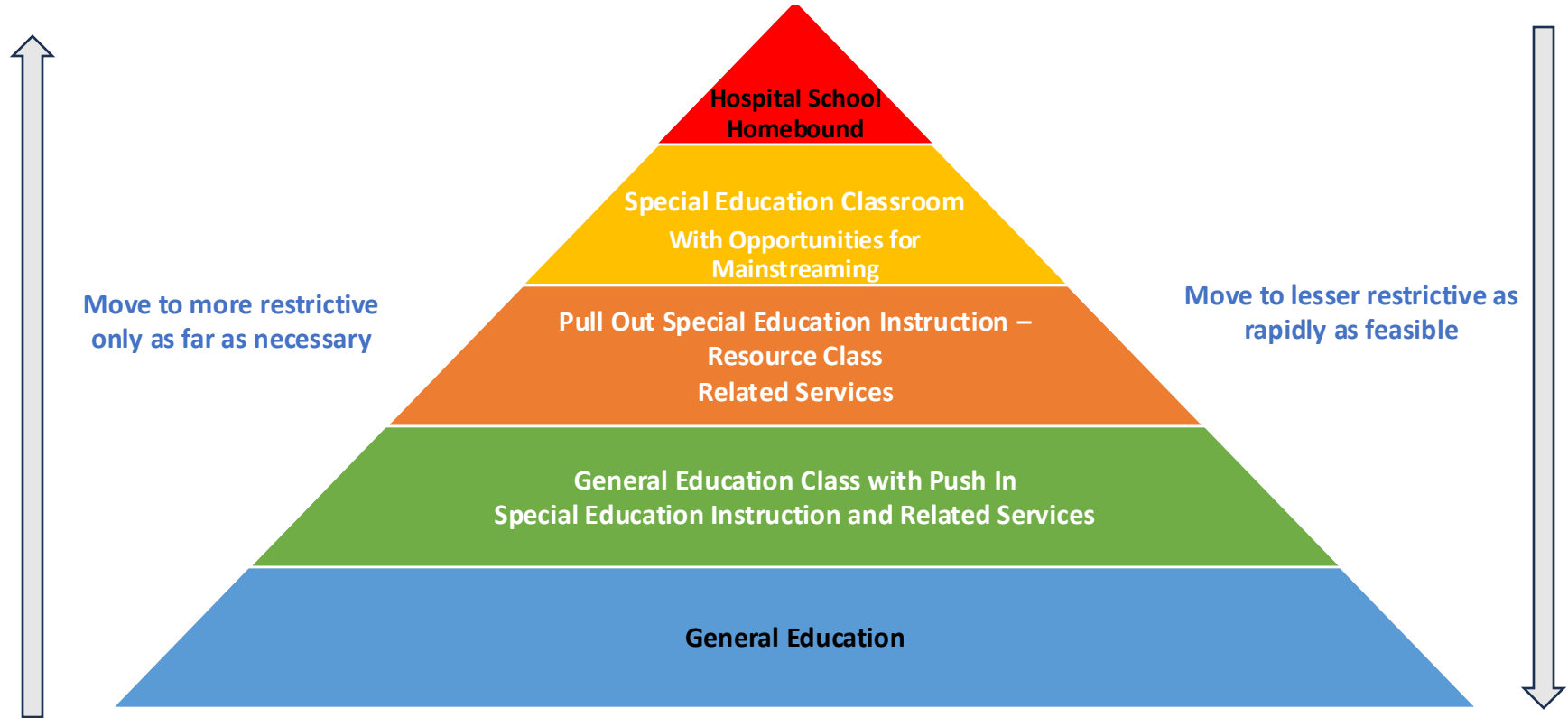
## Individuals with Disabilities Education Act (IDEA)

- **Full and Individual Evaluation (FIE) Completed** 
  - **Admission, Review, and Dismissal (ARD) Meeting**
    - Members of the ARD committee = parent(s), adult student, teachers, school district administrator
    - Reviews the results of the Full and Individual Evaluation
- Does the student meet eligibility criteria for a disability?*
- Establishes Educational Eligibility/Disability
- Are there educational needs resulting from the disability?*
- Identifies the Related Educational Need(s)
- **Individual Education Program (IEP)**
    - A written document created by the ARD committee
    - Describes the special education instruction, modifications/accommodations, and related services the child needs and will receive based on the findings in the FIE
    - Reviewed at least annually

# Accessing Educational Services



# Continuum of Education Services





# Homebound Services

- Most restrictive educational placement
- Homebound programming is not a homeschool program
- **Temporary placement**
  - Student is expected to be absent for at least 4 weeks due to a medical issue
  - The weeks do not need to be consecutive
  - Confined at home for medical or psychological reasons only
- General Education Homebound or Special Education Homebound
  - Based upon student's curriculum prior to the illness
- Navigating homebound services can be confusing
  - Neurological disorders negatively affect cognitive and academic functioning

# Special Education Services – Specially Designed Instruction

- General Education
  - **Accommodations** – a change that helps the child work around the disability but the level of learning and what the child is expected to master stays the same
  - **Modifications** – change the level of learning or what the child is expected to master
    - Modified content – individualized goals and objectives
    - Modified standards – STAAR Alternate-2
- In-Class Support (Push In)
- Resource Class (Pull Out) – 1:1 or small group work
- Self-Contained Class

# Special Education Services – Specially Designed Instruction

## Related Services

- Speech Therapy
- Occupational Therapy
- Physical Therapy
- Psychological Services
- Orientation and Mobility Services

## Supplementary Aids and Services

- Assistive Technology – computer, special software, communication system
- Adapted Equipment – special seat, wheelchair-accessible playground equipment
- Adapted Materials – audiobooks, large print, highlighted notes

# Accessing Educational Services

Medical Condition = Neurological Disorder  
Educational Condition/Eligibility Category = Other Health Impairment

Section 504

Accommodations

Does not change what the student learns, just  
how the student accesses the content

Changing **how** the student is learning

Special Education

Specifically designed instruction

Adapting the content, methodology, or delivery  
of instruction to address the child's unique  
needs

Changing **what** the student is learning



# Accessing Section 504 of the Rehabilitation Act of 1973

1. Does the student have a disability under Section 504?
1. If so, does the student need regular or special education, related aids and services, or supplementary aids and services because of the disability, and in what setting should the student receive them?

# Circumstances Warranting Section 504 Referrals

- The child has a chronic medical condition that is not covered by the IDEA.
- The student has one of the disabilities identified in the IDEA but is not eligible for special education and related services because the student does not need specially designed instruction.
- The student has a “hidden disability,” such as low vision, poor hearing, heart disease, or a chronic illness such as diabetes.
- Families have received an outside evaluation and are requesting Section 504 protections and/or accommodations.

# Section 504 Process

- Initiate a referral to Section 504 in writing
  - Parent/family
  - School staff
- Parental consent obtained
- Section 504 coordinator initiates the evaluation
  - Gathers relevant data and information
  - May not include testing
- Convene a Section 504 meeting
  - Attendees
    - ✦ 504 coordinator(s), school administrators, teachers, school nurse, parents
  - Determine eligibility
  - Develop Section 504 Plan

# Section 504 Process

## Eligibility:

- Physical or mental impairment
- Substantially limits a major life activity ... such as functioning in school, caring for one's self, walking, seeing, hearing, speaking, breathing, working, performing manual tasks

## Accommodations:

- Provide students with disabilities equal opportunity to participate in general education
- Changes to the environment (taking tests in a quiet space)
- Changes to instruction (checking for understanding)
- Changes to how the curriculum is presented (getting outlines of lessons in advance)
- Do not lower or alter academic standards



# Sample Section 504 Accommodations

- Develop health care plan and emergency plan (i.e., seizure action plan)
- Accommodate for absences for medical appointments
- Provide a rest period during school day
- Provide assistive devices for writing
- Provide supervision during transitions, disruptions, field trips
- Use study guides and organizing tools
- Modify testing procedures – extended time, more frequent breaks
- Have the student use an organizer and teach student organizational skills
- Establish a cue between teacher and student to redirect attention
- Modify environment to avoid distractions
- Elevator pass
- Leaving class a few minutes early to get to the next class on time
- Provide school counseling
- Reader software
- Magnification software

# Resources

## **Navigate Life Texas on Section 504**

<https://www.navigatelifetexas.org/en/education-schools/section-504>

## **Navigate Life Texas on Special Education**

<https://www.navigatelifetexas.org/en/education-schools>

## **Wright's Law Differences Between Section 504 and IDEA**

<https://www.wrightslaw.com/info/sec504.idea.eligibility.htm>

# Resources

## **Texas Project First**

[www.texasprojectfirst.org](http://www.texasprojectfirst.org)

A project of the Texas Education Agency committed to providing accurate and consistent information to parents and families of students with disabilities.

## **Texas Education Agency**

[tea.texas.gov](http://tea.texas.gov)

## **Texas Parent to Parent**

(512) 458-8600 or (866) 896-6001 [www.txp2p.org](http://www.txp2p.org)

A statewide nonprofit developed for parents, by parents: provides parent-to-parent matches, support, information, website, resource, newsletter, etc.

## **Family to Family Network, Inc.**

(713) 466-6304 [f2fn.org](http://f2fn.org)

Information, education, support; parent meetings, workshops and trainings.

# NEUROPSYCHOLOGICAL TESTING

You can contact a provider directly to request an appointment. Many area providers do not accept insurance.

## **Austin Center For Therapy & Assessment**

5920 W William Cannon  
Building 6, Suite 222  
Austin, TX 78749

Accepts: Aetna, BCBS, Cigna, Humana,  
Tricare, United, self pay

Ages 6 and up

## **Neurobehavioral Institute of Austin**

2717 Rio Grande St  
Austin, TX 78705  
512-329-8222

No insurance accepted

Ages 4 to adult

## **Austin Psychological Practice**

5758 Balcones Drive,  
Suite 203  
Austin, TX 78731  
512-998-9806

Accepts: BCBS, United,  
Optum, Cigna, Oscar,  
Ambetter, Sendero,  
Superior Medicaid, self  
pay

## **Texas Psychology & Assessment Center**

925 S Capital of Texas  
Hwy, B125  
Austin, TX 78746  
512-766-8781

No insurance accepted

Ages 5 and up

## **Integrative Psychiatry Austin**

13625 Ronald Reagan Blvd,  
Building 4, Suite 300  
Cedar Park, TX 78613

3660 Stoneridge Rd, Building F-102  
Austin, TX 78746

14001 Bee Cave Pkwy, Unit 400  
Bee Cave, TX 78723

512-766-7803

No insurance accepted  
Ages 6 to 25

## **Austin Neuropsychology**

711 W 38th Street,  
Building F2  
Austin, TX 78705  
512-637-5841

\*pediatric testing is out of pocket  
only-no insurance accepted

Ages 5 and up

## **Dr. Richard Temple**

706 W Ben White Blvd, Suite 120B  
Austin, TX 78744  
512-294-2304

Accepts: Aetna, BCBS, Cigna,  
Magellan, Humana

Ages 10 and up



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UPDATED 2/3/2025

CREATED BY THE PEDIATRIC NEUROSCIENCES AT DELL CHILDREN'S





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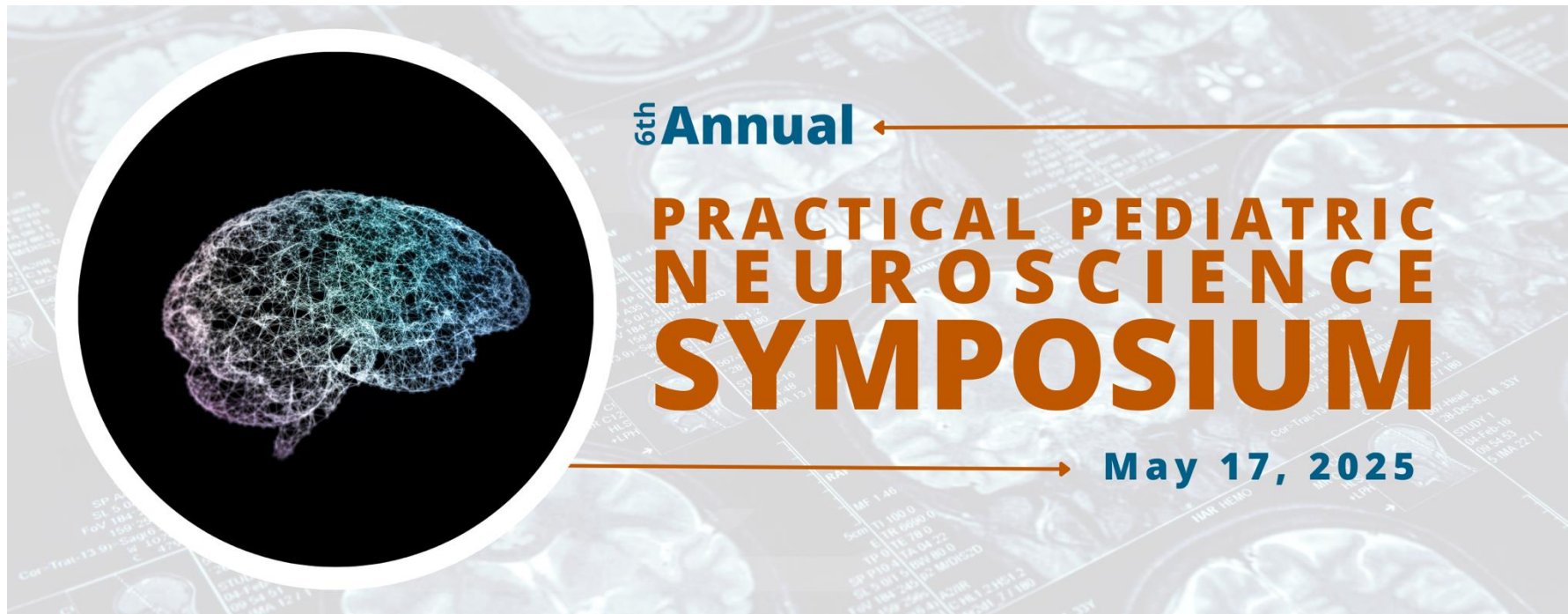




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