



CONFIDENTIAL
Interdisciplinary Assessment Report
Pre-K Special Education Services

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Name:	Kaleb Xiong	Assessment Date(s):	04/17-04/20/2023
Chronological Age:	3:1 (at the time of assessment)	DOB:	03/13/2020
School of Residence:	Elitha Donner Elementary	Grade:	PreK
School of Attendance:	Not enrolled		
Primary Language:	English	IEP Report sent:	May 08, 2023
		IEP Meeting Date:	May 09, 2023
Referral by:	Mrs. Mary and Mr. Yang Xiong (parents) and Sacramento County Office of Education (SCOE)	Examiner(s):	Yvette Paredes, MS, School Psychologist Jena Freeman, MA, Special Education Teacher Megan Sills, Early Childhood Special Education Teacher Marianne Richardson, MS, CCC-SLP Cynthia Ludwig B.S., R.N.-C, School Nurse

The following report was developed to assist the IEP Team in determining eligibility and need for special education and related services according to the code of Federal Regulations, Sections 300.304 to 300.306. A student shall qualify as an individual with exceptional needs if the results of the assessment demonstrate that the degree of impairment requires special education. The decision as to whether or not the assessment results demonstrate that the degree of the student's impairment requires special education shall be made by the IEP team, including assessment personnel. The IEP team shall take into account all relevant material which is available on the student. No single score or product of scores shall be used as the sole criterion to determine Kaleb's special education eligibility.

REFERRAL INFORMATION

Kaleb was referred for an interdisciplinary educational assessment by parent request and Sacramento County Office of Education (SCOE). Kaleb was referred due to visual impairment (blindness). The assessment team reviewed records and determined that assessment was needed in the following areas: Cognitive skills, academics,

health review, speech-language, vision, adaptive, social-emotional/behavior, and motor skills. Based on the reported concerns, the educational team and Kaleb's parent are interested in learning more about his learning profile and to determine whether or not he presents with Vision Impairment and Speech or Language Impairment. In addition, this assessment is designed to help determine if Kaleb requires special education services, and to document present levels of functioning and educational needs.

Kaleb participated in a four-day assessment model where he attended an integrated preschool classroom to facilitate observations with typical peers and evaluations with examiners. He was accompanied to the assessment by his parents. Parents consented to the assessment on April 17, 2023.

RELEVANT HISTORY and CURRENT CONCERNS

The following information was obtained through review of records and interview(s) with parents.

FAMILY BACKGROUND (ENVIRONMENTAL, CULTURAL AND ECONOMIC FACTORS)

Information regarding environmental, cultural and economic factors was obtained through an interview and record review from the developmental health questionnaire, completed by parent.

Kaleb is 3year, 1 months old, preschool grade level child. He resides with his parents and seven siblings. Kaleb has six older siblings and a younger sibling. English is the primary language spoken in the home and Kaleb's primary language. There is a family history of developmental delays and Autism with extended family members.

EDUCATIONAL HISTORY

Kaleb has not had the opportunity to take part in a school setting.

INTERVENTION HISTORY

Kaleb has received the following services from Sacramento County Office of Education (SCOE):

- Vision services

HEALTH AND DEVELOPMENTAL HISTORY

The following information was obtained through the health and developmental questionnaire completed by parents and a review of records on file.

Mother received prenatal care during pregnancy and as early as seven weeks of gestation. Mother suffered from pre-eclampsia and high blood pressure. At 20 weeks of gestation, mother had X-rays done. In addition, mother did take prescription medication (i.e. Labetalol) during pregnancy.

Kaleb was born full term, weighing 6 pounds, 12 ounces. He was delivered by emergency cesarean due to placenta eruption. Kaleb was born with Persistent Hyperplastic Primary Vitreous, a congenital condition that occurs when blood vessels within the developing eye fail to regress as they normally would resulting in irreversible blindness in both eyes. A most current ophthalmology (January 2023) report, from Dr. Irma of Kaiser Permanente, reports that Kaleb has no light perception in either eye. He exhibits mild and stable band keratopathy (corneal degeneration).

Developmental Milestones

Kaleb met his motor milestones within normal limits.

- Rolled over at 5 months
- Sat alone: 5-6 months
- Crawled: 7-8 months
- Walked: 11 months

No concerns regarding gross motor skills. There are concerns regarding fine motor skills and sensory Please refer to the section of Motor/Sensory Processing skills for further information addressing parent concerns.

Communication milestones:

Kaleb's language milestones were delayed and continue to be an area of concern:

- Used single words: one year
- Spoke two-word phrases: 1 1/2 years old
- Spoke in sentences: inconsistent

Kaleb will often hand lead, use two-three-word phrases to communicate his needs/wants. He is not yet able to tell you about something he saw or did. He does not often use gestures. Kaleb can answer yes/no questions and "wh" questions.

VARIABLES THAT MAY AFFECT SCHOOL FUNCTIONING AND LEARNING:

Information regarding environmental, cultural and economic factors was obtained through an interview and record review.

Variables that may affect school functioning and learning includes, but not limited to school experience, poor attendance, and environmental, cultural or economic disadvantage. There are no reports of environmental, cultural, or economic variables affecting or that may be affecting Kaleb's learning at this time or may interfere with his educational performance.

ASSESSMENT METHODS

Review of EGUSD file

Review of medical/other records provided by family

Behavioral Observations during assessment and in-classroom

Parent Interview

Cognitive functioning Skills:

Developmental Profile, Fourth Edition (DP4): Parent/Caregiver Checklist Form-Cognition

Speech/Language Functioning:

Parent Interview/Background Information

Expressive Language Sample

Observational Pragmatic/Social Language Checklist

Oral-Motor, Articulation, Voice, Fluency, and Feeding Screening

Vision Assessment:

Refer to the vision assessment report

Academic/Learning

Review of records and parent report

Motor/Sensory Processing

Peabody Developmental Motor Scales-2nd Edition (PDMS-2)

Behavior/Social-Emotional functioning:

Developmental Profile, Fourth Edition (DP4): Parent/Caregiver Checklist Form-Social-Emotional

Adaptive Skills:

Developmental Profile, Fourth Edition (DP4): Parent/Caregiver Checklist Form-Adaptive Behavior

REVIEW OF RECORDS

No previous clinical assessments on file.

ASSESSMENT RESULTS AND INTERPRETATIONS:

For this interdisciplinary report, each examiner is solely responsible for the assessments they administered and interpretation of the specific results within their scope of practice.

All standardized testing measures contain some degree of error. In examining each score for a subtest or scale, it is important to recognize that this degree of error is always present. In other words, if a student were to retake the same test at a different time, it is likely that his/her score would contain some small degree of variance. The score could vary as a result of many different factors such as: distractibility, effort level, testing environment and mental or physical health. This measurement error is addressed through the use of confidence intervals bands around the score that provide a range where the student's score is likely to fall. Scores are presented with a 95% confidence interval, which means that one can assume with 95% confidence that the student's score lies within the reported range of scores.

Many standardized tools have unique qualitative descriptors outlined in their test manual. For the sake of consistency, please refer to the following chart:

Standard Score	Scaled Score	T-score	Qualitative Descriptor
130+	16+	70+	Very Superior
120-129	14-15	63-69	Superior
110-119	12-13	57-62	High Average
90-109	8-11	43-56	Average
80-89	6-7	37-42	Low Average
70-79	4-5	30-36	Borderline
0-69	1-3	0-29	Low

In this assessment:

- *The student was assessed in all areas of suspected disability.*
- *All tests and materials include those tailored to assess specific areas of educational need.*
- *All assessments were selected and administered so as not to be discriminatory on racial, cultural, or sexual bias.*
- *Each assessment was used for the purpose for which it was designed and is valid and reliable.*
- *Each instrument was administered by trained and knowledgeable personnel.*
- *Each assessment was given in accordance with the test instructions provided by the producer of the assessments.*
- *All tests were selected and administered to best ensure that they produce results that accurately reflect the student's abilities, not the student's impairments, including impaired sensory, manual, or speaking skills.*

PARENT INTERVIEW

Mr. and Mrs. Xiong were interviewed by the School Psychologist during the assessment week. They reported the following interests and strengths for Kaleb; Kaleb has a good memory, likes to listen to music and sing. He likes spending time with family and seeks out his siblings.

Parents are concerned about Kaleb being able to separate from family and having limited opportunities with same age peers. They are concerned about these social skills and safety in new settings.

Kaleb will verbalize and often repeats words/phrases. If he cannot say what he wants, he can get frustrated. He will say "no" when not wanting something. He does not say "yes". He will let others know he does want to do something or likes something by smiling and laughing. Kaleb responds to no/stop and understands routine. He responds when asked, "where's Kaleb"? He does not ask for help. He will say, "it don't work" when a toy is not

working, or “I wash” when wanting a diaper change. Kaleb can follow one step directions as long as he knows where it is at. Kaleb is able to maneuver at home independently. The furniture is kept the same.

Socially, Kaleb does not like to share toys with his baby brother. He does like spending time with his older siblings and will share interests with them. When playing with toys, he has the tendency to bang them against his teeth, as means of exploration. Other noted behaviors are that when Kaleb is anxious or nervous, he often makes a gulping noise that lead him to intake too much air and may lead him to throw up. This has been observed to occur in unfamiliar settings or new people.

BEHAVIORAL OBSERVATIONS

The reader should note that this portion of the assessment was completed in-person at the preschool assessment center. The following Personal Protective Equipment (PPE) may have been used during the in-person sessions (e.g., face masks, latex gloves). Mr. and Mrs. Xiong agreed that this was a true representation of Kaleb’s daily behavior. Therefore, the obtained observations do appear to be valid at this time.

Assessment Classroom Observations during the assessment week *(administered by M. Sills, Early Childhood Special Education Teacher)*

Classroom Readiness/Functional Skills

- **Sitting/Attending Large Group Instruction:** During circle time, he was observed sitting or standing with his parent. When a song was playing, he was observed either quietly singing along or humming along to the music.
- **Sitting/Attending Small Group Instruction:** Kaleb was observed switching between sitting in a cube chair, regular preschool chair, or in parent’s lap.
- **Transitions:** Kaleb was observed exploring his environment by feeling what was around him. His parent was observed trying to use the sound of their voice or tapping of their foot to guide him as he navigated around the classroom setting. His parent reports at home, he is able navigate himself independently around the house since he has become familiar with the setting and placement of furniture. Parent reports he is learning to use his cane outside to navigate. Parent’s report he is ok with transitioning between activities.
- **Ability to Focus and Attend to Tasks and Instructions:** During instructional tables, he was observed exploring the materials that were presented to him. During an art project, he was observed allowing adults to support (i.e., hand over hand) him as they communicated with him about what they were doing and what he was touching.

Adaptive/Daily Living Skills

- **Toileting:** Kaleb is not yet toilet trained and communicates that his diaper is soiled by saying “need wash”.
- **Feeding:** Kaleb uses his fingers to feed himself dry finger foods and parents feed him when utensils are needed. Parent reports he is able hold a spoon. Kaleb is able to drink from a sippy cup and a plastic water bottle with support.
- **Dressing/Undressing:** Kaleb can cooperate in the dressing and undressing routine.

Play and Social Skills

- **Play with Objects:** Kaleb was observed exploring the play materials in the classroom during the assessment week. He was observed banging on pots and pans, interacting with sensory balls, manipulating musical instruments, and pushing buttons on an interactive sound toy. His parents report he likes to play with toys that make sounds, pop its, fidget toys, drums, and the wheels on his large monster truck toy. His parent reports that when he is playing with his toys, he is playing with them functionally.
- **Social Play:** During the assessment week, he was not observed interacting with peers but was observed allowing peers to be near him as he played. Parent reports he will usually play on his own but will explore the nursery setting at Church but not interact with peers. Parents report he is ok with peers sitting close by and are working with him on interacting with peers.

Social Emotional/Behavioral

- **Behavior Specific Concerns:** Kaleb did not exhibit any excessive behaviors in the classroom throughout the week. His parent reports that they do not have any behavioral concerns currently.
- **Area of Strength:** Kaleb showed some emerging classroom readiness skills throughout the assessment week.

Please refer to the report provided by the Teacher of the Visually Impaired for further observations noted in the classroom and within Kaleb's home.

Validity This assessment is felt to be a reasonable estimate of Kaleb's current developmental status. The child did not appear to be affected by the Personal Protective Equipment (PPE) that was used during the in-person assessment. Parent reported that observations completed during the assessment week reflected Kaleb's typical presentation.

COGNITIVE FUNCTIONING SKILLS: Administered by Ms. Paredes, M.S., School Psychologist

Developmental Profile, Fourth Edition (DP4): Parent/Checklist Form-Cognitive

The DP-4 is a Standardized developmental screening test that evaluates children's functioning in five key areas: Physical (Large- and small-muscle coordination), Adaptive Behavior (Ability to cope independently with the environment) Social-Emotional (Interpersonal abilities, social and emotional understanding, functional performance in social situations), Cognitive and Communication (Expressive and receptive communication skills). Enables clinicians to identify developmental strengths and weaknesses early in a child's life, the DP-4 consists of 180 items. A parent or caregiver simply indicates whether or not the child has mastered the skill in question.

>130 Well Above Average
116-130 Above Average
85-115 Average
70-84 Below Average
<70 Delayed

Respondent: Mr. and Mrs. Xiong
Electronically received: 05/04/2023

The cognition domain on the DP-4 examines the skills necessary for successful academic and conceptual development functioning.

Developmental Profile-4 (DP-4)		
<i>Average Standard Scores on this instrument are 85-115. Ranges in parentheses indicate the 95% confidence interval;</i>		
Scale/Index	Standard Score	Descriptive Category
Cognitive	62(52-72), 1st %ile	delayed

Based on parent responses, Kaleb's parents perceive his development in this area to be significantly below age appropriate and within the delayed range (SS=62, 1st percentile) when compared to same age peers. Reported scores are cautioned due to many of the questions asked refer to the use of language and vision. Therefore, this may not be a true representation of Kaleb's skills.

SPEECH AND LANGUAGE FUNCTIONING: Administered by Marianne Richardson, M.S.
CCC-SLP

Review of Records

Developmental History Questionnaire

Kaleb's parents, Yang and Mary Xiong completed the Developmental History Questionnaire (DHQ) on 2/7/2023. They indicated that Kaleb's strengths include his good memory and love for music. He enjoys playing with toys that have buttons or with cars. When Kaleb was three months old, parents discovered that he is blind. Parents reported concerns about Kaleb adapting to new environments and making friends.

The DHQ states that Kaleb's primarily language is English, and he is also exposed to Hmong. Parents speak to each other using Hmong but use English to speak with Kaleb. He began using single words at 1 year old, 2-word phrases at 1.5 years old, and sentences at 2 years old. He has an expressive vocabulary of over 100 words. Most often he communicates using 2–3-word phrases. He's able to follow one-step directions but is not yet following 2-step directions. He answers yes/no questions and simple WH (what, where, or who) questions, but he is not yet communicating to talk about something he did. Parents reported that he is easy to understand.

Current Testing

Parent Interview

Kaleb's parents were interviewed as part of the assessment process. They reported concerns that Kaleb may have difficulty making friends and that he might be treated differently. From this assessment, they hope to gain a better sense of how he's doing overall and his strengths and weaknesses. Currently, Kaleb communicates using phrases and sentences most often. Sometimes parents are unsure what he wants because he repeats the final word of a question rather than answering. For example, if parents say, "do you want me to stand" Kaleb will say, "stand", but will actually want them to sit.

Parents reported that Kaleb loves music and sings all day. He often asks his siblings to play his favorite music and he seems to enjoy sitting with them and listening. He not yet engaging in turn-taking games or routines other than sometimes rolling a ball back-and-forth.

Validity

Standardized testing normed using special populations (such as blindness or visual impairment) are not available. In accordance with the Individuals with Disabilities Education Act (IDEA) use of standard scores for Kaleb would be inaccurate or misleading. Information presented in this report includes parent interviews, observational data, and evidence-based research.

Receptive and Expressive Language

Children with any sensory loss (vision, hearing, etc.) develop, in nearly all areas of language, differently when compared to peers. Children with visual impairments often use more self-oriented and echolalic speech

(repeating what was heard). Gaps in receptive and expressive vocabulary are often noted, including limited use and understanding of descriptive words and basic concepts (i.e., same/different, prepositions, size, shapes, and textures). Most often, children with visual impairments learn new words by touching or exploring items which leads to reduced understanding of words and concepts.

Assessment

Both receptive language and expressive language were tested informally because standardized test are not available for children with visual impairments. Information should be viewed as a general baseline for current speech and language skills. Receptive language is also known as language comprehension, which includes the ability to understand instructions or listen to stories and answer related questions. Expressive language is how language is used to express an idea, such as naming vocabulary, describing a picture, or explaining something in one’s own words.

	Receptive Language		Expressive Language
	<ul style="list-style-type: none"> - Ability to understand - Listening and reading - Answering WH questions - Following directions - Understands the words, sentences, and meaning of what others say 		<ul style="list-style-type: none"> - Ability to communicate - Speaking, gesturing, facial expressions, vocalizations, and writing - Labeling items - Retelling a story

The **Receptive Language** questions evaluate a child’s receptive language skills in the areas of attention, semantics, vocabulary, concepts, grammar, word order, and integrative thinking skills.

Kaleb was reported to be able to:

- Identify body parts (nose, eyes, head, ears, mouth, lips, teeth, tongue, chin, elbows, arms, feet, knees, and belly) – typically acquired between 24-28 months
- Follow one-step directions – typically acquired between 9-14 months
- Respond to “no” – typically acquired between 9-12 months
- Understand familiar words/phrases (i.e., “let’s go take a bath”) – typically acquired between 9-14 months
- Listen to books (using first/then strategy) – typically acquired between 27-30 months
- Understand some action words – typically acquired between 27-30 months
- Understand some adjectives (dirty and wet) – typically acquired between 30-33 months

Kaleb was not able to:

- Follow two-step directions – typically acquired between 24-29 months
- Identify clothing items – typically acquired between 18-20 months

-Demonstrate understanding of preschool-level concepts (spatial, use of objects, pronouns) – typically - acquired between 2 years, 6 months through 3 years, 5 months

The **Expressive Language** questions evaluate a child’s expressive language skills in the areas of vocal development, social communication, vocabulary, concepts, grammar, word order and integrative thinking skills.

Kaleb was reported to be able to:

- Shout for attention – typically acquired between 6.5-8 months
- Gives toy upon request – typically acquired between 12-15 months
- Use “no” meaningfully – typically used between 13-15 months
- Name familiar objects – typically used between 13-18 months
- Imitate two-word phrases – typically acquired between 18-24 months
- Use two-word phrases – typically acquired between 18-21 months
- Use size words (“big ball/small ball) – typically used between 25-30 months
- Use some self-centered pronouns (such as I, me, mine) – typically used between 24-30 months

Kaleb was not able to:

- Respond to his name without physical gestures – typically acquired between 5-7 months
- Show items of interest – typically acquired between 9-12 months
- Use exclamatory expressions – typically used between 12.5-14.5 months
- Use name to refer to himself – typically used between 18-24 months
- Answer questions – typically acquired between 24-36 months
- Relate experiences using short sentences – typically acquired between 24-34 months
- Ask questions beginning with *what*, *where*, and *when* – typically acquired between 34.5+
- Use past tense forms – typically acquired between 24-30 months
- Use plurals – typically used between 27-36 months
- Participate in storytelling – typically acquired between 30-36 months

A Language Sample was collected to analyze Kaleb’s expressive language skills. His utterances ranged from 3-4 words in length, with most utterances 2-word phrases. A mean length of utterance (MLU) was calculated to be 1.88. At the age of 3 years, MLU is expected to be between 3.0-3.75. Kaleb’s MLU falls below the average range. At times his speech was repetitive (most often when he wanted a new toy or new activity). He required some

prompting from parents in order to use multi-word utterances (i.e., parents said, “what do you say,” in which Kaleb responded, “I want shake it [toy]”).

Kaleb was not observed to communicate for all pragmatic functions; instead, he primarily communicated to label or request. He was not observed to use verbal language to ask for help, gain attention, share/show items or interest, or request repetition. Below is an excerpt of the sample:

- Gonna fall down [worried that he was going to fall down]
- Fire truck [labeled]
- I need to stand [parents believe he wanted to sit]
- Go mommy [requesting mom]
- Go house [requesting to leave]
- Go church [requesting to leave]
- Go outside [requesting to leave]
- Cow [labeled]
- Chicken [labeled]
- Fish [labeled]
- Hold me [request]
- Hurry back [request]
- Take my jacket [request]

Parent reported that sometimes Kaleb repeats words/phrases when parents ask him a question, rather than giving a direct response. This leads to confusion at times, in which parents have to interpret his behaviors to meet his needs.

When he didn't want to do something, or wanted to move on, he said, “no” and/or “go outside.” He imitated some phrases such as, “Daddy I'll be good” or “yes, please stand up.” Kaleb refused by throwing his head back, using verbal language, or whining. He also turned his head away to indicate that he didn't want something. When his requests weren't met, he got louder and louder. Parents reported that this is typical behavior, and they have to interpret his actions in order to meet his needs. When asked if he wanted more water, Kaleb laughed to indicate “yes”; parents reported that this is typical behavior.

Overall, based on parent report, observations, and questionnaires, it appears that Kaleb is demonstrating deficits in both receptive and expressive language. He's not yet demonstrating understanding of preschool-level concepts, demonstrating understanding or use of descriptive words, answering simple questions, or combing words to relay information as would be expected for his age.

Pragmatic Language

Pragmatic language refers to the social language skills we use in daily interactions, including what we say, how we say it, and following social rules such as taking conversational turns and staying on topic. Pragmatics also includes understanding and use of nonverbal forms of communication such as facing the speaker, using gestures, eye contact, facial expressions, and body language. Children with typical vision learn these skills naturally through observation and incidental learning; however, children with visual impairments miss out on these nonverbal cues that provide communication partners with social clues. For this reason, research has shown that many children with visual impairments have difficulty understanding how to integrate with peers and require direct instruction to learn these skills.

Joint attention (when two people focus on the same object/item/event for the purpose of interacting) is a foundational social communication skill that typically developing child exhibit in early development. Studies have

shown that children with visual impairments also develop joint attention, but it often looks different. In contrast to using gestures, looking towards others (visually attending), pointing, or smiling, children with visual impairments tend to use touch and vocalizations to maintain quality communicative interactions and establish joint attention.

“Restricted symbolic play, difficulties in social interaction with peers and imitation, echolalic speech, and increased stereotyped behavior have all been frequently reported in blind children.” – Molinaro, et. al., 2020

The Pragmatics Profile of Everyday Communication Skills in Pre-School Children was completed on 04/18/2023, through interview with Kaleb’s parents to gain information regarding her pragmatics and social communication skills. The following is a summary of Kaleb’s parent’s responses:

Communicative Functions

Attention directing

- Kaleb gains attention by calling out “mom”
- When he doesn’t know where someone is, he says, “where are you?”
- He’s not yet communicating to direct attention

Requesting

- Kaleb asks for items by using the name
- He asks to be picked up by lifting his hands up
- When he needs help, he tells parents what he needs; for example, if he soils his diaper, he says “I need wash”; if a toy doesn’t work, he says, “not work”
- Kaleb says “again” when he wants to continue an activity
- He says, “I want to jump” when he wants a game with his dad
- Kaleb requests attention by saying, “cuddle time” and he gives hugs/kisses/touches

Rejecting

- When he doesn’t want something, he says “put it away”
- He pushes away unwanted items and picks out what he does want
- Says “all done” when finished

Greeting

- When a familiar person comes home, he approaches them
- He’s not yet using greeting words
- Sometimes calls familiar people by name when they come home
- He cries when mom leaves and sister helps redirect him to calm him down; sometimes he imitates “bye”

Self-Expression and Self-Assertion

- He smiles and sings when he’s enjoying something
- He cries when he gets hurt and will show his hurt to parent
- He’s not able to describe what hurt him

Naming

- When he identifies something that he recognizes, he names it

Commenting

- Kaleb is not yet making comments

Giving Information

- Kaleb is not yet able to tell parents about something that happened when they weren’t around

Response to Communication

Gaining his attention

- It's easiest to gain his attention by tapping him
- If asked, "where's Kaleb," he'll say "here" and raise his hand

Interest in Interaction

- Kaleb shows interest in interactions by getting close to others; sometimes he'll say "cuddle time"

Understanding speaker's intentions

- Kaleb follows one-step directions most of the time (sometimes needs repetition)
- Understands familiar words/phrases (like, "time for bath")
- He's not yet responding to questions to gain information such as "what have you been doing?"

Anticipation

- Kaleb sings along with familiar songs or rhymes

Response to "no" or negation

- Kaleb understands "no"
- When told "in a minute," he either waits or yells

Interaction and Conversation

Participating in Interaction

- Kaleb pulls parents to what he wants and will allow parents to take turns during a game

Contextual Variation

Person

- Kaleb seems to enjoy talking with his sister Grace most; she gets him to sing and dance

Situation

- Kaleb is most communicative at home where he's more comfortable

Topic

- He mostly likes talking about music

The results indicate that Kaleb currently communicates to express some but not all pragmatic purposes/functions expected for children of his age. He's using 2-3 word sentences to ask for things he needs, reject/protest, seek attention, and show affection. He's not yet using greeting words, sharing, directing attention, answering yes/no questions (laughs for "yes" but reliably uses "no"), asking questions (outside of "where are you"), making comments, or showing items of interest. Kaleb is not yet participating in storytelling, relating his own experiences, or using grammatical markers. He doesn't directly ask for help, instead he tells parents what he needs.

Kaleb is not yet initiating play with peers but listens and imitates them. Parent reported that he likes entertaining others and tries to show off. He's not yet demonstrating understanding of how to communicate or play with peers. Overall, the results indicate that Kaleb is not yet communicating for all expected social/pragmatic purposes.

An Observational Pragmatic/Social Language Checklist was used to informally observe key pragmatics/social communication skills expected in preschool-aged children, in different settings and with different people.

Observations

Kaleb transitioned easily into the assessment room with both his parents. He engaged in play with noise maker toys, cars, and puzzles. He primarily communicated using 2-3-word phrases and vocalizations. Kaleb was observed to turn when he heard a familiar voice, count along with his mom, and label toys. Kaleb touched body parts that were named and smiled. He requested new toys or to leave using short phrases. Initiation of social interactions were limited to fulfilling personal demands/interests. He primarily engaged with toys independently

and did not make attempts to include others in his play; he did not share enjoyment or interest with others. He responded to some, but not all questions that were directed toward him.

Kaleb primarily played repetitively with cause-and-effect toys and toys that made noises/music. While playing, he wasn't reliably responsive to others and did not respond when dad asked him to move on to other toys. Kaleb was not observed or reported to engage in explorative, symbolic, or pretend play.

Typical Pragmatic Language Skills at the age of 3 years old:

- Initiate and respond to bids for Joint Attention
- Respond to his/her name consistently
- Acknowledge speech of another by giving eye contact or vocally responding
- Pair gestures with words
- Keep an interaction going by taking turns and demonstrating engagement
- Plays interactive game
- Show items
- Communicates to share interest and enjoyment
- Direct attention with a gesture or using words
- Use language to make requests, gain attention, protest, label objects in front of others, and answer "WH" questions
- Relate his/her own experiences using simple language
- Express simple emotion with words
- Clarify messages/request clarification when he/she doesn't understand what was said

Interpretation

Exploration, symbolic, and pretend play are typically learned by watching others and imitating (for example, watching parents cook, take care of babies, etc.). Children with visual impairments often exhibit more repetitive play and spend less time exploring, which has negative impacts on social development. As children get older and play becomes more complicated, children with visual impairments may get left behind and miss out on peer interactions. Play skills are a critical part in development of language, social interactions, and concepts.

Likewise, social skills are primarily learned through observation of environment and people. Many children with visual impairments require explicit instruction in order to understand and navigate social situations. Pragmatic language is an area to support.

Speech

Oral Motor	Kaleb's facial features and oral area appeared normal in terms of general symmetry and lack of scar tissue. His dentition, lips, tongue, and palate appeared functional for the production of speech. Parent reports that Kaleb does not have difficulty with chewing or swallowing. No drooling was observed.
Articulation	Kaleb was observed to produce all consonants expected for his age, including /p, b, t, d, k, g, m, n, w, h, s, f, v/ and "y", and a variety of vowels. Speech sound production should continue to be monitored while his expressive language increases.
Voice	There are no noted concerns regarding Kaleb's voice quality.
Fluency	There are no noted concerns regarding fluency (stuttering).

PRE-ACADEMIC/LEARNING SKILLS: Administered by Jena Freeman, M.A. *Special Education Teacher*

A review of records was completed for Kaleb in order to determine a baseline of academic skills and progress. Based on parent interview and records review, the following skills are reported:

- Will play with noisy toys at home
- Manipulates puzzle pieces and can place them in right/left direction
- Enjoys activities paired with song
- Points to body parts
- Enjoys loud noises (vacuum) at home
- Names familiar objects, names familiar toys
- Turns pages in a book, handles tactile books
- Explores cupboards at home, can pull out items
- Can count to one hundred with prompts
- Recites the alphabet

When compared to same age peers, Kaleb demonstrates emerging academic skills.

MOTOR AND SENSORY PROCESSING SKILLS: Administered by Francis Fernandez, OTR/L

Validity of Assessment Findings:

Testing and assessment materials and procedures used for the purposes of assessment and placement of students with disabilities are selected and administered so as not to be racially, culturally, or sexually discriminatory. Tests have been validated for the specific purpose for which they are used and administered by trained personnel in accordance with the instruction of the producer [34 C.F.R. 300.532(e)]. The school occupational therapist evaluates the child within the educational setting assessing strengths as well as what may be interfering with learning and participation in the context of his or her curricular activities, routines, and environments. The school occupational therapist considers of the effect of existing special education supports and services (including strategies already utilized to improve performance). (Guidelines for Occupational Therapy & Physical Therapy in California Public Schools, 2nd edition, California Department of Education, 2012)

Gross Motor Skills:

Please refer to physical therapy assessment for details regarding gross motor skills.

Fine Motor Skills:

- Kaleb demonstrates appropriate fine motor skills for his age.

Fine Motor Skills:

Kaleb was unable to participate in The Peabody Developmental Motor Scales-2nd Edition (PDMS-2) in a standardized manner due to visual impairment. Fine motor information was obtained through a combination of observation, record review, and family report.

Per interview with parents, Kaleb demonstrates the following posture/fine motor/visual motor skills:

Kaleb demonstrates the following grasping skills:

- Kaleb will pick up goldfish snacks using a pincer grasp.
- Kaleb turns pages of a thick cover and thick page book.
- Kaleb is starting to associate shapes through touch. Kaleb was observed to correctly name a “square”.

- Kaleb will reach forward with both hands when told there is an item in front of him.
- Kaleb will feel walls to familiarize himself with his environment. Kaleb is very independent and is familiar with each room in their home.
- Kaleb has not shown an interest in picking up a crayon.
- Kaleb loves toys with music. He has a gong toy at home that he will hold with one hand and play with the other.
- Kaleb knows left vs right. He has been participating in activities with songs that differentiate left from right.
- Kaleb can use a utensil (spoon) with assistance to guide where food is.
- Kaleb enjoys bouncing on a ball with assistance from parent

Observations:

- Hand dominance: No clear hand dominance noted.
- Isolation of index finger: Able to isolate index finger with left hand.
- Crossing midline: Able to cross midline.
- Bilateral Coordination: Stabilizes objects with helper hand (e.g., pulling string on toy, attempting to remove a bottle cap), transfers items between hands

Sensory Processing:

Observations:

- Throughout the assessment week, there were no behaviors that appear to be sensory based.

Observations during assessment:

- Sitting on dad's lap in the beginning
- Became more comfortable and started feeling the walls and cabinets to familiarize himself with the classroom environment

ADAPTIVE FUNCTIONING SKILLS: Administered by Yvette Paredes, M.S., School Psychologist

Developmental Profile-4th Ed. (DP-4): Parent Checklist: Adaptive Behavior

Respondent: Mr. and Mrs. Xiong
Electronically received: 05/04/2023

Kaleb's parents completed the DP4 Adaptive Behavior scale. The adaptive scale will provide an indication of his functional independence and behavioral skills at home. This measures competence, skills and maturity for coping with the environment, including tasks such as eating, dressing, functioning independently and utilizing modern technology.

Results on the adaptive behavior scale places Kaleb's development within the delayed range (SS=52, .1 percentile) when compared to same age peers.

<u>Scales/Index</u>	<u>Standard Score</u>	<u>Description</u>
Adaptive Behavior	52(43-61), .1 %ile	Delayed

BEHAVIORAL/SOCIAL-EMOTIONAL FUNCTIONING: Administered by Yvette Paredes, M.S., School Psychologist

Developmental Profile-4th Ed. (DP-4): Parent/Checklist Form**Respondent: Mr. and Mrs. Xiong****Electronically received: 05/04/2023**

The Social-emotional area of development includes interpersonal relationship abilities, social and emotional understanding, and functional performance in social situations. Based on parent responses, Kaleb's social-emotional development is significantly below age appropriate and within the delayed range (SS=50, .1 percentile) when compared to same age peers. Kaleb's visual impairments and delays in language are believed to be impacting his social-emotional development. These factors should be considered since this can impact an individual's ability to appropriately engage with others, establish interpersonal relationships, and perform in social situations.

Developmental Profile-4 (DP-4)		
<i>Average Standard Scores on this instrument are 85 to 115. Ranges in parentheses indicate the 95% confidence interval;</i>		
Scale/Index	Standard Score	Descriptive Category
Social-Emotional	50(41-59), .1 %ile	Delayed

SUMMARY

Kaleb is a 3year, 1-month old preschool level child that was referred for a full psychoeducational assessment from parent and SCOE. Kaleb has a diagnosis of Persistent Hyperplastic Primary Vitreous, a congenital condition that occurs when blood vessels within the developing eye fail to regress as they normally would resulting in irreversible blindness in both eyes. He received vision services through SCOE. Based on the presenting concerns and extensive history of early intervention services, Kaleb received a cognitive, speech and language, academic, health review, vision, social-emotional/behavior, adaptive, and motor assessment to determine eligibility for special education services. The following assessment results were obtained through parent interview, record review, observations, and direct assessment.

Kaleb's cognitive functioning skills could not be directly measured using the DAS-2 due Kaleb's vision impairment. An alternative measure was used based on parent report which is based on what Kaleb has been noted to be able to do at home. However, reported scores are still cautioned due to his limitations related to his vision needs and speech/language delays. Results from the DP4 Parent Checklist, placed Kaleb's skills within the delayed range, when compared to same age peers.

Results from the DP4 placed Kaleb's adaptive functioning skills within the delayed range when compared to same age peers. Results from the adaptive measure indicate the presence of significant functional skill limitations due to his visual impairment and speech/language delays.

In the area of speech and language development, Kaleb demonstrates delays in receptive language and expressive communication in comparison with what is expected for his age. He's not yet following multi-step directions or demonstrating understanding of preschool-level concepts. Kaleb is not yet engaging in explorative, symbolic, or pretend play. Expressively, he communicates using body language, gestures, and verbal language that is often repetitive. He's not yet relying on verbal language for a variety of pragmatic purposes, responding to questions, or telling simple stories.

Kaleb demonstrates some foundational skills related to social communication, while other expected skills are less reliable and/or reduced in frequency, range, or quality. This includes responding to his name consistently,

communicating to share in an experience/interest, or engaging in turn taking activities or conversations with others. He's not yet communicating for purposes other than to get his needs/wants met or engaging in interactive games with others. In the area of articulation/phonology, Kaleb was observed to produce some age-appropriate sounds. His overall intelligibility was rated to fall within the average range.

Academic skills are emerging when compared to same age peers.

Please refer to physical therapy assessment for details regarding Orientation & Mobility. Kaleb demonstrates appropriate fine motor skills for his age. Throughout the assessment week, Kaleb did not demonstrate behaviors that appear to be sensory seeking nor avoiding.

In reviewing Kaleb's social-emotional/behavior functioning, his development is suggested to be in the delayed range, when compared to same age peers. However, his difficulties with establishing interpersonal relationships and engaging in social interaction may be due to his delays with speech/language and visual impairment.

ELIGIBILITY

According to 5 CCR § 3030 (a) A child shall qualify as an individual with exceptional needs, pursuant to Education Code section 56026, if the results of the assessment as required by Education Code section 56320 demonstrate that the degree of the child's impairment as described in subdivisions (b)(1) through (b)(13) requires special education in one or more of the program options authorized by Education Code section 56361. The decision as to whether or not the assessment results demonstrate that the degree of the child's impairment requires special education shall be made by the IEP team, including personnel in accordance with Education Code section 56341(b). The IEP team shall take into account all the relevant material, which is available on the child. No single score or product of scores shall be used as the sole criterion for the decision of the IEP team as to the child's eligibility for special education.

Visual Impairment:

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.

Please refer to the assessment report provided by the Teacher of the Visually Impaired to review eligibility.

Speech or Language Impairment

A Speech or Language Impairment means a communication disorder in the areas of articulation, voice, fluency, or language, which adversely affects a student's educational performance and cannot be corrected without special education and related services. According to California Code of Regulations, Title 5-3030, a pupil has a speech or language disorder when he or she meets the following criteria:

Articulation:

Yes No The pupil displays reduced intelligibility or an inability to use the speech mechanism which significantly interferes with communication and attracts adverse attention. Significant interference in communication occurs when the pupil's production of single or multiple speech sounds on a developmental scale of articulation competency is below that expected for his or her chronological age or developmental level, and which adversely affects educational performance.

Voice:

Yes No A pupil has an abnormal voice which is characterized by persistent, defective voice quality, pitch, or loudness.

Fluency:

Yes No A pupil has a fluency disorder when the flow of verbal expression including rate and rhythm adversely affects communication between the pupil and listener.

Expressive /Receptive Language:

Yes No (A) The pupil scores at least 1.5 standard deviations below the mean, or below the 7th percentile, for his or her chronological age or developmental level on two or more standardized tests in one or more of the following areas of language development: morphology, syntax, semantics, or pragmatics. **Or**

(B) The pupil scores at least 1.5 standard deviations below the mean or the score is below the 7th percentile for his or her chronological age or developmental level on one or more standardized tests in one of the areas listed in subsection (A) and displays inappropriate or inadequate usage of expressive or receptive language as measured by a representative spontaneous or elicited language sample of a minimum of fifty utterances.

Kaleb **does meet the eligibility** criteria for a Speech or Language Impairment.

RECOMMENDATIONS

- It is recommended that the IEP team consider placement for Kaleb in a classroom with a low student-teacher ratio and structured incremental teaching with the following supports:
 - Speech and language supports are recommended to promote Kaleb’s understanding of language and spontaneous expressive/functional communication during learning/play activities and social interactions, so that he may have his needs met and preferences honored. He will also benefit from supports and interventions to explicitly teach key social communication and interaction skills, and frequent and varied opportunities for practice across school environments and throughout his day.
 - Family is encouraged to continue modeling language. During play times, use the “+1 routine”— Repeat what your child says and add just one word. This will help your child by exposing him to language just above his current level. Do not expect him to repeat the phrase. Use different types of words (nouns/verbs/adjectives) throughout the day and throughout play. Build a 3:1 in your daily routines – for every question you ask, make three comments; asking too many questions, limits spontaneous language use.
 - Communication with Kaleb’s family to assist in carrying over learning skills into the home and community will be beneficial.
 - It is recommended that Kaleb be exposed to developmental activities that encourage use of his fine motor skills. Due to the fact that results of the OT assessment reveal functional skills in the areas of fine motor development and response to sensory input – Kaleb does not require any additional school-based OT intervention. Kaleb’s visual motor skills will be best supported by the visual impairment specialist.
 - Please refer to the assessment report of the Teacher of the Visually Impaired for further recommendations.

The Individualized Education Program team will meet to discuss present levels of performance based on the current evaluations. This information will assist the team in determining an appropriate educational program in the least restrictive environment.

Other non-educational recommendations Kaleb’s family may wish to pursue on a private basis include:

Medical: Kaleb's family is encouraged to share this report with Kaleb's pediatrician in an effort to facilitate clear communication of his needs and to help manage his care.

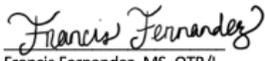
Developing Social Skills in Children Who Are Blind or Visually Impaired -

<https://www.perkins.org/resource/developing-social-skills-children-who-are-blind-or-visually-impaired/#transcript>

It was a pleasure working with Kaleb and his family. Please contact us if any questions arise regarding results of this assessment 916-684-9560.

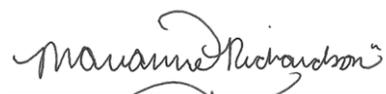
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