# Virginia Alternate Assessment Program (VAAP) Participation Decision-Making Tool: Frequently Asked Questions

## Background

To guide and support individualized education program (IEP) Teams in determining whether a student is most appropriately assessed using Virginia’s alternate assessment, the Virginia Department of Education (VDOE), in consultation with parents, teachers, administrators and other stakeholders, has developed the [Virginia Alternate Assessment Participation (VAAP) Decision-Making Tool](https://www.doe.virginia.gov/home/showpublisheddocument/51942).

This supplemental document addresses questions pertaining to the requirements and completion of the VAAP Decision-Making Tool to determine if the student is eligible to participate in Virginia’s alternate assessment. Sections A-D throughout this document align with the sections within the decision-making tool. General questions and a glossary of terms used throughout the tool are at the end of this document.

## Section A: Determining Initial Eligibility

1. If the IEP Team is considering participation in the alternative assessment for the student as part of the initial IEP, does that count as having a current IEP?

Yes. If this is the student’s initial IEP or if the IEP is being reviewed, the team should consider the student to have a current IEP for the purposes of alternate assessment participation decision-making.

1. What is a significant cognitive disability?

Significant cognitive disability is not a disability category under the [*Individuals with Disabilities Education Act* (IDEA)](https://sites.ed.gov/idea/). Identifying a significant cognitive disability is not solely determined by an IQ test score, nor based on a specific disability category, but rather on a wholistic understanding of the complex needs of the student. Participation in the alternate assessment involves students who have a most significant cognitive disability that impacts both intellectual ability and adaptive functioning (daily living skills). These students will have intellectual functioning and adaptive skills well below average, and other characteristics must also be considered beyond standardized test scores.

The reauthorization of the IDEA, Section 612(a)(17)(A), first required alternate assessments to be developed. The IDEA defined alternate assessment as being for students “who cannot participate in State and district-wide assessment programs.” The term “students with the most significant cognitive disabilities” was not used until [proposed regulations for the *No Child Left Behind Act*](https://www.govinfo.gov/content/pkg/FR-2002-08-06/pdf/02-19539.pdf), Section 200.3(c), (Federal Register, 2002, p. 51005), released summer 2002, introduced the idea of different achievement standards for students with the most significant cognitive disabilities.

The *Every Student Succeeds Act* ([§200.6](https://www.ecfr.gov/current/title-34/subtitle-B/chapter-II/part-200/subpart-A/subject-group-ECFR3da56646dfe7570/section-200.6)) expands on the idea of students with the most significant cognitive disabilities. It states:

*(d)* *State guidelines for students with the most significant cognitive disabilities. If a State adopts alternate academic achievement standards for students with the most significant cognitive disabilities and administers an alternate assessment aligned with those standards, the State must–*

* 1. *Establish, consistent with section 612(a)16(C) of the IDEA and monitor implementation of clear and appropriate guidelines for IEP teams to apply in determining, on a case-by-case basis, which students with the most significant cognitive disabilities will be assessed based on alternate academic achievement standards. Such guidelines must include a State definition of “students with the most significant cognitive disabilities” that addresses factors related to cognitive functioning and adaptive behavior, such that–*

1. *The identification of a student as having a particular disability as defined in the IDEA or as an English Learner does not determine whether a student is a student with the most significant cognitive disabilities;*
2. *A student with the most significant cognitive disabilities is not identified solely on the basis of the student’s previous low academic achievement, or the student’s previous need for accommodations to participate in general State or district wide assessments; and*
3. *A student is identified as having the most significant cognitive disabilities because the student requires extensive direct individualized instruction and substantial supports to achieve measurable gains on the challenging State academic content standards for the grade in which the student is enrolled.*
4. Why can’t a student identified with the disability category of Specific Learning Disability or Speech or Language Impairment (only) qualify for participation in the alternate assessment?

A student with a Specific Learning Disability, by definition, does not have an intellectual component to their disability and cannot be identified as a student with a most significant cognitive disability. The definition of Specific Learning Disability states:

“Specific learning disability does not include learning problems that are primarily the result of visual, hearing or motor disabilities; of intellectual disabilities; of emotional disabilities; of environmental, cultural or economic disadvantage   
(§22.1-213 of the *Code of Virginia*; 34 CFR 300.8(c)(10)).”

Speech and/or Language Impairment (only) is defined as a communicative disorder that impacts a student’s learning. It does not impact intellectual functioning.

1. Why are the first group of IDEA disability categories (Deafness/Hearing Impairment, Emotional Disability, Orthopedic Impairment, Other Health Impairment, Specific Learning Disability, Speech or Language Impairment (only), and Visual Impairment) listed separately from the other of IDEA disability categories within the tool?

Students identified with these disability categories will rarely be students with the most significant cognitive disabilities; therefore, these students will rarely qualify for the alternate assessment. However, there may be situations when the IEP Team identifies a student as having one of these disability types even though the student is a student who meets the most significant cognitive disability criteria. This would be a rare occurrence. For example, if a student has a Visual Impairment and meets the criteria of having a most significant cognitive disability, then Multiple Disabilities may be a more appropriate designation.

1. Why are the other IDEA disability categories (Autism, Deaf-Blindness, Intellectual Disability, Multiple Disabilities, and Traumatic Brain Injury) listed separately from the first group of IDEA disability categories within the tool?

Students identified in these five categories may have significant cognitive disabilities. However, even within these five categories, not all students will have the most significant cognitive disabilities and qualify for the alternate assessment.

## Section B: Determining Most Significant Cognitive Disability

1. What does “presume competence” mean?

In the decision-making tool, presuming competence means that, in the absence of a clear choice between two rows, it is more beneficial to the student to assume the student can do more rather than less.

The 2005 article, [The Least Dangerous Assumption: A Challenge to Create a New Paradigm](https://www.dsadelaware.org/wp-content/uploads/Least-Dangerous-Assumption-by-C-Jorgensen.pdf), Dr. Cheryl Jorgensen argued that presuming competence when addressing students with significant cognitive disabilities is the least dangerous thing to do, because to do otherwise is more likely to result in harm through fewer educational opportunities, inferior literacy instruction, a segregated education, and fewer choices as an adult.

1. In the Conceptual Domain of this section, why were the following statements included in their associated rows:

* The student may have been referred for an initial evaluation during elementary school due to academic difficulties (Row 2);
* The student may have been referred for an evaluation in preschool or kindergarten based on developmental differences (Row 3); and
* The student was most likely identified with developmental delays as an infant or toddler and received early intervention services through the [Early Intervention/Early Childhood Special Education programs](https://www.doe.virginia.gov/?navid=289) (Row 4).

While not always true, students with the most significant cognitive disabilities commonly are identified and begin to receive services at an early age. This reflects the typical timelines that students with varying degrees of disability are first identified and served.

1. Why must a student’s characteristics reside in Row 4 of all three of the adaptive behavior domains (Conceptual, Social, and Practical) to be eligible?

Students who have the most significant cognitive disabilities will have substantially significant deficits in all adaptive behavior domains. Only the descriptors in Row 4 describe such significant deficits.

1. Does the student’s cultural and socioeconomic context matter when determining placement in a row for adaptive behavior?

Yes. When determining limitations in adaptive behavior for students, teams should be careful to separate intellectual disabilities from external factors that are not related to students’ cognitive functioning.

1. Why doesn’t the decision-making tool use IQ or other markers as the determining criteria?

The use of IQ tests and other markers for students are determined to be counterproductive and discriminatory to the student. Presumed competence is conducive to the student’s development and educational growth, allowing the student to maximize their potential to excel in the educational and adult settings.

As Dr. Martha Snell from the University of Virginia noted in [an interview about the 2010 American Association on Intellectual and Developmental Disabilities Definition Manual](http://www.aaidd.org/intellectual-disability/interviews/martha-snell), “It has been 17 years since we began the shift in focus to supports and away from deficiencies.” She continued, “If you provide an individual with the supports that they actually need to achieve valued outcomes, the focus is on what they can learn and what they can do rather than on numbers of IQ points and what an individual cannot achieve.”

## Section C: Determining if the Student Requires Extensive, Direct, Individualized Instruction Aligned to Virginia’s Essentialized Standards of Learning (VESOL) and Substantial Support to Achieve Measurable Gains in the Grade- and Age-Appropriate Curriculum

1. Do all students who qualify for the alternate assessment actually have assistive technology (AT) needs?

Yes. Assistive technology is available to assist students with all types of disabilities to access their environment and promote independence. Students with the most significant cognitive disabilities will always need some type of AT because of severity of their disabilities that can impact access to communication, motor skills, mobility, seating/positioning, literacy, mathematics, executive functioning, vision, and hearing, among other limitations.

Any technology is considered assistive technology if the student with a disability would be less able or unable to independently participate in a task or independently access the resources in the environment relevant to their IEP goals without the technology. If a student’s use of technology requires a modification or accommodation to how it is typically used, then the technology and the adaptation would be considered AT.

1. Is a formal assistive technology evaluation required for a student to have AT?

No. The IEP Teams are required to consider the need for AT for every student with an IEP, including both devices and/or services required by the student to access instruction and promote independence. Through a thoughtful, data-informed consideration process, teams may be able to identify the AT needs of the student. If the team requires additional information to make an informed decision, an assistive technology evaluation is best practice in determining if AT is needed and the appropriate devices and/or services required. This process provides teams with additional data needed to identify more appropriate devices and/or services required or needed by a student and provides information on the instruction the student and/or staff may need to ensure effective implementation of the device(s). The [AT consideration and assessment](https://www.doe.virginia.gov/home/showpublisheddocument/28719) should align with best practices and fully explore the student’s strengths and needs; the environments in which the student lives, works, and plays; the tasks the student will need to complete; and the potential tools that are needed to address challenges.

1. Are “low-tech” solutions still considered AT?

Yes. Low-tech assistive technology is most often defined as a tool or device where no battery or electricity is required to operate it. Students with disabilities can benefit from a broad spectrum of low-tech AT tools including pencil grips, schedules, or laminated communication boards.

1. Why does Section C allow a student to meet the criteria to participate in the alternate assessment if the student’s characteristics are in Row 3 or Row 4, but in Section B, all student characteristics must be in Row 4 only?

Students who have the most significant cognitive disabilities will have substantially significant deficits in all adaptive behavior domains. Only the descriptors in Row 4 describe these significant deficits. However, students with the most significant cognitive disabilities can have varying levels of instructional needs that exceed the least complex level (Row 4 only).

## Section D: Additional Considerations

1. Why does the decision-making tool begin with a review of the student’s disability category when Section D states participation determination is not made based solely on disability category or label?

An IEP Team should not make the decision for a student to participate in the alternate assessment solely based on the student’s identified disability category. Teams must complete the entire Virginia Alternate Assessment Program Participation Decision-Making Tool using current data to determine alternative assessment participation eligibility. There is no disability category in which all students identified with that particular disability will qualify.

Students with a specific learning disability, by definition, cannot have a cognitive disability and, therefore, are not eligible to participate in the alternate assessment. Similarly, students with only a speech and/or language impairment cannot qualify because their communication disorder, by definition, does not impact cognitive functioning. Students identified in categories marked as “proceed with caution” will rarely qualify as these students do not typically have cognitive disabilities significant enough to qualify for alternate assessment participation. If a student is identified by the evaluation team as having a most significant cognitive disability in addition to qualifying for at least one other primary disability (with the exception of Specific Learning Disability), it may be more appropriate to identify this student with the disability category of Multiple Disabilities.

## General Questions

1. Does the decision-making tool need to be completed every year?

Yes. The IEP Team must review the decision-making tool at least annually if participation in the alternate assessment is being considered and at each IEP meeting where participation in the alternate assessment is discussed.

1. Does the decision-making tool need to be signed and attached to the student’s IEP?

Yes. All required members of the IEP Team listed on the tool must sign it. The completed document must be attached to the student’s IEP.

1. Does there have to be data to support each decision-making point?

Yes. For all parts of the decision-making tool, decisions must be data-driven. The data evidence to be used should depend on what is being considered. Examples of data include, but are not limited to, results from formal and informal assessments; data from evidence-based interventions; assistive technology assessment data; learner characteristics; current and recent IEPs documenting supports, services, and progress.

1. What does the IEP Team do when it is having difficulty determining which row to select?

Return to the student-specific data to review current evidence. When current data is not sufficient to make an informed decision, the IEP Team will need to gather additional information, following local evaluation procedures as appropriate. If the team is unable to make a decision despite existing and/or newly collected data, presume competence and select the row that represents the present evidence.

When considering which row best describes a student’s academic, behavioral, and functional needs, the team should take a holistic approach to the student’s characteristics.   
Do not tally the number of characteristics in each row to make a decision, rather consider which row overall best represents the student.

1. What should the IEP Team do if the student has taken the alternate assessment in previous years but determines that the student is no longer eligible to participate in the alternate assessment?

For a variety of reasons, such as newly collected data or reassessment of student abilities, IEP Teams may determine that a student who previously participated in the alternate assessment no longer qualifies. If a student does not qualify for the alternate assessment, the student should be taught at the standard grade-level curriculum and assessed using a general assessment moving forward. Teams may need to discuss testing accommodations required by the student.

Instructional practices and support services should be considered that may allow the student to make progress in the general education curriculum. The team should consider other elements of the student’s educational program, such as instruction to address prerequisite or access skills for the general curriculum, new or additional assistive technology, and increasing inclusive instructional opportunities. Teams should continue to hold high expectations for all students with disabilities and focus on each student’s individual strengths, understanding that all students with disabilities first and foremost are general education students.

1. After the IEP Team completed the decision-making tool, the student did not qualify for participation in the alternate assessment. However, the team believes the student is unable to take the general assessment to demonstrate what the student knows and can do. Is the student eligible to take the alternate assessment?

No. Only students who meet all criteria in the decision-making tool may take the alternate assessment. Teams should discuss instructional services and accommodations, including assistive technology, that may be required by the student to participate in the general assessment to the best of their ability.

1. In our school, students in self-contained classrooms, which serve students with intellectual disabilities, take the alternate assessment. Are the IEP Teams of these students required to use the decision-making tool to determine if each student qualifies for participation in the alternate assessment?

Yes. Participation in the alternate assessment is an IEP Team decision for each individual student. The location where a student is provided instruction is not a criterion for participation in the alternate assessment. Only students who meet all criteria in the decision-making tool may take the alternate assessment.

1. The IEP Team believes a student being considered for alternate assessment will not perform well on the general assessment which will impact the division and school report cards and reflect poorly on teacher evaluations. Since the division has less than one percent of the total student population participating in the alternate assessment, is it permissible to include additional students, who do not meet all criteria in the decision-making tool, until the division reaches the one percent threshold?

Only students who meet all criteria in the decision-making tool may take the alternate assessment. School divisions should have less than one percent participation in the alternate assessment. Divisions and schools should not attempt to maximize the one percent threshold to improve division and school report cards or teacher evaluations. Student participation in the alternate assessment must not be based on anticipated negative impact on school or division report cards or teacher evaluations. If the team does not believe the student will perform well on the general assessment, the team should discuss additional instructional services and accommodations, including assistive technology, that may be required by the student to participate in the general assessment to the best of their ability.

1. The IEP Team is considering a student for participation in the alternate assessment. This student experiences emotional distress when confronted with difficult tasks such as taking the general assessment. The student does not meet all the criteria for participation in the alternate assessment, but the team believes it would be better for the student emotionally. Is the student eligible to take the alternate assessment?

Only students who meet all criteria in the decision-making tool may take the alternate assessment. If a student does not meet all criteria in the decision-making tool for participation in the alternate assessment and struggles taking the general assessment, the IEP Team must consider all available testing accommodations. For a student who gets frustrated easily during testing, the team may consider accommodations such as one-on-one test administration; a familiar test administrator; music, white noise, or ear plugs; time of day the student will test; frequent breaks; and the location where the student will test. The student also may benefit from AT and frequent opportunities to practice test taking. In an effort to assist the student in earning verified credits, the IEP Team may also consider exploring all credit accommodation options available to students with disabilities.

Additionally, IEP Teams may consider specially designed instruction (SDI) needs related to social behavior or social and emotional learning to support interfering behavior that impedes the student’s access to instruction, including grade-level assessment.

1. The student does not qualify for the alternate assessment according to the decision-making tool, but the IEP Team believes the needs of the student should supersede the decision-making tool thus taking the alternate assessment is considered the best option for the student. Does this tool supersede the IEP Team’s decision-making process?

No. The IEP Teams must follow eligibility criteria, identified by the Virginia Alternate Assessment Program (VAAP) Participation Decision-Making Tool, to determine eligibility for the alternate assessment. The role of the IEP Team includes determining if a student meets eligibility criteria for participation based on the identified guidelines within the VAAP Participation Decision-Making Tool. Only students who meet all criteria in the decision-making tool may take the alternate assessment.

## Glossary

### General Terms

**Accommodation:** Changes made to how a student accesses learning content, communication, environments, materials, or assessment. Testing accommodations are adjustments to the testing conditions, test format, or test administration that provide equitable access during assessment for students with disabilities and students who are English learners. Testing accommodations cannot change what is being measured.

**Adaptive skills:** Practical, everyday skills needed to function and meet the demands of one’s environment, including the skills necessary to take care of oneself effectively and independently and interact with other people (American Association on Intellectual and Developmental Disabilities, 2017).

**Assistive technology (AT):** Any technology used by individuals with disabilities who may otherwise not be able to or would not be able to perform a task as well without the technology. An assistive technology device is any item, piece of equipment, or product system, whether acquired commercially, off the shelf, modified or customized, that is used to increase, maintain, or improve the functional capabilities of a child with a disability. The term does not include a medical device that is surgically implanted or the replacement of that device (*Individuals with Disabilities Education Act*). Assistive technology service is any service that directly assists a child with a disability in the selection, acquisition, or use of an assistive technology device. More information on assistive technology is available on [Virginia’s Assistive Technology Network](https://atnetwork.ttaconline.org/home).

**Assistive technology consideration in the IEP:** The IEP Team is required to consider the AT needs of every student receiving special education services. The [Virginia Assistive Technology, Tools, and Strategies (VATTS): Consideration Guide](https://www.doe.virginia.gov/home/showpublisheddocument/28717/) is a tool designed to organize data and facilitate the decision-making process for the consideration and assessment of AT, other technology tools, and strategies that may be required by the student. The [VATTS: Resource Guide](https://www.doe.virginia.gov/home/showpublisheddocument/28723) provides instructional strategies; AT solutions, modifications, and accommodations; and examples used to address areas of need identified through the AT consideration process to support student success. The sample solutions within the VATTS: Resource Guide can help guide IEP Teams to determine appropriate accommodations, modification, and technology solutions.

**Augmentative and alternative communication (AAC):** All forms of communication (other than speech) that are used to express though, needs, wants and ideas are considered ACC (American Speech-Language-Hearing Association, 2017).

[**English learner (EL):**](https://www.doe.virginia.gov/?navid=331) English learners are students whose primary or home language is other than English and who need language assistance to effectively participate in school instructional programs.

**Mode of communication:** This includes, but not limited to, sign language, bilingualism, cued speech, braille, assistive technology devices, and written language.

**Modification:** Changes to what a student is taught or expected to learn. Modifications to grade-level learning change the expectation to learn the full depth of content. Modifications during testing are changes in the standards being measured on the test or in the conditions the student takes the test that results in changes to what the assessment is designed to measure by reducing or changing the expectations for the student. Modifications are not permitted during state testing. The alternate assessment is a different assessment, both in content and expectation, and is not a modified assessment.

**Significant cognitive disability:** This is not a disability category under the *Individuals with Disabilities Education Act* (IDEA). Identifying a significant cognitive disability is not solely determined by an IQ test score, nor based on a specific disability category, but rather on a wholistic understanding of the complex needs of a student. Participation in the alternate assessment involves students who have a most significant cognitive disability that impacts both intellectual ability and adaptive functioning (daily living skills). These students will have intellectual functioning and adaptive skills well below average and other characteristics must also be considered beyond just standardized test scores. A student with a most significant cognitive disability is a student who meets all the criteria in Section B of the decision-making tool. Students are eligible to participate in the alternate assessment only if they meet all the criteria in Sections A-D of the tool.

**Specially designed instruction:** Adapting, as appropriate to the needs of an eligible child, the content, methodology, or delivery of instruction to address the unique needs of the child that results from the child’s disability and to ensure access of the child to the general curriculum, so that the child can meet the educational standards that apply to all children with the jurisdiction of the local education agency(34 CFR 300.39(b)(3); 8VAC20-81-10).

[**Testing Accommodations for Students with Disabilities: Growth Assessments and Standards of Learning Tests**](https://www.doe.virginia.gov/home/showpublisheddocument/20360)**:** A VDOE-guidance document that provides information on a four-step process for selecting and using test accommodations and a description of test accommodations currently permitted on state assessments.

[**Virginia’s Essentialized Standards of Learning**](https://www.doe.virginia.gov/home/showpublisheddocument/20328/) **(VESOL)**[**:**](https://www.doe.virginia.gov/testing/alternative_assessments/vaap_va_alt_assessment_prog/vesol-2021-2022.pdf) Virginia’s Standards of Learning in reading, mathematics, and science that have been reduced in depth and complexity to be more relevant, accessible, and appropriate for students with significant cognitive disabilities.

[**Virginia’s Standards of Learning (SOL)**](https://www.doe.virginia.gov/?navid=324)**:** The Standards of Learning (SOL) for Virginia public schools establish minimum expectations for what students should know and be able to do at the end of each grade or course in English, mathematics, science, history/social science, and other subjects.

### IDEA Disability Category Definitions

The IDEA Disability Category Definitions, as defined by the [*Regulations Governing Special Education Programs for Children with Disabilities in Virginia*](https://law.lis.virginia.gov/admincode/title8/agency20/chapter81/), are listed below. Note: Most categories typically do **not** include a significant intellectual impairment; therefore, these will rarely align with the participation criteria for the alternate assessment.

**Autism:** A developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three, that adversely affects a child’s educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. Autism does not apply if a child’s educational performance is adversely affected primarily because the child has an emotional disturbance. A child who manifests the characteristics of autism after age three could be identified as having autism if the criteria in this definition are satisfied.   
(34 CFR 300.8(c)(1))

**Deaf-Blindness:** Simultaneous hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for children with deafness or children with blindness. (34 CFR 300.8(c)(2))

**Deafness:** A hearing impairment that is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, that adversely affects the child’s educational performance. (34 CFR 300.8(c)(3))

**Developmental Delay:** A disability affecting a child, ages two by September 30 through six, inclusive: 1. who is experiencing developmental delays, as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development; or who has an established physical or mental condition that has a high probability of resulting in developmental delay; 2) the delay(s) is not primarily a result of cultural factors, environmental or economic disadvantage, or limited English proficiency; and 3) the presence of one or more documented characteristics of the delay has an adverse effect on educational performance and makes it necessary for the student to have specially designed instruction to access and make progress in the general educational activities for this age group. (34 CFR 300.8(b); 34 CFR 300.306(b))

**Emotional Disability:** A condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child’s educational performance: 1) an inability to learn that cannot be explained by intellectual, sensory, or health factors; 2) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; 3) inappropriate types of behavior or feelings under normal circumstances; 4) a general pervasive mood of unhappiness or depression; or 5) a tendency to develop physical symptoms or fears associated with personal or school problems. Emotional disability includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disability as defined in this section. (34 CFR 300.8(c)(4))

**Hearing Impairment:** An impairment in hearing in one or both ears, with or without amplification, whether permanent or fluctuating, that adversely affects a child’s educational performance but that is not included under the definition of deafness in this section.   
(34 CFR 300.8(c)(5))

**Intellectual Disability:** The definition formerly known as “mental retardation” and means significantly subaverage general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period that adversely affects a child’s educational performance. (34 CFR 300.8(c)(6))

**Multiple Disabilities:** Simultaneous impairments (e.g., intellectual disability with blindness, intellectual disability with orthopedic impairment), the combination of which causes such severe educational needs that they cannot be accommodated in special education programs solely for one of the impairments. The term does not include Deaf-Blindness.   
(34 CFR 300.8(c) (7))

**Orthopedic Impairment:** A severe orthopedic impairment that adversely affects a child’s educational performance. The term includes impairments caused by congenital anomaly; impairments caused by disease (e.g., poliomyelitis, bone tuberculosis); and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns that cause contractures). (34 CFR 300.8(c)(8))

**Other Health Impairment:** 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 that adversely affects a child’s educational performance.   
(34 CFR 300.8(c)(9))

**Specific Learning Disability:** A disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. Specific learning disability does not include learning problems that are primarily the result of visual, hearing, or motor disabilities; of intellectual disabilities; of emotional disabilities; of environmental, cultural, or economic disadvantage   
(§22.1-213 of the *Code of Virginia*; 34 CFR 300.8(c)(10)). Dyslexia is distinguished from other learning disabilities due to its weakness occurring at the phonological level. Dyslexia is a specific learning disability that is neurobiological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede growth of vocabulary and background knowledge.

**Speech or Language Impairment:** A communication disorder, such as stuttering, impaired articulation, expressive or receptive language impairment, or voice impairment, that adversely affects a child’s educational performance. (34 CFR 300.8(c)(11))

**Traumatic Brain Injury:** An acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a child’s educational performance. Traumatic brain injury applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual, and motor abilities; psychosocial behavior; physical functions; information processing; and speech. Traumatic brain injury does not apply to brain injuries that are congenital or degenerative, or to brain injuries induced by birth trauma. (34 CFR 300.8(c)(12))

**Visual Impairment including Blindness:** An impairment in vision that, even with correction, adversely affects a child’s educational performance. The term includes both partial sight and blindness. (34 CFR 300.8(c)(13))