



APPENDIX F-4: DELAWARE COMMUNICATION PORTFOLIO SUMMARY PARTICIPATION GUIDELINES



Appendix F-4: Delaware Communication Portfolio Summary Participation Guidelines 2017-2018

Student Name: _____ Date of Birth: _____ School: _____ IEP Meeting Date: _____

If it is determined that there is sufficient information to support ALL of the following criteria, the IEP team should document this decision on the student’s current IEP and sign below. Students who do not meet the required criteria of the Delaware Communication Portfolio Summary (DCPS) will participate in the DeSSA-Alternate assessment, DLM, or the general assessment, with or without accommodations.

The achievement of students in the DCPS is based on alternate achievement standards. Students who participate in the DCPS are working on the same *Delaware Content Standards* as their peers; however, they are working on these standards in less complex ways.

NOTE: If a decision is made to participate in the DCPS after the beginning of the winter test window, the student will continue to participate in the DeSSA-Alt or the general assessment for the remainder of the school year.

Participation Criteria	Participation Criteria Descriptors	Sources of Evidence (check if used)
Criterion #1: Meets Criteria for the DeSSA-Alt <input type="checkbox"/> Student meets criteria <input type="checkbox"/> Student does not meet criteria	IEP team agrees that the student meets all criteria to participate in the DeSSA-Alt	<input type="checkbox"/> DeSSA-Alt Participation Criteria have been reviewed and discussed with the IEP Team. Date completed _____
Criterion #2: Complexity of Communication Needs <input type="checkbox"/> Student meets criteria <input type="checkbox"/> Student does not meet criteria	The student’s selected mode of communication requires interpretation by others, or the student does not currently have a consistent and reliable mode of communication that is understood by others.	Evidence must be shown in at least one area: <input type="checkbox"/> Speech/Language Evaluation Results _____ (date) <input type="checkbox"/> Speech/Lang Goals _____ (date of latest progress report reviewed) <input type="checkbox"/> Needs/Annual Goals section from IEP _____ (date of IEP) <input type="checkbox"/> Other _____ (date)
Criterion #3: Student responses <input type="checkbox"/> Student meets criteria <input type="checkbox"/> Student does not meet criteria	Student does not appear engaged or does not reliably use a communication system that is understood by others.	Evidence must be shown in at least one area: <input type="checkbox"/> Teacher survey/observations _____ (date completed) <input type="checkbox"/> Related IEP annual goals/progress updates _____ (date completed) <input type="checkbox"/> Psychoeducational evaluation _____ (date completed) <input type="checkbox"/> Deaf/blind services report, DVI services report _____ (date completed) <input type="checkbox"/> Other _____ (date) _____



Participation Criteria	Participation Criteria Descriptors	Sources of Evidence (check if used)
Criterion #4: Stimuli responses <input type="checkbox"/> Student meets criteria <input type="checkbox"/> Student does not meet criteria	The student primarily shows response to stimuli that are internal (hungry, sleepy, uncomfortable, etc.) or related to immediate environment (specific to activity or an item)	Evidence must be shown in at least one area: <input type="checkbox"/> Teacher survey/observational data _____ (date completed) <input type="checkbox"/> Related IEP annual goals/progress updates _____ (date completed) <input type="checkbox"/> Psychoeducational evaluation _____ (date completed) <input type="checkbox"/> Deaf/blind services report, DVI services report _____ (date completed) <input type="checkbox"/> Other _____ (date) _____
Criterion #5A: Communication Matrix <input type="checkbox"/> YES (Agree) <input type="checkbox"/> NO (Disagree) <input type="checkbox"/> Matrix not yet administered ¹	Communication Matrix: The team reviewed the results and it shows that the student is consistently in lower levels of the matrix.	Date Matrix completed _____ Date reviewed _____
Criterion #5B: Learner Characteristics Inventory <input type="checkbox"/> YES <input type="checkbox"/> NO	LCI: Learner Characteristics Inventory has been reviewed and discussed with the IEP Team.	Date LCI completed _____ Date LCI reviewed _____
Criterion #6A: Previous results state assessments <input type="checkbox"/> YES (Agree) <input type="checkbox"/> NO (Disagree) <input type="checkbox"/> ALT1 Not yet administered	DeSSA-Alt: The results provided limited information and the team feels is the results are not valid. Student consistently received a Performance Level 1.	Date completed _____ Date reviewed _____ For the DeSSA-Alt, the student should have used any AAC (low or high tech) or other means of communication that is typical for the student during daily instruction in order to determine the results to be considered valid.

¹ Not yet administered only applies to students who are being considered for the first time for the DCPS. If eligible for DCSP, the Communication Matrix must be complete before the administration window opens.



Participation Criteria	Participation Criteria Descriptors	Sources of Evidence (check if used)
Criterion #6B: Results of DCPS <input type="checkbox"/> YES (Agree) <input type="checkbox"/> NO (Disagree) <input type="checkbox"/> Portfolio not yet administered	DCPS Results: The results have been reviewed and discussed with the IEP team, and showed that the student is appropriately placed in this assessment. (Not Applicable until 2017-2018 SY.)	Date reviewed _____

Participation in DCPS is not based on the following:	
1. existence of an IEP; 2. specific disability category or label; 3. educational placement or instructional setting; 4. English language learner status; 5. socio-economic or cultural differences; 6. academic and other services received; 7. percent of time receiving special education services 8. excessive or extended absences;	9. anticipated disruptive behavior; 10. anticipated emotional duress; 11. student's reading level; 12. administrator decision 13. impact of test score on accountability system; or 14. the expectation that the student will not perform well on the general assessment
<input type="checkbox"/> Evidence shows that the decision for participation in the DCPS was not based on the above list.	



IEP team members Statement of Assurance:

Our decision was based on multiple pieces of evidence that, when taken together, demonstrated that the DCPS is the most appropriate assessment for this student; that his/her academic instruction will be based on the Delaware Content Standards; and that any additional implications of the decision were discussed thoroughly.

My signature below indicates that I agree with the decision for _____ to participate in the Delaware Communication Portfolio Summary:

(Parent/guardian(s)) (Date)

(Speech Language Therapist/Pathologist) (Date)

(Parent/guardian(s)) (Date)

(Other – please specify name and position) (Date)

(Student – if attending) (Date)

(Other – please specify name and position) (Date)

(Administrator/designee) (Date)

(Other – please specify name and position) (Date)

(Teacher) (Date)

(Other – please specify name and position) (Date)

