

Essential Assessments for Students with Visual Impairments

(QPVI Report Format for academic students ages 3-21, revised 1-23-13)

Based on the Essential Assessments Rubric 2010

***Student:** ***DOB: 15/48/00**
School: ----- Elementary *** Grade: 4th**
***FVA Assessment Date(s): November 1, 99, 2011**
***Evaluator:** Teacher of the Visually Impaired
***Initial or Three-Year Re-evaluation**

PURPOSE OF ASSESSMENT:

Student was referred to the Pasco County School's Program for the Visually Impaired for a functional vision assessment. The purpose of the evaluation is to determine if **Student** meets both the medical and educational criteria to receive vision services from a Teacher of the Visually Impaired.

The evaluation process included a (1) **Functional Vision Assessment** (to determine the degree in which **Student** visual impairment may interfere with his/her learning as well as the educational implications of his/her visual impairment including his/her need for accommodations, special equipment and materials) and a (2) **Learning Media Assessment** (LMA - to determine how **Student** accesses printed information and if instruction in the use of Braille would be appropriate and if not, why). The default learning medium for students with visual impairments is Braille unless **Student's** ability to visually access printed information proves to be an efficient method for him/her to learn now and in the future. Consideration of the prognosis of **Student's** visual diagnosis is also part of the LMA process.

Lastly, the evaluation also included (3) an assessment of **Student's** skills in the areas known to be impacted by a visual impairment such as social skills, independent living skills, self-determination skills, technology skills, Orientation and Mobility skills, career skills, visual efficiency skills, and recreation and leisure skills.

Current Vision Services:

***Direct or collaborative consult?** ***Minutes of VI service per week?**
***Related services?**
***Orientation and Mobility screening / assessment date:**
***Orientation and Mobility Service minutes per week:**
Orientation and Mobility evaluation or screening report attached / included?
Client of Division of Blind Services?

EYE MEDICAL INFORMATION: Optometrist, Dr. >>>> at the >>>>> clinic.

***Exam date:**
***Ocular Conditions / Diagnosis:**
Ocular history:
Etiology:
***Visual acuity measures:**
Corrected Distance:
Right (OD)
Left (OS)
Both (OU)

Corrected Near:

Right (OD)

Left (OS)

Both (OU)

*Visual field restriction:

Contrast sensitivity:

Color vision:

Photophobia:

Muscle function:

Intraocular pressure reading:

Pupillary reflex:

*Prescription for corrective lenses or optical devices:

Prognosis: stable degenerative fluctuating capable of improving guarded

Recommended treatment:

Precautions and suggestions:

INTERVIEW RESULTS:

1. Parent/Caregiver:

2. Classroom Teacher:

3. Student (if appropriate):

4. REVIEW OF RECORDS: Recap of the following information:

Pertinent Medical Information:

***Primary Disability:**

***Other Disabilities:**

***Academic Achievement Information:** (FCAT, Alternate Assessment, End of Course Exams, Grades, etc.)

***Time in General Education:**

***Is this student involved with the Florida Low Vision Initiative?**

*** Is this student registered with FIMC-VI? Number:**

Does this student regularly attend school?

A. FUNCTIONAL VISION ASSESSMENT:

5. Student observations results:

6. Appearance of the eyes:

Observations:

7. Confrontation functional peripheral fields: Using the --- the student's visual fields were assessed as follows:

Observations:

8. Color discrimination: Using the ----- test, the student's color vision was as follows: ----

Observations:

9. **Light sensitivity:** The student's light sensitivity was assessed in the following situations: ----

Observations:

10. **Developmental visual perception skills associated with a visual impairment:** The student's visual perceptual skills were testing using the following: ----

Observations:

11. **Near acuity and discrimination:** The student's near acuity and discrimination were tested using the following tests and items: ----

Observations:

12. **Distance acuity and discrimination:** The student's distance acuity and discrimination was tested using the following tests and items: ----

Observations:

13. **Depth perception:** The student's depth perception was assessed using the following activities: ----

Observations:

14. **Contrast sensitivity:** The student's contrast sensitivity was assessed using the following tests and/or activities: ----

Observations:

15. **Current media functioning:** The student is currently using the following media types: ----

16. ***Assistive Technology Devices Being Used:**

17. ***Assistive Technology Evaluation Date:**

18. ***Low Vision Devices Prescribed / Being Used:**

19. ***Clinical Low Vision Evaluation Date:**

20. **Does information from the recent eye medical report and functional vision indicate a change in visual functioning?**

B. LEARNING MEDIA ASSESSMENT: Learning Media Assessment Components: (Resource: *Learning Media Assessment*, Koenig and Holbrook, TSBVI, 1995)

General Learning Media Checklist: Distance & Near Visual Tasks:

Distance Items in the Classroom:

Near Items in the Classroom:

Needs Noted:

Accommodations/Instructional Recommendations:

***Form 6: Continuing Assessment of Literacy Media:** Basic Reading Inventory (BRI) using the *John's Basic Reading Inventory Braille Version and the Assessment of Braille Literacy Skills (ABLS) the students literacy media was assessed. The results are as follows:

Oral Reading Rates:

| Grade Level Text | Media - Regular or Enlarged Print, Braille (contracted or uncontracted) or Digital (at least two media per grade level for comparison.) | Words Per Minute | Comprehension percentage | Independent, Instructional, or Frustration | Notes / Significant miscues |
|------------------|---|------------------|--------------------------|--|-----------------------------|
| | | | | | |
| | | | | | |
| | | | | | |

Braille Skills:

| | Paper Braille | Tactile Graphics | Refreshable Braille Display | Other (games, etc.) | Notes |
|---------------------|---------------|------------------|-----------------------------|---------------------|-------|
| Hand positions | | | | | |
| Hand Movements | | | | | |
| Writing or Creating | | | | | |
| | | | | | |

Silent Reading Rates:

| Grade Level Text | Media – Regular or Enlarged Print, Braille (contracted or uncontracted), or Digital (at least two media per grade level for comparison.) | Words Per Minute | Comprehension percentage | Independent, Instructional, or Frustration | Notes (Reading behaviors) |
|------------------|--|------------------|--------------------------|--|---------------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Basic Reading Inventory Recap:

***Instructional Reading Grade Level (80% comprehension):**

*** Words per Minute:**

Does the student read at a sufficient rate commensurate to peers?

***Preferred Font Size:**

***Near Working Distance:**

Braille Skills (for current braille readers): Contracted or Uncontracted? Writing? Tactile Graphics?

***Independent Listening Level:**

Form 7: Literacy Tools Inventory:

The literacy tools currently being used by the student are:

Does the student have adequate skills in the use of technology to meet current educational needs?

Can the student read his/her own handwriting effectively?

Is handwriting a viable and effective mode of written communication?

Does the student have adequate skills in the use of technology to achieve future educational and vocational goals?

At what settings can the student access the computer based testing platforms?

How does the student access tablets and /or computers?

Recommendations for Learning Media

1. The student's primary literacy/learning media is:
2. The student's secondary literacy/learning media is:
3. Instruction in Braille (is/is not) recommended due to the following reasons:
4. The following additional literacy tools should be added to the student's toolbox:

Summary of Recommendations for Accommodations

Based on the functional vision and learning media assessment results for **student**, the following accommodations are recommended to assist **Student** in accessing and participating in his/her educational setting:

1. Presentation Accommodations:
2. Responding Accommodations:
3. Setting Accommodations:
4. Scheduling Accommodations:

***D. EXPANDED CORE CURRICULUM:**

(1) Results of ECC Screenings: for each area indicate if student demonstrates skills within their grade or developmental level, or requires additional instruction.

| | | |
|---------------------------------|----------|-------------------|
| Assistive Technology: | On level | Needs instruction |
| Compensatory Skills: | On level | Needs instruction |
| Career Skills: | On level | Needs instruction |
| Recreation and Leisure | On level | Needs instruction |
| Orientation and Mobility | On level | Needs instruction |
| Social Skills | On level | Needs instruction |
| Self-Determination | On level | Needs instruction |

| | | |
|---------------------------|----------|-------------------|
| Sensory Efficiency | On level | Needs instruction |
| Independent Living | On level | Needs instruction |

(2) Results of ECC Assessments: (For each area that was assessed list the area, date of assessment, and results.)

(3) Priority Needs Identified by IEP Team:

E. INDIVIDUAL EDUCATION PLAN/INDIVIDUAL FAMILY SERVICE PLAN (IEP/IFSP)

Recommended measurable goals for the IEP or IFSP:

*Anticipated minutes per week in support of instruction including materials adaptation and management (ordering books, downloading digital materials, tactile graphics, etc.), communication with parents and teachers, planning, etc:

Criteria for Eligibility Statement:

Based on the results of the student’s most recent eye medical exam, Functional Vision and Learning Media Assessment, Expanded Core Curriculum Screening and Assessment, it is recommend to the IEP team that ----- does / does not meet the criteria for a program of specially designed instruction for students with visual impairments.

Evaluator: _____ Title _____

Signature: _____ Date: _____

(*Areas marked with the * are included in the QPVI Master List spreadsheet.)

REFERENCES:

Essential Assessments Rubric, 2010. Karen Blankenship, Mary Ann Siller, Jennifer Coy, Julie Prause, Randy Jose

Learning Media Assessment of Students with Visual Impairments, Texas School for the Blind, 1998. Allen Koenig and Cay Holbrook

Assessment of Braille Literacy Skills, Region IV Educational Consortium,

Looking to Learn, AFB Press, 2000. Frances Mary D'Andrea and Carol Farrenkopf

Form Adapted by: Kay Ratzlaff and Nancy Toelle (January 2013) QPVI Professional Development:
Essential Assessments: FVA, LMA, ECC