



Office of Adapted Physical Education  
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ADAPTED PHYSICAL EDUCATION REPORT OF ASSESSMENT

CONFIDENTIAL

<b>Student Name</b>		<b>Date of Birth</b>		<b>Age</b>	
<b>Date(s) Tested</b>		<b>Report Date</b>		<b>Type</b>	
<b>School</b>	Rainbow Springs	<b>Grade</b>		<b>Assessor</b>	<u>Heidi Ambrosius, M.A. CAPE</u> Adapted PE Specialist
<b>Primary Language</b>		<b>Language of Assessment</b>			

**REASON FOR REFERRAL**

(student) was referred for an Adapted Physical Education gross motor assessment as part of his/her initial special education assessment by the school district and his transition from an IFSP (Part C to Part B IDEA) due to concerns in the area of gross motor development. (student) has been on an IFSP since

(student) was referred for an Adapted Physical Education gross motor assessment as part of his/her initial special education assessment by the school district as requested by parent per search and serve referral and due to concerns in the area of gross motor development.

Parent Interview/Parent concerns:

Teacher Interview/Teacher concerns:

**BACKGROUND INFORMATION/MEDICAL AND DEVELOPMENTAL HISTORY**

## PURPOSE/DEFINITION OF ADAPTED PHYSICAL EDUCATION

Adapted Physical Education focuses on gross motor movements; object control, locomotor, functional skills, physical fitness, motor fitness (improving motor coordination of skills), recreation/leisure activities, sport and game skills, dance and aquatics. APE teachers strive to improve movement performance and facilitate a child's ability to access their school environment and keep up with their peers in a school setting. In California APE is defined in the California Code of Regulations, CCR, Title 5, under sec 3051.5 as "APE is for individuals with exceptional needs who require developmental or corrective instruction and who are precluded from participation in the activities of the general education program, or in a specially designed PE program in a special class. All children, unless excused or exempt, are required to have and appropriate PE program. In addition these services should be provided in such a manner that promotes maximum interaction between children with disabilities and their non-disabled peers..." "Adapted Physical Education is part of Special Education (34 CFR sec 300.39 (a)(ii) and as such applies to preschoolers who meet the additional eligibility requirements for Individuals with Exceptional needs from birth-four years and 9 months stated in 34 CFR. Sec 3031."

District Eligibility Criteria for Adapted PE is based on the California Adapted Physical Education Guidelines which state that assessment results are used to inform placement decisions. According to the APE guidelines, to be eligible for services (student)s must be performing at or below 1.5 standard deviations below the mean, have a raw score at the 7<sup>th</sup> percentile or below, or be functioning below 30% of their chronological age. **However, this is only a guideline to consider in conjunction with findings from all other forms of assessment.** Services can range from consultation (i.e., the APE specialist interacts with the teacher who in turn meets the needs of the (student)) to collaboration (i.e., APE specialist and teachers co-teach in order to meet the needs of the (student)) to direct services (i.e., APE specialist works directly with the (student) to meet the identified needs). A Student first must be found eligible for special education before they can be eligible for Adapted Physical Education services.

## PREVIOUS ASSESSMENT RESULTS

## CURRENT ASSESSMENT PROCEDURES

**Current Assessment Procedures:** (Student) was assessed in the motor room and on the playground at Rainbow Springs School with his/her parent and the District Occupational Therapist present.

## OBSERVATIONS/BEHAVIOR DURING ASSESSMENT

### Observations/Behavior during assessment:

**Observation #1:** \*\*DATE\*\*- Assessment in the motor room and on the playground at Rainbow Springs. (student) interacted with the assessor, was able to follow directions and attempted tasks when demonstrated. He needed some redirection as he was somewhat distractible, but he was easily redirected.

Observation #2: \*\*DATE\*\*-

*Based on direct assessment, observation and parent/teacher interview this is believed to be an accurate assessment of (student's) gross motor skills at this time.*

#### CURRENT DIAGNOSTIC INSTRUMENTS

*Testing and assessment materials and procedures were used for the purposes for which the assessments or measures are valid and reliable. The assessment results represent a valid and reliable estimate of current gross motor functioning.*

#### **Diagnostic Instruments Used:**

1. Brigance Inventory of Early Development III Standardized- Physical Development Gross Motor subtest (Brigance IED III)
2. Developmental Assessment of Young Children 2<sup>nd</sup> Edition Gross Motor Development Subdomain (DAYC-2)
3. Los Angeles County Curriculum, Assessment, Resources and Evaluation- Revised 2<sup>nd</sup> Edition (CARE-R 2)
4. Southern California Ordinal Scales of Development- Development Scales of Gross Motor Abilities
5. Learning Accomplishment Profile Diagnostic 3<sup>rd</sup> Edition Body Movement and Object Movement subtests (LAP-D)
6. Louisiana Motor Assessment for Preschoolers (LaMap)
7. Adapted Physical Education Assessment Scale- Preschool (APEAS)
8. Test of Gross Motor Development 3<sup>rd</sup> Edition (TGMD-3)
9. Kounas Assessment of Limited Mobility (student)s (KALMS)
10. Observation
11. Parent Interview
12. Records Review

#### BRIGANCE INVENTORY OF EARLY DEVELOPMENT III (IED-III)- STANDARDIZED

*The IED III—Standardized is a norm-referenced assessment instrument, which compares your child's scores to national scores for other children in the same age range. While the instrument can be used to measure other academic areas, such as language development, literacy, mathematics, daily living skills, social and emotional development, and fine motor skills, only the Gross Motor subdomain was administered to your child for the purpose of this adapted physical education evaluation.*

Results are presented in the table below:

**(PASTE SNIPPET FROM [ONLINE SCORING TOOL HERE](#), and DELETE the sample one for Justa Figment.)**

Ability Level	Composite Scores	Scaled Scores
Very Strong	>130	17+
Strong	121-130	15-16
Above Average	111-120	13-14
Average	90-110	8-12
Below Average	80-89	6-7
Weak	70-79	4-5
Very Weak	<69	<3

**DEVELOPMENTAL ASSESSMENT OF YOUNG CHILDREN SECOND EDITION (DAYC-2)  
PHYSICAL DEVELOPMENT SUBTEST GROSS MOTOR DOMAIN**

The DAYC-2 is an individually administered, norm-referenced measure of early childhood development for children birth through age 5 years 11 months. The physical development domain measures motor development. The gross motor portion of the physical development subtest was used for this assessment.

Raw Score	Standard Score	Percentile Rank	Age Equivalent

Standard Scores	Descriptive Term
>130	Very Superior
121-130	Superior
111-120	Above Average
90-110	Average
80-89	Below Average
70-79	Poor
<70	Very Poor

**LOS ANGELES COUNTY CURRICULUM, ASSESSMENT, RESOURCES, AND EVALUATION  
REVISED, SECOND EDITION (CARE-R 2)**

The L.A. CARE-R 2 was developed to provide a means to measure motor skills in a simple, criterion referenced format and was developed by the Los Angeles County Office of Education. Test items are organized into five skill areas: Gross Motor, Object Control, Health and Physical Fitness, Perceptual Motor and Fine Motor. Only the Gross Motor and Object Control Motor subtests were used for the purpose of this assessment.

<b>Motor Skill Area:</b>	<b>Age Equivalency:</b>
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Gross Motor Skills:	
Object Control Skills:	

**THE SOUTHERN CALIFORNIA ORDINAL SCALES OF DEVELOPMENT  
DEVELOPMENTAL SCALE OF GROSS MOTOR ABILITIES**

The Southern California Ordinal Scales of Development- Developmental Scale of Gross Motor Abilities is criterion referenced rather than norm referenced. Assessment procedures are flexible rather than fixed. The scoring system takes into account the quality as well as the quantity of the responses. The flexibility of this assessment permits adapting assessment procedures to the needs of the individual. The four maturational stages of motor development are described by Jean Piaget's theory of development.

**Gross Motor**

**Strength:** The necessary and sufficient power to perform a given task or activity

**Balance:** Automatic redefinition of one's center of gravity during movement. Balance is a combination of sensory input and motor activity resulting from and based upon it. It depends on an individual's awareness of his/her body (the relationship among arms, legs, torso, head) relative to their surroundings

**Mobility:** The series of self-initiated movements that transport the individual from one place to another

**Coordination:** Harmonious or synchronized motor activity.

**Gross Motor Skills:**

<b>Functional Level of Performance:</b>	
<b>Basal Level of Performance:</b>	
<b>Ceiling Level of Performance:</b>	

<b>Strength</b>	
<b>Balance</b>	
<b>Mobility</b>	
<b>Coordination</b>	

**THE LEARNING ACCOMPLISHMENT PROFILE-DIAGNOSTIC 3<sup>RD</sup> EDITION  
LAP-D 3**

The LAP-D 3 is a norm-referenced assessment tool that assesses children functioning in the 30-72 month age range in the areas of Cognition, Communication, Gross Motor and Fine motor. The Gross motor subtest is broken down into two areas: Body Movement and Object Movement. Only the Gross motor subtest was used for the purposes of this assessment.

Subtest Area	Raw Score	Percentile	Z-Score	Age Equivalent
Body Movement				
Object Movement				

Ability Level	Standard Scores	T-Scores
Very Superior	130+	70+
Superior	120-129	63-69
High Average	110-119	57-62
Average	90-109	43-56
Low Average	80-89	37-42
Below Average	70-79	30-36
Delayed/Deficient	<69	<29

#### LOUISIANA MOTOR ASSESSMENT FOR PRESCHOOLERS

The LaMAP is designed to assess the motor skills of children under the age of six and evaluates four fundamental motor skill areas; locomotor skills, manipulative skills, balance, and body/spatial awareness. It contains three levels for testing, 2 years 6 months to 3 years 5 months, 3 years 6 months to 4 years 5 months, and 4 years 6 months to 5 years 11 months. Use of the LaMap is mandatory for determining eligibility for adapted physical education for preschool (student)s.

<b>Passed items:</b>	
<b>Failed Items:</b>	
<b>Number passed x's 5 =percent score</b>	

Percentages:	Type of Deficit if indicated:
70% - 100%	NO motor deficit (none).
45% - 69%	Indicates a MILD motor deficit.
20% - 44%	Indicates a MODERATE motor deficit.
0% - 19%	Indicates a SEVERE motor deficit.

#### BATELLE DEVELOPMENTAL INVENTORY 2<sup>ND</sup> EDITION (BDI-2)

The BDI-2 is an early childhood instrument based on the concepts of developmental milestones. It may be used by a team of professionals or by an individual service provider. Accommodations and modifications are available for professionals when assessing infants and children with special needs or disabilities. The BDI-2 is appropriate for all children ages birth to 7-11 years. Only the Gross Motor subtest was administered for the purposes of this assessment.

\*Assessment information gathered from publisher's website.

Domains/ Subdomains	Age Equivalent	Subdomain Raw Score Totals	Subdomain Percentile Rank	Subdomain Scaled Score
Gross Motor				

### LAUSD ADAPTED PHYSICAL EDUCATION ASSESSMENT SCALE (APEAS) PRESCHOOL MOTOR ASSESSMENT

The LAUSD APEAS Preschool Motor Assessment tests motor performance in four major areas: balance (static and dynamic), locomotor (walk, run, jump, hop stairs), and gross motor/object control (throw, catch, kick). It's primary purpose is to determine appropriate services for preschool (student)s who may have deficits in gross motor skills.

Motor Performance.	Skill Achieved.	Development Age.	Chronological Age
I. Balance			
II. Locomotor			
Walk			
Run			
Jump			
Hop			
Stairs			
III. Gross Motor- Object Control			
Throw			
Catch			
Kick			

### TEST OF GROSS MOTOR DEVELOPMENT- THIRD EDITION (TGMD-3)

The Test of Gross Motor Development- Third Edition is a norm and criterion referenced tool that assesses two areas of basic motor skills for students 3 – 10 years. They include locomotor which is how a child moves their body through space and ball skills which include eye-hand and

eye-foot coordination and basic ball handling skills. The locomotor subtest includes running, galloping, jumping, hopping, skipping, and sliding. The ball skills subtest includes striking (bat and paddle), kicking, throwing a small ball (overhand and underhand), catching and dribbling.

Subtest Area	Raw Score	Percentile	Scaled Score	Age Equivalent
Locomotor				
Ball Skills				

<b>Sum of Scaled Scores</b>	
<b>Gross Motor Index</b>	
<b>Overall Percentile</b>	

Descriptive Rating	Gross Motor Index	Percentile	Scaled Scores
Gifted/Advanced	>129	99th	17+
Superior	120-129	92-98 <sup>th</sup>	15-16
Above Average	110-119	76-91 <sup>st</sup>	13-14
Average	90-109	25-75 <sup>th</sup>	8-12
Below Average	80-89	10-24 <sup>th</sup>	6-7
Borderline Impaired or Delayed	70-79	2-8 <sup>th</sup>	4-5
Impaired or Delayed	<70	<1 <sup>st</sup>	<3

#### OHIO STATE UNIVERSITY SCALE OF INTRA GROSS MOTOR ASSESSMENT (OSU)

The OSU is a criterion referenced assessment and screening device. It is a developmental checklist that reflects maturity levels in gross motor performance tasks and basic skill attainment. Level IV is the highest level to be attained (mature).

Basic Skill	Level
Walking	
Running	
Throwing	
Catching	
Kicking	
Jumping	
Hopping	
Skipping	
Striking	
Balance Beam Forward	
Balance Beam Backwards	
Static Balance	Left: Right:



## FUNCTIONAL ASSESSMENT OF CHILDREN WITH SEVERE DISABILITIES

This functional skills assessment was developed by Martin E. Block, Ph.D. at the University of Virginia. It was developed as an assessment tool for students with severe disabilities who are not able to participate in most standardized assessments. The Functional Movement and Movement Analysis, Functional Mobility, Functional Physical Fitness and Functional Ball skills portions of this assessment were utilized as they are applicable to Adapted Physical Education.

### **Functional Position and Movement Analysis:**

#### Sitting in Wheelchair:

	<u>Cannot Move</u>	<u>Non Functional Movements</u>	<u>Some functional movements</u>	<u>Functional Movement</u>
Head				
Left arm				
Right arm				
Left leg				
Right leg				
Grasp- left				
Release- left				
Grasp- right				
Release- right				

#### Sitting/Standing/Rolling:

<u>Sitting</u>	<u>Always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Never</u>
Sits independently for 30 seconds or more				
Demonstrates righting response in sitting				
Sits for 10 seconds independently				
Sits for 5 seconds independently				
Needs minimal support to sit				
Needs significant support to sit				

#### Standing:

<u>Standing</u>	<u>Always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Never</u>
Stands on floor independently with				

support from walker for 30 seconds or more				
Demonstrates righting responses in standing				
Stands on floor independently or with support from walker for 10 seconds or more				
Stands on floor independently or with support from walker for 5 seconds or more				
Stands on floor with support person				
Cannot stand on floor even with support person				

PT reported that she was able to stand at a table with support for 3 minutes

**Functional Mobility:**

Gait Trainer:

	<u>Always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Never</u>
Walks independently, avoids obstacles, can change directions, can stop and start				
Takes 10 or more independent, reciprocal steps				
Takes 5-10 independent, reciprocal steps				
Takes 1-2 independent, reciprocal steps				
Tries to move legs or moves legs with assistance				

Manual Wheelchair:

	<u>Always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Never</u>
Moves chair independently, avoids obstacles, changes				

directions, stops and starts				
Moves chair forward 20' or more independently				
Moves chair forward 5-10' or more independently				
Moves chair forward 1-5' or more independently				
Places hands on rims of chair independently				
Places hands on rims of chair with assistance				

**Functional Physical Fitness:**

	<u>Adequate</u>	<u>Needs Improvement</u>	<u>Significantly Inadequate</u>	<u>Not Observed</u>
Functional Upper Body Strength				
Functional Lower Body Strength				
Functional Flexibility				
Functional endurance				
Body Composition				

Comments regarding functional fitness: Miracle has diagnoses of pulmonary hypertension, asthma, and allergic rhinitis which may impact her ability to participate in moderate fitness activities.

**Ball Skills:**

Grasp/Release/Toss from wheelchair

	<u>Always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Never</u>
Grasps then tossed object independently 2'				
Grasps then tossed object independently 1-2'				
Grasps then tossed object independently 5-10"				
Grasps then tosses object independently 1-3"				
Grasps, holds, and drops object away from body				

Grasps, holds, and drops object independently				
Grasps and holds object; inconsistent release				
Grasps and holds object cannot release				
Grasps and holds object for 10-15 seconds				
Grasps and holds object for less than 10 seconds				
Grasps and holds object with assistance				

Kicking- from wheelchair

	<u>Always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Never</u>
Kicks ball forward 5-10'				
Kicks ball forward 3-5'				
Kicks ball forward 1-2'				
Puts foot next to ball and pushes ball forward				
Puts foot next to ball and touches ball				
Needs assistance to put foot on ball				

## SUMMARY OF SKILL ASSESSMENT

Gross Motor/Locomotor/Balance Skills:

Data collected through testing and specialist observation to determine the student's ability to create a variety of fundamental locomotor movement patterns indicate that skills in this area are estimated to be within the age range of approximately 2 ½ when using normed and criterion referenced assessment tools.

Object Control/Eye-Hand Coordination Skills:

Data collected through testing and specialist observation to determine the student's ability to control and manipulate various gaming equipment demonstrating eye-hand and eye-foot coordination skills indicate that skills in this area are estimated to be within age range of approximately 2-3 years when using normed and criterion referenced assessment tools.

Play/Socialization Skills:

Health Related Fitness:

At this time the (student) *does/does not* show any significant health related fitness concerns (body composition, muscular strength/endurance, cardiovascular endurance, flexibility) that would prevent him/her from participating in moderate fitness activities.

## PHYSICAL EDUCATION SERVICE DELIVERY OPTIONS

### Adapted Physical Education Guidelines in California Schools

#### General Physical Education:

This option encompasses a full spectrum of game, sport, fitness, and movement activities, including physical and motor fitness, fundamental motor skills and patterns, and skills in aquatics, dance, and individual and group games and sports. The (student) participates with or without accommodations, adaptations, or modifications that can be made by the general physical education teacher. The IEP should accurately reflect any accommodations, adaptations, or modifications that are necessary for the (student) to participate successfully (and safely) in the general physical education program.

#### Specially Designed Physical Education:

This physical education program is for a special education class with minimal or limited adaptations, accommodations or modifications and is provided for the children and taught by the person who normally teaches physical education for this population

#### Adapted Physical Education:

Adapted physical education is a service provided by a credentialed adapted physical education teacher to individuals who have needs that cannot be adequately satisfied in other physical education programs as indicated by the assessment and IEP process. Adapted physical education service may be provided through direct instruction, team teaching, the appropriate use of aides or collaborative consultation as long as appropriate goal(s) and objective(s) are indicated and accurately monitored by the adapted physical education teacher

## ELIGIBILITY CONSIDERATIONS

*In abidance with EC 56001.(j), EC 56320(a)(2)(e), no single assessment instrument shall be the sole criterion for determining that pupil is an individual with exceptional needs or the placement of a pupil.*

*According to the California Code of Regulations, Title 5, Education Section 3030 under the Individuals with Disabilities Education Act (IDEA) Iris is a student with the following disabling condition(s):*

(student) currently does meet the eligibility criteria for Special Education services as defined in the federal and state regulations under the category of **Other Health Impaired** (Title 5, 3030[9]). Other Health Impairment means 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 a chronic or acute health problem. Specifically, Iris' diagnosis of fine and gross motor delay and/or possibility of cerebral palsy does result in limited strength, vitality or alertness, which adversely affects her educational performance. This area can be monitored and assessed again due to concerns with a possible Orthopedic Impairment.

(student) currently does meet the eligibility criteria for Special Education services as defined in the federal and state regulation under the category of Orthopedic Impairment (Title 5, 3030[e]). Specifically, (student) has difficulty with gross and fine motor activities due to his diagnosis of cerebral palsy. Therefore, his educational performance in regards to motor skills and his ability to safely and successfully engage in such activities of the physical education curriculum are effected as evidenced in his gross motor assessment. As defined by the US Department of Education "*Orthopedic impairment means a severe orthopedic impairment that adversely affects a child's educational performance. The term includes impairments caused by a 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).*"

(student) currently does meet the eligibility criteria for Special Education services as defined in the federal and state regulation under the category of Other Health Impairment (Title 5, 3030[9]). As defined by the US Department of Education "*Other Health Impairment means 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 a chronic or acute health problems and adversely effects a child's educational performance.*" Specifically, Kennedy's medical diagnosis of Osteogenesis Imperfecta Type I adversely affects her ability to perform and participate in such activities of the physical education curriculum as evidenced in her gross motor assessment.

#### SUMMARY OF SCORES/ELIGIBILITY

##### DNQ:

On the Brigance IED III (student) had a composite score of which places him in the Average range, the month age range and in the percentile. On the DAYC-2 he had a standard score of 108 which places him in the range, the age range and in the percentile. On the CARE-R 2 he scored in the year age range in the gross motor/locomotor skill subtest area and in the 3 year age range in the object control skill subtest area. On the Ordinal scales (student) had a functional level of 2-4 and a ceiling level of 2-4 years. According to the MVUSD District Eligibility Criteria, in accordance with the California State Adapted PE Guidelines and California Education Code, in order to be eligible for Adapted PE services a student needs to score 1.5 standard deviations below the mean, in the 7<sup>th</sup> percentile or below, or 30% below their chronological age level. (student) scored above the 7<sup>th</sup> percentile on the given standardized assessments and within his chronological age range on all given assessments. (student) is therefore not eligible for

nor does he/she require Adapted PE services to assist in developing necessary gross motor skills to access physical education curriculum.

## RECOMMENDATIONS

(student) *is not* displaying deficits in gross motor skills that interfere with his/her ability to participate in age level gross motor activities or to acquire new skills. As mentioned in the previous paragraph (student) *does not* require Adapted PE Services. (student) should participate in age level gross motor activities with his peers. This information will be provided to the IEP team so that (student) may participate in PE in his least restrictive environment. This is the least restrictive and most appropriate environment for (student) at this time.

### **Qualifies:**

#### **Summary of Scores/Eligibility:**

On the Brigance IED III (student) had a composite score of 78 which places him in the "weak" range, the 21 month age range and in the 8<sup>th</sup> percentile. On the LAPD-3 (student) had Body Movement T score of which places him/her in the \*\*\*\* range, the 2<sup>nd</sup> percentile and in the \*\*\*\*month age range. He/she had a LAPD-3 Object Movement T score of 54 which places him/her in the \*\*\*\*\* age range, the 65<sup>th</sup> percentile and in the 39-44 month age range. On the DAYC-2 had a standard score of 82 which places him in the Below Average range, the 19 month age range and in the 12<sup>th</sup> percentile. On the CARE-R 2 he scored in the 1 ½- 2 year age range in the gross motor/locomotor skill subtest area and in the 2 year age range in the object control skill subtest area. On the Ordinal scales (student) had a functional level of and a ceiling level of . According to the MVUSD District Eligibility Criteria, in accordance with the California State Adapted PE Guidelines and California Education Code, in order to be eligible for Adapted PE services a student needs to score 1.5 standard deviations below the mean, in the 7<sup>th</sup> percentile or below, or 30% below their chronological age level. 24 months is 30% below (student)'s age level and he scored at or below the 24 month age level on all assessments except the object control subtest of the CARE-R 2 for which he had some 3 year old skills. (student) is therefore eligible for and requires Adapted PE services to assist in developing necessary gross motor skills to access physical education curriculum and to participate in his/her least restrictive environment for PE.

#### **Recommendations:**

(student)'s deficits in gross motor skills interfere with his/her ability to participate in age level gross motor activities and to acquire new skills. As mentioned in the previous paragraph (student) requires remediation for these skills in the form of Adapted PE Services. This information will be provided to the IEP team and an appropriate level of service determined for (student) so that he may successfully participate in PE in his least restrictive environment. (student) should also participate in General Education PE with modifications as needed. APE Specialist will also provide consultation to (student)'s teacher to assist in implementing modifications within the general PE setting so that (student) can participate to the best of his ability with age level peers. This is the least restrictive and most appropriate environment for (student) at this time.

#### **Qualifies- Collaboration:**

**Summary of Scores/Eligibility:**

On the DAYC-2 (student) had a standard score of 56 which places her in the very poor range, the 11 month age range and in the 0.2<sup>nd</sup> percentile. On the CARE-R 2 she scored in the 12-15 month age range in the gross motor/locomotor skill subtest area and in the 1 ½ -2 year age range in the object control skill subtest area. On the Ordinal scales (student) had a functional level of 8-12 months and a ceiling level of 1 ½ - 2 years. According to the MVUSD District Eligibility Criteria, in accordance with the California State Adapted PE Guidelines and California Education Code, in order to be eligible for Adapted PE services a student needs to score 1.5 standard deviations below the mean, in the 7<sup>th</sup> percentile or below, or 30% below their chronological age level. (student) scored below the 7<sup>th</sup> percentile on the DAYC-2 and more than 30% below age level on all given assessments (25 months is 30% below age level). (student) is therefore eligible for and requires Adapted PE services to assist in developing necessary gross motor skills to access physical education curriculum and to participate in his least restrictive environment for PE. It is recommended that these services be collaborative in nature because at this time (student)'s will benefit most from working on gross motor skills within her least restrictive environment of Specially Designed physical education.

**Recommendations:**

(student)'s deficits in gross motor skills interfere with her ability to participate in age level gross motor activities and to acquire new skills. As mentioned in the previous paragraph (student) requires remediation for these skills in the form of Adapted PE Collaboration Services. This information will be provided to the IEP team and an appropriate level of service determined for (student) so that she may successfully participate in PE in her least restrictive environment. (student) should also participate in Specially Designed PE as provided by the classroom teacher. This is the least restrictive and most appropriate environment for (student) at this time.

**Qualifies- Direct:**

On the Brigance IED III (student) had a composite score of \_\_\_\_\_ which places him/her in the \_\_\_\_\_ range, in the \_\_\_\_\_ percentile and with an age equivalent of \_\_\_\_\_. On the DAYC-2 she (student) had a standard score of \_\_\_\_\_ which places him/her in the \_\_\_\_\_ range, in the \_\_\_\_\_ percentile and with an age equivalent of \_\_\_\_\_. On the LAP-D (student) scored in the below average range on the Body Movement subtest and in the Deficient range on the Object Movement Subtest. On the CARE-R 2 she scored in the \_\_\_\_\_ year age range in the gross motor/locomotor skill subtest area and in the \_\_\_\_\_ year age range in the object control skill subtest area. On the LaMAP she scored a 25% which indicates a moderate motor delay. According to the MVUSD District Eligibility Criteria, in accordance with the California State Adapted PE Guidelines, in order to be eligible for Adapted PE services a student needs to score 1.5 standard deviations below the mean, in the 7<sup>th</sup> percentile or below, or 30% below their chronological age level. (student) scored below the 7<sup>th</sup> percentile on the LAP-D and 30% below his chronological age level on DAYC-2 and the CARE-R. (30% below Julian's chronological age is 38 months). (student) therefore requires Adapted PE services to assist in developing necessary gross motor skills to access physical education curriculum and to participate in their least restrictive environment for PE. (student)'s diagnosis of \*\*\*\*\* impacts her gross motor skills in that she has very small stature and appears to have weak muscles which interferes with her acquiring locomotor and object control skills which supports her eligibility as a student demonstrating an Other Health Impairment. It is also believed that her astigmatism affects object control skills. This information will be provided to the IEP team and an appropriate level of



service determined for (student) so that he may successfully participate in PE in his least restrictive environment. (student) should also participate in General Education PE with modifications as needed. APE Specialist will provide consultation to (student)'s teacher to assist in implementing modifications within the general PE setting so that (student) can participate to the best of her ability with age level peers. This is the least restrictive and most appropriate environment for (student) at this time.

### **Qualifies- collaboration**

#### **Summary/Recommendations:**

On the Brigance IED III Isabel had a composite (standard) score of 82 which placed her in the 12<sup>th</sup> percentile and in the low average range. On the DAYC-2 she had a standard score of 76 which places her in the 5<sup>th</sup> percentile and in the poor range. On the CARE-R 2 she scored in the 1 ½- 2 year age range in the gross motor/locomotor skill subtest area and in the 2 year age range in the object control skill subtest area. On the LaMAP she scored a 25% which indicates a moderate motor delay. According to the MVUSD District Eligibility Criteria, in accordance with the California State Adapted PE Guidelines, in order to be eligible for Adapted PE services a student needs to score 1.5 standard deviations below the mean, in the 7<sup>th</sup> percentile or below, or 30% below their chronological age level. Isabel scored below the 7<sup>th</sup> percentile on the DAYC-2 and 30% below her chronological age level on the Brigance, DAYC-2, and CARE-R 2. (30% below Isabel's chronological age is 24 months). (student) therefore requires Adapted PE services to assist in developing necessary gross motor skills to access physical education curriculum and to participate in their least restrictive environment for PE. It is recommended that these services be collaborative in nature to best meet (student) needs. This information will be provided to the IEP team and an appropriate level of service determined for (student) so that she may successfully participate in PE in his/her least restrictive environment. (student) should also participate in Specially Designed PE as provided by his/her classroom teacher. This is the least restrictive and most appropriate environment for (student) at this time.

#### **DNQ:**

#### **Summary/Recommendations:**

On the DAYC-2 (student) scored in the 38 month age range with a standard score of 105 which places him in the average range. On the CARE-R he scored in the 2- 2 ½ year age range in the gross motor/locomotor skill subtest area and in the 3 year age range in the object control skill subtest area. On the Ordinal Scales (student) had a functional gross motor level in the 2-4 year age range. According to the MVUSD District Eligibility Criteria, in accordance with the California State Adapted PE Guidelines, in order to be eligible for Adapted PE services a student needs to score 1.5 standard deviations below the mean, in the 7<sup>th</sup> percentile or below, or 30% below their chronological age level. (student) scored in the 63<sup>rd</sup> percentile on the DAYC-2, close to age level on the CARE-R 2, and functionally within his age level on the Ordinal Scales. (student) therefore does not require Adapted PE services to access physical education curriculum and to participate in their least restrictive environment for PE. It is recommended that (student) participate in Specially Designed/General Education PE activities with age level peers. This is the least restrictive and most appropriate PE environment for (student) at this time.

#### **LRE DNQ:**

**Summary/Recommendations:**

On the DAYC-2 (student) scored in the 19 month age range with a standard score of 82 which places him in the below average range. On the CARE-R he scored in the 1 ½ - 2 year age range in the gross motor/locomotor skill subtest area and in the 2-3 year age range in the object control skill subtest area. On the Ordinal Scales (student)'s functional level of performance was in the 1 – 1 ½ year age range with several skills in the 2-4 year age range (ceiling range). According to the MVUSD District Eligibility Criteria, in accordance with the California State Adapted PE Guidelines, in order to be eligible for Adapted PE services a student needs to score 1.5 standard deviations below the mean, in the 7<sup>th</sup> percentile or below, or 30% below their chronological age level. (student) scored in the 12<sup>th</sup> percentile on the DAYC-2, but 30% below his age level which is 24 months. (student) scored 30% below age level on the gross motor subtest of the CARE-R 2 and on the Ordinal Scales as his functional level was in the 1-1 ½ year age range. Although (student)'s scores make him eligible for Adapted PE it is the assessor's conclusion that he is not demonstrating a need for Adapted PE services at this time because (student) has close to age appropriate object control skills which will allow him to successfully participate in Specially Designed PE as provided by his classroom teacher. Because of the low muscle tone due to Down Syndrome it will naturally take (student) longer to acquire balance and locomotor skills. It is the recommendation of the assessor that Specially Designed PE is the least restrictive environment for (student) at this time.

**Qualifies Autism Collab:**

**Summary/Recommendations:**

On the Brigance IED III Standardized (student) scored in the 5<sup>th</sup> percentile which gave them a standard score of \_\_\_\_ which places her/him in the " " range. On the DAYC-2 (student) scored in the month age range with a standard score of 85 which places him in the below average range. On the CARE-R he scored in the 1 ½ - 2 year age range in the gross motor/locomotor skill subtest area and in the 2 year age range in the object control skill subtest area. On the Ordinal Scales (student) functional level of performance was in the 18-24 month age range with several skills in the 2-4 year age range (ceiling range). According to the MVUSD District Eligibility Criteria, in accordance with the California State Adapted PE Guidelines, in order to be eligible for Adapted PE services a (student) needs to score 1.5 standard deviations below the mean, in the 7<sup>th</sup> percentile or below, or 30% below their chronological age level. 25.2 months is 30% below (student) chronological age at time of testing which was 36 months. (student) scored 30% below age level on all three assessments administered scoring in the 1 ½-2 year age level on all 3 assessments. (student) also lacks of participation in reciprocal motor activities due to his autism diagnosis. (student) is therefore eligible and demonstrating a need for Adapted PE services. It is recommended that these services be collaborative in nature to best meet (student) needs of learning in his natural environment. Also, many of the supports (student) will need will be provided by his classroom teacher within the Specially Designed PE environment. This information will be provided to the IEP team and an appropriate level of service determined for (student) so that he may successfully participate in PE in his least restrictive environment. It is the recommendation of the assessing Adapted Physical Education Specialist that Specially Designed PE as provided by the classroom teacher with Adapted Physical Education Collaboration services are the least restrictive and most appropriate PE environment at this time.

**Recommendations:**

(student)'s deficits in gross motor skills interfere with his ability to participate in age level gross motor activities and to acquire new skills. (student) also lacks of participation in reciprocal motor activities due to his autism diagnosis. As mentioned in the previous paragraph (student) requires remediation for these skills in the form of Adapted PE Services. It is recommended that

these services be collaborative in nature to best meet (student)'s needs of learning in his natural environment. It is also recommended that (student) participate in specially PE as provided by his classroom teacher with the supports imbedded into all aspects of his educational program. This information will be provided to the IEP team and an appropriate level of service determined for (student) so that he may successfully participate in PE in his least restrictive environment. This is the least restrictive and most appropriate environment for (student) at this time.

#### **DNQ- Autism program**

##### Summary/Recommendations:

On the DAYC-2 Gross Motor subtest (student) scored in the 32 month age range with a standard score of 76 which places him in the below average range. On the Battelle Gross motor subtest (student) scored in the 2nd percentile rank with an overall age equivalent of 3.4. On the CARE-R he scored in the 3-4 year age range in the gross motor/locomotor skill subtest area and in the 4 year age range in the object control skill subtest area. On the APEAS Preschool Motor Assessment (student) had (student) had locomotor skills in the 2 ½-4 year age range and had motor/object control skills in the 3 ½-4 ½ year age range. According to the MVUSD District Eligibility Criteria, in accordance with the California State Adapted PE Guidelines, in order to be eligible for Adapted PE services a student needs to score 1.5 standard deviations below the mean, in the 7<sup>th</sup> percentile or below, or 30% below their chronological age level. Adapted PE is often recommended if a student scores within these guidelines and is not able to participate in General or Specially Designed PE. Although (student) scored in the 5th percentile on the DAY-C 2 and in the 2nd percentile on the Battelle he is able to participate in his Least Restrictive Environment of Specially Designed PE. He has many age appropriate motor skills as seen on the CARE-R 2 and APEAS Preschool Motor Assessment. It has been determined through (student)'s participation in structured sensory motor activities as well as his demonstration of functional motor skills that (student) can fully participate in his least restrictive environment of Specially Designed PE with the supports that are built into his educational program. It is therefore recommended that (student) be exited from direct Adapted PE services and that he participate in Specially Designed PE as provided by the classroom teacher. This is the least restrictive and most appropriate environment for (student) at this time. This information will be provided to the IEP team for discussion of placement in (student)'s Least Restrictive Environment for PE.

#### **#2- DNQ Autism Program**

##### Summary/Recommendations:

On the DAYC-2 (student) scored in the 32 month age range with a standard score of 76 which places him in the poor range. On the CARE-R he scored in the 2-3 year age range in the gross motor/locomotor skill subtest area and in the 2 ½ year age range in the object control skill subtest area. On the Preschool APEAS (student)'s locomotor skills were in the 2 ½-3 year age range and his object control skills were in the 2 ½-3 ½ year age range. According to the MVUSD District Eligibility Criteria, in accordance with the California State Adapted PE Guidelines, in order to be eligible for Adapted PE services a student needs to score 1.5 standard deviations below the mean, in the 7<sup>th</sup> percentile or below, or 30% below their chronological age level. (student) scored in the 5th percentile as well as more than 30% below age level on all three assessments administered. 30% below (student)'s chronological age at time of testing is 37.8 months and (student) scored in the 30-42 month age level on all given assessments. (student) also lacks independent participation in reciprocal motor activities due to his autism diagnosis. Although (student) meets eligibility criteria for Adapted PE services, it has been determined that (student)

can fully participate in his least restrictive environment of Specially Designed PE with the supports that are built into his educational program. He has demonstrated this during participation in sensory motor groups during the last two years at Rainbow Springs. (student) can participate in PE activities designed for his class with the structure and support of his educational program. It is therefore recommended that (student) be exited from direct Adapted PE services and that he participate in Specially Designed PE as provided by the classroom teacher as this is the least restrictive and most appropriate environment for (student) at this time. This information will be provided to the IEP team for discussion to ensure (student) participates in his least restrictive environment for Physical Education.

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