MEMORANDUM

TO: State Directors of Special Education, Preschool/619 State Coordinators

FROM: Ruth E. Ryder
Acting Director
Office of Special Education Programs

SUBJECT: Eligibility Determinations for Children Suspected of Having a Visual Impairment Including Blindness under the Individuals with Disabilities Education Act

On November 12, 2014, the Office of Special Education Programs (OSEP) issued a response to an inquiry for policy clarification addressing whether a State educational agency (SEA) and/or local educational agency (LEA) is permitted to establish procedures that further define the disability category, “visual impairment including blindness,” under the Individuals with Disabilities Education Act (IDEA). Since that time, OSEP has received a request for written guidance to assist SEAs in supporting their LEAs in reaching appropriate eligibility determinations for children with this disability. The purpose of this memorandum is to ensure broad dissemination of the key points made in our November 12, 2014 letter, provide the additional guidance requested on this important issue, and share information about outside resources that may be helpful as you examine your State’s procedures related to the identification and evaluation of children suspected of having a visual impairment including blindness.

Applicable IDEA Definitions

Under Part B of the IDEA, a child with a disability means a child evaluated in accordance with 34 CFR §§300.304-300.311 as having a disability, and who, by reason thereof, needs special education and related services. 34 CFR §300.8(a)(1). Further, under 34 CFR §300.8(c)(13),

“visual impairment including blindness” means an impairment in vision that, even with correction, adversely affects a child’s educational performance. (Emphasis added) The term includes both partial sight and blindness.

State and Local Eligibility Criteria

While States are permitted to establish standards for eligibility for special education and related services, and are not required to use the precise definition of a disability term in the IDEA, these State-established standards must not narrow the definitions in the IDEA. We recognize that States often adopt common definitions of certain modifiers to guide evaluators in making individualized eligibility determinations. For example, as OSEP noted in our November 12, 2014 letter, “intellectual disability” refers to “significantly subaverage general intellectual functioning,” (34 CFR §300.8(c)(6)), and similarly, the definition of “orthopedic impairment” refers to “a severe orthopedic impairment that adversely affects a child’s educational performance” (34 CFR §300.8(c)(8)). In these cases, because the IDEA does not specifically address the meaning of these modifiers, the IDEA gives States discretion to determine the precise level of impairment that qualifies as “significantly,” and “severe,” respectively, in order for evaluators and eligibility teams to implement these definitions.

In contrast, in the definition of “visual impairment including blindness,” the regulations do not contain a modifier; therefore, any impairment in vision, regardless of significance or severity, must be included in a State’s definition, provided that such impairment, even with correction, adversely affects a child’s educational performance. States may not use criteria or other definitions for “visual impairment including blindness” that result in the exclusion of children who otherwise meet the definition in 34 CFR §300.8(c)(13). For example, State eligibility guidelines and definitions for “visual impairment including blindness” may not exclude a child with convergence insufficiency or other visual impairment from meeting the IDEA’s definition of “visual impairment including blindness” if that condition, even with correction, adversely affects that child’s educational performance (e.g., the child’s ability to read and write).

It has come to our attention that some States direct their LEAs to implement a two-step process when addressing whether a child suspected of having a visual impairment may be eligible for special education and related services under the IDEA. During the first step, the eligibility team is required to reach a decision as to whether the child has one or more of the conditions that the State has identified and believes could affect a child’s vision functioning. Examples of such conditions might include: the child has a reduced visual field to 50 degrees or less in the better eye; the child has been diagnosed with cortical visual impairment; or the child has a diagnosis of a degenerative condition that is likely to result in a significant loss of vision in the future. During the second step, the eligibility team determines the extent that it should proceed further and examine whether the condition adversely affects the child’s educational performance. However, if the eligibility team were to conclude the child’s vision difficulties do not fall within one of the State’s listed criteria or conditions, the eligibility team would not consider whether the child’s visual functioning adversely affects his or her educational performance. Such a practice is inconsistent with the IDEA. While it is permissible for a State to provide examples of the types of conditions that would meet the State’s criteria for “visual impairment including blindness,” the SEA or LEA may not preclude eligibility teams from considering whether other vision
conditions, even with correction, adversely affect the child’s educational performance such that the child requires special education and related services under the IDEA.

For more information about various types of visual impairments and the ways in which those impairments can affect a child’s ability to learn, visit http://www.parentcenterhub.org/repository/visualimpairment/.

Evaluation to Determine Whether the Child’s Visual Impairment Adversely Affects Educational Performance

Prior to the eligibility determination, each public agency must conduct a full and individual evaluation, in accordance with 34 CFR §§300.304-300.306, before the initial provision of special education and related services to a child with a disability. 34 CFR §300.301(a). The purpose of the evaluation is to determine whether the child qualifies as a child with a disability and the nature and extent of the educational needs of the child. Under 34 CFR §300.304(b)(1), in conducting the evaluation, the public agency must use a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information about the child that may assist in determining whether the child is a child with a disability and the educational needs of the child. That information could include information from a physician, if determined appropriate, to assess the effect of the child’s visual impairment on the child’s eligibility and educational needs. However, under 34 CFR §300.304(b)(2), no single measure or assessment may be used as the sole criterion for determining whether the child is a child with a disability and for determining an appropriate educational program for the child.

Under 34 CFR §300.306(c)(1)(i), in interpreting evaluation data for the purpose of determining whether the child is a child with a disability under Part B of the IDEA and the educational needs of the child, the group of qualified professionals and the parent must draw upon information from a variety of sources, including aptitude and achievement tests, parent input, and teacher recommendations, as well as information about the child’s physical condition, social or cultural background, and adaptive behavior. Under 34 CFR §300.306(c)(1)(ii), the public agency must ensure that information obtained from all of these sources is documented and carefully considered. There is nothing in the IDEA or the Part B regulations that would prevent a public agency from obtaining a medical diagnosis prior to determining whether the child has a particular disability, and the educational needs of the child. Also, there is nothing in the IDEA or the Part B regulations that would prohibit a State from requiring that a medical diagnosis be obtained for purposes of determining whether a child has a particular disability, provided the medical diagnosis is obtained at public expense and at no cost to the parents, and is not used as the sole criterion for determining an appropriate educational program for the child. Further, if a State requires a medical diagnosis consistent with the above criteria, such a requirement exceeds the requirements of Part B of the IDEA. Under 34 CFR §300.199(a)(2), the State would be required to identify in writing to the LEAs located in the State, and to the Secretary, that such

---

1 In the case of a suspected “visual impairment including blindness,” a diagnosis may be made by a medical professional such as the child’s pediatrician, ophthalmologist, or optometrist.
rule, regulation, or policy is a State-imposed requirement that is not required by Part B of the IDEA and Federal regulations.

When determining a child’s vision status, the LEA’s evaluation should be thorough and rigorous. Such evaluations should include a data-based media assessment, be based on a range of learning modalities (including auditory, tactile, and visual), and include a functional visual assessment. In previously-issued guidance, OSEP has noted that an assessment of a child’s vision status generally would include the nature and extent of the child’s visual impairment and its effect on the child’s ability to learn to read, write, do mathematical calculations, and use computers and other assistive technology, as well as the child’s ability to be involved in and make progress in the general curriculum offered to nondisabled students. Such an evaluation generally would be closely linked to the assessment of the child’s present and future reading and writing objectives, needs, and appropriate reading and writing media. The information obtained through the evaluation generally should be used by the eligibility team in determining whether it would be appropriate to provide a blind or visually impaired child with special education or related services as required by the IDEA. In addition, because the evaluation must assess a child’s future needs, a child’s current vision status should not necessarily determine whether it would be inappropriate for that child to receive special education and related services while in school. Please see OSEP’s Dear Colleague Letter on Braille, June 19, 2013, available at: http://www2.ed.gov/policy/speced/guid/idea/memosdcbltrs/brailledcl-6-19-13.pdf.

You may wish to consult the following outside resources that address assessments for children who have, or are suspected of having a “visual impairment including blindness.”


Based on the guidance set forth in this memorandum and OSEP’s Letter to Kotler, a State may need to review its criteria and revise those criteria, as appropriate, and make sure that its LEAs are informed of the changes. As an example of how a State could revise its criteria, a State could comply with the IDEA requirements by adding a general criterion stating that the definition of “visual impairment including blindness” includes, in addition to other specific State-established criteria, any other impairment in vision that, even with correction, adversely affects a child’s educational performance.

OSEP will be following up with States through our various monitoring activities. If you have questions or would like to access technical assistance, please contact your OSEP State Lead. We

_____________________

1 These organizations are examples of organizations that may be helpful on these matters. We cannot vouch for the quality or completeness of their assistance. They are provided merely as examples, and there may be other organizations that you may wish to consult.
appreciate your continued efforts to ensure that children suspected of having visual impairments
including blindness are provided with an appropriate evaluation and if found eligible under
IDEA, the services necessary to meet their special education needs.

cc: Parent Training and Information Centers
    OSEP-Funded Technical Assistance Centers