**Appendix D: Text-to-Speech, Screen Reader, ASL Video, or Human Reader/Human Signer Guidance for English Language Arts/Literacy Assessments**

***Individualized Education Program (IEP) or 504 Plan Decision-Making Tool***

Directions: This tool has been developed to assist IEP teams and 504 plan coordinators in identifying students who may be appropriate candidates to receive the accommodation for text-to-speech (computer-based), ASL video (computer-based), or human reader/human signer (paper-based) for the PARCC ELA/literacy summative. PARCC states will each determine whether this tool is optional or required, based on their individual state policies or practices. This tool must be reviewed and completed at the student’s annual IEP meeting.

# Student’s Name: Click here to enter text. D.O.B: Click here to enter text. Grade: Click here to enter text.

**School/Program:** Click here to enter text. **State ID #/Local ID#:** Click here to enter text.

**District/LEA:** Click here to enter text. **State:** Click here to enter text.

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| **IEP Team Members or 504 Plan Coordinator/Staff** | | |
| **Title** | **Print Participant Name, Participant Must Initial** | **Date** |
| IEP Team Chairperson or 504 Coordinator: | Click here to enter text. | Click here to enter text. |
| Special Education Teacher(s): | Click here to enter text. | Click here to enter text. |
| General Education Teacher(s): | Click here to enter text. | Click here to enter text. |
| IEPTeam member(s) qualiﬁed to interpret reading evaluation results: : | Click here to enter text. | Click here to enter text. |
| Parent(s)/Guardian: \* | Click here to enter text. | Click here to enter text. |
| Student (if a team participant): | Click here to enter text. | Click here to enter text. |
| Other IEP team member(s):  Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Verification of Parent/Guardian Notification (optional): \*** *(Parent/Guardian Initials)*  *I have been informed by my child’s school that my child will receive a text-to-speech, ASL video or human reader/human signer accommodation for a PARCC English language arts/literacy assessment.* | | |

\* If the parent/guardian does not initial this form, the school should attach documentation of notification to the parent and date of notification to this form regarding the decision to provide the text-to-speech, screen reader, ASL video, or human reader/human signer accommodation to the student, and keep this form with the student’s records.

If all guidelines listed are met, and the student is given the **text-to-speech, ASL video, or human reader/human** **signer accommodation** for the PARCC English language arts/literacy assessment, he/she will receive a valid score on the assessment. If all guidelines are not met, and the student is given the **text-to-speech, ASL video, or human reader/human signer** accommodation on a PARCC English language arts/literacy assessment, the student’s assessment score may be invalidated and the score would not be counted in the overall assessment results; i.e., the student would be considered a “non-participant” for the English language arts/literacy assessment. The Maryland State Department of Education will continue to evaluate through the monitoring process if and when an invalidation of a student’s test score will occur.

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| **Guidelines for IEP or 504 Team Consideration** | **Additional Guidance** | **Agree/Disagree** |
| The student has an Individualized Education Program (IEP) or 504 plan. | Student has an approved IEP or current 504 plan. | Agree  * **Disagree** |
| In making decisions whether to provide the student with this accommodation, IEP and 504 teams are instructed to consider whether the student has:   * Blindness or a visual impairment and has not learned (or is unable to use) braille;   OR   * A disability that severely limits or prevents him/her from accessing printed text, even after varied and repeated attempts to teach the student to do so (e.g., student is unable to decode printed text);   OR   * Deafness or a hearing impairment and is severely limited or prevented from decoding text due to a documented history of early and prolonged language deprivation | For the screen reader accommodation, the IEP team or 504 plan coordinator must determine whether the student is blind or has a visual impairment and has not yet learned (or is unable to use) braille.  For the **text-to-speech, ASL video, or human reader/human signer accommodation**, the IEP team or 504 plan coordinator must determine whether the student has a disability that severely limits or prevents him or her from decoding text.  This accommodation is not intended for a student reading somewhat (i.e., moderately) below grade level.  The IEP or 504 plan must document objective evidence from a variety of sources (including state assessments, district assessments, AND one or more locally-administered diagnostic assessments or other evaluation) that indicate that the student’s ability to decode text is severely limited or prevented or that the student is blind or visually impaired and has not yet learned (or is unable to use) braille.  States may provide additional guidance for their respective states based on state policy or practice.  **Maryland’s Guidance:**  IEPs team must use multiple data sources to document a student’s decoding deficient. IEP team must first review the Maryland College and Career Ready Standards in the areas of decoding to determine where a student’s skills are in approximation to the state standards. IEP teams must understand the issues that may signal that a student has a significant decoding deficit (i.e. difficulty matching sounds and letters or trouble spelling phonetically). | * **Agree** * **Disagree** |

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| Before listing the accommodation in the student’s IEP or 504 plan, teams and plan coordinators should also consider whether:   * The student has access to printed text during routine instruction through a reader or other spoken-text audio format, or interpreter; * The student’s inability to decode printed text or read braille is documented in evaluation summaries from locally-administered diagnostic assessments; or * The student receives ongoing, intensive instruction and/or interventions in the foundational reading skills to continue to attain the important college and career-ready skill of independent reading. | States may provide additional guidance for their respective states in order to define intensive instruction and interventions based on state policy or practice.  **Maryland’s Guidance:**   * **A student must be receiving research or evidenced-based intervention at the time the accommodation decision is made.** * All intervention services a student receives must be in addition to the core instruction. * All interventions must be in place for at least two years. * Research-based interventions are established on multiple, systematic investigations, including testing and evaluations, and are designed to develop or contribute to generalized knowledge. * Evidence-based refers to an instructional program or collection of practices that have been tested and shown to have a record of success. That is, reliable, trustworthy, and valid evidence indicates that when that program or set of practices is used, students can be expected to make adequate gains in academic achievement. | * **Agree** * **Disagree** |

**List the data and/or evaluation sources that were used to document the decision to give the text-to-speech, ASL video, or human reader/human signer accommodation to the student on the English language arts/literacy assessment(s):**

1.) Name of Diagnostic Evaluation or Educational Assessment (Note: the most current assessment used cannot be more than two years old): Click here to enter text.

Name and Title of Test Administrator: Click here to enter text.

Most Recent Testing Date: Click here to enter text.

Score(s): Click here to enter text.

Provide a Summary of the Results: Click here to enter text.

2.) Name of Diagnostic Evaluation or Educational Assessment: Click here to enter text.

Name and Title of Test Administrator: Click here to enter text.

Most Recent Testing Date: Click here to enter text.

Score(s): Click here to enter text.

Provide a Summary of the Results: Click here to enter text.

3.) Name of Diagnostic Evaluation or Educational Assessment: Click here to enter text.

Name and Title of Test Administrator: Click here to enter text.

Most Recent Testing Date: Click here to enter text.

Score(s): Click here to enter text.

Provide a Summary of the Results: Click here to enter text.

4.) Name of Diagnostic Evaluation or Educational Assessment: Click here to enter text.

Name and Title of Test Administrator: Click here to enter text.

Most Recent Testing Date: Click here to enter text.

Score(s): Click here to enter text.

Provide a Summary of the Results:

5.) List any additional assessment data, scores, and/or evaluation results that were used to guide the decision-making process for IEP teams or 504 plan coordinators regarding **the text-to-speech, ASL video, or human reader/human signer** accommodation for the PARCC English language arts/literacy assessment(s):

Click here to enter text.

# 6.) List the instructional interventions and supports specifically related to reading that are currently provided to the student as well as those interventions provided in the most recent school years:

* + Intensive reading interventions have been provided to the student for Click here to enter text. years. Intensive reading intervention is one where the frequency, duration and monitoring of progress occurs weekly.
  + List interventions in chronological order beginning with the current school year.

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| **School Year** | **Name of Intervention** | **Description** | **Frequency (number of minutes and number of days per week)** |
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# List any additional relevant information regarding the student:

Click here to enter text.