## Evaluation Suite: Templates to Determine Vision Needs

These five templates were created to assist the teacher of students with visual impairments (TVI) in completing Functional Vision Evaluations and Learning Media Assessments that are student centered and designed to address the special needs of this diverse low-incidence disability.

The evaluation suite templates are specialized for students with no other disability (general), infants, students with a cortical visual impairment (CVI), students with multiple and visual impairments (MIVI), and a deafblind supplement, which may be used in conjunction with any other template. Each of these broad categories requires different evaluation instruments and techniques. What remains constant is the need to create evaluations that are student centered, individualized, and meaningful with clear recommendations. Great care has been taken to ensure that legal requirements have been met, a robust learning media assessment is the expectation, and the language is simple to understand. We hope these templates will help guide the writing of these critical evaluations.

**Evaluation Suite: Options**

**FVE/LMA Interactive Template (Adobe®):** The FVE/LMA Interactive Template provides the evaluator with a fillable interactive form, which includes dropdown menus, roll-over text windows, and populated text boxes. The FVE/LMA Interactive Template can be utilized independently or with the FVE/LMA Resource Guide. This interactive template is published in Adobe® Acrobat Pro DC. Therefore, the evaluator must be running Adobe® Acrobat Pro DC in order to save work written within the template. The evaluator can utilize this tool without running Adobe® Pro DC, however, the only option available will be to print out the report.

**Evaluation Resource Guide:** The evaluation resource guide is designed to be utilized independently or paired with the evaluation template to provide suggested text resources, evaluation tools, and observation tips to assist in the completion of either an initial evaluation or reevaluation in order to determine the area(s) of need for specialized instruction.

**Evaluation Shell (Word®):** The FVE/LMA Shell is a Word® document designed to provide a “shell” or template to guide the evaluator through the evaluation and ensure that all critical areas have been addressed. You can utilize the FVE/LMA Shell independently or pair it with the Evaluation Resource Guide to provide additional resources throughout your evaluation. The FVE/LMA Shell is simply a Word® document; therefore you can save your work and return to it anytime in order to complete your report.

**Deafblind Supplement:** The Deafblind supplement is designed to be paired with all Interactive Templates and Evaluation Shells when addressing the suspected needs of a student with hearing loss. This supplement can aid in the consideration of eligibility.

**FUNCTIONAL VISION EVALUATION AND LEARNING MEDIA ASSESSMENT**

**FVE/LMA Interactive Template**

|  |  |
| --- | --- |
| Name: | Campus: |
| DOB: | Evaluator: |
| Date: | Texas Unique ID: |

**Introductory paragraph about your student.**Include likes and dislikes, positive information provided by student, parents, or teachers. Appearance of eyes. Give a general description of how the student utilizes functional vision.

**Describe:**

Click or tap here to enter text.

 **Evaluation Summary**

STUDENT has been referred by the Choose an item. to determine Choose an item. functional vision as part of Choose an item. STUDENT is in the Click or tap here to enter text. in a Click or tap here to enter text. It is the recommendation of this evaluator that STUDENT Choose an item. the eligibility criteria for Special Education as a student with a Visual Impairment. A Low Vision Evaluation Choose an item. recommended.

Parents, teachers, and (choose all that apply) collaborated by providing information or assisting with the evaluation.
[ ]  Orientation and Mobility Specialist [ ]  Physical Therapist [ ]  Speech Therapist [ ]  Other Click or tap here to enter text.

STUDENT was seen by Dr. LAST NAME on DATE. Dr. LAST NAME reported that STUDENT Choose an item.has a serious visual loss after correction in a clinical setting.

After completing the Functional Vision Evaluation and Learning Media Assessment, this evaluator recommends that STUDENT should receive specially designed instruction in these proposed areas of the Expanded Core Curriculum (choose all that apply):

[ ] Assistive Technology [ ]  Career Education [ ] Compensatory Skills [ ] Recreation and Leisure Skills [ ]  Independent Living Skills [ ]  Orientation and Mobility [ ] Social Interaction Skills [ ] Self-Determination Skills [ ] Sensory Efficiency Skills

STUDENT Choose an item. meet the definition of a student with a visual impairment.

STUDENT requires the following accommodations to be successful in school:

**Describe:**

Click or tap here to enter text.

**Recommendations to Other Evaluators**For IQ testing, a cautionary statement should be included in the body of the report, ex. Results should be interpreted with caution because of the lack of representation of individuals with visual impairments within the standardization sample. Results, however, seem consistent with observations, previous results and overall patterns of achievement (Making Evaluation Meaningful, Loftin). Consult Making Evaluation Meaningful Evaluation Checklist, Diagnostician Do’s and Diagnostician Don’ts. See the Woodcock-Johnson Cognitive IV, Evaluator’s Manual (Table 3-3) to help determine useful assessments for students with visual impairments.

Discuss evaluation instruments and recommendations with the TVI prior to testing. Use the accommodations recommended by the TVI during the evaluation.

**Describe:**

Click or tap here to enter text.

**Ocular History**

Summarize ocular history, age of onset, and history information from State Eye Report. Dr. LAST NAME reported STUDENT visual acuity as follows:

|  |  |  |
| --- | --- | --- |
|  | **Without Correction** | **With Best Correction** |
|  | **Near** | **Distance** | **Near** | **Distance** |
| **Right** |  |  |  |  |
| **Left** |  |  |  |  |

Dr. LAST NAME reported that STUDENT is Choose an item..

Dr. LAST NAME reported STUDENT muscle function is Choose an item.. Include any additional description provided by the doctor. Click or tap here to enter text.. BLANK was used to test STUDENT visual fields and Dr. LAST NAME reported that Choose an item.. STUDENT color vision is Choose an item.. STUDENT Choose an item. exhibit photophobia. STUDENT primary cause of visual loss is Describe.

STUDENT prognosis is Choose an item..

Choose an item. recommended as treatment. Dr. LAST NAME reported that STUDENT Choose an item..

**Other Significant Medical Information and Medication**

**Describe:**

Click or tap here to enter text.

STUDENT visual functioning, near and distance vision was assessed in the (check all that apply):

[ ]  Bathroom [ ]  Cafeteria [ ]  Classroom [ ]  Gym [ ]  Other Click or tap here to enter text.

STUDENT Choose an item. wear Choose an item. and Choose an item.

**Describe:**

Click or tap here to enter text.

**Indoor Visual Functioning**

Depth Perception

Tested by demonstrating accurate reach/walking around indoor and outdoor environments, describe observation.

**Describe:**

Click or tap here to enter text.

STUDENT Choose an item. demonstrate difficulty with depth perception.

Field Boundaries

Tested by presenting light/object (color, shape, size), check entire periphery, central confrontation field test, using finger puppet/toy at 14 inches, describe observation.

**Describe:**

STUDENT Choose an item. demonstrate a functional field loss (describe below).

Click or tap here to enter text.

**Near Vision**Describe observation of near vision tasks. Does the student lean, tilt/turn head, squint, pick up materials for viewing? How far away? Are they currently using any assistive technology for near tasks? Magnifier? Slant board? Lighting? Use a variety of print sizes and different types of information (e.g., business card, class assignment, regular print, large print, map, cartoon, ruler, magazine, newspaper, catalog, dictionary, etc.). What type of paper did they use? Observe using various devices such as: iPad®, computer, Chromebook®. Try educational apps used in class (iStation®, etc.), websites, Microsoft® applications. Report the size of print the student used and the viewing distance. Cursor size? How does the student use their personal cell phone?

**Describe:**

Click or tap here to enter text.

**Distance Vision**Describe observation of tasks beyond 3 feet. Does the student, lean/turn head, squint, move closer to the board? What type of equipment is used for distance viewing? Smart board? White board? Telescope? Report the object size or letter size they can see and the viewing distance. Can they read different colors of ink on the board or just black on white? Can they describe what the teacher is doing? Do they recognize pictures and people? Can they copy from the board? Do they recognize signage?

**Describe:**

Click or tap here to enter text.

**Outdoor Visual Functioning**Describe observation when walking from indoor to outdoor environment. Did eyes adjust quickly? Was student able to identify objects, landmarks, read building and street signs/license plates? Could the student navigate terrain changes?

**Describe:**

Click or tap here to enter text.

**Learning Media**Resources for example: Koenig book, Reading Connections, FVELMA

STUDENT primary sensory channel is Choose an item. and Choose an item. secondary sensory channel is Choose an item..

STUDENT primary learning media are describe.

STUDENT primary literacy media is Choose an item..

STUDENT secondary literacy media is Choose an item..

**Ongoing Evaluation**Need for ongoing evaluation in this area? Describe below.

**Describe:**

Click or tap here to enter text.

**Texas Senate Bill 522**

“T*he individualized education program for a student with a visual impairment must include instruction in braille and the use of braille unless the student's admission, review, and dismissal committee determines and documents that braille is not an appropriate literacy medium for the student. The committee's determination must be based on an evaluation of the student's appropriate literacy media and literacy skills and the student's current and future instructional needs.”*

STUDENT Choose an item.meet the definition of a student with a visual impairment.

**Braille Instruction**Based on the definition by the Texas Education Agency, the Functional Vision Evaluation and the results of the Learning Media Assessment that indicates Student’s primary learning media as those that are tactual, that student has a visual impairment. Instruction in braille is needed. State strengths and weaknesses below. (Use Region 4 ABLS, EVALS, ATVI).

**Describe:**

Click or tap here to enter text.

**Visual**Observe and document number of times visual behavior was observed and specify the time period (Koenig LMA book).

STUDENT demonstrated Click or tap here to enter text. visual behaviors during a Click or tap here to enter text. minute time period.

**Figure Ground**
Tested using hidden picture (Where’s Waldo?, I SPY, etc.), word find, identify backgrounds and size/number of items present, look for systematic search pattern, describe observation.

STUDENT Choose an item.have difficulty with figure-ground perception.

**Motility**
Tested using light/object (color, shape, size); describe observation. Did student track with eyes only/head turning? Did they track smoothly? Did they track cross midline? Did they relocate if lost? Check in all directions—vertical, horizontal, diagonal, circle. Also, observe tracking while using a computer/mouse, reading, and writing. Information about convergence: *Reading Connections* resource, pp. 25–26.

 STUDENT Choose an item. track in all directions.

**Eye-Hand Coordination**
Tested by completing fine motor and academic tasks, describe observation. Examples: matching shapes, cutting, tracing, sorting, puzzles, coloring, activating toys, copying from the board/at desk, using computer mouse, and writing

STUDENT Choose an item. age appropriate eye-hand coordination skills.

**Color**
Tested by matching or naming colored objects (crayons, teddy bear counters, etc.), ranking or matching light/medium/dark, using free Ishihara apps, describing observation.

STUDENT Choose an item. have difficulty identifying colors.

**Contrast**
Tested using Hiding Heidi™, LEA, or other contrast sensitivity chart, describe observation

STUDENT Choose an item. demonstrate contrast sensitivity.

**Auditory**Observation, document number of times auditory behavior was observed and specify the time period (Koenig LMA book). Understanding auditory info, answering questions, performing steps of given directions, were directions repeated, wait time, were there prompts? Did the student appear distracted?

STUDENT demonstrated Click or tap here to enter text. auditory behaviors during a Click or tap here to enter text. minute time period.

**Tactual**Observation, document number of times tactual behavior was observed and specify the time period (Koenig LMA book).

STUDENT demonstrated Click or tap here to enter text.tactual behaviors during a Click or tap here to enter text. minute time period.

**Reading**Consult Reading Connections: *Strategies for Teaching Student with Visual Impairments* by Kamei-Hannan and Ricci. Incorporate AT information in subject areas. Complete a Reading Inventory *(*[Jerry Johns’ *Informal Reading Inventory*](https://www.aph.org/product/basic-reading-inventory-student-word-lists-passages-and-early-literacy-assessments-on-sale/)) and report correct words per minute, specify print sizes used. Include results while using CCTV, magnifier. What print size were they most comfortable? Were they able to keep place while reading? How did they track while reading? Reading speed on computer/iPad®,color preference, distance from screen, are they using keyboard commands? Does the student use a screen reader/magnification? Does the student use a standard mouse? Touch screen device? Can they log onto computer and programs? How does the student access their cell phone? Report what low tech/mid tech/high tech devices the student used.

|  |
| --- |
| **Results of Informal Reading Inventory** |
|  | **Regular Print** | **Large Print** | **With Magnification** | **Braille** |
| **Correct Words Per Minute** |  |  |  |  |

**Writing**Describe how the student writes at their desk and copies from a source. Report typing speed (and specify device) and accuracy and if the student uses the proper technique, describe how they type. Report what low tech/mid tech/high tech devices the student used.

**Describe:**

Click or tap here to enter text.

**Math**Report how the student is able to use math tools such as ruler, calculator, protractor, graph paper, sub-, and superscripts, etc. Report what low tech/mid tech/high tech devices the student used.

**Describe:**

Click or tap here to enter text.

**Science**Report how the student is able to use science tools such as: calculator, beaker, graduated cylinder, thermometer, balance, periodic table, etc. Report what low tech/mid tech/high tech devices the student used.

**Describe:**

Click or tap here to enter text.

**Other**Report how the student uses adaptive materials to access specific subject content.

**Describe:**

Click or tap here to enter text.

**Eligibility**

*In my professional opinion,* STUDENT*,*Choose an item. *eligibility criteria for visually impaired as defined by the Commissioner’s Rules under the Texas Education Code (TAC 89.1040). This decision is based on the results of the eye specialist’s evaluation, Functional Vision Evaluation, and Learning Media Assessment.*

Evaluator \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_