



LANGUAGE ASSESSMENT PROGRAM GUIDANCE

For Children Ages Birth-5 Who are Deaf or Hard of Hearing

May 2023

TABLE OF CONTENTS

Introduction	4
Guidance Purpose	4
Advisory Committee	5
Language Milestones and Assessments	5
Assessment Instruments and Milestones Subcommittee....	5
Qualifications and Training Subcommittee.....	8
Annual Reporting	9
Appendix A: Language from Nebraska LB 965	11
Appendix B: Subcommittee Membership	13

This guidance document is advisory in nature but is binding on an agency until amended by such agency. A guidance document does not include internal procedural documents that only affect the internal operations of the agency, and it does not impose additional requirements or penalties on regulated parties or include confidential information or rules and regulations made in accordance with the Administrative Procedure Act. If you believe this guidance document imposes additional requirements or penalties on regulated parties, you may request a review of the document.

It is the policy of the Nebraska Department of Education not to discriminate on the basis of gender, disability, race, color, religion, marital status, age, national origin or genetic information in its education programs, administration, policies, employment or other agency programs.

INTRODUCTION

This guidance is being provided in accordance with Legislative Bill (LB) 965, now codified as Nebraska Revised State Statute §71-4746, which was approved by the Nebraska State Legislature and Nebraska Governor in 2020. LB 965 recognizes American Sign Language as a distinct and separate language, authorizes schools and postsecondary educational institutions to offer courses in American Sign Language, and establishes a language assessment program for children who are deaf or hard of hearing (D/HH). LB 965 also requires the State of Nebraska Department of Education (NDE), in collaboration with the Nebraska Commission for the Deaf and Hard of Hearing (NCDHH), to provide a joint report (on or before December 31 of every year) that is specific to language and literacy development milestones for children ages birth - five years who are D/HH, relative to such children's peers who are not D/HH. The joint report is based on existing data annually reported by NDE in compliance with the federally required State Performance Plan (SPP).

This guidance outlines the work completed by the Nebraska Language Assessment Program Advisory Committee, the Advisory Committee's recommendations around language assessments and milestones for children who are D/HH adopted by NDE, and the reporting around language acquisition. The Advisory Committee's Recommendation Report can be viewed here: [Advisory Committee Final Recommendations Report – 6/2022](#).

GUIDANCE PURPOSE

- This document was created to explain the procedures teams can take to implement the recommendations of the Advisory Committee.
- This document also provides guidance to connect the Advisory Committee's recommendations to previous practices.

ADVISORY COMMITTEE

The Nebraska Language Assessment Program Advisory Committee was formed in response to the passage of LB 965 and was organized according to the parameters it outlined. The language from LB 965 that established the Advisory Committee can be found in Appendix A. The Advisory Committee held their first organizational meeting on December 16, 2020. During this meeting, Mr. Jonathan Scherling was elected as Chair and Mr. Mike Brummer as Vice Chair. Four subcommittees were created; see Appendix B for a listing of committee membership.

The following recommendations do not supersede IDEA Parts B and C, NDE NAC Rules 51 and 52, or DHHS 480 NAC 1.

LANGUAGE MILESTONES AND ASSESSMENTS

The Advisory Committee Assessment Instruments and Milestones Subcommittee determined that all recommended assessments have their own “built-in” form for monitoring progress and milestone development. The Advisory Committee recommended using individual, designated, milestone assessments for tracking progress and development rather than creating new ones.

Assessment Instruments and Milestones Subcommittee

The Part B Eligibility Guidelines for Deaf or Hard of Hearing can be found at: <https://www.education.ne.gov/wp-content/uploads/2021/08/Eligibility-Guidelines-Deaf-or-Hard-of-Hearing-2.1.2021.pdf>

The Part C/NDE Rule 52 regulations state an infant or toddler qualifies for early intervention if the child has a diagnosed physical or mental condition that has a high probability of resulting in a substantial developmental delay in one or more developmental domains (including hearing and vision). A diagnosed physical or mental condition includes chromosomal abnormalities; genetic or congenital disorders; sensory impairments; inborn errors of metabolism; disorders reflecting disturbances in the nervous system's development; congenital infections; severe attachment disorders; and disorders secondary to exposure to toxic substances, including fetal alcohol syndrome.

This Advisory Committee was charged with determining assessment tools appropriate and valid to assess the language development of children who are D/HH and ages birth-five. The Advisory Committee also created a timeline/frequency for assessment. After careful discussion and consideration of the various areas associated with language development, the Advisory Committee determined nine developmental areas are important to assess to gain a comprehensive and accurate understanding of a D/HH child's language development. These developmental areas are: vocabulary, receptive language, expressive language, cognition/play, literacy, social-emotional, vocal/speech, listening/auditory, and visual communication. The Advisory Committee conducted research to determine which assessment tools would be the most valid and reliable to assess progress in each developmental area and to assess progress across multiple languages/modalities. The Advisory Committee did this research while also prioritizing assessment tools that are efficient/feasible, seek parental input, and address multiple areas. Below is a summary of the Advisory Committee's proposed recommendations of the assessment tools and proposed timeframe to be used/implemented in the language assessment program proposed in LB 965.

The Advisory Committee Recommendations:

- a. Table 1 lists the recommended assessment tools by developmental area.
Table 2 lists the recommended assessment tools by communication modality.
- b. NDE recommends these language assessments be given on an annual basis aligning with the child's Annual IFSP or IEP. In addition, each language assessment tool can be utilized to inform Teaching Strategies GOLD data collection at required checkpoints (Part C, entry and exit into Early Intervention and Part B, and fall and spring checkpoints).

Table 1.
Assessment Recommendations by Developmental Area

Developmental Area	Description
Vocabulary	<p>MacArthur-Bates Communicative Development Inventories (MB-CDIs); for oral communicators; 3 mo.-30 mo.) AND/OR MacArthur Communicative Development Inventory for American Sign Language (ASL-CDI); for visual communicators; 3 mo. – 30 mo.) OR Expressive Vocabulary Test-Third Edition (EVT-3) and Peabody Picture Vocabulary Test-Fifth Edition (PPVT-5); for oral and visual communicators 30 mo+)</p>
Receptive Language	<p>eCASLLS (for oral communicators) AND/OR Visual Communication and Sign Language Checklist (VCSL; for visual communicators) AND/OR Northern Signs (for visual communicators)</p>
Expressive Language	<p>eCASLLS (for oral communicators) AND/OR Visual Communication and Sign Language Checklist (VCSL; for visual communicators) AND/OR Northern Signs (for visual communicators)</p>
Cognition/Play	<p>eCASLLS-Cognitive/Play Scales (for oral and visual communicators)</p>
Literacy	<p>Reading eCASLLS (for oral and visual communicators)</p>
Social-Emotional	<p>Social-Emotional Assessment/Evaluation Measure (SEAM) Parent Version (for oral and visual communicators)</p>
Vocal/Speech/Articulation	<p>eCASLLS AND Goldman Fristoe Test of Articulation 3 (GFTA-3) – starting at age 2 years (for oral communicators)</p>
Listening/Auditory	<p>eCASLLS AND Annual audiological testing with Speech Perception Testing beginning at age 2 years if child wears amplification (for oral communicators)</p>
Visual Communication	<p>VCSL or Northern Signs (for visual communicators)</p>

Table 2.
Assessment Recommendations by Communication Modality

<p align="center">Complete for children only exposed to/ developing listening and spoken language</p>	<ul style="list-style-type: none"> • eCASLLS (all scales) • MB-CDIs (up to 30 mo.); or EVT/PPVT (30 mo.+) • SEAM – Parent Version • Reading CASLLS • GFTA-3 (starting at age 2)
<p align="center">Children only exposed to/developing sign language</p>	<ul style="list-style-type: none"> • VCSL OR Northern Signs • ASL-CDI (up to 30 mo.) <p align="center">OR</p> <p>EVT/PPVT (30 mo.+)</p> <ul style="list-style-type: none"> • SEAM – Parent Version • Reading CASLLS
<p align="center">Children exposed to/developing both listening/spoken language AND sign language</p>	<ul style="list-style-type: none"> • eCASLLS (all scales) • MB-CDIs (up to 30 mo.) <p align="center">AND</p> <p>ASL-CDI (up to 30 mo.) OR EVT/PPVT (30 mo.+)</p> <ul style="list-style-type: none"> • VCSL OR Northern Signs • SEAM – Parent Version • Reading CASLLS • GFTA-3 (starting at age 2)

Qualifications and Training Subcommittee

The Advisory Committee was charged with determining the qualifications, roles, and training required of the individuals responsible for conducting the language assessments for D/HH children. The Advisory Committee carefully considered the existing and required data collection systems/teams in Nebraska. Multidisciplinary IFSP/IEP teams are required by IDEA to collect assessment data on language and communication development (as well as other developmental areas) for children with identified disabilities.

These IFSP/IEP teams generally include certified professionals with knowledge of evidence-based, best practices in assessing children with disabilities. However, not all of these teams/professionals may be knowledgeable of, or use assessments that are, valid, reliable, and/or sensitive enough to accurately and comprehensively assess the language development of children who are D/HH. As such, the Advisory Committee proposed the following recommendations to ensure the language development of D/HH children, ages birth - five, receiving IFSP/IEP services, is accurately assessed and monitored.

Recommendations:

- a. In alignment with the IDEA Part B/C federal regulations on IEP and IFSP team membership requirements, and to avoid the duplication of efforts and placing any undue/additional burden on practitioners and families, it is recommended districts utilize members of the current/existing multidisciplinary (IFSP/IEP) teams to carry out the language assessments proposed in the previous section (pages 5 - 7).
- b. To align with federal and state regulations on qualified personnel conducting assessments of each child, it is recommended every *Language Assessment Team* include the following members listed below as part of the child assessment and multidisciplinary (IFSP/IEP) team to carry out the language assessment program as described in LB 965 (now codified as Nebraska Revised State Statute §71-4746).
 - i. At least one person who has received professional training in using evidence-based practices in assessing the language skills of children who are D/HH, including ASL assessment. This person would be designated as the *Language Assessment Evaluator* and would be responsible for conducting the recommended language assessments. In most cases, this person can be a certified Teacher of the Deaf (TOD), Speech-Language Pathologist, Early Childhood Special Educator, or anyone else on the team who received professional training in using evidence-based/best practices in language assessments of children who are D/HH. It is the responsibility of the *Language Assessment Evaluator* to become knowledgeable of, or trained in, the administration procedures of any language assessments for which they are unfamiliar **before** administering them. It is also the responsibility of the *Language Assessment Evaluator* to stay abreast of procedural changes/updates for the language assessments they are using.
 - ii. At least one person proficient in American Sign Language (ASL). This person would be designated as the *ASL Language Professional*.
- c. Parents can invite any outside agency or individual with knowledge of the child to participate in the assessment. For infants/toddlers receiving IFSP services, family members and advocates/persons outside the family can be invited, as requested by the parent.
- d. The committee recommends *Language Assessment Teams* partner with the Hands and Voices Guide By Your Side program to ensure that all necessary resources are being provided to families.
- e. It is recommended the Nebraska Regional Program Deaf and Hard of Hearing Staff meet quarterly to review the implementation of the language assessment program. These meetings may occur via Zoom, in person, or hybrid format.

Requirements and Recommendations for Implementation:

1. For infants and toddlers receiving early intervention/IFSP services, the district must provide written notice and obtain written parental consent prior to conducting evaluations and assessments of any child (Rule 52-009.03A2a). Such notice and consent must include the language assessment for infants/toddlers who are D/HH. Parents of infants/toddlers receiving early intervention/IFSP services have the right to decline the language assessment, according to federal and state regulations, without jeopardizing the receipt of Free Appropriate Public Education (FAPE) early intervention services under 92 NAC 52.
2. All evaluations and assessments of each child shall be conducted by qualified personnel, in a nondiscriminatory manner, and selected and administered in a way to avoid being racially or culturally discriminatory (Rule 52-006.05D). Unless it is clearly not feasible to do so, school districts or approved cooperatives must conduct all evaluations and assessments of each child in the native language of the child, in accordance with the definition of native language in 92 NAC 52-003.17.
3. It is recommended that EDN services coordinators, local school districts, and IFSP/IEP teams disseminate information and procedural safeguards related to the language assessment program to local stakeholders.

ANNUAL REPORTING

The LB 965, now codified as Nebraska Revised State Statute §71-4746, requires NDE, in collaboration with the Commission for the Deaf and Hard of Hearing, to provide a joint report that is specific to language and literacy developmental milestones for children ages birth - five years who are D/HH, relative to such children's peers who are not D/HH. This joint report should be provided on or before December 31 of every year, and it meets the reporting aspect the Advisory Committee reviewed. NDE and individual school districts are federally required to gather and maintain assessment data as part of each student's records. The joint report should be based on the existing assessment data that is annually reported by NDE in compliance with the federally required SPP. The following is an explanation of the data NDE is federally required to report and is used to create the joint report.

The U.S. Department of Education, Office of Special Education Programs (OSEP) requires state special education and early intervention programs to monitor and report developmental progress and outcomes for children ages birth - five who are receiving special education or early intervention services. The IDEA Part C (birth to 3 years) and IDEA Part B, Section 619 (preschool) programs report their progress/outcomes to OSEP during each reporting year in which children exit the program.

Nebraska's state-approved developmental monitoring tool for both aforementioned programs is Teaching Strategies GOLD (TSG). Data collected using this valid and reliable assessment tool helps to inform interventions/strategies, instruction, and service provision and lesson planning. This collected data also provides information to routinely address individual needs of children. NDE uses child outcome data generated through TSG to submit its Annual Performance Report (APR) to OSEP through Part B and Part C of the IDEA SPP. The use of TSG is required for all infants, toddlers, and preschool-age children receiving early intervention or special education services in Nebraska. All states are federally required to report data that aligns with three OSEP child outcomes.

1. Positive Social Relationships
2. Acquires and Uses Knowledge and Skills
3. Takes Appropriate Actions to Meet Needs

TSG items are mapped to these three outcome areas, and these items include language and literacy-focused items. Language items include listening to and understanding increasingly complex language, using appropriate conversational and/or other communication skills socially, and using language to express thoughts and needs. Literacy-focused items include demonstrating phonological awareness, phonics skills, and word recognition; demonstrating knowledge of the alphabet; demonstrating knowledge of print and its uses; demonstrating writing skills; and comprehending and responding to books and other text.

TSG uses empirically derived cut scores. The total score for a given outcome area is used to determine the placement of a child's knowledge, skills, and abilities along a nine-point scale relative to a series of cut scores for each rating on the scale. Cut scores are provided in three-month increments for ages 0 - 71 months. Hence, for each outcome area, the algorithm compares total scores on GOLD with age-specific cut scores to determine the placement of each child's knowledge, skills, and abilities on the nine-point scale. The final step in converting GOLD scores to reportable OSEP outcomes is to map from the nine-point ratings to the OSEP's progress categories. TSG's scoring system assigns nine-point ratings for each outcome area at entry into, and upon exit from, a program into one of five progress categories.

1. Did not improve functioning.
2. Improved functioning but not sufficient to move nearer to the functioning comparable to same-aged peers.
3. Improved functioning to a level nearer to same-aged peers but did not reach.
4. Improved functioning to reach a level comparable to same-aged peers.
5. Maintained functioning at a level comparable to same-aged peers.

The progress category data is used to calculate the proportion of children who meet two summary statements for each outcome. These two summary statements are:

1. Of those children who entered the program below age expectations, the percent that substantially increased their rate of growth by the time they exited.
2. Percent of children who were functioning within age expectations by the time they exited.

The latest Language and Literacy Developmental Milestones Annual Report can be found here: <https://www.education.ne.gov/sped/lead-k/>

APPENDIX A: LANGUAGE FROM NEBRASKA LB 965

Sec. 6.

1. The Commission for the Deaf and Hard of Hearing shall appoint an advisory committee to advise the commission regarding all aspects of the language assessment.
2. Program established pursuant to section 5 of this act. The advisory committee shall consist of fourteen members as follows:
 - a. One member shall be a credentialed teacher of the deaf who uses both American Sign Language and English during instruction;
 - b. One member shall be a credentialed teacher of the deaf who uses spoken English, with or without visual supplements, during instruction;
 - c. One member shall be a credentialed teacher of the deaf who has expertise in curriculum development and instruction for American Sign Language and English;
 - d. One member shall be a credentialed teacher of the deaf who has expertise in assessing language development in both American Sign Language and English;
 - e. One member shall be a speech language pathologist who has experience working with children from birth through five years of age;
 - f. One member shall be a professional with a linguistic background who conducts research on language outcomes of children who are deaf or hard of hearing and who uses both American Sign Language and English;
 - g. One member shall be a parent of a child who is deaf or hard of hearing and who uses both American Sign Language and English;
 - h. One member shall be a parent of a child who is deaf or hard of hearing and who uses spoken English with or without visual supplements;
 - i. One member shall be knowledgeable about teaching and using both American Sign Language and English in the education of children who are deaf or hard of hearing;
 - j. One member shall be a community member representing the deaf community;
 - k. One member shall be a community member representing the hard of hearing community;
 - l. One member shall be the state liaison for any regional programs for the education of children who are deaf or hard of hearing, coordinated through the State Department of Education, or the state liaison's designee;
 - m. One member shall be a member of the Commission for the Deaf and Hard of Hearing; and
 - n. One member shall be the coordinator of a network that provides service coordination for children with special needs who are below three years of age or the coordinator's designee.
3. On or before December 30, 2020, the executive director of the Commission for the Deaf and Hard of Hearing shall call an organizational meeting of the advisory committee. At such organizational meeting, the members shall elect a chairperson and vice-chairperson from the membership of the advisory committee. The advisory committee may meet at any time and at any place within the state on the call of the chairperson. A quorum of the advisory committee shall be six members. All actions of the advisory committee shall be by motion adopted by a majority of those members present when there is a quorum.
4. On or before July 1, 2022, the advisory committee shall develop specific action plans and make recommendations necessary to fully implement the language assessment program. The advisory committee shall:
 - a. Collaborate with the coordinating council for a network that provides service coordination for children with special needs who are below three years of age and an advisory council that provides policy guidance to the State Department of Education;
 - b. Solicit input from professionals trained in the language development and education of children who are deaf or hard of hearing on the selection of specific language developmental milestones;
 - c. Review and recommend the use of existing and available language assessments for children who are deaf or hard of hearing;
 - d. Recommend qualifications for identifying language professionals with knowledge of the use of evidence-based, best practices in English and American Sign Language who can be available to advocate at individualized family service plan or individualized education program team meetings;

- e. Recommend qualifications for identifying language assessment evaluators with knowledge of the use of evidence-based, best practices with children who are deaf or hard of hearing and the resources for locating such evaluators; and
 - f. Recommend procedures and methods for communicating information on language acquisition, assessment results, milestones, assessment tools used, and progress of the child to the parent or legal guardian of such child and the teachers and other professionals involved in the early intervention and education of such child.
5. The specific action plans and recommendations developed by the advisory committee shall include, but are not limited to, the following:
- a. Language assessments that include data collection and timely tracking of the child's development so as to provide information about the child's receptive and expressive language compared to such child's linguistically age-appropriate peers who are not deaf or hard of hearing;
 - b. Language assessments conducted in accordance with standardized norms and timelines in order to monitor and track language developmental milestones in receptive, expressive, social, and pragmatic language acquisition and developmental stages to show progress in American Sign Language literacy, English literacy, or both, for all children from birth through five years of age who are deaf or hard of hearing;
 - c. Language assessments delivered in the child's mode of communication and which have been validated for the specific purposes for which each assessment is used, and appropriately normed;
 - d. Language assessments administered by individuals who are proficient in American Sign Language for American Sign Language assessments and English for English assessments;
 - e. Use of assessment results, in addition to the results of the assessment required by federal law, for guidance in the language developmental discussions by individualized
 - f. Family service plan or individualized education program team meetings when assessing the child's progress in language development;
 - g. Reporting of assessment results to the parents or legal guardian of the child and any applicable agency;
 - h. Reporting of assessment results on an aggregated basis to the Education Committee of the Legislature, the Clerk of the Legislature, and the Governor; and
 - i. Reporting of assessment results to the members of the child's individualized family service plan or individualized education program team, which assessment results may be used, in addition to the results of the assessment required by federal law, by the child's individualized family service plan or individualized education program team, as applicable, to track the child's progress, and to establish or modify the individualized family service plan or individualized education program.
6. The advisory committee appointed pursuant to this section shall terminate on July 1, 2022.

APPENDIX B: SUBCOMMITTEE MEMBERSHIP

1. Assessment Instruments and Milestones

1. Ms. Anne Thomas, Chair, Assistant Professor of Practice – University of Nebraska-Lincoln, Coordinator for Deaf Education program
2. Ms. Cindy Koch, Teacher for the Deaf/Hard of Hearing – Educational Service Unit 9, Hastings, Nebraska
3. Mr. Jonathan Scherling, Interim Committee Chair, American Sign Language Instructor – University of Nebraska - Omaha
4. Ms. Debra Smith, Parent Infant Specialist for Deaf & Hard of Hearing, BoysTown National Research Hospital, Omaha, Nebraska
5. Ms. Amy Tyler-Krings, Speech Language Pathologist, Lied Learning and Technology Center, Omaha, Nebraska
6. Mr. Todd Luther, Parent Representative
7. Ms. Vicki Steinhauer-Campbell, Parent Representative

2. Qualifications and Training

1. Ms. Sue Petersen, Chair, Teacher for the Deaf/Hard of Hearing – Ralston Public Schools, Ralston, Nebraska
2. Ms. Cindy Koch, Teacher for the Deaf/Hard of Hearing – Educational Service Unit 9, Hastings, Nebraska
3. Ms. Margie Propp, Community Interpreter & Retired Teacher for the Deaf
4. Mr. Jonathan Arteaga, Deaf and Hard of Hearing Community Representative
5. Mr. Todd Luther, Parent Representative
6. Ms. Vicki Steinhauer-Campbell, Parent Representative

3. Reporting Results/Database

1. Vacant, Chair
2. Ms. Jessica Anthony, Nebraska Department of Health and Human Services - Early Development Network Co-Coordinator
3. Ms. Amanda Mitchell, Teacher of the Deaf/Hard of Hearing – Washington Elementary School, Omaha, Nebraska
4. Mr. Jonathan Arteaga, Deaf and Hard of Hearing Community Representative
5. Ms. Susan Petersen, Teacher for the Deaf/Hard of Hearing – Ralston Public Schools, Ralston, Nebraska

4. Considerations Related to Implementation

1. Ms. Amanda Mitchell, Chair, Educator of the Deaf – Washington Elementary School, Omaha, Nebraska
2. Ms. Amy Bunnell, Early Childhood Special Education Director and Early Development Network Co-Coordinator – Nebraska Department of Education
3. Ms. Debra Smith, Parent Infant Specialist for Deaf & Hard of Hearing, BoysTown National Research Hospital, Omaha, Nebraska
4. Ms. Vicki Steinhauer-Campbell, Parent Representative

Technical Assistant guides from the NDE were assigned to assist each subcommittee:

- Sue Czaplewski, State Liaison for Programs for Children who are Deaf or Hard of Hearing, and Heather Ottoson, Part B 619 Coordinator/Preschool Education Specialist, were designated to subcommittee #1
- Sue Czaplewski, State Liaison for Programs for Children who are Deaf or Hard of Hearing, was also designated to work with subcommittee #2
- Cole Johnson, Planning Region Team Director/Early Intervention Data Manager, was assigned to subcommittee #3
- Teresa Coonts, Director of Low Incidence Disabilities, was assigned to subcommittee #4
- Amy Rhone, Administrator/State Director of the Office of Special Education, was designated to assist all subcommittees as needed

Nebraska Commission for the Deaf and Hard of Hearing (NCDHH) staff also assisted the Advisory Committee. NCDHH staff included:

- John Wyvill, Executive Director
- Cody McEvoy, Education Advocate
- Jessica Larrison, Behavioral Health Coordinator