



COMPREHENSIVE LANGUAGE EVALUATION

FOR CHILDREN IN WEST VIRGINIA WHO ARE DEAF OR HARD OF HEARING

Guidelines for Best Practices





West Virginia Board of Education
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Preface

The following document is intended as a resource guide for those evaluating deaf and hard-of-hearing students. The purpose is to determine eligibility and complete a comprehensive language evaluation of the child to support both academic and non-academic needs under IDEA and West Virginia Policy 2419 (See Appendix A).

Many areas must be assessed for a child with a hearing loss. This document will focus on the language component only.

Few language evaluations are normed for the deaf and hard of hearing population; therefore, a collaborative team approach is necessary when choosing and analyzing the results.

It is important to remember that hearing loss alone is NOT a disorder; it is a lack of access. It is also important to remember that this is not a lack of “hearing” but the absence of a language (including sign and picture communication). Although hearing loss does not cause cognitive delays, the absence of language exposure can affect cognitive functioning. Research shows that children with even a mild to moderate hearing loss may achieve one to four grade levels lower than their peers with normal hearing unless appropriate instruction and intervention occurs (ASHA 2015).

WV POLICY 2419 states that:

“If the student who is deaf or hard of hearing does not demonstrate progress in expressive or receptive language skills as measured through an appropriate assessment tool, the IEP Team must explain the reasons for the lack of progress in meeting the language milestones or progressing towards them and recommend specific strategies, services and programs that will track the child’s success towards English literacy” (Policy 2419, page 51).

Therefore:

For a child who is deaf or hard of hearing, a comprehensive language assessment in the child’s language and communication mode must be included in their comprehensive evaluation.

If the IEP team decides that the output mode for a deaf or hard-of-hearing child might be through an augmentative and alternative communication (AAC) system, a complete AAC evaluation is necessary. Please see the Assistive Technology Services Guidance for West Virginia Schools and Districts document for information on performing an AAC evaluation.

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What is a Comprehensive Language Evaluation?

What is the Purpose of a Comprehensive Language Evaluation?

- to determine eligibility for special education and related services
- to develop an educational program that fits the child's strengths, areas of need, and learning style
- to determine appropriate supports to enhance the child's access and learning experiences (assistive listening devices, educational interpreter, intervener, AAC, etc.)
- to design appropriate intervention
- to evaluate the effectiveness of the educational program in facilitating the child's progress

Students need a comprehensive language assessment to develop specific, appropriate, and unique academic goals by viewing the child as a whole rather than only looking at their audiogram and communication skills. In addition, the child's learning styles, cognitive abilities, preferred mode of communication, and cultural background must be considered.

A comprehensive language evaluation consists of:

- gathering case history
- interviewing caregivers
- observation of language skills in various environments
- review of sensory, motor, and cognitive status
- formal and informal assessment
- identification of effective intervention strategies
- follow up to monitor progress

A comprehensive language evaluation for a student who is deaf or hard of hearing must assess all aspects of language that the team has deemed a concern. There are many tools available to evaluate language; however, the team must select tests or informal assessment tasks to thoroughly assess areas of concern for the specific student. Some language assessment tools are global assessments and include only a few items that evaluate a particular area of language, such as syntax and morphology (grammar) or semantics or pragmatics. In contrast, others provide a much more in-depth assessment of these skills. As a result, a student may demonstrate performance that is within normal limits on a global assessment tool. Still, an assessment tool that evaluates the specific skill of concern may prove language deficits. When this type of profile is obtained, the team may still determine that the student qualifies for language intervention services, even though the global assessment did not identify the area of weakness, as long as the specific skills assessment demonstrates the need for intervention.

Who is responsible?

The evaluation team may include but is not limited to teachers of the deaf and hard of hearing, speech-language pathologists (SLPs), audiologists, teachers, interpreters, and parents. In addition, information should be gathered from all those working with the student.

The evaluation process should be, at minimum, a collaborative effort between the teacher of the deaf/hard of hearing and the SLP with an audiologist included when possible. Information should be gathered from a variety of sources. Although one person may perform a specific portion of the comprehensive language evaluation within their scope of practice, all team members interpret the results.

Team Members

Multiple professionals must be involved in evaluating the language skills in children with hearing loss. Each professional is skilled at viewing the child and assessment results from their professional area but may miss other concerns outside of their expertise. Each professional must take care to perform within their scope of practice.

The comprehensive language assessment must be a collaboration among all team members. While one individual may facilitate the assessment, the child's language skills must be viewed by the entire team. Failure to include all members in the interpretation of the assessments may result in a lack of identification of the child's unique skills and needs.

Comprehensive Language Evaluation

There are many steps to consider when planning a comprehensive language evaluation for a deaf or hard-of-hearing child. The team must know why and what they are assessing.

For this document, the spoken language used in the classroom and for academic tasks is English. American Sign Language (ASL) is a separate language with its own structure, vocabulary and grammar. The team must decide if they are assessing English, ASL or both languages. The purpose of the assessment will influence the assessment tools the team selects.

Who are you assessing? *(see Appendix A for the definition for each eligibility criteria)*

- Deaf
- Hard of Hearing
- Deafblind

Why are you assessing?

- Identify areas for intervention or specially designed-instruction
- Eligibility for services

What are you assessing?

- Sign language skills of a student who use sign language
- English language skills of a student who use sign language
- English language skills of a student who use listening and spoken language
- English language skills of a student who use total communication

Steps to Complete the Comprehensive Language Evaluation

1. Gather Background Information

Note: Do not proceed with the language assessment until all of the information has been gathered and carefully reviewed. Ask for clarification or further information if questions arise or remain.

With a student who is deaf or hard of hearing, consider many components when gathering background data. The following is a list of critical factors that should be reviewed.

Access to Sound/Hearing Status

- Type, degree, and configuration of hearing loss
- Age at identification of loss
- Etiology of the hearing loss
- Age of onset of loss, if known
- Amplification (hearing aid type) or cochlear implant
 - » Age of initial amplification
- Hearing aid assistive technology (F.M. system, classroom amplification, etc.)
- Effectiveness of hearing technology

Communication Skills

- Child's primary mode of communication
- Child's primary language
- Use of interpreter

Additional Important Considerations

- Vision status
- Medical history/comorbid conditions
- Psychosocial status
- Educational status
- Child's motivation
- Parental involvement
- Cultural considerations

2. Observations

It is essential to observe the student's communication skills before beginning the evaluation. These informal observations will help the team select tests that evaluate skills observed to be challenges for the student.

Observe the student's language skills:

- In a variety of natural environments
- In the classroom
- With various communication partners
- In the home environment, whenever possible

3. Select Appropriate Assessment Tools and Procedures

The team should consider the background information, purpose of the assessment and results of the observations and select appropriate tests. Beyond the typical reasons of determining eligibility for services, establishing goals or monitoring progress, the team will also consider assessing ASL skills, English skills or both. Understanding which mode of communication you need to assess is the critical first step to selecting the test battery. It is also essential to consider whether global assessment tools or tests that assess a specific language area are the most appropriate.

Remember that an initial comprehensive language evaluation for a deaf/hard-of-hearing student must assess all aspects of language, including triennial reevaluation in the early elementary years during the critical formative language period. For subsequent evaluations, the team will need to determine what specific areas to evaluate.

There are many tools available to assess language; however, the team must select tests or informal assessment tasks to evaluate areas of concern for the specific student thoroughly. A list of tests that assess various aspects of speech, language and listening can be found at the end of this document. (See Appendix B). While every effort has been made to include multiple tools, this is not an exhaustive list, and a team may select other tests they deem appropriate. In addition, the team will need to review the test manuals to determine the most suitable professional to administer each test.

In some cases, training may be required to administer a specific test. In addition, a team may feel that they need to create tasks to assess a particular skill or concern. Creating specific tasks within an assessment is acceptable if a description of those tasks is included in the student's records with data on the student's performance. Maintenance of the data and materials is necessary as the student's performance on these items is reevaluated to document progress. (EXAMPLE: if a set of picture cards is used during a functional listening evaluation (FLE), the cards should remain in the student's records. When the FLE is repeated, the same materials should be used for the reassessment.)

Sign Language Assessment

There are several forms of sign or visual language. When assessing, it is crucial to understand what variation of sign language to evaluate. These include Signed Exact English (SEE), American Sign Language (ASL), Pidgin Signed English (PSE), Cued Speech, and Protactile ASL (deafblind). ASL is a complete language with grammatical structure. The others listed are a variation of ASL and English. When assessing a child that uses a visual language other than ASL, document the specific mode of communication. Assessments may need to be modified to evaluate their visual language system and their use of the English language.

ASL Assessment

ASL is the most commonly used visual language among Deaf families. Only administer an ASL assessment if the child has been exposed to and uses ASL as a mode of communication. ASL consists of its own grammatical rules and syntax. The basic linguistic components of ASL are morphemes, phonemes, theory called hold-movement-hold, semantics, pragmatics, and understanding the five registers (Rizer, 2004). The evaluator must understand the ASL structure, understand Deaf culture, and have adequate ASL skills to administer the assessment.

4. Listening Assessment

A listening assessment should be included in the language evaluation for those children utilizing auditory access to acquire language. Perform a listening evaluation in addition to the hearing evaluation. Various internal and external factors may impact a child's listening skills, which cannot be assumed from the audiogram. A table summarizing several popular listening assessment tools appears at the end of this document. (See Appendix B). The team must choose the assessment tool carefully and understand the test environment as well as the instructions. For example, some assessments or subtests must be conducted in quiet, while others require completion in specific noise sources. If you are using an assessment that requires competing or background noise, read the instructions carefully. You may need to set that intensity to a specific level.

Reminder: Sensorineural hearing loss, which is typically permanent and may be progressive, is a condition that arises from issues in the cochlea and eighth cranial nerve. The result is a loss of "loudness" and "clarity" — faulty hair cells or neurons generally do not accurately transmit the auditory signal. Individuals with sensorineural hearing loss often misunderstand speech, even when they can perceive it. Therefore, louder is not necessarily better, particularly from a speaker. Talking louder overemphasizes vowels to the detriment of consonants. A more effective way to speak to an individual with hearing loss is to face them and speak clearly without over-enunciating.

Functional Listening Evaluation

The purpose of the Functional Listening Evaluation (FLE) is to determine how a learner's listening abilities are affected by noise, distance, and visual input in a learner's natural listening environment. The evaluation protocol is based on a listening paradigm suggested by Ying (1990) and Ross, Bracken, and Maxon (1992).

Although specific formats of a FLE are available, young children with limited language may not be able to repeat sentences used in the templates for a FLE. Therefore, this evaluation may be performed using a variety of specific modifications to each learner, including, but not limited to, Early Listening Function using Ling (ELFling), picture vocabulary, and common phrases/sentences.

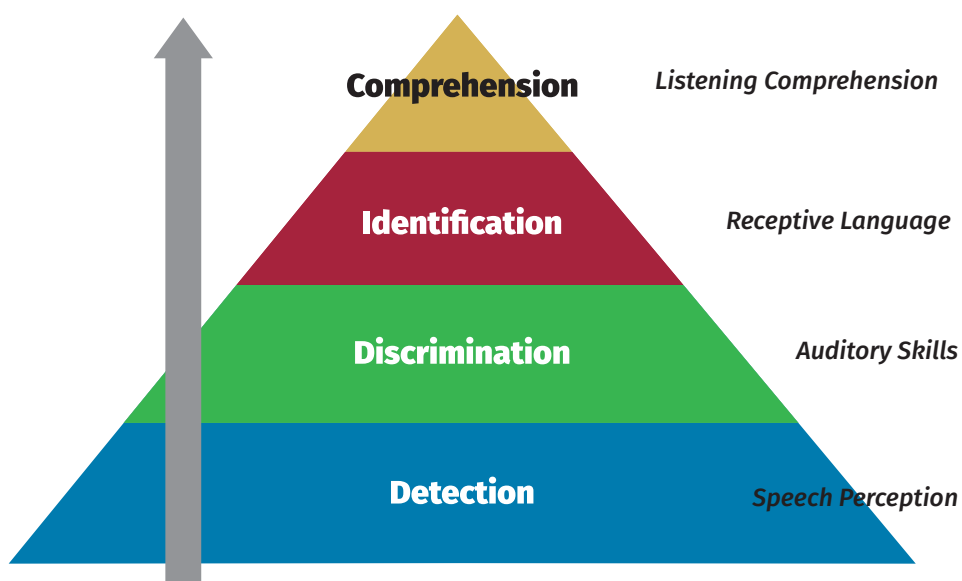
Since the primary goal of this evaluation is to determine what the learner can access through auditory input in the classroom, the evaluation's administrator and the team decide which evaluation materials will be most appropriate to determine the listening skills of the learner.

By including regular education classroom teachers and even parents or caregivers in the evaluation, the FLE establishes the listening abilities of a learner in the natural environment evaluated rather than a sound booth assessment conducted by a licensed audiologist. The active participation by these individuals aids in the understanding of the learner's abilities to listen across the evaluation conditions (noise, distance, visual input/cues).

The results help to justify accommodations, such as assistive listening devices, sign language interpreters, notetakers, captioning, special seating, and room acoustic modifications. The FLE is not a listening comprehension evaluation.

Development of Auditory Skills (Auditory Perception)

- Normal development of hearing begins in the womb.
- Listening behaviors develop over the first few years of life in children with normal hearing.
- Hearing loss interferes with auditory skill development, as well as language development.



**Chart developed based on content from Audiological Rehabilitation textbook by Schow & Nerbonne. See references.*

- Listening behaviors depicted above occur in a hierarchy. For example, detection of sound must precede discrimination, etc.
 - » Detection – recognizing the presence or absence of sound.
 - » Discrimination – discerning if two or more sounds are the same or different.
 - » Identification – reproducing a sound or pointing to a picture of the sound heard.
 - » Comprehension – attaching meaning to specific sounds.
- The degree of hearing loss impacts a child's listening development in the hierarchy.
- Children with significant hearing loss cannot be expected to comprehend speech and language until they have learned to detect, discriminate, and identify speech and language.

Recommendation: See ASHA's How Does Your Child Hear and Talk

<https://www.asha.org/public/speech/development/chart/>

Children with auditory processing deficits behave similarly to children with hearing loss. However, in both cases, listening is impacted, and language and learning may also be affected. Therefore, it is inappropriate to refer a child with hearing loss for a central auditory processing disorder (CAPD) evaluation.

One effect of hearing loss on school-age children is "listening fatigue." Listening to distorted or unclear speech over time requires significant effort, and it is not uncommon to see children with hearing loss lose attention over time. The student is generally not intentionally misbehaving or lacking attention but may well be exhausted. Teachers should be made aware of this and provide a short break when appropriate.

General Speech and Language Tests Outline

Select a battery of tests that includes:

- Standardized tests
- Informal assessment tasks including a language sample

Standardized tests (norm-referenced and criterion-referenced)

Since D/HH is a low incidence population and a very heterogeneous group, standardized assessment tools designed for this population do not exist. Therefore, standardized assessments normed on hearing children are considered best practices for evaluating the language skills of children who are D/HH (Joint Committee on Infant Hearing, 2007).

Please note that administering a norm-referenced test to individuals with characteristics not included in the normed population invalidates the results. When this occurs, it is important to explain in the report that the scores are not valid and interpreted with caution. In some instances, formal assessments not normed on the hearing-impaired population might be used as criterion-referenced tests, which help identify specific areas of weakness to include in a child's educational intervention.

According to Anderson and Price (2015), "For children who are deaf or hard of hearing, using standard scores is appropriate to measure growth over time but standard scores alone are insufficient for the determination of eligibility and the development of instructional programs."

Norm-referenced tests — Compares test takers against a large group of individuals at a similar age or grade. They show how an individual performs in relation to others.

Criterion-referenced tests — Measures an individual's performance against predetermined criteria. These tools describe an individual's strengths and weaknesses through their performance on specific tasks.

Select a mix of formal (standardized) tools and informal assessment tasks. Informal assessment may include a language sample or a self-designed task to assess a particular skill. It is imperative to obtain data on the child's performance on the informal tasks.

Consider assessment tools for both receptive and expressive spoken language, sign language skills, and written language skills. Also, consider what aspect of speech and language each tool assesses. Areas to consider include:

- Phonology – the sounds of a language
- Semantics- the meaning of a word, phrase, or sentence
- Morphology – the structure of words or parts of words
- Syntax – word order in a language
- Pragmatics – use of appropriate communication in social situations

Informal Assessment

It is essential to consider various informal assessment tasks when determining the assessment battery. Informal tasks may include comparing skills to developmental scales, individually designed tasks, and language samples obtained in various environments.

Developmental Scales – There are a variety of speech and language developmental scales that are available. While these scales are based on the speech and language development of typically developing individuals with normal hearing, it is possible to use them to identify speech and language skills that have or have not developed in a student with hearing loss. Developmental scales may also assist a team with identifying potential speech and language goals.

1. Individually-Designed Tasks – The team needs to consider designing tasks that allow for an in-depth examination of areas of language that are a concern. Some global standardized tests may have only a few items examining a specific area of language, and more data may be needed to document an area of difficulty. A task may be designed for any potential area of concern. Ten to 20 items should be developed, and the items and materials should be maintained to be readministered in the future to document progress.

2. Language Sample – A language sample must be obtained as part of the assessment. The language sample should be obtained in various environments with a variety of communication partners. It is critical to determine if the sample should be in ASL, spoken language, or both.

Once obtained and transcribed, the analysis should focus on:

- Phonology – the sounds of a language
- Semantics- the meaning of a word, phrase, or sentence
- Morphology – the structure of words or parts of words
- Syntax – word order in a language
- Pragmatics – use of appropriate communication in social situations

Note — all the above may be analyzed in ASL except for phonology.

The language sample may be analyzed informally by the team or by one of the following language sample analysis tools:

Systematic Analysis of Language Transcripts (SALT) is software that standardizes the process of eliciting, transcribing, and analyzing language samples.

The Cottage Acquisition Scales for Listening, Language and Speech (CASLLS) can monitor pre-verbal to complex language structures.

The Teacher Assessment of Spoken Language (TASL) is a tool created to evaluate and document the development of sentence structure in children with hearing loss.

While traditional language sample techniques may be used to obtain a language sample, Blaisera and Shannahana (2018) suggested the following procedure to obtain and analyze a language sample for a child who is deaf/hard of hearing:

1. Get two 50-utterance language samples obtained (video for ASL) in two settings with two communication partners:
 - a. One in a therapy setting with the clinician in a conversational context
 - b. One in a (noisy or less structured) classroom setting with a peer in a play-based context
2. Analyze the sample using a checklist or analysis tool that examines the:
 - a. **Form** of language:
 - Including intelligibility
 - The production of high-frequency grammatical morphemes, such as third-person singular, plural -s, and possessive -s
 - The ability to produce complex sentences
 - b. **Content** of language through:
 - Number of total words
 - Number of different words
 - c. **Use** of language by analyzing the:
 - Number and type of communication intents and repairs with peers

Test Administration

The language assessment **must** be administered in the child's primary mode of language. For example, if a child's primary language is American Sign Language, the assessment must be administered in ASL. (Policy 2419 states that attempts to provide a qualified examiner in the student's native language or mode of communication must be documented.)

The team should determine the most appropriate professional to administer each formal and informal assessment tool. The test manual will indicate the qualified professional; however, most tests require practice with the test, and some need specific training. It is important to remember that ASL assessment tools must be administered by an individual fluent in ASL and that some English tests will require an ASL interpreter. When administering tests to assess English skills that are not designed for students who are deaf or hard of hearing, the team will need to review the individual test items and determine whether directions or specific items should be administered in ASL or English depending on the skill being assessed.

Test Environment

A controlled environment for assessing a child who is deaf or hard of hearing is critical. For the child who is deaf, the room should be free of visual distractions within the child's field of vision. For the hard-of-hearing child, space should be quiet and away from the noise. Background noise may cause difficulty understanding speech, although not necessarily detecting speech. In addition to sound from other people and activities, pay attention to sound from heating and air conditioning units, and other building and maintenance sounds. The reverberation of sound can increase the listening difficulty for children, with or without hearing loss. In the likely case that you cannot control all the sounds affecting the test area, document the additional sounds and any distractions you notice that may impact the assessment.

Optimal lighting is also essential for assessment. Ensure that any materials and speaker(s) the child must see or read are well lit, without shadows or glare. Pay attention to light coming through windows during the time the assessment is scheduled. Arrange the seating for the child and the professional(s) administering the assessment so that the child can take advantage of all appropriate auditory and visual cues.

If the child uses hearing assistive technology, become familiar with its use before the assessment. Be prepared to quickly locate new batteries for hearing aids, cochlear implant processors, and other technologies. You may ask parents/guardians to provide these specifically for the assessment. Do not proceed with the language assessment if hearing technology is not functioning.

Reminder: Children who are deaf or hard of hearing often experience fatigue from extended periods of watching interpreters or listening. It is strongly recommended that the assessment be scheduled when the child is typically alert and can participate well in the evaluation.

The American Speech and Hearing Association (ASHA) provides information on Classroom Acoustics. <https://www.asha.org/public/hearing/classroom-acoustics>

Results and Recommendations

The team's assessment results must be analyzed by the entire team, not just the professional(s) administering the test. Professionals from different disciplines interpret a student's performance through their professional lens. The team should review the individual test items and the student's responses. The team can then begin to list the student's strengths and weaknesses, determine the areas for intervention, develop goals, and decide who will be responsible for providing the specially designed instruction for each goal.

Checklist for analysis:

- ☐ Review test items and student's responses
- ☐ Analyze responses
- ☐ Establish strengths and weaknesses
- ☐ Determine if the student meets eligibility criteria for services
- ☐ Determine areas for remediation
- ☐ Develop goals
- ☐ Determine who will be responsible for the specially-designed instruction for each of the goals

Appendix A

Three-Prong Test of Eligibility and Eligibility Criteria – Policy 2419 126CSR16

Requirements of the three-prong test of eligibility are:

1. Meets the eligibility criteria in one of the designated exceptionalities.
2. Experiences an adverse effect on educational performance. The term “adverse effect on educational performance” is broad in scope. An “adverse effect” is a harmful or unfavorable influence of the disability on the student’s performance. Educational performance includes both academic areas (reading, math, communication, etc.) and non-academic areas (daily life activities, mobility, pre-vocational and vocational skills, social adaptation, self-help skills, etc.). Considering all facets of the student’s condition that adversely affect educational performance involves determining any harmful or unfavorable influences that the disability has on the student’s academic or daily life activities. The adverse effect is not solely measured by individual test scores but also includes other data such as classroom performance and retention history. For students who are gifted, the eligibility committee is not required to document an adverse effect; rather, the impact of the giftedness on the student’s educational performance must be documented.
3. Needs special education. Special education is specially-designed instruction, at no cost to the parents, to meet the student’s unique needs with an exceptionality. Specially-designed instruction means the content, methodology, or delivery of instruction is adapted, as appropriate, to address the unique needs of the student that result from the student’s exceptionality to ensure access to the general curriculum so that the student can meet the educational standards that apply to all students.

A student is not eligible for special education unless all three of the above components are satisfied and documented.

Deafness

Definition: Deafness is a hearing impairment that is so severe that the student is impaired in processing linguistic information through hearing, with or without amplification, which adversely affects a student’s educational performance.

Eligibility Criteria for Deafness

An eligibility committee will determine that a student is eligible for special education services as a student who is deaf when all of the following criteria are met:

1. The student exhibits characteristics consistent with the definition and relies primarily on vision to access spoken communication.
2. The student has been diagnosed by an otologist, otolaryngologist, or audiologist as having a hearing loss.
3. The student’s condition adversely affects educational performance.
4. The student needs special education.

Hard of Hearing

Definition: Hard of hearing is an impairment in hearing, whether permanent or fluctuating, that adversely affects a student's educational performance but that is not included under the definition of deafness.

Eligibility Criteria for Hard of Hearing

An eligibility committee will determine that a student is eligible for special education services as a student who is hard of hearing when all of the following criteria are met:

1. The student exhibits characteristics consistent with the definition and relies primarily on hearing to access spoken communication.
2. The student has been diagnosed by an otologist, otolaryngologist, or audiologist as having a hearing loss.
3. The student's condition adversely affects educational performance.
4. The student needs special education.

Deafblindness

Definition: Deafblindness means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs designed solely for students with deafness or blindness or students who are hard of hearing or partially sighted.

Eligibility Criteria for Deafblindness

An eligibility committee will determine that a student is eligible for special education services as a student with deafblindness when all the following criteria are met: The student exhibits characteristics consistent with the definition.

1. The student is diagnosed by an optometrist or ophthalmologist for vision loss and by an otologist, otolaryngologist, or audiologist for hearing loss.
2. The student's condition adversely affects educational performance.
3. The student needs special education.

Deafblindness should be the primary eligibility for a student who meets the above criteria. In addition, a student meeting the above criteria and who also has additional impairments contributing to the student's severe educational needs may be determined eligible for deafblindness.

Language Disorder

Language Disorder: Diagnostic Criteria

1. Persistent difficulties in the acquisition and use of language across modalities (i.e. spoken, written, sign language, or other) due to deficits in comprehension or production that include the following:
 - a. Reduced vocabulary (word knowledge and use).
 - b. Limited sentence structure (ability to put words and word ending together to form sentences based on the rules of grammar and morphology).
 - c. Impairments in discourse (ability to use vocabulary and connect sentences to explain or describe a topic or series of events or have a conversation).
2. Onset of symptoms is in the early developmental period.

Eligibility Criteria for Language Disorder

An eligibility committee will determine that a student is eligible for special education and/or related services as a student who has a language disorder when the following criteria are met:

1. Two or more procedures, at least one of which yields a standard score, are used to assess both expressive and receptive modalities.
2. Language - A student with a language disorder exhibits:
 - a. Language abilities which are substantially and quantifiably below those expected for the students' chronological age and cognitive state of development, resulting in functional limitation in effective communication, social participation, academic achievement, or occupational performance, individually or in any combination.
 - b. Norm-referenced language tests which yield two subtest or total test scores with the following characteristics: 1.5 or more standard deviations (S.D.) below the mean, a language quotient/standard score of 78 (mean of 100), a stanine of two and/or a percentile of 8.
 - c. Non-standardized/informal assessment indicates that the student has difficulty understanding and/or expressing ideas and/or concepts to such a degree that it interferes with the student's social/educational progress.
 - d. For a preschool child to be considered for language intervention, the child's language should be determined to have a negative impact on social-communicative interactions and one or both of the following characteristics must exist:
 - i. Norm-referenced language tests which yield two subtest or total test scores with the following characteristics: 1.5 or more standard deviations below the mean, a language quotient/standard score of 78 (mean of 100), a stanine of two and/or a percentile of 8.
 - ii. Non-standardized/informal assessment indicates that the student has difficulty understanding and/or expressing ideas and/or concepts to such a degree that it interferes with the student's social/educational progress.
3. The student's disability adversely affects educational performance.
4. The student needs special education.
 - a. A communication disorder is not considered the primary disability when the symptoms are attributable to hearing or other impairments that are more appropriately defined under another eligibility category.
 - b. A communication disorder is considered a related service when services are required to assist an eligible student with an exceptionality to benefit from special education.

Speech Sound Disorder

Eligibility Criteria for Speech Sound Disorder (Articulation/Phonology Disorder)

An eligibility committee will determine that a student is eligible for special education and/or related services as a student who has an articulation/phonology disorder when the following criteria are met:

1. At least two procedures are used to assess the student, one of which is a standardized measure.
2. The student's speech is determined to have a negative impact on academic, social and/or vocational functioning, and one of the following characteristics exists:
 - a. Two or more phonemic errors not expected at the student's current age or developmental level are observed during direct testing and/or conversational speech.

- b. Two or more phonological processes not expected at the student's current age or developmental level are observed during direct testing and/or in conversational speech.
- 3. For a preschool student to be considered for articulation/phonology therapy, the student's speech should be determined to have a negative impact on social-communicative interactions and one or both of the following characteristics must exist:
 - a. Multiple phonemic errors that significantly reduce the student's speech intelligibility and are not expected at the student's current age or developmental level are observed during direct testing and/or conversational speech.
 - b. Two or more phonological processes that significantly reduce the student's speech intelligibility and are not expected at the student's current age or developmental level are observed during direct testing and/or in conversational speech.
- 4. Application of developmental norms from diagnostic tests verifies that speech sounds may not develop without intervention. (See Articulation Development Chart in Appendix of Policy 2419).
- 5. The student's disability adversely affects educational performance.
- 6. The student needs special education.
 - a. A communication disorder is not considered the primary disability when the symptoms are attributable to hearing or other impairments that are more appropriately defined under another eligibility category.
 - b. A communication disorder is considered a related service when services are required to assist an eligible student with an exceptionality to benefit from special education.

Social (Pragmatic) Communication Disorder

Social (Pragmatic) Communication Disorder: Diagnostic Criteria

- 1. Persistent difficulties in the social use of verbal and nonverbal communication as manifested by all the following:
 - a. Deficits in using communication for social purposes, such as greeting and sharing information, in a manner that is appropriate for social context.
 - b. Impairment of the ability to change communication to match context or the needs of the listener, such as speaking differently in a classroom than on a playground, talking differently to a child than to an adult and avoiding use of overly formal language.
 - c. Difficulties following rules for conversation and storytelling, such as taking turns in conversation, rephrasing when misunderstood and knowing how to use verbal and nonverbal signals to regulate interaction.
 - d. Difficulties understanding what is not explicitly stated (e.g., making inferences) and nonliteral or ambiguous meaning of language (e.g., idioms, humor, metaphors, multiple meanings that depend on the context for interpretation).
- 2. The onset of symptoms may occur in the early developmental period but deficits may not fully manifest until social communication demands exceed limited capacities.
- 3. The symptoms are not attributable to another medical or neurological condition or to low abilities in the domains of word structure and grammar, and are not better explained by autism disorders, intellectual disability (intellectual developmental disorder), global developmental delay, or another mental disorder.

Eligibility Criteria for Social (Pragmatic) Communication Disorder

An eligibility committee will determine that a student is eligible for special education and/or related services as a student who has a Social (Pragmatic) Communication Disorder based on the following:

1. Assessment measures that include norm-referenced tests, multiple observations, checklists and structured tasks.
2. Assessment procedures that are contextually based and involve multiple settings and communication partners.
3. Assessment results indicate deficits in functional limitations in effective communication, social participation, social relationships, academic achievement and/or occupational performance, individually or in combination.
4. Social pragmatic communication disorder cannot be diagnosed in the presence of restricted repetitive behaviors, interests, and other activities related to the diagnosis of Autism.
5. The student's disability adversely affects educational performance.
6. The student needs special education.

Comprehensive Language Evaluations of Preschool Students

If the language evaluation components cannot be completed before the Eligibility Committee Meeting, "Additional evaluation data are needed in the following areas: Speech and Language" can be added at the bottom of the Eligibility Committee Report. The Eligibility Committee may make the primary eligibility determination at that time. The additional testing must be completed within 60 days of the Eligibility Committee Meeting. After the testing is complete, the related service of speech-language therapy may be added at an IEP Meeting, if the student meets the eligibility criteria, or at another Eligibility Committee Meeting, depending on county protocol.

Appendix B

Speech and Language Test Options

Test Name	Age Range	Test Description	Areas Assessed
Cottage Acquisition Scales for Listening, Language, and Speech (CASLLS)	Looks at language structures that develop from birth to 48 months but can be used at any chronological age.	Used for progress monitoring from preverbal to complex language structures.	<ul style="list-style-type: none"> • Phonology • Semantic • Syntax • Morphology • Pragmatics • Listening
The Screening Instrument for Targeting Educational Risk (S.I.F.T.E.R.)	Preschool through 12th grade	Method by which children with identified hearing problems can be educationally screened. Those who are identified as having significant educational difficulties can be considered for formal assessment.	<ul style="list-style-type: none"> • Academics • Attention • Hearing • Communication • Emotional • Social • Class participation
Clinical Evaluation of Language Fundamentals – Fifth Edition (CELF-5)	5-21 years	Structured and authentic tests of language ability for a complete picture of students’ language skills.	<ul style="list-style-type: none"> • Semantics • Morphology • Syntax • Pragmatics
Clinical Evaluation of Language Fundamentals Preschool – 3 (CELF Preschool-3)	3:0-6:11years	Assesses aspects of language necessary for preschool children to meet the language demands of the classroom	<ul style="list-style-type: none"> • Semantics • Morphology • Syntax • Pragmatics
Test of Language Development – Primary: Fifth Edition (TOLD-P-5)	4:0-8:11 years	Assesses a student’s spoken language skills.	<ul style="list-style-type: none"> • Semantics • Syntax • Morphology • Phonology
Children’s Communication Checklist-2 U.S. Edition (CCC-2)	4:0-16:11 years	A parent or caregiver rating scale that screens for language impairment.	<ul style="list-style-type: none"> • Semantics • Syntax • Morphology • Pragmatics
Receptive-Expressive Emergent Language Test, Fourth Edition (REEL-4)	Birth through 36 months	Records parental observations and identifies infants and toddlers who have impairments that affect language development.	<ul style="list-style-type: none"> • Semantics • Syntax • Morphology • Pragmatics

Test Name	Age Range	Test Description	Areas Assessed
Oral and Written Language Scales – Second Edition (OWLS-II)	3-21 years for Listening Comprehension and Oral Expression Scales 5-21 years for Reading Comprehension and Written Expression Scales	Provides a picture of oral and written language skills.	<ul style="list-style-type: none"> • Semantics • Syntax • Morphology • Pragmatics
Comprehensive Assessment of Spoken Language, Second Edition (CASL-2)	3-21 years	Measure the oral language processing skills of comprehension and expression.	<ul style="list-style-type: none"> • Semantics • Morphology • Syntax • Pragmatics
Communication Matrix	Appropriate for all individuals who exhibit communication skills that occur in typically developing individuals between the ages of 0 and 24 months of age.	An assessment tool designed to pinpoint how an individual is communicating and to provide a framework for determining logical communication goals.	<ul style="list-style-type: none"> • Semantics • Syntax • Morphology • Pragmatics
Functional Communication Profile Revised (FCP-R)	3:0-Adult	Yields an overall inventory of an individual's communication abilities, mode of communication, and degree of independence.	<ul style="list-style-type: none"> • Semantics • Syntax • Morphology • Pragmatics
The Rossetti Infant-Toddler Language Scale	0 – 36 months	Assesses preverbal and verbal aspects of communication and interaction in young children	<ul style="list-style-type: none"> • Semantic • Syntax • Morphology • Pragmatics
Systematic Analysis of Language Transcripts (SALT)	2 years, 8 months – 18 years, 9 months	Software that standardizes the process of eliciting, transcribing, and analyzing language samples	<ul style="list-style-type: none"> • Semantic • Syntax • Morphology • Pragmatics
Test for Auditory Comprehension of Language – Fourth Edition (TACL-4)	3-0 – 12-11 years	Measures an individual's ability to understand spoken vocabulary, grammar, and syntax.	<ul style="list-style-type: none"> • Comprehension of: • Semantics • Syntax • Morphology
Preschool Language Scale – Fifth Edition (PLS-5)	Birth to 7:11	Comprehensive developmental language assessment with items that range from pre-verbal, interaction-based skills to emerging language to early literacy.	<ul style="list-style-type: none"> • Semantics • Syntax • Morphology • Phonology

Test Name	Age Range	Test Description	Areas Assessed
Test of Language Development – Primary: Fifth Edition (TOLD-P-5)	4:0-8:11 years	Assesses a student's spoken language skills.	<ul style="list-style-type: none"> • Semantics • Syntax • Morphology • Phonology
Test of Language Development – Intermediate: Fifth Edition (TOLD-I-5)	8:0-17:11 years	Assesses spoken language in intermediate-age students.	<ul style="list-style-type: none"> • Semantics • Syntax • Morphology
Test of Narrative Language-Second Edition (TNL-2)	4:0-15:11 years	Assesses important aspects of narrative language	<ul style="list-style-type: none"> • Semantics • Syntax • Morphology
Test of Early Language Development – Fourth Edition (TELD-4)	3:0-7:11 years	Measure of spoken language	<ul style="list-style-type: none"> • Semantics • Syntax • Morphology
Test of Expressive Language (TEXL)	3:0-12:11 years	Assesses expressive spoken language ability	<ul style="list-style-type: none"> • Semantics • Syntax • Morphology
New Reynell Developmental Language Scales – Fourth Edition (NRDLS)	3 years – 7 years, 6 months	Assesses the comprehension and production of language in young children	<ul style="list-style-type: none"> • Semantic • Syntax • Morphology
SKI-HI Language Development Scale	Birth – 5 years	A parent observation scale listing the receptive and expressive language skills of children who are deaf or hard of hearing.	<ul style="list-style-type: none"> • Semantics • Syntax • Morphology
Test for Auditory Comprehension of Language – Fourth Edition (TACL-4)	3-0 – 12-11 years	Measures an individual's ability to understand spoken vocabulary, grammar, and syntax.	<ul style="list-style-type: none"> • Comprehension of: • Semantics • Syntax • Morphology
CID TAGS: Teacher Assessment of Grammatical Structures	Not specified	System for teaching and tracking receptive and expressive language development in children who are deaf and hard of hearing	<ul style="list-style-type: none"> • Syntax • Morphology
Teacher Assessment of Spoken Language (TASL)	Not specified	Designed to allow teachers and therapists to evaluate and document the development of sentence structure in children with hearing loss	<ul style="list-style-type: none"> • Syntax • Morphology

Test Name	Age Range	Test Description	Areas Assessed
Structured Photographic Expressive Language Test-Third Edition	4-0 to 9-11 years	Assessment of morphology and syntax skills.	<ul style="list-style-type: none"> • Syntax • Morphology
Peabody Picture Vocabulary Test – Fourth Edition (PPVT-4)	2:6 – 90+ Years	Measures receptive vocabulary for Standard American English.	<ul style="list-style-type: none"> • Semantics
Expressive One-Word Picture Vocabulary Test – Fourth Edition (EOWPVT4)	2:0-80+ years	Assessment of how well an individual can name (in English) objects, actions, or concepts presented in pictures	<ul style="list-style-type: none"> • Semantics
Expressive Vocabulary Test – Third Edition (EVT-3)	2:6-90+ years	Test of expressive vocabulary and word retrieval based on words in Standard American English.	<ul style="list-style-type: none"> • Semantics
Receptive One-Word Picture Vocabulary Test – Fourth Edition (ROWPVT-4)	2:0-80+ years	Assessment of how well an individual can match a word that is heard (in English) to objects, actions, or concepts presented in pictures	<ul style="list-style-type: none"> • Semantics
Comprehensive Receptive and Expressive Vocabulary – Third Edition (CREVT-3)	5:0-89-11 years	Measure of both receptive and expressive oral vocabulary	<ul style="list-style-type: none"> • Semantics
Test of Semantic Skills-Primary (TOSS-P)	4:0-6:11 years	Assesses receptive and expressive semantic skills	<ul style="list-style-type: none"> • Semantics
Wiig Assessment of Basic Concepts	2:6-7:11	Evaluates a child's understanding and use of basic concepts	<ul style="list-style-type: none"> • Semantics
Boehm Test of Basic Concepts – Third Edition (Boehm-3)	Kindergarten, First, and Second Grade	Evaluates basic concepts essential for school success.	<ul style="list-style-type: none"> • Semantics
Bracken Basic Concept Scale – Third Edition: Receptive (BBCS-3: R)	3:0 – 6:11 years	Receptive evaluation of a child's acquisition of basic concepts nonverbally	<ul style="list-style-type: none"> • Semantics
Test of Word Finding – Third Edition (TWF-3)	4:6-12:11	Measure word finding ability	<ul style="list-style-type: none"> • Semantics
Phonological Awareness Test-Second Edition: Normative Update (PAT-2: NU)	5:0-9:11 years	Assessment of phonological awareness, phoneme-grapheme correspondence, and phonemic decoding skills.	<ul style="list-style-type: none"> • Phonology • Literacy

Test Name	Age Range	Test Description	Areas Assessed
Arizona Articulation Phonology Scale- Fourth Revision (Arizona-4)	18 months to 21:11 years	Measures articulation and phonology	• Phonology
Goldman-Fristoe Test of Articulation 3 (GFTA-3)	2:0-21:11 years	Assesses speech sound production in words and sentences.	• Phonology
Khan-Lewis Phonological Analysis – Third Edition (KLPA-3)	2:0-21:11 years	Companion analysis for the GFTA-3 to determine if phonological processes are contributing to the individual's speech sound disorder	• Phonology
Clinical Assessment of Articulation and Phonology – 2nd Edition (CAAP-2)	2:6-11:11 years	Assesses articulation and phonology	• Phonology
Sunny Articulation Phonology Test (SAPT)	All ages	Clinical tool for screening, identification, diagnosis and follow up evaluation of articulation skills in English speaking individuals. (For the iPad)	• Phonology
Auditory Perception Test for the Hearing Impaired (APT/HI)	3 years and older	Identifies specific auditory perception and processing deficits.	• Phonology
Pre-Feature Identification Contrasts (PreFICs)	Not Specified	Form to monitor a child's progress on accurately identifying the suprasegmental aspects of speech.	• Phonology
Test of Phonological Awareness – Second Edition: PLUS (TOPA-2+)	5 – 8 years	Measures young children's ability to isolate individual phonemes in spoken words and understand the relationships between letters and phonemes in English.	• Phonology
Lindamood Auditory Conceptualization Test – Third Edition (LAC-3)	5-0 – 18-11 years	Measures an individual's ability to perceive and conceptualize speech sounds using a visual medium.	• Phonology

Test Name	Age Range	Test Description	Areas Assessed
Pragmatic Language Skills Inventory (PLSI)	5:0-12:11 years	Assesses pragmatic skills	• Pragmatics
Language Use Inventory (LUI)	18 – 47 months of age	Parent-report questionnaire to assess pragmatic language development.	• Pragmatics
Summary of Social Interaction (Pragmatic) Development/Theory of Mind	6 months -7 years	Form developed by Anderson to assess pragmatic development	• Pragmatics
The Pragmatics Checklist Anderson	2.5 – 7 years	A social communication skills checklist	• Pragmatics
Oral Passage Understanding Scale	5:0-21 years	Evaluates a person's ability to listen to passages that read aloud and recall information about them.	• Listening comprehension
Listening Skills Development, Early (table that can serve as a checklist)	Birth-4 years	A hierarchy of auditory skills learned by age 4 years.	• Auditory skills
Contrasts for Auditory & Speech Training (CAST)	3-12 years	Focuses on auditory discrimination between and among speech sounds	• Auditory discrimination
Speech Perception Instructional Curriculum & Evaluation (SPICE) 2nd Edition and SPICE for Life This is a kit.	2-12 years	From speech detection to suprasegmental perception, vowel and consonant perception and connected speech. New goals include perceiving voice and manner in words, perceiving morphemes in plural nouns and past tense verbs, imitating nonsense words and following directions.	• Listening
Functional Listening Evaluation (FLE)	School-age	Used to evaluate students' listening abilities with factors of noise, distance, and vision in the daily classroom listening environment	• Listening

Appendix C

ASL Assessment Tools

Assessment Tool Name	Description	Administration
<i>Story Grammar Marker Narrative Analysis for Deaf and Hard of Hearing Students</i> Ages 3 +	Provides criterion-based assessments for narrative macro- and micro-structure for both English and American Sign Language	ASL Fluency is necessary.
<i>Visual Communication and Sign Language Checklist for Deaf and Hard of Hearing Children (VCSL)</i> Birth to 5	The VCSL is a comprehensive checklist that helps to track young children's sign language development from birth to age 5. The VCSL assists teachers and early childhood education service providers in planning language development activities for individual children. The online version automates the administration and scoring, provides links to video exemplars to help raters understand the language element being rated, creates reports, and saves non-identifiable data in a national database for use in research and analysis.	Should be administered by teachers, SLPs, early interventionists who are FLUENT in ASL and work DIRECTLY with the child and family.
<i>The MacArthur Communicative Development Inventory for American Sign Language</i> www.aslcdi.org Birth to 5	The ASL-CDI 2.0 is an updated American Sign Language adaptation of the MacArthur Bates Communicative Development Inventory. It is an assessment of early vocabulary knowledge in children learning American Sign Language.	ASL Fluency is necessary
<i>American Sign Language Receptive Skills Test (ASL RST)</i> Ages 3 -13	The ASL RST is a developmental assessment for children learning ASL. It measures children's understanding of ASL grammar, including number/distribution, negation, non/verb distinction, spatial verbs (location and movement), size/shape specifiers, handling classifiers, role shift, and conditionals.	It is expected that examiners are professional (teachers, language specialists, therapists, etc.) who are familiar with test procedures and have experience with deaf children who use ASL to communicate. Fluency in ASL is not required, but basic communication skills in ASL are minimally needed.
<i>Ski- Hi Language Development Scale</i> Birth to 5	Assesses receptive and expressive language skills in both ASL and spoken language.	Administered by parents in collaboration with professionals. Minimal ASL skills required.

DEAF/BLIND with Multiple Disabilities

Assessment Tool Name	Description
Assessing Communication and Learning in Young Children Who are Deafblind or Who Have Multiple Disabilities https://documents.nationaldb.org/DeafBlindAssessmentGuide_Rowland.pdf	This is a guide document for assisting those evaluating children with a combined hearing/vision loss and possibly other disabilities.
Informal Functional Hearing Evaluation (IFHE) – Texas School for the Blind and Visually Impaired https://www.tsbvi.edu/deafblindness-items/5413-ifhe	The Informal Functional Hearing Evaluation (IFHE) is meant to guide the teacher of the deaf and hard of hearing (TDHH), the teacher of the visually impaired (TVI), and the teacher of students with DeafBlindness (TDB) in determining the impact of a potential hearing loss on educational functioning for students with visual impairments and multiple disabilities.
A Tool for Identifying Vision and Hearing Loss in Children with Multiple Disabilities http://www.wvdhhr.org/birth23/resources/hearing_vision/Tool_Assessing_V_H_2018.pdf	This tool was created to assist early interventionist practitioners, classroom teachers, therapists, school nurses, and parents in identifying sensory impairments in children with multiple disabilities.
Are Intervener Services Appropriate for Your Student with Deaf-Blindness? An IEP Team Discussion Guide https://www.nationaldb.org/media/doc/Intervener_Services_IEP_Team_Discussion_Guide.pdf	This document will help a team determine the needs for an Intervener for a Deafblind student

Appendix D

Comprehensive Language Evaluation

CONFIDENTIAL

Name: _____ WVEIS No: _____

Birthdate: _____ School: _____

Age: _____ Grade: _____ Date(s) of Assessment: _____

Examiners(s): _____

BACKGROUND INFORMATION

1. Statement of the Problem

- Reason for the Assessment
- Areas of Concern

With a student who is deaf or hard of hearing, consider many components when gathering background data. The following is a list of critical factors that you may need to include

2. Access to Sound/Hearing Status

If the hearing loss is asymmetric or unilateral, please clarify results for each ear separately.

- Type, degree, and configuration of hearing loss
- Word Recognition scores, including intensity at which presented
- Otoacoustic emissions and Immittance results
- Age at identification of loss
- Etiology of the hearing loss
- Age of onset of loss, if known
- Amplification (hearing aid type) or cochlear implant
 - » Age of initial amplification
- Hearing aid assistive technology (FM system, classroom amplification, etc.)
- Effectiveness of hearing technology
- Auditory skills/use of residual hearing (if available from previous assessment)

3. Communication Skills

- Child's primary mode of communication
- Child's primary language
- Use of interpreter

4. Additional Important Considerations

- Vision status
- Medical history/comorbid conditions
- Psychosocial status
- Educational status
- Child's motivation
- Parental involvement
- Cultural considerations

COMPREHENSIVE LANGUAGE ASSESSMENT

1. Observations of Language Skills

Describe the situations where observations were performed and discuss the skills that were present and those that were not observed. The mode of communication should be noted.

Observe the student's language skills:

- In a variety of natural environments
- In the classroom
- With various communication partners
- In the home environment, whenever possible

2. Listening Assessment

A listening assessment should be included in the language evaluation for those children utilizing auditory access to acquire language. Best practice is to include a FLE.

For each test administered include:

- Test name
- Description of the test
- Score (if appropriate)
- Interpretation of the results
- Informal observations

3. Language Assessment

Please note that administering a norm-referenced test on an individual with characteristics not included in the normed population invalidates the results. When this occurs, it is important to explain in the report that the scores are not valid and interpreted with caution. In some instances, formal assessments not normed on the hearing-impaired population might be used as criterion-referenced tests, which help to identify specific areas of weakness to include in a child's educational intervention.

When assessing a child that uses a visual language such as ASL, document the specific mode of communication. Assessments may need to be modified to evaluate their visual language system and their use of the English language and those modifications must be explained in the report.

a. Receptive Language

For each test administered include:

- Test name
- Description of the test
- Score (if appropriate)
- Interpretation of the results
- Informal observations

b. Expressive Language

For each test administered include:

- Test name
- Description of the test
- Score (if appropriate)
- Interpretation of the results
- Informal observations

c. Informal Assessment

Individually-Designed Tasks

The team needs to consider designing tasks that allow for an in-depth examination of areas of language that are a concern.

For each task include:

- Description of the task and materials used
- Procedure used to administer the task
- Student's performance on the task
- Language Sample — *A language sample must be obtained as part of the assessment. The language sample should be obtained in various environments with a variety of communication partners. It is critical to determine if the sample should be in ASL, spoken language, or both.*

Include:

- Description of the tasks used to obtain the sample
- Analysis of the following:
 - » Semantics- the meaning of a word, phrase, or sentence
 - » Morphology – the structure of words or parts of words
 - » Syntax – word order in a language
 - » Pragmatics – use of appropriate communication in social situations

4. Articulation

For each test administered include:

- Test name
- Description of the test
- Score (if appropriate)
- List of speech sound errors
- Interpretation of the results
- Informal observations

5. Voice (if pertinent)

6. Structure and Function (Include if any abnormalities are noted.)

Information to include:

- Results of oral examination (if performed)
- Ability to perform nonspeech movements
- Deviations in structures

BEHAVIORAL OBSERVATIONS

Describe the student's behavior including:

- Motivation
- Cooperation
- Fatigue
- Concentration

RESULTS AND RECOMMENDATIONS

The team’s assessment results must be analyzed by the entire team, not just the professional who administered the test. Professionals from different disciplines interpret a student’s performance through their professional lens. The team should review the individual test items and the student’s responses and discuss them in this section of the report. The team should list the student’s strengths and weaknesses, determine the areas for intervention, develop goals, and decide who will be responsible for providing the specially designed instruction for each goal.

- Review test items and student’s responses
- Analyze responses
- Establish strengths and weaknesses
- Determine if the student meets eligibility criteria for services
- Determine areas for remediation
- Develop goals
- Determine who will be responsible for the specially designed instruction for each of the goals

EVALUATOR(S) SIGNATURE(S)

Name with Credentials

Date

Name with Credentials

Date

Name with Credentials

Date

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