
Determining Special Education Eligibility - Developmental Delay

Department of Education, Office of Special Education



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Introduction

These eligibility guidelines were written to provide parents, teachers, special education personnel, administrators, and other professionals' information on the identification, verification, and determination of eligibility for special education services for children with a developmental delay.

This category of children has been defined by both federal and state regulations. A three-part eligibility requirement for a child to be identified as a child who is developmentally delayed, is as follows:

- Meet the eligibility criteria (92 NAC 51.006);
- Documentation of adverse effect on educational performance;
- Determination that a need for special education is evident.

State Definition

Developmental Delay: To be eligible for special education services in the category of developmental delay, the child shall have significant delay as measured by appropriate diagnostic instruments and procedures in one or more of the following areas and, by reason thereof needs special education and related services: Cognitive development, Physical development, Communication development, Social or Emotional development, Adaptive behavior or skills development, or a diagnosed physical or mental condition that has a high probability of resulting in a substantial delay in function in one or more of such areas.

Developmental delay must be considered as one possible eligibility category for children ages 3 through age four and is a discretionary option for school districts to use for children ages five through the school year in which the child reaches age eight.

A child remains eligible for services under the category of developmental delay through the school year in which the child reaches age five; or through the school year in which the child reaches age eight, if the district uses the discretionary option in 92 NAC 51-006.04E2.

Both federal and state laws state that the verification of developmental delay can only be used through age eight years. Prior to the child turning eight years old, with the parent's written permission, the IEP Team/MDT

should begin the re-evaluation process to determine if the child meets the guidelines for verification with another disability or is no longer considered a child with a disability.

Section 1: MULTIDISCIPLINARY EVALUATION (MDT) CONSIDERATIONS

The Multidisciplinary Team (MDT) should include at least:

- The child's parent(s);
- For a school age child, the child's regular teacher(s) or a regular classroom teacher qualified to teach a child of that age;
 - For a child below age five, a teacher qualified to teach a child below age five;
- Qualified professionals knowledgeable about overall child development and the area(s) of concern (cognitive, intellectual, physical, communicative, social/emotional, and adaptive behavior/skills development);
- A school district administrator or a designated representative; and
- At least one person qualified to conduct individual diagnostic examinations of children in their specific area of training (i.e., school psychologist, speech language pathologist, or other instructional specialist).

Section 2: GUIDELINES

In order for a child to be verified as having a developmental delay, the evaluation should include the analysis and documentation of:

Identification of a diagnosed condition:

Children who are diagnosed as having a physical or mental condition that has a high probability of resulting in a substantial delay in function in one or more areas. Included in this group are children who need special education and related services because of a condition that typically results in developmental delay, even though they may not exhibit a developmental delay at the time of diagnosis.

OR

A significant delay in the function of one or more of the following areas:

- Cognitive development
- Physical development
- Communicative development
- Social/emotional development
- Adaptive behavior development

OR

The multidisciplinary team (MDT) which includes the family as participants, shall determine if a child has a significant delay in development using multiple sources of information, which shall include at least the following:

- Information provided by the family;
- Observations of the child;
- Developmental history; and
- Review of records related to the child's current health status and medical history.

A developmental delay is an educational verification and is a term used to facilitate early identification by public school personnel. Educational assessments and evaluations to identify strengths and limitations may include:

- Individual achievement testing
- Reports from parent interviews
- Medical reports

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- Classroom/preschool assessment data
 - Norm-referenced testing
 - Criterion-referenced assessment
 - State and district-wide assessment
 - Curriculum-based assessment
 - Observation and analysis of behavior
 - Teacher anecdotal records

Parent involvement is of utmost importance in the evaluation process.

Section 3: PROCEDURES TO DETERMINE ADVERSE EFFECT ON DEVELOPMENT/EDUCATIONAL PERFORMANCE

FACTORS TO CONSIDER

Many factors must be considered in determining if a developmental delay is present or can be expected to produce significant delays in the child's development or educational performance. The factors may include, but are not limited to:

- Developmental milestones
- Comprehension and utilization of instructional information
- Consistent generalization of skills
- Fluent communication in the family's native language
- Age-appropriate problem-solving skills when such information is presented in a traditional academic curriculum
- Age of identification
- Current age
- History of cognitive delays
- History of adaptive behavior delays
- History of interventions and response
- Relevant family/medical history
- Current educational placement
- Current levels of performance
- Current language delays in the family's primary language
- Current sensory and motor delays

Psychologists, special education teachers, speech-language pathologists (SLP), and other related service personnel are the primary professionals who can determine how these factors may impact the child. Parents, teachers, care providers, and medical professionals can also provide information important in determining the impact of the developmental delay.

The MDT should determine whether the adverse effect on the child’s communication, language, sensory-motor, educational performance, or adaptive behavior skills is primarily a result of the developmental delay. In all cases, when making a determination of the adverse effects of the developmental delay, the team should consider the child’s age, cognitive abilities, adaptive behavior skills, and current daily living experiences, settings, and opportunities.

The following questions are to guide documentation and determination of whether the disability has an adverse effect on the child’s developmental/educational performance:

Cognitive Abilities

How does the child respond to change within the home, childcare, classroom, or school (schedules, teachers, classrooms, etc.)

What is the child’s level of attention?

- While interacting with caregivers?
- While playing?
- While completing assignments?
- While listening to directions?

What is the child’s memory/learning ability?

- Short-term memory?
- Long-term memory?
- Multiple-step directions?
- Following routines?
- Can the child attend to activities long enough to gain meaningful information or pleasure?
- Does the child’s attention change notably in different situations?
- How much practice/repetition does the child need?

What are the child's problem-solving abilities?

- Responding to a question?
- Determining how to complete a task?
- Responding to a social situation?
- To solve a problem? or work with others to solve the problem?
- Tries multiple strategies or uses the same one?

What is the child's ability in making judgments?

- Playing safely?
- Responding to questions?
- Determining right from wrong?

What is the child's ability to reason in an abstract manner?

- Understand jokes?
- Literal vs. abstract comprehension?

Academics

Does the child exhibit appropriate listening comprehension skills?

Does the child use appropriate written expression skills?

Does the child use imitation of others to learn new skills?

Does the child have pre-reading skills or basic reading skills and use them in reading both for instruction and for pleasure?

What is the child's level of reading comprehension and is that level commensurate with his/her age level?

What is the child's math calculation ability and is it commensurate with his/her age level?

Does the child use mathematical reasoning skills appropriate to his/her age level?

Is the child's perception of concepts and topics realistic? accurate?

- Does the child have the ability to generalize?

How appropriate is the child's level of meaningful visual perception?

- Differentiate between realism vs. animated?
- Differentiate math symbols?
- Understand graphs and charts?
- Differentiate between letters and words?

How age appropriate is the child's level of meaningful auditory perception?

- Differentiate between environmental sounds?
- Differentiate between levels of sounds?
- Differentiate between voices?
- Differentiate between words?

Physical and Motor Abilities

Gross Motor Skills

What are the child's physical abilities in the following areas?

- Rolling over?
- Crawling?
- Standing?
- Walking?
- Running?
- Jumping?
- Balance?
- Hopping?
- Climbing?

Fine Motor Skills

What are the child's physical abilities in the following areas?

- Holding and eating with utensils?
- Manipulation of and transfer of small objects?
- Holding and using a crayon, pencil, or marker?
- Using hands together for play or classroom tasks?
- Manage fasteners such as buttons, zippers, etc?
- Cutting with scissors?
- Turns thin pages/Folding paper?
- Picking up a small object from table to floor?

Perceptual Skills

What are the child's perceptual abilities in the following areas?

- Copying with crayon, pencil, or marker?
- Putting objects into folders, envelopes, or slots?
- Learning to read?
- Learning to write?
- Completing jigsaw puzzles or other board games?
- Playing games, i.e. four square, jumping, soccer?

Social and Emotional Behaviors

Does the child initiate play with peers/adults?

- Engage in back and forth play with adult/caregiver?
- Is the child able to take turns?
- Understand rules and how to win/lose in a game?

Does the child exhibit difficulties with social relationships?

- When do these difficulties occur, i.e. recess, mealtime, and neighborhood?
- What are some characteristics of these difficult social relationships?

What is the child's level of attention to:

- Engage in individual play?
- Engage in parallel or associative play?
- Know how to enter play with peers?
- Listen to story/discussion?
- Follow directions?

Does the child respond in a positive manner to school demands?

- Does the child follow simple age-appropriate routines/ rules?
- Does the child follow rules established for a group of children (playground, school classroom, school building)?
- Move from one activity to the next independently?

Does the child become agitated easily?

- Is the child able to deal with conflict in a positive manner?
- How does the child exhibit his/her agitation?
- Is the child friendly with peers and/or adults?

Does the child often express irritability?

- What causes this irritability?
- Is the child able to move away from the situation that is causing the irritability?
- How does the child exhibit his/her irritability?

Does the child display aggression?

- In what ways does the child display aggression, i.e., physical, verbal, etc.?
- What causes the child to display aggression?
- Is the child able to calm him/herself after an aggressive act?

Does the child exhibit an attitude of apathy in certain situations, events, etc.?

- Under what circumstances does the child exhibit an attitude of apathy?
- Is the child able to become motivated in the same situation that has contributed to the attitude of apathy?

Does the child exhibit insight in particular situations?

- Are these situations social situations that involve either another child or an adult?
- In what ways does the child exhibit this insight or lack of insight?
- Does the child express empathy when another child is hurt or sad?

Does the child exhibit impulsivity?

- How often does the child exhibit impulsivity?
- Are there particular situations (during meals, play, preparation for another activity, etc.) in which the child exhibits impulsivity?activity, etc.) in which the child exhibits impulsivity?

Does the child exhibit positive self-control/regulation?

- How does the child exhibit positive self-control or regulation?
- Does the child exhibit poor emotional control?
 - What are some characteristics of the child's poor emotional control (crying, shouting, yelling, hiding, etc.)?
 - Are there particular situations in which the child exhibits poor emotional control?

Does the child exhibit depression and withdrawal?

- In what ways does the child exhibit depression and withdrawal, i.e., refusing to participate, crying, hiding from others, refusal to work on assignments?
- Are there particular situations in which the child exhibits depression and withdrawal?

Communication Abilities

What is the child's ability to communicate in his/her primary language;

What is the child's ability to communicate in English?

- Use vocabulary appropriate to his/her age/grade level?
- Uses gestures and eye contact to express self or augment verbal communication?
- Express needs and wants?
- Follow simple commands?

What is the child's ability to initiate age-appropriate interaction or conversation with others?

- How does the child prompt communication interactions?

Can the child engage in a shared conversation?

- Does the child only ask and answer questions or does he/she contribute to conversations?
- Can the child maintain a conversation by adding related information?
- Can the child stay on topic?
- What is the child's ability to generalize word meaning?
- Can the child appropriately transition to a new topic?
- Can the child initiate and terminate a conversation?
- Can the child understand and respond to communication signals (vocal and/or body language) by multiple communication partner(s)?
- Does the child ask questions at the appropriate times?
- Can the child request clarification?

Expressive or Receptive Language Development

Vocabulary

- Does the child use vocabulary appropriate for his/her age/grade level?
 - General vocabulary (prepositions, auxiliary verbs, pronouns)?
 - Content-specific vocabulary (nouns, verbs, adjectives, adverbs)?
 - Figurative terms?
- Does the child use and comprehend language appropriately for his/her age/grade level?
 - General vocabulary (prepositions, auxiliary verbs, pronouns)?
 - Content-specific vocabulary (nouns, verbs, adjectives, adverbs)?
 - Figurative terms?

Functional Language

- Can the child tell a story or retell a recent or past event?
- Does the child understand and use narrative discourse?
- Can the child ask questions to get his/her needs met?
- Can the child follow simple commands/directions?
- Can the child answer basic questions of who, what, where?

Academic Language

- Does the child understand language with embedded concepts?
- Does the child understand the language of directions (describe, explain, compare)?
- Can the child follow multiple-step directions?

Speech Reception or Production

Reception

- Does the child have phonemic/phonological awareness?
- Does the child have the ability to process individual sounds?

Production/Articulation

- Does the child use speech that is intelligible to an unfamiliar listener?
- Does the child use appropriate prosodic features in:
 - Inflection?
 - Rate?
 - Pitch?
 - Fluency/rhythm?
 - Volume?
- Does the child have oral-motor problems?
- Is the child's sound (quality, quantity) production age-appropriate?
- Does the child have clear speech?
- Does the child have difficulty pronouncing particular sounds?

Adaptive Skills

- What is the child's ability to dress, feed, and bathe? Are these skills age-appropriate?
- What is the child's participation level in and use of community resources?
- What is the child's ability to initiate and complete familiar tasks at home and at school?
- What is the child's ability to participate in recreation/leisure activities?

Does the child meet the developmental milestones for his/her particular age?

Section 4:FREQUENTLY ASKED QUESTIONS

1. What is Intelligence?

Intelligence refers to a general mental capability. It involves the ability to reason, plan, solve problems, think abstractly, comprehend complex ideas, learn quickly, and learn from experience. Although not perfect, intelligence is represented by Intelligent Quotient (IQ) scores obtained from standardized tests given by a trained professional. (AAMR). www.aamr.org

2. What is Adaptive Behavior?

Adaptive behavior is the collection of conceptual, social, and practical skills that people have learned so they can function in their everyday lives. Significant limitations in adaptive behavior impact a person's daily life and affect the ability to respond to a particular situation or to the environment. Limitations in adaptive behavior can be determined by using standardized tests that are normed on the general population including people with disabilities and people without disabilities. Examples of specific Adaptive Behavior skills include:

- Conceptual skills: receptive and expressive language, reading and writing, money concepts, self-directions.
- Social skills: interpersonal, responsibility, self-esteem, gullibility (likelihood of being tricked or manipulated), naiveté, follows rules, obeys laws, avoids victimization.
- Practical skills: personal activities of daily living such as eating, dressing, mobility, and toileting, instrumental activities of daily living such as preparing meals, taking medication, using the telephone, managing money, using transportation, and doing housekeeping activities; occupational skills, maintaining a safe environment. (AAMR) www.aarm.org

3. Is a medical diagnosis required in order for a child to be verified as a child with a developmental delay?

No, not usually. If the child is born with a condition that has a high probability to result in developmental delays, i.e. Down Syndrome, a physician's report regarding that condition will be required as a part of the Multidisciplinary

Evaluation Team (MDT) process. In addition, if the child does not have a known medical condition but is experiencing developmental delays, the MDT may request any relevant medical information from the child's physician with the parent's written permission.

4. If the child has not made progress by age nine, can the MDT continue to use the verification of developmental delay?

No. Both federal and state laws state that the verification of developmental delay can only be used through age eight years. Therefore, before the child reaches age nine years, the IEP team should review the IEP and determine if there continue continues to be areas of concern. If so, with the parent's written permission, the IEP Team/MDT should begin the re-evaluation process to determine if the child meets the guidelines for verification with another disability

Section 5: REFERENCES AND RESOURCES

WEBSITES

Clearinghouse on Disability Information Office of Special Education and Rehabilitation Services (OSERS) www.ed.gov/about/offices/list/osers/index.html

Council of Exceptional Children (CEC) www.cec.sped.org

Education Resources Information Center (ERIC) <https://eric.ed.gov/>

Exceptional Parent www.eparent.com

National Dissemination Center for Children with Disabilities (NICHCY) <https://www.parentcenterhub.org/>

National Rehabilitation Information Center (NARIC) www.NARIC.com

The Arc of the United States <http://www.thearc.org>