ROUGHLY EDITED FILE

2018 EARLY HEARING DETECTION &

INTERVENTION MEETING

DENVER, COLORADO

SUNDAY, MARCH 18, 2018

GRANITE A‑C ‑ 11:30 A.M.

VISUAL COMMUNICATIONS AND SIGN LANGUAGE CHECKLIST, ONLINE VERSION (VCSL:O) TRAINING

REMOTE CART PROVIDED BY:

ALTERNATIVE COMMUNICATION SERVICES, LLC

www.CaptionFamily.com

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

This text is being provided in a rough draft format. Remote Communication Access Realtime Translation (CART) is provided in order to facilitate communication accessibility and may not be a totally verbatim record of the proceedings:

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

>>: Good afternoon. I'm going to use the microphone.

My name is Jennifer Hills. I'm the room monitor. If you have questions or problems, you can come and talk to me and I will find somebody that knows what to do.

I ‑‑ welcome to the Visual Communication and Sign Language Checklist. We have Beth Hamilton and Diane Clark and they will introducing themselves and thank you for coming. Beth Hamilton and Diane Clark.

>>: I am Beth Hamilton and deaf and hard of hearing consultant. I also do counseling and language assessment. I provide support for families and schools as a counselor. That's who I am.

>>: And I am Diane Clark. I'm the chair of the deaf studies, deaf education program at Lamar University in Texas. Before that I worked at Gallaudet for 13 years, and it was during that time that me and two others created the VCSL checklist.

First of all, I would like to ask if anyone here has already used the VCSL checklist? Okay.

I'm seeing a few hands.

Because of that, I think we will start from the very beginning, and give you an explanation of why the VCSL checklist was created, what the purpose of it is, and then from there, we will move on to what we're looking for with deaf and hard of hearing children when it comes to language.

We will get more into that as our presentation goes. The two of us work together frequently. I know her well. I think that we will be good today with this presentation.

If you have any questions, our preference is that you ask us. I don't want you to sit there and nod along during the presentation, not knowing what we're talking about. So if we are not clear, if we miss something, please stop us and we can give you a better explanation.

I would rather you have a full understanding of our presentation.

>>: And we want you to have the direct information from us who are the people who understand the norms and understand the checklists and its goals. So ready for the fun part. I think it's going to be fun.

Just who is a native ASL user here in the room? Does everybody here in the room know American Sign Language. Does anybody? Okay.

So here is our agenda for today. We're going to talk about what language is, introduce the VCSL and give you the background and how it was developed and also how the scoring is done, who administers the checklist. There are criterion that have to be made in order to keep up the standardization for norms and how we use the information for language planning.

These are the three establishers of the checklist. The checklist was published in 2013 and then disseminated for use in 2016 ‑‑ the paper version was disseminated in 2013 and online was disseminated for the first time in 2016.

We were finding that the online version is easier to use, and ‑‑ but people need training on how to move from a paper version to an online version. So the founders or creators are Dr. Simms, Dr. Baker and then we have Dr. Clark here with us today.

So let's talk about what language is. I'm sure all of you here have a foundation of the meaning of language, but basically we'll talk about the structure of language.

We have the pragmatic, semantics, syntax, morphology and either sound based or vision based. So if you look at the sign for drink, there's a specific hand shape, a location and movement in order for that sign to be considered that sign, and if it is not produced in the correct way with the parameters, then it doesn't necessarily meet the requirements for language.

>>: So you're sitting down, and I want you to know the difference between the two signs for phonology and you can't answer. When is she signing phonology by the ear and phonology on the palm. Anyone know why?

>>: I think ‑‑ hold on.

>>: I can copy sign for you. Whatever you feel comfortable doing.

>>: I think why phonology is positioned on the head is because English is sound‑based. Phonology is a new sign for me on the hand, and, of course, that's designating sign language.

>>: You're correct. So phonology signed by the ear. Can you give me an example of what that would be?

Yes.

>>: Cat would be morphology, the k, the initial signed, the K, now give me an example of phonology on the hand?

Yes? Again me.

>>: A hand shape.

>>: Show me one?

>>: Like the number 9 or the left F.

>>: Okay. We will be talking about that, hand shape.

Babies love things that are simple. They love simple hand shapes. A 5, a 1, a U. They like knows simple hand ‑‑ shows simple hand shapes. Those are the basic hand shapes and those are the hand shapes that are developed first.

Now, as Beth was talking about drink earlier, the C hand shape is part of that. But, for example, it could be mom signed on the chin. The hand shape is often right. The location is right. But the orientation is wrong.

But that's natural in any language as a child is acquiring language. So that happens.

So I want you to make sure that you understand phonology and morphology, so phonology is the smallest unit. Morphology is the smallest unit with meaning.

So cat is one morpheme. If you were to come to my house, there are lots of cats. I have nine cats. So that would be two morphemes. Not one cat but because I have multiple cats. I have lots of cats. That would be two morphemes and that's important to know.

All these things are really important for language, no matter whether it's sign language or spoken language. So what I really started to emphasize is that ‑‑ and I'm kind of bad. All right?

I don't like the word "paradigm."

is that right? No. That's not right.

It's hand shape location ‑‑ that's the one that I don't like. Parameters. Because that makes sign language different from spoken language, right? But they're essential the same and that's phonology.

So if you don't understand that it's phonology, it's easy for sign language to look different than spoken language, and I really try to emphasize these five parts of language. That's basically what all language is incorporate. If you don't have all five, it's not a language. So that's really important.

>>: All foreign languages have ‑‑ also have each of these characteristics. If they don't have them, it's not a language, period. So ASL has each of these five, and so therefore it is a language.

>>: I'm from Italy, and my L1 is Italian. And I understand the culture and the concept in both languages. So, yeah, opinion.

And she is right. The phonemes will be different, the morphemes will be different, but both languages will have both of those.

And if that's ‑‑ that's really important. I've noticed when I've been working with the Ontario province, they just released their language plan policy I believe is what it's called. Yeah, in Canada. And they talk about spoken language, and then they have different words to describe. They should be the same. They should be exactly the same.

>>: Because both are equivalent languages.

>>: Exactly. And it's not communication. I don't use the word communication for ASL or Italian sign language because it's language. Communication is attention getting. I'm trying to get someone's attention I need to know how to do that. That's communication. My cats understand communication.

>>: It's also important to know because we know there's various types of signed English like C signs and that kind of thing. Aren't language. Those are tools for communication access to English but it's not useful for actual language acquisition and this checklist can't be used for that.

>>: I briefly would like to expand on that. I've noticed that a lot of times in my trainings I don't stop and then later on people ask for clarification. So I like to stop and ask questions along the way to ensure everyone is understanding.

Again, if you have any questions, please, please stop us. Okay?

>>: Okay. You clear so far? I don't want anybody lost.

So these are unmarked SAT phone. 5BAO1 and C.

>>: In and out the word unmarked.

>>: Is there a comment?

>>: Are you going to be able to share this PowerPoint with us so we don't have to hurriedly take notes while you're presenting.

>>: Yeah, I'm using Google Drive just because it's so big, but I can share it.

>>: We have everybody's e‑mail if you registered so we can disseminate the PowerPoint to you via Google Drive so we'll make sure you all have access to it.

>>: You see the word unmarked and that essentially means that they're easy.

>>: So for example, you may ‑‑ we will be showing you a video that will go more into detail on this. But these are the easy hand shapes. They are unmarked.

>>: And they're recognizable fairly easily.

>>: Everyone clear on that?

>>: So marked ASL phonemes are the once a little more challenge to pick out. FR8, 6 and 7.

>>: And interestingly earlier you gave me the hand shape for F. When you look at F, where are the joints? They're small, and they're all ‑‑ when you use the 5, for example, you're not incorporating the smaller joints. You're only using those larger joints, the shoulder and the elbow.

On January 1st, I fell and I broke my left hand, and I'm a lefty. So when I sign B, that is definitely a marked hand shape because I can feel it. I can feel that B.

So we look at the different joints, the joints in the hands and the shoulder and the elbow, and because those smaller joints are used, those are harder to sign.

>>: And also for infants, when we see them using the hand shape, it might not necessarily be in the accurate position. So for acquisition and development of language, we want to look at where the babies are using the sign. Is it in the right position?

Can you think of an example of what might be a common error that you see babies between the ages of zero and 5 making? Yes.

>>: So instead of signing lion from front to the back of the head it goes from the back to the front of the head.

>>: Movements.

>>: And location.

>>: It's usually the sign is there but the movement may be different.

>>: And the hand shape could be different. Kids like I'm trying to think of one sign. Like for mother instead of the whole hand, the hand shape might be different. And so the fingers spread or the fingers could be together and more in line that way.

>>: Right. Definitely. She is right.

That's a hand shape error. Instead of using the 5, they use the 1.

But the location is correct. The orientation is correct. So 1 out of 3 are incorrect and that's normal. Instead of maybe signing more, they'll just use the index finger and have those touch. So don't be surprised by that.

>>: My daughter is three, but for some reason, three and seven, this is her for having the ring finger down and all the other fingers up. The concept is right. The four numbers are there. But ‑‑

>>: We'll you show that video.

>>: So this is Adam Stone. His work is amazing. He works for the BL2.

So he's talking a little bit about that.

>>: So the concepts discuss the use of hand shapes, parallels the experience of nondeaf children as they acquire language.

So the languages are equivalent in how children acquire them.

Thank you, Diane.

Any questions about the video?

>>: I do have a question.

>>: At what age do you start correcting kids if they make mistakes grammatical or ‑‑

>>: We don't. That's where the language model comes in. We don't correct them. We can model the language correctly. Let's say they're signing mom on the temple instead on the chin, we will just model that. We found that if you do correct the children, they depend on you from there on out. So we don't not correct them. We just model to reflect the correct signs. And if you try to correct them, they won't understand. So let's talk about spoken language.

Children often learn the sign or the word "went." It's past tense. And mom is so proud of their child for learning went. And then kids will say we go'd. No, you say, no, we went. They will say right. No. We go'd. They just can't here it and the same thing happens with sign language. You just leave it as it is. It will eventually be corrected. It's a natural part of language acquisition.

>>: We call it over regularization, and that's normally in language acquisition. They eventually start to understand grammar, and they're building that grammar in their heads and sometimes they have it wrong. So then later, they'll say was I wrong? Yes, I was wrong. It is not go' d it's went and they will eventually correct themselves.

Also because language is a critical part of the brain, so when you're correcting a child it could actually harm their self‑esteem, their confidence in playing and understanding the language. So let the kids be kids. Let them learn as they go.

>>: So we want to talk about the difference between language acquisition and language learning. So for language learning we look more at drilling a child. It's not really giving them the foundations of language and letting them naturally acquire the language.

So for language acquisition, you want to ‑‑ kids to have a natural environment where they're seeing and being involved with the use of language in their daily activities. Language learning is more of drilling them like you want water, that's water. Sign water. It's water. Yay, you did it. That's more of a drill instead of just naturally allowing them to be exposed to and acquire the language around them.

Does that make sense?

Any questions?

So it's really important to know the difference between language acquisition and language learning because it applies to the use of the checklist. So again, some activities that encourage language acquisition would be converse and during meal, storytelling, interacting with peers, informal chatting. What are some other things you might see as natural language use?

That would allow for natural language acquisition.

>>: How many of you have children. Okay. Remember when the broom became the horse and the kids would ride the broom around the house, pretending that it was a horse? And you think you're trying to be a good mom or dad. So you say okay. We gotta go now we gotta go see the horsy in the barn. They will so no. That's not a horse that's a broom. Whatever works for you that's fine, but that's language acquisition. It's natural. It's not forced.

What happens is we want deaf and hard of hearing children to acquire language so badly that we do try to drill that into them. We try to help the parents recognize when a word is said or a word is signed and celebrate that, but we teach parents how to play. That's really better. And it doesn't matter what they're playing with because remember they're playing with a broom. It doesn't matter what they're using. They will find something. They'll find something to use, and when we go into the home and we get ready to play, and we model what we're doing, kids will just naturally pick that up.

>>: Yes. So natural acquisition, just like a child who can hear experiences in their every day.

>>: I'm going to hold on to that comment and we will get back to it later. I think that's one barrier for so many hearing parents, practicing that sign language so we'll hold on to that and we will get to it later.

>>: So American Sign Language for the child to acquire should be natural, not forced. The right language model is the key for language acquisition. So language learning is when we are correcting the child saying you're using the wrong hand shape, you're not signing the right position. That's not how you do it. Maybe they use a D on their hip to sign dog and we say no. That's not the right hand shape. The point is if you know what they're talking about and they're approximating language on their own, that's great because they're trying. And then you might repeat it and model it back to them, oh, dog, yeah, I love the dog too and they'll see how you're signing it and eventually they'll get there.

So for the language learning, again it's just focusing on hand shapes only or clarifiers only or vocabulary specific discussions instead of natural use of the language. Any question on that? Yes.

>>: Yeah. It was a question of mine. I didn't know if I was supposed to correct children or not, but you're saying that that's language learning and that's more about forcing a child to acquire that language. Let's say they sign mom incorrectly on the chin and then I model the correct sign, is that language acquisition or would that be language learning?

>>: That's a good question. Whenever you're giving them a negative response, it's always important to just give them that positive interaction. And if you do, that is language acquisition. If you are forcing them to do it correctly that would be language learning.

>>: I'm going to be a bit of a devil's advocate here. Not regarding language learning or acquisition, but if they're signing ‑‑ a child just over and over and over signs mom with an index finger to the chin instead of the 5 hand shape, I might seize that moment as a teaching moment and say ‑‑ and explain the real sign for mother is this, and explain why and so forth. Is that wrong at 3 or 4 years old?

>>: What if they're not ready.

>>: But they should be by that time. We should be at some point ‑‑ do we just leave it or can we interject a correction?

>>: And I'm her dissertation chair right now, so ... you were explaining that some of your children will do the ABCs incorrectly and if you correct them they're not going to be doing it correctly. The 5, right? I recommend you that just leave it as it is. And if there are ‑‑ there are two letters that they were struggle with, right. They're signing J incorrectly in the wrong direction, you can correct them, but they're not going to see it. So just leave it as it is. That's what I recommend.

One thing that I've learned that parents who have children who are typically hearing, a child might not be able to pronounce a certain word correctly for a long time because they're articulators in their mouth haven't fully developed for them to be able to produce that word so that's an issue where we see kids going to speech therapy. There are specific therapies for them if they get past the point where the they need help but we're looking at the development of language and whether or not the child's articulators are even ready to make that sign or produce that word.

So that's what we're here for to learn about the VCSL today.

This was a collaborative efforts with the various universities and institutions up here on the screen. We thought it would be important for you to know the contributors in the development of the VCSL. So we don't like the word normal but we're using it in the context to say a normal language checklist. There are scads of them out there focusing on listening and spoken language that don't work for ASL focused children so VCSL is the first norms checklist for American Sign Language.

>>: So we're going to give a little of the background about the checklist so you can understand how it came to be.

There are different assessments that were used in separate locations that were then brought together to collaborate and build this one checklist. So if you can see here on the slide, the bullet points are the different language checklists that were then incorporated into one and have become the VCSL.

So it was a four‑year process. Dr. Simms is a deaf woman who piloted the VCSL for two years. The article was published after the pilot. If you haven't read it, I think we'll attach that when we send out the PowerPoint for today.

It includes natural ASL use. It received feedback, a literature review was done. Again, more feedback collected from linquists and psycholinguist so it could be considered a norms and scientifically‑based checklist. It was piloted at the Kendall demonstration elementary school. We made sure all the bases were covered before it was disseminated out for public use.

So the first version came in manual form with a description of how to conduct the assessment, and we will talk about how it actually performed. And we'll also talk about the norms table and how it was normed.

Data collection was key. Once information was collected from children, it was then sent for data analysis. So that was the older version of the VCSL.

It is a very user‑friendly checklist for both teachers and parents. It's a great collaborative checklist for both teachers and parents to use together. And it is normed for birth to 5, not for any age above that age group.

If we see that a child is severely language delayed, maybe at the age of 6 they're not at their age, the VCSL can't be used to access their language in a normed capacity, but it can be used as a guide.

The reason being the norm from zero to 5 is based on the brain plasticity at that time for language acquisition which is different after the age of 5, but it can be used as a guideline.

Every child is different. This allows teachers to match language planning based on what the findings are from the checklist to look at the child as a whole. Any questions on that?

The manual has a format approach that can look at different age categories as listed on the screen. Yes.

>>: So is the checklist done based on months? How often do you work on the checklist. Do you do this with the child monthly.

>>: Are you saying for ‑‑ for appropriate language acquisition it should be every six months, but oftentimes it's every other six month because the child is acquiring language so quickly.

It's not done month by month. It's set up for a yearly analysis, and again, this is a checklist. It's not a formal assessment. It's more of an evaluation, and this is for someone who knows the child, someone who sees the child on a daily basis, and remember, sometimes the child is right, and sometimes it’s wrong and we know that and we'll talk more about that in our presentation.

So, yes, from birth to two, I would prefer that the assessment is done every three months because language acquisition happens so quickly. By three, if the child has a language delay, I want to know and I want to develop a plan. So by the time they're five, they're ready for kindergarten. That's my ultimate goal.

I would say initially, every three months, but if the preschool teacher has a paper copy of the checklist, when they see it, it's just a good reminder for themselves to look back later and realize that the child has mastered that skill, they're producing it often, and if a teacher sees it once or twice, not regularly, but just a couple of times, they can document when that happens. You can use it for yourself. And keep it as a records for yourself so later when you do the formal assessment, that will help you along the way.

So the IDEA law requires that this be done twice a year, every six months. Most people don't do that. They might do it yearly or when they think it's necessary.

But like Diane just said, it's important to do it more often between the ages zero and three. And a lot of people don't even realize that there are legal mandates for how often it should be conducted. Sometimes I do outside assessments as a second opinion so that parents can have more information to fight for the needs of their child and have some supporting data for their case.

So it's not necessarily just used by one entity. People call on others outside experts to do second opinions as well. So if you know the child well, and you know that they need language support, that's basically the point of figuring out what the child needs to get to the place they should be.

So it's important for the use of VCSL. It's a first visual checklist with norms. Standardized assessment used along with other measurements for language growth. It can be a tool used for developing the IFSP or IEP. So if the parent wants ASL instruction for their child and their child is in a mainstream program, they can use the checklist information and have it in the IFSP or IEP to the child gets what they need.

So if the child is before school age, they can ask for a deaf mentor in the home.

>>: So we can also use it to develop age appropriate ‑‑ are we okay? Okay.

So if the parent warrants to know if their child is functioning age appropriately or maybe beyond their age or delayed, again this information can justify anything that the child needs.

>>: So sometimes people use this information to move a child forward or hold them back if their language isn't ready for kindergarten.

>>: So it can assist parents and teachers when planning a language‑rich environment.

It shows the zone of proximal development for child's language learning.

Also it can determine what can be a factor in the child's language development.

>>: Okay. Now, you'll see the stats start to come into play and that means it's my turn.

Notice that we use the word typical, and we use the word ‑‑ we're not using the word "normal."

This must have informed consent from parents. Of course, we cannot do an analysis on a child without parental consent. And we have that information in ASL and in English. We have the DVD and the manual and you can show that to the parents. So we have that available in both ASL and English.

We have this available now online, and I will talk about that a bit later, and we'll move to the statistics now, and that will ‑‑ we'll also have an activity for you.

But it's important for you to understand what's happening inside and how we're using the statistics. We have a ‑‑ we lost our CART. I think I killed CART.

Thank you.

We have every item available online with an example of the natural sign for deaf kids at the appropriate age, which is really nice to have, and I'll show you some of that.

Moving on to who was involved with this, we had 23 schools, 35 teachers, most of the teachers were at residential schools because they volunteered, and they have access to that pool, and they typically have deaf children would have deaf parents and use sign language.

We had some who were outside of residential schools but most of the students were in residential schools.

The teachers were highly experienced with instruction of young, deaf children. They've been worked in the field for many years.

66 percent self‑rated their signing skills as native or almost native, so they were in that top tier of teachers. And most of the teachers were teaching using a bilingual philosophy and 90 percent of them had master's degrees. We had a strong group of teachers who had a strong understanding of language acquisition.

Most of the parents had gone to college. 71 percent were mothers. 61 percent ‑‑ sorry. 61 percent of the fathers had gone to college. The rule, however, was that there must be a deaf parent in the home. You couldn't have two parents who are hearing and sign. Because if you have two parents who are hearing, at some point they're going to be talking in English. If you have one hearing parent and one deaf parent, they have to use sign language to communicate.

We wanted to avoid families who, for example, may have been parents who were CODA who used sign language but could also communicate using English, spoken English. So the rule was that at least one of the parents in the home had to be deaf.

The deaf children were all native signers. Most used ASL in the home. Most went to bilingual schools. We had 84 children participating, and most of them were white. There was not a lot of diversity in our group.

Most native ASL using families are white. We're finding that there is more diversity, and interestingly a lot of that diversity that we're finding is in Texas. So we're hoping to incorporate more diversity in the next group.

The schools that we were using were mostly in the northeast originally. Now, I'm really happy to tell you that we originally wanted 500 deaf children with deaf parents, and we just couldn't find them. To find 100 babies from birth to one, was difficult. Luckily, the data is very consistent. There's not a lot of variability in the data, which is amazing that the data is consistent.

And that's why we divided them by years, starting with six months, and the data like I said is very consistent.

Now, we're moving on to the statistics. Are you ready?

We talked about quartiles, so, of course, when you're working with quartiles, you have four. We divide the information up into four different categories. The lowest, second lowest, next highest and the highest.

And that's how we developed the norms that we use. To show you what this looks like, we have four choices. You assess the child's language and you look at the item. An item could be paying attention to a new sign. And an option is not yet emerging, emerging, something that you see every once in a while, moving on to something that you see, but it's not consistent. Sometimes you see it, sometimes you don't. You're not sure if they're acquiring that skill. There may be some regression. And the fourth category is mastered.

You evaluate the child at those four different levels to see where they're skills are at. And that's how the VCSL was created. We focused on the 25 percent groups. You can see the 50 percent there in the middle. Then 75 and the last one, 100,per not going to be talking about.

Now Sharon Baker made this visual for you in order for you to understand my statistics. Young of a visual, but ‑‑ I couldn't think of a visual but Sharon Baker said she wasn't understanding it and she thought she could find something that would help out.

>>: Just asking a question how often you're going to be doing the assessment. If you're seeing the child is exploding in their acquisition, then you'll know what areas you don't need to focus on versus those that need a little bit more support. So this is how often you should do it.

>>: So she found 100 of these stars for you. Okay.

Moving on to the 25. You can see the 25 there in red. And that means about a quarterly of the children are able to do this thing. Not bad. It's a quarter.

>>: Moving on to 50 percent, which would be one half. One half of these children can do this at that age.

That's supposed to be yellow but it's coming up green. Sorry.

So 75 percent of the children are able to do this thing. So you have that range. And you know that not all children develop at the same rate. Some develop earlier while others develop later, and it's normal to have that range. And as long as they're in that range, you're fine.

Yes.

>>: What if a child falls into a category or starts that skill and then doesn't master it until later. It's still counted but if they don't progress to the next level along with their peers, you might know that then is where something is happening. So it's nice to have these ‑‑ this checklist and those counts at foundational level.

>>: Any questions? Okay. I'm going to move on.

So now we're going to talk about what to do with the checklist. This is what it looks like. This is the paper version. And you can see that it has different items, and there are those four categories.

And you can see this first group up here is birth to 12 months. Next is 1 to 2. So it's categorized by year and then you have again those four different parameters.

Now, if you want to do this by hand, you have to identify two things: The basal which would be the bottom score, and the ceiling score. To see where that stops. We want to know if their language acquisition is age appropriate, and that's essentially what we're looking for with this.

So my child is two. We're not starting at birth. I started at two. Not at birth. Not at one. But two. Okay?

Now, I need to see that my child has 10 items mastered with no pause. You have to be able to check 10 of those items in order to be mastered.

The 10th item is the basal. And remember, we're starting at age 2 with this child. So you may be wondering how do we know if those skills from birth and one have been mastered? And psychologists have concluded that if you have that basal score, they can do everything that they should have done before that.

Now, because I understand language acquisition for deaf and hard of hearing children, I will have those 10. However, most will only go with three or five or six. We go with 10 in order to be sure that our assumptions are correct. So there's a little bit more that's required, and we think that sometimes kids just don't have that full exposure to everything. That is the basal score, and our assumption is that everything before that the child can do.

Now, moving on to the ceiling. How do we find the ceiling score for the child? You will see some things that are not consistent, some that are emerging, and it may be all over the chart. You keep working with that child until you have 10 of those that are not mastered. So the first of the not‑yet mastered would be the ceiling. Now, I'm going to show you a visual to go along with this that will help you understand.

So this is Emma, my child. She is seven months old. Where do I start?

>>: How do you start the assessment with a seven month old.

>>: Do you start at six months? No. Birth. That's correct.

Remember these are all chunked by year. So you would start at birth, and you start with that first item. I think there are more than 10 there. I think Sharon Baker got a little overzealous but that's fine. Remember we're starting with a child who is seven months.

You can see down here, this is the first time that the child has a skill ‑‑ an item that's not mastered. They turn their head in response to something, but they don't always do that. Sometimes they do; and sometimes they ignore you. That would be the first item that is not mastered. That item before that that is mastered becomes the basal score. When you go in to tickle the child and they start to laugh, they see you, they know what's coming and because of that, they laugh, and that's the basal score. You can assume that everything prior to that has been mastered.

And everything before that, from birth to one, is emphasizing attention from the child. So we assume that Emma can do that.

You'll notice down toward the bottom, the scores are kind of all over the place going from mastered to not mastered. And then you can see here that it's a consistent "not yet" emerges for that child. The first not yet emerging becomes the ceiling. And that is fingers babble when talking to self. That's where it stops. But notice it's the one to two range. My child is only seven months old. That means the child is doing just fine. The child is progressing just fine.

I will create a report that looks like this. It will show the child's age. It will show the basal age. And that is based on the norms table that you'll see in the back. And it will show you that they're at 25 percent for six months, 50 for nine months, and 75 percent at 10 months. And that's what the norms show.

You can see the ceiling here. The child is a little bit above their age level with their language acquisition. My child is doing just fine. I have no reason for concern.

The child is developing. They're developing bonds with their family. She is engaged with the family. There's no problems here.

Okay. I'll tell you and I will show you online that everything is done automatically. So you don't have to do it by hand. We will provide you with all of that information, and that's going to be really nice for you.

Question?

>>: Is there a way that you can get a standardized score from these results? Because often times schools are looking for that, a standardized score.

>>: We do not convert it to a standardized score because it's a checklist. If you look at the Vineland scale of social maturity, that's where this comes into play. The checklist gives you that information. Remember, I said it's not an assessment. It's an evaluation.

So because we're using norms, that shows that it's standardized, but I do not convert it to the standardized scores. I don't do it. You can convert it to percentages because it's telling you those percentages based on the quartiles. So that will give you percentages. But because I grew up as a psychologist, I hate to point out those scores. I'd rather show a range. I prefer to use a range. Most of the times we go based on IQ. We'll say your IQ is 115, but if you get tested again within what's the chance you'll get that exact same score of 115? There's almost no chance. There's almost no chance that that will happen twice. You might get 110 the second time. You might get 120. But you don't typically get that, and I prefer a range for that reason.

>>: Also we're looking at a child individually, not compared with others, and not all language acquisition is created equal. So we try ‑‑ we see parents trying to ‑‑

>>: So we don't want to look at a deaf child as being delayed when they're not in a sense delayed, so we want to give the parents a tool and a resource so that they can help the child acquire language the best they can. We don't want it to actually change the purpose by changing it to a standard score.

>>: And I can add on to that because all of the children in this normed group are native signers, we can assume that these are the norms. This is what should happen. So if we have a deaf child in a hearing family, maybe a signing/hearing family, they may not be fluent in ASL. They're acquiring that language. If they have a hearing family who knows some sign language but they're not signing fluently, there may be a delay because the child may not have enough exposure. I would recommend finding deaf adults to support the parents to provide them with that exposure that the family is trying to provide but can't. Or the family may be using spoken language. Maybe in school the kid is getting sign language exposure but it's not sufficient exposure to the language. And that's what we are trying to figure out is if the child is getting enough exposure. That's what this assessment evaluation will tell you.

>>: It's about language. So if the family decides to use sign language English we can do an assessment but we can say ‑‑ from the ASL point of view, this is what the child is missing. But it's not ‑‑ we can't assess the language of a child who's using something other than American Sign Language with this checklist.

>>: If we have enough time at the end today, I will open up a bit about myself, and I can talk about Signed Exact English and other assessments.

>>: And you need to be real careful with that, Diane.

>>: But I don't want to do that now because that's not what this is about. Okay. Yes. Signed Exact English.

>>: My question is now for students who are deaf and hard of hearing with disabilities and we're aware that they're cognitively delayed. Would we kind of assess them at their age level and then work our way backwards to work them closer to getting closer to where they should be at age wise. Is that how it would work?

>>: And that's what we're going to get into a little later.

>>: I'll bring that in right now. For example, you may have a child who is deaf with Down syndrome. So they have an additional disability, and we're aware of that. Maybe at the age of four so we're going to pretend the child is four. And you're going to take the assessment back and back and way back, and you might go back to birth for that child. You won't have a basal for them because they're not going to have 10 mastered. And that has happened. It happens more than I can tell you actually. So if the child is six, now the norms are not going to apply with the use of this checklist. It can be used evaluatively to see strengths and weakness in language, but you won't be receiving a basal score and you won't find a ceiling score as well. That's for the normal.

But it can tell you where the child has language skills, and you can use that information then to build on strengths that they might be weak in to pull them up. But you won't be able to use the norms for any child outside of the zero to five range. But you can't do it online. The online version says ‑‑ will say the kids too old because you will type in the kid's age and it won't let you proceed. You can with the paper and pencil method, but unfortunately the online version doesn't know where to start. When you say six, the computer says, sorry you're out of range.

>>: And I look at the basal as the starting point. That's where you know that you can move on from. If the child has no basal score at all, you start from birth, and you know that that's where you need to start working to develop the language from there. And you know that in time, the child will make progress.

>>: So that was a perfect example.

So birth to one is all focused on developing intention skills. I'm a person who can hear, and I know that I grew up with my parents getting my attention by speaking. Right?

Parents who can hear, their norm is to speak to get their kids' attention. Hey, hey. Look at me.

But the kid might not be looking at them because they can't hear it. So it's heart to break the habit if that's your norm as a person who grew up in a family who spoke. So when you have deaf children, you don't know how to get the child's attention, because they're using a different type of attention‑getting strategy as a deaf child.

Deaf people have very, very natural attention getting strategies, but they violate the hearing ‑‑ "hearing norms" that we use.

So hearing people are like, what you doing? Why are you doing that? Why are you stomping your feet? Why are you tapping somebody on the shoulder? It just goes against the personal space norms that we have in society. So people who are hearing who have deaf kids don't know how to use the strategies that are used by deaf adults with their deaf children.

>>: And that becomes a cultural issue. The child is not developing their culture.

>>: It's a definite cultural norm. Even the hand wave. Why are you waiving your hand like that. Sorry. I forgot I'm a hearing person. I'm waving at you and that's not what you do to get attention.

So if the child doesn't have attention, how are they going to be able to look at the language to acquire it? So if a child doesn't have appropriate attention strategies there was a teacher who developed a fabulous strategy using the Simon Says without sound. So they would have the kids copy the movements and the beats that the teacher was doing to develop the attention.

>>: And attention is the most critical skill for all deaf and hard of hearing children to develop because they're relying on their eyes. So from the time they're born, if they don't develop that skill, it will have a huge impact on them in the classroom once they get to kindergarten, and if they don't have those attention skills, you have to go back to the beginning to teach them those skills. So it's just critical that these children have the attention skills and the eye contact skills. It's something that children really need from birth.

>>: Precisely. And a typically time for attention development is by six months. It's a really early skill.

>>: And that's what language acquisition is. It's the first stage of language acquisition. It opens up the brain to pay attention to what's happening so they can learn in their environment. If a parent is pointing to a book, they'll know to look at the book back and forth between the signer and whatever they're being shown. They know that that is communication and that will have a big impact on their education.

>>: And that's something that I think that we can help hearing parents understand fairly easily.

Because if you think about that, by the age of six months, hearing parents frequently still don't know what to do. They're going to physicians. They're trying to get early intervention and they don't know what they don't know. I've seen mothers frustrated and grabbing their children's face because they don't know. That's something we can provide them. So give them some strategies that will be helpful to them in the early days with their deaf baby at home.

We have a document for parents in place. So you can give it to them so that they have strategies and they know what to do. Because one thing that I can let you know as a developmental psychologist, and it's something that kills moms, is if the baby doesn't look at them. I've heard moms say, my baby hates me. I'm like no your baby just doesn't know what to do.

So if we help them understand ‑‑ the babies ‑‑ how to pay attention, a baby's brain wants to look for stimulation. Right? It's seeking that sort of thing.

>>: And the brain kind of gives up at seven months when the brain realizes that there's nothing to look for and we definitely don't want that to happen.

>>: We can share that document with you. It's easy to have available that you can give to parents that might ease some of their concerns and some worries. There are things that are easy enough for them that it's not going to be attaching but it will get them the support they need and kind of reduce some of their initial anxieties. We have a lot of parents who are deaf who may not be educated because they come from families who are hearing and now that they have a deaf child, they don't realize what supports and tools they need in place. So even deaf parents with deaf children need this kind of support and most deaf people have parents who are hearing.

>>: And they are trying to break from that system and give their child what they need so the child does not suffer.

>>: This early language acquisition period is very important. You who have children, you know, that in the birth to six months, they start to babble, either in sign or speaking. All babies do that. They do both. They play with their voice and articulators, they play with their hands and articulators. So you'll find that hearing babies babble more with their voice, less with their hand and vice versa for deaf children but they're just practicing.

>>: And babbling is not intended to make sense.

>>: Exactly. Are you from Japan? Yes.

So hearing babies can babble in Japanese. They can and they will and they do. But that stops around the age of ten to 11 months. Because at six months to ten or 11 months is the practice phase of what's happening around them. Many the incidental learning phase, what they see, what they hear, they are practicing that. So that's a critical time, the 10 to 11‑month face because it's a perceptual window. Around 11 months that perceptual window shuts, which is a little scare if you think about it. The brain has switched to a different type of process by that age.

We're going to talking about those different brain processes later. So how the processes work vary depending on age. One of my peers had an F, MRI study done, and she showed me two images of her brain. And she said, which of those images are deaf. I'm like, I don't know! She said, this is the deaf person who had early access to sign language. But you can't tell the difference. So she showed me two more. I'm like oh, that one is because that brain was firing like crazy because it was working. But not in the language area. It was more diffuse in the brain.

We want to try to help parents get attention set up with their child, babbling established with their child so we can have statistical regularity. You know I hear ba, ba, ba, and that's great. I see 5, 5, 5, that hand shape again and again. Okay. So I'll pick that out and I'll say that's important. I'm going to save that one.

So we want to expose the younger babies to as much language as possible in their environment.

It's really important. If we don't, we can't support them ‑‑ I mean we can support them later it's doable but it's not as easy for the child to acquire language. I'm not saying give up if you past that age range. Don't give up. Because the brain is highly plastic, so it is flexible. It will find a way. It will. But it might not be the most effective way.

>>: And by using this checklist, we can look at what deaf child ‑‑ deaf children are acquiring and what hearing children are acquiring and look at the equivalence between the two. And you can see where you need to make those adjustments along the way, and the child may have a delay for the rest of their life.

>>: So our goal is for adjustments to be able to be made. So if you notice some gaps in the development of language learning ‑‑ right? "So once you've noticed the gaps for typical milestones, if we have a family who wants to learn sign language, it requires time to become fluent in another language. My students told me that I was an excellent teacher, but then I went to Gallaudet and my students said I was horrible. I was really bad because it requires a long time for me to be able to change my language, change my strategies. So we need to be flexible with what works and what doesn't work.

>>: Currently in Canada ‑‑ really we're facing a very interesting time period. I'm going to pick on Heidi for a second. Heidi's been teaching American Sign Language online, poor girl, very, very brave soul. So now parents have access to learning sign language online. It's hard to find that kind of access. Many parents say, I can't stop work and go to sign class on Monday, Wednesday, Friday but if we were to offer it online, they might be able to do it on their own time. So it's a new curriculum that's being developed I think that will help parents have more access to language learning. The curriculum is being developed in Canada and working with parents to hopefully that they can stay a little bit ahead of their child's language acquisition.

And with that we can develop a family language plan. So if you want to learn more sign, here's some online tools. Here are some community events. Here are some deaf events. Here are deaf mentors. Here are some entrèes into the Deaf community. Whatever the family wants or needs. What's important for their family in their language development. We want to make sure we're providing them all the opportunities that we can.

>>: Have you already talked about the ZPD. If you work at the basal starting point and you find that ceiling for the child, you look to see where their basal age is and you work from those skills up.

But if there is some spotty development as we saw earlier ‑‑

>>: So for example, if we look at Emma and her checklist, she's not recognizing her name yet or her family members' names, the signs for them.

So we can say, Emma, maybe her sign name Is an E on the chin. Emma, Emma, Emma using that sign name. If you tickle her at the same time so she starts paying attention to that and she realizes that's something important in her world, later when she sees it, she will start turning and show attention. I'll give you a few examples of this later.

One of my favorite examples is a young boy who was in a chair. No one else was there. And then mom flashed the lights, and he turned and it was the most precious things because he had learned when the lights flash, that means I need to look for somebody. The lights flashed and he immediately looked. He knew that that was how someone was trying to get his attention.

So if you keep using the child's sign name, like for me DCDCDCDC that's my sign name is DC. If someone keeps using that over and over and over again, I'm finally going to realize that that's important and I'll pay attention to that. I might not know what it means initially and I'll later learn the meaning behind it, but we're focusing on where mastery has not yet been met. And just like Beth said ‑‑

>>: And the areas that need to be worked on will be incorporated in that family language plan. They'll know what they need to work on, and you can check in periodically. Those are the things you need to work on and that will guide you through. When it becomes time to do the evaluation again and you see they've mastered those skills, then you can move on to a different developmental area. Those are the ZPD's.

>>: So you are correct. Children need a lot of language. It should be all around them all the time.

It can be from other children, parents, teachers, deaf mentors, the Deaf community. It's not just language coming from the parents or from the family. So if you know my family is trying to learn sign and I know that I need to be more community, adult exposure is important. That can be placed in the family plan for language acquisition.

>>: And the family plan is the IFSP, the individual family service plan, and that's the zero to three, and so this information can be incorporated in that.

>>: So the information on the checklist can then be placed in the plan. So if you can get people to add this information to the plan, you'll get the support that you need for the family and the child. That's the most important part. And with the ADA, we have that support.

So we also have some of the frequently asked questions that we wanted to share with you to hopefully give you some more information.

>>: This is becoming more of a problem, assessing a child or evaluating a child's language. Assessing it through errors, the VCSL is more strict in just providing just an assessment or evaluation. You don't have to be fluent. That's what we're ‑‑ the adults will have to be fluent and whose doing the assessment will have to be fluent, but a child isn't yet.

>>: I took an online class where a student said that the checklist could be something that you used during class, and I didn't think so. Only if a child's first language was ASL. So if an interpreter ‑‑ could an interpreter or someone who has a ASL four plus or more do the assessment.

>>: More and more deaf schools are pulling in CDIs to do the assessment. It's not their role. They're just there for translational purposes. But they're playing CDI. Certified deaf interpreters. So they would work with the person doing the evaluation because the CDI's responsibility is just to do translation or interpretation, so that the person trained in doing the evaluation can then score it. But that kind of defeats a purpose. You want that natural language directly to the evaluator and the child. So it's designed to be a one‑on‑one evaluation. Like as a last resort, you might use an interpreter, but only as a last resort.

>>: So if there's no deaf person available to do this and they're trying to bring in somebody who can do that, who knows American Sign Language, I feel that ‑‑ I don't think an interpreter should do that because it's not their first language. It feels a little sticky.

>>: How many of you work with children from birth to five? Okay.

If you look online at Lamar University's Facebook page, we've posted a flyer for Laurene Simm's training. She is on the faculty at Gallaudet. You will have her secondary training this summer for a full week, and she will be teaching how to evaluate and access deaf children it requires knowledge of linguistics and you're working with kids, young deaf kids up to age five and limited ...

>>: We have discussed that Laurene's decided that's exactly what's happening is what you said. There's just limited availability, so they're pulling a warm body in, and if you really aren't aware of the facial linguistics and others, you will overlook quite a bit of what's being said, and maybe the child has more language than you think they have or less language than you think they really have. So Susan Baker, Laurene Simms and Sharon Baker, and I have been discussing about who should be providing VCSL services, and it's really sticky. It's not easy to give, and it's very tempting for just anybody to give it, but it requires training and practice, and for two years they said, look, look, this is what I found, and then it's not accurate. Oh, I did it wrong? Yeah, you did, and the child is four, and they started at four on the evaluation. So we discussed recently that we should be more careful and judicious about who is appropriate to train and who is appropriate to provide this checklist or administer it.

Many of them work with the parents, and then they talk about it. I think they have that. I think they've mastered this. What do you think? Or they'll sit with the teacher and fill it out with the teacher. I mean, it's fine because you have to know the child. You can't just go in for one hour a week and expect to have an effective evaluation. Because you don't know what the kid's really can do. So if we have time, I try to share other things that we can do, other strategies. For example, a deaf mentor, fabulous, but they're busy people. They're not with the child every day all day all night. So we're trying to develop other ways that we can use the VCSL with other people and we haven't done it completely yet, but it depends on who really knows the child.

>>: And also going back to interpreters, the interpreter doesn't know the child. Maybe if they used a slight facial expression that is very important in deaf communication that they miss, it is really not going to get to where the child's at. And the people who are actually giving the assessment should know better and should know who can perform the assessment.

>>: So you said that there's training this summer and that it's limited and that the training is for professionals to become skilled in using the tool. Are parents included in that? Or I have worked with parents and lots of them are very knowledgeable and very honest and realistic. There are some parents who are not knowledgeable or realistic and I'm just wondering if there's a different emphasis perhaps that training would take for parents if that's something done side‑by‑side with a trained evaluator or if there's a separate training for parents.

>>: Wonderful question. That's great.

I can't tell you yes or no either way. You have to ask Laurene. She is going to be very strict. Last year she eliminated a lot of people. Beth tried and she told her no.

>>: Well, I couldn't pay to get in. That's why she told me, no.

>>: Okay. Well, ... It's very interesting, but I think you're right. One of the things that I've been pondering recently is how to set up something like that for parents to provide the training for parents, and that's something I've just been thinking on a lot lately because we need more tools for parents. But the three of us are so busy that it's really tough to do it all. So ‑‑ and at Lamar, I'm trying to set up a group that will start to develop that kind of thing, and I want to develop it online for parents. And I don't think that's a typical high school or college curriculum for parents for learning ASL, but you need to have the Deaf culture included and how to get attention. Signs for mom and dad and the developmental signs. I think they need a different approach.

And tools to go along with that, and I'm hoping that we get some money so we can develop that a year from now. Fingers crossed, but ... I was going to ask Beth because I think you would be good at this, but we don't have the money yet. I think it's really important because parents, I mean this is just my opinion, but they need strategies. What do you think on that?

>>: I think it's a long conversation like you said. I think in using the Vineland myself or other tools, I have often had a parent report section where I've recorded what families have said and have reported what teachers have said, and in my observation because it's not normed ‑‑ I mean standardized, so there are lots of way to use a tool as long as it's understood that it's that range and it represents a variety of things. There aren't a whole lot of ‑‑ I think it's just a real challenge to address the needs of the young child, birth to twelve months and to hit all those milestones from one perspective. So, yeah, it's a long conversation.

>>: Yes, it is. But we're starting. And that's the good part.' we have a long road ahead of us but we have started and I think that's important.

We encourage you to think about who can provide this, who will be skilled enough? Who knows the child well enough to provide accurate ‑‑ an accurate evaluation. Just some things to consider. Somebody said what if I sent you a videotape of my child, can you do the evaluation? The answer is no. No. Because it's a snapshot. I need to know their everyday communication, their everyday use of language. I don't know ‑‑ I'm trying to develop a snapshot assessment but we haven't done that yet. We obviously need that, but ‑‑ but you can't get more with a snapshot than you can with somebody who knows.

>>: I encourage you to have a dialogue with somebody who might not be meeting the expectation of someone who should become and assessor to make sure they understand the goals of the checklist. They might then realize that they're not the right person to do the assessment. They can reach out to somebody. If we can be honest, we're talk deaf and hard of hearing children's futures and their lives.

>>: Well, for example, I would never assess a child. I'm a psychologist and the reason I'm here is I love these numbers and statistics. And then to put me in ‑‑ we need statisticians. We need that but I would never do the evaluation. I'm not the person for that. And I know it. I don't have the ‑‑ I'm not a native signer. I'm not even a native‑like signer. You know, I would miss a lot of what they're producing. And so I know I can't. But I'm lucky enough that I can probably help find someone. But I would never do that myself. Because I know I'm just not the right person.

Back here. They need a mic.

>>: I'm wondering what you think about the idea of two people doing the assessment: One person who is a native signer with a teacher of the deaf or somebody like a teacher of the deaf who understands the developmental milestones and is familiar with the IFSP.

>>: That's fine if they both know the child and that's the issue. You have to know the child. If you just put two people together, uh‑uh. Not gonna work.

Again, that would be just a snapshot, and that's really a problem.

>>: So from Texas in Austin, often we get a request from parents from all over the state asking for us to assess the child. I'm willing to do it as a person who has a second opinion. I might not know the child but I know where I can help.

If they're not giving ‑‑ getting the services they need because they are in a rural area or the child only gets 15 minutes of ASL instruction a week, the parents are feeling they need something more. Something's off. I'm able to give a second opinion assessment, and then I will assess the child at a later date and then at future dates where I then develop a relationship with the child and understanding the child's language use. My second opinion assessment then can help the parents advocate for their child in the IFSP or the IEP. Specifically if the child has delays.

If I wasn't confident in my ability to understand the language, I would definitely not be doing that kind of assessment, and I am against people doing it if they don't understand the child or don't understand the language well enough to do it.

>>: Right. It's important to know.

>>: You can kind of talked about something that I've been kind of wondering about, and that's when you see that delay in those kids using ASL and then going to that IEP meeting or whatever, and then making recommendations. In the state of South Dakota where I'm from, there's no requirement for ‑‑ you know, if you're behind in ASL. What kinds of things do you recommend? Are there other states that have resources or things to kind of help implement those things in schools where it's not a requirement. So it's kind of hard to get that implemented.

>>: So have you heard of Lead K it was just passed and signed by the government so the law should provide the child under lead K. For those states that don't have lead K, IDEA already requires that the child in a language development phase of their life, learning ASL, and that's how they access language, be supposed toed to American Sign Language. If they're not progressing they can be assessed through the checklist and then that information can be used via IDEA to make sure what this child needs and the supports the child knees are there. So that's when we're talking about the screening every three months and I'm hoping that can answer your question about the IDEA piece.

>>: It goes with both of my questions because oftentimes schools, they want that standardized score; that that's what's, you know, gold to them. So if you don't have that standardized score, then it's like, well, we don't have to follow that or we don't have to implement that. So that's the struggle I guess that we face in the schools in South Dakota.

>>: That's the beautiful part about Lead K is it dozen provide the data so you can have something to back you up. You can say look at all the kids with language delay. This is the picture we're finding. So hopefully you can use the information from Lead K.

Plus Lead K in almost all states use this, the VCSL. It's required by law. Ontario, it's required and it's the only evaluation that is permitted because it's the only one with norms. So I think you could feed that to your Lead K people as information. I can't say this is in all states, but you can contact me and Laurene. I'll talk more about that later but she is not earning money from this and we're not developing this and earning money, but we're getting the resources out there.

But we're not getting any money. But Laurene says, damn, we would be reach but that wasn't the goal for the development of this. Laurene is really on a mission. She wants it happening now, and it will happen, and she wants it happening yesterday. Don't get involved with Laurene unless you're willing to go gung ho with this because you're stuck. She is so motivated and passionate for deaf children and hates the language delays that are occurring.

>>: We got a warning for a break. So we can go on forever, but you do need to go to the bathroom, get a drink maybe, or whatever.

>>: Have a brain break maybe? So why don't we come back in ten minutes.

>>: Yep. Ten minutes.

>>: All right.

[Break]

>>: Are we ready. Is everybody ready to get back together?

We want to continue with the FAQs.

So that you have this information that's been disseminated. So we're talking about has the tool been used for total communication or sign exact language assessment. If it's an ASL checklist, can that be done?

What do you think the answer to that is? I say.

>>: I say no.

>>: You've got it. Why do you think not? Why do you think that this checklist can't be used to assessment someone who uses total communication or signed English?

>>: Based on the norms, how old that work with the norms? Too much variability.

>>: Also because ASL is a true language. Signed English or total communication is like you said a tool to access English, but it's not a language in and of itself. So the checklist is to access real language.

Already the grammar and structure are different.

>>: English and ASL have a different grammar so it's looking for different things.

>>: I have to tell you that every time I have this training, someone asks me this without fail, ever time.

I'm better now. In the beginning, I would say, I don't know. I don't know how. I don't know how to assess anything that's not a language. But I'm still wrestling with that question because ‑‑ especially in Texas ‑‑ well, it's required. So what's the impact of that on our children. We need something to evaluate that, but I haven't had the time to develop any kind of a tool or research design. We've discussed it, and Laurene ‑‑ first when three of us have dinner, it's kind of ironic but we have to meet over dinner.

We'll just keep a running record of all of our dinners and meetings. You know. So any assessment with children is done based on a running record so we use a running regard. You didn't have this. You didn't have that. Maybe that's the answer. I don't know. We haven't had time yet to develop this tool, and the VCSL is not geared for that. It's not designed for that.

>>: Also total communication and signed English isn't one language or the other. There's a Max to what you can do using those communication systems. We're looking at a language. If it's not a full language in and of itself, it can't be assessed through this. So our answer to the question is always, no, we can't.

>>: Okay. Go ahead.

>>: So another FAQ is how are children's literacy skills assessed via VCSL. So first and foremost, it's not about literacy. It's about ASL language acquisition. Language used for communication.

If you have a language assessment, it's going to lead to literacy. Language acquisition leads to language ‑‑ the use and application of language in writing and reading. However, is it better to have another ASL consultant access to reduce bias? It seems like that would be a great option, but sometimes it's impossible. It's good to have a team approach and be as creative as you possibly can. Remember those assessors must be fluent in ASL in order to be able to conduct the assessment a. Will children exposed late to ASL and whose parents do not sign follow the VCSL developmental sequence?

What we'll have is something called spotty acquisition. We won't have specific information about developmental sequences. We've already talked about the use of VCSL for children over the age of five. It can't be used as an assessment because it's been normed from zero to five.

The real issue is to be careful in the explanations. You know ‑‑ oh, using the basal score from birth at six years old. And that's really important to be careful in explaining that to parents. You need ‑‑ you need to know that your child has gaps in their language acquisition and we need to recommend that. We might need to back up a little bit, but we need to show them ‑‑ show them the basal score from at birth. They'll freak out. That's impossible. We have to remember, birth to one, just to set up all the language acquisition strategies. Attention getting, engagement, all those things that happen early on. I've had parents get angry at me. I can understand that their feelings are valid, but if their child is foundation and doesn't have language ‑‑ seven and doesn't have language they may feel the system has betrayed them so I let them know hope isn't lost. There will be emergency language supports. We can get them connected to people in the community and emphasize the importance of parent involvement and investing in their child and community involvement. So parents see this as this is where my child is, and we need to progress from there, but when there's a delay it's going to take some time for their child to get to the age milestone that they should be at.

So is it possible that some children will not have a ceiling age. Yes, an older child whose language acquisition is typical or advanced might not have a ceiling.

>>: If that happens and a child has so much language exposure, by the time they're five or when they're four and a half, but there's no ceiling for them, if they go on in the 8 year olds age level, they're beyond that. But beyond is good. Don't be concerned if they're ahead of their age level. Or if they're four and they have a ceiling. You know, kids can go beyond the screening, the parameters of the screening. And there's other ASL metrics that you can take advantage of that go beyond these age levels, but I would just support the parents in all that they've done and just say your kid's fine. Just keep doing what you're doing.

>>: Also give the parents ‑‑ while the child is doing good, encourage them to ‑‑ give them some tools and tips that they can provide more language to their child so they can develop literacy skills. Just because the child doesn't have a ceiling doesn't mean you don't need to keep working with them on language development and acquisition. We want them to continue to progress and make sure they're ready for school.

So another question. How do I use the VCSL scores for IFSPs or IEPs. What do you think?

>>: Do you think it's important to use the results? If so, how and why?

It helps establish the goals for the kids, educational goals.

>>: Right. So socially, emotional development, other types of development. So if the child is angry, being able to catch the nonmanual markers they're using and apply that to other goals as well.

>>: And norms, you talked about norms. To know that they're at age level and where to provide support. If there's a delay, why is there a delay. You have something in writing to show the parents and faculty.

>>: And it's a team effort with parents, teachers, all working together to protect the child.

>>: And another ‑‑ to that question, I told you that Laurene and another peer from Gallaudet, Bobby Joe Kite, so the two of them, Bobby Joe and Laurene are planning to provide that to people to help you design your ‑‑ according to your needs. Laurene and Bobby Joe are really worked hard on that right now. Laurene, Sharon Baker, and I are in November and working with some mentors and just like week ‑‑ oh, in Canada. They were saying they want this now, but we need the support and developing of this plan to see what the gaps are. What are the delays? And then design a plan, you know. Or maybe we just refer to an ASL consultant, and that's the answer. But we want more in depth analysis following VCSL, and so that we know that this child needs more assessment and more identifying what the delays are to develop a good plan.

>>: An interesting story that came up a couple of years ago. Had to do with a child who was really struggling with language development, and they used the VCSL and had been documenting on that child. At the age of 8, they found that the family refused to sign because the child was going to a School for the Deaf. The social worker then decided to file a child neglect complaint against the parents because the parents would refuse to sign with them, and the child was so delayed. The family received a deaf mentor and had to learn sign language, and so the VCSL was used, the documentation from that was used to show that the child wasn't receiving language access at home which was causing quite a severe delay. I mean that's a rare situation. I'm not encouraging that that happens all the time, that that be the strategy, but it's nice that if need be, you have the support to prove where the delays are. This is the contact information.

The first PowerPoint, you can also contact VCSL and if you don't hear anything, contact us. Sometimes there are gaps in information. And so any way you can contact us. And we'll provide you a more direct way to contact us and we can work on your behalf to get the answers that you need. Sometimes Gallaudet is very overwhelmed, so I can help you in that manner if you need it.

>>: Now, the fun part. Any questions before we start on the second PowerPoint? Yes.

I'm not sure if I should ask now or wait until you finish this next slide, but I teach kindergarten. Now, I'm worked as a deaf mentor and that starts with babies, and I've noticed that about the age of 18 months you can see whether or not a child has autism. Would you recommend continuing the checklist because they become stuck at that age language‑wise. What is your feeling and thoughts about that.

>>: I would refer them out. But that's me. As a psychologist, I've done that before. I would say that there would be ‑‑ there seems to be additional disabilities involved here. That's a good statement. There seems to be additional disabilities. Maybe the child doesn't have ‑‑ the child doesn't seem to have appropriate development as opposed to maintaining attention.

>>: Right. So if they don't pass the autism screening they come to a place of stagnation in their development.

>>: Well, it depends on their environment because most autistic kids are not stagnant.

We have brief periods of signing on our ‑‑ with our academic collaboration that we've developed that's on our website. I will get that to you, but people who develop that are both autistic or both have autistic children, and they've developed that and they know how to work, you know, with autistic individuals. So and then the other two are also working with that to support that, but I know there's a really high ‑‑ these people are very skilled at providing training on deaf individual with autism, but there's only a few that train. Her son wrote a book with her about growing up with Max because, well, the older son functions very well, and he's getting ready to go into college. You know, there are strengths and weaknesses as there are with everybody, but I can get you hooked up with that.

And then there's another psychologist who has an autistic son that's written about it. So I suspect that ‑‑ I think stagnation occurs, then you give appropriate support.

So the question is do you continue doing the VCSL assessment or not?

>>: Why not.

>>: Yeah. Just document it. Just because some areas come to a standstill at certain points.

>>: So you can do maybe develop a partnership with a autism specialist who knows more about autism and have the perspectives from both those people.

>>: Okay. So what I'm planning to do now is ‑‑ you know, if I were to go on the way we were, it would be really boring. But anyway, I want to share this with you, and after that, I will show you the real thing.

You know, I wish we had enough web access in here that we could break up into teams or do ‑‑ look at the videos. If I'm going to too fast, it's your responsibility to stop me. Okay? Deal?

Okay. Tickets.

Go to video store. VL2 store.

So you can buy these. You can buy the VCSL manual. I recommend that you have a minimum of one that every group have that because it's nice to be able to flip through that. And then buy the papers and you can make copies of those if you want and also buy online access. And the benefit to that we'll explain later.

You see it's not cheap. If your school chooses to buy the tickets in bulk, then it's more cost‑effective the more you buy. Plus, each ticket can have two assessments on it. So eight months. You can do it twice within that period. On the same child.

So it's not only one, but I mean you're supposed to evaluate every six months, right? So within eight months, you can evaluate one child twice. Okay.

Let me help with the South Dakota issue because really it's very formal and it's very ‑‑ you know to pay money, The State Department of education is always impressed when things cost money and you have to spend that money. So it's a formal report, and they like having that formal report, and you do get that as part of this. It's money from the government to support it, so you just ask for the money to pay for it.

And each state gets money for you.

>>: Also this does the work for you. All statistics are done with a click of a button.

>>: And therefore you can be more confident because you're right.

>>: So the next step. You have the ticket. You have to register your child. And that looks like this. You as the evaluator have to log in, and I will show mine later. I add my log in, my user name and password. Some man developed it obviously but it's kind of ironic.

Anyway, you put in the child's name, and the system will look for that child's name. Either you have it or don't. So they've been registered or they haven't. Suppose your child's four. And they might have been in another group. If they have been evaluated, it will connect this child to a previous evaluation. And then you can see the progress, and the system itself will track that child which is a really nice feature because if a student is at the Texas School for the Deaf and they move from Colorado, once the information is linked, all the information is there and you can see where the kid's at, whether or not they're making progress. So a lot of people are not well informed. This allows for information to be shared.

>>: So that's one benefit to the online program. You know that deaf kids move around. Different deaf schools. School for the Deaf, parents are trying to find a better solution. And if they're not there, it will ask you some more ‑‑ for some more information.

>>: And that's where you click.

Right here.

You become the evaluator, and you can see your participation, not mine, or hers, but yours, and then you can pull up the manual, and you can pull up the reports. Just various options that you have. Oh, you have 30 tickets in the system. And again, you add the name. If there's no record or you can't be tracked, always do this step first just to make sure that the child's not there. Because if they are there and you don't link them, it really throws off the system.

>>: And also the computer program or computer programmer who developed this one can't move on without this. They programmed it so you're stuck right there until you enter the appropriate information. So the name "Ralph. When we find a bug or a problem, we ask them to solve it, but ‑‑ and it has to be debugged a lot. Otherwise you have to plod through. But generally it just stops if you don't provide the right information.

Okay. There's nobody in the system so now I have to enter this information. You can see again Tom was just playing around with this. Bonnie lies over the ocean was her name.

Then they'll ask male‑female. Then the birth date, and that's important. It's important to provide the birth date because the computer will make the appropriate decision of where you start the assessment. You must have the informed consent from the parents at this point or you can't continue. If not, it will send out that form to be signed. And if you don't get it back, you still can't move on because you don't have it.

IRB. They know the IRB rules really well, and you can't bypass them.

>>: Sometimes you send the consent to parents if you're waiting for a week or two, you need to remind them that you're waiting. Sometimes it just gets lost in the e‑mail shuffle.

You can send an reminder e‑mail about the assessment. Typically that's what has to be done because it's a simple signature and it automatically comes back to you.

And you always have to check. Sometimes they go to spam or junk folders.

My recommendation is that you work with the parents and let them know that you sent it ‑‑

(computer sound )

>>: I don't know who that is but ...

So now you put in the parents' information once you have that approval. If the parents are in your office, send it to yourself, and then have the parents sign in your office. We have to play with that, but we say you know, we need you to fill this out. So instead of sending it to them, send to yourself, print it, and they can sign it.

The parents must sign. It's a legal issue. Parents have to know what you're doing.

For example, if they don't have e‑mail, maybe they can come, stop by the School for the Deaf, sign then, or you could print it and give it to them and scan it. Whatever works. So that Ralph gets added to the system. Because if Ralph isn't in there, you have to wait ‑‑

>>: Wait forever. Time is of the essence with this. You know, if it doesn't show up in there on electronic form or whatever, you can't go on. This is really ‑‑ a really, really critical part. It's important that you understand this, because honestly, parents give permission ‑‑ have the percentages give permission for several things if possible. The evaluation. But we really want to develop a second VCSL with more data if the parents are willing to give us that information so that we can save it in a secure database. Our hope is to develop a more thorough evaluation, and if they don't want it, that's fine. We respect their wishes.

>>: It's important to explain to the parents the reasoning behind the need. If they're willing, talk to them about how it's really going to help the greater good if they realize the purpose behind the checklist and the goals, they might be more amenable to it.

>>: And again the database has no names connected with anything. No one will know who's in there. That's not the point. We need it for research, to develop new assessments. It helps us advocate for deaf and hard of hearing children. If we can show, you know, the number of kids whose parents don't sign that are in that school and that is contributing to language delays, and we can support that, that we should have access to more native signing for these kids, then it's really important. But if the parents don't want it, we don't force them. It's their decision. No arm twisting or coercion. I can sign it but I can't ‑‑ Heidi will do it for me.

Then what happens ‑‑ so when the parents sign this, at the same time ‑‑ when the parents ‑‑ we send this out. We say it's out for signature. Then we know we've sent it. We know we can't move on until they've sent it back with signature.

Now, I really wish that my university had electronic signatures, but the VCSL does have electronic signatures. So we get it become automatically. It's very easy and quick. You can even do it on your phone. Oh, yeah. It's easy.

>>: And this is what it looks like.

>>: So you don't have to look for where it is. But this can be set up, and it can be a lot more efficient than it is. You know, they can print this out themselves and have a copy.

>>: The evaluator should print and have a hard copy on file to protect themselves.

>>: And then one copy to Gallaudet. That copy is not in the database. That's a different copy. It's in a secure server somewhere else. It's not connected to the child, the child's data or identified to the child.

Now, you have the permission. Now, we're looking at the goals not child and the background information for the child. Whether deaf or hard of hearing, what kind of hearing loss they have, what language they use, what the primary language is. And again if this isn't included, you can't move on.

Some parents need a Spanish version of the subcontinent forms. We have that. And we know some parents can't read English, and we also have an ASL version as well for parents who sign so that we can provide what they need ‑‑ you need to provide what you need to make the parents comfortable in signing. And if you need more about this, contact Julian Kirkland. Again, there's problems with contacting these places, contact me. I'll advocate on your behalf. Julian is overwhelmed, but you can contact us. Give him time to respond, and right now we don't have enough money for a person dedicated to VCSL. So Julian has many responsibilities. But if you need help, ask us. We'll be glad to advocate on your behalf.

>>: Okay. Now, it's time to evaluate. If you click on that, this is the view that you get. It will provide you with some background information from the parents. If the parents did not fill out everything completely, please reach out to them to fill in those gaps. If you don't have that information, you're unable to move forward.

>>: Once it's been filled out, you submit it, and it's time to evaluate. This is what it will look like. The system will automatically start where you need to start. When you provide the date of birth in the system, it will check that, and it'll guide you to the point where you should begin.

The first question for you is the first question on that age. I'm going to show you this really, really cool picture. Each item has an example of a native signer who has a child and I'll shoal you that a ‑‑ I'll show you that a bit later.

The system will recognize if the child has mastered several of those items. It will find your basal score. Once you've mastered three, the system will automatically go backward. So you may be started at three, let's say, and three of the items have been mastered. The system will jump you back to two. It will be the last item in the age 2 category. And it will keep going up and up and up until you have ten of those.

So you don't need to wonder if you have enough at that point. The system will guide you along. You won't even notice what's happening. You'll just see these different items come up, and all you have to do is give your answer.

And that's it. So now it's time to play around.

>>: I may need some technical assistance up here. Sorry.

Are there any questions?

>>: So any questions about purchasing a ticket or getting to the point where you can start evaluating? Any questions on the process?

You explained everything so well.

>>: I have one. So I teach in the classroom. So all the kids names are maybe in the system. Do I need to buy a ticket for each child?

>>: Yeah. Each school or teacher will need to make sure that there's a ticket. So the school will purchase tickets and make sure that you're inputted as one of their evaluators and you can enter the student information. You shouldn't be paying for that as a teacher. The school should be paying for that. You should tell them how many ticket you need.

>>: How many tickets. One per child.

>>: You can use that every eight months.

>>: So when you purchase a ticket you evaluate them in the fall and spring as long as it’s in the eight month window you can get two evaluation per ticket for the child. So maybe if I have eight kids ‑‑ well, if I have 20 kids I might buy a couple of extra kids in case you get extra kids who join your classroom during the year. They don't expire so they can be saved to be used at a different time. Right? They don't expire.

>>: No, they don't.

>>: So whatever you don't use in that eight month period, you can save for the next year.

>>: Great.

>>: And that's really nice. What a lot of teachers do is they get the paper version for their file, and then when it's time to do the formal online assessment, they can just use their paper tool that they had earlier and then transfer all that information to the online version. So it's nice to have that already filled out, and then it's easy to fill out the online version from there. It does require some time. And for each item, you have to click. I don't have Wi‑Fi access, so I need to find my phone.

>>: How are we going to show this stuff?

>>: But ‑‑ you do? Okay.

>>: So the question was, there was a question from the audience that if you were to type a participant's name into the system and you didn't know that that child was already in the system, would the system prevent you from adding it or would there be a double entry for that student? And the answer is there would be a double entry.

>>: What will happen, let's say I evaluate a child at eight months, and my child moves to Beth's school and she evaluates the same child. Let's say at a year and six months. She enters the child's name into the system, and it will automatically connect to my evaluation that I've already done. And lucky her, she doesn't have to enter all that background information again. The background information only need to be entered once, and it will be saved with that child's information.

>>: But you have to get informed consent again; correct.

>>: Yes.

>>: And now you're able to track that child's development, and Beth didn't see that child at eight months. She didn't know what their development looked like but she is able to look back ‑‑ thank you so much for getting that fixed.

And that's one of the benefits of the online system is when a child moves they're still connected to that online system.

Let's say from birth to three they have one IFSP, they move to a different school. They're able to utilize that information that's already there and it follows the child along which is really nice.

>>: And can you see the past evaluations once they're linked?

>>: Yes.

>>: So if I don't ‑‑ so if a child is with me now, I haven't evaluated them in the past. I can see the evaluation.

>>: Yes because they become your child, and again the parents are giving you permission. So then you will have permission.

>>: We have another question here.

>>: I'll wait.

>>: So here's the fun part. You ready?

>>: Okay. So you buy your tickets. Ralph will give you a log‑in. You will create a password.

>>: And also the log‑in will be sent to you automatically via e‑mail.

>>: And if you were to forget, in the past you had to ask Ralph, and he got tired of us asking, so he created a way for you to change your password.

>>: Thank you. PCs are not my favorite.

So I've already shown this to you, and now we're going to click on this here.

>>: You have to use two fingers.

>>: I'm going to have her be the clicker for me.

You get this list of options. You can see reports. Those are your reports. You can see the norms, the manual and stats.

>>: Diane, do you want to show them the norms.

>>: I will. I'm just talking about that's different categories here.

This will be where your school and your evaluators will be. This is your participants. This has different age groups. When it says acquisitions here, I have no idea what that means.

>>: Which do you want me to click on first?

>>: You can see all the people here who have been evaluated. And just so you know, this is fake data. This is the training site, so it's all made-up data.

>>: And you can see that some information is blank and that means that it has not been sent for signature. If it says out for signature, means it's out by awaiting a response from the parents and then signed means, of course, you've received a signed informed consent.

Where do you want me to click?

>>: Again you can see the name, their background information. You can click submit.

Click participants oh, sorry. Supposed to click name.

Going through a loop here.

>>: So do we need to add a new evaluator?

>>: Yes.

>>: Okay. Perfect.

Go to the items. You see that they all have the video icon next to the item. Will you click on one of those?

This is a blank report. It hasn't been filled out.

>>: But I think that it's been established on a age.

>>: Oh, you're right. I forgot about them.

You can see which items have been mastered. And that creates the basal. Okay?

Scroll down that tells you where the basal is.

It's really nice that it just shows it to you. You're not required to think through it, you just look for the B. And you can see the following check marks are scattered.

>>: So what is it called when you see the discrepancy in the scores? Do you remember what that's called? DPD. Zone approximate development. So we have a basal and we're getting to the area where the child has not mastered these skills consistently.

>>: Maybe you want to focus on answering questions, and the child has not yet mastered answering questions.

You would want to add that to your language plan.

You could ask the child questions to try to get those answers from them to get a response from the child.

>>: You can use an iPad to show parents what the videos look like so they know how to look for the responses from their child that are appropriate for these items.

>>: This will work on a laptop or a desktop on an iPad. What are you're using this should work on any of those devices.

>>: Also it will go then down until ...

Whatever you're using this should work

>>: You can see from here up, that's a total of 10, so that would be the ceiling. Again, this will labor your basal. It will labor your ceiling.

So essentially you don't want to focus on these underneath the ceiling because that's below their ability. That's not what a ZPD is. If you scroll up, this is the area.

>>: So that zone of proximal development could go on for quite a long time. Until the child actually has 10 items in which they're not yet emergent, that's when the ceiling is developed. And then that Zone of Proximal Development however large that is is where you base your language planning on.

>>: And Beth is right. This is where you want to focus. This is where you want to emphasize information for the parents.

>>: The IFSP is where the child is starting to move into. They're starting to work on the different items so those are the things you want to pay attention to, the grammar issues that are going to aid in their language development. They're almost ready to do this item on their own, and so you are guiding them along and eventually they will master these skills.

>>: And the reason why it's important for the evaluator to have a criterion is we node to know how to scaffold that learning, how to meet the child where they are and bring them to where they need to be. So the criterion for evaluators is set so that the individual knows how to do that successfully.

>>: And if you scroll down here,.

The system gives you this nice report for your school. Go down a bit more. This is an area for you to type in some notes. It will save the notes in the system. You can share this information with parents, with your school and whoever has permission to view this information. So that's the report. It makes it a little bit easier to do the screening so you can do this pretty easily. Will you click on some more of those videos and show us some examples.

>>: My daughter does 1, 2, 3 and her thumb is a ‑‑ so it's interesting. You can show that she's emerging for the number 4 but she's not quite mastered that.

>>: Will you click on this one.

>>: The Internet's slow.

>>: That kid has a full story to tell.

>>: So also if we're looking at that, you can look at facial expressions as well. We're showing natural language use, so it's not just the development of signs, but the development of natural facial expressions. So it's helpful to have these visual examples for parents and evaluators.

>>: We do go to age 3 to 4. Scroll down.

Let's do this one. This is my favorite one.

The one above that.

>>: The Internet is slow.

You can see that each item has an example, and one reason that we did this was because people were saying they didn't know what this would look like, and if you don't know what it landfills, maybe you shouldn't be evaluating children. But I think it really helps parents who are able to watch these videos online and see what they look like.

I have to admit this was sent to the National Science Foundation, and they showed these videotapes, and those people who watched these videos didn't know any sign, and Gallaudet got a huge grant from the National Science Foundation and others awards as well. And the people who gave these awards didn't know any sign language and we didn't know that that was even possible, and it was.

>>: We saw the natural development of sign language and people were impressed and we hope that with this kind of information sharing, people will understand that sign language acquisition is natural. It can happen. It's a perfectly good strategy for children who are deaf and hard of hearing. It's becoming ‑‑ in order for these children to become highly skilled and qualified using sign language, we show that these children can be successful. There are too many children who are delayed, they're not graduating from high school, they're not getting into college or gaining employment, and that needs to stop. We need to provide a better foundation for these children.

When I give tests in my classroom and a student fails, I don't blame my students. I say that I failed. I didn't do that well.

My point didn't get across to the students. I'm hoping that we can get to that point as well as early interventionists if our information is not getting through. That means that we need to do something differently.

We see that these children have no issues, and the parents who don't match the child's ability is the real issue. But we have to believe that we are smart enough and we can develop strategies to help at least match them up at some point even if it won't be a perfect match. We want to have some kind of match there, and teachers and others at the school can help support the students. But if you haven't played around on the VL2 website. VL2.Gallaudet.EDU there are so many different tools on there that you can explore. There's a parent page, information available on that website. There are a lot of different articles and videos that can be shared with parents.

>>: There are developmental stories online that you can purchase in the app store. I think it's ‑‑ I think it's six dollars for the app. And again this was supported by the National Science Foundation at VL2, and we are not trying to become rich through this. We're just trying to support children who are deaf and hard of hearing in their development.

(Video playing ‑ Smart Water commercial ).

(Video playing ).

>>: So there are a lot of resources available on this site that can be used.

>>: So if you look at the tools tab, the parent information packet can be found under that tab. And then the parent tool kit.

>>: There are a lot of resources on here for you to use. The National Science Foundation gave us a good amount of funding, so our goal is to give back to families and to the parents. We're not trying to get rich in this process.

You will see other ASL assessments available. Let's say you are worked with an eight year old. Of course, you have to by this, and it was not shared with us. It wasn't developed by us. But you are able to purchase that assessment. It's a lot of information that's available on here.

Yes?

>>: Did you say the name of the app.

>>: This is the parent information package. You can see them all there on the right‑hand side.

Any more questions?

Yes.

>>: Could you tell me a little bit more about the training that Laurene is going to be doing. Is that on the website. Do you sign up for the training there? How do you find out?

>>: Can you find Lamar's Facebook page?

>>: I'll try.

>>: I can't.

If you can't find it, just contact me and I can send you the flyer. She sent me the flyer already.

What she's doing is ‑‑

>>: What am I looking for again?

>>: Looking for the Lamar Facebook page DSDE page.

So what happens is she has five different trainers. One will be talking about ASL linguistics. One of the trainers ‑‑ actually two of trainers will be focusing on the Kendall proficiency levels. One will be focusing on ASL ‑‑ the ASL sentence recognition test. That's an assessment that's already been developed. And we will be talking about how to give those different assessments, what's required for those different assessments.

>>: Is this the information you were looking for.

>>: That's it. Yes. That's the one.

>>: There's a registration URL or link. I think it costs 200 or so. I'm not sure. Maybe more.

>>: Last year I believe she had 22 people who she trained, and they were all begging for more. So that first group is coming back, and they'll have a second‑level training, and she will have a second, first‑level training as well.

We now have some assessments, and we have some things that we are able to provide, so the goal is to train people in order to provide this and administer it successfully in order for early intervention to happen.

>>: Any more questions? If something comes up at a later time, we're going to be here on‑site so you can always catch us in the halls if something comes up.

>>: We want to thank you so much for your attention today. We appreciate you being here. I know that we can go on and on sometimes but sorry about that. I know we're trying to kill the interpreters today. Sorry about that.

If you need anything, please just let us know. We're here to support deaf and hard of hearing children.

Yes.

Oh, thank you so much.

>>: If you wouldn't mind please filling out the evaluation form and giving it to our room monitor.

This is not my first rodeo!