



a Family Guide to **Special Education Services**

DEVELOPMENTALLY DELAYED

VOLUME 3

Family Guides for Special Education Services

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Other MDE Resources

Parent Engagement and Support

📌 mdek12.org/OSE/Information-for-Families

☎ [601.359.3498](tel:601.359.3498)

General Resources for Parents:

📌 www.mdek12.org/OSE/Information-for-Families/Resources

Procedural Safeguards: Your Family's Special Education Rights

📌 mdek12.org/OSE/Dispute-Resolution

DEVELOPMENTALLY DELAYED (DD)

DD Definition

A child in the age range of birth through nine (9) who is experiencing significant delays in two or more of the five developmental areas (cognitive, fine/gross motor, communication, social/emotional/behavioral, and adaptive behavior) meets the eligibility criteria for **Developmentally Delayed (DD)** if, by reason of the developmental delays, they need special education and related services **due to a disability that adversely affects a child's pre-academic or educational performance.**

For preschool age children, the results of the evaluation must indicate an adverse impact of the child's ability to participate in developmentally appropriate activities. The criteria for DD could also be met if the child has a diagnosed disorder of known etiology which affects development in a negative fashion and has a high probability of resulting in a developmental delay. For diagnosed disorders, a diagnosis from a physician and research that supports the predicted developmental delays are required.



The child must have significant delay in two (2) or more areas of development AND be less than ten (10) years of age to be eligible for this category.



Evaluation Requirements

Developmentally Delayed is for non-categorical identification when the child has a disability and needs special education and related services; **but does not clearly fit one of eleven (11) * eligibility categories (not including language/speech).**

If the eligibility criteria are clearly met for one or more of the eleven (11) eligibility categories (not including language/speech). If the eligibility criteria are clearly met for one or more of the eleven (11) (AU, DB, EmD, HI, ID, MD, OI, OHI, SLD, TBI, VI) eligibility categories) not including language/speech), DD should not be used.

Mississippi has determined that DD applies to the age range birth through nine (9) years. A new eligibility determination must occur before the child's tenth (10th) birthday. **The DD eligibility ruling cannot be maintained beyond the child's tenth (10th) birthday.**

The following requirements apply to the DD category:

- A. Standard scores must be used when the instrument(s) yields standard scores.
- B. A significant delay is defined as 1.5 standard deviations below the mean of the test or subtest when the instrument yields standard scores.

- C. If the instrument yields only age equivalents, then significant delay is defined as a developmental age 25% below the child's chronological age or corrected age on the test or subtest.
- D. Follow guidelines in the test manual for calculating corrected age for children who were born pre-term. If the manual does not address corrected age calculation, the following guidelines should be considered:
1. Calculate corrected age for children born prior to thirty-eight (38) weeks gestation, and
 2. Calculate corrected age up to twenty-four (24) months chronological age.

A variety of instruments should be considered and selected to yield information about the full range of the child's functioning in all five (5) developmental areas. When informants are used to gather information, they must have sufficient knowledge of the child's functioning in the areas for which the informant provides input. A description of all methods and informants used must be included in the report and must meet the administration guidelines and standardized procedures for each instrument.



Helpful Vocabulary

Accommodation—Tool that enables a student with a disability to better access the general curriculum. Some accommodations are applicable to instruction only (for example, an assignment that is shortened but still addresses the state standard); others are permitted for both instruction and assessment (for example, change in formatting or timing).

Adaptive behavior—The collection of conceptual, social, and practical skills that are learned and performed by people in their everyday lives.

- Conceptual skills (e.g., language and literacy; money, time, and number concepts; self-direction; etc.)
- Social skills (e.g., interpersonal skills, social responsibility, self-esteem, gullibility, naïveté [i.e., wariness], social problem-solving, the ability to follow rules/obey laws and to avoid being victimized, etc.)
- Practical skills (e.g., activities of daily living, occupational skills, healthcare, travel/transportation, schedules/routines, safety, use of money, use of the telephone etc.)

Free Appropriate Public Education (FAPE)—

Foundational requirement of the Individuals with Disabilities Education Act of 2004 (IDEA) stipulating that special education and related services must be provided at public expense (that is, without charge to parents), meet state requirements, include an appropriate education that leads to outcomes such as employment or higher education, and conform to the Individualized Education Program (IEP) prepared for the student.

Inclusion—The practice of educating children with disabilities in the general education classroom. Inclusion in special education programs is an important part of the continuum of special education placements required by the Individuals with Disabilities Education Act (IDEA). In an inclusion classroom, a student with disabilities feels included, accepted, and makes friends, and the student’s peers learn to better understand their classmate’s disabilities.

Individuals with Disabilities Act (IDEA)—A law that makes available a free public education to eligible children with disabilities throughout the nation and ensures special education and related services to those children.

Individualized Education Program (IEP)—

A document written for a child with a disability that is developed, reviewed, and revised in accordance with state and federal policies.

Itinerant services—Special education services provided in a community preschool program. These services may be provided directly to the child or as consultative services to the early childhood teacher.



If the eligibility criteria are clearly met for one of the following categories, DD should not be used.

- Autism (AU)
- Deaf-Blind (DB)
- Emotional Disability (EmD)
- Hearing Impaired (HI)
- Intellectual Disability (ID)
- Multiple Disabilities (MD)
- Orthopedic Impairment (OI)
- Other Health Impairment (OHI)
- Specific Learning Disability (SLD)
- Traumatic Brain Injury (TBI)
- Visually Impaired (VI)

Modification—Adjustment to an assignment, test, or activity in a way that significantly simplifies or lowers the standard or alters the original measurement. Modifications change what a student is taught or expected to learn, and most are applicable to students with significant cognitive disabilities.

Related services—Additional support services that a child with disabilities requires, such as transportation, occupational, physical, speech pathology services, interpreters, medical services, etc.

School-based services—Special education services provided in the local school district. These services may be provided in a general or special education setting depending on the needs of the child and availability within the district.

Significant cognitive disability (SCD)—In order for a student to be classified as having a significant cognitive disability, all of the following criteria must be true:

- The student demonstrates significant cognitive deficits and poor adaptive skill levels (as determined by that student’s comprehensive evaluation) that prevent participation in the standard academic curriculum or achievement of the academic content standards, even with accommodations and modifications.
- The student requires extensive direct instruction in both academic and functional skills in multiple settings to accomplish the application and transfer of those skills.
- The student’s inability to complete the standard academic curriculum is neither the result of excessive or extended absences nor is primarily the result of visual, auditory, or physical disabilities, emotional behavioral disabilities, specific learning disabilities, or social, cultural, or economic differences.

Speech-language pathologist (SLP)—A speech-language pathologist works to prevent, assess, diagnose, and treat speech, language, social communication, cognitive communication, and swallowing disorders in children and adults

Specially designed instruction (SDI)—Universally required component that defines special education and stipulates that students with disabilities receive instruction that includes changes in content, methodology, and/or delivery. It is not dependent on setting and is a primary responsibility of special education professionals.

- 1 Cognitive (or thinking) skills—The ability to think, learn, and solve problems. It is how your child explores the world around them with their eyes, ears, and hands. This includes attention spans, memory, logic, and reasoning as well as processing information.
- 2 Fine and gross motor skills—The ability to use small muscles (fine motor), particularly in the hands, and large muscles (gross motor) in the body. Fine motor skills are needed for grasping in order to complete activities such as holding utensils, working with objects, and writing or drawing. Gross motor skills are needed for skills such as jumping, running, and climbing stairs.
- 3 Communication skills—The ability to use and understand language. This includes understanding what is said and using words correctly and in ways others can understand.
- 4 Social/Emotional/Behavioral skills—The ability to relate to other people, including being able to express and control emotions. This incorporates being able to ask for help, showing and expressing feelings, and getting along with others.
- 5 Adaptive skills—The ability to function independently at home, at school, and in the community. For young children, this includes eating, dressing, and bathing themselves.



Ways to Help at Home

It is important to implement strategies that address the needs of the individual. We recommend that you apply these strategies across home, school, and community contexts.

Ideas to encourage and foster your child's development:

Adapted from: helpmegrowmn.org



Cognitive development

- Count together.
- Ask your child to name colors, shapes, or animals when seen in everyday life or in books.
- Ask your child to tell you parts of a story or about her or his day.
- Give your child choices and prompt her or him to make thoughtful decisions.
- Provide toys that encourage your child to put things together.



Fine/Gross motor

- Play with balls (catching, running, and kicking).
- Help your child learn to pump her or his legs back and forth when swinging.
- Provide riding toys such as a bike with training wheels or a scooter.
- Play music and have a dance party; copy each other's moves.
- Visit parks or playgrounds that provide play spaces for your child to run and climb freely.



Communication

- Read with your child every day and ask her or him to predict what will happen next.
- Teach your child her or his phone number and address.
- Be patient when your child is speaking since rushing may result in frustration.
- Model correct speech patterns and avoid correcting speech difficulties.
- Paraphrase back what your child has said.



Social/Emotional/Behavioral

- Use language to describe your feelings and experiences.
- Teach your child words for important people and things.
- Provide opportunities for your child to play with other children.
- Praise your child when she or he asks for things nicely and calmly takes no for an answer.
- Gently and consistently help your child manage feelings and control behavior.



Adaptive behavior

- Allow your child to make a mess while eating to practice the motions of feeding and cleaning up.
- Have your child practice buttoning and unbuttoning shirts, zipping clothes, and opening and closing a door.
- Model and talk about healthy eating habits and dental care with your child.
- Teach your child how to ask for help.
- Help your child recognize and identify important people and places in the community.



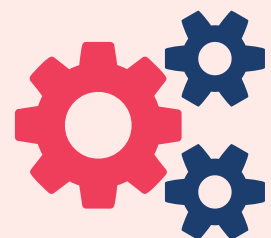
Steps and Strategies for Helping Your Child's Development

Adapted from: childwelfare.gov/pubPDFs/parenting_dev_ts.pdf

First Steps:

- **If your child meets the eligibility requirements under Developmentally Delayed, remember you are not alone.** Seek out other families of children with special needs and find or start a support group.
- **Learn as much as you can about your child's special needs and options for treatment.** Begin treatment early to give your child the chance to make the best possible progress.

Parents and primary caregivers are in the best position to see any problems with their child's development that may require action.



Ongoing Strategies:

- **Ask your doctor for referrals to professional agencies that can assist you and your child.** Some services will also benefit your entire family.
- **Take a break when needed.** Give yourself time to connect with supportive family members and friends. You will be a better champion for your child when you take the time for self-care.
- **Don't let your child's challenges become the sole focus.** Watching your child grow and develop as part of your family is one of the great pleasures of being a parent.



Remember: You are your child's best advocate. Trust your feelings, be confident, and take action!



How Can You Help Your Child?

If you find yourself waiting to get an appointment to see a specialist or start intervention services for your child's developmental delays, a simple thing you can do to help your child's development is to play with your child while checking your child's milestones. The following are a few examples of playthings you can do:

- **While reading to your child, ask leading questions** such as: "What do you think is happening on this page? What do you think might happen next?"
- **Provide different kinds of printed materials for your child to play** (e.g., books, magazines, birthday or holiday cards, etc.).
- **Create props related to familiar stories** (e.g., puppets, costumes, print material, etc.).
- **Encourage your child to draw pictures of familiar stories.**
- **Sing counting songs and rhymes.**
- **Go on a number hunt in your home.** Identify numbers in different locations.
- **Label boxes with pictures and words** to assist your child with sorting their toys.
- **Introduce your child early to music.** Sing to and with her or him.


- **Let your child explore art** with crayons, markers, and other materials.
- **Spend time reading to younger children.** When they can read on their own, encourage reading and discuss with them what they are reading.
- **Encourage your child to get outdoors.** Exercise and fresh air are good for brain development.
- **Let your child play with things around the house.** Select toys with play value that are age-appropriate. They can make-believe, build things, learn things, etc.
- **Make it possible for your child to spend time with same-age peers.**
- **Prepare your child for new social situations,** providing coaching on appropriate social behavior. If your child is socially inappropriate in a situation, take her or him aside, calmly explain how she or he is affecting others, and coach her or him on appropriate skills. Affirm positive behavior.
- **Teach manners.**

It is exciting to see children explore new things and learn about the world. A lot of growth happens in the child's first few years of life, and when your child has developmental delays, it can be easy to feel like you constantly have to make up for the lost time.

Making the Most of Early Intervention

Adapted from Understood.org

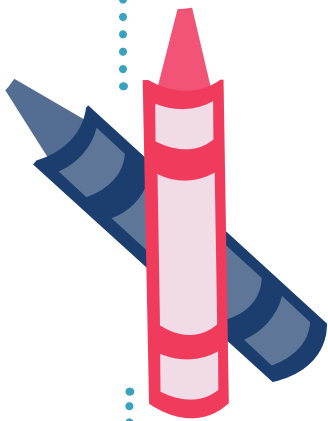
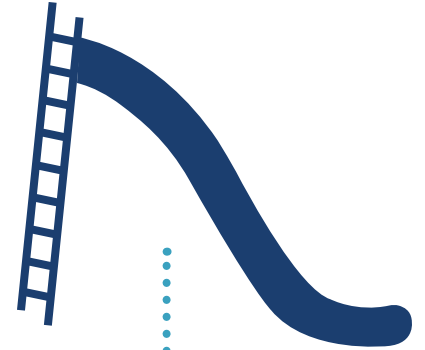
Even if your child is working with an early interventionist to develop skills, you may wonder what else you could be doing to help. The good news is that there are some small, simple things you can do to help your child make progress.



With so many different treatments available, it can be tough to figure out which approach is right for your child. Making things more complicated, you may hear different or even conflicting recommendations from parents, teachers, and doctors. When putting together a treatment plan for your child, keep in mind that there is no single treatment that works for everyone. Each person on the autism spectrum is unique, with different strengths and weaknesses.

- **Keep playing.** Many fun activities can help build skills. Everyday activities like playing with playdough, slime, or putty can help build fine motor skills. Even typical kid play like digging in the dirt or dancing can help build gross motor skills.

Just hanging out at the local playground with other children can help, too. Swinging, sliding, climbing, and giggling with peers help develop important skills. And it is more than just physical skills. On the playground, children learn social skills like how to follow rules, share, and take turns.



- **Show and tell.** Children with developmental delays may have more trouble than other peers their age understanding what you say or following directions. That can be frustrating for your child and you.

Put together picture schedules for your home. They can be as simple as charts that break down the steps of everyday tasks, or they can show your daily routine (Download and print picture charts for brushing teeth, washing hands, getting dressed, plus other picture schedules to customize for your family.).

When you give directions out loud, make them simple and to the point and explore ways to make sure your child can follow them.

- **Keep in touch.** If your child is in early intervention, regularly check in with the service coordinator—the person who maintains contact with all the people working with your child and can be your point of contact for questions—so you don't have to track down all the providers and talk to them one-on-one.

Also, keep talking with your healthcare provider or whoever sees your child for medical checkups. That may be a regular doctor, a healthcare clinic, or a hospital.

These professionals know what is typical for young children because they see them every day. They can continue to rule out other things that can get in the way of development, like hearing loss or vision problems, and can also update you on which skills are appropriate as your child gets older.

When your child has developmental delays, it may be hard to watch other children do things before your child does; however, that does not mean your child can't do fun and exciting things.



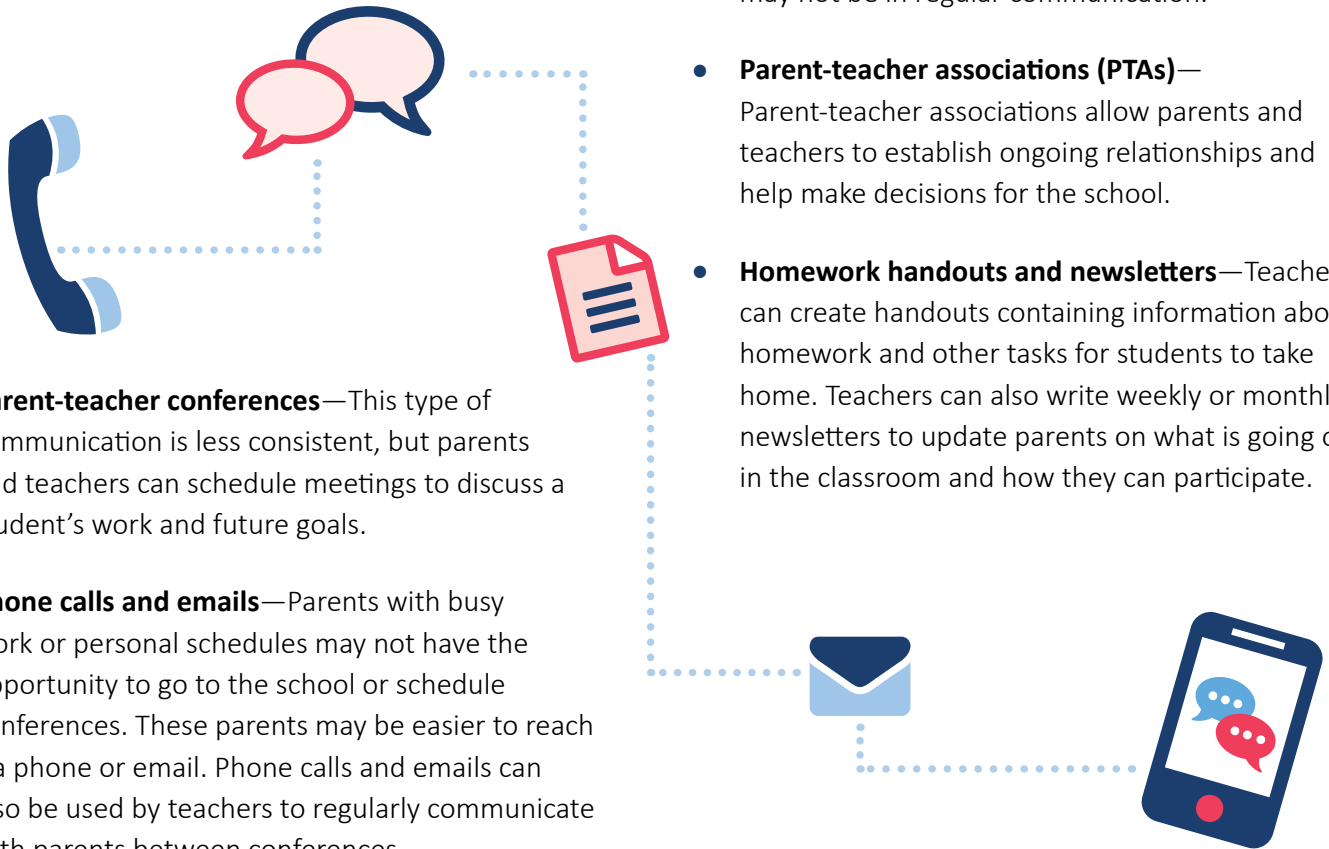
Successful Parent-Teacher Communication



Adapted from American University "Parent-teacher communication: strategies for effective parent inclusion & engagement"—
soeonline.american.edu/blog/parent-teacher-communication

Communication is key to a successful inclusion classroom. Parents, general education teachers, and special educators can try the following tactics for successful parent-teacher communication:

- Regular in-person communication**—This type of communication works great for parents who typically drop off and pick up their children from school.
- Open houses**—Most schools host annual open houses where parents can visit their children’s classrooms. This allows teachers to meet parents for the first time or meet a second parent who may not be in regular communication.
- Parent-teacher associations (PTAs)**—Parent-teacher associations allow parents and teachers to establish ongoing relationships and help make decisions for the school.
- Homework handouts and newsletters**—Teachers can create handouts containing information about homework and other tasks for students to take home. Teachers can also write weekly or monthly newsletters to update parents on what is going on in the classroom and how they can participate.
- Parent-teacher conferences**—This type of communication is less consistent, but parents and teachers can schedule meetings to discuss a student’s work and future goals.
- Phone calls and emails**—Parents with busy work or personal schedules may not have the opportunity to go to the school or schedule conferences. These parents may be easier to reach via phone or email. Phone calls and emails can also be used by teachers to regularly communicate with parents between conferences.
- Text messages**—Some teachers use mass text messages or special messaging apps to communicate with parents. Several text services, such as Remind, cater specifically to teachers.
- Class websites**—Teachers can create classroom websites to post announcements, homework, and reminders to help ensure they don’t get lost in communication between the classroom and home. Similar methods of communication include social media sites or learning management platforms such as ClassDojo.





Resources

- Center for Disease Control and Prevention-Learn the Signs Act Early**—An online resource that provides a milestone tracker application to help track your child's milestone from ages two months to five years and free materials, videos, tools, and resources to learn about child development.
 - 📌 cdc.gov/ncbddd/actearly/milestones-app.html
 - Center for Parent Information and Resources (CPIR)-Find Your Parent Center**—There are nearly 100 Parent Training and Information Centers (PTIs) Community Parent Resource Centers (CPRCs) in the U.S. working with families of infants, toddlers, children, and youth with disabilities, ages birth to 26 years. Find your center to partner with professionals to improve outcomes for your child.
 - 📌 parentcenterhub.org/find-your-center
 - Mississippi State Department of Health Early Intervention Program (First Steps)**—A program that matches the unique needs of infants and toddlers who have developmental delays, or a birth condition that could cause a developmental delay, with early intervention services and resources within the community.
 - 📌 msdh.ms.gov/msdhsite/_static/41,0,74.html
 - ☎️ 800.451.3903
 - Mississippi Thrive! Child Health Development Project (Addressing Delays)**—This project works with families, healthcare providers, and early childhood professionals to foster positive caregiver and child interactions, enhance attention to developmental milestones, and strengthen children's brain architecture. It also provides information on early interventions, what to do if developmental delays are identified, and strategies to help your child.
 - 📌 mississippithrive.com/parents-families/addressing-delays
 - ☎️ 844.822.4622
 - Parenting Counts**—A research-based resource developed by the Talaris Institute to support parents and caregivers in raising socially and emotionally healthy children. The website offers tools to track children's all-around progress from ages birth to five years.
 - 📌 parentingcounts.org/developmental-timeline
 - The Mississippi Department of Education (MDE) Office of Special Education**—A service-oriented office that seeks to improve the education experience for children with disabilities
 - 📌 mdek12.org/OSE
 - U.S. Department of Education**—Their mission is to promote student achievement and preparation for global competitiveness by fostering educational excellence and ensuring equal access.
 - 📌 ed.gov
 - U.S. Department of Education-Office of Special Education and Rehabilitative Services**—The mission of the Office of Special Education Programs is to lead the nation's efforts to improve outcomes for children with disabilities, birth through 21, and their families, ensuring access to fair, equitable, and high-quality education and services.
 - 📌 ed.gov/about/offices/list/osers
 - ZeroToThree.org**—Founded in 1977 by leading researchers and clinicians focused on child development, this organization seeks to ensure that all babies and toddlers benefit from the early connections that are critical to their well-being and development. Their website provides information on early development and well-being, early learning, parenting, and policy and advocacy.
 - 📌 zerotothree.org/resources/series/parent-favorites
 - ☎️ 202. 638.1144
- MDE-specific resources include:
- General resources for parents:**
 - 📌 mdek12.org/OSE/Information-for-Families/Resources
 - Parent Engagement and Support**
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