

Issues & Possible State Solutions for Improving Educational Services for Students who are Deaf or Hard of Hearing in Ohio

Workshop Proceedings * November 29 – 30, 2007

Introduction: This report summarizes issues and possible state solutions identified by participants at the November 29 – 30, 2007 workshop on *Improving Educational Services for Students who are Deaf or Hard of Hearing in Ohio*. The workshop was co-sponsored by The Ohio Department of Education (ODE) and The National Association of State Directors of Special Education (NASDSE). Participants included approximately fifty diverse stakeholders representing families, local school districts (practitioners and administrators), the Ohio School for the Deaf, higher education, early intervention, state agencies, outreach services, etc.

The primary workshop objectives were to:

1. Overview the *Educational Services Guidelines for Meeting the Needs of Students who are Deaf or Hard of Hearing (DHH)*; and
2. Identify and prioritize state and local issues in meeting the needs of students who are DHH.

Additionally, participants began to identify possible state solutions to pressing issues.

Dr. Greg Maloney, State Director of Special Education, and Dr. Edward Corbett, Director of the Ohio School for the Deaf, opened the workshop providing a context for the need to improve educational services for students who are DHH in Ohio. Gaylen Pugh from the National Association of State Directors of Special Education (NASDSE) clarified NASDSE's interests that every state will have a comprehensive plan for improving services and a community of practice focused on continual networking, learning, and improvement.

Following these opening remarks, participants identified issues that were important to them in response to the following triggering question.

Triggering question: From your role perspective, what are the most pressing state and local issues in providing educational services to students who are DHH?

The issues were brainstormed and sorted under the five chapters of the *Educational Services Guidelines*. Before each chapter was overviewed, participants engaged in facilitated discussion regarding their experiences and observations about these state and local issues. These state and local issues are summarized in section two of this report.

At the conclusion of the workshop, participants prioritized statewide issues that they perceived as particularly important or leveraged for statewide improvement. The issues were prioritized in response to the following triggering question:

Triggering question: What is the most important or leveraged statewide issue that Ohio could focus on for improving educational services to students who are DHH?

Section one reflects the priorities that the participants identified given their workshop interaction and learning experience. While the list may be helpful to stakeholders who in the future are purposefully configured for comprehensive planning, the list is not intended as a selected set of issues that have been thoughtfully identified for planning purposes.

Section three is a running record of possible state solutions that were generated during the workshop in response to the following triggering question:

Triggering question: What are possible state solutions that could be taken to improve educational services to students who are DHH?

The state solutions were brainstormed in the spirit of possible improvements that could be initiated and are not assumed to be a comprehensive list. A more focused planning effort to thoroughly identify the issues and identify robust change strategies could be taken to construct a more comprehensive statewide improvement agenda.

Section 1: Most Important or Leveraged Statewide Issues for Improving Educational Services to Students who are DHH

At the conclusion of the workshop, participants prioritized statewide issues that they perceived as particularly important or leveraged for statewide improvement. The issues were prioritized in response to the following triggering question:

Triggering question: What is the most important or leveraged statewide issue that Ohio could focus on for improving educational services to students who are DHH?

Section one reflects the priorities that the participants identified given their workshop interaction and learning experience. While the list may be helpful to stakeholders who in the future are purposefully configured for comprehensive planning, the list is not intended as a selected set of issues that have been thoughtfully identified for planning purposes.

1. Communication, consultation, collaboration, cash, and commitment from the Ohio Department of Health and Ohio Department of Education for early identification and intervention for the birth-to-five population.
 - a. Assuring comprehensive, integrated, efficient statewide services focusing on language development for the birth-to-five population upon identification.

- b. Assuring continuity of services for DHH children (transitioning from Part C to Part B).
 - c. Assuring meaningful parent involvement.
- 2. Involvement of state department of education policy makers in creating systemic, statewide change.
- 3. Provision of Least Restrictive Environment (LRE) to students and educator training.
- 4. Regionalization of services for the DHH through fiscal incentives by the state department of education.

Section 2: Brainstormed List of State and Local Issues Sorted by the Five Chapters of the *Educational Service Guidelines*

This section of the report summarizes state and local issues that participants identified in response to the following triggering question.

Triggering question: From your role perspective, what are the most pressing state and local issues in providing educational services to students who are DHH?

The issues were brainstormed and sorted under the five chapters of the *Educational Services Guidelines*. Before each chapter was overviewed, participants engaged in facilitated discussion regarding their experiences and observations about these state and local issues.

Foundations Issues:

1. Lack of understanding of deaf culture and services on the part of administrators, teachers in general education and special education.
2. Schools don't know what they don't know.
3. Increasing education of (parent advisors of Regional Interpreter Hearing Program (RIHP) in how to provide standardized recommendations for transition in regards to the needs of DHH children (3-5 preschool) and how to fill the needs for that child based on the environment.
4. ODE has a generic "disability" category for preschoolers thus limiting services for the DHH child's specific needs.
5. Who teaches the children the language and what skill is required to do so?
6. Not only the educational (academic issues), how are social issues, culturally relevant issues, etc. being addressed?
7. Misunderstanding of educational needs from: (a) medical models; (b) parents; (c) school administrators – results in poorly designed educational practices and services.
8. How can we assure that DHH students have access to peers, both DHH and hearing, so they can develop meaningful foundations and support systems within our community?
9. The most pressing issue facing our districts is children who come to school as kindergarteners with no language. How do you "make up" that deficit?

10. Multiple disabilities with DHH are a problem.
11. As with all children, discovering (beyond hearing impairment) the best mode(s)/style(s) of individual student learning. (Universal Design for Learning, Differentiated Instruction)
12. Challenge of addressing the emotional issues.

Administration and Support Structures Issues:

13. There are money issues in school and early intervention.
14. What funding is available to local districts to assist with the high cost of educating DHH children? How can the state assist with additional weighted funding?
15. Early intervention and on toward transition to real life outcomes that enable our DHH students to be successful are challenging and are areas where bias is evident.
16. We need more collaboration with schools and early intervention.
17. Placement concerns – access to the technology, services.
18. Issues with literacy/accountability and standardized testing and material standardization is a critical area of need.
19. In the predominantly hearing educational environment are the personnel with the appropriate (highly qualified) qualifications available?
20. Educating quality DHH educators who can meet the needs of a variety of learners.
21. Lack of services and staffing in rural areas.
22. Lack of understanding of deaf culture and services on the part of administrators, teachers in general education and special education.
23. There is a lack of awareness of the potential need of DHH to have high achievement beyond the IEP year but for a school career.
24. Isolation of DHH students due to low numbers.
25. There is a need to facilitate research in Ohio – need collaboration!

Assessment Issues:

26. The challenge of initial and ongoing assessment.
27. Measuring language development across age range communication profile (Akron). Language acquisition growth.
28. OAT and OGT – The deaf child does not have access to curriculum. The OAT and OGT measures the disability. ASL is not accepted as a response.
29. How do children who are DHH best learn language?
30. Issues with literacy/accountability and standardized testing and material standardization is a critical area of need.
31. Many students who are deaf are requesting interpreters to assist them with testing – English, Math, etc. What are the limits, if any, for using interpreters in the test environment?
32. I work in a post-secondary setting in which I work with students who are DHH who are

failing classes because they cannot read and/or write at the college level. What happened in K-12?

33. Significant reading deficits of DHH students pose challenge(s) in mastering college level work.
34. Assessing multiple disabilities with DHH is a problem.

Services and Placement Options Issues:

35. We need to give parents more tools at home when their kids enter school.
36. No language development when families don't sign or have very basic signing.
37. Early identification and intervention is making wonderful impact with helping parents develop a language rich environment. But how can we continue to develop these as kids enter school or for those early intervention families with low maternal education levels who need so much more.
38. Funding to maintain home-based services for language development (0 – 3 and 3 – 5) and in the transition years before school age.
39. Does this teaching of language prior to school-age adequately prepare the child to participate in a predominantly hearing education environment?
40. Many students who are deaf are requesting interpreters to assist them with testing – English, Math, etc. What are the limits, if any, for using interpreters in the test environment?
41. So few students – no socialization.
42. Placement of student in neighborhood programs makes accessibility to services difficult.
43. Why would a parent place a deaf child in a deaf program when the peer group lags in academic performance?
44. For an academically “on track” third grader who is socially/culturally deaf, it's a difficult choice to mainstream in order to progress at a traditional pace, leaving the feeling of choosing between culture vs. education.
45. Trainings, workshops, conferences, etc. that truly address classroom practices specifically targeting DHH students are lacking.
46. Finding, hiring, retaining qualified interpreters is a challenge for some districts.
47. State funding of services does not recognize costs relative to rural schools.
48. Lack of access to services and/or knowledge of services – parents, students, school.

Personnel Issues:

49. Lack of trained qualified staff.
50. In the predominantly hearing educational environment are the personnel with the appropriate (highly qualified) qualifications available?
51. Educating quality DHH educators who can meet the needs of a variety of learners.
52. Lack of training/exposure for educators
53. What professional development is available for DHH staff and, especially, for general

- education teachers who are accepting the students in their classroom?
54. Lack of support personnel (interpreters, Speech Language Pathologists).
 55. How can districts obtain and retain qualified DHH staff including teachers, interpreters, audiologists, and SLPs.
 56. Lack of speech language pathologists with adequate experience working with DHH children is another pressing issue.
 57. Minimal audiology services.
 58. Finding and securing qualified educational interpreters to meet the needs of deaf and hard of hearing students in a postsecondary setting is paramount.
 59. Lack of skilled educational interpreters, SLPs who understand deaf and sign language.
 60. There are no interpreter training programs in northwest Ohio.
 61. In post-secondary setting, we have interpreters who were children of deaf adults (CODA). How do we evaluate their skills? (They've had no formal training; their skills vs. someone who has a 2 or 4 year degree in ASL.)
 62. Finding, hiring, retaining qualified interpreters is a challenge for some districts.
 63. Early intervention and on toward transition to real life outcomes that enable our DHH students to be successful are challenging and are areas where bias is evident.
 64. Need more specialized personnel areas. Need to work as a team providing consistency for student wide range of needs – individualize for student needs.
 65. As with all children, discovering (beyond hearing impairment) the best mode(s)/style(s) of individual student learning. (Universal Design for Learning, Differentiated Instruction)
 66. In both small and large districts there is a lack of resources and knowledge.
 67. Allocating appropriate funding resource(s) is necessary. The challenge to educate administrators on postsecondary institutional accountability.
 68. Resources across the state for all ages (i.e., Teachers of Deaf; SLP; etc.) – i.e., special education placement precludes pre-school and other services.

Section 3: Possible State Solutions

This section of the report summarizes possible state solutions that were identified by workshop participants in response to the following triggering question.

Triggering question: What are possible state solutions that could be taken to improve educational services to students who are DHH?

The state solutions were brainstormed in the spirit of possible improvements that could be initiated and are not assumed to be a comprehensive list. A more focused planning effort to thoroughly identify the issues and identify robust change strategies could be taken to construct a more comprehensive statewide improvement agenda.

Possible State Solutions:

1. Provide more community access for family support beyond age 3.
2. Collaborate for increased, specific DHH intervention for 3-5 years (resolve current funding barrier allowing single service preschool with all disabilities and disallowing additional DHH services – currently defined as “double-dipping.”)
3. Collaborate to increase incentives to parents to follow-up from screening and services.
 - a. Parent groups often are highly effective peer mentors; incorporate video and distance technologies;
 - b. Regionalized parent mentoring research shows that social networks are one of the most powerful influences on behavior and values.
4. Lobby for intensive specialized services for students who are DHH for 0-5 years to provide Language Rich Environments:
 - a. Deaf services and day care;
 - b. Deaf services and special needs preschool;
 - c. Regional Infant Hearing Programs to: (1) track and follow-up non-pass Universal Newborn Hearing Screening (UNHS); and (2) family-centered “coaching” in language developing activities in home or day care.
5. Lobby for increased funding for 0-5 services.
6. Lobby for capacity building at the university level.
7. Lobby more money for early detection. Use parents as a motivating force.
8. Gear funding initiatives towards increasing state/community monies to increase early language learning.
9. Provide opportunities for parents/infants (0-2) language interactions in preschool settings.
10. Use satellite office for ODE/OSD Outreach service located at Kent State University for Northeast Ohio and at Bowling Green State University for Northwest Ohio.
11. Utilize distance learning, Sorenson, other forms of technology to increase options and budge educational opportunities statewide.
12. Collaborate with higher education to improve assessment, teacher training, and collection of data.
13. Meet regularly to increase collaboration amongst key stakeholders and produce meeting results to send to the state level.
14. Meet more! Anything is possible if we work together.
15. Develop non-biased statewide assessments to improve instruction to track achievement.
16. Create an accountability system for outcomes (literacy, etc.) of DHH students.
17. Improve/create language rich environments for DHH children in daycare settings.
18. Collaborate with higher education. Higher education is excited to work with schools.
19. Conduct research in the state of Ohio. Pull together for larger research numbers.
20. Establish support and education from ODE to address the needs of DHH (through video, Interactive Video Distance Learning (IVDL), district with Comprehensive Continuous Improvement Planning).

21. Increase education and awareness for Regional Infant Hearing Program staff on social and emotional issues for families of children who are DHH.
22. Establish regional programs.
23. Regionalize programs for DHH preschoolers to allow for intense language, Accelerated Reading, speech interventions. Consider a push-in model to “regular education” preschools.
24. Use regional resources to access interpreting services.
25. Regionalize 16 regional DHH programs/schools – fully staffed with certified and licensed personnel including a school audiologist, etc.
26. Develop protocols to follow for appropriate educational placements based on individual needs.
27. Create greater access to and a common approach for school districts to be to use Ohio Achievement Test and Ohio Graduation Test results.
28. Review other Ohio service delivery models/products for guidance.
29. Implement centralized (through OSD?) services and organization for itinerant teachers and interpreters. Use to address adequate supports, preparation, and skills guideline-based utilization and assignments.
30. Identify ODE funding to support costs for EIPA. Identify a standard and implement over time. Identify and provide implementation incentives initially (\$) with cut-off score eventually.
31. Provide funds to assist educational interpreters in taking the written and performance EIPA tests.
32. Implement accurate reporting. For example, on the Educational audiologists data, report statewide data by license number to reduce duplication of counts.
33. Review other Ohio service delivery models/products for guidance. Example: “Project Direct” at the University of Toledo – consultation model for itinerant services in early childhood.
34. Consider defining regionalization as sixteen specialized schools (e.g., around the 16 SST regions) affiliated with OSD, OSB, & OCALI. Rationale:
 - a. Ensure consistency in the implementation of educational services guidelines (once they are developed);
 - b. Ensure availability of qualified persons and an array of these folks in a central/accessible location (available to any district in that region).