COMMENTS

- There is some feeling around the state that AEAs are not appropriately referring students who would be better served at ISD.

- Aren’t students losing out on learning time because at ISD they are in class and communicating all the time. We need to consider the student’s rights, also. Parents may not understand deaf culture. Parents need to see the Audism DVD.

- ISD has existed for 154 years and has been under the Board of Regents for 56 years. The AEAs have been under the State Board of Education for 34 years. The difference in funding streams between ISD and the AEAs has contributed to disagreements to work together. I strongly believe that it should be possible to merge the two into one organization to serve the deaf and hard of hearing so that we can balance the student’s education benefits with the availability of funds.

- Instead of trying to fix the ear, try involvement with modifying or coping and natural communication.
  - Deaf and hard of hearing children needs (whole child-child’s rights) and language development (communication, language, and literacy)
  - Support for health parents and families to get better language foundation (language is based on visual) and journey (grief process) support before children start school (effective communication supports education both ASL and English)
  - All supports for communication opportunities from language development to visual and audio technology (continuum of services/inclusive opportunities)
  - Administration and system support to deaf education teachers – collaborative partnerships training and professional development opportunities
  - Transition needs with unlimited opportunities

- Suggestions
  - Sign communication will be inclusive, recognizing the individual’s communication needs; respectful of each person’s sign language style; and flexible so that public discourse is fully accessible to everyone.
    - Deaf and hard of hearing students needs to develop their literacy skills.
      * How? Full access to ASL and English and all aspects of visual communication.
    - Key to student’s success is a family involvement in their education.
      * How? Providing exposure to the culture and language of deaf people.
      * Develop innovative, developmentally appropriate teaching strategies.
      * Uses of visual and audio technology within a positive, nurturing environment.
  - Establish clearly positioned deaf and hard of hearing children deaf centered education regional centers (bilingual-bicultural education).
    - Long before students reach their final years of high school, they need transition skills that will prepare them well for the future and the world of work.
      * How? Intensive internship program
      * After-school experience
  - Establish transition programs, host Academic Bowl competitions.
Recommendations

- Develop a system to support improved socialization for students.
- Develop a training structure for interpreters that allow them to pass the exam at a higher rate or pursue levels of licensure for elementary and secondary students.
- Strengthen the continuum of services across the state.
- Expand the availability of high tech equipment for students across the state.
- Finalize the expanded core curriculum and ensure training and support for its use across the state.
- My most pressing issue is the central coordination of hearing services. If this occurs through the AEA system, a major change in the organization of the AEA is required.
- A centralized data base of identified individuals must be maintained, a statewide central coordination of services should be organized rather than the regional basis that now exists through individual AEAs.
- Services should include a broad approach providing parents with state of the art options for their child when they are identified as hearing impaired. This should include hearing aids, cochlear implants, manual communication, aural rehabilitation, and total communication.

Strengths

- EHDI program is well managed, interfaces well with Early ACCESS. Consequently, children are being identified earlier and more children have a very realistic chance of developing auditory/oral skills similar to typical children.
- Quality of current staff and services at the Regent’s institutions (University of Iowa and Iowa School for the Deaf) and Department of Education institutions (AEA and LEA) is very high.
- Funding to purchase children’s hearing aids is in place.
- Continuum of services exists in populous areas of the state. The residential option is available for all students in the state.
- Flexibility of AEA and LEA services (ability to adjust the schedules of service providers to meet the child’s needs) is extremely positive.
- We have a variety of options from itinerant to self-contained so that the student’s needs and strengths are considered.
- Early identification.
- Mainstreaming students so they learn to be educated and work in the hearing world.
- Surgical procedures, cochlear implants that enhance student communication and learning.
- Financial resource to fund the various opportunities and needs.
- Students have opportunities to succeed at the general education level via initiatives while being supported by an expanded core curriculum as appropriate for a student who is deaf or hard of hearing. Children identified with hearing loss are eligible for an individualized program which includes a continuum of educational services and options; a continuum of communication options; a continuum of technology opportunities and options; a continuum of service providers (teacher of the deaf/hard of hearing, educational audiologist, educational interpreter, communication coach, etc.)
AEAs are designed as regional system infrastructure for equitable programming. This kind of programming promotes specialized staff which targets a model that includes both general education strategies and special education strategies (i.e., teachers skilled with strategies specific to deaf/hard of hearing students). With this model, teachers of the deaf/hard of hearing are one level away from individual school districts. If we are not included in the AEA model, we may be another tier away from school district initiatives which may include, but may not be limited to, professional learning (21st century leadership), committee (best practices for all learners), and work groups (quality programming for deaf/hard of hearing – linking the teachers and audiologists), integrated learning with school teams, etc. This may falter with a cohesion of services.

Early hearing detection and intervention (EHDI) has mandated screening and thus identified children with hearing loss at a much younger rate. This in itself has provided a critical vehicle for intervention services to be rendered at this young age. Like other initiatives, this program continues to be monitored and tweaked to improve services.

Parents and families are knowledgeable and empowered as active team members in determining educational placement/programming and opportunities for their children.

**Weaknesses**

- Interpreter licensure law has had a very negative effect on educational interpreters whose students don’t need reverse interpreting. A “perfect storm” condition now exists – interpreters are hard to come by and more children can use audition. Consequently, more students and programs are relying on audition for communication.
- Preparation, recruitment and retention issues. There is no teacher of the hard of hearing/deaf training program in this state. There is now only one audiology training program in the state. There is no concerted effort to recruit teachers or audiologists to replace upcoming retirements or to allow for expansion of services.
- Professional development for all teachers of the hard of hearing/deaf, audiologists is sporadic, and has no overall organization. Professionals are hungry for information about how to develop auditory/oral skills. There is no consistent program to help acquire these skills.
- Reluctance to acknowledge that the playing field has changed; the children with hearing loss in the future will be more auditory and will use technology interventions that promote audition.
- Rural nature of the state makes it difficult to provide high quality services for some students in their home school district or AEA.
- Interpreting services (this should be priority one to fix).
- Delay model – still not clear if we are using the DE rules correctly, that was confusing – LRE aspect also.
- Need more itinerants and more time for itinerants to provide the one-on-one service
- Continuum of services in rural counties
- Opportunities for students to interact more with others who are DHH in remote areas
- Professional development opportunities are not readily available, nor maximized, by teachers of the deaf/hard of hearing, audiologists, and other service providers. Although general education initiatives are important, problem solving related to how to utilize the general education initiatives to specifically support students who are deaf
and hard of hearing in the general education are often left to an individual provider (teacher of the deaf/hard of hearing). This collaboration and extended learning requires networking.

- Quality college educational opportunities for teachers of the deaf/hard of hearing are not readily available locally – addressing educational training for potential teachers of the deaf/hard of hearing nor ongoing professional development opportunities for current teachers of the deaf/hard of hearing. This has a great effect on securing individuals for positions now and will have a greater effect as individuals in our field begin retiring. University of Iowa providers programming for audiologists. Individuals are trained for the positions but retention in the state has been difficult. There are several interpreter training programs in the state (Kirkwood, Scott, DMACC, Iowa Western). There is a question as to the skills of graduating individuals being able to secure licensure upon program completion within the timeframe as outlined by temporary licensure.

- Programming options continue to be difficult within rural areas (site based programming). Programming options continue to be difficult for ISD placement when additional disabilities or behaviors occur.

- When specific concerns are identified statewide (i.e., educational interpreter licensure), guidance and problem solving have been primarily left to sole educational locations which it has affected. Although discussed at the State Lead level, individual agencies were required to design plans to provide support to current educational interpreters.

- Recognition and acceptance related to RESPECT for individualized education, communication, and service opportunities and options for individuals who are deaf or hard of hearing. The terms and needs of deaf and hard of hearing are not synonymous. Student and family factors have dramatically changed over the years given the educational services, communication options, technology options, and continuum of service providers.

- **Possibilities**
  - Predominately on-line teacher program (that may be affiliated with an already existing program?) that would allow Iowa to grow its own highly qualified teachers of the hard of hearing/deaf. This program needs to have a strong emphasis on education for students who are hard of hearing.
  - Real-time and online professional development for staff affiliated with providing services for children with hearing loss that is planfully designed and is delivered statewide. This could incorporate increased training for building administrators regarding hearing loss and other low incidence disabilities.
  - All children born with hearing loss hit the 1 month, 3 month, and 6 months markers for screening, identification and intervention. EHDI parent education and Early ACCESS providers continually improve parent education.
  - Service options are reshaped due to the realization that the attributes of children with hearing loss are changing. More students are functionally hard of hearing; fewer students are using any form of sign language.
  - Continue to systematically collect and analyze data surrounding children with hearing loss. This includes EHDI data, implantation and amplification data, research data, and achievement data.
Revising the licensure law so that it addresses the high skill need as well as the need for more basic (science vs. reading interpreting for example) – tiered approach to licensure

Clarification to all districts on the LRE and DE rules that were discussed and appear to be misunderstood

Connecting with the insurance lobby and legislators to expand resources for cochlear implants.

Incorporating an itinerant approach to all self-contained programs to ease transition (start in self-contained and work toward LRE so students gains the functional skills to interact with the hearing world)

Utilize technology for connecting students who are deaf in remote areas with teachers who specialize with this population as well as with each other

Utilization of qualified and committed individuals that represent the entire state (i.e., State Lead group) that coordinates and provides a network resource while having the support of DE and AEAs to move action forward – including professional development, access and technology issues, etc.

Utilization of model programming and expertise across the state to coordinate with colleagues regarding successes, targets, outcomes. This may include expertise from ISD as one of the many catalysts to be utilized; additional avenues may be explored with ISD as well as other model sites. Programming options may include solutions which are outside of the box for typical services – residential programming for behavior and multiple needs, co-teaching for targeted classes or clusters of students, polycom options for advanced classes to support learning in remote locations, ease of remove services for visual supports (interpreting, captioning), etc.

With ultimate goal of securing a post secondary program for training of teachers, Iowa builds a partnership with an existing college program to provide professional development for current staff (remotely, on site, etc.). Professional development will have a balance of educational methodologies but include a strong auditory component given the technology trends.

Additional technological advances will be explored to be cost effective for LEAs, AEAs for student access, professional development, etc.

LEA and AEA administration are knowledgeable and have an understanding specific to deaf and hard of hearing. If others are consultative to LEA and AEAs, biases should not be conveyed. Parent advocacy support like IA Hands and Voices, AG Bell, Guide By Your Side can be expanded more easily ACROSS the state instead of central locations.

Future

EHDI and Early ACCESS services are fully optional, fully and securely funded in each AEA and LEA. Hearing aid funding is also fully funded.

Appropriate and flexible services are provided in a child’s home district by the LEA or AEA staff.

Individuals who supervise LEA/AEA or DE directed components of a program for children with hearing loss are extremely knowledgeable about services to children with hearing loss.

View the future of children with hearing loss as independent from the state model for children with visual impairment, i.e., the model that was chosen for VI services is not the best model for services for children with hearing loss.
The role of the residential school is expanded to include both residential and day services for children with hearing loss who also have multiple impairments.

Interpreting licensure

Technology to connect students in remote areas with specialized teachers and with one another, also so itinerants use their time more with the students

Resource network that incorporates financial resources as well

Transition planning and training so students become employed after high school

Improvements in reading and math skills

Identify early outcomes – ensure early intervention is key for success

Parent to get rich information about services and options

Seamless delivery system (including barriers to sharing information or communication between agencies)

Have full access to Iowa Core Curriculum

Support the services needed within a state to support economy/costs

Children identified with hearing loss are eligible for an individualized program which includes quality services as appropriate with a teacher of the deaf/hard of hearing; educational audiologist; speech and language pathologist; support and related services of a communication coach; support and related services of an educational interpreter/remote services; support and related services of a captionist/remote services. Students may be able to access a more fluid model to ensure needs are being addressed and met depending on needs at a given time. This may include support services by the educational audiologist to more intensive services by a teacher of the deaf and hard of hearing.

Skill development, training and exploration of educational opportunities and technology opportunities and options will continue to be pursued to meet students' needs and professional learning – this may maximize on student's preference of auditory or visual/manual support as appropriate. This includes the recognition that one avenue may or may not be utilized for varied individuals. It also recognizes the need for support/problem solving on site while building capacity across the state.

Differences and opportunities for a student who is deaf or hard of hearing maximize on many factors which may include individualized access needs, student preferences and family desired outcome.

Within the LEA, AEA, and DE, data progress monitoring continues to determine the successes which have been demonstrated and target the needs and changes to capitalize success. It is recognized that the data currently collected does not include individuals who have a hearing loss that are educated solely in the general education without an IEP.

The AEA model, in conjunction with the LEAs, is recognized as an integral means for services. Services may be linked with ISD but are solely entered from ISD given strengths and possibilities as noted previously. There is the recognition that indeed there are individuals with an array of expertise that need to be maximized and utilized. There are current models that are successful which identify and address needs and issues while maintaining the rights of students and their families across the state.

I am concerned about what the itinerant teacher’s role is with the various students they serve and their instructional knowledge. Teachers of the DHH need to be highly qualified in the areas of language and literacy and I did not get that sense that the itinerant teachers
work in an instructional role. It seems more consultative to me, and, if so, I have grave concerns about the students not getting direct DHH instruction with reading and language development from the ITDHH. The areas of technology (e.g., cell phone, videophones) and hearing aid adjustment could easily be served by other school personnel on a consultative basis in the state if such a system was set up.

- I am more concerned about the fact that the educational interpreters in Iowa are of lower quality than the quantity. I have served on the Interpreter Task Force from the 1990s that helped lead to the implementation of the Interpreter Licensure Law and I feel that educational interpreters have had plenty of time to prepare for the passage of this July 2009 licensure law. However, there is an inequity of pay, support, and professional development opportunities for educational interpreters in Iowa. This also needs to be improved as well as Iowa educational systems and students having the BEST interpreters.

- AEA services/model for itinerant services of the DHH needs to be scrutinized and re-evaluated. Change from consultative model to direct instruction model.

- DHH students need regional and regular social opportunities.