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CONNECTIONS

A publication of the Center for Deaf and Hard of Hearing Education

***The Center for Deaf and Hard of Hearing Education Mission:
To promote positive outcomes for all deaf and hard of hearing children in Indiana
through information, services, and education.***

From the Director

Christine Moody



Welcome to a new year! We hope your holidays were a special time with family and friends – a time for remembering and a time for making new memories. Now, it's January and full steam ahead into 2018 as every department of the Center works to promote positive outcomes for Deaf and hard of hearing children in Indiana!

Now that the Center is well-established in the state, we are providing direct services to the maximum of our ability in the central office and seeking ways to utilize our regional offices more fully.

We are challenged to balance these direct services with the equally, if not more, important functions of sharing resources, information, and best practices with families and professionals alike. This role of providing the support and technical assistance to families and professionals across the state is ultimately the way that we will help to generate improved outcomes.

We can't do it alone. We work closely with so many entities toward this mission of promoting positive outcomes.

At identification and diagnoses, we work with medical and clinical providers and the Early Hearing Detection and Intervention program of ISDH. At the time of those critical years of early intervention, we work with FSSA/First Steps and private early intervention agencies around the state.

Beginning at the time of transition, prior to age three, we work with other assessment professionals, the local education agency and various public and private placement options. Once children are enrolled in school and become 'students', we continue to work with DOE, Office of Special Education, with the many Indiana Resource Networks (IRNs), Special Education Directors, schools and educational professionals around the state. **(Continued on page 2)**

From the Director (Continued from page 1)

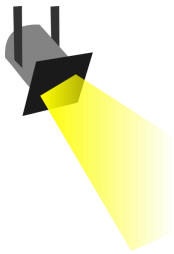
Throughout this process, the Center values that the family and the child remain the focus. Everyone involved needs to assess and monitor that the student is ultimately on the best path for positive outcomes.

How can we accomplish positive outcomes? Where do we get our authority? According to Gordon Training International which focuses on trainings for parents and teachers, there are four types of authority. There is authority based on your expertise, or earned authority. There is positional authority, which is tied to mutually understood or agreed upon duties or a job. It is sometimes called designated or legitimated authority. There is authority related to your relationships and informal contracts or personal commitments. And finally, there is authority based on power whereby you use power or hierarchy to control or influence outcomes.

I would suggest that the Center has primarily expertise or earned authority. To a lesser extent we have authority because the state of Indiana and a large stakeholder group created our 'job' and duties in the state. We can use these two types of authority to develop relationships and gain some informal authority as well. But we have no power authority.

So, accomplishing our mission mostly requires positive relationships. The Center must define, measure, and analyze outcomes, but only by working collaboratively to build capacity across all organizations will we together have the power to influence change.

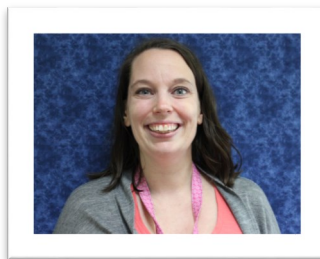
** Chistine Moody will be moving out of state this month with her family. Bethany Colson, Center Deputy Director, will be the Interim Director. The Center for Deaf and Hard of Hearing Education staff thanks Chris for her outstanding leadership while serving as the Executive Director, and we wish her all the best!*



Center for Deaf and Hard of Hearing Education

Staff Spotlight

Laura Burklew, Early Intervention Specialist



The Center for Deaf and Hard of Hearing Education is happy to welcome our newest Early Intervention Specialist, **Laura Burklew!**

Laura has a BS from Purdue and is near completion of her Masters of Public Health from IUPUI. She transferred to the Center for Deaf and Hard of Hearing Education from the Indiana State Department of Health HIV/STD/Hepatitis division, where she was the HIV Continuum Quality Manager.

Laura has a background in child development and family services, child health and public health. Laura will be providing developmental therapy/parent advising services throughout the state for Deaf and Hard of Hearing children who are currently enrolled in First Steps. Before becoming a First Steps provider, Laura was a service coordinator for Cluster G (central Indianapolis area) for six and a half years. Laura has a wealth of knowledge and we are excited to have her on our team of CDHHE Network specialized Parent Advisors.



SOUND ADVICE

Audiology

Hearing Aids Matter!

Results from the Outcomes of Children with Hearing Loss Study (OCHL)

A team of investigators at Boys Town National Research Hospital, the University of Iowa, and the University of North Carolina-Chapel Hill has been tracking the outcomes of preschool-aged children who are hard of hearing and wear hearing aids. Their findings indicate that the practices of early identification and consistent use of well-fit hearing aids promote positive speech and language outcomes for these children. The results of this study provide evidenced-based direction for best practice implementation and the team has created materials that highlight key findings and implications of their work for professionals and families. Downloadable pdfs including the handout below are available at www.ochlstudy.org.



Outcomes of Children with Hearing Loss
a study of children ages birth to six

Preschoolers with Mild to Severe Hearing Loss: Findings and Implications

	Main Conclusions	Implications for Parents
	Many children in the study developed language abilities like their hearing peers. However, the study showed that some preschoolers who are hard of hearing are at risk for delays in speech and language development, even when hearing loss is identified early in life. Children with poorer hearing levels are at greatest risk for delays.	<ul style="list-style-type: none"> ✓ Speech and language delays can be prevented or kept at a minimum. ✓ Early hearing aid (HA) fitting, consistent HA use and consistently talking with your child help prevent delays. Your efforts in these areas will pay off!
	HAs provide benefits for children with all degrees of hearing loss (even mild), especially when they are fit carefully and well. When HAs were fit so that speech could be heard well (audibility), language growth was strong.	<ul style="list-style-type: none"> ✓ Well fit HAs (with good audibility) benefit language for all children who are hard of hearing! Ask your audiologist to use methods that result in the best aided hearing. ✓ Listen to your child's HAs daily.
	The goal in fitting HAs is for children to hear as much speech as possible with their HAs (audibility). <i>Approximately 35% of children in the study had HAs that were not fit in a way that allowed speech to be heard well.</i>	<ul style="list-style-type: none"> ✓ Ask your child's audiologist about aided audibility. ✓ Aided audibility should be checked regularly (after hearing evaluations and earmold fittings).
	The best early language development was seen in children who got HAs before 6 months of age. Children fit later showed positive language growth once aided, drawing closer to peers by 6 years of age.	<ul style="list-style-type: none"> ✓ Provide HAs as soon as possible once hearing loss is confirmed. ✓ Recognize that early fitting is best, but later-identified children still benefit from HAs.
	Wearing HAs as much as possible has direct benefit for language and listening development. Strong language growth was seen in children wearing HAs for 10+ hours daily. Not all toddlers wear their HAs. Children typically become better at wearing HAs as they get older.	<ul style="list-style-type: none"> ✓ Ask your audiologist to share results of HA data logging, which checks how much your child's HAs are worn. ✓ Ask your audiologist, educators, and other parents for help in overcoming barriers to HA use and achieving consistent daily use.
	Parents who regularly involve their children in conversations have children with stronger language. Directing the child (<i>come here, sit down</i>) is less effective than sharing ideas.	<ul style="list-style-type: none"> ✓ Team with your educators to provide rich language exposure at home. ✓ Describe and chat more than you "direct."
	Children's growing language abilities along with benefit from HAs promoted changes in functional auditory skills (like hearing speech in noise).	<ul style="list-style-type: none"> ✓ Language and listening go hand in hand. Providing well-fit HAs benefits both language and listening development.
The dog barks loudly. 	Some preschoolers who are hard of hearing struggle the most with developing certain speech sounds and word endings, especially those that are hard to hear (like the s in barks).	<ul style="list-style-type: none"> ✓ Know that your child may need more practice to develop certain speech and language skills, especially those that are hard to hear.
<ul style="list-style-type: none"> ✓Audibility ✓Hearing aid use ✓Quality of talk 	Three factors benefit children's language development: 1) the boost they get from the HAs so they can hear speech (audibility), 2) their consistency of HA use, and 3) the talk they hear from adults.	<ul style="list-style-type: none"> ✓ Provide your child strong language experience by focusing on these key factors. ✓ Rely on professionals and other parents for support on your journey with your child.

EXPANDED ELIGIBILITY!

haapi

hearing aid assistance
program of indiana

administered by hear indiana



NO INCOME RESTRICTIONS



Children with hearing loss are eligible for HAAPI, if all of the following are true:

-  they are at least 3 years old.
-  a physician has provided medical clearance.
-  they have not graduated from high school.
-  they have not received funding from HAAPI in the previous three years.




Alyssa Rex, EHDI Program Director



As part of the Indiana State Department of Health, the Center for Deaf and Hard of Hearing Education works collaboratively with the EHDI Program and is happy to welcome their new director, **Dr. Alyssa K. Rex!**

Dr. Rex is the newly appointed Director for the Early Hearing Detection and Intervention (EHDI) Program. She was previously the EHDI Follow-up Coordinator. She is the administrative lead for all aspects of the EHDI program, including program and staff development and oversight, data reporting and quality for “1-3-6”, and grant activities.

Previously, Dr. Rex practiced pediatric audiology at ENT & Associates in Fort Wayne, Indiana and served as the Associate Director prior to relocating to Indianapolis.

Her passion has always been pediatric-focused, whether she performed comprehensive evaluations, provided rehabilitation services, implemented programmatic changes due to evidence-based practices in the clinical and/or public sector or collaborating with various organizations serving the community of deaf or hard of hearing children.



BRAIN BUILDERS' CORNER

Early Intervention

Resources for Early Language and Communication Development

Cindy Lawrence, Early Intervention and Transition Coordinator

In the last issue of Brain Builders, we shared an article about research on language development and an app that provides text messages for parents encouraging positive relationships and support for early learning at home. Parents can text "BLOOM" to 95577 to sign up. If you work with families of young children, please share this free program with them.

Another great resource has been developed by the Centers for Disease Control (CDC) especially for parents to track your child's development. Parents can download this new app that will track the child's development and also provide resources and information appropriate to your child's developmental level. Check it out at their website <https://www.cdc.gov/ncbddd/actearly/milestones/index.html>. There is a link to the app as well as printable materials providers can use and a quiz to test yourself on developmental milestones.

Children's brains grow rapidly, and language and communication development should be expected to develop generally at the same rate regardless of hearing levels, as long as the child is provided access to language. However, some children may develop in some areas more quickly than others. Our providers and partners through the Center are equipped with specialized knowledge, skills and resources to help parents avoid barriers and unlock the potential of each child.

If you know of a family in need of specialized early intervention services available through the Center for Deaf and Hard of Hearing Network, contact us at 1-855-875-5193 or email cdhhenetwork@isdh.in.gov.

We are also interested in expanding our pool of early intervention providers in order to offer services to every child identified with hearing loss in every part of the state of Indiana. We currently have providers who drive great distances if necessary to ensure families have access to our specialized services, and we would love to have more providers on our team as we continue to find newly identified children through the Early Hearing Detection and Intervention Program.

If you are interested in joining our CDHHE Network, please contact Cindy Lawrence at 317-232-0899 or clawrence@isdh.in.gov. If you have questions about qualifications to become a First Steps provider through our network please don't hesitate to contact us.





TACKLIN' Assessment

Therapists Actively Consulting & Knowledgeably Leading IN

Red Flags and When to Refer for Testing

Students who are deaf and hard of hearing (DHH) may be placed in school systems where there are not very many other DHH students, as DHH is a low incidence population in Indiana when compared to other Article 7 eligibilities. Here is some information that parents and educators can use to know when to refer a student for testing.

The first step is to make sure you and the individuals working with your DHH student expect the student to have achievement levels equal to their same-abled peers. Be sure you are familiar with typical developmental milestones for language and academics. Throw out any old myths and preconceptions, and continue to follow current literature and research.

When determining if you need further or additional testing, consider if the student has any birth or early risk factors, which may include prematurity, low birth weight, birth injury, sensory issues, chronic illness, oxygen deprivation, exposure to alcohol or drugs, malnutrition or neglect, neurological diagnosis, and/or syndromes. Additionally, listen to your student's parents. These parents know their children in all environments and work with the student one-on-one, whereas teachers will have multiple children they see. Parents often are more in tune with small changes with the student; therefore, it is essential parental concerns be addressed professionally and not dismissed.

As you observe your DHH student, there are some behaviors that should cause concern and not be ignored which may include the following:

- Language delays that are not improving with intervention
- Academic delays that are not responding to typical supports
- Behavioral difference from typical peers
- Attention struggles
- Sadness or withdrawal
- Isolation from class and peers
- Changes from previous performance in language, academics and/or behavior
- Growing gaps from age-appropriate levels
- Difficulties with sensory seeking or sensory avoidance
- Visual processing struggles or visual spatial disorder
- Fine or gross motor differences

Over-testing students is always a risk and is certainly to be avoided, so be sure you are reviewing previous available information, collecting ample data on student behavior and performance, observing the student in a variety of situations, referring the student to the RtI/MTSS teams when appropriate, and consulting with professionals who specialize in the student's areas of need. If those efforts prove unsuccessful, then referring a student for further testing may be the most appropriate action. However, keep in mind that for initial DHH referrals, these students should not be sent through RtI/MTSS team process, but receive a full assessment for eligibility considerations.

(continued on page 7)

Red Flags and When to Refer for Testing

(Continued from page 6)

Unfortunately, educators who are not in the specialized field of DHH often believe that some atypical behaviors are normal for DHH students. Given that DHH is indeed a low incidence population, more education on what is or is not a typical DHH behavior may be needed. A typically developing DHH student would not have language delays, statistically lower verbal IQ scores than performance IQ scores, sadness or depression, academic struggles, sensory processing challenges, visual processing struggles, or behavioral outbursts/challenges.

The Center is available to assist schools with in-service training, consultation, observations, and assessment at no cost to schools or families. Our assessment professionals have specialized skills in the area of deaf or hard of hearing education, including audiologists, speech language pathologists, a school psychologist, American Sign Language specialists, an occupational therapist, and a physical therapist. Our team works together to determine each DHH student's access to information and to identify any additional needs, providing schools and families with a comprehensive report with accompanying recommendations for consideration. The Center believes in a whole-child approach and partnering with schools and families to help students meet their optimum potential. Contact us with any questions at 317-750-0246, our main line for both phone calls and text messages.



Language and Literacy Corner

What is Language, and What is Speech?

In the Indiana educational system, there are two eligibilities representing speech and language therapy: Language Impairment and Speech Impairment. So what is the difference between language and speech and the services a DHH student may or should receive?

Let's start with the legal aspect from Article 7:

511 IAC 7-41-8 Language or speech impairment

Sec. 8. (a) A language or speech impairment is characterized by one (1) of the following impairments that adversely affects the student's educational performances.

Speech impairments (SI) that may include fluency, articulation, and voice disorders in the student's speaking behavior in more than one speaking task that are non-maturational in nature, including impairments that are the result of deficiency of structure and function of the oral peripheral mechanism.

Severe language or speech impairments may require the use of augmentative communication systems, such as:

- gestures;
- signed language;
- communication books or boards;
- electronic devices; or
- other systems determined by the student's case conference committee (CCC).

What is Language and What is Speech?

(continued from page 7)

Language impairments (LI) in the comprehension or expression of spoken or written language resulting from organic or nonorganic causes that are non-maturational in nature. Language impairments affect the student's primary language systems, in one or more of the following components:

- word retrieval
- phonology
- morphology
- syntax
- semantics
- pragmatics

The legal guidelines separate the differences between articulation and language based on the components of the two aspects of communication. There are some legal caveats in Article 7 that parents and educators do need to know:

A student is not eligible for special education and related services as a student with a language or speech impairment solely because the student's native language is not English.

Bilingual or multilingual speakers include students whose speech or language patterns deviate from those of standard English; and are characteristic of dialectal differences.

A student who is bilingual or multilingual may be a student with a language or speech impairment only if the impairment is exhibited in all languages spoken by the student.

Students who are deaf or hard of hearing or students with specific learning disabilities, who have language deficits or auditory processing difficulties, are not eligible for services designed solely for students with language impairments in lieu of services designed for:

- students who are deaf or hard of hearing; or
- students with specific learning disabilities.

If you are working with a bilingual deaf student, it is essential the case conference committee know the language and articulation skills for all languages before adding a LI or SI label. Additionally, ensure our DHH students are not being given a LI and/or SI eligibility in lieu of the DHH eligibility needed to gain the appropriate services. These students may, however, qualify for both DHH and LI if testing demonstrates a need for these eligibilities and the case conference committee agrees.

What is Speech?

Think of speech as how a language is articulated, where the accuracy as well as the intelligibility of communication is considered. For spoken language users, speech includes oral motor skills, voice quality, fluency, intensity and nasality. In a similar way, sign production includes accurate handshapes, orientation, movement and grammatical markers. This aspect of communication is important; however, a correct production of language should not be considered an indicator of the student's literacy potential.

What is Language and What is Speech?

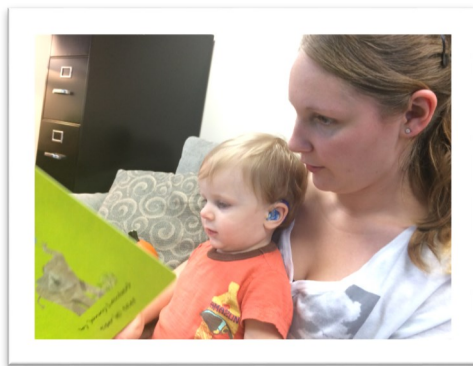
(Continued from page 8)

What is language?

Language is composed of two realms: Basic Interpersonal Communication Skills (BICS) and Cognitive Academic Language Proficiency (CALP).

Basic Interpersonal Communication Skills are language skills needed in social situations, such as the day-to-day language a student may use in the cafeteria, on the bus, at parties, playing sports or talking with their friends. These interactions are embedded in a meaningful social context, do not require specialized language and are not very cognitively demanding.

CALP is where many DHH students begin to fall through the cracks. Because they are very good at social interactions, their teachers and families may think their language skills are good. However, school success requires both BICS and CALP. Cognitive Academic Language Proficiency includes the ability to listen (see), speak (sign), read, and write about subject content area. It requires more than just vocabulary, but also the ability to use language to compare, classify, synthesize, evaluate and infer. Academic language is context reduced and often read from a textbook or taken in receptively from a long teacher lecture. This language requires thinking skills and the ability to use the frontal lobe of the brain effectively in language tasks. Students who struggle with these abilities are at risk for achieving academic proficiency and receiving an Indiana diploma.



What can you do to help your child succeed? Be sure you are monitoring both your student's speech and language skills. If you are working with a student using American Sign Language, be sure their language skills have been assessed by a native American Sign Language user who is an ASL specialist. In all your interactions with your child's educational team, focus on developing language, language, language! Proficient language will assist with literacy. Don't confuse language with articulation, and be sure the student is progressing through goals that are positively impacting on their educational growth at a reasonable rate.

William “Billy” Schwall, Compliance and Outcomes Coordinator



The Center is pleased to welcome **William “Billy” Schwall** to his position as the Compliance and Outcomes Coordinator.

Billy has worked at the Center since its inception developing a comprehensive, integrative data system from the ground up. In his new position, he will continue to provide data tracking and analysis to help guide Center strategic planning. He will formalize and analyze compliance and quality assurance initiatives for the Center. In addition, he acts as project manager for various projects and events. His role at the Center is directly linked to essential functions described in our founding statute and requires him to work closely with all Center departments. He works collaboratively with many external agencies to move Center initiatives forward, including ISDH, EHDI, DOE Office of Special Education and FSSA/First Steps,.

Billy has a strong knowledge of state systems and programs serving deaf and hard of hearing children. He has a Master’s of Business Administration degree from Davenport University specializing in management information systems and many years of related experience in Michigan and Indiana. He is also a Certified Deaf Interpreter and holds SKI HI Deaf Mentor Certification.

Billy has been married to Janet Schwall for 25 years, and they have two children, Britta and Jake, who both attend the National Technical Institute for the Deaf, a college of Rochester Institute of Technology.





FAMILY & COMMUNITY CONNECTIONS

Fun and Learning at the 2017 Technology Fair

Sandi Lerman, Family and Community Education Liaison

A huge **thank you** to all the families, professionals, and vendors who participated in the Center for Deaf and Hard of Hearing Education's first **Deaf and Hard of Hearing Technology Fair!** Approximately 75 technology enthusiasts gathered on a rainy Saturday in November for this special event at **Launch Fishers**, a collaborative co-working space for innovative, high-impact entrepreneurs in Fishers, Indiana.

It was the perfect venue for our featured guest speaker, Shireen Hafeez of **Deaf Kids Code**, who provided a hands-on "Next Generation Start Up" workshop for the teens. Parents and professionals browsed vendor booths and learned about the latest technology serving deaf and hard of hearing children, while the younger kids worked on art and technology projects.

A highlight of the event was a special presentation by Dr. Chad Ruffin using virtual reality technology to simulate the inside of the human body. Dr. Ruffin, one of the world's only congenitally deaf surgeons, challenged the teens to work hard and focus on their strengths and talents to reach their potential in today's high-tech world.

We're so glad that the event was a success, and we look forward to planning more family events for 2018!



Family Events and Activities

Family Online Chat Group

FOR PARENTS OF DEAF AND HARD OF HEARING CHILDREN



Family Online Chat Group
FOR PARENTS OF DEAF AND HARD OF HEARING CHILDREN
LUNCH & LEARN - PARENT SUPPORT - IDEAS & INSPIRATION
LOG IN/PM: WWW.FACEBOOK.COM/CDHHE
11AM - 12PM

2018 TOPICS

January 12:
Parenting Adopted Deaf/HH Children

February 2:
Transition from IFSP to IEP (age 3)

March 2:
Transition to Adulthood (age 14 - 21)

April 6:
Parenting in the Digital Age:
DHH Technology and Internet Safety

Facilitated by Sandi Lerman, Family and Community Education Liaison

- The Online Chat Group is accessible from any device with internet connection - 11 a.m. to 12 p.m.
- The Online Chat Group is anonymous; personal info is not visible unless you choose to share.
- To join the chat, visit our Facebook page at Facebook.com/CDHHE, and click the posted link.
- LIKE our Facebook page for announcements about the Chat Group and other family events!
- If you are not on Facebook, contact Sandi Lerman for sign in link at least 48 hours in advance.

Questions? Contact Sandi Lerman: SLerman@isdh.in.gov; 317-232-2826

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Prepare for Success - Life After High School



**Are you prepared for your future?
Come and learn!**

Hosted by:
Indiana Deaf and Hard of Hearing
Transition Alliance

Save the Date: Monday, March 19, 2018
Location: Indiana Government Center South
Indianapolis, Indiana
Contact: IndianaDHHtransition@gmail.com



Parent & Child PLAYGROUP!



PLAY

CONNECT

LEARN

Monthly Topics Include:

- * Outdoor Play *
- * Communication Opportunities and Strategies *
- * Importance of Play *
- * Transition to School Age *
- * Toys: Back to the Basics *
- * Self-Care for Parents *
- * Potty Training *
- * All about Reading to Littles *
- * Indiana and National Resources *
- * Parent & Child Temperament *
- * Male Role Models *
- * What Comes Before Words? *
- * Routines: Why Routines are Important *
- * Audiology: People & Vocabulary *

Come together to meet with other families who are raising a deaf or hard of hearing infant or toddler, ask questions, and, of course, have fun! All family members and friends involved in your child's life are welcome.

1st Saturday of each Month
(Some exceptions for State Holidays)
Ages: Birth to 5 years old
From 10:00 am to 11:30 am

Raney South, Room 126
1200 E. 42nd Street, Indianapolis, IN 46205

Kjari Newell: knewell@isdh.in.gov 317-232-0690

*Please RSVP Monthly.
If no RSVPs are received by Wednesday before, Playgroup will not meet.

Family Events and Activities



2018 EHDI Family Conference

Hosted by Indiana Hands & Voices



Saturday, March 3rd
New Hope Presbyterian Church
Fishers, IN 46037
(126th Street & Brooks School Road)

*The conference is FREE for parents & caregivers of deaf and hard of hearing children.
*Lunch & snacks are provided for all adults & children.

*Childcare with a variety of interactive activities; all children must be preregistered @ www.inhandsandvoices.org/store/p19/2018_Conference_Childcare.html

8:45am to 9:15am Check-in for Conference & Childcare
9:30am to 10:45 Keynote Speaker: Anita Dowd
10:45am to 11:45am Networking Activity
11:45am to 1:00pm Lunch and Call on Exhibitors & Vendors
1:00pm to 2:00 Dr. Ryan Mitchell
2:00 to 2:15 Cookie Break
2:15 pm to 3:00 Dad Panel
3:00pm to 3:30 Childcare Pick-up

For more information and to register, visit www.inhandsandvoices.org
Questions? Email inhandsandvoices@gmail.com

SOUTHERN INDIANA Hands & Voices Upcoming Events

Join us for Deaf/Hard-of-Hearing Story Time at three Southern Indiana locations. Story time and activities will be open to all children but will be tailored for children with hearing loss. We will have visually and sensory stimulating stories, crafts, games, and activities as well as educational information and resources for parents and caregivers.

When: Saturdays, January 6, 2018 and February 3, 2018

Time: 10 a.m.-12 p.m.

Where:

New Albany-Floyd County Public Library
180 West Spring St.
New Albany, IN 47150

New Albany Story Times will occur every first Saturday of the month unless further notified.

When: Saturday, February 3, 2018

Time: 2:00 p.m.-4:00 p.m.

Where:

Jeffersonville Public Library
211 E Court Ave.
Jeffersonville, IN 47130

Jeffersonville Story Times will occur every first Saturday of the month unless further notified

When: Saturday, January 20, 2018

Time: 10 a.m.-12 p.m.

Where:

Harrison County Public Library
105 North Capitol Ave.
Corydon, IN 47112

Corydon Story Times will occur every third Saturday of the month unless further notified. There will not be a Story Time in February.

For information about any of the story times, please contact...

Laura Ryan

502-528-0119 (Call or text)

lryan@isdh.IN.gov



**For more information about
Indiana Hands and Voices
events for families, visit the website**

www.inhandsandvoices.org



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