

**The Center for  
Deaf and Hard of Hearing Education (CDHHE)**

**Transition Plan  
(2012)**

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## Executive Summary

The Center for Deaf and Hard of Hearing Education (CDHHE) was established in 2012 with the purpose “to support parental choice, including the full continuum of communication options (including American sign language, other forms of sign language, cued speech, listening and spoken language (oral), or any combination of these skills)” and with the goal “to ensure that children who are deaf and children who are hard of hearing acquire optimal language skills and academic abilities, regardless of the mode of communication used” (IC 20-35-11).

The legislation required the Office of Management and Budget (OMB), in consultation with the Indiana School for the Deaf (ISD), the Department of Education (DOE), the State Department of Health (ISDH), the Office of the Secretary of Family and Social Services (FSSA), stakeholders representing various interested parties, and the public, to submit a transition plan to implement and administer the CDHHE to the State Budget Committee by October 1, 2012 (IC 4-3-22). In compliance with these requirements, OMB has consulted with the state agencies, hosted stakeholder meetings and held three public meetings (June 18 in South Bend, June 19 in Bedford and June 20 in Indianapolis). Additionally, OMB created a webpage to post updates and an email address ([CDHHE@OMB.in.gov](mailto:CDHHE@OMB.in.gov)) to collect public comment. OMB received many thoughtful and creative ideas including the idea of regional technical assistance and support for early intervention and school corporations statewide. This plan was written with the statutory requirements of the CDHHE as the foundation. This plan expands on these requirements with the sections “CDHHE Guiding Principles” and “Center Duties” which were written almost entirely by the stakeholder group.

The proposed CDHHE is designed to support parental choice by serving parents of children who are deaf and hard of hearing and professionals who work with those children from birth through school exit. Hearing loss can adversely affect a child’s communication, language, social, and academic skills. When identified early, and in cases where early intervention and educational services are warranted and applied without delay, a child who is deaf or hard of hearing has good potential to acquire language and academic skills on par with same age peers. To this end, the CDHHE would act as the primary resource and connecting link for early identification of hearing loss in babies, family support programming, select early intervention and school-age services, training, and technical assistance to early intervention and education professionals, and post-secondary transition activities. To enhance the likelihood of positive long-term outcomes, the CDHHE would follow individual children, whose parents have provided permission to do so, from the point of not passing newborn hearing screening and, if identified to be deaf or hard of hearing, through school exit.

The CDHHE, as proposed in this plan, would have a statewide presence with locations and staff in five regions of the state and would receive support and operational oversight from the ISDH.

## Center for Deaf and Hard of Hearing Education (CDHHE) Purpose

As stated in Indiana Code:

The purpose of the CDHHE:

*“...is to support parental choice, including the full continuum of communication options (including American sign language, other forms of sign language, cued speech, listening and spoken language (oral), or any combination of these skills).” (IC 20-35-11-3)*

To fulfill this purpose:

*“The center shall carry out the following duties in an unbiased manner to ensure that children who are deaf and children who are hard of hearing acquire optimal language skills and academic abilities, regardless of the mode of communication used:*

*(1) Monitoring and tracking the identification, early intervention, education, and successful transitions of children who are deaf and hard of hearing from birth through twenty-one (21) years of age and who are enrolled or preparing to enroll in early intervention services, preschool, elementary, or secondary school.*

*(2) Developing student learning opportunities.*

*(3) Providing family support.*

*(4) Developing child assessment service models, consistent with federal and state early childhood intervention and special education law, for the following:*

*(A) Audiological assessments.*

*(B) Social and developmental assessments.*

*(C) Communication (including language) assessments.*

*(D) Academic achievement assessments.*

*(5) Providing classroom assessments of instruction, acoustics, and other environmental aspects.*

*(6) Assessing professionals who provide students with sign language interpreting, oral interpreting, cued speech transliteration, and captioning services.*

*(7) Providing consultation to school corporations in providing services to students who are deaf and students who are hard of hearing.*

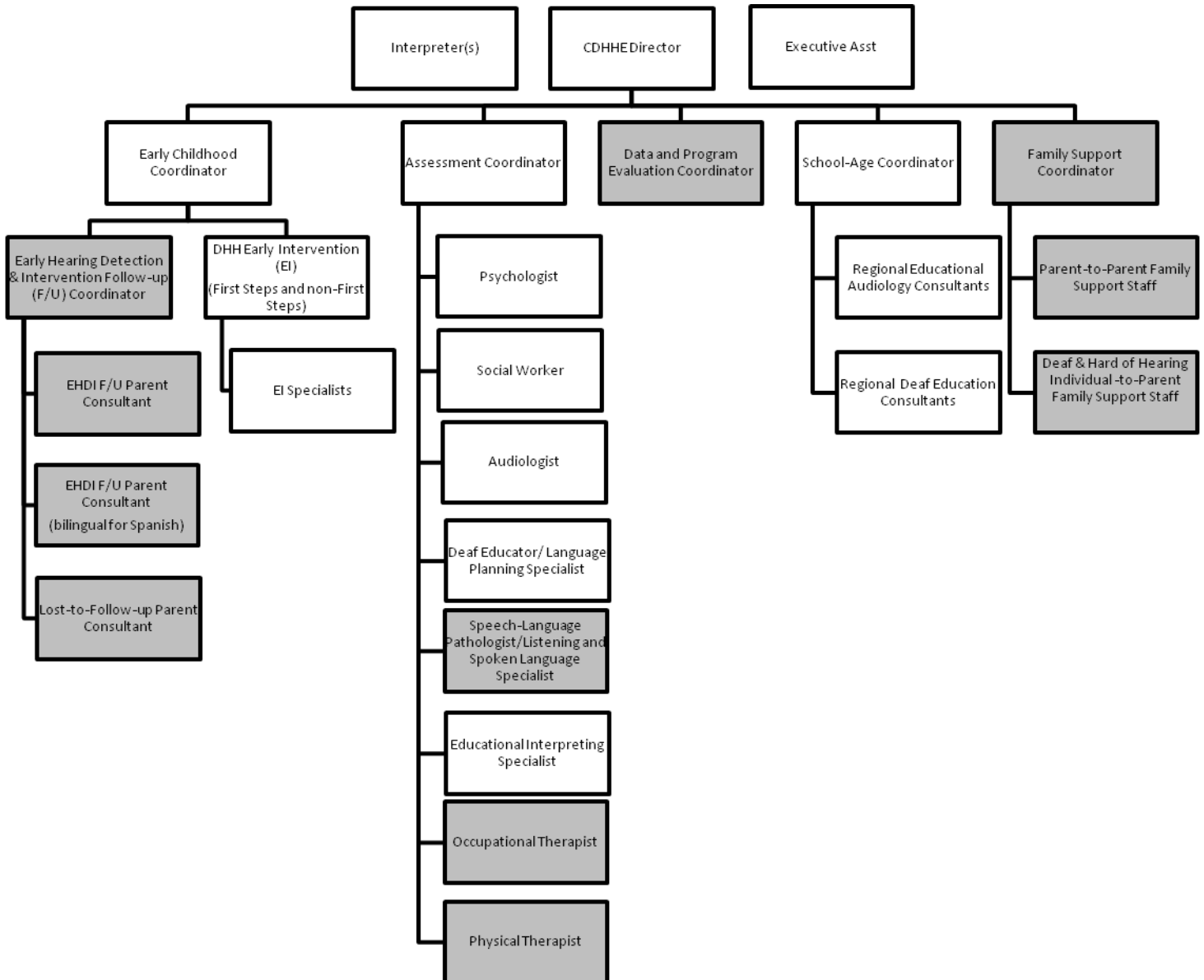
*(8) Acting as a liaison with all state agencies that provide services to individuals who are deaf and hard of hearing, including the department of education, the state department of health, the family and social services administration, and the Indiana School for the Deaf.” (IC 20-35-11-4)*

## CDHHE Guiding Principles

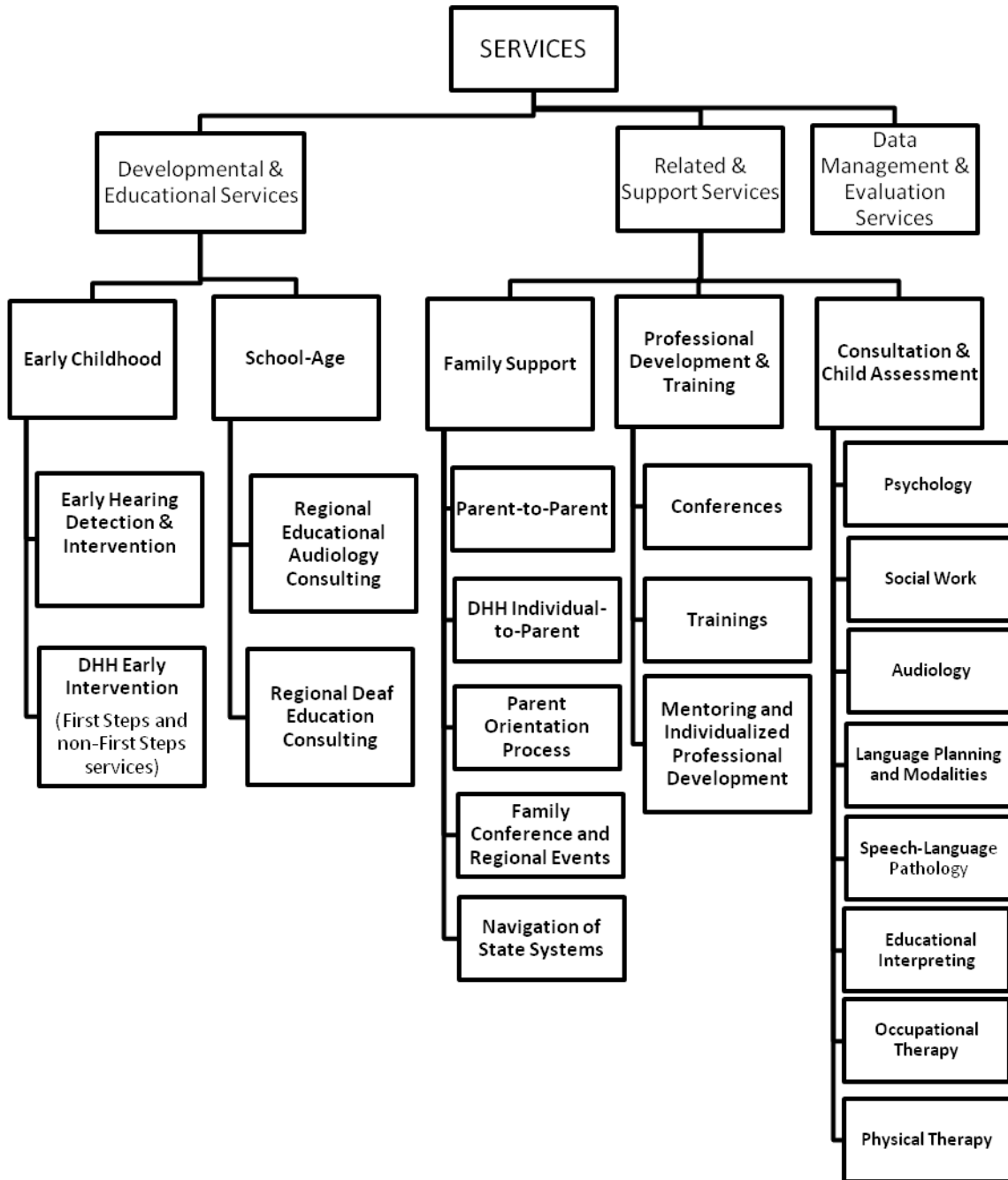
The CDHHE will:

1. Provide information regarding all communication and language opportunities to support parents/primary caregivers in making informed decisions based on the child/student's unique needs and the family's priorities and values.
2. Honor the child/student as an integral part in any decision making process.
3. Respect, welcome, and support children and their parents/primary caregivers across geographic locations, communication preferences, languages, and cultures.
4. Honor each child's right to acquire optimal language skills and academic abilities.
5. Demonstrate a seamless collaborative model when working with parents/primary caregivers, schools, other agencies, and providers including the deaf, hard of hearing, and hearing communities.
6. Provide comprehensive, evidence-based, and objective information, resources, and services for auditory, visual, tactile, and instructional best practices to deaf and hard of hearing children, parents/primary caregivers, professionals, and programs.
7. Provide expert leaders who embrace and practice the tenets of cultural and linguistic diversity.
8. Manage the use of tracking and monitoring systems for individual child/student and program performance to guide state, local, and individual services, programs, resources, and professional training as a priority of the Center.

# CDHHE Organizational Chart



# CDHHE Services



## CDHHE Duties

The following section details the CDHHE duties based on the original duties outlined in IC 20-35-11-4 (see CDHHE Purpose section on page 3).

The scope of the Center for Deaf and Hard of Hearing Education includes all children who are deaf and hard of hearing from birth through the school year in which a student becomes twenty-two years of age (per Article 7) and who is enrolled or preparing to enroll in early intervention services, preschool, elementary, or secondary school. This scope is applicable to all sections of this plan and every reference to children/students.

### **1) Monitoring and tracking the identification, early intervention, education, and successful transitions of children who are deaf and hard of hearing.**

#### Rationale:

- a) To enhance the long-term success of Indiana children/students who are deaf and hard of hearing through development of strong language and academic foundations prior to kindergarten.
- b) To ensure that all children/students who are identified receive access to appropriate interventions/education.
- c) To alert the CDHHE when academic/social/language progress and growth and follow-up services are not occurring as expected for individual children/students who are deaf and hard of hearing.
- d) To assist the CDHHE and its stakeholders in the use of performance metrics in evidence-based decision-making.

#### Functions:

- a) Develop a tracking system with design prompts and validations that allows CDHHE staff to follow individual children from screening through school exit. Examples of areas that should be targeted for tracking including all developmental (including language) and academic domains, academic progress, and audiology follow-up.
- b) Use the tracking system to:
  - i) Identify demographic characteristics including diagnoses and additional disabilities, hearing loss information, language preferences, communication modalities, changes in communication methodologies, accommodations used, use of educational interpreting services, and related services.
  - ii) Monitor individual developmental and academic performance of child outcomes.
  - iii) Promote seamless services and transitions and prevent children from being lost to follow-up.
  - iv) Reduce the risk of children foregoing critical early intervention and educational services necessary for school success.
- c) Develop data sharing plans between the CDHHE and State agencies that specify aggregate and child/student-specific data elements and methods for legal access to data (e.g. parent consent forms, invited participation of CDHHE to Individual Family Service Plan (IFSP) and Case Conference (Individualized Education Program [IEP]) meetings) and procedures for gathering and sharing these data (e.g. electronic data entry, electronic transmission, shared electronic file information).
- d) Act as a centralized referral point for First Steps System Point of Entry (SPOE) personnel, school corporation, and parents/primary caregivers to use to access resources and services through the CDHHE.



- e) Analyze data to evaluate and monitor individual and statewide progress of children who are deaf and hard of hearing.

## **2) Providing Family Support**

### Rationale:

- a) To ensure that resources and information are shared with the parents/primary caregivers in a comprehensive, unbiased, and consistent manner that supports informed parent and student choice.
- b) To ensure that appropriate support is available to all parents/primary caregivers through formal family support programming provided by appropriately trained professionals, parents/primary caregivers of children/students who are deaf and hard of hearing, and individuals who are deaf and hard of hearing.
- c) To educate parents/primary caregivers through information sharing, support and modeling so parents/primary caregivers will understand the critical role a parent has in their child's development and education as well as creating avenues to success in reaching their desired outcomes.

### Functions:

- a) Offer comprehensive, unbiased, timely, and consistent resources, information, and emotional support to parents/primary caregivers.
- b) Ensure through collaboration that all parents/primary caregivers of newly identified children who are deaf and hard of hearing have the opportunity to be directly exposed to all possible options that are available.
- c) Ensure formal and informal family support programming is available statewide using a variety of delivery methods to parents/primary caregivers.
- d) Educate and assist parents/primary caregivers in the identification of and connection to specialized professional services and providers.
- e) Educate parents/primary caregivers of the importance of partnering with professionals, rather than acting as recipients of a service, in their role as their child's primary caregiver.
- f) Provide parents/primary caregivers with information on assistive and instructional technology including: classroom instruction, academic and related assessments, visual access, acoustics, selection/maintenance/use of assistive listening and visual technology, and accommodations for communication, language, and instructional access (e.g. interpreters, captioning, note-taking, visual alerting devices, and other aspects of the school environment).
- g) Inform parents/primary caregivers about current research and practices related to cognitive development and language acquisition.

## **3) Developing and implementing service models to guide assessments and/or provide resources for assessments for children/students who are deaf and hard of hearing consistent with federal and state early childhood intervention and special education law.**

### Rationale:

- a) To promote appropriate assessment of children by qualified professionals for the purposes of eligibility determination, language and goal planning, placement considerations, monitoring performance, and identifying additional learning challenges and developmental needs.

- b) To provide resources to help early intervention (birth to three) programs and school corporations build capacity to meet the unique needs of children who are deaf and hard of hearing.

Functions:

- a) Assessment Principles that apply to all Domains:
  - i) Facilitate initial and ongoing evaluations in the child/student's native language and in the mode(s) of communication that are normally used by the student, such as sign language and/or oral language, that are consistent with best practice standards in each domain area (e.g. audiology, social/developmental, communication [including language], academic).
  - ii) Offer assessments by highly qualified professionals with expertise and experience consistent with each child/student's unique profile, language preference(s), communication abilities, and capacity to identify other disabilities affecting communication, language, and academics.
  - iii) Ensure that the CDHHE's assessment models are compliant with current State and Federal laws and work collaboratively with First Steps' Assessment teams and local school corporations, as appropriate, to combine CDHHE, early intervention, and school expertise for the benefit of the child/student.
  - iv) Connect parents/primary caregivers to vision providers and other specialists, upon request.
  - v) Inform local early intervention (birth to three), school corporations, and parents/primary caregivers about current research and practices relative to cognitive development and language acquisition.
  
- b) Audiology Assessment:
  - i) Develop an educational audiology model and offer educational audiology services for the purpose of ensuring educationally-relevant assessments and accessibility to the educational environment.
  - ii) Develop a model for evaluating technology that children/students are using in the classroom (e.g., FM systems owned by the school corporation) in conjunction with personal devices.
  - iii) Work with local early intervention (birth to three) and school corporations, upon request, to enhance practices related to monitoring the function of personal devices and with clinical audiologists and parents/primary caregivers as issues related to device function arise.
  - iv) Monitor statewide audiology services to children/students to promote appropriate management from identification through intervention.
  - v) Communicate information regarding the child's hearing status with the child/student's physician(s) and personal audiologist, as needed and provided that there is a signed parent release.
  - vi) Serve as a resource or connect parents/primary caregivers to resources regarding current and developing hearing technologies and assistive devices, upon request.
  
- c) Communication & Language Assessment:
  - i) Provide communication and language assessments in the child/student's native language and in the mode(s) of communication that are normally used by the student, such as sign language and/or oral language.
  - ii) Assess ability and progress as appropriate to that child/student in the following areas: spoken and/or signed language; semantics, syntax, vocabulary, sign production and/or phonology and articulation; receptive, expressive, and pragmatic language; and functional listening.

- iii) Partner with local early intervention (birth to three) and school corporations to enhance capacity for provision of valid communication and language assessments to children/students who are deaf and hard of hearing, upon request.
- d) Academic Assessment:
  - i) Provide guidance in assessment and progress monitoring of academic and related areas, as appropriate, pertaining to the needs of children/students who are deaf and hard of hearing.
  - ii) Assess and support schools' knowledge and implementation of appropriate accommodations for access to instruction, and statewide and local academic assessments as indicated on individual students' Individualized Education Program (IEP), upon request.
- e) Cognitive Assessment:
  - i) Develop guidelines and provide guidance, upon request, on assessment of cognition including critical thinking skills, such as executive function and attention, and information regarding the validity of verbal and non-verbal IQ results in children/students who are deaf and hard of hearing.
- f) Social-Emotional Assessment:
  - i) Connect children/students and their parents/primary caregivers to social-emotional development and mental health expertise specific to children/students who are deaf and hard of hearing, as needed.
  - ii) Maintain a list of psychologists and mental health experts in Indiana who have experience working with children/students who are deaf and hard of hearing and their parents/primary caregivers.
- g) Access Technology Assessment:
  - i) Guide and/or provide resources for assessments of assistive and instructional technology needs of children/students.
  - ii) Provide information and guidance to local early intervention (birth to three) and school corporations on access technology including captioning, relay interpreting, FM systems, etc., upon request.

#### **4) Developing child/student learning opportunities**

##### Rationale:

- a) To promote evidenced-based practices for development of language and academic skills to enhance each child/student's opportunity to acquire age or grade-level functioning in childhood and school.
- b) To promote supportive environments which provide full communication and language access, according to that child/student's needs, in all aspects of educational programming (academic, non-academic, and extracurricular) for children/students who are deaf and hard of hearing.
- c) To promote the development of self-understanding, self-advocacy, and self-esteem so that children/students who are deaf and hard of hearing are prepared to navigate school, transition, and post-secondary life.

##### Functions:

## **Functional**

- a) Promote regional and statewide activities that support language, social skill development, and identification with others who are deaf and hard of hearing by bringing children/students together through a variety of social opportunities.
- b) Develop and provide guidance for local early intervention and school corporations that addresses educationally-related issues associated with a child/student being deaf or hard of hearing.
- c) Develop, organize, and facilitate relevant educational opportunities for providers and parents/primary caregivers of children/students who are deaf and hard of hearing.
- d) Work with First Steps, the Department of Education, and the Indiana School for the Deaf to develop tools that provide guidance regarding children/students who are deaf and hard of hearing as part of the Individualized Family Service Plan (IFSP) and Individualized Education Program (IEP) processes such as a Communication Plan or "Special Considerations."

## **Developmental/Academic**

- a) Collaborate with the Department of Education and local school corporations to support appropriate implementation of state-designated common core standards [or alternative academic achievement standards when applicable per the Individualized Education Program (IEP) for students who are deaf and hard of hearing and assure age/ grade appropriate interventions.
- b) Promote evidence-based best practices for language development and literacy for children/students who are deaf and hard of hearing at age/grade appropriate levels.
- c) Collaborate with First Steps, the Department of Education, local early intervention (birth to three) and school corporations to support these entities in ensuring that all children/students who are deaf and hard of hearing have the opportunity to access the full continuum of programs and services through the IFSP/IEP process.
- d) Promote American Sign Language (ASL) as a foreign language course offered in public and non-public schools including consultation with the Department of Education to consider development of ASL teacher standards.

## **5) Consultation to early intervention providers (birth to three) and school corporations in providing services to children/students who are deaf and hard of hearing**

### Rationale:

- a) To enhance child/student developmental, language, social, and academic outcomes.
- b) To provide opportunities for service providers and related professionals to obtain relevant ongoing professional development and technical assistance specific to children/students who are deaf and hard of hearing.
- c) To support effective program evaluation and planning for children/students who are deaf and hard of hearing.
- d) To increase access to language, instructional curricula and incidental learning opportunities by increasing and enhancing direct communication and interaction through visual and auditory modalities so that children/students achieve developmental and academic performance levels consistent with their cognitive ability.

Functions:

- a) Develop a regional consulting model using evidenced-based practices as a guiding principle for provision of services and programming statewide.
- b) Develop and coordinate an in-service training plan for providers who serve children/students who are deaf and hard of hearing.
- c) Create developmental/educational service guidelines to promote consistent practices and services across the state.
- d) Conduct a statewide needs assessment to identify additional gaps in services and training needs of providers.
- e) Develop and maintain web-based resources for service providers and consumers.
- f) Work with early intervention providers (birth to three) and school corporations, upon request, to build program capacity in areas of need such as: classroom instruction, academic and related assessments, visual access, acoustics, selection/maintenance/use of assistive listening and visual technology, and accommodations for communication and instructional access (e.g. educational interpreters, captioning, note-taking, visual alerting devices, and other aspects of the school environment).
- g) Provide or work with entities that provide professional development, support and assessment of:
  - 1) Professionals who provide students with sign language interpreting, oral interpreting, cued language transliteration, and captioning services.
  - 2) Educators, speech-language pathologists, and audiologists who provide students with educational, speech-language and audiological assessments, and ongoing services.
- h) Work with the Department of Education and school corporations, upon request, to assist in matching educational interpreter assignments to the needs of individual children.

**6) Act as a liaison to local school corporations and with State agencies that provide services to children/students who are deaf and hard of hearing, including the Department of Education, the State Department of Health, the Family and Social Services Administration, and the Indiana School for the Deaf.**

Rationale:

- a) To formalize interagency collaborations, shared programming, and exchange of information through Memoranda of Understanding (MOUs) to enhance services and outcomes of children/students who are deaf and hard of hearing.
- b) To facilitate a seamless system of State and local services for children/students who are deaf and hard of hearing, their parents/primary caregivers, and the providers who serve them.
- c) To work collaboratively and consistently towards improving the systems and services designed to serve children/students who are deaf and hard of hearing.

Functions:

- a) Establish the CDHHE as the statewide resource for educational consulting and assistance for children/students who are deaf and hard of hearing, their parents/primary caregivers, providers, and support for agencies supplying services to children/students who are deaf and hard of hearing and their parents/primary caregivers.
- b) Identify individual and shared responsibilities and identify gaps and resources through ongoing collaboration between State agencies (i.e. FSSA First Steps, FSSA Vocational Rehabilitation, DOE Special

Education Services, ISDH Early Hearing Detection and Intervention, ISDH Children's Special Health Care Services, and Indiana School for the Deaf), local early intervention providers (birth to three), and school corporations.

- c) Develop and implement a plan with short and long-term objectives for sharing individual and aggregate data among agencies.
- d) Work collaboratively with the Department of Education and school corporations to facilitate the use of fully accessible and universally designed statewide academic assessments.
- e) Create Memoranda of Understanding (MOUs) among agencies for serving children/students that delineate roles, responsibilities, exchange of information (including aggregate and child-specific data), and interagency collaborations.
- f) Participate through the CDHHE Director (or designated representative) on State and national advisory committees, councils, task forces, and work groups that impact children/students who are deaf and hard of hearing.
- g) Collaborate with Institutions of Higher Education and other professional entities to improve professional preparation of service providers and to advance current research.
- h) Partner with Institutions of Higher Education to study and understand best practices and the impact of the use of access services (e.g. educational interpreting) and access technology (e.g. FM systems) on the teaching and learning process.

## CDHHE Governance

The CDHHE will be a division of the Indiana State Department of Health (ISDH). The CDHHE Director will report to the Commissioner of the ISDH.

Benefits to CDHHE as a part of the ISDH governance structure:

- ✓ ISDH is a cabinet level agency which will give the CDHHE the profile within state government that statewide deaf and hard of hearing early intervention and education warrants.
- ✓ ISDH has a statewide presence with local health departments in all of Indiana's 92 counties.
- ✓ ISDH currently operates the Early Hearing Detection and Intervention (EHDI) program which works with hospitals and birthing centers to identify deaf and hard of hearing children as part of newborn screening and provides family support and connects parents/primary caregivers to early intervention services.
- ✓ ISDH has a record of successfully transitioning other programs and agencies to its governance structure.

The stakeholder process utilized for the development of this CDHHE Transition Plan was productive and useful. While this plan does not recommend that a new board or committee be implemented in statute, the continuation of an informal stakeholder process is advisable for future CDHHE leadership.

## Transition Timeline

### September-October

- Submission of the CDHHE Transition Plan to the State Budget Committee
- Post the CDHHE Transition Plan on the CDHHE webpage (PDF and American Sign Language “Vlog”)

### November-April

- Collaborate with the Indiana General Assembly regarding the CDHHE Transition Plan and budget
- Continue CDHHE planning process

### April-June

- Identify CDHHE regional locations
- Work with the State Personnel Department (SPD) to transition and fill positions
- Work with ISD, FSSA (First Steps), ISDH (Genomics & Newborn Screening [Early Hearing Detection and Intervention (EHDI)]) to transition services, materials (where appropriate), and staff from current entities to the CDHHE
- Work with OMB and IDOA to ensure timely transition to and opening of CDHHE locations
- Host update meetings with staff who will be transitioning to CDHHE

### July 1, 2013

- CDHHE opens



## CDHHE Proposed FY 2014-2015 Budget

CDHHE Proposed Budget	FY14	FY15
<b>Personal Services and Fringe Benefits (.1)</b>		
<b><u>Administration</u></b>		
Director		
Executive Assistant		
2 Interpreters		
<b><u>Developmental/Educational Coordinators</u></b>		
Early Childhood Coordinator		
School-age Coordinator		
Assessment Coordinator		
<b><u>Regional Offices</u></b>		
5 Audiologists (1/Region)		
6 Deaf Educators (1/Region + 1 Additional Central Region)		
Regional Support		
<b><u>Specialists</u></b>		
Deaf Educator		
Language Planning and Modality Specialist		
Deaf Educator (Early Intervention)		
Deaf Educator (Early Intervention)		
Psychologist		
Social Worker		
Referral and Intake Support Specialist		
<b>Total Personal Services and Fringe Benefits (.1)</b>	<b>\$2,080,174</b>	<b>\$2,080,174</b>
<b>Services by External Parties (Contractual Services) (.3)</b>		
Speech-Language Pathology		
Occupational Therapy		
Physical Therapy		
Audiology		
Program Evaluation and Data Coordination		
EHDI Follow-up Coordination and Support		
Family Support Coordination		
Annual Family Conference and Regional activities		
Parent to Parent programming		
Deaf and Hard of Hearing Individual to Parent programming		
Professional Development		
Regional Play Groups		
Regional Sign Language Classes		
Development and Management of Data Management System		

<b>CDHHE Proposed Budget</b>	<b>FY14</b>	<b>FY15</b>
Interpreter Services		
<b>Total Services by External Parties (Contractual Services) (.3)</b>	<b>\$735,848</b>	<b>\$885,848</b>
<b>Supplies, Materials &amp; Parts (.4)</b>	<b>\$122,315</b>	<b>\$108,865</b>
<b>Capital Assets (.5)</b>		
Audiology Equipment		
Furniture		
<b>Total Capital Assets (.5)</b>	<b>\$177,175</b>	<b>\$40,625</b>
<b>Administration &amp; Other Operating Costs, including Travel (.9)</b>		
In State Travel		
Out of State Travel		
<b>Total Administration &amp; Other Operating Costs, including Travel (.9)</b>	<b>\$55,000</b>	<b>\$55,000</b>
<b>Total Budget</b>	<b>\$3,170,512</b>	<b>\$3,170,512</b>
Budget by Funding Source:		
Reallocated Appropriation (Various Sources)	\$1,400,000	\$1,400,000
ISD (Outreach)	\$1,350,512	\$1,350,512
ISDH (EHDI)	\$420,000	\$420,000

## **State Agency Coordination**

In order for the CDHHE to be successful, the related state agencies must work collaboratively to achieve the CDHHE's mission. The CDHHE will establish Memoranda of Understanding (MOUs) with each of the state agencies in order to formalize this relationship. Below are the commitments made by each of the State agencies:

### **Department of Education (DOE)**

#### **Office of Special Education**

- Share student-specific data for students who are deaf and hard of hearing, as available to the Department of Education, including but not limited to: statewide assessment scores and Individualized Education Program (IEP) forms when provided with signed parent release of information for the purpose of tracking outcomes, progress monitoring, and planning for technical assistance to school corporations
- Share aggregate statewide assessment outcome data for deaf and hard of hearing student population
- Identify CDHHE as a resource for training, mentoring, and professional development for teachers in deaf and hard of hearing education
- Identify CDHHE as a resource for technical assistance related to individual students and school programs for students who are deaf and hard of hearing

### **Family and Social Services Administration (FSSA)**

#### **Division of Disability and Rehabilitative Services (DDRS)**

##### **First Steps**

- Share child-specific data for children who are deaf and hard of hearing, as available to First Steps, on the child's Individualized Family Service Plan (IFSP) when provided with signed parent release of information for the purpose of tracking outcomes, progress monitoring and planning for CDHHE technical assistance to early intervention professionals
- Share annual aggregate data on children who are deaf and hard of hearing (e.g. child count, early intervention service options, location/environment in which services are provided, exit information)
- Identify CDHHE as a resource regarding children who are deaf or hard of hearing
- Identify CDHHE as a partner in the provision of:
  1. Technical assistance to the First Steps program and its regional System
  2. Training, support and supervision (as needed) of early intervention professionals
  3. Parent support, education and facilitation of enrollment in services (as needed) to families
- Direct First Steps System Points of Entry to share information about the CDHHE including its central role in monitoring and tracking and assistance to professionals and parents of children who are deaf and hard of hearing birth through school exit

##### **Vocational Rehabilitation**

- Work with CDHHE to address the needs of students who are deaf or who are hard of hearing to ensure seamless post-secondary transitions

### **Indiana School for the Deaf (ISD)**

- Identify CDHHE as a resource and provide resources to CDHHE for training, mentoring, and professional development for early intervention providers and educators
- Identify CDHHE as a resource and provide resources to CDHHE for technical assistance regarding children and students who are deaf and hard of hearing and early intervention and school personnel
- Work with CDHHE to ensure collaboration of service offerings without duplication
- Work collaboratively with CDHHE to assess students that may be candidates for enrollment at the Indiana School for the Deaf (ISD)
- Share student-specific data for students who are enrolled at the Indiana School for the Deaf (ISD), including but not limited to: assessment scores and Individualized Education Program (IEP) forms when provided with signed parent release of information for the purpose of tracking outcomes, progress monitoring, and planning for technical assistance (as applicable to all Indiana school corporations)

## Stakeholder Group

Kim Bianco Majeri  
Bob Bowman  
Jodee Crace  
Debbi Davis  
Janice DeSanto  
Kelly DiBenedetto  
Dawn Downer  
David Geeslin  
Naomi Horton  
Gayla Hutsell Guignard  
Lisa Kovacs  
Cindy Lawrence

Rhonda Marcum  
Melody Marley  
Terri Miller  
Heidi Neuburger  
Nicole Norvell  
Teri Ouellette  
Amy Robbins  
Laura Scheele  
Grayson Swaim  
Jane Ellen Watkins  
Lucy Witte  
David Yurek

## Additional participants:

Julie Schulte  
Aileen Vasquez  
Carol-Lee Aquiline  
Carrie Tamminga  
Sarah Kiefer  
Melinda McGinley

## Stakeholder Support Team

Rhonda Tyree (external process expert/facilitator)  
Jay Innes (external content expert)  
Cheryl Johnson (external content expert)  
Gloria Downham (internal process expert)  
Gayla Hutsell Guignard (internal content expert)