CONNECTIONS

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

The Center of 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.

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From the Director

I had the privilege of leading our staff in our full-day retreat this past week, facilitating activities related to self-reflection as well as group reflection on the past occurrences and future plans for our center.

While we have three distinct program areas, we work diligently to assure there are no silos in our center, often teaming with those whose primary duties lie within an alternate program area. The activities within this day followed suit. One of our activities was creating a coat of arms split into three parts representing our achievements, our values and our future. Below are examples our staff created. The uniqueness of each design is evident, yet equally as evident are the similarities. What an honor it is to work among this group. Their passion for the children, families and professionals we serve is evident in all we do.













STAFF SPOTLIGHT

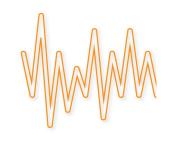


It is with pleasure that the Center welcomes Kelly Allison as our newest audiologist!

Kelly received her Bachelor of Science from Purdue University, where she studied speech, language and hearing sciences, and she completed her doctorate in audiology (Au.D.) at the University of North Carolina—Chapel Hill. She specialized in pediatric audiology as a Leadership in Education and Neurodevelopmental and Related Disabilities (LEND) trainee and completed her fourth-year externship at Cincinnati Children's Hospital Medical Center.

Kelly is originally from South Bend and is excited to be back home again in Indiana! She looks forward to working with a variety of professionals at the Center and serving families throughout her home state.





School Hearing Screenings: What to Expect

HOW are school hearing screenings completed?

- Several tones (frequencies) are presented through headphones
- The student may raise his/her hand or play a game
- For those unable to complete the standard task, other measures may be used
- Middle ear function (eardrum mobility) may also be checked using a quick test called tympanometry

WHAT are school hearing screenings?

- Quick tests used to identify individuals in need of further audiologic testing
- IC 20-34-3-14, Section 14.(a) states each school corporation is required to conduct periodic hearing screenings
- These are not comprehensive evaluations and do not diagnosis the presence of hearing loss

WHY do we need school hearing screenings?

- Close to 15% of school-age children exhibit some level/type of hearing loss
- Any degree of hearing loss can impact a child's speech, language and academic performance

WHEN are school hearing screenings?

- Grades 1, 4, 7, and 10
- Hearing screenings should be completed when a new student transfers into the school corporation or if there are concerns regarding a possible hearing loss, regardless of the student's grade

WHERE should school hearing screenings be completed?

- In a quiet area with minimal visual distractions
- Away from noisy cafeterias, gymnasiums, ventilation systems, or hallways
- A normal hearing individual should conduct a listening check 10 decibels below the screening level to ensure audibility over potential environmental noise

WHO performs school hearing screenings?

- Audiologists, speech-language pathologists, nurses or other specifically trained individuals
- Program managers who are unfamiliar with appropriate protocol or equipment should consult an audiologist



If notified that your child did not pass the hearing screening, have your child's hearing evaluated by an audiologist as soon as possible. Share the results with your school.





Our Early Intervention staff continues to develop their stills—both through professional development participation and Sibshop facilitation.





This August, several CDHHE Network Early Intervention providers took a road trip! The group attended a workshop sponsored by The Ohio State University titled, "All Hands on Deck: Promoting Family Involvement in Early Intervention for Children with Hearing Loss." In reflection, here are some of the take-home points from the presenters:

From Dr. Mary Pat Moeller:

- If families do well, children do well." (Luterman, 2001)
- Our job...support family Confidence and Competence
- Audibility matters for spoken language growth
- Support parents in providing rich and varied language input
- It's ABOUT ACCESS!!
- Universal Newborn Hearing is allowing for a new generation of collaborative research opportunities to examine early stages of development and the impact of early service delivery
- Expect resilience, even in later identified children

From Jareen Meinzen-Derr, PhD

- Recognize when language development does not match a child's ability (understanding potential)
- Novel therapeutic techniques that incorporate AAC strategies can provide children with additional tools in the toolbox



Sibshops offers an opportunity for siblings to meet one, sharing their personal experiences through interactive and engaging activities. Staff members, Cindy Lawrence and Kjari Newell facilitated a Sibshop in collaboration with the

Indiana Deaf-Blind project in August. The group played fun games and shared insights, discovering there were other siblings who shared the commonality of having a deaf, hard of hearing or deaf-blind child in their family. This was a unique avenue to support families in their journey. Interested in more information about Sibshops? Look here: https://siblingsupport.org/about-sibshops







The Underappreciated Powerhouse to Reading Comprehension Background Knowledge

Often when people think about reading, conversation centers around phonics, phonemic awareness, fluency, and vocabulary. Sometimes strategies designed to boost comprehension, such as learning to summarize or make a graphic representation of a text, are discussed. However, there is strong evidence showing that an important factor in comprehension isn't mastering strategies as isolated units/topics: it's how much knowledge a reader has of the topic and using text to teach strategies.

There exists a misconception that students need to learn to read before they can read to learn, or before they can acquire knowledge of the world through independent reading. World or background knowledge is key to reading comprehension and development. Omitting subjects such as history, science, and the arts takes away opportunities to gain world knowledge, which is part of learning to read or learning to understand what you read. Children need to begin to develop their knowledge from the world as babies and continue to build that knowledge through adulthood.

IDEAS TO ENCOURAGE DEVELOPMENT OF BACKGROUND KNOWLEDGE:

- ⇒ Read to children/students regardless of their age
- ⇒ Connect with experts on the book topic (virtually)
- ⇒ Take field trips (virtually and physically)
- ⇒ Provide frequent sensory experiences (eat, smell, feel peaches when reading James and the Giant Peach)
- ⇒ Relate book choices to content area, such as social studies
- ⇒ Parents of young children can devise activities to teach world knowledge such as nature walks or cooking together

- ⇒ Utilize the additional information in the book (author's notes, maps, recipes, activities, timelines)
- ⇒ Incorporate knowledge-boosting stopping points (don't front-load all new knowledge)
- ⇒ Have students learn through mentoring younger children
- ⇒ Discuss feelings in the books; expose students to other cultures
- ⇒ Have the students teach each other
- ⇒ Use picture books sometimes at all age levels

classroomclipart.com



Check out these links for additional information:

https://iowareadingresearch.org/

https://bit.ly/1i52A0b

https://www.readingrockets.org/article/building-background-knowledge



Therapists Actively Consulting & Knowledgeably Leading INdiana

Overview of the Vestibular System

One in 20 children have some type of vestibular dysfunction, while approximately one in two children with a severe/profound hearing loss have a vestibular dysfunction. Even children with moderate hearing levels or a unilateral hearing loss are at increased risk for vestibular dysfunction. So, what is the vestibular system, and what does it do?

Humans have eight senses. Most people can identify the original five senses: vision, hearing, smell, taste and touch. In more recent years, three senses have been added to the list: awareness of gravity and movement (vestibular), body/joint position (proprioception) and internal sensations, such as hunger and thirst (interoception). Each of these senses provides information about what the body is experiencing. Information about the body or environment enters through a receptor. For example, the retina in the eye is the receptor for vision. The information is then sent to the brain to be analyzed so an appropriate response can be made. For instance, if you are walking in the woods and come upon a large rock in your path, your eye will "see" the rock and send that information to the brain. Your brain will then decide if you should walk around or climb over the rock and it sends instructions to your body to complete the task.

The vestibular system gathers information about the head's position and movement in relation to the earth. It tells you if you are right side up, upside down, or falling over. The receptor for this information is called the vestibular apparatus and it is located deep inside the ear, next to and continuous with the cochlea. There is a vestibular apparatus for each side of the body (right and left) and each is about the size of a sugar cube. When the head/body moves (nodding, shaking, walking, jumping, twirling, etc.), the vestibular apparatus receives that information and sends it to the brain to be processed.

The main jobs of the vestibular system are to:

- A. Identify the position and direction of movement of the head
- B. Maintain balance
- C. Keep vision clear when the head is moving

The vestibular apparatus consists of three semicircular canals and two otolith organs (utricle and saccule). The semicircular canals are positioned 90 degrees to each other, like the corner of a box. This alignment allows the vestibular apparatus to sense angular or rotational movements occurring in any direction. The utricle and saccule sense horizontal and vertical movements.

The importance of the vestibular system cannot be underestimated! Good vestibular function is critical for the development of both motor and learning skills and is necessary to keep us physically safe as we move around our world.

- 1. Li CM, Hoffman HJ, Ward BK, Cohen HS, Rine RM. Epidemiology of Dizziness and Balance Problems in Children in the United States: A Population-Based Study. J Pediatr. 2016:171:240-247.e241-243.
- 2. Jacot E, Van Den Abbeele T, Debre HR, Wiener-Vacher SR. Vestibular impairments pre- and post-cochlear implant in children. *Int J Pediatr Otorhinolaryngol.* 2009;73(2):209-217.



Information provided by Jeanine David Goldner, PT, DPT, MHS. Many thanks to Jeanine for sharing her wealth of professional knowledge with our staff, families and professional stakeholders!

We will continue to discuss the role of the vestibular system in our next newsletter.



School has started and you've probably spent the majority of the first weeks of school meeting your students, providing staff trainings, having conferences and setting up equipment. You may even feel like you are meeting yourself coming and going! Now, it's well into the school year and you are ready to learn some tips and tricks to gain the best outcomes for your deaf or hard-of-hearing (DHH) students. One of the primary ways for you, as a teacher of the deaf or hard of hearing, to assist your students to meet their maximum potential is for you to be at your best. Here are some simple tips to help you be the best you!

Setting realistic expectations

Many of our Indiana DHH teachers are itinerate. The first step is to focus on each student and accomplish what the student needs to happen next rather than think about all of the things that may be out of your control. Engaging in person-centered-planning practices helps with this tip.

• Increasing your efficacy

Since Indiana is a rural state, you, as a DHH teacher may feel alone and ineffective. Having confidence in yourself is a means of reducing stress. Believe in yourself and the impact you are effecting on your students. Observing and documenting your students' growth and progress may also help you to realize your potential and increase your efficacy as well.

Maintaining a balance between your professional and personal life

This is perhaps the most important step to managing stress. Often it is seen that special educators (spEd teachers, SLPs. DHH teachers, OTs, PTs, school psychologists, etc.) carry their work-life stress back home. Thinking about the needs a student has, a particular student in an unfortunate circumstance, that child you just cannot seem to reach, the parent with a grievance, and the mounds of paperwork and emails awaiting you, can tempt you to put in long work hours, bring work home, or if you do put work down, have your mind spinning about work when you should be watching your family member's performance or game with rapt attention. In this case, mental homework is necessary to bring about a home/life balance. DHH teachers (and other individuals in special education) have big hearts and want the best for the students they serve. Just remember, leaving time for yourself allows you to give more to your students. Additionally, the moments that you have to be fully present for your family members are fleeting and those are the moments you and they will remember.

• Analyze Your Potential

Managing stress is not always as tough as it seems to be. DHH teachers must analyze their present situation and work on it to reduce stress levels and live life to the fullest. This is only possible if you have analyzed your potential well. Be practical about what you know/can do and seek help when needed. Be sure to take advantage of peer groups to gain insight and information such as the joining DHH list serve and consulting with the Center, which is here as your Indiana Resource Network. If you have a workload that is not manageable, ask peers how they may have addressed the situation with their administration and gained assistance. Consider what you may have on your list of responsibilities now that could be completed by an aide or support staff member. DHH teachers are a precious commodity, and our Indiana DHH students need you at your best!





Family & Community





The National Deaf Center has created a choose-your-own-adventure game just for teenagers called Deaf Verse. In Duel of the Bots, you get to make own choices, stand up for yourself, and build confidence and skills you can use in real life—even when you don't have a robot by your side!

https://www.nationaldeafcenter.org/deafverse/







Parent Survey - Families First Project Indiana Early Intervention Journey

Are you a parent of a deaf or hard of hearing child younger than 6 years of age in Indiana?

This survey is for you!

This survey will take approximately 30 minutes to complete. As a thank you for your time and feedback, a \$20 e-gift card to a major retailer is emailed to you following the survey. You can access the survey here:

https://www.surveymonkey.com/r/IndianaFamiliesFirst https://www.surveymonkey.com/r/IndianaFamiliasPrimero



The Families First project is a collaborative effort of the Center for Deaf and Hard of Hearing Education, Indiana Early Hearing Detection and Intervention, Indiana Hands & Voices, Hear Indiana, Indiana Association of the Deaf, Indiana School for the Deaf, and St Joseph Institute for the Deaf.

This group is evaluating the current process for Hoosier families from identification through early intervention and transition at age 3 years. This survey is a way to receive feedback from families of deaf/hard of hearing children from birth through 5 years. If you are a parent or guardian of a deaf/hard of hearing child from birth to 5 years old in Indiana, your participation is vital to our evaluation of the system.

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We want to ensure that families with deaf and hard of hearing children do not encounter barriers or misinformation and are able to connect with appropriate services and resources in a timely manner. Ultimately, our goal is the remove barriers and streamline the family journey.

The Families First Project is funded by a grant through the Oberkotter Foundation.

Questions? Email cdhhe@isdh.in.gov or call toll-free 1-855-875-5193



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