

"All Together Now" Annual Report to NH-DOE June 30, 2020

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I. Summary

The first year of ATN might best be summarized by "flexibility". The November start of ATN put the Leadership Team into overdrive to implement our planned activities (see chart below with year one activities in red circle) within a shorter time frame followed by COVID-19 which caused us to pivot to respond to and support teachers, parents, and administrators in new ways when online learning was instituted in March.

The primary goal of year one was to learn about NH including existing services, personnel, and the local context, and to develop relationships with constituents to build a foundation of trust upon which to implement the deliverables of ATN with a focus on building local capacity. This began with an initial stakeholder meeting in December where members were asked to commit to participation through the various "Circles of Involvement" followed by a series of focus group meetings around the state in February. All activities were coordinated through Mary Lane, our Department of Education representative. The ATN Leadership Team was expanded to include NH parents of deaf/hard of hearing children, a teacher of the deaf, and a website and marketing specialist.

Upon review of the deliverables described in this report, the DOE will find that we were able to accomplish our primary goal of learning about deaf education in NH by listening to the providers, parents, and administrators as they describe current strengths, gap areas, opportunities and challenges.



ATN was also able to provide support to these constituents for online learning while infusing the recommended practices identified in the NASDSE Guidelines within these activities. The most significant limitation as a result of COVID was delaying the May Summit which was to address five of the ten essential principles and lead to the development of a collaborative plan. The Summit has been rescheduled to September. An advocacy workshop for parents was also postponed and has been moved online and scheduled for July. A positive outcome of this year's work has been the many bright spots that surfaced, that is talented and eager participants on many levels who have engaged with the ATN initiative and who will contribute to the sustainability of deaf education services in NH in the future.

	v	ork Plan Proposed Time	Line								
Stage from the Science of Implementation	Measurable Outcome	Responsible Party	Summer 2019	Fall 2019	Winter	Spring	Summer 2020	Fall 2020	Winter 2021	Spring 2021	After June 2021
	Engage New Hampshire partners and stakeholders in "All Together Now" process	ATN Management									
Preparation											
	Establish website, electronic communications & marketing	ATN Management									
	Plan & deliver Deaf Education Summit I	ATN Management, Leads & Stakeholders									
	Develop ATN Collaborative Plan	ATN Management, Leads & Stakeholders									
Integration											
	Recruit and identify pilots for mentoring/coaching training	ATN Management & Project Leads			(
	Coaching/Mentoring Trainer Pilots	ATN Management & Project Leads									
	Prepare Year 1 Progress Report	ATN Management & Project Leads									
Implementation											
	Review and modify ATN Collaborative Plan for Year 2	ATN Leads & Regional Leads with support from ATN Management									
	Plan & deliver Deaf Education Summit II	ATN Management, Leads & Stakeholders									
	Implement regional goals using the Plan-DO-Study-Act cycle	ATN Leads, with support from ATN Project Management									
Optimization											
	Recommend a leadership framework for NH	ATN Management, Leads & Stakeholders									
	Create end of project report	ATN Management & Leads									
	Continue to expand the process to more districts until New Hamshire "All Together Now" ready.	ATN Leads									

Key Emerging Themes

The following themes emerged throughout the meetings, focus groups, surveys, and discussions. They are addressed in greater detail in the Environmental Scan section of this report.

Strengths:

NH has many resources and dedicated teachers, parents, and other professionals. Professionals and parents work together to apply creative problem solving. There is a desire to collaborate across agencies and entities.



Challenges:

NH lacks a state-wide coordinated system of deaf education service provision to ensure that education for DHH students is compliant with the Individual with Disabilities Education Act Demographic and performance data regarding deaf and hard of hearing children is not collected. There are teacher and related service personnel shortages.

Opportunities:

Family advocacy support through NH Hands & Voices and a dedicated group of NH parents. Professional development opportunities are available through Institutions of Higher Education. NH Commission on Deaf and Hearing of Hearing has a legislative responsibility to develop guidance regarding deaf education as well as make policy recommendations. New England partnerships are ripe for a tri-state deaf education collaborative.

II. Deliverables

This section provides a description of the achieved deliverables within the categories specified in the grant. Each deliverable is aligned with specific content of the NASDSE Guidelines as well as the Essential Principles that are supported.

 Create a statewide model using training, coaching, and/or mentoring methodologies to build and sustain evidence-based practices, supports, services, and provisions within The Deaf Education Guidelines.

NASDSE Guidelines reference:

Chapter 5, Goals, Services, & Placement; Principal 5.

Status:

 The ATN Leadership Team was immediately created to include a local teacher of the deaf/hard of hearing and four parents to support, cultivate, and highlight local leadership potential. Ten Essential Principles to Optimize Education of Students who are Deaf or Hard of Hearing (NASDSE)

- 1. Each student is unique.
- 2. High expectations drive educational programming and future employment opportunities.
- 3. Families are critical partners.
- 4. Early language development is critical to cognition, literacy, and academic achievement.
- 5. Specially designed instruction is individualized.
- 6. Least restrictive environment (LRE) is studentbased.
- 7. Educational progress must be carefully monitored.
- 8. Access to peers and adults who are deaf or hard of hearing is critical.
- Qualified providers are critical to a child's success.
 State leadership and collaboration is essential.
- A survey to teachers of the deaf/hard of hearing (ToDHH) to assess needs for training, assessment protocols, and other resources was completed during the months of April-May 2020. Based on the survey results:



- A textbook has been selected (Promoting Language & Literacy in Children who are Deaf or Hard of Hearing (Moeller, Ertmer, Stoel-Gammons, 2016) and purchased for ToDHHs; coaching/mentoring activities will include a book club schedule that will be implemented during 2020-21 to provide a chapter by chapter discussion forum;
- Assessment and resource priorities were identified and purchased; These materials will be housed at the NH DOE and a process for dispersing to ToDHHs will be defined.
- Sustainable models for statewide deaf education leadership and support are being explored
- 2. Through support, technical assistance, professional development, and coaching/mentoring, assist participating districts/private providers to assess and to develop their capacity to sustain a model for implementing research-based practices to support students who are deaf and hard of hearing.

NASDSE Guidelines reference: Chapter 4, Evaluation and Eligibility; Chapter 5, Goals, Services, & Placement; Chapter 6, School Environment Access and Accommodations; Principles 1-10.

- Support and technical assistance
 - ATN website contains resources for TODHHs, related service providers, parents, administrators regarding research-based practices and resources for remote services under COVID-19 www.alltogethernownh.com
 - ATN Facebook page
 - o ATN SLACK channel for professional discussions of teachers
 - ATN sponsored weekly teacher teatime discussions (March-June) to share practices and learn from special topics by invited presenters
 - Parent weekly online discussions (April-June)
 - Presentation at the Wellness Afternoon Bell by ATN Leadership Team: Social Communication for DHH Students (April 28)
 - Facilitation of accessibility and a deaf education track for the Assistive Technology
 Virtual Fair (May 20) the deaf education track included teacher and student panels,
 deafblind technology presentation, educational audiology presentation (can all be
 viewed at www.alltogethernownh.com)
- Professional Development:
 - Based on TODHH survey results
 - Language and literacy training will be provided through the Center on Language and Literacy for the Deaf (CLAD) during the summer and the 2020-21 school year
- Preparing to sustain a model:



- ATN contracted with a local team of parents, teachers of the deaf/hard of hearing and a marketing professional
- o ATN created a partnership with Hands & Voices of NH
- ATN enlisted teacher/related service provider leaders from the community to present at the AT Fair
- o ATN partnered with the New England Deaf Blind Consortium
- ATN partnered with The Maine Educational Center for Deaf/Hard of Hearing, Maine Vocational Rehabilitation, Main Behavioral Health, Disability Rights Maine, and NH Vocational Rehabilitation to create a summer transition pilot program
- ATN linked and provided policy guidance to the legislative committee to implement the Deaf Child Bill of Rights
- ATN began investigating with VT and ME the viability of a tri-state regional consortium to support deaf/hard of hearing education
- ATN linked with the NH Association of the Deaf to increase partnership with the deaf community
- 3. Develop a statewide awareness model that builds the capacity to disseminate and implement The Deaf Education Guidelines.

NASDSE Guidelines reference: All Chapters; Principles 1-10.

- ATN 2020 Summit scheduled for May 4-5 is rescheduled to Sept 29-30, 2020
 - Summit I will be focused on self-assessment of the NASDSE Essential Principles 1-5
 - The Spring Summit II will be focused on self-assessment of the NASDSE Essential Principles 5-10
 - o Summit I implementation activities will occur during 2020-21 school year
- ASTra (Advocacy Support and Training from H&V HQ) for parents (training postponed from June to July) reference the NASDSE Guidelines
- Recommendations from various chapters that have been addressed are referenced and described in this report

4. Design and coordinate Technical Assistance/Professional Development opportunities that incorporate researched based practices and resources in conjunction with participating providers to be able to train other interested providers and families around the State in implementing current, researched based practices in the field of deaf education. The statewide model will include training and a coaching/mentoring opportunity to providers and families through technical assistance (TA) and professional development (PD) designed to assist districts/private providers with a self-assessment tool to evaluate current services and identify needed program and services improvements in order to support statewide sustainability.

NASDSE Guidelines reference: Chapters 3,4,5,6,7; Principles 1-10.

Status:

- TA/PD opportunities completed
 - COVID and remote learning guidance and resource documents were posted on the ATN website (www.alltogethernownh.com)
 - ATN developed a DHH remote access technical assistance document for DOE to disseminate to school administrators
 - ATN sponsored weekly teacher teatime discussions (March-June) to share practices and learn special topics provided by invited presenters
 - o Parent online discussions (April-June)
 - Presentation at the Wellness Afternoon Bell by ATN Leadership Team: Social Communication for DHH Students (April 28)
 - Facilitated deaf education track at Assistive Technology Virtual Fair (May 20) teacher and student panels, deaf blind technology presentation, educational audiology presentation (can all be viewed at www.alltogethernownh.com
- 5. Conduct an annual evaluation of the statewide coaching/mentoring, technical assistance and professional development opportunities, and make necessary improvements to the project for each year of implementation.

NASDSE Guidelines reference: Chapters 4,5,6; Principles 1,2,4,7

- A survey to ToDHHs to assess needs for assessment protocols and other resources and professional development was completed during April-May 2020. Based on the survey results:
 - A textbook has been selected (Promoting Language & Literacy in Children who are Deaf or Hard of Hearing (Moeller, Ertmer, Stoel-Gammons, 2016) and purchased for ToDHHs;



- coaching/mentoring activities will include a book club schedule will be implemented during 2020-21 to provide a chapter by chapter discussion forum
- Assessment and resource needs were identified and purchased; DOE will house the materials and a process for dispersing them to ToDHHs will be defined
- Professional development: Language and literacy training will be provided through the Center on Language and Literacy for the Deaf (CLAD) during the 2020-21 school year
- 6. Coordinate the distribution of resources and information to schools, families, students and other stakeholders regarding Deaf Education Services Guidelines processes, supports, services, and provisions. The resources and information must support the Deaf Education Services Guidelines.

NASDSE Guidelines reference: Chapters 4,5,6; Principles 1,2,3,4,5,7

Status:

- Resources specific to education and support of deaf and hard of hearing services are provided to teachers, related service providers, administrators, parents and others via the ATN website, ATN Facebook page, regional meetings, weekly teacher teatime discussions, weekly parent chats, and other relevant venues
- ATN created specific guidance to support ToDHHs, their students and parents in the transition to
 online remote instruction including information and resources to ensure accessibility to
 instruction in the online format as well as in the classroom under the COVID situation
- ATN will establish a repository at the DOE and distribution system for the assessments and other
 materials that are purchased that can be shared among professionals and parents during the
 2020-21 school year.
- The NH Hands & Voices sponsored ASTRa workshop for parents was postponed to July; ATN supports this workshop.
- 7. Assist in coordinated training strategies for personnel preparation, professional development, and system development of certified personnel regarding The Deaf Education Guidelines.

NASDSE Guidelines reference: Chapters 5,6,8; Principles 1,2,4,5

- Professional development via weekly teacher teatime discussions provided a venue for sharing challenges and successes during online remote instruction
- Professional development in language and literacy training will be provided through the Center on Language and Literacy for the Deaf (CLAD) during the summer and the 2020-21 school year

8. Design a marketing plan that includes online modules, video shorts and social media that inform the public about specific practices and examples that highlight publicly the application of the deaf education guidelines and how they improve outcomes for students who are deaf and hard of hearing and their families.

NASDSE Guidelines reference: All Chapters and Principles

Status:

- The ATN Leadership Team identified key content for all constituents. The social media and marketing specialist managed the ATN website and ATN Facebook creating messaging and disseminating information. Other activities of the specialist included:
 - Production of a video interview with a parent that highlighted parent experiences, challenges and successes to support recommended practices in deaf education for improving student outcomes
 - Posting of videos of the four presentations from the Assistive Technology Fair (May) to the website including teacher and student panels, hearing assistance technology practices, and technology for students who are deafblind
- 9. Attend other assigned meetings that support the Bureau of Student Support projects, as appropriate.

NASDSE Guidelines reference: All Chapters and Principles

- The ATN team presented to the NH Commission on Deaf and Hearing of Hearing
- The ATN team presented to the NH-AEM Work-share committee
- The ATN team has met with Northeast Deaf and Hard of Hearing Services, Inc to determine areas of collaboration
- The ATN team collaborated with Representative Mark Pearson regarding alignment of the goals of the Deaf Child Bill of Rights committee and the ATN initiative
- The ATN team has met with various state DOE representatives including Rebecca Fredette,
 Director of Special Education, Lisa Katz, Director of Vocational Rehabilitation, Kelly Untiet, Bureau of Wellness
- ATN is linked with the Bureau of Wellness
- The ATN Leadership Team partnered with the Maine Educational Center for Deaf/Hard of Hearing to develop a pilot virtual online summer transition program for high school students with Lisa Katz, Vocational Rehabilitation
- The ATN Leadership Team met with Tracy Luiselli, New England Deafblind Consortium, to share project information and determine areas of collaboration.

- The ATN Leadership Team presented *The Role of Language and Communication in Social Emotional Development of Children who are Deaf or Hard of Hearing* in the Wellness sponsored Afternoon Bell session (April 28).
- The ATN Leadership Team organized and facilitated four presentations for the deaf education track of the Assistive Technology Virtual conference (May 20).
- ATN Leadership Team established a channel of communication with the NH Special Education Administrators Association to gather and disseminate information.
- ATN Leadership Team meets with members of the NH Association of the Deaf to identify areas of support and collaboration.
- ATN Leadership Team meets with NH Hands & Voices leaders to coordinate activities and support for parents.
- Members of the ATN Leadership Team will be attending the Special Education Administrators conference Aug 2-4 unless it is cancelled.
- Additional scheduled meetings were postponed or cancelled due to COVID (Family Engagement and Karen Mapp conferences)
- 10. Conduct evaluations of each level of technical assistance/professional development to assess the impact on local systems and changes in practice resulting in improved outcomes and compliance as well as building sustainability and capacity. An evaluation report, including a mid- year and annual report will be submitted to the Department.

The All Together Now New Hampshire Deaf/Hard of Hearing Education Initiative was launched in December of 2019 and completes the first months of the grant cycle at the end of June 2020. In addition to the many activities listed above, the Leadership Team has been committed to completing an environmental scan of deaf and hard of hearing education and the many parents, professionals and students that make up the ecosystem. In June we asked the stakeholders (more than 100) to complete an eight-question survey or scan of our work in order to include their feedback and comments in this progress report to the Department of Education. The survey feedback is summarized below.

Return rate: Of the stakeholders who were sent an invitation to participate, eight people responded to the survey. We can make some assumptions about the low level of participation, including the COVID pandemic, the stress of the sudden remote learning pivot and the short timeline of the first cycle of the project seem reasonable. The survey questions and responses are summarized below.

- Participation in ATN activities:
 - o 87% of respondents reported attending ToDHH Thursday Afternoon Teatimes
 - o 28% reported attending the Teacher Dinner and Parent Discussion Sessions



- All activities had at least one survey participant in attendance. (Stakeholder, Regional or SPED Administrator meetings; Wellness-Afternoon Bell DHH session, A.T. Fair, Provider Resource Needs or Parent Journey survey).
- Participation in ATN online resources:
 - 100% reported using the ATN website
 - 83% reported accessing the ATN Facebook page
 - o 50% reported using the New Hampshire ToDHH Slack Channel
- Activities participants want to see continue:
 - The ToDHH weekly updates (afternoon teatime), the ATN website and the Parent Discussions were most frequently requested
- Rating of how well the ATN initiative addressed the needs of deaf and hard of hearing students
 - 57% reported that they were very satisfied or satisfied and 43% reported that they were neutral
- Rating of the efforts of the ATN initiative to support parents and families in the first six months of the project
 - 71% responded as very satisfied or satisfied when asked if the ATN initiative provided support to professionals who serve DHH students and 29% said that they were neutral
- Rating of the efforts of the ATN initiative to collaborate with existing agencies and resources
 - 57% reported they were very satisfied or satisfied and 43% reported that they were neutral
- Related to planning, the survey participants were asked for their perspective on how they will know if the ATN initiative has made a difference in New Hampshire. The responses included
 - o evidence of updated DHH curricula, resources and services
 - consistent information for parents from hospitals to schools (including information about the pandemic and future planning)
 - o implementation and training on the NASDSE Guidelines throughout the state
 - specific training for Special Education Directors about the role of the ToDHH and the legal implications of IDEA for DHH students.

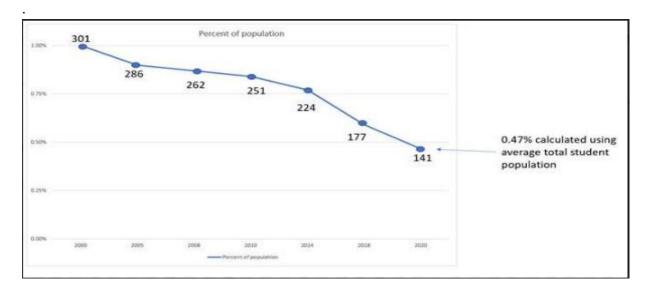
The ATN team will continue to take the pulse of the professionals, parents and stakeholders in the future cycles of the initiative.

III. Environmental Scan

Demographic data is described in this section as well as emerging themes identified through the focus group meetings and online surveys that were completed to learn about the strengths, gaps, opportunities, and challenges to meeting needs of students who are deaf or hard of hearing.

Department of Education Data

The Department of Education's deaf/hard of hearing child count data for selected years from 2000-2019 is shown in the figure below. This data illustrate the downward trend in the number of students served under IDEA with deaf/hearing impairment as the primary disability. The decline is also show in relation to the total number of special education students; deaf/hard of hearing students represented 1% of special education students in 2000 and only .47% in 2019 indicating more than a 50% decrease in a twenty-year span.



The New Hampshire Department of Education also provided student count information for 2019 by region. This data represents students served through IEPs with deaf/hearing impairment as the primary disability.

Region	Total HI Students
Lakes Region	22
North Country	Suppressed
South Central	62
Southeast	27
Southwest	26



As teachers and parents noted in the SWOT discussions that follow, it is difficult to know the exact numbers of students who are deaf or hard of hearing because many of the students are served under 504 Plans. In addition, many students who have hearing loss do not have the primary disability label of deaf or hearing impaired (HI).

Additional Data Needed

In order to fully describe, understand, and program for the education of deaf and hard of hearing children, additional information is needed:

- 1. Number of infants identified and diagnosed as DHH (Data was requested from Part C but not provided)
- 2. Number/percentage of identified infants who are receiving early intervention services
- 3. Number/percentage of DHH children who transition to Part B
- 4. Number/percentage of pre-school age DHH students who are "Kindergarten Ready"
- 5. Performance: Number/percentage of DHH students who are meeting grade level expectations in reading and math (e.g., disaggregated state assessment data by disability and further broken down by free and reduced lunch)
- 6. Number/percentage of students who have the primary label of DHH
- 7. Number/percentage of DHH students served by an IEP and served by a 504 plan
- 8. Number/percentage of students that have a Communication Plan in their IEP
- 9. Graduation rates for students who are DHH
- 10. Post-Secondary enrollment or employment data for DHH students
- 11. Professionals who serve students who are DHH (teachers, educational interpreters, educational audiologists)

Survey Data Summary

This section synthesizes the results from four on-line surveys completed by teachers and related services personnel, administrators, parents and community and several visits with various stakeholders from the five regions of New Hampshire. The ATN Leadership Team developed three of the four surveys (the parent survey was developed by the ATN parent representatives) and led the facilitated discussions throughout the state. The two formats were set up to offer options: participate in a group setting or participate in an anonymous online setting. The themes of this summary of responses are organized by strengths, challenges, and opportunities and are intended to inform the priorities of the state self-assessment from "Optimizing Outcomes for Students who are Deaf/Hard of Hearing".

Strengths:

The deaf and hard of hearing education programs in New Hampshire have notable strengths. The themes that emerged from the surveys and regional visits include excellence in **professional**



personnel, a strong **dedication to finding solutions** and, while not consistent throughout the state, the **early supports and services programs**.

Teachers of DHH, educational audiologists, speech language pathologists, educational interpreters and DHH consultants are personally named and celebrated. Parents and administrators recognize the depth of knowledge and expertise within the small number of professional service providers. The vast majority of the ToDHHs are certified to teach deaf/hard of hearing students in NH and 93% of survey respondents have a master's degree in the field of education. "Qualified providers are critical to a child's success" is one of the "Ten Essential Principles" of the NASDSE Guidelines.

"The strengths that we have is that in the providers in our area are excellent." -Administrator

"I think my children's TOD'S are fantastic they go above and beyond for my children. They are very passionate about their work and I've seen a great improvement with my children's learning."
Parent

"The audiology liaison was invaluable at our IEP meetings, gaining us several supports that we were not aware of." -Parent

Many of the school districts in New Hampshire have limited resources providing services to the 141 students with the primary disability labels of 'deaf' or 'hearing impaired' and the undocumented number of students with reduced hearing that are on 504 plans or have a primary disability label that is not deaf or hearing impaired. Creative solutions have kept services available to students. Cross-district placements, non-profit organizations, and a reach to neighboring states have filled some of the gaps in rural communities. Of the twenty-one teachers of the deaf/hard of hearing who responded to the ToDHH survey, 60% (12) teach in the Central and Southern parts of the state with one teacher in each North Country, Seacoast and Lakes Region. From the same survey, 67% (10) teach as itinerant teachers and 53% (8) are independent consultants. While New Hampshire does have DHH specific programs in Nashua and Manchester, the numbers indicate that many teachers drive a distance to teach their students. Many mainstream programs around the state are creative in their use of regional resources and technologies. "Specially designed instruction is individualized" is one of the "Ten Essential Principles" of the NASDSE Guidelines.

Our strength..."having a director of student services willing to seek and fund services required for students who are DHH. Being in a region on the border of MA, we have additional opportunities..."

- Administrator

For my child...." Supplemental testing was performed by Clark's School for the Deaf." - Parent

"Technology such as chrome books, smart boards, projector and iPads..." have strengthened my teaching. -Teacher of DHH

"COVID and distance learning made me realize that we are creative enough to make this happen."

— Teacher of DHH



Universal Newborn Hearing Screening is not mandated in New Hampshire but reporting the screening results is required in statute. (N.H. Rev. Stat. Ann. § 132:10 (1999)) Families report varying experiences with the initial diagnosis, but most report Early Supports and Services, as positive and as their "go to" for information and support. Specifically mentioned frequently is the MICE program - which is no longer part of the E.S.S. system. Included in the strengths is the Family Sign Language program and the Parent Information Center. Meeting participants were eager to see the new Hands & Voices chapter of New Hampshire established. "Families are critical partners" is one of the "Ten Essential Principles" of the NASDSE Guidelines.

"My sons IFSP included early intervention and we were also connected with the deaf and hard of hearing groups. My son's early interventionist is also a teacher of the deaf and we've been learning a lot of ASL with her". - Parent

"I was extremely grateful for the MICE program and the woman we worked with...without her/them I'm afraid I would have never even known there was a deaf and hard of hearing school in NH she was very good about helping me set everything up for IEP process... I and many other parents wish MICE was still around." - Parent

Challenges:

The challenges inherent to the New Hampshire deaf education system follow the patterns of those nationwide. The themes that emerged centered around **policy and education systems reform**, families' and children's **access to information**, **resources**, **and support** across a range of needs and locations around New Hampshire; and **teacher and interpreter shortages**.

The stakeholder survey identified individual people or programs as strengths, but the common theme of weakness is evident; there is no state-wide, comprehensive system to ensure that education for students who are DHH is compliant with the Individual with Disabilities Education Act (IDEA) or the American's with Disabilities Act (ADA). Listed as concerns were:

- The confusion of the "lost to follow up" rates of the EHDI system.
- The lack of data on the infants identified through newborn hearing screening.
- The lack of data on the infants and toddlers enrolled in early intervention.
- The absence of statute requiring hearing screening at birth and during school ages.
- The lack of timely data on students, student performance and student employment after high school.
- The lack of data on professionals (ToDHHs, educational audiologists, educational interpreters).

"State leadership and collaboration is essential" is one of the "Ten Essential Principles" of the NASDSE Guidelines.

There is no dhoh "educational system". – Community member



We need..."a common vision from the state translated to districts regarding inclusion and access."
Administrator

"After two previous attempts to qualify for a 504 plan (denied twice after diagnosis of bilateral SNHL), my son ultimately qualified for a 504 on the third attempt, despite the same diagnosis. After eligibility was determined for the 504 plan, the educational audiologist was finally called in to perform a functional listening evaluation for my son in his school environment. These results directly impacted the school acknowledging that my son required an FM system in the school setting (among other accommodations)" -Parent

Educational opportunities, resources and current information across the state is missing for teachers, parents and administrators. Nearly 30% of the teachers surveyed responded that they do not have access to resources and training needed to best serve their students and administrators have requested more information on how to better support teachers and students. "Educational progress must be carefully monitored" is one of the "Ten Essential Principles" of the NASDSE Guidelines.

"because this is a low incidence population, often the need for training, equipment...is immediate.

Schools need guidance in planning ahead to address these needs more universally. All teachers/admins need good, current, affordable access to training. Emphasis on access and training for all.

- Administrator

Teachers of the deaf have asked for specific assessment resources and textbooks in addition to workshops on current strategies and curricula. Forty-three percent of parents said that they did not receive unbiased information on communication opportunities and on their rights in the IFSP and IEP process. Findings about resource and information availability vary from region to region. A centralized resource location and website is in high demand across stakeholders and regions.

"We are still fighting to get things explained better. There feels like there is an overwhelming amount of conflicting information." — Parent

"It was a very messy start. It was unclear who to contact and when. One person would pass me onto the next." - Parent

The U.S. Department of Education Teacher Shortage Areas (tsa.ed.gov/#/reports) lists the low-incidence professions as a shortage area in most states and this is consistent in New Hampshire. Teachers of the deaf/hard of hearing reported up to 72 students (average of 36 students) on an itinerant teacher caseload. A vast majority (87%) of teachers also report that the students on their caseload do not have a primary disability label of deaf/hard of hearing and 73% of respondents serve students who are on a 504 plan. New Hampshire does not have an official count of how many teachers of the deaf are in the state, but the unofficial count is less than 30 teachers to serve many



students in a far-reaching geographic area. Unfortunately, the teacher shortage has the potential for becoming more prevalent as more than 60% of the 21 teachers of the deaf who responded to the survey said that they have been teaching more than 20 years, which puts them about ten years from retirement. The lack of preparation programs for teachers and educational interpreters within the state is compounding the shortage issues. "Qualified providers are critical to a child's success" is one of the "Ten Essential Principles" of the NASDSE Guidelines.

As an administrator I "lack the choice of available providers. Critical shortage of educators certified to teach as ToDs. We are limited to a sole proprietor ToD who is minimally communicative and charges exorbitant fees." - Administrator

"We need funding for candidates to attend the Granite Star Teacher Training Program." – Teacher

"I am fortunate, I have tuition assistance to attend teacher prep to obtain certification in HI" –

Special Education Teacher (Keene)

Opportunities:

Opportunities were identified by key stakeholders as areas that positively affect the system and the system's ability to meet the needs of children and youth who are deaf or hard of hearing and their families. The themes in opportunities lend to a strong list of recommendations. Survey results and stakeholder discussions identified the potential for developing family advocacy supports, professional development and policy/legal recommendations as opportunities inherent to the current environment.

Stakeholders are optimistic about the new chapter of Hands & Voices in New Hampshire. Membership is growing and the ATN Leadership Team has supported an ASTra (Advocacy, Support and Training) workshop for parents. There is also optimism around the idea of a central resource hub that will be supportive to parents of newly diagnosed students; a one stop-shop for families.

"Giving families access to advocates who can help to simplify the process of getting access to accommodations + services, and who can attend meetings (IEP or 504) with them in support of their dhh child". – Grandparent

"Creating a centralized location for resources for families that have dhh children." – Manchester Parent

Pre-service and in-service professional development is needed for all service providers in the area of deaf/hard of hearing education. The geographic location of New Hampshire along with the local resources allows for the potential partnerships between the local area schools and the Institutes of Higher Education (IHE) as well as regional opportunities. The University of New Hampshire, Granite State Community College and White Mountain Community College have received funding in the past to support special education teacher preparation. Some teachers also reported that their school districts paid for advanced college coursework. In addition, New Hampshire is located near several out of state IHEs who develop professionals in teaching, interpreting, vocational rehabilitation, educational audiology and speech language pathology.



"My district pays for my graduate credits for my ToD certification program" – Teacher of Special Ed.

"If I can support the needs of dhh in any way, let me know." -President, White Mountain CC

Finally, the Deaf Child Bill of Rights is recently passed legislation that has provided a fresh optimism for the Commission of the Deaf and Hard of Hearing. The DCBR :186-C: AN ACT established a Deaf Child's Bill of Rights and an Advisory Council on the education of deaf children. The tenants of this legislative act address the following:

- Qualifications of personnel providing professional services.
- Composition of the Individualized Family Service Plan (IFSP) & the Individualized Education Program (IEP) team.
- The individualized Communication Plan for every deaf and hard-of-hearing student.
- Procedures and materials for assessment and placement.
- Psychological counseling and mental health services.
- Evaluation of the effectiveness of programs for students who are deaf or hard of hearing.

The DCBR has potential to address some of the systematic concerns laid out by the more than 200 stakeholders involved in the surveys and discussions.

Stakeholder Engagement

Stakeholders who participated in the various sessions were invited to participate in the ATN "Circles of Involvement". Sustainability is a primary concern; therefore, engaging stakeholders at a level where they can best use their time and skills to support the initiative is intended to ensure a solid partnership between the ATN team and the New Hampshire professionals and parents. The NASDSE Guidelines, "Optimizing Outcomes for Students who are Deaf or Hard of Hearing" can only be implemented by those who can build upon their strengths, pivot and turn their challenges and seize their opportunities. Phase 2 of the All Together Now initiative will focus on optimizing the resources of New Hampshire to best implement the Ten Essential Principles for serving students including development of a plan for sustaining leadership and coordination of statewide deaf education service provision.



IV. Appendices

Appendix A

'All Together Now' Deaf/Hard of Hearing Education Initiative – NH Stakeholder Discussion (Dec 12, 2019)

BARRIERS

- Early childhood cell size is small; difficult to disaggregate other than statewide
- Loss to follow-up rate is high reported at 50% (others say it is closer to 20%)
- UNHL is not a law/mandate
- · Phone call when child fails UNHL
- HL not recognized as a primary concern
- Not enough pediatric audiologists to diagnosis, especially ones that accept all insurances
- No mandate for school-age testing
- Early childhood services for DHH (0-3) is limited since closure of MICE
- Many districts contract for TODs services
- Needs
 - Physician training
 - o more regional programs in the north country
 - DOE to provide connections (to who)
 - Training for parents on importance of IEP
 - o Professional development for rural providers
 - o Information for families of school-age children (504, early language/literacy

BRIDGES

- TOD monthly meeting in Concord
- Shared Reading Program
- Deaf Role Model Program (currently 0-3, hoping to expand)
- Pam Lovejoy as resource connector
- Partners in Health (Family to Family Connections; resources for complex-needs children)
- NH Hands & Voices chapter
- Parent Infant Center services
- Part C is starting program to connect with families prior to diagnosis to help with follow-through for diagnosis and to reduce loss to follow-up
- Audiologist must refer if there is a diagnosis
- NDHHS Inc– connection to resources
- Family Sign Language Program
- Regional DHH school programs Nashua & Manchester
 - Other schools with DHH resources: Portsmouth, Londonderry, Salem, SAU 16, Timberline, Hudson
- Family Outreach Portsmouth



DATA NEEDED

- Number of infants identified as DHH
- Number of identified infants who are receiving early intervention services
- Number of DHH children who transition to Part B
- Number of infants born in another state but living in NH
- Professional employment
 - Number of TODs, Educational Interpreters, educational audiologists, and others serving DHH children
- Disability labels what is on the IEP? What is the primary code?
 - Hard of hearing students often not labeled
- Communication Plan not yet required, how does it look in the IEP
 - New legislation will likely result in a Communication Plan

RESOURCES

- Should there be a "one stop shop"?
 - Family Resource Center (ex Grapevine)
 - Federal dollars through grants
 - Kinship Care Givers
 - · Preschool Development grant
- NDHHS, Inc = DHH Resource Center
 - Early intervention is primary focus of contracted services (Pam Lovejoy)
- Agencies/centers that have teachers of the deaf for contract
 - Strafford Learning Center (2)
 - Southeast Regional Education Service Center (SERESC) (2)
- University of New Hampshire Institute on Disability
- Special Education Administrators
 - o Monthly meetings
 - Professional development

PRIORITIES

- · Demographics: Identify children and families
- Transition: Part C to Part B
- Policy Initiatives: Rules & Laws



Appendix B

Statewide SWOT Notes (February 2020)

Commission Mtg Feb 10, 2020

Strengths

- Regional programs: Manchester, Nashua
- VR transition program brings students together for 14-21 year olds
 - Students transition specialists talk to schools about disability services
- Special ed teachers passionate about their jobs
- Established H&V chapter
- Parent Information Center

Gaps

- VR agency should be involved earlier
- VR replaced its counselors with resources??
- VR cannot work with students until age 14
- Support for teachers to increase ASL skills
- Training for teachers for teaching reading to DHH students
- Isolation of students limits access to peers– need training on technology to connect students
- NDHHS needs a K-12 TOD
- Lack of k-12 providers statewide
- Accuraccey of disability labels
- Quality of interpreters
- DOE monitoring of services
- Parent education and student rights
- Legal support for ADA, IDEA, 504
- School-age programming
- MICE program restructuring decrease services to families

Opportunities

- Professional development funding for TODs, AuD, Ed Interpreters ...stay to pay back
- Statute and rule recommendations
- Educate parents & students on their rights
- Legal guidance- training for parents (ASTra)
- Role Model program (needs to be expanded to school-age)
- Early Learning grant
- DOE offer criteria for a waiver to get more service providers
- Investigate:
 - o Data sharing agreements
 - o PIC relationship with H&V and other groups
 - PNA Federal agency in every state on rights??
 - o Governor's Council on Disabilities/ADA

Challenges

- Information overwhelming for parents to understand process (need ombudsman or other support)
- One or more skills of provider need to match needs of students
- Data who are our students (registry of DHH)



H&V Parents – Manchester, Feb 10, 2020

Strengths	GAPS
Newborn screening	 NH Communication Plan -Not consistently
 Complex Care team (special medical) 	used
 Early intervention/family support 	 Follow-up after Diagnosis is not consistent
Bureau of Developmental Services: 10	• Transitions 3-5 & 18-21
regional child development centers	No School for the Deaf
(Gateways Community Crossroads, One Sky??	 Criteria/eligibility inconsistent and keeps
 Family Centered Early Support Services 	some students out of IEPs
(FCESS)	Assessments by TODs vary
H&V chapter	 Social-emotional needs not recognized
 Partners in Health (funding) 	 Lack of guidance from DOE re: 504 services
 TODs throughout the state 	ASL program
 Deaf Community/adult volunteers 	No out of district options
ITP volunteers	No family choice
 Hear to Learn Educational Audiology 	
• NEDHHS	
Opportunities	Challenges
NH Parent Information Center	Follow-up after screening- hospitals need a
IEP – remain eligible until language	script to tell parents about referral
development is assessed	Services only if child is developmentally
Peer events – DHH day	delayed
• H&V	Must have IEP t get services or
 Centralized resources & information (e.g. 	accommodations
audiology- who do we call)	No 504 for preschool (no public preschools in
Ed interpreters – pay to stay (must take exam	NH)
in MA)	RTI instituted instead of 504 or IEP
Exposure to professional and parent	School districts unaware of 504 and IEP law
development	(167 school districts)
	Districts do not support Family Sign Language
	program
	Schools do not use Communication Plans

Berlin- Professionals Feb 11, 2020

Strengths	Gaps
 North Country rallies to support training 	•
 Strong teams willing to learn 	
Commitment	
Motivation	

Isolation



- Family involvement
- Parents find it schools support it
- Camp Discover (ME)
- Community Support
- Caring schools
- Quality teachers
- Resources (Strong Team SLP/TOD, NDHHS, Camp Discover – ME, Amanda McGinnis – Dartmouth, Karen Anderson – "Success for Kids with HL"

Opportunities

- Supportive School
- Package of options for parents (Resource Binder = informed decisions)
- Create central agency 0-21 that is resource center for DHH/Families
- Funding to train "home-grown" professionals
- Coaches mentor program
- Funding for professional development
- Shared assessment tools
- Funding formula (distance from selfcontained program and resources, colleagues and peers, head count)

Challenges

- Lack of 0-3 "appropriate" services; MICE provided 4x/wk services, currently 1x/wk
- MICE ended
- Isolation of staff, kids, parents
- Kids arrive in PS (Part B) with no language because they only get 1 hr/week of services
- Parents must fight to get an SLP
- #1 point of entry for DHH children was MICE who, now no one knows who to call
- Remote services/tele-practice not appropriate for 2 yr old
- Parents not confident in their ability to provide, not enough services, Part C uses Hearing "Specialists" but they are not trained in deaf education or to support DHH child development
- Sign language training ends at age 3
- No parent to parent support
- Only 1 TOD in North Country
- Parents need to find their own resources
- No support group for parents
- Time lost for travel
- Low incidence population impacts knowledge and resources
- Districts do not advertise to fill positions say they do not fill because "critical shortage"
- Parents who have difficulty following through
- High poverty rate (in the North)
- Loss to follow-up ESS has no experience
- Transition to Part B

 Lack of resources (small or no budget for PD, to purchase materials, etc)
Disconnect between CI centers and school's CI resources

Berlin Parents, Feb 11, 2020

Strengths – see teachers	Gaps – see teachers		
•			
Opportunities	Challenges		
 More opportunities to get families together 	Access to FM		
Berlin Sun Newspaper to increase information	Disability categories		
regarding hearing loss in children	 Access to sign language in school 		
Resources: PIC training	programs		

Keene Professionals Feb 13, 2020

2 Teachers, 1 SLP

- Keene (Jessica Hall) 8 DHH students at Franklin elementary, Middle School and HS served; consultation hrs are pre-determined in budget (Keene budgets consultation from general ed fund of school, TOD – why not from special ed funds)
- Cutler SD (Lauren Klowack) (15 min from Keene) sends some students to Keene, TOD is in certificate program, has sped MA
 - Districts ignorant of districts responsibilities; Boothby Agency provides contracted TODs;
 TOD from Boothby provides remote services; interpreter; ed interpreter from MA comes
- Cathryn Weber SLP, Winchester SD, consultation about 3 students; supportive special ed director

Strengths:	Gaps:
 Districts pay up to 8 credits per year FOR 	 Support for families who have children who
GRADUATE CREDIT	are dhh
 Admin support (Winchester) 	 Other families or advocates for parents
	 Resources – materials- information
	Early Intervention Services
	Auditory instruction
	 Support for Early interventionists to know
	how to best advise families
	 Professional development for the teams,
	especially accommodations; knowledge of
	sounds they cannot hear for literacy
	(explanation of audiogram); perception of HL
	and that they get by



	 No communication options presented to parents. Teachers research "the best option" and present it. No ASL services for school age kids. (use Ed. Interpreter to teach signs) No peers Access to information and connections with other TODs, parents, etc.
Opportunities (Bridges):	
Linda Taylor support	
 Some support from the district for ASL. 	
 Introductory sign language classes available 	
through a local	



Appendix C

Initial Stakeholder Survey Results

ATN Survey: Stakeholders Unable to Attend Regional meetings

9 Respondents (Winter 2019)

1.Tell us about yourself:

- Parent of a child who is deaf/hard of hearing
 Professional who serves students who are D/HH.
 Other Write In
- 2. Which New Hampshire Region are you from?
 - North Country 1
 Sea Coast 3
 Central New Hampshire 2
 Southern New Hampshire 1
 Other Write In 1
- 3.The Deaf/Hard of Hearing education system in your local area/region has many strengths. Please name the strengths that have made an impact on your child, family or professional work.
 - Very knowledgeable TOD
 - We contract with Strafford Learning Center to provide services and supports to our staff and to our students with hearing impairments. We have been pleased with their services.
 - We have had access to great SLPs and the same Educational Audiologist for Anthony's entire school career
 - Having a small classroom with other peers in ASL and English
 - Staff with experience working with D/HH (CI and HA). Flexibility to provide child with more than adequate therapy.
 - There is no dhoh "education system"
 - The statewide teacher of the deaf network was very helpful although there aren't enough ToDs to service the state. It would have been helpful to have a ToD have a greater presence vs. once or twice a school year.
 - I have an excellent teacher of the deaf and educational audiologist to work with the staff

4. The Deaf/Hard of Hearing education system in your local area/region may have some gaps. Please list those gaps.



- Not enough TOD's Not enough Interpreter No top training programs
- We have not had the need to access services outside of the district at this time.
- There are no services to connect deaf children with other deaf children. Lack of understanding outside of the EA of technological advances for DHH children.
- Having a classroom that is sim-com and not ASL. I feel like once they aged out of early intervention we fell thru the cracks and are on our own.
- Now that we have a wonderful TOD there are no gaps.
- No central agency. MICE has closed for El. Limited qualified professionals. Limited knowledge of state guidelines for dhoh.
- As mentioned, not enough professionals (teachers of the deaf) to service the entire state.
- As a parent, I have seen that teachers (special Ed/reg Ed) don't understand the impact of being hard of hearing on a student's learning, academic and social.

5. There are various opportunities (ex. agencies, programs, support groups, activities) in New Hampshire that support students who are deaf/hard of hearing and their families. Please list the opportunities that you feel benefit or could benefit students, families and professionals.

- SERESC
- We have worked with Vocational Rehabilitation to support our students as they transition from high school to their adult life.
- Better information on appropriate testing accommodations things such as these standards.
 When/who is a TOD how to access services for kids not on an IEP?
- I'm not sure
- Hands & Voices
- I am not aware of any opportunities for parents and children

6. There are challenges within the state systems for supporting students who are deaf/hard of hearing. Please list those challenges.

- Not enough TOD's Not enough Interpreter No top training programs Procedures that cannot be adhered
 to for the above three reasons CART is very expensive and does not meet the needs of most of our
 students
- I'm sure there are challenges. At this time, I'm not aware of the challenges.
- Lack of focussed early intervention services, lack of knowledge in the system on the needs of deaf/HOH children it is really about luck in connecting with the right resources.
- Small, spread out Deaf community. So many are focused on technology that those wanting Deaf culture and ASL have a hard time finding resources.
- Absolutely no organized program, such as the MICE program, servicing our birth to three population.



Early intervention does not have experienced and/or credentialed providers working with these children.

- In many areas of NH, there typically aren't that many deaf/hh kids in any given school system. Geography is an issue getting from place to place, especially in winter. Often for mainstreamed kids, they don't get to meet others in the same situation as themselves which is important.
- See box #4. The school's lack of understanding goes so far as to ask my child to remover her hearing aids as an accommodation for sounds on field trips.

7. What recommendations do you have to enhance the education of students who are deaf/hard of hearing in New Hampshire?

- Set up and financially support TOD and Sign Interpreter Programs Provide other supports and servicesremote services if needed.
- Our district has not experienced students with significant hearing deficits. Our population has been supported with hearing aids, FM systems, or the use of Red Cats. However, we are open to receiving as much information as possible to support our students' full potential.
- Stronger early intervention, more online resources we can use as parents and refer to our school districts
- Deaf teachers/mentors
- The state should have funded the MICE program. I would like to see another program such as that put in place. Children are going into the school system without having had adequate instruction/support.
- The understanding that one size doesn't fit all. There are different ways of communicating and there should be room for us all.
- Regular Education training around the impact on students across all areas of school



Appendix D

Teacher of the Deaf/Hard of Hearing Survey Results

ATN Survey: Teacher of Students who are DHH (TODHH)

21 Respondents (Winter 2020)

1. How many years have you been teaching?

- less than 1 year 1
- 5-10 years 3
- 10 15 years 1
- 15-25 years 7
- more than 25

2. What is the highest degree you have completed?

3

14

- Bachelor's degree
- Master's degree
 14
- 3. Do you currently hold a New Hampshire state teaching certificate with an endorsement in D/HI?
 - Yes
 - No 1

4. What region of New Hampshire do you teach?

- North Country 1
- Seacoast 1
- Lakes Region
- Central New Hampshire
- Southern New Hampshire 5
- Other: 3

5. What is the primary service delivery model that you use? (check all that apply)

- DHH ClassroomDHH Resource Room2
- Itinerant (includes direct instruction) 10
- Consultative (indirect no direct instruction) 8
- Early Intervention Service Provider 4
- Remote Education Support (ie. tele-intervention, distance learning technology) 2

Y New Hampshire Department of Education

Disclaimer: the content of this Report is based on a collection of opinions from third party survey results and does not reflect the opinions or policy preferences of the NHDOE or NHDHHS

• Other - Write In

6. How many students are on your caseload?

• Responses ranged from 1 – 72 with the median at 36 students.

7. How are you employed?

- District Employee 4Contractor 10Other 1
- 8. Do you provide service to students who have a primary disability label that is not Deaf/Hard of Hearing?
 - Yes 13No 2
- 9. Do you support students on 504 plans?
 - Yes 11No 4
- 10. For what percent of your caseload do you provide direct service?
 - 5-10%
 10 25%
 25-50%
 50-75%
 75-100%
 4
- 11. For what percent of your caseload do you provide indirect service?
 - 5-10%
 10 25%
 25-50%
 50-75%
 75-100%
 7
- 12. Approximately what percent of the students on your caseload have a co-occurring disability?



•	0-10%	2
•	25%	4
•	50%	4
•	75%	3
•	100%	2

13. Please indicate the percentage of students on your caseload who use the following communication modes for their primary instruction.

- 12 students use Bi-Lingual/Bi-Modal communication
- 9 students use ASL
- 8 use Cued Speech
- 12 use Listening and Spoken Language

14. What percent of students on your caseload have access to classroom and hearing assistive technology necessary to ensure effective access to instruction?

• Overwhelming response was 100% (with one response at 80%, one at 45% and one at 95%)

15. What placement options are available to the students in your district(s)? (Please provide a list in the space below)

 Local school district - neighborhood school 	8
 Center based district program 	2
Out of district placement within N.H.	1
Other:	4

16. Are the students on your caseload (age 14 and above) involved in their own transition planning?

•	Yes	8
•	No	5

17. What services are available to your transition age students? (check all that apply)

Career Exploration	6
State Rehabilitation Services	5
Supervised Work Experiences	4
	State Rehabilitation Services

• Other – write in 8 (college experiences, nothing structured)



18. Do you have access to resources and training that help you to adequately meet the needs of your students?

- Yes 10
- No 4

19. What additional supports do you need in order to be prepared to provide services to your students?

More parent resources would be helpful * A way to share resources (assessments especially!) state wide * A list of ToD service providers and general areas they service to pass along to families who contact me asking

The support and respect of the school district

A better support network from other TODs in the state

More support regarding using and implementing the NH D/HH Guidelines, especially with SPED directors, in order to best advocate for my students/families and, if necessary, really push to get all of the supports and services necessary for their success. Hearing loss is a disability that is greatly misunderstood and underestimated and it can be very challenging to sometimes even get a foot in the door to provide services that critical to the success of the kiddo. As a whole, NH also needs more opportunities for students who are D/HH to connect that don't necessarily rely on their parents/guardians to pursue, because for many of my students, that just doesn't happen. There is a huge need to create a "community" where none exist in our very rural state.

Technology such as chrome books, smart board, projector, iPad.

Training related to ESS services

More family sign language programs and update curriculum resources

More teachers of the deaf in the state to meet the needs of students

Transition is an area of weakness... I am drowning trying to figure it out.

Related to early intervention: As service time increases, for families and their children, once CI activation occurs, there is an urgent need for TOD's who can sign and provide aural habilitation.

Would love to have more access to signing adults/ continuing asl classes



Transition materials for older students And a format for Assessment

20. Is there anything else you would like to share that would help us to better understand your teaching environment and professional needs?

Standardizing assessment protocols for DHH * Helping school nurses understand hearing loss and the needs of DHH students in schools (I have been asked to resent to a group of school nurses this summer along with Dr. Rachel Parkignton) * Clear early supports and services assessment protocol and clear transition protocols

They don't know what they don't know

While the dinners in Bow are great for connecting as professionals, I am unable to attend them because they only happen in the evening and I have small children without child care at that time. I would love an opportunity to connect a few times a year during regular business hours.

I travel a lot to see kids who are spread far and wide. My car always looks like a teaching supply store exploded in it and I am usually lucky to find a small, quiet corner to work with my student at the various schools I visit. I work with some very amazing schools, teachers, and teams who are very welcoming and appreciative of the support that I can help to provide. On the opposite spectrum, I also work with some not-so-warm-and-welcoming teachers/teams who aren't interested in learning about how to best help their student with HL or seem to only really care about the bottom line of their budget rather than what will best serve their students who are D/HH. Even when districts and administrators are supportive of my efforts, there are still so many misconceptions about D/HH that can make my day-to-day work extremely challenging. For instance, even if I've contracted with a district for 10 years, I might still have to sometimes "hunt down" kids with HL between the different school in the district because people don't seem to know either that a teacher of the deaf is available to the district, or that the "degree of hearing loss is great enough to warrant" involving me, or even that a teacher of the deaf should be consulted for support. It's extremely frustrating.

Having more technology available would better support the learning environment for the students.

I am a direct service provider and consultant. I travel 1 hour and 45 minutes one way to meet a family half-way to provide services twice a week because there are no qualified service providers. Families, early interventionists, districts, therapists, and educators need access to Cued Speech services, both consultative and direct. I am willing to provide services, but even more needed, the training, so others can provide the services.



Looking forward to what's to come. Thank you!

Many districts don't understand/think they need a TOD, so they often refuse to involve us. More educational to Special Ed Directors is essential for getting these students services. Also, ways to reach Northern NH. No TODs are able to provide services way up north.

There are not enough hours in the day to do what needs to be done. From the minute I walk in the door, I am already behind and my time is over-committed. The district has suggested doing consults via email.... which only means that now I can do them from home on my own time and not during the school day. How do we make districts understand how much time our Deaf and Hard of Hearing students need? Only one "fly by" consult during the year and some email consults generally aren't enough. I am hesitant to put in auditory goals and/or self-advocacy goals that would require time to implement because I don't have it. I carry a full teaching load, full case management load as well as consults on other IEP and 504 students. Professionally, I don't feel like administrators truly understand how complex our jobs are because they don't understand how complex our students are.

Professionally, workshops are needed for TOD's and SLP's who work with children who are DHH related to aural habilitation.

Appendix E

Administrator Survey Results

ATN Survey: Administrators

10 Respondents (Spring 2020)

- 1. The deaf/hard of hearing education services in your local area/region has many strengths. Please name the strengths that have made an impact on the students, family or professional work.
 - We do not have many strengths. We are limited to a sole proprietor TOD who is minimally communicative and charges exorbitant fees for service.
 - FM systems Close captioning VR services Translators/signers
 - We've been fortunate enough to have a very quick response from service providers when we've needed services for students.
 - We have not had much contact lately as the need has not been there.
 - As of this time we do not have a need for deaf/hard of hearing education services. NA
 - The strengths that we have is that the providers in our area are excellent! However, there are not enough providers.
 - We just have one person in district who is our deaf ed teacher. We do not utilize anyone else or any



other services outside of that staff member at this time.

- Having a director of student services willing to seek and fund services required for students who are
 deaf and hard of hearing. Being in a region on the border with MA, we have additional opportunities
 than other parts of the state.
- Efficient, dedicated, creative in finding solutions.
- Consult w teacher if the deaf services w SERESC
- 2. The deaf/hard of hearing education services in your local area/region may have some gaps. Please list those gaps.
 - Lack of choice for available provide rs. Critical shortage of educators certified as T ODs.
 - Lack of choice for available providers. Critical shortage of educators certified as TODs.
 - Access to teachers of deaf/hard of hearing Funding info for schools/families re: hearing
 - aids and other technology/training and consultation...need affordable options and easy access
 - Number of professionals who are certified to work with this population
 - N/A
 - NA
 - American sign language interpreters for young children. We need more than one TOD
 - and Educational Audiologist for the area.
 - I don't know of any services specifically outside of our one staff member who we have that services all of our deaf/hard of hearing students.
 - None
 - We spend a lot on travel times since we are in the upper valley
- 3. There are various opportunities (e.g., agencies, programs, support groups, activities) in New Hampshire that support students who are deaf/hard of hearing and their families. Please list the opportunities that you feel benefit or could benefit students, families and professionals.
 - Most programs and available resources are located within the Southern tier of NH and are not accessible to children and families "below the notch".
 - Access to information about how to access all available services/cost for various regions in one
 well-advertised location so that schools and parents can one-stop shop. What currently exists and
 how to access and find easily needs better promotion
 - n/a
 - NA
 - I am not familiar with these as I depend on our service providers to inform and connect our families to them.
 - I really don't know
 - Support group of family get togethers for students who are deaf and hard of hearing to get



together. Our region is very rural and there are no opportunities for students to practice their ASL or other communication skills with others who are "like them".

- None known
- DHMC audiology has an Ed consultant
- 4. There are challenges within the state systems for supporting students who are deaf/hard of hearing. Please list those challenges.
 - Northeast Deaf and Hard of Hearing Inc. company is an aggressive "advocate" for parents and
 are exceptionally adversarial with school district who are forced to contract services with them
 because they are one of the few agencies with ASL trained TODs.
 - See previous comments. Also, since this is a low incidence population, often it is planned for as the
 need arises, so the need for training, equipment, etc is immediate. The system needs to be able to
 kick things into gear as needed and keep information current and out to schools and families on an
 ongoing basis. Schools need guidance on planning ahead to address these needs more universally.
 All teachers/admin need good, current affordable access to training Approach needs to be
 collaborative in nature with promotion of inclusion. Emphasis needs to be on access and training for all.
 - n/a
 - NA
 - I think the providers and parents would give you better information on this.
 - Unsure
 - Lack of resources available to the rural and "far-away" areas.
 - Equipment is expensive and it is hard to maintain when it goes home sometimes.
 - Sending equipment home during remote learning. Equipping receiving districts buildings for our high school tuitions
- 5. What recommendations do you have to enhance the education of students who are deaf/hard of hearing in New Hampshire?
 - Contract all services with the Maine-based "All Together Now" agency.
 - Common vision from state translated to districts regarding inclusion and access. Free training for school personnel NOLO equipment, training to make incorporating into universal design doable.
 An understanding of accommodating the needs of deaf/hard of hearing students to support accessibility to what is available to all students vs. modifying
 - Curriculum and assessment so that all students have access to the same content
 - We need some private schools that specialize in services for students who are deaf but also have intellectual disabilities as well.
 - n/a
 - NA
 - Keep inclusion at the forefront of our work and work to provide access to typically hearing peers,
 while addressing the unique needs of this population



- Probably more programming at the college level to train and prepare teachers of the deaf
- At this point, I believe that NH needs to look at creating regional service centers to meet the needs of children with low incidence disabilities, deaf and hard of hearing, vision issues including blindness and including O & M, etc.
- None at this time
- Clone Linda Taylor



Appendix F

Parent Survey Report

SWOT Summary

Strengths

- Early Supports only 5% were dissatisfied with their ESS services
- Transition from ESS to SAU only 8% were dissatisfied with the transition experience
- Hearing Assistive Technology only 3% felt HAT was not being used and/or was not effective (although 12% felt professionals weren't properly trained)
- Parents Included in Planning 81% of parents felt included in the planning process

Weaknesses

- Newborn Hearing Screening 61% dissatisfied with experience
- ESS Delay 46% reported a delay of at least a few months from diagnosis to services from ESS
- Services 68% were satisfied with the services their child receives
- Post-High School Transition Note: Small Sample Sizes for each of these 33% didn't have access to a trained profession in planning for post-high school 14% did not have transition goals 43% had no access to work training/experience

Opportunities

- Hearing Loss only 48% thought the impact of hearing loss were well or very well explained to them at diagnosis
- Modes of Communication 41% thought modes were not explained well
- IEP's Just over 10% had 504's instead of IEP's and one had no plan (which is likely understated)
- TOD's 18% did not work with a TOD (which is also likely understated)
- Communication Plan 69% reported having an integrated plan, but 92% of those thought it was effective
- Family Considerations 50% of parents felt their family needs were not considered (ie. Training in modes, mentoring, etc.)

Threats

- Guidelines only 44% reported using guidelines in planning meetings
- Training only 59% had training on hearing loss for staff as part of the plan (21% no, 21% don't know)
- LRE 21% reported not discussing LRE at their planning meeting
- Location of Services 27% of respondents didn't feel the unique situation of student/family were considered in the discussion on location of services

All Together Now - New Hampshire Parent Survey Report

Allison Jumper & Korin Suarez



"About 2 to 3 out of every 1,000 children in the United States are born with a detectable level of hearing loss in one or both ears. More than 90 percent of deaf children are born to hearing parents" (National Institute on Deafness and Other Communication Disorders,

2016). Deafness and hearing loss occur rarely in children. An elementary school with 350 students may have only one student with hearing loss, at any given time. Low incidence diagnoses like pediatric hearing loss are at an elevated risk of being misunderstood, because there are so few children with this diagnosis in the general population. In educational institutions, many school administrators, educators, and staff members have little to no experience working with deaf or hard of hearing children. The potential underlying ramifications of widespread inexperience with hearing loss in children necessitate a need to examine how often, how well, and how consistently appropriate accommodations and services are being offered to and implemented for these children. The All Together Now - New Hampshire

(ATN-NH) Parent Survey was written by the ATN-NH parent representative team to assess the areas of success and need that exist for parents in accessing appropriate educational services and accommodations for their deaf and hard of hearing (DHH) children in the state of New Hampshire. To best perform that assessment, the survey was designed to gather information about the experiences of parents of DHH children, relevant to what it has been like for parents in pursuing their children's educational service options. The goal of the ATN-NH Parent Survey was to capture direct feedback from parents of DHH children that will assist educators in providing equal educational access to DHH students.

Survey results indicate wide variation across New Hampshire in the experiences of parents throughout the process of determining accommodations and services for their deaf or hard of hearing children. Inconsistencies in the parent experience were evident in the areas of: provided explanations of communication modes, access to knowledgeable DHH professionals during service plan development, and the availability of educational service guidelines during service plan writing. 41% of parents felt that their child's communication options were either not explained well or not explained at all at the beginning of their child's DHH experience, 14% of parents reported that they did not have a DHH professional present during their child's educational service plan creation, and 56% of parents indicated that either no DHH specific educational service guidelines were used or that they were unaware of whether or not—guidelines were used to develop service plans for their DHH children. Engaging professionals who are equipped with the current research on modes of communication and best educational service practices during IEP/IFSP/504 plan writing is critical in achieving equitable and consistent accommodations and services for all NH DHH children. Both educators and parents need DHH specific educational service guidelines to level the playing field in ensuring that DHH children receive comprehensive information about communication options, appropriate accommodations and services, and equal educational access.

NH parents also indicated that the educators and staff who work with their DHH children could strongly benefit from more training in the impacts of hearing loss on children in school. In fact, nearly 21% of participants reported that their child's educational service plan did not indicate training for school staff on their child's hearing loss and its impacts. A large percentage of parents (50%) felt that their family's unique needs were not



taken into consideration when planning DHH services for their child. These statistics indicate that NH educational institutions and service providers need to gain a greater understanding of the needs of children with hearing loss alongside how hearing loss impacts family units. Families need to feel confident in their complete inclusion in the educational process that is designed to provide services and accommodations for their DHH children.

Survey results revealed weakness in the newborn hearing screening process, leading to families finding themselves struggling when they encounter delays in their child's diagnosis, incomplete information on communication mode options, and clear gaps in their referral to other specialized resources. At each educational step, from birth until high school graduation, DHH children need to be presented with a full range of appropriate and well informed educational service options, otherwise they may miss out on life altering opportunities, such as access to modes of communication, or simply the ability to receive hearing assistive technology.

The National Association of State Directors of Special Education's "Optimizing Outcomes for Students Who are Deaf or Hard of Hearing: Educational Service Guidelines," carry the potential to be instrumental in addressing the deficits that were revealed in the results of the ATN-NH Parent Survey. Uniform distribution of these guidelines to every educational institution and DHH service provider in New Hampshire, with the expectation of universal use in the case of every single DHH child, will have sweeping impacts for DHH children across the state. Additionally, creating a streamlined process for parents to access a more centralized option for resources after their child's deaf or hard of hearing diagnosis will also be critical in eliminating life altering delays in accessing necessary, choice-enabling information for DHH families. And lastly, building a community of DHH families in NH who feel empowered with up to date educational service information and communication options will certainly be key in eliminating the invisible bias that has historically kept DHH children and families from universal equal access to education.

All Together Now - New Hampshire Parent Survey Results Summary

To gather survey participants, the ATN-NH parent team appealed to New Hampshire parents of deaf and hard of hearing children for responses via direct solicitation, distribution by DHH professionals, and public advertisement between May 2, 2020 and June 10th, 2020.

Below is a summary of the results from the survey that was closed to new participants on June 10th, 2020.

Summary of Survey Participants

- A total of 42 NH parents participated in the survey.
 - 41 of those participants indicated being parents of DHH children. 1 participant indicated not having a DHH child.

¹ https://www.nidcd.nih.gov/health/statistics/quick-statistics-hearing



- 41 of those participants indicated being from New Hampshire. 1 participant indicated that he/she lived outside of New Hampshire.
- The parent category with the greatest representation was parents of kindergarten/elementary school children.

General Observations by Survey Category

Newborn Hearing Screening (NBHS)

- Most survey participants were dissatisfied with their newborn screening experience.
- Survey results show parents indicated deficits in the post NBHS referral process.

Explanation of Hearing Loss (HL), Hearing Assistive Technology (HAT), and Modes of Communication

- Survey participants were split into two nearly equal groups who were happy with the provided explanations of both hearing loss and HAT and those who were not happy with the provided explanations of both hearing loss and HAT.
- Most respondents expressed a degree of dissatisfaction in the provided explanation for different modes of communication.

Early Supports and Services

- Most survey participants indicated satisfaction with ESS.
- Strengths of ESS often mentioned, specifically MICE (which has recently been eliminated)
- Parents of children utilizing ESS indicated weakness in access to education in different modes of communication, such as ASL and/or Cued Speech, for both their children and their families.

Transition

 Most survey participants were satisfied with the transition to preschool, apart from those who did not have access to ESS.

Educational Service Plan

- Most DHH children have IEPs.
- Most plan writing teams included DHH professionals, although some participants had to advocate for a DHH professional to be in attendance at plan writing meetings.
- Majority of parents unaware or not confident in the usage of the educational service guidelines for children with hearing loss during their educational service plan determination process.
- More than half of the participants have a communication plan in place, with some evidence that participants are unaware of what a communication plan is.
- A majority of the parents feel included in the IEP, 504, IFSP process, although there seem to have been conflicted feelings on whether or not they had all the information specific to DHH needs.

Services

• Most participants have TODs for basic needs such as hearing equipment checks and making sure children advocate for themselves, although some families were required to strongly advocate to even



receive those TOD services.

- Most are using hearing assistive technology while there is possible indication that HAT is not available
 or not being used, and a discrepancy between the number of HA and CI users and the number of
 FM/DM users.
- Results indicate that parents feel that a substantial amount of staff are not receiving
 adequate/any training on hearing loss. (ex. a simulation for a DHH child in a loud
 environment/loud background noise would be beneficial for staff to have a better understanding
 of that specific child's hearing loss and the accommodations they may need).
- Most participants indicate general satisfaction with services provided through their child's school.

Placement and Other Supports

- Survey results indicate LRE is an area that needs continued monitoring for consistent implementation during the educational service plan writing process.
- Survey results show that a need exists to ensure that consistent information is being given to families regarding possible out of district placements in specialized schools throughout NH.
- A significant number of families feel that their unique needs are not addressed in the services determined for their DHH children, specifically in the areas of: enough access to ASL instruction, DHH resources for families, and access to DHH peer groups for their children.

Post High School Transition

- Most survey participants who have children over the age of 14 say they have post high school transition plans written into their child's educational service plan.
- Survey results indicate that parents are divided on the overall effectiveness of their child's post high school transition plan. The results also show mixed feelings on their child's involvement in making those plans and their child's access to work related experiences.
- Results are unclear on whether or not access to VR counselors is equitable for high school aged DHH children.

Evidence for General Observations by Survey Category

Newborn Hearing Screening

- Just over half, specifically 51.2%, of participants were either dissatisfied or very dissatisfied with their newborn hearing screening experience. Less than one quarter of participants, specifically 24.4%, indicated satisfaction with their NBHS process.
 - According to participant responses, audiology not considered a pressing need, participants
 describing getting looked over in their newborn screening experience. Some participants
 described wanting or needing an advocate to help them during this time (that wasn't
 provided)
 - Many responses describing a delay in either diagnosis or getting correct amplification or intervention otherwise to address hearing losses (3 specifically mention delay in amplification fitting)



- Several respondents describe a lack of knowledge by their general providers on HL and its impacts on children.
- Several respondents reported inconsistent results and then lack of follow up, resulting in delay in diagnosis.
- Some respondents reporting being given report of failing NBHS as an afterthought, handed a
 pamphlet, being told "most fail the nbhs and don't worry"

Explanation of HL/HAT/Modes of Communication

- Most participants indicated that at least the basics of HL were explained when first their DHH child was first diagnosed.
- Most participants indicated that at least the basics were explained for (HAT) at diagnosis.
- Results show that more discussion of other modes of communication would have been helpful in the early stages.
- On the topic of how hearing loss was explained to them, parents generally feel they were given not enough explanation (20%).
- On the topic of hearing assistive technologies, 18% felt their options were not well explained or not explained at all.
- On the topic of communication options at diagnosis of HL, most parents felt that the options were
 described in a very limited way. 41% felt that these options were either not explained well or not
 explained at all, and 26% felt that only a basic explanation was given. A combined 67% felt that options
 were not explained or explained in a very basic

way.

- "hearing loss was not emphasized"
- Benefits of differing modes of communication not fully explained
- Some describing not being provided information on all of the communication modes from medical providers
- Responses indicating a need for more detailed follow up to help families understand the ramifications of hearing loss and more help in decision making regarding modes of communication and technology
 - MICE cited as a beneficial resource for this reason, but responses indicating that
 MICE is no longer available, a lot wish it was still available
- Some described delays (delay from providers pushing back on modes of communication choices, delay
 in getting access to technology when providers not confirming a diagnosis, delay from people
 indicating that child would "grow out of" hearing loss diagnosis)
- An instance of a medical provider deferring to school systems to provide further HAT or service to children with HL - resulting in delay of service when the school system denied student's eligibility for assistive technology.
- Delays in getting explanation or access to technology due to fighting with insurance companies.
- Delays were caused by an inability to find or hear consistent information on HL and modes of



communication from providers.

E arly Supports and Services

- Just over half of survey participants who had a child eligible for ESS began receiving services "just
 after diagnosis," 15 out of 28 parents, or 54%. 10% of parents of children who were eligible for ESS
 services began receiving those services at 6 months after diagnosis or later.
- Of the parents whose children went through ESS (34 parents), 76.5% were either satisfied or very satisfied with their provided services. 17.6% reported being neither satisfied nor dissatisfied with their provided services (neutral), and 5.8% of parents reported being dissatisfied.
 - MICE cited as a beneficial resource in 5 open response answers
 - Gateways (2 citing this resource), Easter Seals, and Richie McFarland Children's Center also cited
 - "ESS was a life saver for our family"
 - "The only service provided at the time was deaf education classes. Hard of hearing is not the same as deaf." A subset of respondents brought up feeling like there were gaps in the ESS referrals and resources for children who have less severe forms of hearing loss.
 - Some offering praise for the family sign language program
 - Some people felt that the quantity of the services were too limited

Transition

- A large majority of survey participants reported being satisfied with their transition from ESS to the public school system (75.7% of parents who had a child who transitioned reported being either satisfied or very satisfied with this process). 9% of parents who had a child who transitioned from ESS to the public school system reported some degree of dissatisfaction with that process.
 - "It was an extremely smooth, well explained process," "It's been great," "A member of the ESS team was present at the meetings."
 - More rarely, parents report difficulties in the transition process, indicating that some school staff do not understand the nature of hearing loss and the impacts it can have on students when equal access is not provided.

E ducational Service Plan

- A large majority of parent survey participants report that their children have an IEP. Most parents of DHH kids have been able to secure an IEP for their children. 4 parents reported having a 504 plan, indicating that a small percentage of parents are potentially not being granted the access to services (that would only be accessible on an IEP) for their DHH children that they may need.
- A large majority of parents reported that their educational service plan writing team included a DHH
 professional for guidance. 14% did report that they did not have a DHH professional to help guide
 their plan writing experience.
 - "We did not get the service of a dhh professional until a liaison from the audiology department attended an iep meeting and strongly advocated for it. (7 years into my child's education). She



- had accommodations but they definitely ramped up after a professional joined the team."
- "started with a 504. Graduated to and IEP after some testing done through the district with the school psychologist. Amanda M did observations from DHMC and was very helpful."
- "When we was first assessed I was fortunate to have talked to another parent who told me to request a TOD for the meetings. If I did not ask in writing to have a TOD present I do not think the school district would have had one there. They were not easy to work with. He was not assessed by a DHH professional. They did all the basic assessments but did not do functional listening evaluations with him at this first assessment."
- On the use of educational service guidelines for plan writing, a majority of survey participants indicated that there were no guidelines used or that they did not know if guidelines were used. 56% indicated that no guidelines were used or that they were unaware of whether or not guidelines were used.
 - Examples of responses to the question "Were you aware of educational service guidelines for children with hearing loss?"
 - "I was not aware but had full faith in the professionals on my team."
 - "I'm not sure."
 - "I am not aware of educational service guidelines."
 - "We found out from NEDHHS and DOE about guidelines and brought these to the table from the beginning. During this time we became NH PIC advocates and tried to give them up to date NH standards. They refused to take them."
 - "Yes. I had seen guidelines posted on the NH DOE's website. No one from our school districted ever referenced any educational service guidelines for providing appropriate accommodations for a child with hearing loss in a mainstream school setting."
 - "Yes, and they helped ensure our son has the most access to his education possible. They altered his learning environment and services provided."
 - "I was unaware of this at the time of our first IEP, and since we weren't going through the process with the support of ESS (due to timing of diagnosis), we were on our own to figure out if the services sounded appropriate for our kids."
 - "Yes yes and a great impact really fast"
 - "I was aware of them and brought it with me to ensure we included what we needed but they did not have it. Recently I asked them why they didn't have it and they said they were unaware and they don't get hard copies of it from Dept of Ed. They were able to make 1 copy for his school and they brought it to the last meeting we had."
 - "I have the NH guidelines from NDHHS and I got the new guidelines from NASDSE just as we started evaluations. I gave physical copies to our case manager and told her I would be requesting supports and services based on those documents. I did this at our first meeting and found it to be a successful approach. We have a very thorough IEP and none of our requests were considered and denied."
 - Most survey participants have a communication plan as part of their child's educational service plans (69.4% are sure that a communication plan is included). 19.4% of parents indicated that their DHH



children did not have communication plans.

- Of those parents indicating that they had a communication plan, a combined 63.9% indicated that they felt their child's communication plan was effective. 8% indicated no opinion on the effectiveness of their child's communication plan, and 5.6% (2 participants) indicated that the communication plan was noteffective.
- Most survey participants indicated feeling included in their child's plan writing process. Even though
 results showed that participants felt included, parents also indicated feeling like they were unsure if
 they had all of the necessary information while they were taking part in the plan writing process.
 - A combined 80.5% of participants indicated agreement with the statement that they were
 equal members of the educational service plan creation team/process. 4 respondents
 indicated that they did not agree with that statement, making up 11.1% of survey
 participants.
 - "We felt very included and empowered during this process. Looking back, we weren't well educated however. I wish we had some type of support to guide us through this process."
 - "I am a part of the meetings and they are receptive to things I have to say, share and would like discussed. They are open to items that I think need to be included. The only item they are not willing to entertain is supporting the Family Sign Language Program or teaching him ASL at school because he does not require ASL for learning at school. This upsets me because I think it is important for him to learn ASL to fully integrate into the culture and at some point in his education it could be very beneficial for him."
 - "Along the way, it has felt that my concerns have not been treated seriously. There were times in 504 eligibility meetings when I felt that my input was outright verbally dismissed and that I was personally chided for asking for things (evaluation and consult with ed. audiologist, evaluation for an FM system, consideration for the social implications of his hearing loss) that my child "did not need." At no point have I felt like an equal member of my son's educational service plan writing team."
 - "I am a very large part of her IEP meetings. I have many says in the testing, forms of testing; writing goals and also the forms of testing to be assigned to her."
 - "At this point, our school district knows our child and I believe they make the most of what they
 can do under the law. Our initial experience, when our child was initially mainstreamed was
 more of a fight for even basic accommodations, like closing classroom door to noisy
 hallway,etc."
 - "We have asked countless times for a full communication plan. 'Sau' will not accommodate"

S ervices

- Most DHH children in NH work with a TOD (82.4%).
 - Some comments indicate that while their child now does work with a TOD, that families have had to fight for their child's ability to access a TOD, it wasn't provided at first.
 - Some reporting extremely supportive TODs, some reporting TODs as only present for



technology checking.

- Of the 33 survey participants who stated that their child(ren) utilize hearing aids and/or cochlear implants, only 22 stated that their child(ren) use an FM/DM system regularly, potentially indicating that some HA and/or cochlear implant wearing students aren't using M/DM systems regularly in school. There were 3 participants who indicated they have DHH children who do not utilize any HAT regularly.
 - Most participants agreed that their child's HAT was being used effectively in school.
 - There were 4 participants out of 29 who reported that their child's educators were not well trained in their child's HAT (13.7%).
 - Nearly 21% of participants report that their child's educational service plan does not indicate training for school staff on their child's hearing loss and its impacts.
 - Most survey participants were generally satisfied with the services that their DHH child receives (67.7% with some degree of satisfaction).

Placement and Other Supports

- Most participants said LRE was discussed (76.5%)
- The participants who responded that LRE wasn't discussed represented 20.6% of all participants. 2.9% reported not knowing if LRE was discussed.
- Most indicated their family's unique circumstances were considered when deciding where their child would attend school, a significant number of participants said their unique situations were not considered. (8 out of 30 participants who felt that thisquestion was applicable to them indicated that their needs were not considered during placement.)
 - "My biggest problem with the education system is that it's not providing the families with the ability to communicate with their child/siblings. Example: I have 1 hearing child and 3 DHH children 3 will be attending the deaf and hard of hearing school learning ASL etc. while my 1 hearing child will be away from her siblings and not learning their means of communication. I would like to see that change."
- Just over half of survey participants have children who receive DHH services at their local schools, in their school districts (61.8%). Nearly 21% have children who were placed out of district.
- Many responses indicate that a significant number of students who are mainstreamed are pulled out for special services.
- Exactly half of survey participants felt that their child's IEP/504/IFSP team took their family's unique needs into consideration when planning for services for their DHH child. This indicates that a large percentage (50%) felt that their family's unique needs were not taken into consideration when planning DHH services for their child.
 - "The school defers to us as parents to share what we need and find those resources. Our
 educational audiologist however, has worked tirelessly to connect us to resources she
 anticipates we may need or benefit from."
 - A large number of responses showed that families have received family sign language classes at only a 10 week stretch, this shows that IEP/504/IFSP teams aren't providing nearly as much



as they should or could be when it comes to learning an entire new language.

- "We have had family signing programs come out a few times. Although you can only learn so much through that, I personally feel there should be an actual class for parents to become fluent in their child'slanguage."
- Survey results also indicated that IEP/504/IFSP teams were not adequately addressing other modes of communication for DHH children.
 - "We did advocate for 32hr./yr of mentorship, 32 for family Cued Speech instruction, CS family summer camp events and Deafblindness and DHH training opportunities.
 We still are advocating on actually getting these."
- There is indication that some families of DHH children feel a lack of support and access to other important resources and services (such as access to other DHH peers for their children, DHH support/resources for other family members, etc.)
 - "They do not include anything that assists the family in needs related to HOH. We
 do not get education, opportunities to interact with other families or help with
 sending us to conferences that could help us."

Post High School Transition

- Most participants are under the age of 14 but for those who are 14 or older the majority said yes they have transition goals written into his/her (IEP, 504, etc.) plan
- Of the 8 survey respondents who have high school aged children, 7 indicated either feeling satisfaction or were neutral with their child's post high school transition goals indicated dissatisfaction with those goals.
 - "The goals are simply the wishes expressed by my child. They are Not very realistic, given my child's executive function deficits."
 - "They basically check a box and write in things they have written in for hundreds of other kids :(They are not specific to my child."
- 4 out of 8 respondents with a high school aged DHH child indicated that their child's plan writing team prioritized actively engaging their child in their own post high school transition planning.
- 4 out of 8 respondents indicated that their child had opportunities for work related experiences during their high school experience.
- An estimated 25% of survey participants with high school aged DHH children did not have access to a Vocational Rehabilitation counselor.

Themes Present in ATN Parent Survey Results:

Challenges:

- Deficits exist in the NBHS process and immediate referral system for kids to get interventions without delay.
- Deficits exist for parents in their ability to get consistent advice from professionals at diagnosis,



and in their ability to receive a full explanation of all of the modes of communication options at diagnosis.

- Parents of children utilizing ESS indicated weakness in access to education in different modes of communication, such as ASL and/or Cued Speech, for both their children and their families.
- Survey results show a clear need for educational service guidelines to be in the hands of all New
 Hampshire school administrators who oversee accommodation and service plan development for
 students with a diagnosis of hearing loss.
- There is a need for educators to have access to materials that educate them on the specific impacts of hearing loss on children, and what those impacts indicate in regards to the needs of children with HL in schools.

Strengths:

- There are indications that Early Supports and Services is providing parents with quality in-home services and personnel for many DHH children in New Hampshire. Many survey participants specifically mentioned MICE as a large component of their positive experience with ESS. Survey respondents also largely reported that ESS exists as a valuable resource for parents as they help to advocate for their children as they transition into the public school system.
- Most DHH kids have access to TODs, and most parents feel that their children's TODs are strong advocates on behalf of their children in New Hampshire.
- Most DHH kids have IEPs.
- Most parents feel involved in their DHH child's IEP process.

Opportunities:

- DHH children with 504 plans may have gaps in their provided accommodations and services. The
 usage of the "Optimizing Outcomes for Deaf or Hard of Hearing Children" educational service
 guidelines could ensure that all children are receiving the accommodations and services that they
 need to address the impacts of their hearing loss in school.
- There exists the ability to address service provider's/professional's gaps in knowledge by providing the "Optimizing Outcomes for Deaf or Hard of Hearing Children" educational service guidelines.
- The "Optimizing Outcomes for Deaf or Hard of Hearing Children" educational service guidelines could be instrumental in correcting inconsistencies in the implementation of LRE across New Hampshire.
- The results indicate that more research should be done to investigate the consistency of availability of VR counselors for high school aged children.

Threats:

Educational institutions are possibly relying too much on parents to provide information on the needs
of children with hearing loss, allowing for inconsistent implementation of accommodations and
services in educational settings for DHH children in New Hampshire.



- Undercover bias having implications on service needs being met (at all, or at least in a timely fashion)
 - Example: minimizing impact of HL, dismissing HL as not a pressing need, expressing that a child will "grow out of it," expressing to parents that HL is just "fluid in the ears."

Recommendations and Questions

- Audiologists should contact families as soon as they receive the referral from the newborn hearing screening showing a possible fail.
- Parents need better equipment for newborn screening or medical staff need to refer patients to the
 audiologist while parents are still in hospital (most were unsure if it was an actual fail or the machine
 malfunctioning or they were not referred).
- Most began ESS after diagnosis over age three so could not attend ESS. Should ESS go to age 10?
- Many participants mentioned MICE, which is no longer active, maybe look into exactly what they did/why they ended?
- Since the survey results are heavily influenced by parents of children who have already aged out of ESS, the results may not accurately measure the level of parent satisfaction with current ESS services. Parents with children who utilize ESS services currently should specifically be asked about their ESS experiences as they are happening today, to get a better understanding of the current strengths and weaknesses of ESS. Specifically, a comparison between ESS with MICE programming and ESS without MICE programming should be completed and analyzed.
- Most DHH children have IEPs, but ALL DHH kids MUST be on an IEP.
- Question: Can we ensure that these guidelines are sent out to all public school systems in New Hampshire, and that districts are given a directive to use them for all DHH kids?
- Families should have ASL tools/classes readily available to them upon learning their child is DHH. The
 classes should be free to those families, and permanently ongoing not only provided for a short 10
 week time frame.
- Siblings of DHH children should be learning alongside the DHH student in order to better communicate with their siblings, such as attending the same school if a child is placed out of district.
- All families of DHH children should be aware that there are deaf schools in NH.
- All families of DHH children should have all the information about different communication modes for their children so they have the right to choose which better suits their specific needs.
- Survey results did not clarify how much access to TODs each DHH child in NH actually has in their
 educational or home setting. This is of concern because DHH children may get only minimal TOD
 services that do not meet all of the educational service needs that they have. How do we assess the
 quantity and quality of the TOD services that are being provided to all DHH children across NH?
- All educators and school staff in NH who work with DHH children need to be better educated on the needs of a child with hearing loss so they have the appropriate knowledge when that new DHH student arrives.
- Do schools need to report when a child with hearing loss attends their school? If not, it should be required and those children should be looked over and made sure their educational needs are being



met.

- ALL children with ANY hearing loss should have access to an FM system without hesitation.
- ALL educators providing direct instruction (DI) to a DHH child MUST be proficient in that child's mode of communication and ALL educators coming into contact with a DHH child should have AT LEAST a general knowledge in the chosen mode of communication.

All Together Now - New Hampshire Parent Survey Analysis

Heather Holt, M.Ed, P.G Dip John Holt, M.S.

Survey Data Integrity

Our data set includes 42 respondents with 32 having completed the entire survey. Ages are relatively evenly spread with 12 infant to preschool, 18 elementary aged, and 12 middle/high school aged. This leads to a smaller sample size for middle/high school age as those students are able to answer questions about their experience when younger, but the opposite is not true.

- There is no indication that any responses were not material or answered untruthfully. The gradual
 rate of decline in answers indicates it was likely the time commitment that led to responders not
 completing and therefore all data points are included in any percentages or rates given in this
 analysis.
- Anecdotal evidence gathered while promoting the survey would indicate a potential bias in that
 generally the parents who are most involved and active in their children's programs are the ones who
 responded to the survey. This could impact some questions more than others. For instance, it may not
 have a significant impact on data received on Newborn Hearing Screening (although any bias could
 impact any given question), but it could greatly impact whether a child has an IEP or a 504 or how
 involved they are in the process overall.

Data Comparison

Many of the questions were in open response, multiple choice or other similar formats, but there were six questions posed in a 5 point Likert scale allowing them to be compared as a group. This comparison immediately highlights two areas for concern.

- The first is Newborn Hearing Screening where 51% of respondents (21 total) reported dissatisfaction with their overall screening experience and only 24% were satisfied.
- The other area is education for new parents on modes of communication. Only 33% of parents felt the various modes were explained to them in a satisfactory manner and 41% felt they weren't explained well or at all. This can be contrasted with the question before it (worded in a similar manner) where only 18% were unhappy with the explanation of Hearing Assistive Technology options. This indicates a clear dissatisfaction with the explanation of options for modes of communication for DHH children.

Future Research/Areas of Interest

<u>Teachers of the Deaf</u> - As TODs are such a critical piece of DHH education, further research/data regarding the time DHH children were given by TODs and the type of services they were given would be important to analyze. This data could be compared to the NASDSE guidelines or other examples of good practice to help define what "good access" and "strong advocacy" might mean in terms of numbers or quality. For example, we were not able to assess quantitatively the details such as whether direct services were being offered in the child's mode

Y New Hampshire Department of Education

Disclaimer: the content of this Report is based on a collection of opinions from third party survey results and does not reflect the opinions or policy preferences of the NHDOE or NHDHHS

of communication or how often the child is seeing a TOD for direct instruction, if at all. You could look at the fact that approximately 4 out of 5 students saw a TOD as a success, and in some ways it might be, but that also means 1 out of 5 did not. Of those seeing TOD's, three parents said the TOD only does hearing/technology checks and another two said they see them monthly. This is also an area that is likely subject to the type of bias mentioned in the Data Integrity section as involved parents are much more likely to have TOD services as part of their child's program. It is evident from both anecdotal evidence and the survey responses that the level and types of services given to students with similar needs varies (in some cases drastically) across the state. That is likely a reason the former MICE program was mentioned so often in responses.

Modes of Communication - Research indicates that approximately 95% of DHH children are born to hearing parents. Our parent survey results showed that over 40% of parents felt that modes of communication were not adequately explained to them. We feel this decision as to the family's choice of communication mode is one of the most important, perhaps the most important, factors in the success of their child's education and language access, and our results indicate that a significant portion of parents did not feel educated enough to make an informed decision. The choice of mode can depend on many unique factors and as such, honoring the family's choice of mode is mentioned in the NASDSE guidelines and IDEA law. Although some of that education happens before or outside of the school district's responsibilities, the mode of communication chosen is intimately tied to the child's education (personal, social, and career development included) and as such the school has a responsibility to help educate both parents and professionals in the potential modes of communication and the unique benefits of each.

<u>Family Considerations</u> - This was another area where the survey was unable to get to the level of detail needed to explain the full nuances of the responses, but approximately half of the respondents felt their family's individual needs were not considered. We have no quantitative data on how or why 50% felt their needs were considered or if there were specific needs that kept parents from feeling their needs were addressed. Some data can be combed from the free responses, but the overall feel is that although things such as deaf mentoring, family training in modes of communication, the impact of LRE choice on the family are mentioned in the NASDSE guidelines, there is significant room for further research on what is actually happening and work to be done to improve performance by school districts in the area of "family considerations".