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EDHI Conference

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Act 177, Supporting Age‑Appropriate Language Development for Deaf, Hard of Hearing, Deaf‑Blind Children in Hawaii

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>> I would like to introduce our panel today, the first panel, Colin Whited, he is a graduate from Gallaudet University. He was approved by the governor in Hawaii to serf on the disability and community board, and now he is currently employed as the communication SS specialist at the DCAP. Colin is a member of the deaf and blind task force and they introduced the language bill in Hawaii which become X177 and that's what we are going to talk about today. Jennifer Clark, receives her bachelor's degree in communication disorder and deaf studies at the University of California Fresno. She has a Masters degree from Gallaudet in deaf education specializing in early education. She has been working as a deaf and hard of hearing specialist at the Hawaii early intervention program since 2010. She is appointed by the director of health in Hawaii to be a member of the language ‑‑ early language work group, and Dale Matsumoto‑Oi receive her master degree in audiology at the University of Hawaii and just about two years ago she receive her doctorate degree and she has been working with the Department of Health in Hawaii and since 1988 and now she is currently working with children with special health needs branch. She is also a member of the deaf and blind task force who helped to introduce this bill. Although she is not a member of the working ‑‑ the early language working group but she is backbone that provides information, resources and it is support for the working group meetings. So let's start with Colin. Thank you.

>>COLIN WHITED: Thank you for that introduction. One of the things that we want to notice is there is a hot topic when it comes to deaf children ask we decided we need to do analyzed what it looked like in our state, do we have issues? What we found are these statistics and I think this is clear about what it depicts for Hawaii. Children without a disability show their reading proficiency rate as 74%, while deaf children are down to 14% so wow if you think about that 86% are illiterate. So using these statistics we decided to look at what our legislation was currently in Hawaii. We have a task force that is an advisory council to the legislative branch. We took these statistics and the lead case scores that we were seeing and we took that model and decided we wanted to introduce law and we got that passed and it was approved it and became law. We are the third state to become lead K using that policy as our model. So the law encompasses two things. We wanted to improve language services but we needed to know how and we decided we were going to do that by setting up a work group because what we have seen is we can identify a problem and the thing that we wanted to do is talk about it but we needed to know where, where are we missing this information? So this is a picture of our work group. You can look at these pictures. We have a total of 17 members. These next three slides show the different representatives that we have and who are the members of our work group. So for nonparent members what we decided and we agreed that it would be key to have 51% representing the deaf or hard of hearing and deaf/blind community and I appreciate Hawaii for recognizing the importance of having that representation of having such a large number of deaf people representing our work group.

Our group has a broad spectrum when it comes to professionals, deaf people with varying and life experiences and we are proud of the diversity because we feel that will give us better results and help with our discussions.

Pretty much that's the 17 members on our work group.

>>JENNIFER CLARK: So the purpose was to make recommendations to the legislature based off of the original act. So there were certain areas that we focused on. We wanted a resource guide for families, tangible and on the internet. Tools that we could use to assess and plan for IFSPs, going into IEPs. We realized that data collection was an issue so that is something we wanted to better address and understand. We wanted to understand the transition for ASL and all sorts of things and we convened the Department of Health, the DOE which covers 3‑5 and the executive office on early learning, those three agencies were represented in addition to our community members and parents. They were actually appointed, people were nominated and appointed by the director of health, meaning that we understood their background, who they worked for so we knew what we were getting ourselves into what we were really collecting people that could help to speak to their areas or specialties.

To facilitate the conversation we had a third party that didn't work for the DOH, didn't work for the DOE and was not necessarily a member of the community so they were neutral as best as could be. They actually worked for the family support organization. We abided by the sunshine laws and met 14 times between October 2016 and February 2018. These were our challenges when trying to figure out how to write a report and make recommendations. Data was hard to find. Not only data but accurate data.

So in early intervention, for example, we have only three ‑‑ we have a drop down menu that you can say this child has X, Y and Z things but you're limited to pick three things that describe the child so if the child is plus Down Syndrome plus awe statistic plus plus plus deafness may not be on that list of three things therefore it was hard to collect data on how many deaf or hard of hearing children we had and we found that to be true in the DOE as well because if they were qualified for the DOE, it was hard to track them. As far as members of the board knew we could not find standardized tools, so there are language assessment tools but none that we could say these were standardized on deaf or hard of hearing kids. The significant gaps within the system was true for DOH and DOE so training, there was a lack of training, open positions, personnel, people who were in the wrong positions, maybe an oral teacher teaching in a TC classroom or an ASL teacher who was a deaf itinerant teacher so resources, funding, parent and professional support on all levels in terms of activism and involvement in the classroom and also involvement in our early intervention sessions. We feel like these were our accomplishments but we will also talk about the products or other accomplishments that we had. Dale will do that. One of our accomplishments is that we had representation. All of us got together and we were civil and nice to each other. We were laughing about the plenary speaker and the two donkeys, because we were like, yes, that describes how we were at. We could having two different ways and had a huge issue with each other but we tried to work together to raise the literacy rates of all the kids. Identifying the gaps as best as we could. We felt like that was an accomplishment because there are so many gaps and breakdowns in the system that we felt like we were able to summarize those and put them into a report which we were happy to say we did submit, Yeah, and it's over! Now we can talk about part of the report that included subcommittees and other things.

>>DALE MATSUMOTO‑OI: So after meetings and e‑mails and discussions we finally produced a report and the report was submitted to the 2018 legislation and we have a link to the report. In the report it included the findings of what the work group found and it offers recommendations for improvements. We felt that there was still a lot of work to be done. So the work group has formed four subwork groups, four sub groups. This is to continue, so assessment is the first one and that was to look at the milestones for families to refer to, and then also to look at tools for assessment, for tracking, for outcomes, this is for the professionals in DOH and DOE. Another subgroup was for data and reporting. The third was for personnel, to address the staff shortage and to produce professional development training, and then the fourth subgroup was for the resource materials.

So, Act 177 expires in June 30th of 2018 so that's pretty soon but we felt there was so much to do. So what we're going to do is extend the work group and this will give ourselves one more year. By extending the work group we would be able to complete the resource guide and introduce legislation to fund for additional positions in early intervention and of course even ‑‑ well, with the exception of the work group and even beyond, we now have this communication with the Department of Health, DOE, parents, and that will always continue. I think that was the most important thing with our group is that now parents know that they have direct access and we have the parents to rely on, too.

So, what do we have for this 2018? We are excited that we're going to start a Deaf Mentor program. This is as a result of the working group. This is one of the recommendations. In April, next month, we're having a Sky High Deaf Mentor program and also a Sky High snapshots training. So snapshots is for oral adults so you have the deaf and the oral being represented by that. Then in June, there's going to be a Sky High training for early intervention professionals. Right now we're in discussion to have the last one, so the hearing first training for our Department of Health or DOE and our parents. That's our future.

I think we have a long way to go but we are making quite rapid progress in just this year, or one and a half years and we have lots to look forward to, I think.

>>PO KWAN WONG: So before we open for questions, I just want to add the last comment that I'm not an official member of the working group but, you know, I see ‑‑ I'm excited myself to see the development of this working group. It really goes beyond the language readiness for the children and it's also having a big impact on our EDHI system because I'm really happy to share that the working group, especially the parent members of the working group is really able to step outside the box and look at the needs beyond language development. So they all talking about, you know, before we looking at the development of the child in Hawaii there is really lacking a good support system for the parents from the time the child is ‑‑ have a hearing screening so they're able to as part of the report they're able to come up with the suggestion about, you know, a one‑stop shop. And, you know, come up with a lot of idea that put into the report for the legislature to consider and at the same time already making an impact for the EDHI program. Instead of waiting for legislature, we need earlier this afternoon when we met we already talking about, you know, how we can build up the parent leadership capacity as part of the EDHI ‑‑ the HERSA requirement, how we can work together, start implementing learning activity like the Deaf Mentor training or parent leadership training or how we can work with early intervention better to support the family to increase enrollment. So there is already a lot of good affects happening even before the legislature can take any action. I think this is a lot of good foundation build‑up so hopefully if the support for the early language work group maybe the legislature will support more funding and support more build‑up for the EDHI system in the future. That's my last comment. Anyone have questions? Okay. Thank you.

(End of presentation.)

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