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| **Component** | **Response** |
| **Owner**Who is the single person responsible for this initiative? | Jack Johnson, Director of the Comprehensive Education Resource Center |
| **Description**Describe the initiative and its purpose. | [HB 0587/SB0310](https://publications.tnsosfiles.com/acts/111/pub/pc0500.pdf) establishes a **one-year deaf mentor pilot** project to assist families and agencies in implementing bilingual and bicultural home-based programming for young children who are deaf, hard of hearing, or deaf-blind. The program must be one program to be implemented at the **TSDK campus**. The program must focus on the following: 1) preventing language deprivation; 2) providing a positive impact on a child’s social and emotional development via deaf role model; and 3) ensuring equal access to learning opportunities at home and in the community for deaf children. **The pilot program must use a deaf mentor curriculum.** The pilot project must provide hearing parents of children who are deaf, hard of hearing, or deaf-blind with the option of a deaf mentor for the purpose of exposing them to ASL, deaf culture, and allowing children to grow and learn in a bilingual and bicultural milieu of deaf and hearing cultures. Deaf mentors shall make regular home visits, interact with the children using ASL, demonstrate to family members how to use ASL, and help families understand and appreciate deafness and deaf culture. The pilot program **begins with the 2019-2020** school year.TDOE shall evaluate the pilot to determine continuation and/or replication. A **report** shall be given to the education committees of the house and senate no later than **2/1/2021**.In addition to the purposes mentioned above which are required in the law, the pilot will serve to test the mentor model for effectiveness and aid in determining cost and sustainability. The pilot will allow TSD to assess the mentor model during implementation, evaluating family satisfaction as well as effectiveness of the intervention. A process will be developed that is replicable and will provide the information needed to sustain and or expand the program.Tennessee School for the Deaf will also use this model to establish the school as a support system for families of children 0-5 who are deaf or hard-of-hearing. Outreach personnel currently provide support and a broad spectrum of supports to families, and the addition of Deaf mentorship will add support for families that we predict will be valued by families.The following questions will guide the evaluation of the pilot program’s effectiveness:1. How does the Deaf Mentor Program affect participating children’s learning? (Improvement in ASL skills of children)

a. VCSL improvementb. LDS improvement1. How does the Deaf Mentor Program affect participating families’ ability to communicate with their child?
2. Improvement in American Sign Language (ASL) as recorded on communication logs
3. Ability to assess deaf children’s development as measured by Assessment, Evaluation, and Programming System (AEPS) for infants through six years of ages. AEPS is administered by TEIS Evaluation Team to all children participating in the pilot and will be obtained from TEIS by 9/30/19. TEIS will re-administer AEPS July/August 2020. Should children exit TEIS prior to this time, Alisa Weeks is trained to administer AEPS.
4. To what extent do participating families participating in the Deaf Mentor Program make meaningful adaptations and accommodations to support their child’s development?
5. Knowledge of Deaf Culture and awareness of future opportunities for their child’s educational success as recorded on pre/post surveys
6. Ability to advocate for and make decisions about their child’s educational success as recorded on pre/post surveys
7. Reported use of actionable, sustainable strategies for supporting their child as recorded on pre/post surveys
8. Are families satisfied with their participation in the Deaf Mentor Program as recorded on satisfaction survey
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| **Connection to Strategic Priorities** | This project connects to Tennessee School for the Deaf’s strategic plan pillar, Outreach:By 2025 TSD will be viewed as the primary resource for parents who give birth to a deaf or hard of hearing child. Tennessee school systems will regard TSD as their resource for decision making and service delivery for students who are deaf or hard of hearing. Students who enroll in TSD’s PreK program will have a foundational language base and will be ready to learn.*This is about making connections with families and then connecting them with appropriate services – some that we provide and some that are available through other agencies/entities.* |
| **Scale**At what scale (number of students, educators, etc.) will the initiative be implemented, and at what time periods? | This pilot will serve up to 20 deaf/hh children and their families in the East Tennessee region during the 2019-2020 school year. A realistic expectation is that 10 families will be served with an additional 10 families in a control group, scheduled for full service in the second year (2020-2021). |
| **Definition of Success**What are the long- or medium-term outcomes (summative metrics), and by when would they occur? | Because language deprivation significantly impacts a child’s future success both educationally and emotionally, the Deaf Mentor Pilot aims to improve each child’s language acquisition. This will be measured by the VCSL prior to intervention, formatively, and at the conclusion of the pilot. Average improvement of 25% would be considered successful.Additionally, parents’ ability to develop actionable, sustainable strategies for their child’s success will be necessary for future educational success and emotional health. Average improvement of 30- 50% would be considered successful. |
| **Formative Metrics**What metrics will you use to determine whether the initiative is on-track (weekly, bi-weekly, monthly, etc.)? | 1. Measures of children’s language acquisition
2. VCSL – To be administered two times prior to intervention, monthly during the pilot, and at the conclusion of the program. Anticipated improvement from first administration to last is 25%.
3. LDS – To be administered prior to intervention, monthly during the pilot, and at the conclusion of the program. Anticipated improvement for first administration to last is 15%.
4. Measures of family’s ability to communicate
5. Communication Logs – Recorded monthly to assess care-givers’ acquisition of American Sign Language
6. American Sign Language–Daily Routines - Recorded weekly to assess care-givers’ ability to assess deaf child’s social language development
7. Measures of family’s ability to make meaningful adaptations and accommodations to support their child’s development
8. Survey administered pre-intervention and at the conclusion of the program: knowledge of Deaf Culture and awareness of future opportunities for their child’s educational success
9. Survey administered pre-intervention and at the conclusion of the program: ability to advocate for and make decisions about their child’s educational future
10. Survey administered pre-intervention and at the conclusion of the program: reported use of actionable, sustainable strategies for supporting their child
11. Measure of satisfaction with the Deaf Mentor Program
12. Periodic checks on program satisfaction quarterly.
13. Satisfaction survey administered at the conclusion of the program
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| **Team Members** What people are involved or needed for successful implementation, and what is their role? | * Jack Johnson, Director of the Comprehensive Education Resource Center – Mr. Johnson manages the outreach program and budget; Tracy Duncan reports to him.
* Tracy Duncan, 0-5 Parent Outreach Coordinator / State SKI\*HI Trainer – Ms. Duncan is the outreach coordinator, managing the Deaf Mentor Coordinator and Parent Advisor. She also coordinates training and will typically troubleshoot problems along the way. Alisa Weeks reports to her.
* Deaf Mentor Coordinator, TBD – The Deaf Mentor Coordinator is responsible for scheduling and monitoring Deaf Mentors, ensuring that deliverables under the contract are met. Additionally, the Deaf Mentor Coordinator will perform limited home visits in order to maintain contact with the field. The Deaf Mentor Coordinator will submit reports to the Outreach Coordinator.
* Alisa Weeks, SKI\*HI Parent Advisor (0-5 Parent Outreach Educational Consultant) – The Parent Advisor makes weekly visits to families incorporating the SKI\*HI Curriculum and offering support. Once a month, the PA will coordinate a visit with the Deaf Mentor.
* Deaf Mentors, TBD – Deaf Mentors provide weekly home visits to families providing lessons from the SKI\*HI Deaf Mentor Curriculum and offering support according to families’ expressed needs. It is anticipated that three to five Deaf Mentors will be contracted in areas where the families reside.
* TDOE Research Team – This team will provide a model for the research, including how to assign families to intervention or control groups, providing guidance on assessment selection and implementation, analyzing data, and creating and submitting required reporting.
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| **Talent Management**What are the knowledge and skillsets required for success, how many FTEs are needed, and what is the plan to recruit new talent to vacancies, or adjust existing work responsibilities for existing FTEs? | One FTE will be added to serve as the Deaf Mentor Coordinator. This will be a deaf adult with the qualifications necessary (see job description) to manage the program for success and to analyze needs for sustainability/expansion. The Deaf Mentor Coordinator, will make weekly home visits as well as monthly visits to observe /support contract Deaf Mentors. The Deaf Mentor Coordinator and Deaf Mentors will need to be trained in the SKI-HI Deaf Mentor curriculum. Follow-up training will be conducted as informed by check-ins with families and observation of Deaf Mentors’ performance. Additionally, in order to provide the report required by the legislature, the TDOE research team will devote time and resources to developing a research model, conducting research, and writing a report on findings. |
| **Budget Strategy**What are the funding sources for this project, and how have you allocated funds for this project? Please include sustainability over five year time period.  | FY2020 (This is intended as a one-year pilot according to legislation)* $147,000 as allocated by the legislature for this project
* In order to extend to a second year to prevent a gap in services while the legislature determines the future of the program, similar funds will be allocated either through additional funding from the legislature or from existing TSD school funds.
* Budget:

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| Curriculum Costs | Based on materials from SKI\* HI | $1,040.00 |
| Training Costs | Based on SKI\*HI (1 week/15 participants) | $7,500.00 |
| Supplies | Materials for home visits/promotional materials/meeting materials | $5,733.00 |
| Travel | 150 miles per day for 200 days at .47/mile | $14,100.00 |
| Deaf Mentor Coordinator | 1 FTE including benefits based on current outreach salary | $84,877.00 |
| Deaf Mentors | 15 families/50 visits/$45 per visit | $33,750.00 |
| **TOTAL** |  | **$147,000.00** |

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| **Data**What data elements are required for established metrics, and what are the plans for collecting, validating, storing, and reporting this data? | Assessments* Visual Communication Sign Language (VCSL) – The VCSL Checklist is the only standardized measure of American Sign Language (ASL) acquisition for young children in the United States. The VCSL Checklist is designed to clearly document the developmental milestones of children from birth to age 5 who are visual learners and are acquiring sign language in a user-friendly format that is accessible to parents and teachers, not just specialists and experts. The VCSL is normed and is a standardized assessment tool to assist in tracking young deaf and hard of hearing children’s language development. This is a tool used in progress monitoring and is shared between the Deaf Mentor and Parent Advisor every month, in quarterly reports, and final report.
* Language Developmental Scale (LDS) – The LDS / Receptive-Expressive Early Language (REEL)is normed, standardized, and validated using children identified as deaf and hard of hearing and is widely used with infants – six-year-old children. Is included as part of the SKI\*HI Curriculum for Families with Children Identified as Deaf / Hard of Hearing. This is a tool used in progress monitoring and is shared between the Deaf Mentor and Parent Advisor every month, in quarterly reports, and the final report.
* Assessment, Evaluation, and Programming System (AEPS) for infants through six years of age. This assessment measures development of young children in six major areas: fine motor, gross motor, cognitive, adaptive, social-communication, and social. The assessment encompasses preacademic content areas such as preliteracy, numeracy, and pre-writing. This is a tool used as a preassessment, post assessment, and results will be presented in the final report.
* SKI\*HI Deafness Perception Survey consists of two parts and is administered to parents of deaf and hard-of-hearing children. The first part assesses understanding of the deaf experience in general. The second part of the survey has questions about experience/beliefs related to the child’s deafness. This is a tool used as a preassessment and post assessment, and results will be presented in the final report.
* SKI\*HI Communication Data Sheet is completed by the Parent Advisor and is used to develop a Child Communication Plan. This is a tool used in progress monitoring and is shared between the Deaf Mentor and Parent Advisor every month, in quarterly reports, and final reports.
* American Sign Language – Daily Routines (ASL-DR) is utilized by the Deaf Mentor to scaffold intentional ASL instruction in the family’s daily routines with their child. The tool is a weekly form designed to be a cumulative record of specific language goals the family employs at home. This is a tool used in progress monitoring and is shared between the Deaf Mentor and Parent Advisor every month, in quarterly reports, and final reports.
* Communication Log is utilized by the Deaf Mentor to record all communication demonstrated by the child / family: early visual communication, ASL concepts / grammar / handshapes, family-child interaction, etc. This is a tool used in progress monitoring and is shared between the Deaf Mentor and Parent Advisor every month, in quarterly reports, and final reports.

Collection, Storage, Reporting* All of the assessments used during the Pilot Study, listed above, will be administered and reported to the TN Department of Education using formstack, a data collection tool. Data collection will be recorded on paper, scanned, and then uploaded on an electronic storage system. The data will be analyzed monthly by TN Department of Education Research Team beginning September 2019 at the start of the Pilot Study and at the conclusion of the Pilot Study on August 30, 2020. Between September 1, 2020, and January 2021, the data will be analyzed and the results written into a report that is to be submitted to the TN Legislative Education Committee no later than February 1, 2021.

Unique to each assessment:* VCSL – Administrated by trained / certified evaluators as pre and post assessments using the electronic format, sent to the national data collection site at Gallaudet University and analyzed by their research staff for the purpose of better understanding how ASL is acquired by d/hh children.
* VCSL (modified version) – Administered by SKI\*HI trained / certified Deaf Mentors as a monthly progress monitoring tool using a paper checklist, scanned and uploaded to formstack, and analyzed each month as described in the first bullet Collection, Storage, Reporting.
* LDS - Administered by SKI\*HI trained / certified Parent Advisors as a monthly progress monitoring tool using a paper checklist, reported into formstack, and analyzed each month as described in the first bullet Collection, Storage, Reporting.
* AEPS – Administered as a pre and post assessment provided by the trained / certified evaluators (i.e. TEIS Developmental Therapists), using an electronic format, and reported to the TN Dept. of Education Research Team and analyzed as described in the first bullet Collection, Storage, Reporting.
* SKI\*HI Deafness Perception Survey (Parts 1 & II) – Administered as a pre and post assessment provided by parent self-report using an electronic format and reported on formstack to be analyzed as described in the first bullet Collection, Storage, Reporting.
* SKI\*HI Communication Data Sheet (Part II) – Part I was completed by Parent Advisor and entered into formstack as a one-time demographic collection tool at the initiation of the Pilot Study. Part II is a pre and post assessment provided by parent self-report using an electronic format, reported on formstack, to be analyzed as described in the first bullet Collection, Storage, Reporting.
* ASL-DR – The Deaf Mentor prepares this monthly scope and sequence of topics (Early Visual Communication, ASL, Deaf History, Deaf Culture) to teach to the families each week during their home visits from the SKI\*HI Deaf Mentor Curriculum, identify daily routines families can practice their language skills, and target ASL concepts, vocabulary, and phrases. This document is written on paper, shared with the family, scanned and uploaded into formstack, reported to the TN Department of Education Research Team and analyzed as described in the first bullet Collection, Storage, Reporting.

Communication Log - The Deaf Mentor records the child’s communication skills (ASL concepts, early visual communication skills, babbling, jargon, phrases) they observe each week during their home visits. Each visit the Deaf Mentor adds data to the paper document, shared with the family, scanned and uploaded into formstack, reported to the TN Department of Education Research Team and analyzed as described in the first bullet Collection, Storage, Reporting. |
| **Milestones**What are the key events that must happen to implement this initiative (over a two year time period)? | * Developing research model, refining questions
* Identify assessments necessary to answer research questions
* Identify method of identifying families to assign to project or to control group
* Advertise and locate families/assign to appropriate groups
* Develop qualifications and expectations for Deaf Mentors (DGA)
* Advertise and secure candidates to attend initial training
* Contract process for contract with SKI-HI
* Schedule SKI-HI Deaf Mentor training
* Develop job description for FTE (Deaf Mentor Coordinator)
* Post and hire Deaf Mentor Coordinator
* Conduct Training
* Complete contracting process for Deaf Mentors
* Develop procedures for how Deaf Mentors will operate with families
* Develop timeline for Deaf Mentors’ work
* Communicate expectations and timeline to Deaf Mentors
* Establish regular check-ins for Deaf Mentors wit Deaf Mentor Coordinator; establish regular check-ins to establish and maintain fidelity between Deaf Mentor Coordinator, 0-5 Outreach Coordinator and CERC Director
* Develop schedule for assessments, pre and post (VCSL and surveys)
* Develop schedule for assessment, pre- and post- (LDS and Communication Plan)
* Identify independent administrators to administer VCSL and surveys
* Conduct orientation with families
* Administer all pre-assessments
* Begin weekly meetings with families
* Conduct check-ins as scheduled
* Administer formative assessments according to schedule/plan
* Adjust curriculum and activities to meet individual family needs
* Conduct quarterly reporting
* Administer post-assessments according to schedule/plan
* Provide all data to research team for analysis and reporting
* Report to legislature through TDOE
* Determine sustainability/expansion plan
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| **Engagement** Reviewing the delivery chain, and then other key stakeholders who must be involved, provide the ways in which you plan to engage and communicate with stakeholders, the frequency, the measurement, and the way that you will reflect how feedback and use will be incorporated. (All pieces must be flushed out in the work plan) | * Families – Weekly visits with a Parent Advisor through 0-5 Outreach; weekly visits with Deaf Mentor; participation with Deaf Community, early intervention events specifically designed for families with d/hh/db children, and Shared Reading Project instructional techniques; independent administrators will administer assessments for pre- and post- VCSL and AEPS; Parent Advisor will administer surveys to document knowledge gained, demonstrated skills, and overall satisfaction with the program; Parent Advisor and Deaf Mentors will gather pre- and post-Family Perception Checklist, collaborate in monthly progress monitoring, reporting child and parent ASL skill each month as part of the Child Communication Plan that is developed in the first visits; Parent Advisor and Deaf Mentors will prepare quarterly reports and review with families/early intervention team members.
* Early Intervention Community – collaboration, shared progress monitoring, and resources are available when the family authorizes exchange of information; participation in IFSP / IEP / Transition meetings as TSD approved.
* Deaf Community – Quarterly meetings with Deaf Mentor Advisory Group providing updates on action plan, family response to program (number of families engaged; response to Deaf Mentors); report from Deaf Mentors regarding curriculum, activities, family response
* TDOE Research Team – Quarterly meetings to assess progress and adjust collection of data or research approach. Meetings will facilitate collection of required data and information for final reporting.
* Elizabeth Fiveash – Monthly updates on progress will be provided to Elizabeth Fiveash. Needs for guidance or assistance will be communicated at these meetings.
* Legislators – Quarterly reports highlighting action plan and progress, initial assessments, family response, Deaf Mentor deliverables, and final report from TDOE research team
* SKI\*HI Institute Deaf Mentor Consultation – TN Deaf Mentor Coordinator, 0-5 Parent Outreach Coordinator, and Director of CERC will access online consultation from the SKI\*HI Deaf Mentor consultant in order to gain guidance, identify resources, problem solve, and design procedures during the inaugural year of the TN program.
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| **Risks**What could go wrong, and what solutions do you propose to mitigate those risks? | * Low number of families respond and participate – We have been developing rapport with families over the past year and have a good idea of which families understand the value of the Deaf Mentor program, are good candidates, and will stick with the Deaf Mentor program
* Families participate inconsistently or drop-out of the program – Deaf Mentor Coordinator and Hearing Home Visitor will need to stay engaged with families to intervene early should problems arise. A contingency plan for changing mentors will be in place so if a family does not develop rapport with a mentor another can step in. Deaf Mentor Coordinator and Hearing Home Visitor will need to work together to address issues as they arise to avoid attrition.
* Deaf Mentors don’t follow through, don’t deliver as expected - Deaf Mentor Coordinator and Parent Advisor Home Visitor will need to stay engaged with families to be aware of problems very early in the process. A contingency plan for changing mentors will be in place so if a Deaf Mentor is not fulfilling his duties another can step in. Deaf Mentor Coordinator and Hearing Home Visitor will need to work together to address issues as they arise to avoid problems with deliverables before they affect families.
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**DELIVERY CHAIN MAP**

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| SKI\*HI Consultants | Train on SKI\*HI Deaf Mentor Curriculum | Deaf Mentors and Deaf Mentor Coord. |
| Independent Evaluators | Use VCSL to assess initially and at the conclusion of the pilot | Children |
| Parent Advisor | Provides orientation, initial, ongoing, and final assessments and surveys | Families |
| Deaf Mentor | Performs initial / ongoing assessments | Parents / Caregivers & Children |
| Deaf Mentor / Parent Advisor | Exchange information and jointly plan for continuity of service delivery | Parents / Caregivers  |
| Deaf Mentor Coordinator | Provides support and guidance / Engages in collegial visits to ensure proper curriculum delivery | Deaf Mentors |
| Deaf Mentor / Parent Advisor | Develop Child Communication Plan  | Parents / Caregivers  |
| Deaf Mentor / Parent Advisor | Independently meet weekly in the home to deliver SKI\*HI and SKI\*HI Deaf Mentor Curriculum | Parents / Caregivers |
| Deaf Mentor / Parent Advisor | Once a month meet jointly with the family to establish continuity | Parents / Caregivers |
| Deaf Mentor | Introduces the family to the Deaf Community and Deaf history | Parents / Caregivers |
| Deaf Mentor | Engage the family and child in the community with Deaf Adults and peers for social interaction / play | Parents / Caregivers |
| Deaf Mentor and Parent Advisor | Monthly review language acquisition progress using tools to monitor / ensure age appropriate language, social, cognitive development | Families / Children |
| Deaf Mentor and Parent Advisor | Provide support / resources / information about how communities can provide full access for deaf children to participate | Families  |
| Parents / Caregivers | Utilize strategies to engage with, communicate with, read to, and tell stories to | Children |
| Parents / Caregivers | Arrange play opportunities within Deaf community / families with Deaf children | Children |
| Parents / Caregivers | Monitor ongoing acquisition of language and implement strategies when needed | Children |
| Parents / Caregivers | Provide full access to information / language 85% of the time in their home utilizing strategies acquired from program. | Children |
| Parents / Caregivers | Engage with their community to provide opportunities / resources for their deaf child to have full access to information and language | Children |
| Parents / Caregivers | Identify and communicate with programs about specific language, social, and cognitive areas that their child needs to be successful. | Children |
| Parents / Caregivers | Define specific goals / add a Child Communication Plan to their child’s IFSP / IEP / Transition Plan | Children |