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ABSTRACT

This final report describes the Iowa Deaf-Blind Project, which provided technical assistance on a statewide basis in the form of information dissemination, training, and consultation to local school districts, area education agencies, institutions, and organizations providing early intervention, early identification, education, transition, vocational, and related services to children who are deaf-blind. The project stressed activities which support interagency collaboration to provide students with coordinated, comprehensive, and longitudinal service plans in the least restrictive environment with nondisabled peers. Particular emphases of the project's conceptual framework included: building the capacity to identify and assess children with dual sensory impairments; connecting families with resources through development of a parent support network; transitioning students from school to the adult services community; supporting and promoting interagency collaboration and linkages; providing teachers and support service personnel with test practice curricula and instructional resources; and integrating and including these students into regular school environments. The project identified 62 children with deaf-blindness. Ten conclusions and implications are drawn, stressing the need for ongoing supports and services. Attached material includes the census questionnaire, a book request form and list of 39 books available for borrowing, a videotape request form and list of 18 videotape sets, a parent questionnaire, interview guidelines, and descriptive program brochures. (DB)

IOWA'S PROJECT FOR DEAF-BLIND SERVICES

FINAL REPORT

U. S. DEPARTMENT OF EDUCATION
PROJECT NUMBER: H025A20010
CFDA: 84.025A

OCTOBER 1992 - SEPTEMBER 1995

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PROJECT DIRECTOR

IOWA DEPARTMENT OF EDUCATION
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IOWA DEAF-BLIND PROJECT ABSTRACT

The Iowa Deaf-Blind Project was developed with input from the Advisory Committee and from a number of additional parents and professionals throughout Iowa. The project provides technical assistance on a statewide basis in the form of information dissemination, training and consultation to local school districts, area education agencies, institutions and organizations providing early intervention, early identification, education, transition, vocational and related services to children who are deaf-blind.

The intent of the Iowa Deaf-Blind Project is to improve the quality of services provided to the 62 students with deaf-blindness currently identified in Iowa. This involves activities which support interagency collaboration so students receive coordinated, comprehensive and longitudinal service plans in the least restrictive environment with nondisabled peers.

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III. Purpose, Goals and Objectives

A. Purpose:

The Iowa Project for Deaf-Blind Services facilitates the successful participation of individuals with deaf-blindness in activities of their choice as a part of the home, school, and community environments. This participation is supported through age-appropriate, integrated, community-referenced, and family-focused instructional and service planning. Services are developed and personalized to assist educators and families in meeting the unique needs of individuals with deaf-blindness.

B. Goals and Objectives

Goal 1: Ensure project implementation and evaluation

- Objective 1.1: Maintain and expand the Census.
- Objective 1.2: Chair State Advisory Committee.
- Objective 1.3: Coordinate and monitor all project activities.
- Objective 1.4: Evaluate project activities.
- Objective 1.5: Disseminate project information.
- Objective 1.6: Perform all clerical activities.

Goal 2: Provide training, consultation, and follow-up services to educators and families by funding a .5FTE Consultant for Deaf-Blind

- Objective 2.1: Provide technical assistance upon request.
- Objective 2.2: Provide resource materials upon request.
- Objective 2.3: Deliver ongoing awareness level education and information regarding deaf-blindness and services to educators and families.
- Objective 2.4: Insure coordination and exchange of information with the Family Services Coordinator.
- Objective 2.5: Provide a summer institute for teachers and consultants on best practices in curriculum, instruction, and inclusion.

Goal 3: Assist Area Education Agencies and Part H Interagency Coordinating Councils in identifying, assessing, and providing appropriate and individualized programs for infants and toddlers

- Objective 3.1: Distribute project information to service providers at key entry points and parents informing them of project services.
- Objective 3.2: Collect and compile referrals to the Census.
- Objective 3.3: Provide INSITE training to early childhood educators and home intervention specialists serving infants and toddlers who have dual sensory impairments.
- Objective 3.4: Assist state agencies in the provision of appropriate vision and hearing screening services to infants and toddlers.

Goal 4: Assist educators, families, and adult service providers in providing life-planning and transition services.

- Objective 4.1: Send Department for the Blind's Deaf-Blind Specialist to the Helen Keller National Center's affiliate meeting.
- Objective 4.2: Provide C.O.A.C.H. training and follow-up to educators and transition specialists.
- Objective 4.3: Provide assistance to the Iowa Transition Initiative Council in disseminating information to the Transition Advisory Boards on Transitioning youth who are deaf-blind.
- Objective 4.4: Provide information and basic education materials to adult service providers and County Boards of Supervisors on the feasibility of service provision to youth who are deaf-blind.

Goal 5: Develop and maintain a system of parent supports.

- Objective 5.1: Disseminate awareness information to parents.
- Objective 5.2: Upon receipt of new referrals to the Census, representatives from the Parent-Educator Connection will contact families and conduct initial family survey.
- Objective 5.3: Family Services Coordinator will establish follow-up contact with families to discuss needs and related issues and to develop a support plan.
- Objective 5.4: Provide families with a family Handbook.
- Objective 5.5: Support parent attendance at the Parent-Educator Conference.

IV. Conceptual Framework Principles

- A. Focus on building the capacity of Area Education Agency and Local Education Agency (AEA/LEA) teams to identify and assess children and youth with dual-sensory impairments.
- B. Focus on connecting families with resources through the development of a parent support network.
- C. Focus on transitioning students from school to the adult services community and building the local communities capacity to serve young adults.
- D. Focus on supporting and promoting interagency collaboration and linkages.
- E. Focus on providing teachers and support service personnel with best practice curriculum and instructional resources.
- F. Focus on the integration and inclusion of students into regular school environments.

V. Project Accomplishments/Outcomes

Activities and tasks accomplished will be reported in relation to each of the goals detailed in Section III.

A. **Goal: To ensure project implementation and evaluation.**

Procedures for maintenance of the Census were continually updated and two new brochures were developed. Census forms each year were sent out in September to every school building principal, home intervention specialists, and early childhood center-based teachers in Iowa. Update information on each referral was obtained between January 1 and February 15 of each year. The original referral to the census was sent to the referral contact person so current information could be obtained. Additions and deletions were ongoing. Each year the Census data was cross-checked with the Iowa Department of Education December 1, Child Count Report to ensure accuracy in reporting of numbers, eligibility, categories, and child count codes. In addition, the Census data using appropriate forms were submitted in a timely manner to TRACES and the Federal Office of Special Education .

Dissemination of information about the Census and the 307.11 Project was ongoing. A yearly dissemination of written information (e.g. brochures, Census forms, etc.) was made to all school districts, families of students with dual sensory impairments and appropriate other state agencies and projects. Dissemination also occurred through personal contacts, presentations, newsletters, and technical assistance activities.

The number of children and youth on the Iowa Census during the project were: Year 1 = 39; Year 2 = 52; Year 3 = 62.

The Advisory Committee was representative of persons in Iowa associated with students with deaf-blindness. Members included family members of students with deaf-blindness, education representatives (State Department of Education, Area Education Agencies, Local Education Agencies, Vocational Rehabilitation), staff from the Iowa Department for the Blind, the Iowa School for the Deaf, the Iowa Braille and Sight Saving School, Part H Interagency Coordinating Councils, and consumers. The membership on the council was very constant (sixteen members) over the life of the project. The Committee met twice a year. Minutes were kept of each meeting and distributed to Committee members. The dates of the Committee meetings were: February 12, 1993; September 10, 1993; February 18, 1994; July 17, 1994; March 14, 1995; and July 17, 1995.

The Committee was extremely useful in problem-solving and assisting the Project Director in developing ideas for activities to be implemented. Committee members regularly received information on project activities (e.g. needs assessment surveys, proposals). Periodically, an evaluation form was sent to the Committee relating to their satisfaction about Committee meetings and about Project activities. Results were used to make changes where applicable.

B. Provide training, technical assistance, and follow-up services.

A consultant for deaf-blindness was employed jointly by the 307.11 Project and the Iowa School for the Deaf. This person was hearing impaired and worked from the Iowa School for the Deaf. She had four major responsibilities assigned to her:

1. To provide technical assistance to teachers and support service personnel;
2. To implement staff development activities;
3. To form a deaf-blind assessment team, and;
4. To develop a resource and lending library.

This consultant visited every classroom and community where students who were deaf-blind were being served. She collected needs assessment information from teachers, para-educators, administrators, support service personnel, and family members. Using this comprehensive data base she was able to deliver effective and individualized technical assistance and staff development activities.

The assessment team was composed of staff from the Iowa School for the Deaf, the Iowa Braille and Sight Saving School, and Area Education Agency 13. Team members received training from Dr. Bonnie Utley of TRACES and from personnel from Boys Town in Omaha, Nebraska. In two years time they conducted ten comprehensive assessments.

The statewide resource center became a joint effort between The Iowa School for the Deaf and the Iowa Braille and Sight Saving School. List of materials can be found in the appendix section of this report.

C. Interagency Coordination for Infants and Toddlers

At the beginning of the Project, Dr. Colleen McNerney from New York State met with the Project Director, Part H Coordinator, and early childhood special education personnel to develop a plan which would allow for information dissemination and staff development opportunities. A key component of the plan was to promote early screening of multihandicapped infants and children who were hard-of-hearing or deaf.

Quarterly, meetings have been held with Iowa's Part H Coordinator and technical assistance liaisons since this plan development. From these meetings, a new brochure was developed to target the infant and toddler population and those who serve them. Two INSITE workshops (April 6-8 and May 11-13 1994 and February 27-March 1 and April 3-5, 1995) were held and 50 home intervention personnel were trained in this curriculum model. In addition, four local trainers were trained and certified by the INSITE national trainers. These local trainers provide follow-up training to previous workshop participants.

D. Transition Planning

The 307.11 project has worked closely with HKNC-TAC and TRACES to promote effective and successful practices in the transitioning of youth who are dual sensory impaired.

Information was disseminated to persons working with the Iowa Transition Initiative, Area Education Agency Transition Specialists, and County Boards of Supervisors.

COACH and Personal Futures Planning workshops were conducted. Thirty-one COACH regional trainers were trained to assist educators and families in inclusion planning. This training was conducted by Chigee Cloninger and Virginia Iverson from the University of Vermont.

Joan Houghton and Jane Everson from HKNC-TAC trained twelve persons in the personal futures planning process.

The 307.11 Project worked very closely with the Iowa Department for the Blind to develop good transition practices. This Department had the vocational rehabilitation responsibility for youth and adults who were deaf-blind. Their Deaf-Blind Consultant, yearly, attended the HKNC affiliates meetings held in Sands Point, Long Island. Through this collaborative relationship a young woman graduated from school and was sent to the HKNC for further education, training, and rehabilitation.

E. Parent Support

A mother of one of the students on the Census was contracted (.5 FTE) with to become our Family Services Coordinator. This person made phone contacts with families to assist them in meeting their needs.

The Coordinator always had up-to-date information about family needs because of the projects close working relationship with Iowa's Parent-Educator Connection (PEC). This project sponsored by the Iowa Department of Education was initiated to bridge the gap between families and educators and to support families in the educational process.

At the start of this project, Dr. Deborah Chen from California assisted a small group of persons in developing two family questionnaires, one for Birth to 6 and the other for children 7 to 22. During the first summer of the new project, parents from the PEC contacted every family on the Iowa Census and used these questionnaires. This information was turned over to the Family Services Coordinator for personal contact and follow-up assistance. Every time a new child was referred to the census, a PEC Coordinator from the appropriate geographic region made contact with the family. This process continues to this day.

The 307.11 project also supports the attendance of families at the PEC state conference. At the conference they are able to network with other families and receive needed information from focus group topics. Twenty families have been supported.

VI: Problem Resolution:

Our deaf-blind assessment team had to be discontinued after two years because of the expense associated with individual assessments.

There were a number of problems associated with the operation of the team. Team members came from several agencies so it was extremely difficult to schedule assessments. This was an add-on responsibility for most of the members. When assessments were completed, they were quite complete and thorough, but the time between referral for assessment and the completion of the final report averaged two months. Quite unacceptable to the referring agency. All of these factors made the cost per assessment prohibitive. The project could not continue to bear the expense. Neither would other agencies pick up the costs.

The Project still struggles with obtaining adequate assessments for students who are deaf-blind. We continue to use the resources of the Iowa University Hospitals and Clinics, the Iowa School for the Deaf, and the Iowa Braille and Sight Saving School.

VII: Project Conclusions and Implications

Conclusions and implications are derived from the specific accomplishments detailed in Section III (Accomplishments of Project) and from observations and analyses of project staff and others.

1. Many more people are aware of the definitions of dual sensory impairments, the state guidelines, and the services available to students on the Census. These include agency personnel (e.g., health department), medical personnel, general parent support groups, and educational personnel.
2. Census data collection and maintenance is an ongoing process and becoming more successful each year.
3. Professionals are more open to training and technical assistance when they understand how it can benefit more than just the one student with dual sensory impairments and more than just one family. Most of what they learned was useful with other students and with other families.
4. The integration of this project's goals, tasks, and activities into existing services and supports was very beneficial. People were able to access an already known system, resources were shared, gaps and overlaps were considered, training reached more people, and more people were available to provide technical assistance.
5. Project activities must be flexibly designed to meet individual team needs. The process for services met the individual needs as identified through the referral process by the family members and service providers.
6. Ongoing supports and services are needed. Changes in teams, students, families, and so forth are never-ending, as they spiral through phases, transitions, locations, and life. Project activities recognize that the need for learning is never ending and that nothing is final.

7. Dissemination and training must be ongoing. It seems most people do not remember the brochures, etc. received or the training offered until it is needed. Brochures and guidelines must be continually disseminated; training activities must be repeated.
8. Children in the 0-3 year age range were more difficult to identify, coordinate services for, and obtain local team support. Part H support assisted in engendering local support and planning. Coordination with other agencies serving children in this age range is essential.
9. The needs of family members must be dealt with individually - parents cannot routinely be lumped together. Parents must be fully included and efforts to do so must be planned.
10. Students moving into adult services and activities also require coordinated activities with other non educational agencies. Inclusion of such personnel in training, technical assistance, and advisory councils benefits students of this transition age.

VIII. Location Statement

Further details about this final report can be obtained by contacting the Project Officer:

Steven A. Maurer
Iowa Department of Education
Bureau of Special Education
Grimes State Office Building
Des Moines, Iowa 50319
515/281-3576

IX. Assurance Statement

This final report has been sent to ERIC.

X. Appendix

**CENSUS OF CHILDREN WHO HAVE
BOTH A VISION AND HEARING IMPAIRMENT
(DEAF-BLIND)**

INSTRUCTIONS: Please complete the following form for each new student. All information will be kept confidential and is collected by the Iowa Department of Education for the U.S. Department of Education (CFR307.11). When completed, please mail to Steve Maurer, Iowa Department of Education, Bureau of Special Education, Grimes State Office Building, Des Moines, Iowa 50319. If you have any questions, please call 515-281-3576.

STUDENT NAME: _____ **DATE SUBMITTED:** _____

DATE OF BIRTH: _____ **YEARS OLD:** _____ **SEX:** MALE
SCHOOL/AGENCY: _____ FEMALE

ADDRESS: _____

CONTACT PERSON: _____ **POSITION:** _____ **PHONE:** _____

FEDERALLY REQUIRED INFORMATION

1. What is the major cause of deaf-blindness? (Check one)

A. Syndromes

- _____ 1. Down
- _____ 2. Trisomy 13
- _____ 3. Usher's
- _____ 4. Other (specify)

D. Congenital Prenatal Dysfunction

- _____ 1. AIDS
- _____ 2. Herpes
- _____ 3. Rubella
- _____ 4. Syphilis
- _____ 5. Toxoplasmosis
- _____ 6. Other (specify)

B. Multiple Congenital Anomalies

- _____ 1. CHARGE association*
- _____ 2. Fetal alcohol syndrome
- _____ 3. Hydrocephaly
- _____ 4. Maternal drug abuse
- _____ 5. Microcephaly
- _____ 6. Other (specify)

E. Post-natal Causes

- _____ 1. Asphyxia
- _____ 2. Encephalitis
- _____ 3. Head injury/trauma
- _____ 4. Meningitis
- _____ 5. Stroke
- _____ 6. Other (specify) _____

C. Prematurity as sole known cause

F. Other (specify) _____

2. What is the degree of vision loss? Measurement should be for the better eye with correction (check one):

- _____ 1. Partially sighted (20/70-20/200)
- _____ 2. Legally blind (less than 20/200 or visual field of less than 20 degrees)
- _____ 3. Light perception only
- _____ 4. Totally Blind
- _____ 5. Tested - Results non conclusive
- _____ 6. Not tested

***CHARGE Association**

CHARGE is an acronym with each letter representing one of the abnormalities generally associated with it. CHARGE refers to Coloboma, Heart Defects, Choanal Atresia, Retardation, Genital Hypoplasia, and Ear Deformities. Individuals with CHARGE Association may display impairments and defects with the eyes, ears, heart, nasal passages, genital development or physical or mental growth.

3. What is the degree of hearing loss? Measurement should indicate Pure Tone Average (PTA) for the better ear. (Check one):

- | | |
|--|---|
| <input type="checkbox"/> 1. Mild (30-45 db loss) | <input type="checkbox"/> 4. Profound (91+db loss) |
| <input type="checkbox"/> 2. Moderate (46-70 db loss) | <input type="checkbox"/> 5. Tested-Results non conclusive |
| <input type="checkbox"/> 3. Severe (71-90 db loss) | <input type="checkbox"/> 6. Not tested |

4. Other disabilities, in addition to the hearing and vision impairments, evidenced by the student? (Check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> 1. Autism | <input type="checkbox"/> 6. Other health impaired |
| <input type="checkbox"/> 2. Emotional disturbance | <input type="checkbox"/> 7. Speech or language impairment |
| <input type="checkbox"/> 3. Learning disability | <input type="checkbox"/> 8. Traumatic brain injury |
| <input type="checkbox"/> 4. Mental retardation | <input type="checkbox"/> 9. Other (Specify) _____ |
| <input type="checkbox"/> 5. Orthopedic impairment | |

5. How was the student reported under the state child-count?

- | | |
|---|---|
| <input type="checkbox"/> 1. IDEA (Part B) | <input type="checkbox"/> 2. Public Law 89-313 (Chapter 1) |
|---|---|

6. Under what child-count disability category was the student reported? (Check one):

- | | |
|---|---|
| <input type="checkbox"/> 1. Autistic | <input type="checkbox"/> 8. Orthopedically impaired |
| <input type="checkbox"/> 2. Deaf | <input type="checkbox"/> 9. Seriously emotionally disturbed |
| <input type="checkbox"/> 3. Deaf-Blind | <input type="checkbox"/> 10. Specific learning disability |
| <input type="checkbox"/> 4. Hard of hearing | <input type="checkbox"/> 11. Speech impaired |
| <input type="checkbox"/> 5. Mentally retarded | <input type="checkbox"/> 12. Traumatic brain injury |
| <input type="checkbox"/> 6. Multi-disabled | <input type="checkbox"/> 13. Visually impaired |
| <input type="checkbox"/> 7. Other health impaired | |

7. If child is age birth through 2, is he/she receiving direct or indirect services under Part H, IDEA?

Yes No

8. Setting of services: Indicate the educational and living setting in which services are provided to participating children with deaf-blindness

Setting of Services (see back of page one)

Educational (Check one):

Living (Check one):

- | | |
|--|--|
| <input type="checkbox"/> 1. Regular classroom | <input type="checkbox"/> 1. Birth/adoptive parents |
| <input type="checkbox"/> 2. Resource room | <input type="checkbox"/> 2. Extended Family |
| <input type="checkbox"/> 3. Separate class | <input type="checkbox"/> 3. Foster parents |
| <input type="checkbox"/> 4. Public separate school facility | <input type="checkbox"/> 4. State residential facility |
| <input type="checkbox"/> 5. Private separate school facility | <input type="checkbox"/> 5. Private residential facility |
| <input type="checkbox"/> 6. Public residential facility | <input type="checkbox"/> 6. Group home (less than 6 residents) |
| <input type="checkbox"/> 7. Private residential facility | <input type="checkbox"/> 7. Group home (6 or more residents) |
| <input type="checkbox"/> 8. Homebound/hospital environment | <input type="checkbox"/> 8. Apartment (w/ non-family persons) |
| <input type="checkbox"/> 9. Other (specify) _____ | <input type="checkbox"/> 9. Other (specify) _____ |

BOOK REQUEST FORM
(Copy as Needed)

Iowa Deaf-Blind Resource Center
Iowa School for the Deaf
1600 South Hwy 275
Council Bluffs, Iowa 51503
712-366-3285 (TTY) Iowa Relay: 800-735-2943
FAX: 712-366-3230

Books are available on a short term loan basis to parents of any infant, toddler, child or youth who is deaf-blind and also to any educational, residential or support personnel who works with individuals who are deaf-blind. The period of loan is three weeks, unless a renewal is approved. The maximum number of books that may be borrowed is two.

Please check which books you wish to borrow (limit two) and fill out your name, address and phone number below.

- 1. A Complete Guide to Communication with Deaf-Blind Persons by Linda Kates & Jerome D. Schein, '80, 108pp., National Association of the Deaf
814 Thayer Avenue
Silver Spring, Maryland 20910
- 2. A Life of Leisure: Leisure Options for Persons with Dual-Sensory or Multiple Impairments by Michelle Clyne & Laura Cummings, '92, 128pp.,
The Phillip J. Rock Service Center
810 DuPage Blvd.
Glen Ellyn, Illinois 60137
- 3. A Model Service Delivery System for Persons who are Deaf-Blind by Douglas Watson & Myra Taff-Watson, '93, 118pp.,
University of Arkansas Rehabilitation
Research and Training Center for Persons who are Deaf or Hard of Hearing
Little Rock, Arkansas 72204
- 4. A Needs-Assessment of Agencies Serving Individuals With Deaf-Blindness: A National Profile of Transitional Services by Lauren Seiler, Jane Everson and Theresa Carr, '92, 52pp.,
Helen Keller National Center
Technical Assistance Center
111 Middle Neck Road
Sands Point, New York 11050
- 5. Art and Games: Sensational Experiences for Students with Deaf-Blindness by Susan Dell & Peg Mc Nerney, '92, 28pp.,
Rhode Island Services to Children with Deaf-Blindness
667 Waterman Avenue
East Providence, Rhode Island 02914

- ___ 6. **Augmentative Communication for Children with Deaf-Blindness: Guidelines for Decision-Making** by Cynthia Cress, Pamela Mathy-Laikko & Jennifer Angelo, '88, 45pp.,
Michael Bullis
Communication Skills Center
Oregon State System of Higher Education
Teaching Research Division
345 North Monmouth Avenue
Monmouth, Oregon 97361

- ___ 7. **Choosing Options and Accommodations for Children: A Guide to Planning Inclusive Education** by Michael F. Giangreco, Chigee J. Cloninger & Virginia Iverson, '93, 189pp.,
Paul H. Brookes Publishing Co.
P.O. Box 10624
Baltimore, Maryland 21285-0624

- ___ 8. **Communication Development in Young Children with Deaf-Blindness: Literature Review** by Michael Bullis & Glen Fielding, '88, 261pp.,
Communication Skills Center for
Young Children with Deaf-Blindness
Teaching Research Division
Oregon State System of Higher Education
Monmouth, Oregon 97361

- ___ 9. **Community-Based Living Options for Young Adults with Deaf-Blindness: Philosophy, Directions, and Strategies** by Stephen Barrett, Theresa Carr & Angela Covert, '87, 404pp.,
Helen Keller National Center for Deaf-Blind Youths & Adults
Technical Assistance Center
111 Middle Neck Road
Sands Point, New York 11050

- ___ 10. **Correspondence Learning Program For Parents of Young Deaf-Blind Children** developed by John Tracy Clinic, '90, 400pp.,
John Tracy Clinic
806 West Adams Boulevard
Los Angeles, California 90007

- ___ 11. **Deaf-Blind Infants and Children: A Developmental Guide** by J.M. McInnes & J.A. Treffry, '82, 284pp.,
University of Toronto Press
Toronto, Canada

- ___ 12. **Employment Options For Young Adults With Deaf-Blindness: Philosophy, Practice, New Directions** by Stephen Barrett & Anne Smith, '86, 271pp.,
Helen Keller National Center
Technical Assistance Center
111 Middle Neck Road
Sands Point, New York 11050

- ___ 13. **Enhancing Interactions Between Service Providers and Individuals Who Are Severely Multiply Disabled: Strategies for Developing Non-Symbolic Communication** by Ellin Siegel-Causey & Doug Guess, '89, 106pp.,
Michael Bullis
Communication Skills Center
Oregon State System of Higher Education
Teaching Research Division
345 North Monmouth Avenue
Monmouth, Oregon 97361
- ___ 14. **Evaluation and Educational Programming for Deaf-Blind/Severely Multihandicapped Students: Sensorimotor Stage** by Carroll J. Jones, '88, 314pp.,
Charles C. Thomas, Publisher
2600 South First Street
Springfield, Illinois 62794-9265
- ___ 15. **Independence Without Sight or Sound: Suggestions for Practitioners Working with Deaf-Blind Adults** by Dona Sauerburger, '93, 194pp.,
American Foundation for the Blind
15 West 16th Street
New York, New York 10011
- ___ 16. **Innovative Program Design for Individuals with Dual Sensory Impairments** by Lori Goetz, Doug Guess, & Kathleen Stremel-Campbell, '87, 366pp.,
Paul H. Brookes Publishing Co.
Post Office Box 10624
Baltimore, Maryland 21285-0624
- ___ 17. **Interagency Collaboration for Young Adults with Deaf-Blindness: Toward a Common Transition Goal** by Jane Everson, Patricia Rachal & Martha Michael, '92, 89pp.,
Helen Keller National Center
Technical Assistance Center
111 Middle Neck Road
Sands Point, New York 11050
- ___ 18. **Living Skills: A Guide to Independence for Individuals with Deaf-Blindness** developed by Functional Independence Training, Inc., '91, 268pp.,
FIND, Inc.
119 North 4th Street, Suite 302 D
Minneapolis, Minnesota 55401
- ___ 19. **Living Skills Inventories for Individuals with Deaf-Blindness** developed by Functional Independence Training, Inc., '90, 80pp.,
FIND, Inc.
119 North 4th Street, Suite 302 D
Minneapolis, Minnesota 55401

BEST COPY AVAILABLE

- ___ 20. **Low Vision: A Resource Guide with Adaptations for Students with Visual Impairments** by Nancy Levack, '91, 264pp.,
Texas school for the Blind and Visually Impaired
Business Office
1100 West 45th Street
Austin, Texas 78756-3494
- ___ 21. **One Step At A Time: A Manual for Families of Children with Hearing and Vision Impairments** by Sharon Bolton, '89, 38pp.,
TASH Technical Assistance Project
Teaching Research
345 North Monmouth Avenue
Monmouth, Oregon 97361
- ___ 22. **Out of the Shadows: Defeating Disabilities** by Robert Petty,
Charlene Petty & Don Petty, '92, 149pp.,
Delano Press
P.O. Box 300223
Midwest City, OK 73140
- ___ 23. **Persons Handicapped by Rubella: Victors and Victims - A Follow-Up Study** by Jan van Dijk with Cooperation of Ruth Carlin & Heather Hewitt, '91, 180pp.,
Swets & Zeitlinger
B.V. Amsterdam/Lisse
- ___ 24. **Phillip J. Rock Center and School Curriculum** edited by
Laura Cummings, '92, 210pp.,
The Philip J. Rock Service Center
818 DuPage Blvd
Glen Ellyn, Illinois 60137
- ___ 25. **Play Activities and Emergent Language: Intervention Procedures for Young Children with Deaf-Blindness** by Joan Rich & Elizabeth Rich, '88, 31pp.,
Michael Bullis
Communication Skills Center
Oregon State System of Higher Education
Teaching Research Division
345 North Monmouth Avenue
Monmouth, Oregon 97361
- ___ 26. **Play It by ear: Auditory Training Games** by Edgar Lowell & Marguerite Stoner, '60, 187pp.,
John Tracy Clinic
806 West Adams Boulevard
Los Angeles, California 90007

- ___ 27. **Proceedings of the National Conference on Deaf-Blindness - Deaf-Blind Services in the 90's: Revitalization and Future Directions** compiled by Michael T. Collins, Director of Hilton/Perkins National Program, '92, 72pp.,
Hilton/Perkins National Program
Perkins School for the Blind
175 North Beacon Street
Watertown, MA 02172
- ___ 28. **Proceedings of the Second National Symposium on Effective Communication for Children and Youth with Severe Disabilities: A Vision for the Future** edited by Lisa Kupper, '92, 275pp.,
Interstate Research Associates, Inc.
7926 Jones Branch Drive, Suite 1100
McLean, Virginia 22102
- ___ 29. **Research on the Communication Development of Young Children with Deaf-Blindness** edited by Michael Bullis, '89, 160pp.,
Michael Bullis
Communication Skills Center
Oregon State System of Higher Education
Teaching Research Division
345 North Monmouth Avenue
Monmouth, Oregon 97361
- ___ 30. **Signs of Success: A Progressive Sign Language Manual for the Deaf-Blind and the Multihandicapped** by Laura Cummings, '85, 166pp.,
The Illinois Deaf-Blind Service Center
818 Du Page Blvd.
Glen Ellyn, Illinois 60137
- ___ 31. **Strategies for Serving Deaf-Blind Clients** by Valerie Konar & B. Douglas Rice, '84, 143pp.,
Arkansas Research and Training Center
in Vocational Rehabilitation
Publications Department
Post Office Box 1358
Hot Springs, Arkansas 71902
- ___ 32. **Teaching Age-Appropriate Purposeful Skills (TAPS): An Orientation & Mobility Curriculum for Students with Visual Impairments** by Rona Poggrund, et.al., '93, 240pp.,
Texas School for the Blind and Visually Impaired
Office of the Superintendent
1100 West 45th Street
Austin, Texas 78756-3494
- ___ 33. **Technological Resources for Students with Deaf-Blindness and Severe Disabilities** by Nancy Sall & Harvey Mar, '92, 97pp.,
Developmental Disabilities Center
St. Luke's/Roosevelt Hospital Center
428 W. 59th Street
New York, New York 10019

- ___ 34. Transition and Individual Futures Planning For people with deaf-blindness and developmental disabilities and their families by The Arc - King County and Common Ground, '92, 262pp.,
The Arc - King County
10550 Lake City Way NE, Suite A
Seattle, Washington 98125-7752
- ___ 35. Transition for Persons with Deaf-Blindness and Other Profound Handicaps: State of The Art edited by Angela Covert & H.D. Bud Fredericks, '87, 163pp.,
Teaching Research Publications
345 North Monmouth Ave.
Monmouth, Oregon 97361
- ___ 36. Usher Syndrome and Transitions for the Future edited by JoAnn Enos, '93, 70pp.,
JoAnn Enos, Program Associate
HKNC-TAC
2366 Eastlake Avenue E., Suite 209
Seattle, Washington 98102
- ___ 37. Usher's Syndrome: What It Is, How to Cope, and How to Help by Earlene Duncan, Hugh T. Prickett, Dan Finkelstein, McCay Vernon & Toni Hollingsworth, '88, 93pp.,
Charles C. Thomas, Publisher
2600 South First Street
Springfield, Illinois 62794-9265
- ___ 38. Value-Based Services for Young Adults with Deaf-Blindness edited by Angela Covert & Theresa Carr, '88, 107pp.,
Helen Keller National Center
Technical Assistance Center
111 Middle Neck Road
Sands Point, New York 11050
- ___ 39. Working With Families of Young Children With Special Health Care Needs edited by Elizabeth C. Morgan, '93, 193pp.,
HOPE, Inc.
809 North 800 East
Logan, Utah 84321

Date of Request: _____

MAIL BOOKS TO:

Name: _____

Agency: _____

Street: _____

City/State/Zip: _____

Daytime Phone Number: _____

Title: _____

Send or fax (712-366-3230) this form with attached book-selected pages to: Linda Desrosiers, Iowa Deaf-Blind Resource Center, Iowa School for the Deaf, 1600 South Hwy 275, Council Bluffs, Iowa 51503.

The Iowa Deaf-Blind Resource Center is sponsored by the Bureau of Special Education funded through the U.S. Department of Education, Federal Grant number H029A90003-91 C.F.R. 84.025A and Iowa School for the Deaf.

VIDEOTAPE REQUEST FORM
(Copy as Needed)

Iowa Deaf-Blind Resource Center
Iowa School for the Deaf
1600 South Hwy 275
Council Bluffs, Iowa 51503
712-366-3285 (TTY) Iowa Relay: 800-735-2943
FAX: 712-366-3230

Videotapes are available on a short term loan basis to parents of any infant, toddler, child or youth who is deaf-blind and also to any educational, residential or support personnel who works with individuals who are deaf-blind. The period of loan is three weeks, unless a renewal is approved. The maximum number of videotapes that may be borrowed is two.

Please check which videotapes you wish to borrow (limit two) and fill out your name, address and phone number below.

1. A Coactive Sign System for Deaf-Blind Children: SKI*HI Coactive Tactile Sign Language Videotape Program. SKI*HI, Copyright: 1990, VHS, Nine 60 minute tapes & Instruction Booklet. No Captioned.

- Tape 1 - Lesson 1: Family Members and Interacting with Family
Lesson 2: Foods
- Tape 2 - Lesson 3: Daily Routines: Eating
Lesson 4: Daily Routines: Dressing, Undressing,
Toileting, and Diapering
- Tape 3 - Lesson 5: Daily Routines: Washing and Bathing
Lesson 6: Daily Routines: Teeth & Hair; Getting Up &
Going to Bed
- Tape 4 - Lesson 7: Daily Routines: Play and Sensory
Stimulation
Lesson 8: Feelings: Being Sick
- Tape 5 - Lesson 9: Action Words in Daily Routines
Lesson 10: More Action Words and Prepositions in
Daily Routines
- Tape 6 - Lesson 11: Going Places and Visiting People
Lesson 12: Special Words for Sensory Impaired
Children
- Tape 7 - Unit 1: Toys, Animals Unit 2: Body Parts
Unit 3: Colors Unit 4: Letters, Numbers
Unit 5: Home Unit 6: Food Unit 7: Being Sick,
Getting Hurt Unit 8: Time
- Tape 8 - Unit 9: Prepositions, etc. Unit 10: Clothing
Unit 11: Cooking, Eating Unit 12: Pronouns
Unit 13: Holidays Unit 14: Bedroom, Bathroom
Unit 15: Family, People Unit 16: Vehicles, Places,
Things Outside
- Tape 9 - Unit 17: Descriptors, Adjectives, Adverbs, and
Articles Unit 18: Going to School Unit 19: To Be
Verbs and Helping Verbs Unit 20: Actions Words.

2. Beginning American Sign Language VideoCourse developed by Sign Enhancers. Sign Enhancers, Inc., Copyright: 1992, VHS, Closed Captioned.

NEW

- ___ Tape 1 - Lesson #1: "Meet the Bravo Family"
Morning Routine Signs (40 minutes)
- ___ Tape 2 - Lesson #2: "Breakfast with the Bravos"
Breakfast & Dining Signs (40 minutes)
- ___ Tape 3 - Lesson #3: "Where's the TV Remote?"
Household Signs (20 minutes)
- ___ Tape 4 - Lesson #4: "Let's Go Food Shopping"
Food Signs (30 minutes)
- ___ Tape 5 - Lesson #5: "Review & Practice Session"
Lessons 1-4 (60 minutes)

3. Children With Motor Impairments. SKI*HI, Copyright: 1987, VHS, Two 60-minute tapes. No Captioned.

NEW

- ___ Tape 1 - Children With Motor Impairments
- ___ Tape 2 - Children With Motor Impairments

4. Deaf-Blind: Communication and Community Series by Theresa Smith. Sign Media, Inc., Copyright: 1992, VHS, No Captioned.

- ___ Tape 1 - Overview and Introduction (40 minutes)
- ___ Tape 2 - Getting Involved: A Conversation (90 minutes)

- ___ 5. From the Hand to the Heart: Stroking Special Needs Individuals. The International Association of Infant Massage Instructors, Copyright: 1992, VHS, 20 minutes, No Captioned.

- ___ 6. Functional Vision Learning to Look. Held jointly by The Blumberg Center, North Dakota Department of Education and South Dakota Department of Education & Cultural Affairs, Copyright: 1993, VHS, 18 minutes, Closed Captioned.

- ___ 7. Helping Your Child Learn: Dressing Skills; Playtime Skills; Mealtime Skills. (South Dakota Series), VHS, 30 minutes, No Captioned.

8. "Helping Your Child Learn" Series. South Dakota Department of Education and Cultural Affairs, Copyright: 1992, VHS, Three 30 minute tapes, Closed Captioned.

- ___ Volume 1 - When and Where to Teach
Teaching Self Control
Teaching Play Time Skills
- ___ Volume 2 - What to Teach
Teaching Choices
Teaching Dressing Skills
- ___ Volume 3 - How to Teach
Teaching With Adaptations
Teaching Mealtime Skills

- ___ 9. Introduction to the Tactile Communication for Children Who Are Deaf-Blind, SKI*HI, Copyright: 1993, VHS, 32 minutes, Closed Captioned.
- ___ 10. Mind Over Matter, (Winnie Tunston, a young woman who is deaf-blind due to Usher Syndrome, discusses the emotional issues faced by a deaf person who loses vision later in life. She reveals how she dealt with this severe loss and how she faced the practical issues of real life. Ilene Miner, HKNC psychiatric social worker, explains what Usher Syndrome is and discusses the etiologies of deaf-blindness.) HKNC, Copyright: 1994, VHS, 28 minutes, Closed Captioned.
NEW
- ___ 11. Partners In Language, (This video demonstrates the teaching methods and strategies employed at the Helen Keller National Center to increase communication skills among adults with deaf-blindness and limited language skills.) HKNC, Copyright: 1994, VHS, 28 minutes, Closed Captioned.
NEW
- ___ 12. Partners In Success, (This video depicts three people who are deaf-blind at different job sites.) HKNC, Copyright: 1994, VHS, 12 minutes, Closed Captioned.
NEW
- ___ 13. Perspectives From Individuals Who are Deaf-Blind (SKI*HI Interactive Series) Copyright: 1993, VHS, 71 minutes, Closed Captioned.
- ___ 14. Signs of Success, (This video correlates with the book of the same name written and edited by Laura G. Cummings and sponsored by Illinois Deaf-Blind Service Center in January 1985. This progressive sign language manual is particularly designed to meet the communication needs of individuals who are deaf-blind and multi-handicapped.) HKNC, Copyright: 1992, VHS, No Captioned.
NEW
15. Using Tactile Interactive Conversational Signing With Individuals Who are Deaf-Blind. SKI*HI, Copyright: 1993, VHS, Four 60 minute tapes, Closed Captioned.
- ___ Tape 1 - Topic 1: Encouraging Independent Signing; Moving from Coactive to Interactive Signing Topic 2: Establishing a Foundation for Conversational Interaction; Encouraging the Child to Sign Interactively Topic 3: Suggestions to Encourage Language Development; Vocabulary
- ___ Tape 2 - Topic 4: Suggestions to Encourage Language Development; Using Comments, Directions, and Questions Topic 5: Creating A Communicative Environment; Using Calendar Systems Topic 6: Creating A Communicative Environment; Encouraging Independence and Providing Rich Language Opportunities

- ___ Tape 3 - Topic 7: Selecting Materials and Activities that Promote Interaction Topic 8: Establishing Guidelines for Effective Conversation Topic 9: Conveying Emotions and Meanings Through Tactile Signs Topic 10: Fingerspelling
 - ___ Tape 4 - Topic 11: Encouraging Interaction with Peers and Others Within The Community Topic 12: Interpreting for the Individual Who is Deaf-Blind.
16. Using Tactile Signals and Cues With Children Who are Deaf-Blind, SKI-HI, Copyright: 1993, VHS, Five 60 minute tapes, Closed Captioned.
- ___ Tape 1 - Topic 1: Encouraging Child to Relate to People Topic 2: Letting Child Know Who You Are and What You Will Do Topic 3: Deciding What Signals and Cues to Use Topic 4: A Model for Using Signals and Cues
 - ___ Tape 2 - Topic 5: Skill (Anticipation) and Activity (Getting Up and Playing Topic 6: Skill (Awareness of Child's Signals and Activity (Toileting, Bathing, and Brushing Teeth
 - ___ Tape 3 - Topic 7: Skill (Responding) and Activity (Eating or Feeding Topic 8: Skill (Encouraging Turn-Taking) and Activity (Waking Up, Going to Bed and Dressing)
 - ___ Tape 4 - Topic 9: Skill (Giving Your Child Choices) and Activity (Playing and Actions) Topic 10: Skill (Using Coactive Signs) and Activity (Placing and Calming Your Child)
 - ___ Tape 5 - Topic 11: Skill (Enriching Activities and Routines) and Activity (Expressing Feelings and Using Senses) Topic 12: Skill (Encouraging Active Communication) and Activity (Going Somewhere)
- ___17. Within Reach; Getting to Know People Who Are Deaf-Blind. Technical Assistance Project, TASH, Copyright: 1987, VHS, 30 minutes, No Captioned.
- ___18. With The Highest Expectations. The Oregon Commission for the Blind, VHS, 18 minutes, Open Captioned.

Date of Request: _____

MAIL VIDEOTAPES TO:

Name: _____

Agency: _____

Street: _____

City/State/Zip: _____

Daytime Phone Number: _____

Title: _____

Send or fax (712-366-3230) this form with attached videotape-selected pages to: Linda Desrosiers, Iowa Deaf-Blind Resource Center, Iowa School for the Deaf, 1600 South Hwy 275, Council Bluffs, Iowa 51503.

The Iowa Deaf-Blind Resource Center is sponsored by the Bureau of Special Education funded through the U.S. Department of Education, Federal Grant number H029A90003-91 C.F.R. 84.025A and Iowa School for the Deaf.

PARENT QUESTIONNAIRE

I. Tell me about your child?

- What does he/she enjoy?
- What does he/she do well?
- What would you like him/her to do?
- What does family do together?
- What do you need to help family do things together?

II. Think about a day with your child.

- What goes well?
- What could be better?
- What do you need to make it better?

a. How are things going at school?

- What is going well?
- What could be better?
- What do you need to make it better?

b. What do you do in your neighborhood and town with your child?

- What is going well?
- What could be better?
- What could make things better?

c. Families use many resources, i.e. agencies, organizations, support groups

- What resources have been helpful?
- Family members/friends?
- Groups?
- Local community services?
- State agencies?

III. How do you picture your child's life after completing school?

- Living arrangements
- Job/work
- What do you do in your spare time/fun
- Friendships
- Marriage and children

IV. Over the next several years what could be developed that would be helpful to families and children like yours?

V. Is there anything else you'd like to say?

Interview for parents of infants and toddlers with deaf-blindness

Objectives

1. To obtain information on family concerns, priorities, and resources regarding the developmental needs of infants and toddlers with deaf-blindness.
2. To identify ways that the Iowa Deaf-Blind Project can assist families of infants and toddlers with deaf-blindness.

Suggestions

1. Be sensitive to and respectful of the family's feelings.
2. Assure the family that what they say will be kept in confidence. Their comments will be shared with staff members of the Iowa Deaf-Blind Project for the purpose planning family activities.
3. Ask questions in a "family friendly" way, that is, use the child's name when appropriate as indicated by _____ or refer to "your baby", "your infant" or "your toddler" when natural.
4. Questions are designed to obtain information about the family's concerns, priorities, and resources regarding their child in order to identify specific ways for the Iowa Deaf-Blind Project to provide assistance. You will want to modify questions as appropriate for individual situations. In question # 3 regarding observations about the infant's visual and hearing responses, for example, if the infant "was born without eyes" do not ask the question about visual responses. If you reword questions, be cautious about using "Why" questions because often they seem judgmental. Do not ask a question if the family has already covered that area in a previous answer.
5. Words in () indicate purpose of question or examples of answers. They may be used for prompting discussion only if necessary.
6. In question # 12, ask each "sentence completion" one at a time.

IOWA DEAF-BLIND PROJECT : Interview for families of infants and toddlers

Date _____

Child's name _____ date of birth _____

Person interviewed _____

Relationship to child _____

Interviewer _____

1. Tell me about _____
(general description of child, needs, preferences, diagnosis,)

2. What have doctors or specialists told you about your infant's vision and hearing impairments?
(assessment information/diagnosis)

3. What are your observations about your infant's vision and hearing?
(functional use/assessment information)

- * What sounds get your infant's attention?
(eg. vacuum cleaner, telephone, voices, musical toys)

- * How does your infant respond to sounds?
(eg. moves body, stills, changes behavior, vocalizes, gets excited)

- * What things get your infant's attention?
(eg. bright colors, lights, familiar people, moving things)

- * How does your infant respond to things he/she can see?
(eg. looks, squints, moves body, gets excited, reaches)

4. What's a typical day like for you and _____?
(daily routine, services)

5. What tasks do you have to do to take care of _____?
(responsibilities)

6. Who helps you with these tasks?
(supports/resources)

7. What services are you receiving for _____?
(resources)

8. How are these services working?
(resources)

9. What has been helpful?

10. What would you find helpful?

11. What do you want for _____ ?
(concerns)

12. Please complete this sentences:
(priorities)

"During this year I would like to..."

"During this year I would like _____ to (learn, be able to)..."

"It will make a big difference to our family when _____ (can, is able to)...."

13. Other comments?

IOWA DEAF/BLIND ADVISORY COMMITTEE

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Iowa Department of the Blind
524 4th Street
Des Moines, IA 50309
515-281-1334

Paula Vincent
Director of Spec. Ed.
Grant Wood AEA 10
3301 6th Street SW
Cedar Rapids, IA 52404
319-399-6700

Mission Statement

The Iowa Project for Deaf-Blind Services facilitates the successful participation of individuals with deaf-blindness in activities of their choice as a part of the home, school, and community environments. This participation is supported through age-appropriate, integrated, community-referenced, and family-focused instructional and service planning. Services are developed and personalized to assist educators and families in meeting the unique needs of individuals with deaf-blindness.



Sponsoring Agency:

Iowa Department of Education
Steve Maurer, Project Director
Bureau of Special Education
Grimes State Office Building
Des Moines, IA 50319-0146

Funding:

I.D.E.A., Part C, Section 622;
Title 34 CFR, Part 307

Iowa Department of Education
Bureau of Special Education
Grimes State Office Building
Des Moines, IA 50319-0146

Iowa Project
for
Deaf-Blind
Services

Iowa Department of Education

*Working cooperatively to enhance education
for individuals who are deaf-blind.*

Who is Eligible for Services:

Individuals from birth through age 21 who are deaf-blind represent a heterogeneous group that includes:

- individuals who are identified as having vision and hearing losses;
- individuals who have hearing and visual impairments of a mild to severe degree and additional learning and language disabilities or both;
- individuals who may have been diagnosed as having a degenerative pathology or disease that will affect vision or hearing or both; and
- individuals who have multiple disabilities due to central nervous system dysfunction, and who may demonstrate inconclusive vision and hearing responses during evaluations in the natural environment.

Educational personnel and service providers serving one or more individuals with deaf-blindness.

Parents, family members, and care providers of individuals with deaf-blindness.

Federal Definition of Deaf-Blindness:

Individuals are deaf-blind or have dual sensory impairments if they have "auditory and visual impairments, the combination of which creates such severe communication and other developmental and learning needs that they cannot be appropriately educated without special education and related services, beyond those that would be provided solely for children with hearing impairments, visual impairments, or severe disabilities, to address their educational needs due to these concurrent disabilities."

Infants and toddlers with deaf-blindness "means individuals from birth through age 2 who are experiencing developmental delays in hearing and vision, have a diagnosed physical or mental condition that has a high probability of resulting in developmental delays in hearing and vision, or are at risk of having substantial developmental delays in hearing and vision if early intervention services are not provided".

Title 34 CFR §307.04(c)

For further information contact:

Steve Maurer, Project Director
Iowa Department of Education
Bureau of Special Education
Grimes State Office Building
Des Moines, IA 50319-0146
515/281-3576 (Voice/TTY)
FAX 515/242-6019

Available Services:

Technical assistance, based on individual needs and requests, is provided in homes, schools, and agencies for educational personnel, families, and others.

Training of personnel is based on local needs and requests. Topics may include, but are not limited to:

- IEP development
- Parent-educator collaboration
- Functional assessment
- Instructional strategies
- Early interventions
- Least restrictive environment
- Communication skills
- Health care issues
- Teaching appropriate behaviors
- Planning for the future
- Transition planning

Training is done collaboratively for educators and parents. Follow-up assistance is available.

Assessment of individual needs and abilities through the Iowa Deaf-Blind Assessment Team.

Maintenance of a Census of deaf-blind infants, toddlers, children, and youth.

Maintenance of a materials resource center. Media and publications for parents and others are available for loan.

Dissemination of information regarding deaf-blindness and project activities.

Family and educator sharing of effective practices.

Who should be referred?

Any infant and toddler (birth to age three) with a:

- Diagnosed hearing and vision impairment
- Suspected hearing and vision impairment
- Risk of deaf-blindness due to a diagnosis of:
 - Trisomy 13, 18
 - congenital rubella
 - meningitis
 - CHARGE Association
 - toxoplasmosis
 - Kleppel Keil Sequence
 - cytomegalovirus(CMV)
 - Down syndrome

- Risk of deafness due to defects of ears, nose and throat, such as:
 - chronic ear infections
 - cleft lip and palate
 - malformation of the aural(ear) structures

...in combination with defects of the eyes, such as:

- retinopathy of prematurity(ROP),
- glaucoma,
- cataracts
- nyctagmus
- visual field deficits
- cortical blindness
- family history of genetically linked visual and hearing impairments
- low birth weight

What services are available?

● Assessment Services

The Iowa Project can link families to a wide variety of assessment services that can provide:

- Assessment of functional vision and auditory skills, as observed in the child's home and educational environments
- Evaluation of vision and hearing
- Overall developmental assessments by staff trained in understanding the impact of dual sensory impairments on development

● Consultation and inservice training

Consultation will be offered to the families of and the service providers for children who are at risk for deaf-blindness or who are identified as having combined vision and hearing impairment. Areas for consultation and training may include communication, behavioral issues, functional hearing and vision assessment, and other mutually identified needs.

● Family Consultation

Access to programs, parents, and professionals who are involved with individuals who are deaf-blind and their families.



Services for...

Children birth to three with multiple disabilities



and dual- sensory impairments

Offered by:
Iowa's Project for Deaf-Blind Services

Who is eligible to receive services?

The federal definition of deaf-blindness enables the provision of services to any child with both vision and hearing impairments, the combination of which can cause delays in communication and overall developmental delays, such that services solely for the visually or hearing impaired are not appropriate.

Who can refer an infant or toddler for services?

- A parent or guardian
- An early intervention service provider
- A health or social services agency
- A physician or health care professional

What about cost?

All Iowa Project for Deaf-Blind services are provided at **NO cost** to family or service providers.

For further information, contact:

Steve Maurer, Project Director
Iowa Project for Deaf-Blind Services
Iowa Department of Education
Bureau of Special Education
Grimes State Office Building
Des Moines, Iowa 50319-0146
Phone 515/281-3576

Behaviors that may indicate a dual sensory impairment

The following questions are designed to help parents and professionals determine if there is a possibility of a vision and hearing loss. If you answer "yes" to at least one question in the visual impairment section and at least one question in the hearing impairment section below, the child may have a dual sensory loss and should receive complete vision and hearing assessments.



Behaviors that may indicate a HEARING impairment?

- Does the child:
- fail to react to loud noises?
 - seem confused when verbal directions are given in noisy environments such as playgrounds or child care centers?
 - indicate agreement (nods head) when you know s/he does not understand what was said?
 - have difficulty locating the sources of sounds?
 - fail to recognize and respond appropriately to words or common home noises (telephone, door knock, television)?
 - understand better when looking directly at the person speaking?
 - have little or no language as compared to other children?



Behaviors that may indicate a VISUAL impairment

- Does the child:
- often bump into persons and objects?
 - have difficulty walking or crawling smoothly across shadows or areas that look different (carpet or tile)?
 - need to touch or have an object close to his or her face to identify it?
 - prefer only brightly colored or shiny objects?
 - have difficulty reaching for and grasping objects in a coordinated manner?
 - squint, cover, or close one eye when looking at objects?
 - have difficulty in doing small motor tasks like puzzles?
 - usually turn toward a light source?
 - fail to recognize and respond to familiar faces?
 - have difficulty following moving objects with his/her eyes?