

# Collaboration Amidst the Changes:

## HOW GUIDELINES FOR EDUCATIONAL PROGRAM PLANNING SERVE AS A VALUABLE TOOL FOR TEACHERS OF STUDENTS WITH COCHLEAR IMPLANTS

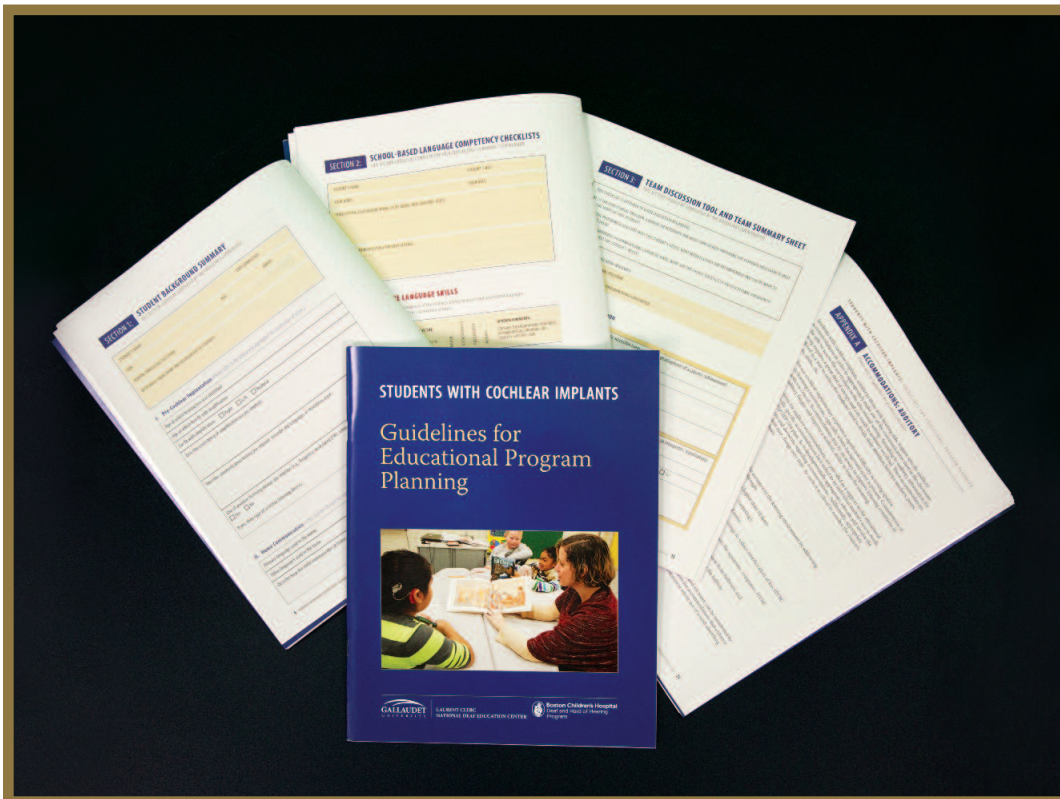
*By Jennifer Johnson*

Utilizing *Students with Cochlear Implants: Guidelines for Educational Program Planning* (2015) has produced a significant change in my practice as a teacher for students who are deaf or hard of hearing. As an itinerant deaf education teacher serving an increasingly diverse student population that includes various types of hearing loss, communication modes, hearing and assistive technologies, cultural backgrounds, and secondary disabilities, the challenge to create an Individualized Education Program (IEP) for each of my students had become strenuous. Additionally, it was difficult to know the best way to support classroom teachers as they sought to support their students who are deaf or hard of hearing on a daily basis.

The first time I used the *Guidelines* was with an 8-year-old student who was bilaterally implanted, orally educated, and had used Auditory-Verbal Therapy. Through previous work with the student, I knew that phonetic issues were a concern. Additional assessments showed concern with specific issues such as blending and concerns with phonemes. Further, when reading became more complex, the student exhibited difficulty with comprehension. From a pragmatic standpoint, she had communication breakdowns and did not have the strategies to repair them. Within these breakdowns she experienced difficulties with language that was figurative or idiomatic. Furthermore, the student's attention

*Photos by Matthew Vita*

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**Left:** The *Guidelines* include three main sections (Student Background Summary, School-Based Language Competency Checklists, and Team Discussion Tool and Team Summary Sheet) and associated appendices.

gaps in their learning, and these gaps are different for each student. The *Guidelines* helped me identify gaps by allowing me to consider the details of the student's educational profile, determining his or her needs, and then writing realistic goals. One gap I was able to see related to self-advocacy. Students, including youngsters still in preschool or kindergarten, need to learn to advocate for themselves. While I knew

this was an important skill that required explicit instruction, using the *Guidelines* provided me with the confidence to share this knowledge with the IEP team and to share ideas of ways to address that need.

Detailed language checklists are included in the *Guidelines*. Initially, I was concerned that some team members would balk at having to take the time to complete the checklists, but that turned out not to be the case. Everyone completed the checklists quickly and seemed to appreciate how the checklists helped him or her consider different areas of the student's learning needs. The *Guidelines* were also helpful in providing specialists, such as a student's audiologist, with more information about the gaps that the audiologist needed to consider in working with the student. One reason this is significant is because sometimes the student's records are incomplete. Without all of the necessary information, it can be difficult to know how to address the needs effectively.

was difficult to maintain.

I reached out to Mary Ann Kinsella-Meier, project manager at the Laurent Clerc National Deaf Education Center at Gallaudet University, working with her through telephone and e-mail. Dr. Kinsella-Meier helped me with the use of the *Guidelines* and advised me to make sure the FM system, which the student used throughout the day, was connected and being used correctly (e.g., that teachers correctly used the mute/unmute button and correctly set up the transmitter for class and small group discussions).

One of the most challenging parts of being the sole teacher of deaf and hard of hearing students at a given school has been providing other team members with evidence for recommending changes to the IEP. While the team members and I realized the needs of the student, the *Guidelines* helped us understand how to address them. The *Guidelines* especially helped my team members see why changes were needed, and they also functioned as third-party

validation to support recommended changes.

One consistent characteristic of students who are deaf or hard of hearing is the individuality of their language learning. Many of the students have

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In addition, the resources found in the appendices were helpful. With these at my fingertips, no additional research was needed, which saved a significant amount of time during the IEP writing process. They were in accessible language so that I could pass them on to the team members to utilize in their work with the student, too. I have found the auditory, visual classroom, and self-advocacy skills appendices to be the most helpful tools to use as I consult

with IEP team members. The self-advocacy skills in the appendices have been helpful in writing necessary goals that are directly connected to the students' other IEP goals. Additionally, they have been helpful in determining necessary and specific accommodations for students.

After using the *Guidelines* with one student, I felt comfortable using this material with other students even if they did not wear cochlear implants. A

significant majority of the questions addressed within the *Guidelines* are pertinent to any deaf or hard of hearing student. They are also an important reminder for me to ensure all areas of the students' needs are addressed and prioritized appropriately. I knew this tool was a real eye opener when one IEP team member said, "There is a lot going on here," meaning that the student we were discussing had more needs to address that were in some way related to

the student's hearing level than she had previously realized.

It is a challenge to be the only person responsible for providing all the necessary information about hearing levels and challenges related to a student—to be the "lone ranger" on the IEP team. As this lone ranger is often me, I find reassurance in using the *Guidelines*. This tool has allowed me to become more confident in answering questions from team members, to articulate more clearly my recommendations, and to have a respected reference to support any changes that I recommend. Further, it reassures me that I am covering all bases and fulfilling my responsibility.

### Reference

Laurent Clerc National Deaf Education Center, & Boston Children's Hospital. (2015). *Students with cochlear implants: Guidelines for educational program planning*. Washington, DC: Author.

