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ARIZONA COMMISSION FOR THE DEAF AND THE HARD OF HEARING

APRIL 13, 2022

TASK FORCE MEETING – SENATE BILL 1092

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>> BECA BAILEY: Just wanted to say good morning, everybody.

>> CHYLA DALTON-NAVA: Okay, I'm going to go ahead and set up the live stream, so you guys are going to see an alert, but it's live streaming. And then I will count you guys down into the live stream momentarily.

Okay, we are ready to go live in five, four, three, two, one.

>> TAWNY HOLMES HILBOK: Good morning, all. A quick second to fix something on my screen. Okay. Hello, everyone. And good morning. To those of you in Arizona. I'm Tawny Holmes Hilbok. And I'm the facilitator for the Language Acquisition Task Force through ACDHH. I'm excited to have us all together. Now this is our third task force meeting. I think I'll go ahead and move through the agenda.

Okay. I'm being spot lit. Perfect.

I think I'll go ahead and remind everybody of the process. Please keep your microphone muted and keep your camera off. That will assist with the visibility of the interpreter and the PowerPoint. Use the raise hand feature for comments and questions. I will turn the PowerPoint off during subcommittee reports so that you can be fully seen. If you have any questions or comments, you can use the raise your hand tool. Which is under the reaction's icon. And you can also post in chat for simple clarifications. This meeting is going to be recorded for review and filing purposes. Please select to view captioning. We do have a live captioner, CART writer, with us and we would like to thank that person for being with us today. And we also have American Sign Language interpreters to facilitate communication for those using English and those using American Sign Language.

Just a quick reminder of the purpose of this task force.   The Arizona Commission for the Deaf and Hard of Hearing was tasked with the aim to establish a task force that is composed of diverse community members and partnering agencies that can advise and assist with the implementation of Senate Bill 1092 which is Language Acquisition for Deaf, Hard of Hearing and DeafBlind children for children in the State of Arizona to age 21.

And here's our agenda. So we're going to track our project. To see where we are on our goals. We're going to turn things over to the subcommittees for your updates. I know that you have been investing a lot of time and effort through meetings, emails, and the Google Drive. We're excited to see what you have to share with us today.

The task force as a whole and those joining us live today. We'll have final recommendations as a wrap-up. So we can see what other states have done with similar types of bills. And we'll close with a few next steps. So that we know what we would like to accomplish before our next meeting.

So where are we now in our task force goals and the progress we're making? We got together in February. Both as a full task force and subcommittees. We at this time were garnering the expertise of the community members. We had a nomination form that we sent out, so that we could grow our subcommittees and we have done so quite well. In the month of April, there's been focused discussion on data sharing and identifying resources that we can use in our work, which is excellent. We're right on track for where we need to be. We have to collect the information that's out there before we can analyze what we have and make recommendations for where to move.

Please continue to collect resources. If you know of new research or things that could help us this the work that we're doing as a task force, please continue to do that.

From the April to May timeframe, we expect to put all the puzzle pieces together. Hopefully, we can get a clearer picture of assessments, data and demographics, and system connections.

At the same time, we can be documenting what we don't have in the State of Arizona based on what you're seeing. And that will then help with the final recommendations. I know that many of you are already doing that, and we appreciate the work that you've been doing. And then May and June, we'll be working together to finalize our recommendations.

I'll be taking the lead on drafting that based on the reports that you submit. I'll make sure that you have final approval. And also, we will share the information through a forum on June 15th for the public to collect additional feedback.

After the forum, there will be a two-week final editing process to finalize the recommendations, which will then be submitted to the ACDHH leadership by June 30th. And hopefully by the end of fiscal year, we'll be ready for next steps.

At that time, we can determine if we need to develop more systematic connections within the State to provide training, to propose new legislation, and that will all be part of the final report.

Now let's move to the subcommittees. So we have a demographics and data subcommittee, the systemic subcommittee, and the assessment review subcommittee. First up, the demographics and data committee. I'll stop the PowerPoint. I would like to call you up to share the work that you've been doing. Just one second while I navigate stopping.

>> OPERATOR: Recording in progress.

>> KENDRA BENEDICT: You said data and demographics subcommittee, right? Give me one second; am I able to share something?

>> TAWNY HOLMES HILBOK: Yeah, sure.

>> KENDRA BENEDICT: Okay.

>> TAWNY HOLMES HILBOK: Let me turn myself off to give you more real estate.

>> KENDRA BENEDICT: I'll be brief. I thought it would be easiest to share this visually. Can everybody see that well enough? Just give the thumbs up or the thumbs down.

(Phone ringing in background)

>> KENDRA BENEDICT: Okay, great. I'll go ahead then. A few updates on what we've done and what we're thinking we're going to be doing moving forward. We have a lot of questions. And I'll review those just briefly. You can see them there as well. We're wanting to know what types of data will inform our understanding of the language acquisition of children, birth to age 5. If you'll see there, I have an asterisk next to children. If you go below the question, you'll see something that we've been talking a lot about in our subcommittee is that is there a need to identify sub-groups when gathering and analyzing the data available to us. For example, the language acquisition of children identified as Deaf, Hard of Hearing, DeafBlind, and Deaf Plus may have very different trajectories. And how does that influence this project? If it does at all. We are having more and more and more students come to us with severe additional disabilities whose perhaps life spans are past preschool. So what does this project mean for those children? Or does it not apply? We certainly don't want to leave children out, but we also don't want data that's going to skew what it is we're ultimately wanting to know. Which I guess is another one of our question, and I know we talked about this as a big group before. And I think we're getting closer, but we're still kind of grappling with, you know, once we have all this data, what are we doing with it? What is the end-goal? Tawny, I know you just gave the projected timeline of what we're doing. And making a recommendations. But I guess for me personally, I'm still having trouble identifying how this data will actually serve us. That sort of thing.

Then back up to the questions. Of the types -- oh, I'm sorry. So we want the types of data that we should have. What among those data are currently available? Where is it located? How is it accessed? What does it tell us? What are we missing? If it's missing, does it exist but it's just not accessible? Or does it not even exist? And then lastly, how can we pull all the data that is available to us together, so it's easily access to believe all stakeholders? We talked about things like, you know, maybe this group develops a website or a page on the ACDHH website. And then places like Arizona Hands & Voices, Ear Foundation, ASDB, all have links to this data. The hospitals as well. The university audiology programs and so on and so forth.

So I put together a table here. And please anybody on my committee that's here, please feel free to jump in if I'm misrepresenting anything or leaving anything out. We've listed the different types of data that we are wanting to know more about. I just put this together based on notes that had been taken at the last few meetings. Because I'll be honest, my group hasn't even seen this yet. But in preparation for today, I wanted to have something that pulled everything

together. And you can see across the top, we've identified resources as to where we might find this data, Department of Health service, newborn hearing screening, ASDB, Department of Ed, districts, charter, private schools, and other.

You'll notice that in some column, there's an X and in some columns there's two Xs. The reason for that, I can speak for ASDB specifically, some of this data definitely exists. It's there. But it's in children's individual files. And not all put together in one place, in a form that we could actually analyze it. That is something we are working on internally, but as of today, it's not available. I'll stop sharing the screen.

That's a quick overview of where we are. Are there any questions from Tawny or any of the rest of the group? Okay, I'll turn it back over to Tawny. Thank you.

>> TAWNY HOLMES HILBOK: Okay. Thank you very much. That was really great information. I see some comments showing up in chat. Yeah, that was great. That was really -- the chart was very helpful. Mm-hmm.

So I see that you guys were carefully looking at what data is currently available. And the demographics, Deaf with multiply disabled children, -- their life expectancy, how that impacts things. That's good. I see another comment. Table and spreadsheets are a great thing, are my thing. Okay. Yeah. Well, then you're a real asset to the committee then.

So Kendra, with where you are currently, do you feel that your committee would be able to step back and really look at what recommendations would be needed to? Do you feel comfortable you're at that stage in the process, or you feel like you're inundated with data? Looks like you're well organized. So what's your perspective on that?

>> KENDRA BENEDICT: Again, anyone else in my group, feel free to speak up. I don't want to speak for them. But for myself, honestly, it's just a matter of time. We are still dealing in the schools and in early intervention with the aftermath of COVID, with shortages of bus drivers, with -- and I mean, it's just all encompassing. And this type of project, it's big. You know, I don't underestimate the depth and breadth of this project at all. So I do worry about the timeline a little bit. I know we can do it. It's just a matter of time. And I would imagine a lot of people feel that way as well. A lot of us are understaffed. You know, I see Suzy just popped on. Do you want to add to that, Suzy?

>> SUZY PERRY: Yeah, I was thinking your chart really represented our discussions about what data we could have. We spent a lot of time talking about the definitions of the information that we're trying to pull, so that we make sure we're pulling the right thing. Kendra and I have been going back and forth on a couple of other topics. So I think we've identified what data we want to collect. We don't yet have it in-hand. There aren't like spreadsheet after spreadsheet

after spreadsheet that represents all of those items yet. That seems to be our next step. And then after that, there needs to be a review of the information so that we can make sense of it and digest it. So that we can give some recommendations.

So I think if we keep meeting, I mean, the group has been very good about coming together and meeting and really getting to work. So I know I think that if we could just keep that pace up, maybe we can get -- stay within the timeline.

>> TAWNY HOLMES HILBOK: All right. Thank you both for your authentic and practical assessment of your capabilities. Appreciate that.

And so a way to look at it is: It's better -- let me say it differently. It's better to have a lot of data than having too little data sometimes, I think. So it's nice to have a lot, but it is time consuming digging through it. And analyzing it and figuring how things line up. So sometimes you have to see what data connects to what data, and it's a great way to look at it as far as the connections between the committees. It's really helpful with the systematic subcommittee as well. So I'm sure we as a group, also, I think ACDHH staff is providing support as well. So all of us together. And keep in mind that one recommendation can be that we do more data analysis. So we look for more data. So that can also inform our recommendations as well. So I saw a comment come in chat.

Yes. Fran says, yes, right now we can pull together aggregate data but not person-specific to connect the data by the individual. And that will require data sharing agreements. That is true. I agree. I'm sure that -- I mean, we'll have to follow up HIPAA and all of those. We have to comply with those. We're not expecting to get that individual-level data currently. But it could be beneficial if the committee feels that's where we need to go, then we could address that.

You know, for language assessments, language acquisition assessment score, maybe we could. But anything more than that, that's where we might need to know what type of information would be even beneficial to share across agencies so we can work together on this to promote the literacy and the language and acquisition of Deaf and Hard of Hearing children. All right. Thank you for that.

Any other questions or comments related to data and demographics? The data and demographics committee? I see there's one more question. I couldn't read all of the little details. I saw some, but I couldn't read every word. I'm wondering what is the latest data that's been collected by the State, the most recent? When was the most recent? And what was it? So if you know.

>> KENDRA BENEDICT: Yeah, kind of depends on the age group you're talking about. I think probably Fran, Suzy, myself could probably best respond to that. For early intervention, birth to

three and preschool, it's always being collected. I mean but there's never been a time where we pulled it all together. We're doing that now by participating in the CDC grant run through the University of Colorado. And we're doing that for the first time. And we'll have our first report available to us in July. Which will be after, you know, some of what we're wanting to do here. But regardless, and then Fran can, of course, speak to the data on newborn, which is obviously, I think there's a report that comes out yearly. And Suzy can speak to the most current data on preschool.

(Phone notification in background)

>> FRAN ALTMAIER: Hi, this is Fran. The most recently publicly published information was for 2020. And that was submitted to the CDC for their publication. You know, and I have all the data, real-time, going back, you know, probably at least a decade where we capture all of the information that we're looking at. And it's readily available. Pretty much at any time. It just evolves. It's always changing. It's a living database. So what we pull together may look a little different tomorrow. But what's publicly published is up through 2020 through the CDC.

>> TAWNY HOLMES HILBOK: Okay, great. Thank you. Thank you for sharing that, Fran. And Kendra, thanks for that explanation. I saw Suzy commented, rather was nice enough to add a link for us in chat that shows the publicly available information for preschool-age. AZDE.gov/specialeducationdatamanagement. Spelling that out in case people can't see the chat. So thank you for sharing that link with us.

And did you want to add anything, Suzanne?

>> SUZY PERRY: I would say its 2020-2021 school year is the most recent data that we have. And I think that's what's publicly available right now. So take some time to look through that or if there's any questions that come from that, I'd be happy to answer them or help out with the information extraction.

>> TAWNY HOLMES HILBOK: Okay. I appreciate that. So you said the 2020-2021 school year. That's for the preschool age group. Does that include more information for K-12 as well?

>> SUZY PERRY: That data set for the link that I posted in the chat is PreK-12. All disability categories. All ages. So it's pretty new on there that we made that available to the public. So people might not know about it.

>> TAWNY HOLMES HILBOK: Okay, so you have categories for Deaf, Hard of Hearing, or hearing-impaired student, is that labeled?

>> SUZY PERRY: Yes.

>> TAWNY HOLMES HILBOK: Great. So I think there's only 14 states that have that at the State level so, that's great. It's good to know that Arizona is among them. I know it's not easy to

do that, so we do appreciate that your agency has taken the time and effort to make that happen. All right. Great.

Okay. So now I would like, I'm sure -- if there's anymore questions, let me check in, is there anymore questions for the data and demographics committee? Seems like there are not. So thank you, Kendra, and your committee for all your hard work. And we look forward to seeing what you bring to the next meeting.

So we would like to turn it over to the systematic connections, Mollie. Hello, Mollie.

>> MOLLIE HARDING: good morning. I'll go ahead and share my screen as well.

>> TAWNY HOLMES HILBOK: I'll turn off my video to give you space.

>> MOLLIE HARDING: I have a document that I'm sharing. So here is what we have been working on. Recently in March, we reviewed the current roadmaps for the agencies involved in only the birth to 3 age range, that's as far as we've gotten. We have identified several gaps where Deaf and Hard of Hearing children need more resources or where their families need more resources as well as some agencies or professionals who could improve their role in the process of a child's development.

So there aren't comprehensive roadmaps for families after diagnosis. Because there isn't a single source for parents that gives information on a Deaf mentor or where they can get language models. Interaction with Deaf and Hard of Hearing adults or those with life experience in Deafness, that's important for families because they need hope for the future and a sense of wellbeing or a light at the end of the tunnel.

There's a gap in information about how to enter the system if a child is not identified at birth. For example, if they have late onset or progressive hearing loss or if they've moved or were missed by the newborn screening process. We've identified that pediatricians are responsible for periodic streaming and of course, screening every child enrolled in the program. And parents are missing information on parent-to-parent support opportunities. Although, these agencies like Raising Special Kids as well as the Arizona guide by your side program does reach out to families that have been reported through the Arizona Department of Health Services, I believe.

So that is great news. Families are lacking information on how they can get financial assistance for hearing aids. That say huge roadblock to children being fit with hearing aids earlier.

Let's see, they're also missing information about what is the process like or who is going to support them after they have become enrolled in the early intervention process. So what is an ISFP? How are they going to get additional developmental therapies? And what other opportunities are like to services? And they also, there's also a lack of information about how

they transition once a child has turned 3.

So essentially, we came up with a couple of opportunities for the agencies and systems involved to help close some of these gaps. And those things are listed on this document. But first, we need to update informational resources in Arizona to include all of the information above. As I mentioned previously, really the only like single source for parents only includes the first few months of the process.

Pediatricians must be responsible for performing screenings periodically or making referrals for evaluations for children who have moved to Arizona or born outside of the U.S.

Audiologists who making are the diagnosis should include more unbiased information for parents on a range of language options as well as resources for financial assistance for hearing aids and parent-to-parent support. And pediatricians should encourage audiology follow-up for children who are not meeting developmental milestones.

So like I mentioned, as a committee, we've really only discussed the birth to 3 age range. And coming up, we plan to discuss the systems and agencies involved in 3-5 as well as identify some gaps in services for children who are 3-5.

So for everyone who is here, does anybody else have anything to add or do you have any opinion on how some of the agencies and systems could be strengthened for birth to 3? Sorry, I just saw your message, Tawny. I might be late. Here, I'll go ahead and try to do that. Is that better? Okay, so would anyone else like, from the systematic connections subcommittee like to chime in or add anything?

>> SUZY PERRY: This is from Department of Ed. It seems like there isn't -- are there any additional connections beyond the transition from early intervention to preschool regarding the connections, you know, between childcare, between first things first, quality first, and you know, the services and supports that children get as preschoolers to be in inclusive settings, is that something that could be maybe added or considered?

>> MOLLIE HARDING: Yeah. Thank you for bringing that up. Like I said, we really only have gone from birth to 3. We haven't started talking about preschool to 5 yet. So I will definitely put that on our agenda to take a look at how other agencies like first things first are involved for preschoolers.

>> SUZY PERRY: Des childcare and Department of Health Services would also be really great partners in those conversations.

>> MOLLIE HARDING: Can you repeat --

>> SUZY PERRY: Early childhood from the Department of Education which is different from early childhood special education in the Department of Education.

>> MOLLIE HARDING: Okay, so can you please repeat what the agencies that you just mentioned. Des childcare?

>> SUZY PERRY: Department of Health Services, for licensing. So because they have regulations around supports that preschools or childcare must provide to children with disabilities. And then first things first and their quality first programming. Probably has something to contribute to this conversation. As well as early childhood education unit in the Department of Education. Which is different than early childhood special education which is what I'm in.

>> MOLLIE HARDING: Okay.

>> SUZY PERRY: And head start --

>> MOLLIE HARDING: Yes. Okay so, you're saying all of these agencies would be involved at the time of preschool or before that?

>> SUZY PERRY: At the time of preschool.

>> MOLLIE HARDING: Okay. Can you give me a little bit more information on what des childcare is?

>> SUZY PERRY: Des childcare provides funding to families and additional funds to families of children with disabilities to include them in preschool settings in childcare preschool settings. So it compensates childcare programs for taking children with disabilities that are low-income. So the des childcare dollars, there's way more to it than that, but that's why I'm saying that having them at the table and early childhood education at the table could really bring a lot more richness to that conversation.

>> CHRISTY HEGEBUSH: Would you also add RSK to that group.

>> SUZY PERRY: Yeah, definitely.

>> MOLLIE HARDING: Raising Special Kids?

>> CHRISTY HEGEBUSH: Yes.

>> MOLLIE HARDING: So I have that as a parent-to-parent support opportunity. What else can Raising Special Kids provide?

>> CHRISTY HEGEBUSH: From my end, I'm the autism incident specialist, they provide a lot of supports for our parents in the different areas of eligibility as far as guidance as how to proceed through getting special education services and if they're having an issue dealing with a school or something like, that they'll help out with that. They have people who specialize in different areas. I work really closely with the TBI person over there to help support those families as well.

>> MOLLIE HARDING: Great. Okay so, that provides a lot of great information for us at our

next subcommittee meeting where we're going to discuss the specific age range of 3 to 5. So does anybody else have any additional thoughts on birth to 3?

>> Hi, it's Caroline. And I'm the Part C coordinator with the Arizona Early Intervention Program. And I just wanted to add a little more information in regards to Raising Special Kids.

>> MOLLIE HARDING: Sure.

>> They're point of entry for AZEIP for the referrals so. Families can call RSK, or all of the referrals are processed through Raising Special Kids. So they can share information with families at that time of the referral. So we work in collaboration with them, with our referrals.

>> MOLLIE HARDING: Okay, so any time a child with hearing loss is referred to the Arizona Early Intervention Program by a pediatrician or an audiologist, you're saying it gets routed through Raising Special Kids?

>> Yes. And they process all of our referrals includes assigning the referral to one of our service providing agencies. For that area.

>> MOLLIE HARDING: Okay. So wouldn't that be in almost all cases, wouldn't it be ASDB?

>> ASDB can make a referral to AZEIP. But all must go through Raising Special Kids if they're going through the AZEIP eligible process. So we have some children who are referred to AZEIP already have established hearing or vision or hearing and vision loss, but they still have to go through the whole Raising Special Kids. So that they can be assigned to an AZEIP provider and. That provider assigns a service coordinator and, the service coordinator supports the family.

>> MOLLIE HARDING: Let me make sure I have this.

   Processes all AZEIP referrals. And they assign a family to a service coordinator, is that what you said?

>> Raising Special Kids will assign that child to an AZEIP service-providing agency.

>> MOLLIE HARDING: Okay, so you said most often ASDB -- I'm a little unclear on what you mentioned about how ASDB is involve there had.

>> If a child has been identified as having a vision or hearing loss, often time the family may be aware of ASDB services but they're not sure about AZEIP services. So ASDB will work with Raising Special Kids to get that family referred to AZEIP to start the process for early intervention services. And we work in collaboration with ASDB. ASDB is one of AZEIP service-providing agency, and they provide the hearing and vision services for those children.

>> MOLLIE HARDING: Great. Thank you for that additional clarity.

>> You're welcome.

>> FRAN ALTMAIER: This is Fran from newborn screening. And this may be a good spot

Mollie where you can add to the connections and it's a linkage to the data subcommittee that the Department of Health of newborn screening and AZEIP do have an active data sharing agreement and we are able to share person-specific information. So everything we know --

>> Fran?

>> FRAN ALTMAIER: Yes?

>> For the interpreter, what are the two agencies that have an agreement --

>> FRAN ALTMAIER: Sorry. The Department of Health newborn screening and AZEIP.

>> MOLLIE HARDING: Have person-specific data sharing agreements?

>> FRAN ALTMAIER: Mm-hmm. That meet the HIPAA and FERPA requirements.

>> MOLLIE HARDING: Okay, so that means that any child who DHS is aware of, that has been identified with hearing loss can be referred to AZEIP, is that correct?

>> FRAN ALTMAIER: Right. And we know their outcome. So we're able to link the outcome of eligibility and enrollment in early intervention services.

>> MOLLIE HARDING: Okay. Looks like Kendra is raising her hand.

>> KENDRA BENEDICT: Yeah, I just wanted to make available some additional information in regard to what Caroline was talking about. So I oversee the birth to 3 program in addition to preschool programs for ASDB. So it's the teachers of the Deaf and the teachers of the blind and visually impaired that provide services to families. Families cannot come to us, just sign up to start working with us. They have to go through, because we are part of a statewide early intervention system, Arizona uses what's called the team-based model. So no one works in isolation, just in their disability area. There's a service coordinator assigned to the child and child's family. And they pull all of the necessary providers together work with that family.

   I have some PowerPoints and different slides if you would like, I can send to you that help to explain the relationship. It's very convoluted. While we are accountable to AZEIP, we also part of AZEIP. It's a five-state interagency agreement, with us, with Access, with des AZEIP, and others, so again, it's very convoluted. And I don't blame you for being confused. I'm finally getting it after doing this job for a few years. So I can send some of that to you, and if you find it useful or not, then, you know, feel free to use whatever.

>> MOLLIE HARDING: Yes, that would be great. Thank you.

>> KENDRA BENEDICT: Mm-hmm.

>> MOLLIE HARDING: Anything else? All right. Thank you.

>> TAWNY HOLMES HILBOK: Okay. All right. Thank you. So I saw two questions in chat. There were two questions in chat rather -- let's see what did it say? Hang on. Sorry. So the first question that I asked was: Does des mention that childcare, is that a federally-funded

program?

>> SUZY PERRY: I believe that there are state funds and federal funds.

>> TAWNY HOLMES HILBOK: Okay. All right. Thank you. I was just wondering how all of that works together. All right. And then the second question was for Caroline: Is there a list of AZEIP referral service coordinators, providers rather -- so it's nice to know -- sorry.

>> INTERPRETER: I'm sorry. (Clarifying).

>> TAWNY HOLMES HILBOK: The question was: Caroline, is there a list of AZEIP service providers available in regards to serving Deaf, Hard of Hearing, or DeafBlind babies and children?

>> Those providers work with ASDB. So ASDB would have that information. And Kendra actually put -- in the chat.

>> TAWNY HOLMES HILBOK: Okay. So ASDB only serves agencies that AZEIP refers to?

>> For the birth to 3 --

>> TAWNY HOLMES HILBOK: Sorry, that's not what I said. The interpreter misunderstood. I said, let me clarify. So ASDB is the only agency that AZEIP refers Deaf and Hard of Hearing babies and families to?

>> Yes. For the vision and hearing services, as part of our team.

>> TAWNY HOLMES HILBOK: Okay. Thank you. Thank you. That's good to know. Where everyone is going, even though there are five agencies working together, so be able to, you know, simplify that. So thank you very much.

From D.C., I worked closely with the system there, the system there for many years. And there was an interesting moment where we had -- it was called the strong start program. And it was similar to raising special children. So that you have here in Arizona. So similar situation, they referred the strong start program. They screened all the referrals. And they referred to the service agencies, and then they would pick a service coordinator, I think, similar process. And one time something happened in that line, in that process. Because typically they would refer to two schools in D.C. Either River School that served oral Deaf kids, or they would refer to Kendall School on Gallaudet campus that served Deaf signing children. And so they would refer them for preschool. And they have the variety of services available like audiology testing and all of that. But for the preschool, they would refer to either one of those two schools. But for two years in a row, there were no kids getting referred to either of those schools. And they were like, are there no Deaf babies being born in D.C.? What's going on? So after about -- usually 10 to 20 a year. And then suddenly there were zero. And they found some families had contacted the schools on their own. And they realized that the program, the strong start program, had hired a

new coordinator. Who did not know about the schools and did not know about referring to the schools. They were referring all Deaf and Hard of Hearing babies and families to an external agency called Hearing Agency, they were more -- hearing and speech agency in Maryland. It was like 30 or 40 minutes away from D.C. And I could imagine families with transportation struggles having to be referred to those distant agencies. And they didn't focus on Deaf or Hard of Hearing children as a specialty. They focused on providing speech services to hearing children. So it was a strange two years. And we finally got to have the discussion and say, hold on, tough come and visit this school learn more about the programs that we have.

So I think that's how we handled that issue. It was an easy solution. It was part of the process of at least part of the process. Okay. Thank you.

All right. So are there any more questions or comments as far as the systematic connections? There was a lot of information provided. Kendra, did you have a comment?

>> KENDRA BENEDICT: Yeah, I'll just add in regard to some of what you were talking about. It might be helpful if I clarify the role of our providers, specifically our teachers of the Deaf and Hard of Hearing. Their primary responsibility is to work with families to educate them on their child's Deafness or being Hard of Hearing, empower them with knowledge, all of the choices available to them. They work with, again, the rest of the early intervention team and the team-based model to connect the families so resources in the community. So at that age, between birth and three, we present all of the communication options. All of the different ways in which you can teach a child who is Deaf or Hard of Hearing. And connect them with the appropriate resources. That can change, of course, over time. When a family decides is best for their child.

I can -- and then come time to transition to preschool along with the rest of the early intervention team, they meet when the child initially is two years, six months, and Caroline can speak better to this process, but that's when they start talking about transition and the options available to the child. Even though our providers are ASDB-employed, we don't push people to go to our campus programs. Our job is to let them know what's available in their districts, and anything else that might be around.

And what also might be helpful, I can send you, if you'd like, the Arizona statute that speaks to what our job as the Arizona State School for the Deaf and behind is. What it is that we're here to do. That might be helpful, I'm not sure.

>> TAWNY HOLMES HILBOK: Yes, definitely. We recognize that ASDB has a unique role of providing information for all the communication opportunities that Deaf, Hard of Hearing, and Deaf blind children could experience in State of Arizona. So it's wonderful that not a lot of states

do that. Most states don't typically. Local county school districts tend to be very diverse and separate. So it's nice to see that very centralized system to see that helps, that does help support information flow and training. The focus on those people who are not there but who can provide that quality of services and information.

Okay, Suzanne said: Raising Special Kids is identified as the State parent's information and training center for children with disabilities ages PreK-12 with the Office of Special Education Programs, OSEP, and they are the central referral agency for AZEIP as Caroline stated.

So two roles for each of the age groups. Yeah. That's a big responsibility. Okay. Yeah. So it's good to know that that's where parents can get the support. Figuring out their options. And their advocacy needs so. That's great. It's nice to have the referral and the advocacy services both.

Okay. So sorry, support services.

So made me realize that I wanted to share one more thing, an example of a state recommendation. One state that they put their whole system, all of their information together in one place to make sure that they were all consistent. So I will show you the last, what Indiana developed from their task force and maybe you would like to look at that if you wanted to see where we went with that, where they went with that. That might help inform where we want to go here.

So they had birth to 3 and 3 to 5 and hopefully as time goes on, it gets less complicated, less complex as the kids get older hopefully.

Okay. So are there any questions or comments on systematic connections? All right. Thank you to the systematic connections committee, Mollie, for your report. And your committee's hard work. Thank you very much.

And now I would like to invite the next subcommittee, the assessment reviews committee. I see something in chat.

>> Hi, everyone, I apologize. I won't have long to present but another work group member can add in addition to that. I have another meeting that I have to jump on in about five minutes. But I want to share a little bit in regards to what our committee has been working on. We've met two times. And the thing that we've been talking about is to get an understanding of the different assessment tools that are used for birth to age 3, 3 to 5, and K-12 grade. So we had some really good, rich conversations around the different tools. And specifically around the tools that look at or assessed or evaluate children who are Deaf or Hard of Hearing and what does that look like? So we talked about early intervention tool. And there was a recommendation to look at another specific screening tool to use for early intervention. So I've been looking at that as being the AZEIP representative on the team. And then there were some other recommendations for other

tools for 3-5 and K-12. Oh, I thought I was sharing my screen. Sorry about that.

The one thing that we looked at was -- can you guys see that now? Is it sharing? Okay.

So the one thing we looked at, we list all the tools that we're using and some of the early intervention tools and what areas it would cover. And then also looking at that, are there any tools that are specifically supporting children who are Deaf or Hard of Hearing or Deaf and Hard of Hearing? So we had those conversations during our second meeting. And then our task was to go back and look at the specific tools and get a little bit more information for that. So one thing that we did realize is that there are a lot of providers who are completing assessments and evaluations but don't have the background and experience evaluating children who are Deaf or Hard of Hearing. Excluding the providers with ASDB.

When it comes to AZEIP services birth through age 3 as we mentioned, Kendra and I mentioned, we work collaboratively with Arizona State Schools for the Deaf and the Blind to support us with the vision and hearing. And that includes assessments. So we're putting that together. And that's one of the things we worked on. The other thing was looking at eligibility process for each one of the age groups and how that works. And then also if there were recommendations for various screening or assessment tools, what would that look like in regards to training, funding for the train, and then qualifications for those providers to complete those assessments?

And I'm going to have to jump off. And I apologize, but I'm hoping that someone else within our group can continue. And then if there are any follow-up questions, please let me know. And that way, I can have additional information for everyone. Sonia, I don't know if it's -- oh, thank you.

>> I'm not sure who else was here, so I'm happy to take over.

>> Thank you. I'm Jennifer Scarboro from ASDB. Thank you, Caroline, for talking about what we have done in terms of assessments and what we have talked about in our subcommittee meetings.

That list is assessments that we formally provide at ASDB. And like Caroline just mentioned, we do have a challenge with training and having enough assessors to provide the assessments throughout State of Arizona.

All of the assessors are currently under ASDB. And one big area that we talked about in not having enough assessments is American Sign Language assessments. We do have a couple of assessments for assessing American Sign Language, however, we're adding to it but it's in an informal assessment at this point.

So we talked about that a little bit. ASDB is doing a McArthur version 2.0 ASL CDI. That

assessment is provided by the parents. And is currently in its beta version.

That's one example that's not on the list. And I didn't see it. Maybe it is on the list, I can't remember if we added it or not. But that's one example of an informal assessment that's being provided. We talked about the need for more American Sign Language assessments. And then them showing up on the AZEIP list that we would then provide at ASDB. For the K-12 assessments, we're still researching as a subcommittee. At the next meeting, we will hopefully have a more in-depth discussion about K-12 assessments. We've had several children show up with minimal language when they reach kindergarten. So we're looking at language appropriate assessments for those children. So what do we do with those children who come to us at an older age? So that's one thing that we're addressing in the assessment committee currently.

Do other members of the committee want to pop on and add any comment? Tawny, any questions for us?

>> TAWNY HOLMES HILBOK: I was just popping on to see if anyone had any questions for you as a task force. Nikki said very impressive work by the subcommittee. And all three subcommittees. Thank you for your investment, for Deaf, Hard of Hearing, and DeafBlind babies throughout the State of Arizona. And for their future. It's exciting to see what's to come.

So there is a question. As ASDB considered the use of ASL RST and/or ASL EST for 3 and up?

>> This is Jennifer. We do have a few staff who are currently providing those assessments. But that's one of the assessments that's informally provided. We don't have enough trained staff. So that's one that we definitely need to address moving forward. And maybe it can be added to the recommendations as well.

>> TAWNY HOLMES HILBOK: Great. So the National ASL English Bilingual Coalition, I know that's a long organizational name, National ASL English Bilingual Coalition or consortium for ECE, early childhood education. Do you know about their training weeks? They provide several language assessment trainings for Deaf and Hard of Hearing children. Do you know about the offerings that they provide? For those who have not heard, it's a nonprofit organization that focuses on those who work with Deaf and Hard of Hearing children age birth to 8. And the conference is held annually. Bilingual ECE Summit, and it typically takes place in the spring, but because of COVID, this year it's in the fall. And on the side, they also provide a weekly series that they do training on seven different language acquisition assessments during that summer training. And this is for other states who have difficulties with not having enough trainers, not having enough resources available to be able to get the training for their staff. So it is a challenge for many other states, not just you. So that full week is training offered by the people

who developed the assessment. They typically accept up to 20 people. I believe the next training is a level two training this summer. So that means you have to have already completed level one.

And then you become the trainer so you can train other people in your state. So it's something for us to think about as to whether several people could be sent next summer. Typically happens in May or June. And that could expand your training resource pool. But I think that what you have done as a subcommittee is a great start with what's being offered formally, informally, and then what is not being offered and why it's very helpful and we appreciate as a full task force that you're bringing that to the table.

Any other questions? So one asks: Do you have an updated link? Seems like the current one is not working. And the redirection pulls an error message? What link are you talking about, Germaine? Do you mind clarifying? Oh, okay. Yeah, I think the website is under maintenance right now. You can look at Facebook, the National ASL English Bilingual Consortium, I'll try to find that on the side and get that to you if I have a chance. I want to make sure there are no further comments or questions before we move on to next part of the agenda.

All right. I appreciate seeing all that you have been doing in your subcommittees. And Jennifer says she has sent staff and Deaf mentors to that, but because of COVID, it's not on the list. Okay, great, thanks, Jennifer.

All right. I'm going to share my screen to show what the next part of our agenda holds.

All right. We have finished our subcommittee updates. Two and a half months left, I think we're at a good space. We're at the halfway point. And please let us know as facilitators and ACDHH staff how we can support you in your subcommittee work.

So I am going to show actually five, there's only four showing up, but recommendations that resulted from task force work in five other states. So hopefully this will be helpful in garnering information as you prepare your recommendation.

All four of the States shown here have different emphasis on their task force.

So ASDB is going to have its own spin on what you're seeing here today. I just wanted to give you an idea of what the recommendations have looked like in other states.

I think we've seen this one before. So just gives the background information at the beginning part of the recommendations report. So I'll take you straight to the recommendations here.

So there have been two comments about language assessors used evidence-based practices for children who are Deaf and Hard of Hearing. So identifying resources for those evaluators is parallel to what you guys are working on and thinking about.

So systems agreements. And the system collaboration committee, they talked about

identifying which agencies will do what. And you already have that. You guys are ahead of the game with that. There was some recommendations that were beyond the scope of the task force, but they felt they were important to include. And then the appendix had different example. First was the bill. Different assessment instruments. for the milestone subcommittee, things that were identified. That's something that the assessments subcommittee could look to. I like the assessment committee's chart that you guys created. That wasn't part of their recommendation.

Theirs was a checklist-sort of format. They had a lot more assessments for English than American Sign Language. A PowerPoint was developed as well. So age seven, eight months, younger ages as well. So all through the spans of ages. And it stops at age 6-8. The Kansas law focuses on birth to age 8. So that's what's included. Similar. Same concept here.

Okay. I lost myself. Hang on. 17-page report, it's mostly appendix, but there's about 10 pages similar to other states as well. I have a second one. So this is Hawaii. 2018. Just background information here. Recommendations. And then the four recommendations here. The background data, what the committee focused on. Systematic connections information. Identifying challenges. Relevant data and the data and demographics information. So you can pull from this and look at it if you want to. It's expanded -- expansion on the recommendations here. Mention parental support. Network needed to increase. Mentoring as well. A mention of mentoring needed. So looking at how programs work together on that. Expanded information on recommendations as well.

Let's see. And then this is California. It's interesting, California developed a website. Because they got federal funding for their state program services as well. So they kind of combined both of the task force and their task force recommendations and their state program funding. They put it all together and created this site. If you click here, you would see -- it's hard to see, but if you click on these, the text doesn't look right. But -- sorry, the text is in a different language. I thought it was messed up. Looks like it might be Mandarin and maybe another language. I'm not sure.

So if you click on those link, you would see this information. The task force drew from similar lists and made their own, so they had it and then they put it in Spanish and English both. So similar concepts. So I'll show you Louisiana now.

This is who is in the committee. And the organizations, talks about the timeline as well. The frequency of their meetings. So this task force had several different goals. They needed to talk about the responsibilities and what considerations should be included in making those recommendations. They had to make recommendations in different formats. And then that's it. So now I can show you Indiana's resource list. I think I have another -- it's seven pages of

resources. 107 pages full of information to make sure that all of the families in the State of Indiana with Deaf and Hard of Hearing children have consistent access to the same information all in one place.

So it started as a repository of information. So that families can pick out the resources, the websites, and things that they need. This explains the development of -- so families can educate themselves on the process of development and acquisition of language. Reviewing the laws of the State and at the State and federal level which apply in Indiana. ASL and English resources by age. Milestones by age.

Letter to the families.

>> INTERPRETER: Amy, can you take over? I'm having internet issues. My video is freezing.

>> INTERPRETER: Yes.

>> INTERPRETER: Thank you.

>> TAWNY HOLMES HILBOK: They took a very visual approach. So instead of having a text-heavy document, they include a lot of visual representations of the information. A lot of tips and resources. Information to help families. And to help them actively take a part of their child's language acquisition. This is important information because Deaf, Hard of Hearing, and DeafBlind children can also have language disorders and delays, just like any other child. So being able to recognize those is an important thing for parents to be able to do. I think that's enough information for now.

I checked the chat. Any questions? Oh, I do see the question about the age range. Birth to 21 is the age range. It's our age range. Birth to 21. Most are 0-5 or 0-8. Ours is expanded. Somali asked me would I be the one to prepare the document like this to present to the legislature? And that is correct. I'm responsible to pull all the information together. And what I will do, it would be nice if I sent a survey out that includes links to all five of these. Or others that have good models. And if there are any indication of what direction you want to go in as far as how you want to reflect your work, I'll send it out via a survey. In the next couple weeks so we can figure out a format for reporting. Any other questions or comments? Let me double check and see if there are any questions or comments in the chat. I couldn't see the chat when I was sharing, so it looks like we're okay. I will be collecting your input as far as approach and appearance of the final report. Our goal is to make the recommendation via report to ACDHH who will then make the recommendation to the legislature.

We want everyone in the task force to feel comfortable with the final report. So we'll make sure that you have plenty of opportunity to review it before it's submitted. Basically we need committees to compile information as much as possible. By early June, I think we have a

meeting the second week of June. And then the third week of June, we'll have a public forum. You can in the meantime be updating your Google Drive folders. I'll be developing the report simultaneously. I really like you all to be part of the process of developing this report along with me.

And I know that the ACDHH staff has been amazing to work with in this process. Their support, their ideas on this process as a total, so Nikki and Beca and Sonia, their work and also the technical support that's provided by Chyla, I know that Jeremy recently passed away. He was such an integral part of establishing the Google Drive and all the technical issues for us and establishing that, so I know that we miss him very much. And all of the support that he provided us.

Next slide, please.

Okay. Our task force meetings. We're on our April 13th meeting already. Hopefully, you'll have two or three more subcommittees, and we have two more open, public task force committees. If you haven't been able to attend a subcommittee meet, we hope that you can work your schedule around to get in attendance with the meetings as they are happening. Any resources you can provide and any way you can participate is greatly appreciated, but we hope that you can actually be in attendance. We want to garner your knowledge, collect your ideas, and we value your perspectives.

We want to do a check-in on committee, if you're feeling welcomed and comfortable, great. If you need some assistance or not feeling so pleased, please reach out to myself or the ACDHH staff. This is a safe space. We want everybody to feel safe in their involvement with this process. So we have two more full task force meetings and several subcommittees. We will have the public forum on June 15th. So that we can directly interact with the public to get suggestions, questions, and comments from them.

ACDHH is working on the times for that session. I want to thank all of you for your input today. Your hard work that you've done so far and what you will be doing in the near future. We will have another full task force meeting with subcommittee reports. And we will also be having a panel of diverse Deaf individuals, Deaf, Hard of Hearing, and DeafBlind individuals. And parents who can hear to share their experiences. Hopefully, the panel will help us as a task force see any perspectives that we have been missing in our thought processes and our research. We're looking forward to that.

Any final questions or comments before we wrap up? I'm actually going to stop sharing my screen so we can have the full space for any questions or comments that we have remaining. I do see a question. Nikki said: The State of Georgia has a nice model. Theirs is called

pathways to literacy. So it's a different model. It's a state-funded research project. So they called experts in and stakeholders to provide recommendations to the research committee. I think it was completed three or four years ago. I would be happy to include that in the survey that I send out to you so you can take a look through those different types of formatted reports. Share with me what you like and what you don't like from the different formats that are shared. So I can have a better vision of what you are wanting our report to look like.

Any final questions or comments? Or any news to share? Any events that the task force knows about that they would like to share as we are meeting together? Any conferences or parent and family events that are coming up soon?

>> CHRISTY HEGEBUSH: Their conference is coming up in September. And it will be in-person this year at the JW Marriott.

>> TAWNY HOLMES HILBOK: In which city is the JW Marriott?

>> CHRISTY HEGEBUSH: Phoenix.

>> TAWNY HOLMES HILBOK: I missed the name of the conference. Do you mind repeating?

>> CHRISTY HEGEBUSH: The IDEA conference.

>> TAWNY HOLMES HILBOK: And who typically attends that conference?

>> CHRISTY HEGEBUSH: It used to be our transition conference. It is open to educators, professionals, anyone in the school environment, and then families and students that are in that transition age.

>> TAWNY HOLMES HILBOK: So 3.

5 transition or --

>> CHRISTY HEGEBUSH: High school. 14-26.

>> TAWNY HOLMES HILBOK: Great. That's great. So it's good to know that there's a place for those shared resources. We do have one conference coming up, the national Deaf educators conference. Is going to be hosted the same time as the National Association of the Deaf. The last time in-person, it was in Arizona, in Phoenix. With the support of ACDHH. That was back in 2017. So now in-person, it's going to be happening in Orlando, Florida, June 30th to July 3rd. The national Deaf conference brings together educators, people who work with Deaf, Hard of Hearing, and students with additional disabilities. They're great presenters planned. If you want to go to Florida, you'll take a look and attend the NAD conference. And you can find information at NAD.org.

Anymore final announcements? Our ACDHH staff, do you have anything that you want to add? Jennifer says, thank you for your guidance, Tawny. My pleasure.

Well, as you know, you're all on track. We're doing our best to reach this goal to make sure

that Deaf, Hard of Hearing, and DeafBlind children this the State of Arizona are valued and cared about, and you are directly impacting their future. Thank you so much for your participation today.

Bye, everybody, take care.

(Meeting ended)