Stronger Together

Statewide Resources for Deaf/Hard of Hearing Students, Students with Visual Impairments and Students with Combined Vision and Hearing Loss
Division of State Schools

• Three State Schools
  • Atlanta Area School for the Deaf- Day School in Clarkston
  • Georgia Academy for the Blind- Residential and Day Program in Macon
  • Georgia School for the Deaf- Residential and Day Program in Cave Spring
• Georgia PINES- Parent Infant Network for Children Birth-5 with sensory loss
• Oversee the Implementation of OCGA 30-1-5
Division of State Schools

• Georgia Mobile Audiology Program
• Smokey Powell Center – Zel Murray, Tara Bowie, Sharon Lyttle
• DHH Outreach- New Hire Pending
State Schools

Atlanta Area School for the Deaf- Day School in Clarkston
Georgia Academy for the Blind- Residential and Day Program in Macon
Georgia School for the Deaf- Residential and Day Program in Cave Spring

• Referral Process
  • Students are referred by local school systems
  • Families are encouraged to observe at the schools and state school staff may want to observe in the current classroom when possible.
  • IEP team meets to discuss placement. Must include someone from the state schools on the IEP team.
  • IEP placement at one of the state schools is considered a continuum of services provided by the local school system so while there is no cost to enroll, transportation is provided by the school system. The state schools also collaborate with the school system on any additional services that may be needed.
Georgia Pines provides state-wide, specialized early intervention services for families of infants and toddlers with sensory loss.
• Georgia PINES serves ~500 families across Georgia

• Children must have a diagnosis of sensory loss
  • Hearing loss-audiogram
  • Vision impairment-eye report

• Georgia PINES services:
  • Are free to eligible families
  • Are provided at the family’s home* (distance learning provided during Covid-19
  • Include 4 visits per month from a specially-trained Early Intervention Specialist

• Georgia Pines Services:
  • Follow specialized curricula, based on a coaching model
  • Focus on language nutrition for the child—regardless of language modality

Funded by the Georgia Department of Education/State Schools Division
In general, Babies Can’t Wait (Georgia’s state’s Part C agency) is responsible for transition to school as children approach the age of 3.

However, Georgia PINES’ Early Intervention Specialists provide additional assistance to families with understanding the transition process, and making contacts with the school district, as needed.

In collaboration with GSAP (Georgia Sensory Assistance Project), PINES has developed a binder of resources to share with families as their child approaches age 3.
• If requested by the parent and acceptable to the district, our EIS’s may attend initial eligibility/transition meetings.

• Georgia PINES maintains ongoing, current assessment data for the children we serve, and that data is available to school districts, via the child’s parents.

• To support "Child Find", PINES sends each school district a report in January of each year, listing all the children in that district served by PINES.
Georgia Pines Contact Information

Referral Line: 404-300-5905

Dr. Heidi Evans, Director:
404-298-4882 (office)
404-309-9667 (cell)
Hevans@doe.k12.ga
OCGA 30-1-5

• AKA the Language and Literacy Act for DHH children- passed in May 2018
• Yearly report due to Legislature on September 15
  • First year, not as much data as we would like which is one of the reasons the law was created
• DHH children are severely under identified and are very difficult to track unless they receive special education services due to a primary DHH eligibility.
OCGA 30-1-5

- Children who are identified as DHH will receive a GTID immediately.
- Language and Literacy Assessments will be administered every 6 months until the age of eight.
  - This will hopefully lead to more consistent communication with families, early interventionists, and educators
Facts about Hearing & Vision Screenings

• Hearing and vision screenings improve access to the general education curriculum and increase student success.

• Mass screenings do not require parent permission.

• The prevalence of vision loss in school-age children is one in four children.

• The prevalence of hearing loss in children ages birth to five is 3 in 1000, but it goes up to 9 in 1000 for school-aged children.
Facts about Hearing & Vision Screenings

• Hearing and vision screenings are recommended by the American Academy of Pediatrics and the Georgia Department of Public Health for all school-aged children in Grades 1, 3, 5 and 8.

• Additionally, all students suspected of having a hearing or vision problem should be screened.
Facts about Hearing & Vision Screenings

• Georgia requires hearing and vision screenings in the following situations:
  • Upon school entry Certificate of Vision, Hearing, Dental, And Nutrition Screening (3300 Form).
  • During the special education comprehensive evaluation process if suspected of having a disability in this area
Our Vehicle

Comprehensive Testing Suite

- Audiometer – for conditioning and working with a second tester
- Tympanometer – to measure middle ear pressure (to determine conductive loss)
- Visual Reinforcement Audiometry – for testing young children and developmentally delayed children
- Otoacoustic emissions test – for screening babies and children
- ABR – for screening and diagnostics
- Portable audiometers – for screening offsite

Note: Purchase of SUV
Areas Already Visited by GMA
Children with hearing loss are under-identified in GA
Under-identification in School-Aged Children

• Approximately 1/3 of School Districts in Georgia conduct mass hearing screenings; primarily located in metro areas

• Prevalence of hearing loss goes up from 3 in 1000 to 9 in 1000 for school aged children (e.g. progressive losses, otitis media, late-onset, etc.)

• Mild and Unilateral hearing losses can have an effect on literacy outcomes

• Higher incidence of referrals on hearing screenings in low-performing schools*
Under-identifying children = lack of services
What does lack of services in rural counties mean?

• Most school systems do not have school audiologists
  • School audiologists are typically contract audiologists who work in private clinics
  • Identified need to support these audiologists to understand educational implications
  • These audiologists have to become a Jack of All Trades and are sometimes providing services for free

• Kids with hearing loss in rural areas aren’t getting the support that they need
What services does GMA provide?

NEWBORN HEARING SCREENING FOLLOW-UP

DIAGNOSTIC NON-SEDATED AUDITORY BRAINSTEM RESPONSE (ABR) EVALUATIONS

DIAGNOSTIC BEHAVIORAL TESTING

HEARING AID MANAGEMENT

FAMILY EDUCATION

COMMUNITY OUTREACH

CARE COORDINATION
Connecting Professionals

Georgia Pediatric Audiology Network

General Information

www.gamobileaudiology.org
MAPInfo@doe.k12.ga.us (scheduling)
Monica Glapion-program director
Outreach Department of the Georgia Academy for the Blind

Smokey Powell Center

Zel Murray, SPC Director, VI State Coordinator
Tara Bowie, Outreach Education Program Specialist
Sharon Lyttle, Outreach Education Program Specialist
Smokey Powell Center (SPC)
The Smokey Powell Center

• Our services are provided to school aged students aged 3-22 who have an IEP Eligibility for Visually Impaired.
• The SPC has been in operation since 2007 because of a generous endowment from a man named James Emory “Smokey” Powell.
• All services are free-no charge to the parent or the school districts.
The Smokey Powell Center

Four Main Outreach Components

1. Low Vision Clinics
2. AT Assessments
3. Professional Learning Classes
4. Instructional Support
SPC Macon Location
The Smokey Powell Center

Low Vision Clinics/Evaluations

• Required for VI Eligibility if the student has usable vision and can participate in the evaluation

• The Low Vision Evaluation (LVE) must be conducted by an eye doctor who is specialized in the area of Low Vision

• There are several clinics throughout the school year—This year 7 will be held at SPC and 15 off site

• Typically, the student is prescribed a telescope, magnifier, and specialized sun lenses all at no cost
The Smokey Powell Center for Assistive Technology

Assistive Technology Assessments

• Conducted (virtually) at the student’s school anywhere in the state of Georgia
• Equipment offered is often very expensive (up to $6,000 or more)
• Our loan program gives the student the opportunity to try the equipment for one year
• The LEA can purchase the devices at a significant discounted price
The Smokey Powell Center for Assistive Technology

Outreach Services for Assistive Technology

• The Outreach Program Specialists support schools around the state for providing equipment and resources for the Teacher of the Visually Impaired.

• We are also available for consultation by phone or email: 478-751-6083 ext. 3624

• Zel.murray@doe.k12.ga.us
• Tara.bowie@doe.k12.ga.us
• Sharon.lyttle@doe.k12.ga.us
The Smokey Powell Center

Professional Learning Classes

• The most important professional training for TVIs is the annual Georgia Vision Educators Statewide Training (GVEST) typically in the fall [www.gvest.org](http://www.gvest.org)

• We offer several online or face to face trainings that address the unique educational needs of students with visual impairments that help TVIs/COMS stay current with developing technology and techniques used with our students
Instructional Support

* Our outreach services include referrals to experts at GAB who will provide instructional support and one on one training to TVIs and their students around the state who have a specific need.
The Smokey Powell Center for Assistive Technology

• For services from the SPC, contact Heather Francis at hfrancis@doe.k12.ga.us
  
  OR
  
  * Visit our website at www.gabmacon.org and see the Outreach Smokey Powell link

The staff members of the SPC include Zel Murray, Tara Bowie, Sharon Lyttle, and Heather Francis
State Vision Coordinator

• Georgia Academy for the Blind is the hub for support to the local districts for all things vision
• Most children with vision loss (appropriate for services for Visual Impaired/Blind) enter school already identified and are under the care of an eye doctor. Children already identified are not required to participate in the screening process and VI Eligibility can be established quickly and the student start receiving services right away.
• After receiving an eye report from the clinical eye care specialist, the Teacher of the Visually Impaired (TVI) must conduct the following assessments required for eligibility:
  - Functional Vision Assessment
  - Learning Media Assessment
  - Expanded Core Curriculum Assessment (ECC) (can be completed after establishing eligibility.)
State Vision Coordinator

If eligibility is questionable, then the TVI should complete the ECC Assessment in order to ascertain if the student has deficits in any of the following areas: Compensatory, Orientation and Mobility, Social Interaction, Independent Living Skills, Recreation and Leisure, Career Education, Assistive Technology, Sensory Efficiency Skills, and Self-Determination

* The TVI is responsible for teaching skills related to the ECC. The role of the State Vision Coordinator is to support parents, TVIs, and administrators across the state

* We conduct 2 statewide vision consortiums annually that includes all state updates as well as professional learning specific to the needs of TVI's across the state.

• All updated Information is distributed to the Georgia VI-Google Group
DHH Outreach

Consortiums and Professional Learning

• Still working on finding all the professionals working with DHH students.
• Monthly Emails to more than 700
• Regional Consortia - six areas of the state. We are looking to add one more in the Augusta area.
• On-going professional learning through the consortia as well as non-traditional DHH learnings going on this year.
DHH Outreach

Consortiums and Professional Learning
- Slack Platform- online platform specifically for any educational professional working with DHH students
- Monthly Outreach meetings with State Schools Staff, Georgia PINES, GMA, Pathways, Outreach.
- Also working with the Smokey Powell Center as well as GSAP to provide consistent messaging for students with sensory losses.
- New Deaf Ed Guidelines - Optimizing Outcomes for Students who are Deaf or Hard of Hearing
Optimizing Outcomes for Students who are Deaf or Hard of Hearing

1. Essential Principles to Optimize Education of Students who are Deaf or Hard of Hearing - The Implementation Checklist in Chapter 9 is based on these 10 Essential Principles
2. Federal Laws and Policies
3. Early Identification and Intervention
4. Evaluation and Eligibility
Optimizing Outcomes for Students who are Deaf or Hard of Hearing

5. Goals, Services and Placement
6. School Environment Access and Accommodations
7. Post-Secondary Transition
8. Personnel
Georgia Sensory Assistance Project

Supporting Children and Youth with Combined Vision and Hearing Loss
Deaf-Blindness Defined

When we hear the term deaf-blind, we often imagine a person who is unable to hear or see anything; however, this is typically not the case.

“Deaf-blind” describes any combined hearing and vision loss that significantly limits children’s ability to get information from people and objects around them.
# Matrix of Combined Vision and Hearing Loss

**Georgia Child Count 2020**

<table>
<thead>
<tr>
<th>Vision Loss</th>
<th>Hearing Loss</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Vision</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mild</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>Moderate</td>
<td>17</td>
<td></td>
</tr>
<tr>
<td>Mod-Severe</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>Severe</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Profound</td>
<td>16</td>
<td></td>
</tr>
<tr>
<td>Progressive</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Further Testing</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Functional Loss</td>
<td>2</td>
<td>70 (22%)</td>
</tr>
<tr>
<td>Total</td>
<td>59 (19%)</td>
<td></td>
</tr>
<tr>
<td>Legally Blind</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mild</td>
<td>17</td>
<td></td>
</tr>
<tr>
<td>Moderate</td>
<td>18</td>
<td></td>
</tr>
<tr>
<td>Mod-Severe</td>
<td>24</td>
<td></td>
</tr>
<tr>
<td>Severe</td>
<td>16</td>
<td></td>
</tr>
<tr>
<td>Profound</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>Progressive</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Further Testing</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Functional Loss</td>
<td>2</td>
<td>97 (31%)</td>
</tr>
<tr>
<td>Total</td>
<td>66 (21%)</td>
<td></td>
</tr>
<tr>
<td>Light Perception</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mild</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Moderate</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Mod-Severe</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Severe</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Profound</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Progressive</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Further Testing</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Functional Loss</td>
<td>1</td>
<td>17 (5%)</td>
</tr>
<tr>
<td>Total</td>
<td>316 (100%)</td>
<td></td>
</tr>
<tr>
<td>Blind</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mild</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Moderate</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>Mod-Severe</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Severe</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Profound</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Progressive</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Further Testing</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Functional Loss</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>21 (7%)</td>
<td></td>
</tr>
<tr>
<td>Progressive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mild</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Moderate</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Mod-Severe</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Severe</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Profound</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>Progressive</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Further Testing</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Functional Loss</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>14 (4%)</td>
<td></td>
</tr>
<tr>
<td>Further Testing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mild</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Moderate</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Mod-Severe</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Severe</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Profound</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Progressive</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Further Testing</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Functional Loss</td>
<td>1</td>
<td>11 (3%)</td>
</tr>
<tr>
<td>Total</td>
<td>11 (3%)</td>
<td></td>
</tr>
</tbody>
</table>

**Total**

<table>
<thead>
<tr>
<th></th>
<th>Mild</th>
<th>Moderate</th>
<th>Mod-Severe</th>
<th>Severe</th>
<th>Profound</th>
<th>Progressive</th>
<th>Further Testing</th>
<th>Functional Loss</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Vision</td>
<td>14</td>
<td>17</td>
<td>14</td>
<td>5</td>
<td>16</td>
<td>0</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Legally Blind</td>
<td>17</td>
<td>18</td>
<td>24</td>
<td>16</td>
<td>20</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Light Perception</td>
<td>5</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Blind</td>
<td>2</td>
<td>8</td>
<td>4</td>
<td>3</td>
<td>3</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Progressive</td>
<td>2</td>
<td>4</td>
<td>1</td>
<td>1</td>
<td>6</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Functional Loss</td>
<td>17</td>
<td>16</td>
<td>16</td>
<td>7</td>
<td>14</td>
<td>1</td>
<td>5</td>
<td>10</td>
</tr>
</tbody>
</table>

**Notes:**
- **Mild** refers to a mild impairment.
- **Moderate** refers to a moderate impairment.
- **Mod-Severe** refers to a moderately severe impairment.
- **Severe** refers to a severe impairment.
- **Profound** refers to a profound impairment.
- **Further Testing** refers to children requiring further testing.
- **Functional Loss** refers to children with functional loss.

**Grand Total:** 316
Diversity in Deaf-Blindness

• Degrees of Vision and Hearing Loss
• Age of Onset
• Stability or Progression of Loss
• Presence of additional disabilities or health concerns
• Access to communication

These aspects make the population very diverse!
Deaf-Blind Children Learn Differently

Traditional Learners
• Learn most information incidentally - just by seeing and listening to what goes on around them

Deaf-Blind Learners
• Incidental learning is difficult or does not occur
• Hands-on experience, systematic instruction, and consistency is essential to learning
• Often need specialized support in order to learn, communicate, and interact with the world
Georgia Sensory Assistance Project

- Funded through the US Department of Education, Office of Special Education Programs
- Housed at the University of Georgia
- Provides technical assistance to families, teachers, and service providers of children and youth with deaf-blindness (birth-21 yrs)
- Part of a network of state projects connected by the National Center on Deaf-Blindness.
GSAP’s Mission

• To identify children with combined vision and hearing loss
• To increase awareness of deaf-blindness and the needs of children and youth who are deaf-blind
• To provide technical assistance to school teams, service providers, and families.
Deaf-Blind Child Count

State projects are required to keep a census of children with deaf-blindness

Census information (without names) is submitted to the US Department of Education as part of an expanded child count

Assists with funding and planning technical assistance to meet the needs of children
Technical Assistance from GSAP

• includes consultation, sharing information and expertise, instruction, and skills training

• addresses issues related to deaf-blindness—such as communication strategies, visual and auditory accommodations and adaptations, instructional strategies and resources

• can be requested by the educational team, family members, or related service providers

• is provided at no cost
GSAP Training and Workshops

- Open Hands, Open Access Modules
- Annual Summer Institute
- Conferences- GVEST, SERID, CHARGE, DEC, IDEAS
- District or Regional Trainings
- Active Learning and Adapted Books workshops

Training opportunities are posted on our website
GSAP Family Support

- Workshops
- Networking / conference calls
- Individual Support
- Working with your school team
- Family Sign Language classes
- Transition support (EI to school, new classroom, school to adulthood)
Find more information & connect with GSAP

Website
https://tinyurl.com/gsapweb

Facebook Page
https://www.facebook.com/Georgia-Sensory-Assistance-Project-151810591532627

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Questions?

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Carol Darrah- cdarrah@uga.edu