

Work Session: ***Future Directions in TA (Content and Method)***

Facilitators: Linda McDowell, NCDB and Chris Montgomery, TX SDBP

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Attendees:

Melanie Knapp, President of DBMAT, family-professional organization in TX

Linda Alsop, Utah State University

Debbie Sanders, UT SDBP, Utah Schools for DB, HK Fellow

Cathy Lyle, MN SDBP

Tom Lauder, OH SDBP

Jo Ann McCann, OSEP

Diane Haynes, KY SDBP

Julie Maier, KS SDBP

Edgenie Bellah, Texas- Family Engagement, NFADB Affiliates Coordinator

Donna Riccobono, MD SDBP

Jerry Petroff, NJ SDBP

Ella Taylor, Western Oregon University, The Research Institute

Amy Parker, NCDB

***Introduction***

Discussion Guide for Identifying Future Direction to address Un-met Needs

Considering recent DB network blogs on Prevalence, Educational Placement, and Service Delivery Gaps….

* What new areas of **child and family needs** are we seeing that require support from the network?
* What new areas of need are we seeing for **service providers** (teachers, interveners, related service personnel)?
* What new areas of need are we seeing for the **TA providers** (state, multi-state and national center)?

Considerations for Future Directions for the DB Network (Build on “assets”)

* **Past efforts** that are still relevant that should be reorganized and renewed
* **Modifications** to be made to current efforts
* Efforts **to be added** to current work
* **New initiatives** to consider
* **New partnerships** to consider

***Identified Un-met Needs and Future Directions***

Four threads of discussion:

1. System of Measuring Outcomes and Efforts, as a National TA Network
2. Attaining Qualified Personnel in the field of Deaf-Blindness
3. Developing and Cultivating National Community
4. Addressing Life after Transition

**(1) System of Measuring Outcomes and Efforts, as a National TA Network**

The first “thread” of discussion centered around the desire for a way to organize TA goals, TA efforts, and implementation. The **Outcome and Performance Indicators (OPIs)** were reflected in the discussion.

* Donna, MD - uses Filemaker pro database. For U of MD to use Filemaker Pro, the project hired a company in PA to create a fluid database. Mark Campano has really developed this; she uses this to write an APR and TA plans. In the past, Ella helped with this; TA was provided on how to use a database to track activities.

🡪 It would be nice to have someone coordinate our data. Linear data across the nation; having support from NCDB would be nice.

* Diane, KY, explained that the IT people at her university had never heard of Filemaker Pro. Talked to Ella and Sarah at that time; sharing concern. We hoped to learn from across the country.

🡪 We need to revisit this system; update it; aggregating all of that data.

* Jerry, NJ, does the same thing that Donna does. There is another initiative, within the system of child outcomes. OPIs went away from the collective conversation, but we still use them.

🡪 We need to revisit them to bring them into the 21st Century. Nobody talks about it.

* Diane, KY - OPIs started 20 years ago, as a part of the national center advisory board discussion. The TA network used them as a tool to engage in discussion to identify areas of needed training and outcomes to be achieved.
* Jerry, NJ - the OPIs align with implementation science.
* Ella, WOU/TRI - gave a brief explanation to Julie on OPIs: child teacher families and systems outcome indicators, designed to go with a TA plan; there was a measurement system around those outcomes, originally used within Filemaker Pro.
* Diane, KY – used OPIs as a framework for discussion; went into an action plan. Also a way to collect the data. Diane mentioned aligning OPIs with the K-12 Standards in KY.
* Amy, NCDB - mentioned Tina Hertzog has aligned the child OPIs with the OHOA modules for work in PA with educational teams.

Linda, NCDB - asked the group to address the question: ***Why do we, as a network, want to continue using the OPIs or similar system?***

* There is a need for national alignment; common language; children and families and service providers will understand what we will expect of them and what they can expect from TA provision.
* There is so much to concentrate on and so much to change; this helps us keep track of outcomes.
* This type national “common language” helps us focus relationships/partnerships for our efforts and effects.
* We were on a path to “get there” as a nation through some of the OPI work. Does the implementation science effort help us come back to national discussion around a common language and TA approach?

**Other benefits for having a common technical assistance language around efforts and effects/outcomes:**

* Analytic data at the national level for a “low incidence” field is critical
* A way to represent our work to the federal government for funding priorities and for evidence of our network’s efficacy – Measures around effort and effect can indicate how much we are investing and what it yields
* Having a common language is vital - Reflective of the unique needs of deafblind students
* Comparisons across state lines around child outcomes, family outcomes, service provider outcomes, and systems outcomes - Could provide a common way to talk about achievements and link to resources across state lines
* All OPIs were written in a way to be measurable; showing that our kids can learn! - There are many aspects of the OPIs that can be generalized to other populations as well.
* Consider how family organizations could use to talk about children/student outcome data

**Current Uses of OPIs**

* KY- use the OPIs to address literacy and for development of our goals
* MD- for our technical assistance, annual reports, and planning
* NJ- for our technical assistance, annual reports, and planning; for our communication with advisors
* TX- use the OPIs to develop goals for practicing teachers
* PA- OPIs are being used with OHOA modules for teams in training
* UT- One of the things that Leslie Buchannan did for our interveners was the use of OPI- intervener practice- helps with self-reflection (technical assistance tied to professional development)

**Digital and technical infrastructure (challenges and current conversations):**

* For some, the Filemaker Pro system wasn’t sustainable technologically.
* Filemaker Pro is a proprietary software system and is now considered legacy software.
* Open source systems are often more sustainable that custom develop database packages
* Some conversations about database development have been happening at Summit.

**Contemporary Influences to Consider in the Development of a Common “Technical Assistance” Language measuring outcomes and efforts**

* Work being funded at CEEDAR to look at evidence based practices in low incidence disabilities. The OPIs or other practices may need further alignment with these current efforts.
* Council for Exceptional Children (CEC) has knowledge and skills standards for interveners and teachers of the deafblind. How do the skills of TA providers align with some of these knowledge and skills sets?
* Measuring the fidelity of implementation and fidelity of measurement are important considerations in the design of this system.
* Family leadership and partnership with family organizations is critical here. How do we look at family OPIs with our partners? How can family partners measure their impact upon systems?
* If we want the child to have some outcomes, what are all the other things that need to happen around children (by adults) to make that change? How are we looking at contextual factors in the home, school and community environment?
* How does change with service provider’s behavior effect families and students? (impact across stakeholder groups)
* How to the OPIs align with the current network initiative work? Is there a way for OPIs to be reflected in these domains?

**(2) Attaining Qualified Personnel in the field of Deaf-Blindness**

Linda, NCDB - explained at the beginning of this second “thread” of discussion that part of what NCDB is doing now is bringing the personnel prep programs together (who have course content in Deaf-Blindness) for national planning on how to address need for qualified personnel in the field of Deaf-Blindness – interveners, the teachers who will supervise them, and technical assistance providers.

* We have been trying to say as a field- what “it” is in personnel when we see “it.” What are the knowledge and skills competencies that may be observed? Do we need checklists to help us identify these skills?
* What are the roles in systems? Once we better understand these roles, how can we train to them?
* In concert with any legislative or policy efforts, how can we get “buy in” from our state departments of education?

Some questions to the group:

* Measurement tools for intervener knowledge and skills? What is there for teachers, for technical assistance providers?
* How do we support that continuum from interveners to teachers to TA provider?
* Current teachers of the deaf-blind and interveners (and TA providers) - how do we support the each of them so they become a part of the solution for the field, prior to national and state level recognition?

Responses:

* OHOA modules are a way to cover the knowledge & skill competencies for interveners.
  + We have been having conversations with teachers about what is missing from the OHOA resource for teachers.
  + In doing a gap analysis, we may see what is useful there for many personnel (including TA providers) and what else needs to be supplemented?
* Leslie B from UT developed “Observable Best Practice: Child and Youth Outcomes Assessment”; OPIs for child and service providers. This can be shared again.
* Idea: Is there a way to look at fidelity of teacher practice using the “Classroom Observation Instrument”?
* Chris, TX - Use and partner with existing teacher networks in states to identify the practices and encourage the development of knowledge and skill; including the development of a more solid community of practice for Interveners, TDB, and related DB-practitioners, that provides connections both locally and nationally.
  + Julie, KS - agrees with Chris. “I have a background in moderate severe. I know people across the state. I could identify teachers that have constellations of skills and engage with them in conversation.”
  + You can’t teach deaf-blindness easily. It is not simply a matter of teaching blindness or deafness alone. It is deeper and it is a different pattern of learning for our students and we have to acknowledge capacity building and training.
* Linda, NCDB - we need to re-think what we can accomplish as TA providers and how we need to be in partnership with personnel prep. It is not our responsibility of TA to accomplish personnel prep, but we can partner with existing personnel prep programs. Field placements and experiences must have supervision from people who have real experiences in the field and demonstrated knowledge and skill themselves.
  + Where are the deaf-blind courses that can build the knowledge base?
  + How will TA compliment training, by building skills of providers? (Perhaps being the supervisors of practicum.)
  + Get the word out clearly about the existing programs and where they are and what the training content is?
  + Other disciplines (related service providers) need to know something about deaf-blindness.
* It is an exciting time – with the Cogswell-Macy Act; recognition of the need for qualified personnel in Deaf-Blindness – “we may win this thing!”

**(3) Developing and Cultivating National Community**

Third “thread” of discussion was begun byDiane, KY. Before we were arranged by regions. By branching out, the nation is now encouraged to partner in new ways. Are partnerships arranged more by topics now, not regions? How do we cultivate ourselves, as a developing community?

* Chris, TX- our kids are complex and our issues are complex; as a small community we have to come together and get to know things.
* Julie, KS- Some of our teachers went to the TX DB Symposium. They went after taking 15 classes with David and Maurice but they traveled to TX and plugged into a rich community experience. Maybe these community gatherings are a way to build community.
* Chris, TX- Should we have a National Symposium? We used to have em’- should we have them again? It seems like people from other states are starting to come to the Texas Symposium to be a part of the national conversation as well.
* Linda, NCDB- We have worked extensively, and will continue to work, on how to organize the materials and interactive platforms on the NCDB website to cultivate community engagement.
* NCDB still continues in partnership with Perkins (new hire); organizing the research and resources we have in our greater community.

**(4) Addressing Life after Transition**

The fourth “thread” of discussion was begun byJerry, NJ . We know is that the US DOE recognizes that the measuring the effects of special education is critical. We have done short follow up studies for people who leave Special Education. State DOEs report less than national count- on outcomes as well. We have some data within the national child count and from some recent survey work. We know that once students graduate they usually fall into a black hole.

* We need a **new survey on the post school outcomes for DB students**; and an ongoing effort on this. It will give us an overall picture of what is happening as a result of education and what is needed. It will help us in efforts to continue state DB funding.
  + I’ve initiated with NCDB to get a survey out, replication of a study that I did in the 1990s. Between the two studies we have improved. It is 110 questions. We are trying to see where things are as far as outcomes for our students. Wanting to leave something helpful behind for planning.
  + It is great for TA projects to know the full picture. It helps us to ask, how are we doing? Who are we bringing to the table to plan transition and how are we helping students and families succeed?
* Diane, KY- we could support this transition survey from KY. What could we do differently to effect transition and to work with adult service providers? What could we do to support our partnerships with VR and adult service providers?
* Melanie, TX- I agree that this is so important for families to know about transition planning and what impacts positive outcomes and to advocate for continued funding for adults.
* Jerry, NJ- It is important to measure at the right time. Sometimes you don’t get an accurate picture of an outcome 1-3 years out of school.
  + Chris, TX- In TX, the State DOE- extend out 4 years- TX SDBP continues to be involved.
  + Melanie, TX- when Christian exited out, TX Outreach stayed involved. Outreach staff did a PCP for Christian and he was set up to transition well. It was working when he graduated. At that time he had an intervener in training. We were still working on improving the quality of this life, with the exception of him living in his own place; he had a job, had friends. Transition planning is so important. PCP is amazing. Do before a student is ready to graduate. Give it couple of years and then see how the student is doing. Christian also had the TX DB Medicaid Waiver. VR bought in and because of PCP we were able to justify it.

**Addressing partnerships for tracking, using data to make services better:**

* Jerry, NJ- We need to gather data from 10 years out, not just 5 years out, not just one year out.
* What about students who don’t receive TA? We don’t go out until an administrator agrees and requests TA. All the team needs to be on board before TA efforts begin.
  + It’s hard to measure students on teams who never got TA. 750 kids in TX. How do you track kids when they move out of state? Does it go with the states?
  + Family requests TA in Texas for follow up. Administrators are required to sign off on TA to come out and provide technical assistance. Talk with the administrators on the phone before coming out.
* Tom, OH- tracking is done in public health. But a public education system, doesn’t want to do that. Federal law said you have to do this. Florida extracts a data file from DOL, SS and other departments that have information and they get a download once per year and are able to track – pulling down incredible info about where the students are. We use Kent State and track this in OH. But privacy laws prevent this in most states. Trying to provide services that are appropriate. Asking are studens at home? Do they have a job? In the state of OHIO, we are supportive of finding out data with you around transition.
* Diane, KY- Related to collecting the data- what about a partnership with HKNC? They do a national account as well; trying track and provide supports for transition outcomes for individuals who are deaf-blind. Make sure that the family gave permission to share with HKNC prior to transition.
  + We need some better ways to partner with HKNC Regional Reps and the I CAN CONNECT Program. (NCDB making plans now to facilitate a webinar with HKNC about partnerships with the Regional Reps.)
* Workforce Innovation Opportunity Act provides a great opportunity and wonderful conversation to provide support for person centered planning (PCP), VR partnerships and transition.
* Consider asking the 5 questions with families. A good beginning to measuring outcomes when someone transitions. If we have done TA with them, we can do follow up with state partners.
* Remember there are many systems around the person for TA providers to consider. Make sure someone cares about the child and works with this family as hard as we did. Use PCP- we try to look for a champion in order for a family member not to completely burn out. When you can think about those people that you are linking to, remember you are looking at agencies (new partners in the community) that don’t have a clue about Deaf-Blindness. They need the 1:1 trained personnel and case managers who have a clue - home and community based training content.
* Community Partners will include the Medicaid waiver funded and state funded DD providers. Parents have an impact on those systems. Siblings too also have an impact on those systems and on planning.

**Consider Transition Throughout the Life Span**

* Diane, KY- For good transition planning, we work across the age span. Transition matrix is being modified from stating at age 14, to starting at birth.
  + Look at quality indicators, outcomes; from birth, not just beginning at age 14. Don't be stuck on compliance-oriented indicators – i.e. did you meet the deadlines for services and reporting?
* In Ohio, we were missing that component so we began working with the OH Pediatricians Association. Huge steps in making partnerships with pediatricians group; talking with them, raising their awareness; with parents and family members.
  + NCDB can facilitate network selection of resources for training; national linkages with early childhood providers.
  + Families have to be involved with all of it. CHARGE does family webinars as does NFADB. It is vital that all of our efforts involve partnerships and outreach with families and family organizations.