Maine’s Collaborative Early Intervention Model…
You can do it too!

Clerc Center National Outreach Conference

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MECDHH is Maine’s deaf education agency that provides early intervention through Grade 12 information, support and educational programs for deaf and hard of hearing.

Early Childhood and Family Services – (ECFS)
- Provides information, support and resources statewide to deaf and hard of hearing children age birth – age five and their families.
- Early Intervention
- Age 3-5 Special Instruction and Consultation
Memorandum of Understanding
with Maine’s Part C Agency
Purpose

“To develop one family-centered communication opportunities exploration process for families who have deaf or hard of hearing children throughout Maine.”
Collaborative Approach to Early Intervention

All children who are deaf or hard of hearing will have a full team of early interventionists supporting their family:

- Teacher of the Deaf
- Infant Mental Health Specialist
- Occupational Therapist
- Physical Therapist
- Service Coordinator
- Social Worker
- Special Educator
- Speech Language Pathologist
- Deaf Adult Support
- Parent to Parent Support
MECDHH provides the Deaf and Hard of Hearing Early Intervention Specialists of early intervention professionals:

- Teachers of the Deaf
  - ASL Trained
  - Spoken Language Trained
- Deaf Mentors
- Special Educators
- Speech Language Pathologists
- Cued Language Providers
- Educational Audiologist
- Deaf/Hearing Team
Early Intervention in Maine

Maine utilizes a blend of the Primary Service Provider/Coaching (Shelden & Rush, 2001) and Routines-Based Early Intervention (McWilliam, 2010) models.
• Fully understand the family environment.

• Conduct assessment that's truly family-centered.

• Write high-quality IFSP. Develop clear, specific, measurable outcomes that directly address the family's priorities and help children develop skills relevant to everyday life.

• **Provide coordinated, streamlined services.** – Primary Service Provider

• Empower families to continue intervention between visits.

• Support early childhood educators
After intake, evaluations, and the initial IFSP, families begin their process with an early intervention specialist who supports the family through the initial exploration of communication opportunities while honoring the early bonding process of families with their babies.
6 Visit Process (Early Visits 1-3)

- Relationship building
- Support early interactions, attachment and bonding between baby and parent/caregiver.
- Discuss foundations of language and early communication strategies.
- Clarify audiological testing
6 VISIT Process (Early Visits 1-3) continued

- Provide an unbiased overview of all communication opportunities
- Highlight the variety of available resources
- Provide an overview of hearing assistive technology
- Introduce Maine Hands and Voices, Guide by your Side and Deaf Mentor Programs
Earliest Interactions

Commenting
VERBAL
- crying, cooing, talking, singing

Being face to face
VISUAL
- Looking, gestures/pointing, facial expressions, smiling, signing, cueing

Interacting throughout daily activities

EARLIEST INTERACTIONS
PHYSICAL
- Touching, cuddling, tickling

Following your child’s lead

Responding
6 VISIT PROCESS – (Next Visits 4-6)

Explain, demonstrate, compare and contrast communication opportunities the family has expressed interest in exploring.

Explain the role of professionals who work with children specific to each communication opportunity.

Utilize Part C coaching opportunities for joint visits with professionals to provide more in depth information about specific opportunities.
Webs

American Sign Language

Auditory Verbal

Cued Speech/Language

Skilled ASL Family Trainer

Parent to parent support

Visual or tactile access

Deaf Mentor

Use of ASL throughout daily routines

Family competence in ASL vocabulary and grammar.

Skilled providers in developing listening and spoken language skills

Auditory Access

Deaf Mentor

Parent to parent supports

Integrated auditory activities in daily routines

Family use of unisensory (auditory only) stimulation
6 VISIT PROCESS – (Next Visits 4-6)

Explain child specific hearing assistive technology and equipment management.

Provide child specific resources regarding hearing levels and implications.

Review outcomes and complete a communication plan.
Joint Visits

As families look deeper into various communication opportunities, we bring in specialists, Deaf adults and other parents to offer their perspective. This provides families the opportunity to journey through different options and explore.
Communication Plan

• Reviews everything discussed in the past 6 sessions
• Ensures families have all options presented to them
• Leads to chosen Primary Service Provider
• Leads to Family Training Opportunities
• Accountability of early interventionist
• Family writes in their own handwriting
• Review child’s language progress and current plan
• Renew communication plan based on assessment data and parent choice
Communication Plan

I. Considering the home language and communication.

II. Considering the child’s language and communication opportunities.

III. Consider the advantages and limitations of communication opportunities.

IV. Consider the personal journey to communication.

V. Consider statewide resources and supports.

VI. Consider language and communication development.
Community of Practice
For children who are Deaf or Hard of Hearing, birth to age 5.
Language Assessments and Progress Monitoring

- Ongoing language assessment and progress monitoring provides a framework for reviewing the family communication plan and outcomes.
Reflecting Together...

It is important to allow time for families to explore...reflect...change...question...
Empathic Responses

• Reflecting back
  ~ It sounds as if ...

• Extending, clarifying
  ~ Tell me more.

• Questioning open ended
  ~ What did you think?

• Summarizing, synthesizing
  ~ It appears that ...
Empathic Responses continued

• Checking perception
  ~ You seem to be…

• Acknowledging
  ~ I can appreciate that.

• Encouraging expression
  ~ How did you feel?

• Being quiet

* Listening and Talking, E. Cole, 1992 A.G.Bell
Promoting Strengths

Listen
~ Don’t tell

Think with them
~ Not for them

Give information
~ Don’t insist they use it

Develop options
~ Not ultimatums
Promoting Strengths

Look for the positive
~ Not the negative

Don’t say “you’re wrong”
~ Determine why they feel they are right

Congratulate their success
~ Don’t ask for applause

Follow their agenda
~ Not yours

PJ McWilliam, 1996
**MOU**

“All families will have the opportunity to meet Deaf and Hard of Hearing Adults”

<table>
<thead>
<tr>
<th>Deaf Mentor - Family Training</th>
<th>Deaf Guide Program</th>
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<tr>
<td>• SKI HI program</td>
<td>• Deaf adults from various backgrounds</td>
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<tr>
<td>• ASL Family Training</td>
<td>• Personal history</td>
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<tr>
<td>• Requires Ski Hi Deaf Mentor training and certification</td>
<td>• What they have learned</td>
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<td>• What insight can they share with new families</td>
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<td>• Answer questions</td>
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MOU

“All families will have the opportunity to receive parent to parent support”

Guide By Your Side Program

- Collaborative Program with Maine Hands & Voices
- Grant funded
- Formal training for Parents
- Annual Conference
Parent Infant Toddler

8 week sessions

Deaf/Hearing Teaching Team

Routines Based Learning – Evidenced Based

Parent to Parent Support
A final thought from a parent...

“What we really want, really need as parents, is opportunities to contact other families with deaf children, help in making regular contact with adults who are Deaf and Hard of Hearing, information that is accurate, honest, unbiased and fair, and then the emotional support to make decisions…..”
Having one statewide early intervention system is the magic....you can do it too!