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Supporting Children Who Are DHH: Utilizing the SKI HI Curriculum

ADSD

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Department of Health and Human Services



Introduction

The goal of this presentation is to tailor the discussion around how the SKI HI curriculum is used when working with children who are Deaf or Hard of Hearing (DHH) and to highlight areas where additional support and resources are needed.



Agenda

- 1. Overview of SKI HI Services: A detailed look at the services we currently provide to families.
- **2. Gaps in Funding**: There are critical elements of the SKI HI curriculum that our EI system does not have funding for, such as:
 - Becoming fluent in American Sign Language (ASL)
 - Access to Deaf mentors or coaches for both children and families
- **3. Training Costs**: The cost of SKI HI training is quite high, especially considering staff turnover. This makes it challenging to continually train new staff to the necessary level of expertise.
- **4. Language Outcomes:** How the commission can help improve language outcomes; How we collect the language data.

Current Services

- Regional EI team meetings for staff trained on the SKI HI curriculum
- Quarterly SKI HI staff meetings statewide
- Visits with families, provide SKI HI handouts as appropriate to the families
 - o Review binders before each visit and select relevant handouts to share with families.
 - o Provide coaching to families on implementing strategies.
 - Families practice strategies during the visit with support.
 - Handouts are provided for families to keep as a reference for continued practice between visits.
 - o Challenges
 - Hard to keep up with the binders
 - Family does not always want binder information.
- El Curriculum = family based—what the family needs in that moment.
 - Observe how family does something
 - Coach family through a strategy so they have the hands-on experience
 - Reflect on strategies
- Language Playgroups
 - Parent Guide = Sometimes
 - Deaf Mentor = Not Available
 - ASL teacher = Not Available



Data of Children Served and SKI HI Trained Providers in the El State Programs

Children Being Served in the state El programs:

• North:

• Reno: 14

• Elko: 3

• Winnemucca: 1

• Carson: 7

• Total (North): 25

• South:

Las Vegas: 43

• Total (South): 43

Providers that are SKI HI Trained and have Children that are DHH on their Caselaod:

North:

• Reno:

• SLP: 2

• DS: 2

• Rural:

• SLP: 1

• DS: 1

South:

Las Vegas

• SLP: 3

• DS: 6



^{*}data pulled 9/16/24)

Community Resources for Families of Children who are Deaf or Hard of Hearing (DHH)

- Specialist Referrals Provided by Early Intervention (EI) Staff:
 - Northern & Southern Nevada:
 - Comprehensive list of trusted ENTs (Ear, Nose, and Throat specialists) and audiologists for diagnostic assessments, hearing aid fittings, and ongoing care.
 - Guidance on accessing specialized clinics for auditory evaluations and follow-up treatments.
 - Transition Support and Early Childhood Services:
 - School District Connections:
 - Assistance with transitioning children to school district Early Childhood Programs tailored to DHH needs.
 - Support in developing Individualized Education Plans (IEPs) and accessing school-based services.

Community Resources for Families of Children who are Deaf or Hard of Hearing (DHH)

Playgroups and Social Support:

- Information on local playgroups designed for DHH children to foster socialization and early language development.
- Connecting families to parent-led support groups and community events to build a network of shared experiences.

Additional Statewide Resources:

- Access to financial assistance for hearing aids, assistive technology, and therapy services.
- Educational workshops and resources to empower families in supporting their child's communication journey.

Gaps in Funding and Additional Barriers

- As previously mentioned, the lack of funding, high staff turnover, and the substantial cost of SKI HI training have significantly impacted our capacity to train enough staff. Consequently, we currently lack a sufficient number of personnel trained in the SKI HI curriculum, which challenges our ability to serve children who are Deaf or Hard of Hearing (DHH).
- Additionally, we do not have the infrastructure within our system to allow Developmental Specialists to carry a caseload solely dedicated to children who are Deaf or Hard of Hearing (DHH). This makes it difficult for staff to focus solely on children that are DHH.
- There is no access to Deaf Mentors or coaches to support families, and Nevada universities do not have robust programs focused on children or adults who are Deaf or Hard of Hearing (DHH).
 Unlike in some other states, such as Utah.

Gaps in Funding and Additional Barriers

- There is a lack of external Early Intervention (EI) resources and specialists.
- Due to high caseloads, it is challenging for
 Developmental Specialists to take on the role of a SKI HI
 coach. Trained SKI HI coaches have multiple other
 responsibilities, as a result, staff are often unable to
 prioritize SKI HI support, as they are managing the high
 needs of other children on their caseloads.

Language Outcomes

- We currently do not have a complete system for tracking language outcomes, and the data we collect is incomplete. It does not reflect progress over time for children receiving early intervention (EI) services, particularly in relation to language acquisition.
- Each child should have a Speech-Language Pathologist (SLP) on their team (if family agrees) and a focus on language development clearly represented in their Individualized Family Service Plan (IFSP) outcomes.
- Teams discuss challenges and outcomes during our monthly and quarterly meetings with case conferencing, but without a robust tracking system, it is difficult to monitor long-term progress in language development.



Questions?



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Acronyms

- SLP: Speech and Language Pathologist
- DS: Developmental Specialist
- IFSP: Individualized Family Service Plan

