On or near the third birthday, a child steps ahead from Birth to 3 services to early childhood special education services and/or other community services.

If your child has continuing needs, she or he may be eligible for the special education services provided by the school district. Both the Birth to 3 program and your school district have procedures to ensure a smooth and effective transition for your child from early intervention to early childhood special education programs. These procedures are designed to ensure that by your child's third birthday an Individualized Education Program (IEP) has been developed and services are determined for your child.

Moving from program to program is called transition. Families and service providers walk through this transition together, one step at a time.
Looking Ahead

The purpose of the looking ahead section is to prepare your family for the rewards and challenges of transitioning out of the birth to three period and entering a new phase of your child’s life which may include transitioning out of county services and into school services. Resources have been compiled in this section to help you understand what is to come, what actions you may need to take, and when to begin considering the up-coming changes. All families are different. If your baby is very young, this might seem like the farthest thing from your mind or you might already be considering plans for this child’s college career. Whatever, your case may be, this information is here for you when you are ready.

“Preparing for our daughter's transition out of Birth to Three was an all-consuming, anxiety inducing task for several weeks, for a variety of reasons. We had a tremendously high level of respect, maybe even adoration, for all the professionals/therapists working with us to help ensure our daughter could achieve her full potential in life. We also had a very emotional bond with the professionals and we were terrified to lose them. We couldn't imagine going out into the "big, bad world" without them.

Many parents had also told us about the gray area that hard hearing kids often fall into from the school's perspective, and the annual struggles we might be involved in for the next 15 years. With the guidance of the professionals that had come to know us so well, by observing our daughter carefully, and by visiting a variety of programs and asking numerous questions, we made it through the process. Since we are both working parents, we also relied on things we had learned in our careers and applied them to the IEP meeting. Fortunately, although the road was bumpy and curvy, the end result exceeded our expectations.

Now, just over a year later, we not only have the resources/people from our previous Birth to Three providers, we have a whole new circle of resources that are learning with us, and developing wonderful, positive relationships with our daughter. We have found the professionals in the school system to be true advocates for our child, always trying to consider what is in her best interest. As parents, when we look ahead to Claire’s future, we are confident in the school system, the IEP process, and the growing abilities of our daughter.”

--Christy Herden, mother of Claire
If the child meets the eligibility criteria for special education services, an Individual Education Plan (IEP) is created which contains goals and objectives as well as a listing of supplementary aids and services for the child and supports for school staff. Based on these, an appropriate placement is chosen.

Before this is done, however, families may want to consider what types of appropriate placements or school options are available. Some options within the state that have been used are:

• Placement in a regular preschool with services provided there.
• Placement in a self-contained classroom for deaf and hard of hearing students and taught by a teacher for the deaf and hard of hearing with additional services provided as recommended by the IEP team.
• Placement in an Early Childhood room with additional services provided as recommended by the IEP team.
• Placement in an Early Childhood room which is team taught by a teacher for the deaf and hard of hearing and an Early Childhood teacher.
• Placement at home and/or daycare setting with services provided there.

These are just some of the placement options. Some placements are combined and/or altered slightly to reflect the needs and strengths of the child, the preference of the family and resources of the local school district. The modifications or adaptations that are made to a program are only limited by the team’s creativity and flexibility. Furthermore, different programs and related services can be added and utilized in different ways.

Speech and language therapy is often added. A speech and language pathologist has a good understanding of how to promote communication and develop language. It is advantageous if this person has had some experience working with children who have a hearing loss and has some knowledge of non-verbal communication. In addition, it is also helpful if this person has some background in whatever the child’s unique communication needs are; be they cochlear implants, American Sign Language, signed system, Cued Speech.

Educational audiology is a related service. An educational audiologist can ensure that the correct amplification is in place and oversee the child’s auditory skill development. In addition they can assess the acoustic environment and determine the child’s hearing with and without assistive listening devices.

Educational interpreting may be involved in the child’s programming. Although most young children who are deaf or hard of hearing and rely on a signed language to communicate are not developmentally ready to use an interpreter, there are a variety of ways that such a person could be used:

• To develop the child’s use of an interpreter. Eventually the child, who is using signed language, will need an interpreter. There are activities that can be used to develop skills in using an interpreter.
Looking Ahead - 3

- To provide information about signed languages and deafness to those who are unfamiliar with it. In doing this, the interpreter could relate his/her experiences and suggest resources on general topics relating to hearing loss.
- To foster the child’s participation in group activities.
- To promote an expanded communication environment for the child.
- To be a member of the child’s team, including development and implementation of the IEP.

However, interpreters should not be used to teach the child. Although interpreters are trained in the use of signed language, they are not trained to teach language to young children. They are usually not trained to work with young children or families. A child needs interaction, language modeling and experiences paired with language before benefiting from interpreting services.

In addition, interpreters should not become the child’s constant companion. It is not appropriate to expect the interpreter to function as the child’s only language resource.

And interpreters should not be expected to resolve all communication needs within the classroom. Interaction with peers can become frustrating and incomplete to young children who are deaf or hard of hearing, if they are continually through the use of the interpreter.

A deaf or had of hearing person functioning in some capacity with the school environment is a valuable resource to the child and the staff. This person could provide first hand experiences to the staff on hearing loss as well as promote a near optimal communication environment for the child.

Providing non-disabled hearing peers for young deaf and hard of hearing children whether in a self-contained classroom for the deaf and hard of hearing or in an Early Childhood classroom setting is particularly worthwhile. This is essential if speaking options are being promoted for the child.

While considering a placement, families may want to answer these questions about different options:
- If the child is using a signed language, what is the signing ability of the staff?
- Does the staff have training in working with young children? Are they aware of developmentally appropriate practices?
- What is done in the setting to promote communication?
- Does this particular setting meet the goals I have for my child?
- Does the staff have specific knowledge and skill in working with children who have a hearing loss?
- Does the staff have knowledge on auditory skill development and the technology used to develop auditory skills?
- What will the transportation be for my child? How will my child get to and from the school? Will the drivers have some knowledge of how to communicate with a deaf or hard of hearing child?
- What is the acoustic environment like?
Making a decision of where the child will attend school or what kinds of placements the child may be very difficult. When making such a decision it is important for families to keep the goals they have for the child in mind foremost. In addition they many want to:

- Gain background information on what is best practice in educating children who are deaf or hard of hearing.
- Visit different programs that serve young children who are deaf or hard of hearing.
- List what the available options are (be creative and inclusive).
- Talk with other families who have children who are deaf or hard of hearing. Ask them about their decisions and how they made them.
- List advantages and disadvantages of each available option listed.
- Consider what transportation might be involved.

No decision about placement is final.
Eligibility Criteria for Children who are Deaf or Hard of Hearing when Entering School

Below is the criterion for children who are deaf or hard of hearing in order to receive special education services in public schools.

Criteria for Hearing Impairment

PI 11.36(4) HEARING IMPAIRMENT. Hearing impairment, including deafness, means a significant impairment in hearing, with or without amplification, whether permanent or chronically fluctuating, that significantly adversely affects a child’s educational performance including academic performance, speech perception and production, or language and communication skills. A current evaluation by an audiologist licensed under Chapter 459, Stats., shall be one of the components for an initial evaluation of a child with a suspected hearing impairment.

For ease of discussion, let’s look at the criteria in two sections; first, the AUDIOLOGICAL EVALUATION.

“A current evaluation by an audiologist licensed under Chapter 459 shall be one of the components for an initial evaluation of a child with a suspected hearing impairment. Hearing impairment, including deafness, means a significant impairment in hearing, with or without amplification, whether permanent or chronically fluctuating…”

For a child transitioning from Birth to 3 to school, the transition and then IEP team must first review existing information on the child. If there is an audiological evaluation that the parents, Birth to 3 staff and school staff believe to be a ‘current’ and accurate representation of the child’s hearing, then this document may be used as part of the school evaluation. There is no requirement for a new audiological evaluation to be done at the time of the IEP evaluation unless someone on the IEP team determines a need for something more current or comprehensive. It is likely that an IEP team will request a new audiological evaluation for children who have a progressive hearing loss and for those with documentation of chronically fluctuating hearing loss and how it impacts the child’s varied hearing ability. There is no requirement for a child to have a specific decibel loss, nor that the child have a hearing impairment bilaterally.
The eligibility criterion does not eliminate a child’s eligibility for special education based on whether the child uses or does not use amplification.

Secondly, the criteria requires the IEP team to evaluate how the child’s hearing loss adversely affects a child’s educational performance including developmental progress typical of 3 year olds.

“… significantly adversely affects a child’s educational performance including academic performance, speech perception and production, or language and communication skills.”

EDUCATIONAL PERFORMANCE

The transition and IEP team is to evaluate the child’s ability to participate in activities typical of children age 3. The team is also asked to state how the child’s disability impacts his or her participation is age appropriate activities.

Speech perception and/or production is one way that a child’s hearing disability may impact their ability to participate in the activities typical of children who are 3 years old. Listening and speaking including verbal play with sound are the initial stages of language development. The many activities of preschool programs revolve around sound with verbal games and letter-sound association leading to early literacy. These activities may be very difficult for a young child with a hearing loss.

Language development and communication skills are central to learning. Young children with a loss in hearing often demonstrate delays in language development and challenges in their communication skills. Challenges with communication often lead to delays in social development through understanding rules and skills of interaction needed for successful play.

After the IEP team has reviewed the information about the child related to:
1) the audiological evaluation including documentation of hearing loss and the child’s use of their hearing, and
2) the adverse effects of the hearing loss on the child’s developmental progress typical of 3-year olds,
then the IEP team determines if the child has an impairment in hearing. See the attached eligibility criteria worksheet for a student with an impairment in hearing.

The next step for the IEP team is to determine if the child, due to his or her impairment in hearing, is in need of special education.
NEED FOR SPECIAL EDUCATION

When determining if a child needs special education, the IEP team responds to 3 questions. The questions below are modified to address the educational focus of 3-year olds.

1. Does the child have needs that cannot be met with typical age appropriate activities for 3-year olds in preschool settings as structured?

   If yes,
   2. Are there modifications that can be made in the preschool setting or in placement options considered by the IEP team to allow the child to participate in activities and make developmental progress that is typical of all 3-year old children?

   If yes,
   3. Are there additional services or modifications needed in the preschool settings or in placement options considered by the IEP team that the child needs in order to make developmental progress that is typical for 3-year olds?

If the answer to question 1 and 2 or 3 is “yes”, then the child is a child with a disability in need of special education.

The IEP team will then continue to discuss the present level of performance of the child, his or her needs and services. Based on the child’s needs and services, the IEP team determines the appropriate placement for the child to receive the services stated within her or his IEP.