

## The Role of the Itinerant DHH Teacher

**Thank you** to the 267 individuals that took the time to complete the 2017 Roles/Responsibilities survey. The preliminary results will follow via summaries of the findings.

### Summary of findings:

- a) 85% of services provided to students with hearing loss by DHH itinerants are direct 1:1 or small group services
- b) Most students served are performing at or near grade level, however there continues to be students with 1 year delay or greater who are receiving services through the itinerant model.
- c) The amount of service provided is typically 30-60 minutes per week, however a sizable number of students receive 2-3 hours of service per week. Consultation of 30-60 minutes per month is typical.
- d) Roughly 1/3 of respondents felt that 5-25% of their caseload was receiving only 3/4 to 1/2 of the service levels appropriate to meet their needs.
- e) In terms of students receiving itinerant DHH consultation, about 30% of respondents felt that 5-20% of these consultation-only students were not receiving enough service.
- f) The DHH-plus population made up about 30% of caseloads with 75% receiving direct DHH itinerant service and 20% receiving consultation.
- g) Some places have service delivery restrictions in place that interfere with teachers being able to provide the level and/or range of services to meet student needs.



### Who responded to the survey?

The 267 respondents were nicely balanced between new teachers and veterans: 32% have been an itinerant DHH Teacher for 1-5 years, 21% for 6-10 years, 19% for 11-15 years, 9% for 16-20 years, and 16% for 21 or more years. Of the total number, 40% are planning on leaving the field within 5 years. Part-time teachers comprised 11% of respondents. About 60% of the respondents have been in the role of teacher of the deaf in a center-based or resource room program in addition to their itinerant teacher.

### What do **caseload services** look like?



Median results: Direct instruction 1:1 or small group or 85% of caseload, consultation primarily with special education teacher was 5% and with regular education teacher was 4%. Few teachers were routinely providing team teaching instruction with the classroom teacher. The majority of respondents have caseloads of 10-25 students served in 10 different buildings.

**What is the estimated percent of students who are **functioning at varying levels of performance** (DHH only, no other disability conditions)?**

Itinerant DHH services are most appropriate for students who perform within 6 months of their age peers. Beyond that level of delay, more intensive services are required to close gaps and build skills than can typically be provided within an itinerant DHH teachers caseload. Although the respondents primarily

served students who were functioning at grade level expectations, it was clear that there were itinerant services provided to students with delays of 1 or more years.

### What is the estimated percent of itinerant caseloads receiving direct services by the amount of time served?

The most common time periods per week of service provided were:

- 1) 60 minutes/week, 70% of respondents provide this level of service,
- 2) 30 minutes/week, 61% of respondents provide this level of service
- 3) 30 minutes/month, 57% of respondents provide this level of service
- 4) 2-3 hours/week, 54% of respondents provide this level of service
- 5) 60 minutes/month, 52% of respondents provide this level of service.
- 6) 4-5 hours/week, 41% of respondents provide this level of service.
- 7) 90 minutes/week, 40% of respondents provide this level of service.
- 8) 3-4 hours/week, 32% of respondents provide this level of service.
- 9) 45 minutes/week, 32% of respondents provide this level of service.



### What is the estimated percent of caseload by the perceived appropriateness of level of services?

Although the majority of respondents felt that most students received an



appropriate amount of service, there was significant concern about inadequate amounts of service provided. 53% of respondents felt that 60-100% of their caseloads were receiving a very appropriate amount of service. An additional 52% felt that 5-25% of their caseloads were receiving close to the amount of service needed (i.e., 15 minutes more/week would be good). Just over 1/3 (34%) felt that 5-25% of their caseload were receiving  $\frac{3}{4}$  of the amount of service time needed. Another 38% felt that 5-25% of their caseloads were receiving only  $\frac{1}{2}$  the amount of service needed. 21% felt that 5-25% of their caseloads were receiving only  $\frac{1}{4}$  of the amount of service needed. In regard to too much service, as in 'made eligible in order to pay for an FM system, 21% felt that 10-20% of their caseloads were receiving a higher level of service time than was necessary. Consultation was not felt to be enough service by for 5-20% of caseloads by 28% of respondents consulting with special education staff and 31% consulting with regular education teachers.

### Percent of respondents who felt the following statement to be true.

**Service Provision Decision-Making** Responses by 206 individuals.

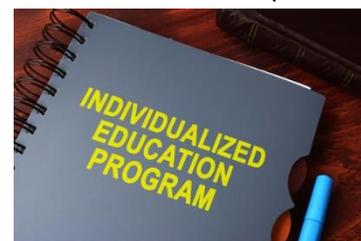
**51%** The IEP teams usually underestimate the level of student needs, thereby specifying DHH services that are not as intense/frequent as are needed by most/many of my students.

**20%** My administration has told me that I can only spend a certain amount of direct service time (or maximum amount) with any one DHH student.

**12%** My administration has told me that I can only provide consultation to the teachers that serve the identified students who are DHH (or there are clear guidelines on when DHH direct services will be allowed).

**25%** My district uses a service matrix or some other standard process when considering the amount of service time that each student needs.

**52%** I have a lot of schools and only so much time available. When a new student is identified I can only serve him/her the amount of time I can free up on my schedule, even if there is a clear need for more direct DHH service time. (No hiring more DHH staff).



**22%** We are an 'inclusion school district' and all pull-out services are highly discouraged, even if a student has 1 year or greater learning delays.

**Team-Teaching / Consultation** Responses by 249 individuals:

**46%** My district has not embraced 'full inclusion practices' or these practices have been deemed to not apply to (most) students with hearing loss.

**28%** Fewer pull-out direct services are being allowed.

**30%** My district has provided little or no training in team-teaching and/or consultation when supporting the DHH student in the inclusive model. I do not feel comfortable in this role.

**25%** All or almost all special ed services are provided by a small special ed teaching staff and aides. Inclusion in this case means I consult with the special ed staff so they will address the DHH specific needs within the class or during 'study session' pull out.



**Program Supervision** Responses by 259 individuals

**36%** My supervisor is terrific! S/he really understands students and will 'go to bat' for me and our students when needed.

**23%** I'm in a small district and work directly for the Special Education Director. This person does not have specialized DHH knowledge.

**25%** My supervisor is over all of the speech pathologists and DHH (maybe other groups too). This person has very basic knowledge of meeting the needs of children with hearing loss.

**34%** I find that I am continuously advocating for the needs of students with hearing loss because my supervisor does not understand, although he/she is willing to hear my point of view and is improving in DHH knowledge.

**What do services to students who are DHH-plus other disabilities look like?**



31% was the median (middle) response representing the percent of caseloads that are students who are DHH-plus. The median for DHH-plus receiving direct services was 75%, and it was 20% for students receiving consultation only. 90% of respondents felt that the DHH-plus students received an appropriate amount of services. When asked to respond if they felt fully prepared (100%), fairly prepared (50%) or not prepared (0%), the median response was 78%, indicating many teachers felt prepared to address the needs of the DHH-plus population, but not fully prepared.

The full results of this survey has been accepted for publication, fall 2019, in the Journal of the American Academy of Special Education Professionals.

The survey was conducted online April 5<sup>th</sup> – May 8<sup>th</sup> 2017.