

## A Checklist for IEP Teams: Considering Deaf and Hard of Hearing

This checklist is drawn from the Nebraska Department of Education's Nebraska IEP Technical Assistance Guide (1998, September). That document is no longer available online, but an updated version is, at: [www.education.ne.gov/SPED/technicalassist/IEP%20DOCUMENT.pdf](http://www.education.ne.gov/SPED/technicalassist/IEP%20DOCUMENT.pdf)

### How Do We Do It?

One way the IEP Team can address the creation of a communication plan is to work through the following checklist during the IEP meeting. This communication plan, in checklist form, is designed to meet the letter of the law.

1. The child's communication mode, *receptively*, appears to be:

- Aural-Oral (listening, speech reading, and speaking)
- Total Communication (including sign language)
- Other (please explain)

The child's communication mode, *expressively*, appears to be:

- Aural-Oral (listening, speech reading, and speaking)
- Total Communication (including sign language)
- Other (please explain)

Is this mode of communication efficient and sufficient for this child?

- Yes    No

2. What are the child's language needs? (*Check all that apply*)

- The child's written language is *on* grade level with hearing peers
- The child's written language is *below* grade level with hearing peers
- How far below?
- The child's spoken language appears to be *on* grade level with hearing peers (child does not utilize sign language)
- The child's spoken language appears to be *below* grade level with hearing peers (child does not utilize sign language)
- How far below?
- The child's signed language appears to be *on* grade level with hearing peers
- The child's signed language appears to be *below* grade level with hearing peers
- How far below?
- The child's comprehension (auditory or sign language) appears to be *on* grade level with hearing peers
- The child's comprehension (auditory or sign language) appears to be *below* grade level with hearing peers
- How far below?

What are some strategies that can be used to help the child attain language commensurate with his or her hearing peers?

(over) 

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3. Does the child have opportunities for direct communication with peers in his or her language and communication mode?

Yes Please explain:

No Please explain:

4. Does the child have opportunities for direct communication with professional personnel in his or her language and communication mode? (*Professional personnel includes, but is not limited to: audiologist, educational interpreter, general education teacher, occupational therapist, psychologist, speech language pathologist, social worker, teacher aide, educator of deaf/hard of hearing, etc.*)

Yes, with the following personnel:

How have personnel demonstrated proficiency in the child's communication mode?

No, with the following personnel:

What is the plan to remediate this issue?

5. The child's academic level is:

commensurate with hearing peers

1-2 years below hearing peers

more than 2 years below hearing peers

(If academic level is below hearing peers, please explain. Also include strategies to remediate this situation.)

6. Has the IEP Team examined the child's full range of needs, including opportunities for direct instruction in his or her language and communication mode? Please explain:

7. Have all potential service options within the LEA, as well as those available by contract, been explained during the IEP meeting?

Yes

No

(If no, why not?)

### How Do We Know We Are Doing It Right?

The communication plan:

Is addressed by all members of the IEP Team.

Is completed during the IEP meeting.

Provides information regarding the student's mode of communication.

Addresses the student's language needs.

Addresses the student's communication needs.

Addresses the student's academic level.

Addresses the student's full range of needs.

Describes opportunities for direct communication with peers and professionals.

Describes opportunities for direct instruction in the child's language and communication mode.

Incorporates all of this information into the development of the IEP.