



Illinois State Board of Education

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Frequently Asked Questions: Return to In-Person Instruction for the Deaf and Hard of Hearing Population

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The purpose of this document is to address frequently asked questions regarding planning for the return to in-person instruction for the deaf and hard of hearing (DHH) population. Portions of this document may also be applicable to students with other communication disorders. The Illinois State Board of Education (ISBE) takes the needs of children with disabilities very seriously and is continuing to review this topic in connection with best practice and emerging information in the field. Generally speaking, ISBE does not make determinations concerning the health and medical guidance connected to the pandemic – for this, we partner with our sister agency, the Illinois Department of Public Health (IDPH). The most recent guidance was developed in partnership with IDPH. We will continue to work together as information and science evolves in this matter.

For comprehensive guidance regarding transition to in-person learning for school year 2020-21, please refer to ISBE's COVID-19 webpage at the following link: <https://www.isbe.net/Pages/covid19.aspx>.

At the link above, you will find the following resources:

Part 3 Transition Guidance: Starting the 2020-21 School Year

<https://www.isbe.net/Documents/Part-3-Transition-Planning-Phase-4.pdf>

Part 3 Transition Guidance: Starting the 2020-21 School Year FAQ

<https://www.isbe.net/Documents/FAQ-Part-3-Transition-Guidance.pdf>

FAQ for Special Education on the Transition to In-Person Instruction

<https://www.isbe.net/Documents/SpEd-FAQ-Return-to-InPerson-Instruction-2020630.pdf>

IDPH Update for the Appropriate use of Face Shields: Communication posted on June 30, 2020

<https://www.isbe.net/Documents/IDPH-Update-Appropriate-Use-Face-Shields.pdf>

Resource: Remote Learning for Students who are Deaf or Hard of Hearing or DeafBlind

<https://www.isbe.net/Documents/DHH-Ideas-During-Pandemic.pdf>

These documents are subject to updates as new information becomes available.

Instructional Practices

1. How do educators ensure equal access to learning opportunities for students in the DHH population?

Considerations for the safe and equitable education of students in the DHH population should include individual student factors and health and safety guidance provided by ISBE and IDPH. Districts and other serving entities should make the most appropriate decision on how to deliver a free appropriate public education to students given the current context and individual student factors.

Options for in-person, blended, and remote learning have been presented in the general sense, but the needs of individual students with disabilities also should be considered. Video instruction and other methodologies that allow for full facial recognition may be one method for specially designed instruction during in-person learning.

Some students may have educational placements that require them to split their time between self-contained, resource classrooms and/or general education classrooms. IDPH has recommended attempting to reduce the need for students to travel throughout the school building. Teams must plan for how students will receive instruction as dictated by their Individualized Education Programs (IEPs) while still following health and safety guidelines. Some adjustments may include having teachers travel instead of students or alternating in-person and remote or video learning periods among instructional settings.

Entities may apply for a deviation to class size or age range in order to accommodate for student needs. The applications for deviations can be found at <https://www.isbe.net/Pages/Special-Education-Deviation-Applications.aspx>. See *FAQ for Special Education on the Transition to In-Person Instruction*, question No. 8.

Districts and other serving entities should appropriately plan for the purchasing of materials, such as captioning technology, additional assistive listening device technology, and/or sound field speakers to meet instructional needs. See *FAQ for Special Education on the Transition to In-Person Instruction*, page 12.

2. How can districts and other serving entities continue to provide peer communication opportunities for students in the DHH population?

Communication between DHH students and their peers may be hindered by the use of face coverings, so districts and other serving entities should brainstorm and plan for communication opportunities, such as video chats, outdoor activities with social distancing when appropriate for the student, written communication, or other similar activities. Assistive technology or other technology resources may also be utilized to improve communication. Some students in the DHH population may not be able to communicate effectively with peers while using social distancing, so other options should be made available.

3. Should students who require captioning as an accommodation continue to access that service in video and/or remote learning settings?

Yes. If a student requires the use of captions to access instruction or communication as documented in the IEP or 504 Plan, the student should continue to receive that service. Students who may not have needed captions prior to the health crisis may now need them given changes to instructional

modalities. Staff should consider the reading and cognitive levels of students when making decisions regarding use of captioning. Captioning is not intended as a replacement for instructional practices.

Captions should be available for all video/audio media (live or pre-recorded) and in some cases during in-person instruction. Captioning may be provided via a live-transcriber or automated captioning technology. Live captioning is typically the most accurate. However, if an automatic captioning program is used, the accuracy and quality of the automated captions should be evaluated prior to use with students.

4. What should administrators consider when planning for itinerant service providers and other related service personnel who travel between locations?

Factors to consider when planning for itinerant or traveling-related services may include:

- Safe and accessible space for the provision of services that adheres to health and safety guidelines
- Proper health and safety measures and procedures for traveling between locations
- Clear and consistent schedules, frequent collaboration for scheduling services
- Ensuring access to all necessary equipment and technologies needed to implement services

Entities have been encouraged to plan for and communicate with itinerant staff and organizations that provide itinerant services. See [FAQ for Special Education on the Transition to In-Person Instruction](#), question No. 17.

Personal Protective Equipment

5. Are individuals who interact with DHH students required to wear face coverings?

The use of appropriate personal protective equipment (PPE), including face coverings, by all students and staff is one of five public health requirements for schools if they start the 2020-21 school year with in-person instruction in Phase 4. Unless a student or staff member has a qualifying exemption, such as being 2 years old or younger or having a medical contraindication, they must wear an appropriate face covering.

Situations where a typical face mask may not be appropriate include instruction for speech/language therapy, English Learners, or deaf or hard of hearing students who may need facial visualization – to see words being formed by the mouth – for language acquisition. The Illinois Department of Public Health recommends video instruction for individuals for whom a face mask is not appropriate. IDPH, after lengthy consultation with communicable disease experts, infection preventionists, and infectious disease specialists, informed ISBE that face shields are not effective for source control. Individuals may wear a face shield while instructing DHH students only if face masks or video instruction are not available or appropriate and with strict adherence to social distancing.

The current guidance from ISBE on the subject of face masks for individuals who may have a medical contraindication for the mask is that schools should make determinations based upon appropriate medical information. It is likely that many schools and teams already have information about students – in IEP or 504 Plan documents or in the health file – that should suffice to establish the appropriate treatment for this issue, such as an audiogram. To the extent the school team does not have appropriate information, we recommend that the team ask parents/guardians to present some information concerning the medical contraindication. When there is documentation that a student has a medical contraindication, such as hearing loss, schools should make the individualized

determination whether educators, paraprofessionals, and service providers who interact with the DHH student may utilize a face shield as an accommodation for instruction.

To clarify, previous guidance uses the phrase “face covering” to refer to an apparatus that covers the mouth and nose and fits snugly against the sides of the face. This includes a face mask made with both typical and plastic/clear materials. A face “shield” refers to an apparatus that lies in front of the face, but does not fit snugly against the face.

Districts and other serving entities should appropriately plan for the purchasing of materials, such as specialized PPE and sanitization materials, to meet health and safety guidelines in conjunction with specially designed instruction for the DHH population. Follow purchasing guidelines similar to those that pertain to instructional materials. See [Part 3 Transition Guidance: Starting the 2020-21 School Year](#), page 12.

6. Is a mask that has a clear window but seals the mouth and nose and against the face acceptable for use?

A mask with a clear window or that is made of clear material is acceptable for use if it covers the mouth and nose and fits snugly against the sides of the face. Please contact or consult with your local health officials for approval or decisions regarding specific brands, types, or designs of PPE. See [Part 3 Transition Guidance: Starting the 2020-21 School Year](#), page 33.

7. Why are face shields deemed ineffective for source control?

IDPH states that face shields have not been deemed effective for source control. This is because there may not be a seal of the face or mouth and the shield may not fit snugly to the sides of the face. The Centers for Disease Control and Prevention states, “The virus that causes COVID-19 is thought to spread mainly from person to person, mainly through respiratory droplets produced when an infected person coughs, sneezes, or talks.” A face shield may not prevent respiratory droplets from entering the environment. Please contact or consult with your local health officials for further guidance on specific designs or brands of face shields. See [IDPH Update for the Appropriate use of Face Shields](#).

8. When should a decision regarding face coverings be documented in the IEP or 504 Plan?

Every student requires access to health and safety measures in the school environment. If the team decides the student qualifies for a modification to the requirement to use typical face coverings, the decision can be included in the accommodations section of the IEP or 504 Plan. This includes when the accommodation is needed by the student or educators and service providers who work with the student.

The team will come to a decision, based on data available and individual student factors, regarding what accommodations are the most appropriate for instruction and communicate the decision to all persons responsible for implementing the IEP or 504 Plan. Teams should include various parties, such as teachers, administrators, and parents/guardians, early in the conversation regarding accommodations for students and invite opportunities for collaborative problem-solving. See [FAQ for Special Education on the Transition to In-Person Instruction](#), question No. 15

9. If a teacher/staff is deaf or hard of hearing, what steps do they need to take to request accommodations?

Staff should follow steps and policies outlined by their employer for requesting accommodations.

10. What precautions should educators take while wearing a face shield for instruction?

If the educator wears a face shield for instruction, they and others in the room must adhere to strict social distancing, hand hygiene, and proper sanitization procedures at all times.

A face shield might be used during instruction and direct communication with individuals who are deaf or hard of hearing. At other times, such as breaks or plan time, educators should switch to a full-coverage face mask. Be sure to frequently properly sanitize the face shield, especially if moving between rooms or locations.

For further questions, please contact [ISBE's COVID-19 team](#).

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