**Section 28.340 Standards for the LBS II/Deaf-Blind Specialist**

By October 1, 2025, all candidates for an endorsement as a Deaf-Blind Specialist will be required to complete a program aligned to the Initial Specialty Set for Deafblindness (2015) and the Advanced Specialty Set for Special Education Deaf and Hard of Hearing Specialist (2018), published by the Council for Exceptional Children, 2900 Crystal Drive, Suite 1000, Arlington VA 22202-3557, and available at https://exceptionalchildren.org/standards/specialty-sets-specific-practice-areas. (No later amendments to or editions of these guidelines are incorporated.) The standards effective until September 30, 2025 are as follows:

a) Foundations – The competent deaf-blind specialist understands the philosophical, historical, and legal foundations of special education.

1) Knowledge – The competent deaf-blind specialist understands:

A) communication and language theories, approaches, and research that are applicable to teaching learners who are deaf-blind;

B) the history of the practices, people, and events that have had or currently do have an impact on the lives of people who are deaf-blind and their possible relevance to current educational practices;

C) specialized roles of educators and learners who are deaf-blind; and

D) clinical, functional, and legal definitions of deafblindness, blindness/visual impairment, and deafness/hearing loss.

2) Performance – The competent deaf-blind specialist accesses and evaluates current related research and practices in communication for their possible relevance in teaching the learner.

b) Characteristics of Learners – The competent deaf-blind specialist understands how disabilities impact the cognitive, physical, emotional, social, and communication development of an individual and provides opportunities that support the intellectual, social, and personal development of all students.

1) Knowledge – The competent deaf-blind specialist understands:

A) the critical roles of vision and hearing in all learning;

B) the complex and unique effects of combined vision and hearing losses upon all learners who are deaf-blind;

C) the diversity within the population of learners who are deaf-blind;

D) the potential isolating effects of combined hearing and vision losses upon the learner who is deaf-blind;

E) the potential impact of the combined effects of hearing and vision losses upon the learner's opportunities for incidental learning;

F) the potential emotional implications of combined hearing and vision losses upon the learner who is deaf-blind;

G) the potential impact of the combined effects of hearing and vision losses upon the learner's personal relationships with others;

H) the potential and complex effects of additional disabilities upon learners who are deaf-blind;

I) the potential effects of the age of onset, degrees and/or progressions of hearing and vision losses upon learners who are deaf-blind;

J) the major etiologies of deaf-blindness and the possible implications of etiologies in teaching the learner who is deaf-blind;

K) the potential impact of the combined effects of vision and hearing losses upon the development of concrete and abstract concepts;

L) linguistic forms/modes of communication used by learners who are deaf-blind;

M) the structure and function of auditory and visual systems and how they interrelate in the learning process;

N) impairments in the structure and the function of the auditory and visual systems; and

O) the influence of vision and hearing in motor development.

2) Performance – The competent deaf-blind specialist uses definitions of deafblindness, blindness/visual impairment, and deafness/hearing impairment to access services, materials, and assistance for the learner.

c) Assessment – The competent deaf-blind specialist understands the educational assessment process and uses various assessment strategies to support the continuous development of all students (ages 3-22).

1) Knowledge – The competent deaf-blind specialist understands:

A) non-linguistic forms/modes used by learners who are deaf-blind;

B) informal and formal communication assessment procedures that are appropriate for learners who are deaf-blind;

C) functional and clinical assessments of vision and hearing; and

D) clinical assessments of vision and hearing that are used by learners who are deaf-blind.

2) Performance – The competent deaf-blind specialist:

A) assesses and adapts to learners' pace/timing of communication;

B) assesses how choice of color, textures, and patterns of clothing enhances or detracts from social interaction;

C) assesses non-linguistic forms of communication;

D) assesses and interprets behaviors as intentional or non-intentional;

E) assesses and interprets the meaning of the learner's use of objects;

F) assesses and interprets the meaning of the learner's intentional use of signals to communicate;

G) assesses and interprets the meaning of the learner's natural gestures to communicate;

H) assesses and responds to the communicative functions of positive and challenging behaviors/forms;

I) assesses contexts (physical environments, people, things, and events) in which the learner who is deaf-blind communicates;

J) assesses the communication opportunities and demands in specific contexts;

K) gathers and maintains descriptive records/portfolios of the learner's communication repertoire across all settings to assess strengths, challenges, progress;

L) assesses activities for the learner's communications opportunities and implements appropriate strategies;

M) assesses how the learner processes auditory and visual information;

N) assesses situations and environments in which the learner can benefit from use of FM (frequency modulation) systems (based upon the recommendations of the audiologist and other team members);

O) assesses, describes, and explains the effects of vision and hearing losses upon the learner's movements;

P) assesses the proprioceptive and kinesthetic variables in the environment;

Q) assesses the visual variables in the environment that influence the learner's effective use of vision;

R) assesses variables within specific environments that influence the learner's use of hearing;

S) assesses the tactile variables within the environment;

T) assesses and explains educational implications of visual and auditory impairments upon the learner;

U) identifies, adapts, or develops strategies to assess the learner's functional use of vision and hearing; and

V) recommends the learner for additional visual and auditory evaluations/assessments when necessary.

d) Planning for Instruction – The competent deaf-blind specialist understands how students differ in their approaches to learning and creates instructional opportunities that are adapted to diverse learners. The specialist understands instructional planning and designs instruction based on knowledge of the discipline, student, community, and curriculum goals.

1) Knowledge – The competent deaf-blind specialist understands:

A) the development of communication partnerships between learners who are deaf-blind and others;

B) the possible communicative functions of behaviors of learners who are deaf-blind;

C) the development of vocabulary (content) in learners who are deaf-blind, based upon their forms and functions of communication;

D) the need for learners who are deaf-blind to have communication embedded/incorporated in all activities and settings;

E) assistive listening, low vision, and vibro-tactile devices that enhance auditory and visual functioning;

F) technology to enhance orientation and mobility skills;

G) visual, auditory, tactile, and olfactory information in various environments that influence learning;

H) technological devices and appliances for independent living; and

I) visual, auditory, and tactile characteristics of materials needed by learners who are deaf-blind.

2) Performance – The competent deaf-blind specialist:

A) provides opportunities for the learner to develop basic concepts through participation in meaningful and motivating real-life experiences;

B) provides opportunities for the learner to actively explore and experience common objects that learners with vision and hearing learn about incidentally;

C) tactually models for the learner the functional use of objects;

D) provides opportunities for the learner to understand and express abstract concepts;

E) creates opportunities for turn-taking;

F) provides objects for the learner to anticipate activities, adjust to change within activities, and to terminate activities;

G) selects, adapts, or creates tools and procedures appropriate for the communication assessment of a learner who is deaf-blind;

H) accesses resources for alternative and augmentative communications assessment and communication devices;

I) accesses sources of devices and appliances that will enhance the learner's ability to live as independently as possible;

J) operates and maintains hearing aids, FM systems, and vibro-tactile devices;

K) checks and maintains glasses, contact lenses, and low vision devices; and

L) teaches the learner to use appropriate optical aids.

e) Learning Environment – The competent deaf-blind specialist uses an understanding of individual and group motivation and behavior to create a learning environment that encourages positive social interaction, active engagement in learning, and self-motivation.

1) Knowledge – The competent deaf-blind specialist understands the development of the learner's personal identity and relationships to another person or a group.

2) Performance – The competent deaf-blind specialist:

A) establishes a trusting relationship with the learner who is deaf-blind by providing nurturance and consistency in people, interactions, and routines;

B) uses personalized visual, auditory, and tactile forms to identify the person who is initiating the interaction with the learner;

C) provides opportunities for the learner to recognize himself/herself and others by name;

D) makes appropriate adaptations to enhance the learner's auditory functioning in a variety of physical environments;

E) uses contrasting tactile cues or adaptations to assist the learner in gaining information about the environment; and

F) draws the attention of the learner to the sources of naturally occurring vibrations and smells in the environment.

f) Instructional Delivery – The competent deaf-blind specialist understands the central concepts and methods of inquiry; uses a variety of instructional strategies to encourage students' development of critical thinking, problem-solving, and performance skills; and creates learning experiences that make content meaningful to all students (ages 3-22).

1) Knowledge − The competent deaf-blind specialist understands:

A) the development of body image in learners who are deaf-blind;

B) the development of positive self-esteem in the learner who is deaf-blind;

C) visual, auditory, and tactile adaptations that enhance social/communicative interactions between the learner who is deaf-blind and others;

D) communication devices and technology that are appropriate for learners who are deaf-blind;

E) the development of literacy in learners who are deaf-blind;

F) the basic principles of orientation and mobility for learners who are deaf-blind; and

G) curricula specific to or adapted for learners who are deaf-blind.

2) Performance – The competent deaf-blind specialist:

A) moves together (co-actively) with the learner in daily routines to establish body awareness and awareness of another person;

B) uses touch to make the learner aware of the learner's body and another's throughout functional and play activities;

C) provides opportunities for the learner to learn the functions of body parts;

D) provides opportunities for the learner's increased proprioceptive (feedback through muscles and body position) and kinesthetic (feedback through body movement) awareness during daily routines and planned activities;

E) provides opportunities for the learner to develop confidence by making choices;

F) provides the learner with opportunities for self-advocacy;

G) provides opportunities for the learner to learn from naturally occurring successes and failures;

H) creates opportunities for the learner to initiate conversations with or without words around topics of interest;

I) uses appropriate distance between the learner and the communication partner;

J) determines optimal position of the learner in relation to others that will enhance participation in group activities;

K) maintains interaction at eye level of the learner who is deaf-blind or makes adjustments to accommodate for specific visual conditions;

L) uses touch cues to initiate and terminate interactions;

M) interprets for the learner information about other interactions and events taking place around the learner;

N) reduces or eliminates unnecessary visual, auditory and tactile clutter;

O) develops object communication systems for the learner to use receptively and expressively;

P) uses formal sign language systems, both visually and tactually;

Q) uses alphabet systems, both tactually and visually;

R) uses the Tadoma method of speech reading;

S) selects and prioritizes receptive and expressive vocabulary that is meaningful and motivating to the learner;

T) responds to the learner's non-linguistic forms of communication while fostering opportunities to move to linguistic levels;

U) develops strategies to encourage the learner to use multiple non-linguistic and linguistic modes/forms of communications depending upon the environment and communications partners;

V) selects and prioritizes receptive and expressive vocabulary that is meaningful and motivating to the learner;

W) models the use of vocabulary words that are meaningful and motivating to the learner;

X) provides vocabulary for the learner to understand and express abstract concepts;

Y) provides opportunities to use and expand vocabulary through frequent and natural conversations;

Z) organizes vocabulary into syntax;

AA) modifies existing reading materials to adjust for the learner's language level and reading media;

BB) designs and makes non-technological communication devices that are appropriate to the learner's needs;

CC) selects or adapts assistive technological devices as tools for communication;

DD) provides opportunities for the learner to use augmentative communication devices in a variety of environments and with a variety of communication partners;

EE) provides opportunities and means for the learner to communicate within and about activities and places;

FF) uses naturally occurring events for the learner to use and practice communication skills;

GG) recommends appropriate positions to optimize visual functioning;

HH) recommends appropriate positions to optimize auditory functioning;

II) implements strategies to accommodate for and to improve the learner's visual and auditory functioning based upon assessment results;

JJ) assists the learner in organizing information about space and objects within space;

KK) models ways for the learner to move in and through space;

LL) provides opportunities for the learner to move outward in progressively larger spaces;

MM) adapts orientation and mobility techniques according to the learner's communication skills and ability to use residual hearing and vision;

NN) provides opportunities for the learner who is deaf-blind and has physical disabilities to learn orientation and mobility skills;

OO) teaches the learner to attend to kinesthetic and proprioceptive variables to inform the learner about how the learner's body relates to the environment;

PP) makes appropriate visual adaptations to accommodate for specific visual impairments;

QQ) uses and adapts appropriate devices and appliances;

RR) based upon clinical and functional assessments, uses and creates materials that will maximize the learner's use of vision, hearing, and touch in specific situations to meet the learner's visual, auditory, and tactile needs;

SS) incorporates literacy as part of the everyday activities according to the learner's experiences and interests; and

TT) uses touch to accommodate for lack or distortion of visual and auditory information.

g) Collaborative Relationships – The competent deaf-blind specialist uses knowledge of effective written, verbal, and visual communication techniques to foster active inquiry, collaboration, and supportive interaction among professionals, parents, paraprofessional educators, and students.

1) Knowledge – The competent deafblind specialist understands:

A) the potential impact of deafblindness upon attachment/bonding between learners who are deaf-blind and their primary caregivers;

B) effective use of communication support personnel to assure that the learner who is deaf-blind has optimal access to opportunities for receptive and expressive communication;

C) resources that provide technical assistance at the local, State, and national levels related to the field of deafblindness; and

D) resources of support services for learners who are deaf-blind and their families.

2) Performance – The competent deaf-blind specialist:

A) assesses and explains the effects of combined vision and hearing losses upon relationships between the learner and the learner's primary caregiver;

B) provides opportunities for the learner to learn about family relationships and relationships to others;

C) provides opportunities for the learner to understand the role of him/herself and others in the contexts of specific groups;

D) provides opportunities for the learner to meet and establish relationships with other people who are deaf-blind;

E) exchanges information about the learner's communication style/abilities with others to ensure consistency of interpretation and use of the learner's communication repertoire;

F) teaches significant peers and adults to communicate effectively with the learner who is deaf-blind;

G) exchanges ongoing communication assessment findings with others to develop effective strategies that will enhance the learner's communication abilities;

H) identifies the responsibilities and the roles of the communication support personnel according to the needs of the learner and environments;

I) interprets for other team members clinical and functional information regarding the learner's vision and hearing;

J) recommends appropriate referrals to low-vision and hearing specialists in collaboration with other team members to assess the need for assistive devices;

K) collaborates with orientation and mobility specialists and other appropriate specialists in adapting strategies to encourage the learner to move safely and independently;

L) consults and collaborates with others who provide care, education, and adult services to people who are deaf-blind;

M) provides information and education to team members (including families) about the uniqueness of the disability of deafblindness; and

N) provides training to caregivers, school personnel, and peers that will improve the quality of their interactions/relationships with the learner who is deaf-blind.

h) Professional Conduct and Leadership – The competent deaf-blind specialist understands teaching as a profession, maintains standards of professional conduct, and provides leadership to improve students' learning and well-being.

1) Knowledge – The competent deaf-blind specialist meets the standards set forth in Section 28.100(h)(1).

2) Performance – The competent deaf-blind specialist advocates for learners who are deaf-blind and their families to obtain high-quality services ranging from early intervention to transition to adult services.

i) Reflection and Professional Growth – The competent deaf-blind specialist is a reflective practitioner who continually evaluates how choices and actions affect students, parents, and other professionals in the learning community and actively seeks opportunities to grow professionally. The competent deaf-blind specialist meets the standards set forth in Section 28.100(i).

(Source: Amended at 46 Ill. Reg. 6346, effective April 11, 2022)