



West Virginia Commission for the Deaf and Hard of Hearing

November 14, 2025, Board Meeting Minutes

Meeting Location: 100 Dee Drive, Charleston, WV 25311, Zoom for virtual attendees

Commission Members Present: John Burdette, Jennifer Casto, Mary Anne Clendenin, Christine Firkins, Roy Forman, Nancy Gillispie, Gloria Hollen, Paul See, Dawn Embry-King, Meegan Wolfe, Crystal Facemire, Angela Wilson:

Commission Members Absent:

Regina Woodcock: Director of West Virginia Birth to Three

Mekell Golden: Designee for Dr. Matthew Christinasen, Commissioner of the Bureau for Public Health

Rae Bates: Designee for Dr. Arvin Singn, Cabinet Secretary of the West Virginia Department of Health

Commission Staff Present:

Executive Director, Erik Essington, Ph.D., Assistant to the Director, Gwen Bryant

Community Members Present:

Gail Swan, Christopher Mick, Jean Marie Hunter-Suddreth

Interpreters:

Johanna Crowley, Jody Belcher

Meeting Documents: Meeting Agenda, Staff Report, August 7th Quarterly Board Meeting Minutes Draft

| AGENDA TOPIC | FACILITATOR | DISCUSSION/ACTIVITY | ACTION ITEMS |
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| Call to Order | Paul See | The meeting was called to order at 10:03 a.m., followed by the reading of the WVCDHH Mission Statement. | |
| Introductions | Paul See | Each attendee introduced themselves and provided a brief description of their role within the Commission or the community. | |
| Public Comments | Paul See | <p>Opened the floor for public comment:</p> <ul style="list-style-type: none"> Christopher Mick stated he was very disappointed in the WVCDHH for not responding to community members reaching out for assistance. He stated that a family reached out to him concerning an issue that the Commission did not respond to. He also shared that he did not like Dr. Essington's behavior at the last WVAD Board meeting. Gail Swan shared that she was looking for a place to live in West Virginia but has no support and hopes the WVCDHH can find support for deaf and hard of hearing senior citizens. | |

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| <p>Staff Report</p> | <p>Erik Essington Gwen Bryant</p> | <p>A summary of the staff report covering the period of August 7, 2025, through November 14, 2025, was presented. Comments and questions were as follows:</p> <ul style="list-style-type: none"> • Staff: Dr. Essington shared that he has been working with Justin Cherry, Deputy Chief Human Resources Officer, for Shared Administration Human Resource Management, for quite some time to move Gwen Bryant to the Project Director position and create two part-time/temporary positions to support the needs of the Commission. • Data System: August 13, 2025, WVCDHH staff met with Andrew Neely, Shared Administration Management Information Services, to initiate the development of a data system to improve Commission workflow, enable accurate, comprehensive collection program data, and create online operational processes for the West Virginia Registry of Interpreters. • Interpreter Assessment: Community – Dr. Essington shared that attempts to coordinate with BEI (Board for Evaluation of Interpreters) failed due lack of communication follow through from the BEI representative. But shared that the Commission had been approved as a Center for the Assessment of Sign Language Interpretation (CASLI) Test Administrator Site. Next steps: <ul style="list-style-type: none"> - Beta test - Complete the site readiness checklist - Submit documentation to CASLI for final approval. <p>Dr. Essington shared that maybe the Commission could develop a training mentor program to support individuals preparing for the CASLI.</p> <p>Jennifer Casto clarified that CASLI is not a test, it is a test administrator for the NIC. Jennifer also shared that National ASL certification requires a bachelor’s degree and experience.</p> <p>Dr. Essington shared that he hoped that Charleston University will help support a foundation for national certification</p> <p>John asked what test individuals can take for community testing? Dr. Essington reclarified that the VQAS was out.</p> <p>Paul asked what do we do to help right now, to support interpreters in WV?</p> | |
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| | | <p>Dr. Essington shared that WV has many interpreters with training and experience. The Commission can help them go through the process of national testing, but the interpreters must be willing to put in the work.</p> <p>Jennifer shared that she reviewed the West Virginia Registry of Interpreters, showing 25 individuals with national certification. She talked about past efforts to establish a state RID chapter. Jennifer also said that the Commission needs to create a plan to establish a minimum standard to interpret, WV quality assurance assessment.</p> <p>Dr. Essington said that the Commission can do that—it will be a two-year certification.</p> <p>Educational - the Commission continues to work with Brenda Hall and Janelle St. Martin to provide local EIPA test administration. Dr. Essington shared that while proctor fees are waived, the test must still be paid for and that he would like to find support for funding the tests.</p> <p>Mary Anne Clendenin commented that the WVSDDB is also an EIPA test administrative site, and they do not require a test proctor fee.</p> <ul style="list-style-type: none">• WVCDHH Education, Interpreting Services, and Legislation advisory committees - Gwen Bryant shared a recap of the focus of each committee<ul style="list-style-type: none">Educational – Need for improved support for early intervention for DHH children.Interpreting Services – Update WVRI Directory and application and address registry requirements for Sign Support Specialist and Restricted Educational Sign Language interpreter. <p>Mary Anne Clendenin shared that she, Dr. Robert Hagerman (Director WVDE Certification), Debbie Adams (WVDE DeafBlind Coordinator), Erika Klose (Director of Academic Support) and Sheila Paitsel (WVDE Director of Special Education), are working on the information request submitted concerning Sign Support Specialist qualifications and position code for Restricted Educational Sign Language Interpreter.</p> <p>Legislation – Looking at needed legislation such as Deaf Child’s Bill of Rights, following proposed legislation related to DHH population, reviewing current legislation for needed updates/amendments.</p> <p>John Burdette thanked the Commission for establishing the committees but shared that the appropriate individuals with the right experience need to be in place.</p> | |
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| | | <p>Dr. Essington shared that the committees are currently collecting subject data. Once action plans are created the Commission will ensure those needed</p> <ul style="list-style-type: none"> • Current Budget Report (FY2026) – Provided board with budget report for the reporting period. • SSA Virtual Workshops - Gloria expressed concern about the challenges of virtual SSA workshops, noting that many Deaf participants rely on visual communication and may find it difficult to focus on small screens for extended periods. She suggested weighing the pros and cons of virtual versus in-person workshops to determine what best serves participants. <p>Paul commented that while the presentations are valuable, it is difficult to view both PowerPoint and participants during virtual sessions. John recommended providing PowerPoint to attendees in advance rather than displaying it during the workshop.</p> <p>Erik responded that copies of PowerPoint are available upon request and recognized Kimberly as an excellent resource. He added that the Commission works to ensure interpreters are visible during presentations. Kimberly noted that she is open to accommodating individuals who prefer to attend in person.</p> | |
| <p>Board Member/Agency Reports</p> | <p>Paul See</p> | <ul style="list-style-type: none"> • WVSDB Outreach Update - Mary Anne shared an update from the Outreach Center, noting that the Center was established by the West Virginia Department of Education (WVDE) and has recently added two new staff members, including Jennifer Casto. <p>Goals include:</p> <ul style="list-style-type: none"> • Address low-incidence staff shortages in counties • Provide statewide services and resources • Support DHH/VI education/intervention statewide <p>Current projects include assisting with the enrollment of early intervention providers and supporting mentorship activities led by Jennifer. Mary Anne also shared links to EIPA workshops offered by Boys Town and said she would share the QR code and link to the WVSDB Outreach request form.</p> <p>Meegan shared that she has utilized the outreach center frequently and has been pleased with the support she was given.</p> | |

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| | | <ul style="list-style-type: none"> • WVACEEC – Dawn provided an update on the West Virginia Advisory Council on the Education of Exceptional Children (WVACEEC), noting the recent creation of brochures and business cards, which have greatly improved communication and outreach. The brochure includes information about the Council’s purpose and membership, along with a QR code allowing parents and community members to complete a survey on available services. Upon submission, respondents receive information on Policy 2419 and other relevant supports. Dawn added that when parents share concerns through the survey, those issues are reviewed during upcoming meetings, and she follows up directly with the families afterward. • Gloria shared that the community member, Gail, has been homeless for about three years. She’s on a waiting lists for a place to live, but they long. She said that she invited Gail into her home and stated there are just not enough resources for DHH. | |
| Old Business | Paul | <p>Deaf awareness Day at the Capitol Jennifer shared that the Commission needs to reach out to Melanie Hesse to collaborate events.</p> <p>Gwen suggested the Commission man two tables for sign in purposes to gather data on the number and background of participants attending the annual event and asked for suggestions on enhancing the event.</p> <p>Suggestions received: Senior Services, HUD, and Shelters across the State</p> <p>Paul asked how many vendors we had last year.</p> | |
| New Business | Paul | <p>Community Town Hall on Healthcare Nancy suggested to work with all resources to educate families on Cis, Deaf culture, etc. She also said that previously Ski Hi would share information with families on modes of communication. Many working for Ski Hi were individuals with DHH children themselves, which helped families; having walked the walk.</p> <p>Meegan said that many families are given false hope and are not provided information on therapy and follow up once implanted. Suggested possibly working with insurance companies to require some counseling prior to CI implantation.</p> <p>Nancy shared that other states require families to complete counseling and shared that families are scared and just want their child to be normal. But there is a window of time for language access and families need to know and understand that.</p> | |

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| | | <p>Dr. Essington shared that he and Gwen talk about this daily and shared that Marshall started a support group.</p> <p>Dr. Essington also shared that when a child is not successful at the L they are referred out but there is no follow up</p> <p>Dr. Firkins shared that NCDS – as a state vendor may be able to assist with the outreach to address those unmet needs. Psychologists can be beneficial to support the process.</p> <p>Paul shared that when newborn hearing screening test results shared with families, the information should not be presented in such a negative way. There needs to be a positive way to share information with the family.</p> <p>Nancy recommended that information and resources on support need to be provided at discharge. She shared a situation; the child was six years old, and the family was told if the child received implants, they would be fine in a year.</p> <p>Paul said it’s not about implantation or not, but families must be given all the information.</p> <p>Meegan shared her experience with newborn hearing screening. When her child did not pass, the nurse said, “it happens all the time.” She said she did not receive a letter or a call to guide her on next steps. She recommended that the test results be addressed by the pediatrician who signs off for discharge.</p> <p>Dr. Firkins said many people do not understand the importance of information and support for families when a child is identified as deaf or hard of hearing, that there needs to be a standard process for all to adhere to, including who/how appointments for comprehensive hearing evaluations prior to discharge.</p> <p>Dr. Essington shared that other states provide a caseworker that knows how to support a newly identified child and their family.</p> <p>Mary Anne shared that Ski Hi services through the WVSDB as a program were stopped, however, WVSDB maintained early interventionists enrolled in Birth to Three, who utilized the Ski Hi curriculum to work with families until recently.</p> <p>Dr. Essington asked if a vendor would have to go through WVSDB. Mary Anne stated they would have to go through Birth to Three.</p> | |
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| | | <p>Jennifer said that town halls must be driven by topics.</p> <p>Dr. Essington suggested they have a main topic with other related information to share.</p> <p>Jr. NAD Dr. Essington shared that the Commission was approved for Jr. NAD and asked if anyone on the board knew of an individual who might be instrumental in establishing the chapter.</p> <p>Paul shared that he hoped the Commission would have in-person interpretation for the next meeting. Dr. Essington said they have been requested.</p> <p>Hal Suddreth shared that its great that we are sharing and working together and putting the past behind us. He shared a little about his personal experience, first attending a hearing school, then a residential school. Learning language in a deaf school was much easier. He said that he had reached out to legislators to build a report, saying that it's important for them to understand our needs.</p> | |
| Adjournment | | Paul moved to adjourn the meeting, and Gloria seconded. All were in favor. The meeting was adjourned at 12:49 pm. | |