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ABSTRACT

Individualized education programs (IEPs) for handicapped students are discussed in terms of contents, legal requirements, monitoring, and their implications for physical education. The role of the physical educator in developing IEPs and in providing specially designed physical education services is considered. Approaches to assessment and evaluation, and establishment of annual and short term physical education goals are discussed in the conclusion. (CL)

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INDIVIDUALIZED EDUCATION PROGRAMS

IN THIS ISSUE

What Are Individualized Education Programs?	1
Individualized Planning Conferences	2
Monitoring Individualized Education Programs	4
Putting the Individual Into Education Programs	5
Appropriate Goals and Relevant Objectives	
Appropriate Goals and Relevant Objectives	
Wheels Are To Turn Not Rediscover	
The Least Restrictive Alternative	
A Single Assessment Device Won't Suffice	
Physical Education in Individualized Education Programs	7
Physical Educators and Individualized Education Programs	8
Specially Designed Physical Education Services	9
Evaluation and Assessment	10
Annual Physical Education Goals	11
Short Term Physical Education Instructional Goals	12
Summary	12
Selected Resources	14

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INDIVIDUALIZED EDUCATION PROGRAMS

Teachers must really believe that the child rather than the curriculum should be the center of the school.

Among several key provisions in the Education for All Handicapped Children Act (P.L. 94-142) is the stipulation that as part of a free appropriate education guaranteed every handicapped child, an *individualized education program* must be developed and implemented for every child receiving special education and related services. Since *instruction in physical education* is a defined part of special education under P.L. 94-142, it is logical that physical education must be a part of the individualized education program for every handicapped child receiving special education and related services. Therefore, it is vital that all physical educators be conversant with provisions of both the law and its rules and regulations as related to individualized education programs, they must also be knowledgeable of ways to develop and implement individualized educational programs. Among many questions being asked about individualized education programs are --

- . . . What are they?
- . . . For whom must they be developed?
- . . . When do they become effective?
- . . . Who is responsible for developing and implementing them?
- . . . What must they contain?
- . . . How are they evaluated?

What Are Individualized Education Programs?

An *individualized education program* is a written statement that is the key provision for assuring a free appropriate public education for every handicapped child. This provision applies to every handicapped child receiving special education and related services supported by public education funds. Handicapped children placed in or referred to private schools or facilities by a public agency or enrolled by that agency in parochial or other private schools are considered to be benefiting from special education and related services from a public agency and, therefore, are covered by these provisions. These provisions also apply to all public agencies including departments of mental health, mental retardation, developmental disabilities, and welfare. Receiving special education does not simply apply to children in special classes but includes those receiving services of a resource teacher several hours a week or obtaining any other form of specially designed instruction.

On October 1, 1977 and at the beginning of each school year thereafter each public agency shall have in effect an individualized education program for every handicapped child receiving special education from that agency. Each child's individualized education program must be reviewed and revised as needed at least once a year. Even though an individualized education program must be in effect at the beginning of every school year after the 1977-78 school year, review and revisions can be made at anytime during a school year. In this way personnel responsible for a large number of children receiving special education services can schedule review meetings throughout the year and do not have to deal with them all in a short period of time.

Individualized Planning Conferences

Every child receiving special education services prior to October 1, 1977, should now have an individualized education program based on a planning conference held prior to that date. Any child identified after October 1, 1977, and felt in need of special education services must be processed according to provisions of the law if these services including an individualized education program, are to be provided under P.L. 94-142. The following steps must be followed in this process --

- Identify child on the basis of a defined handicapping condition and according to priorities specified in the law--i.e., children not receiving any educational services or those not benefiting from full services.
- Refer the child according to state procedures for assessment and evaluation.
- Assess the child to determine levels of function in educational, psychological, medical, sociological, and adaptive behavior areas.
- Determine eligibility of the child for special education services by eligibility committee. Once a child's eligibility has been determined, an individualized planning conference must be convened within thirty days.
- Convene the individualized planning conference and initiate the process for developing and implementing an individualized education program for the child.

Parents of the child must be informed of and give approval before the assessment process starts. In addition, parents must be a part of the individualized planning conference and approve the individualized education program as well as types of placements for their child--i.e., regular, resource, or special classes or combinations thereof. By statute, the following individuals must take place in individualized planning conferences--

- A representative of the public agency other than the child's teacher who is qualified to provide or supervise the provision of special education (school principals are so qualified).
- The child's teacher. This could be the child's special education teacher, a regular teacher or one qualified to provide education in the type of program in which the child may be placed. Whether a child is or is not currently in special education will affect decisions about teachers taking part in this conference. Nothing prohibits more than one teacher from taking part in these planning conferences. Logic dictates that the physical education teacher should be the one participating in the individualized planning conference when children need only specially designed physical education.
- One or both of the child's parents.
- The child where appropriate.
- Other individuals at the discretion of the parent or agency.

When a handicapped child is assessed for the first time, the public agency shall insure that a member of the evaluation team or a representative of the public agency, the child's teacher, or some other person knowledgeable about the assessment procedure used with the child and familiar with results of the evaluation participates in the planning conference. In this way individuals responsible for developing the individualized education program will have necessary information about the child so that programs are truly individualized.

Each public agency shall take steps to insure that one or both of the parents of the handicapped child are present at individualized planning conferences or are afforded the opportunity to participate. Agency responsibilities include--

- Notifying parents of the conference early enough to insure that they will have an opportunity to attend.
- Scheduling the conference at a mutually agreed on time and place.

If neither parent can attend, the public agency shall use other methods to insure parent participation including individual or conference telephone calls. A conference may be conducted without a parent in attendance if the public agency is unable to convince the parents that they should attend. In such instances the public agency must have a record of its attempts to arrange a mutually agreed on time and place including--

- Detailed records of telephone calls made or attempted and results of these calls.
- Copies of correspondence sent to the parents and any responses received.
- Detailed records of visits made to the parents home or place of employment and results of these visits.

It is also required to give a copy of the individualized education program to parents upon request. This should help to insure that parents are fully informed of the program for their child and assist them in participating in future conference on the individualized education program.

The *individualized education program* for each handicapped child must include--

- Statement of the child's present levels of educational performance. Although not now specified in the rules and regulations, performances in academic, social, motor/psychomotor, prevocational/vocational, self help and adaptive behavior areas should be considered for each child's individualized education program.
- Statement of annual goals including short term instructional objectives.
- Statement of specific special education and related services to be provided to the child and the extent to which the child will be able to participate in regular educational programs.
- Projected dates for initiation of services and the anticipated duration of the services.
- Appropriate objective criteria and evaluation procedures and schedules for determining on at least an annual basis whether short term instructional objectives are being achieved.

It should be noted that these provisions do not require that any agency, teacher, or other person be held accountable if a child does not achieve growth projected in the annual goals and objectives.

The very nature of the *individualized education program* requires some readjustment in one's thinking and approaches in dealing with handicapped children whether in the regular classroom, gymnasium, swimming pool, or on the playfield.

- In the past the procedure has been to *label* a child, *place* that child, and then *program* for the class. Often these programs had little if anything to do with needs of individual children in a class!
- Now the process is to *assess* each child's needs, *develop* the program for each child based on identified needs, and *place* the child according to his/her needs for each activity included in the individualized education program.

Put another way, an *evaluation* must be conducted which indicates that the child needs special education services. This evaluation is then followed by an *individualized planning conference* from which the *individualized education program* is developed, information about implementation is to be included. Complete reevaluation is only required at least every three years. However, the individualized planning committee must meet at least annually to review and revise each child's individualized education program.

Monitoring Individualized Education Programs

As each state education agency develops its plan for implementing the Education for All Handicapped Children Act specific attention will have to be given to guidelines and/or criteria for implementing individualized education programs. State guidelines and/or criteria will become bases for local education agencies to insure compliance as individualized education programs are developed and implemented for *each* child receiving special education and related services. Generally this process will be monitored at three levels --

- *The Bureau of Education for the Handicapped* is to make sure that state education agencies do what they say in their state plans.
- *State education agencies* are to make sure that local education agencies do what they say in their local plans.
- *Local education agencies* will use their own process to determine effectiveness of individualized education programs and the degree to which goals and objectives for individual children are achieved appropriately. Records will by necessity have to be made accessible to state education agencies as requested.

Certain conditions and criteria must be maintained throughout all steps and stages of these processes.

- *Assessment* must be non-discriminatory with more than one approach and instrument used; confidentiality of information and due process must be assured throughout all stages of the assessment process. Assessment must reflect aptitude and achievement and be completed before initial placement, transfer into or out of special education programs, or change of individualized education programs.
- *Individualized planning committee meetings* and *individualized education programs* must also guarantee confidentiality of information and due process assurances.
- *Implementation* should include such approaches as task analysis, instructional strategies, and must provide for at least annual review.

Many states have established their own procedures, forms, and formats for different stages in the process for developing and implementing individualized education programs. Even though specific differences do exist in these procedures throughout different states, a certain degree of consistency is found in the kinds of information requested and required. Local education agencies will naturally have to adapt to requirements of their particular state.

Among different kinds of forms and records that have been incorporated into state plans and therefore must be adapted and applied by local education agencies are --

- Referral forms,
- Parent permission forms for comprehensive evaluations
- Parent permission forms for placement
- Parent permission forms for change of educational program
- Total service plan forms
- Implementation instruction plan forms
- Annual review forms

- Access logs for management of student records
- Release forms for student records for use by other agencies (5)

Readers are referred to *Adapted Physical Education Guidelines: Theory and Practice for the Seventies and Eighties* (1) for discussion of various forms which are appropriate for and applicable to implementing individualized education programs.

Putting The Individual Into Education Programs

As individualized education programs are approached for any given student a number of factors must be considered if activities are to result in fulfillment of meaningful goals and relevant objectives for that student. For example --

- Appropriate goals and relevant objectives. An adolescent boy or young adult male with extremely poor gross motor ability and fine motor coordination who has little if any interest in or ability in recreational and leisure activities must be approached in terms of goals, objectives, and activities that are most appropriate and relevant for him. Despite poor gross motor performance, emphasizing recreational and leisure time skills seems more productive and relevant than undue emphasis on fundamental motor skills and basic movement activities for such an individual. It is imperative not to fall into the trap of going the route of the orthodox or traditional developmentalist. Goals and objectives and resultant activities must be selected on the basis of all relevant information about the participant. Situations such as this dictate maximum involvement of the participant him/herself in individualized planning conferences designed to develop and review individualized education programs.
- Appropriate and relevant activities. Activities and methods selected for programs involving severely and profoundly mentally retarded and multiply involved persons are too often based almost exclusively on mental ages of participants. Individuals substantially older chronologically but younger mentally than individuals with more consistent relationships between chronological and mental ages must *not* be looked upon as a homogeneous group. It is vital not to insult the intelligence, experience, and maturity of an individual by placing undue emphasis on a single trait such as mental age or specific handicapping condition. Making simple modifications often is all that is necessary. For example, *Swat Tag* is much more readily acceptable by and appropriate for adolescents and adults than *Drop-the-Handkerchief* or *Duck-Duck-Goose*.
- Wheels are to turn not rediscover. Existing sequences and progressions from many curriculum guides, publications, and special projects are organized in ways that contents can be applied when developing individualized education programs for specific students. Avoid taking time, exerting effort, and expending funds to develop materials that are readily available and accessible from other sources. Use existing items as a basis for individualizing instruction so that new energy can be put toward developing sequences and progressions in activities for which none now exist or to refine existing ones so that they can be better used to meet unique needs of students functioning at lower levels or with multiple conditions.

The least restrictive alternative. Emphasis in the Education for All Handicapped Children Act is upon educating children with their non-handicapped classmates in *least restrictive environments* to the maximum degree possible. As such, approaches that have been generally most readily accepted are those of non-categorical nature. Special and unique curricula have in most cases simply been applications of sound developmental programs to meet individual needs of particular individuals; simple modifications and adaptations have been made to meet individual needs of particular participants. Now more than ever there is a need to use regular progressions and sequences for individuals regardless of their handicapping conditions. However, it is vital in applying this process that (1) careful consideration and appropriate thought be given to adaptations and modifications of methods and devices so that individuals can take part with their classmates, (2) difficulties and problems individual students might have be anticipated so that progressions and sequences can be broken down further and methods developed to assist these students in overcoming such problems, (3) teachers/leaders recognize that no matter how specifically progressions and sequences are developed they will always have to be refined further and broken down more to meet needs of specific individuals, (4) curriculum and program progressions and sequences be looked upon simply as guides and not absolutes if true and meaningful individualization is to result, (5) teachers/leaders are also individuals with their interests, abilities, background, and hang-ups which affect ways and means given students will be approached while attacking specific problems and particular situations, (6) teachers/leaders are individuals working with individuals so that there is no one or magic formula to guarantee success, and (7) emphasis *must* be on the learner and learning, not the teacher and teaching.

A single assessment device won't suffice. It is extremely difficult if not impossible to determine an individual's real needs in any area, including motor, psychomotor, and physical domains on the basis of a single assessment device. For this reason the Education for All Handicapped Children Act requires various inputs for evaluation, which include formal and informal defices, quantitative and qualitative measures, objective and subjective data, and observational and anecdotal inputs as important parts of this assessment process. Many factors must be considered to determine *why* an individual is having difficulty with a particular movement, pattern, or skill. If true cause and effect relationships are not determined, chances for real and lasting success through any program are greatly reduced. In addition to not getting overly sophisticated, in determining *why* behavior is as it is, it is vital to recognize possible psychological, emotional, social, and intellectual factors contributing to a particular problem. Further, conditions and circumstances of a task greatly influence how a given task is performed under specific conditions.

Individualized education programs in general and for physical education in particular must be individualized in many different ways -

- Annual goals
- Short term instructional objectives
- Motivational techniques and procedures

- . Activities themselves
- . Methods and teaching strategies
- . Adaptations of equipment, methods, activities
- . Utilization of activity sequences and progressions
- . Assessment and evaluation strategies and techniques
- . Student interests
- . Student abilities
- . Class placement
- . Facilities and equipment
- . Opportunities for follow-up and use of activities

Physical Education in Individualized Education Programs

Since different individuals are providing different interpretations of the same rules and regulations, actual individualized education programs can be found with greatly differing amounts of detail relative to physical education. Some of these programs contain only the most basic of information; others go into considerable specifics. This is to be expected because of the individuals responsible for developing individualized education programs. For example, some individualized education programs --

- . *Do not deal with physical education at all.* It seems that such an approach is inconsistent and in conflict with the intent of the law and the letter of the rules and regulations. Since physical education is a defined part of special education, individualized education programs for children needing specially designed physical education programs must include such programs to be in compliance. However, children for whom no specially designed physical education program is needed do not require identification of physical education in their individualized education programs. *Whether included in the individualized education program or not, individualized planning committees are expected to review motor, physical, movement, and fitness needs of each child to determine whether or not specially designed physical education programs are required.*
- . *State that the student is to be scheduled in regular physical education activities throughout the year or for certain units or activities.* The generally accepted interpretation has been that for these aspects of physical education no specially designed program or approach is necessary and therefore does not need to be dealt with in these individualized education programs. For these students, following the regular physical education program is appropriate so that physical education or particular units or activities need not be detailed on the individualized education programs.
- . *Contain information about specially designed physical education program and activities.* As such, the student's present level of physical education performance should include (1) levels of physical and motor fitness, (2) performance in fundamental motor skills and patterns, and, (3) skills in aquatics, dance, individual and group games and lifetime sports.

It should be noted that use of physical education activities to attain general or specific social, intellectual, emotional, cognitive, or affective goals per se is not to be considered physical education under either the statute or the rules and regulations. As such, physical education is considered to be a legitimate need with its own goals and objectives and not simply a method or means to an end. Terms in the law and the rules and regulations such as "...instruction in physical education . . ." and "...development of physical and motor fitness, ..." and contents of Congressional testimony make it extremely clear that physical education is to be included so that children can realize benefits of attaining specific and definite physical, motor, psychomotor, and health goals and objectives. Certainly, we want to encourage extensive use of physical education, recreational and sport activities as *methods* and *means* for attaining specific cognitive and affective goals and objectives, such as improved self-confidence and self esteem. However, this process should be in addition to and not in place of planning and implementing physical educational and recreational activities for their own specific, unique, and necessary goals and objectives. These same principles and cautions must be exercised in differentiating therapies and physical education. Obviously, free play and recess do not meet the intent of individualized education programs for physical education. These philosophies and factors should be reflected in individualized education programs.

Physical Educators and Individualized Education Programs

Even though instruction in physical education is a defined part of special education that must be made available to every handicapped child receiving special education, some individuals and agencies are not considering physical education for individualized education programs. There seems little doubt that the law itself and the intent of Congress are such that when specially designed physical education is needed, it is to be a part of the individualized education program. However, regardless of interpretation in a given state or local education agency, it is vital that physical educators make sure physical education is included in each child's individualized education program when necessary and appropriate.

Physical educators must take the initiative in this process to --

- Insure that physical education is included in each child's individualized education program when necessary and appropriate.
- Volunteer input about physical and motor development along with information about social, emotional, and personal characteristics of a child so that this information is available to the team as it makes the individualized education program for that child.
- Be available to take part in individualized planning conferences and let it be known of personal interest in actively taking part in this process.
- Make sure that children who need specially designed physical education programs receive these services and are not placed in regular programs inappropriately.

Guard against children being programmed for specially designed physical education when their needs can be adequately and appropriately met in regular programs.

Remind members of the committee that every handicapped child does not need, want, or require specially designed physical education

Remind members of the committee that certain kinds and types of specially designed physical education programs can be carried out in regular physical education classes, some with additional support and resources and others without any supplementary assistance.

Keep foremost in mind the specific nature of learning in general and physical education in particular as individualized education programs are planned and implemented.

See that placement flexibility is maintained in individualized education programs so that a given child participates in regular physical education activities where possible and in specially designed programs as necessary.

Remember that individualized education and one-to-one learner-teacher relationships are *not* synonymous.

Specially Designed Physical Education Services

Specially designed physical education services can be provided in special, adapted, or regular physical education classes. For example --

Combined classes provide opportunities for students needing special assistance to be assigned right along with classmates needing no special provisions. Each student is assigned activities within the combined class on the basis of physical condition, individualized abilities, and personal limitations. Provisions of the individualized education program can be fulfilled in combined classes.

Dual classes provide students opportunities to take part in special physical education classes on certain days to carry out a specially designed program and to be in a regular class to participate with peers on other days.

Flexible plan provides students opportunities to be assigned special or different activities when they are not able to take part in regular activities or when specially designed physical education activities are prescribed.

Regardless of the organizational pattern or administrative structure, any handicapped child requiring specially designed physical education *must* have an individualized education program to assist in attaining specific goals and objectives for the time this type of program is in effect. Objective criteria and evaluation procedures must be scheduled for determining at least on an annual basis whether short term instructional objectives have been achieved.

Evaluation and Assessment

Because of stipulations and conditions contained in the law and the rules and regulations, two basic approaches to evaluation and assessment can be considered --

- *Standardized instruments* with normative data to assess individual progress and make comparisons with other children of comparable chronological age, handicapping condition, and related characteristics.
- *Criterion referenced approaches* in which progress is readily accessed and determined as students move from one level in a progression to the next. It would seem that this approach is more consistent with and in keeping with the intent of individualized education programs mandated by both the Education for All Handicapped Children Act (P.L. 94-142) and Section 504 of the Rehabilitation Act (P.L. 93-112).

Part and parcel of both preplacement assessment and ongoing evaluation procedures are informal techniques including observations, anecdotal records, case studies, and related approaches. These along with rating scales, self-evaluation and similar items are important adjunct devices for this total process.

Rules and regulations governing evaluation and assessment must be applied in all areas, including physical education. These stipulations require that tests and other evaluation materials --

- Be provided and administered in the child's native tongue or other mode of communication unless it is clearly not feasible to do so.
- Be validated for the specific purpose for which they are used.
- Be administered by trained personnel in conformance with instructions provided by their producer.
- Be tailored to assess specific areas of educational need and *not* merely those designed to provide a single general intelligence quotient.
- Be selected and administered so as best to ensure that when a test is administered to a child with impaired, sensory, manual, or speaking skills, test results accurately reflect the child's aptitude or achievement level or whatever other factors the test purports to measure rather than reflecting the child's impaired sensory, manual, or speaking skills except where skills are factors which the test purports to measure.
- Not be a single procedure as a single criterion for determining an appropriate educational program for a child.
- Be conducted by a multi-disciplinary team or group of persons including at least one teacher or other specialist with knowledge in the area of suspected disability.

Deal with all areas related to the suspected disability including where appropriate health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities.

Readers are referred to *Testing for Impaired, Disabled, and Handicapped Individuals* (8) for listings and descriptions of tests, evaluation devices, and other tools designed specifically for assessing levels of and progress in physical fitness, motor ability, perceptual-motor, developmental, and psychomotor function, other sections contain information about developmental profiles.

Annual Physical Education Goals

Representative of kinds of physical education annual goals that could appear in individualized education programs are --

- Learn to swim or to swim better
- Become an independent deep-water swimmer
- Enter a swimming pool independently
- Improve (attain a specific criterion for) general levels of physical fitness
- Improve (attain specific criteria for) specific elements of physical fitness such as balance, flexibility, strength, muscular endurance, speed, power, and cardiorespiratory endurance.
- Demonstrate proficiency in basic motor movements, patterns, and skills such as balance, walking, running, jumping, hopping, sliding, skipping, galloping, throwing, catching, swinging, swaying
- Demonstrate a functional catch
- Demonstrate ability to perform increasingly difficult and complex balance tasks
- Demonstrate ability to perform increasingly difficult and complex tasks and activities that reflect improved cardiorespiratory endurance.
- Demonstrate ability to perform increasingly difficult and complex activities showing greater levels of muscular endurance of arms and shoulders/abdominal region
- Demonstrate a mature throwing pattern
- Participate with classmates in appropriate play activities before/after school, during recess/free play periods
- Use one/two pieces of playground apparatus appropriately, safely, and independently
- Participate appropriately in (specified number) of relays

A sequel to this Practical Pointer on Individualized Education Programs is now being prepared. Contents will include case examples in which individualized education programs are based on assessment information that is provided. You can order this additional resource from AAHPER Publication Sales, 1201 16th Street, N.W., Washington, D. C. 20036. Order Practical Pointer No. 7, \$2.00.

Short Term Physical Education Instructional Goals

Short term instructional goals provide intermediate, measurable steps to determine the extent an individual progresses toward reaching specific annual goals. Generally, short term instructional goals are expressed in behavioral terms such as --

- Swim (specified number) yards using an acceptable crawl stroke.
- Move from one area of the pool to another while wearing a flotation device (using an inner tube).
- Perform (specified number) pull-ups.
- Increase performance in flexed-arm bar hang by (specified) percent in four weeks.
- Increase performance in sit-ups by (specified number) per week for (specified number) weeks.
- Improve time in 1500 meter run four seconds per two week over a period of two months after (specified number) weeks of preliminary training.
- Perform standing long jump of one foot three times out of four attempts for three consecutive days.
- Catch two out of three times a playground ball tossed at least ten feet high from a distance twenty feet from the student.

Readers are referred to the following sources for additional assistance and physical education materials designed specifically for impaired, disabled, and handicapped children and youth --

Project I CAN. Field Service Unit in Physical Education and Recreation for the Handicapped, Michigan State University, East Lansing, Michigan.

Project ACTIVE. Township of Ocean School District, Oakhurst, New Jersey.

Further assistance, information and materials can be obtained from AAHPER, Unit on Programs for the Handicapped, 1201 16th Street, N. W., Washington, D. C., 20036.

Summary

Physical education inclusions for individualized education programs come from a process which includes --

- Identification* of need for specially designed physical education programs based on medical referrals; screening tests to determine levels of or proficiency in physical fitness, gross motor skill, and fine motor performance; motor proficiency or motor ability tests; sports skills tests; and observation.
- Referral* for specially designed physical education programs from physical education teachers, classroom or special education teachers, other teacher specialists or resource teachers, personal or school physicians, school nurses, diagnostic specialists, parents or guardians.

Individual assessment and evaluation that shows student strengths and weaknesses, levels of physical fitness, motor performance, sports skills, leisure/recreational/lifetime sports skills.

Annual goals and short term objectives selected from areas such as gross motor, fine motor, physical fitness, sports skills, coordination, sportsmanship, knowledge, enjoyment, and confidence.

Individualized programs consisting of developmental exercises or activities, therapeutic exercises, adapted activities, modified or regular programs, table games, regular games, low organized activities, lead-up skills, sports.

*YOU CANNOT INDIVIDUALIZE IF YOU DO NOT
KNOW THE INDIVIDUAL*

AAHPER Update contains a regular column in which questions on P.L. 94-142 and Section 504 of the Rehabilitation Act are answered. Direct your questions to Consultant, Programs for the Handicapped, AAHPER, 1201 16th Street, N. W., Washington, D. C. 20036.

Selected Resources

1. Adapted Physical Education Guidelines. Theory and Practice for the Seventies and Eighties. Physical Education and Recreation for the Handicapped: Information and Research Utilization Center. Washington, D.C.: American Alliance for Health, Physical Education, and Recreation (1201 16th Street, N.W., 20036), June 1976, \$7.95.
2. Education of Handicapped Children. Implementation of Part B of the Education of the Handicapped Act. Federal Register (Vol. 42, No. 163), Tuesday, August 23, 1977.
3. Function of the Placement Committee in Special Education. A Resource Manual for Individualized Education Program. National Association of State Directors of Special Education, Washington, D.C.: The Association, (1201 16th Street, N.W. 20036), \$3.50.
4. IEP Man. National Association for State Directors of Special Education. Washington, D.C.: The Association, (1201 16th Street, N.W., 20036). Slide presentation, \$45.00.
5. Individualized Educational Programming (IEP). Judy A. Shrag. Austin, Texas: Learning Concepts (2501 North Lamar, 78705), 1977.
6. Individualized Educational Programming (IEP). A Child Study Team Process. Austin, Texas: Learning Concepts (2501 North Lamar, 78705). Complete workshop kit, \$49.95.
7. The Intent of the IEP. National Association of State Directors of Special Education. Washington, D.C.: The Association, (1201 16th Street, N.W., 20036), Slide presentation, \$45.00.
8. Testing for Impaired, Disabled, and Handicapped Individuals. Physical Education and Recreation for the Handicapped: Information and Research Utilization Center. Washington, D.C.: American Alliance for Health, Physical Education, and Recreation (1201 16th Street, N.W., 20036), 1975, \$3.95.