

ED215763

PROGRAM GUIDE FOR PRESCHOOL EXCEPTIONAL CHILDREN

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DEPARTMENT OF DEFENSE
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The purpose of this document is to provide administrators, regular education teachers, and teachers of the preschool exceptional child with guidelines for identifying and admitting youngsters into the preschool program. In addition, it is hoped that this manual will assist preschool special education teachers in the "hands-on" process of developing and implementing a preschool program for exceptional children.

Many thanks to those who contributed so much in sharing their ideas and preparing this manual:

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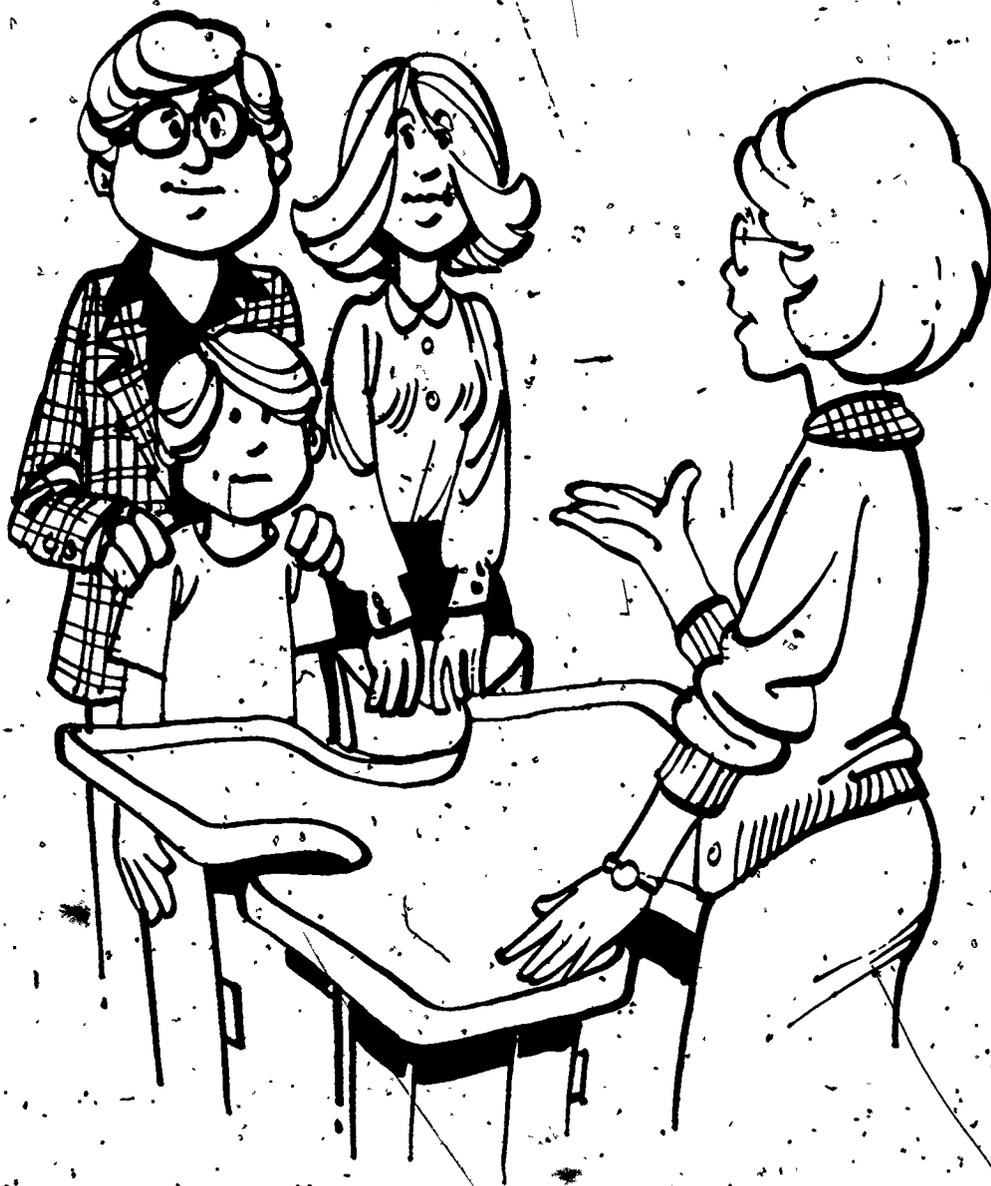
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CHAPTER I
ODS GUIDELINES FOR PRESCHOOL PROGRAMS
FOR EXCEPTIONAL CHILDREN



CHAPTER I
DODDS GUIDELINES FOR PRESCHOOL PROGRAMS
FOR EXCEPTIONAL CHILDREN

A. PURPOSE:

To provide an individual educational program for preschool exceptional children who, after identification and assessment by a multidisciplinary team, are determined to require early educational intervention. This early intervention seeks to remediate the child's developmental deficits while enhancing his/her strengths by providing an appropriate instructional program, ongoing evaluation, and continuous parental involvement.

The program is based upon the rationale that early intervention effectively encourages children to attain their potential. Early intervention includes specific educational methods and techniques which are designed to remediate developmental deficits and enhance developmental strengths.

A program goal is for each child to enter a regular school placement in the least restrictive environment that is appropriate for his/her individual needs.

B. DEFINITIONS OF TERMS USED IN THIS GUIDE

1. Special Education:

The term "special education," as defined by P.L. 94-142, means "specially designed instruction, at no cost to parents or guardians, to meet the unique needs of a handicapped child, including classroom instruction, instruction in physical education, home instruction, and instruction in hospitals and institutions."

2. Related Services:

The term "related services," as defined by P.L. 94-142, means "transportation, and such developmental, corrective, and other supportive services (including speech pathology and audiology, psychological services, physical and occupational therapy, recreation, and medical counseling services, except that such medical services shall be for diagnostic and evaluation purposes only) as may be required to assist a handicapped child to benefit from special education, and includes the early identification and assessment of handicapping conditions in children."

3. Preschool Multidisciplinary Team:

A group of trained professionals who work together in a diagnostic/prescriptive manner to identify, screen, assess, and evaluate the preschool exceptional child for the purpose of determining the most appropriate placement.

4. Case Study Committee (CSC)

The committee with responsibility to act in behalf of the preschool exceptional child when a multidisciplinary team is not available within the school.

5. Significant Developmental Delay:

Significant developmental delay is a marked difference between the child's chronological age and functional level, as determined by a multidisciplinary assessment team and parent.

6. Gross Motor:

The development of large muscle skills, such as running, walking, climbing, throwing, and sitting. Body perception, standing and moving balance, general body coordination, speed and agility, and endurance are skills included in this area.

7. Fine Motor:

The development of fine motor skills, such as bead stringing, cutting, and writing. Skills include small-muscle coordination, eye-hand coordination, finger dexterity, wrist flexibility, arm and hand steadiness, and finger speed.

8. Perceptual Development:

The quality of auditory and visual perception, which includes discrimination between likenesses and differences, figure-ground, visual closure, and spatial relations.

9. Language/Speech:

The systematic means of expressing and receiving information. Language skills include structural use, comprehension, attending, sound imitation, auditory reception, auditory memory, auditory association, word meaning, verbal expression, and manual expression. The intervention of speech therapy addresses needs in the areas of articulation, proficiency, pronunciation of phonemes, and the intelligibility of speech.

10. Self-Help:

The ability to function independently in meeting general physical needs. Some areas of self-help include dressing, toileting, and feeding.

11. Social/Emotional:

The ability to relate to the environment and to others in a positive and meaningful way. Social/emotional skills include the development of body awareness, self-concept, understanding others, relationships with others, and appropriate responses to environmental stimuli.

12. Sensory Impairments:

Impairments of vision or hearing, which require special materials, equipment and training to learn, communicate, and interact with the environment.

13. Physical Handicaps:

Impairments caused by congenital conditions, disease, and accidents or injuries, which require a special program, facilities, equipment, or services

14. Cognitive Development:

The development of thinking and reasoning skills, which include comprehension, classification, association and rule learning.

C. GOALS:

Goals of the preschool program for exceptional children are:

1. To provide special facilities, equipment, and personnel meeting the needs of the preschool exceptional child.
2. To insure that a multidisciplinary team will provide accurate and appropriate psychological, social, and physical assessment of the child.
3. To provide developmental readiness activities in the affective, psychomotor, and cognitive domains.
4. To provide the preschool exceptional child with opportunities to participate in the least restrictive environment.
5. To develop a parent-involvement program to share ideas, information, and techniques so that parents better understand their exceptional child.
6. To involve parents in the development and implementation of an appropriate educational program for their preschool exceptional child and to inform them of their rights of due process.
7. To cooperate with local medical personnel who provide referrals, direct treatment, parental counseling, and other services.
8. To involve community agencies in the provision of quality programs for preschool exceptional children.
9. To insure that Child Find activities are conducted for the purpose of locating and identifying all children between the ages of 0-6 who may need preschool special education services.
10. To provide in-service training opportunities for DoDDS personnel and community members, which will increase knowledge and skills regarding preschool exceptional children.

D. ELIGIBILITY

Youngsters with handicaps and/or significant developmental delays, who are between the ages of 3 and 6, are entitled to receive special educational and/or related services through the non-categorical preschool programs for exceptional children. Children whose third or sixth birthday falls before December 31 meet the age requirement for fall enrollment. The developmental delays and/or handicapping conditions may occur in one or more of the following areas:

1. Gross Motor
2. Fine Motor
3. Perceptual Development
4. Language/Speech
5. Cognitive Development
6. Social/Emotional
7. Sensory Impairment
8. Physical Handicap

E. SERVICE DELIVERY MODELS

1. School-Based:

- a. A school-based program provides youngsters with small and large group experiences which seek to meet their needs in the areas of gross and fine motor, language, cognitive development, and social and emotional development.
- b. A child's participation in a school-based program may include:
 1. Full-time preschool special education program, for not less than 2½ hours.
 2. Part-time preschool special education program with resources education in elementary school.
 3. Preschool special education program supplemented by participation in regular classroom or other community programs.
- c. Program Guidelines
 1. Preschool class hours are a minimum of 2½ hours per session and are generally half-day programs.
 2. Recommended class size is 1 teacher and 1 aide for 6-10 youngsters.

2. Home-Based Program

- a. Through a home-based program, an educator visits each child and family on a regular basis to deliver educational services. Parents are involved directly in the education of their preschool child. During the days when the home teacher is not present, parents serve as the child's teacher. Parents implement the prescribed curriculum, reinforce desired behaviors, and observe and record change.
- b. Parent/child home teaching programs are appropriate for handicapped infants or handicapped preschool children who are unable to attend a school-based program because of the nature of the handicapping condition, or when geographical distance from an existing preschool program prohibits attendance in an existing preschool special education class. This decision is made by the preschool multidisciplinary team.

F. PARENT INVOLVEMENT

A critical component in both of these models is parent involvement. DODDS personnel should seek to:

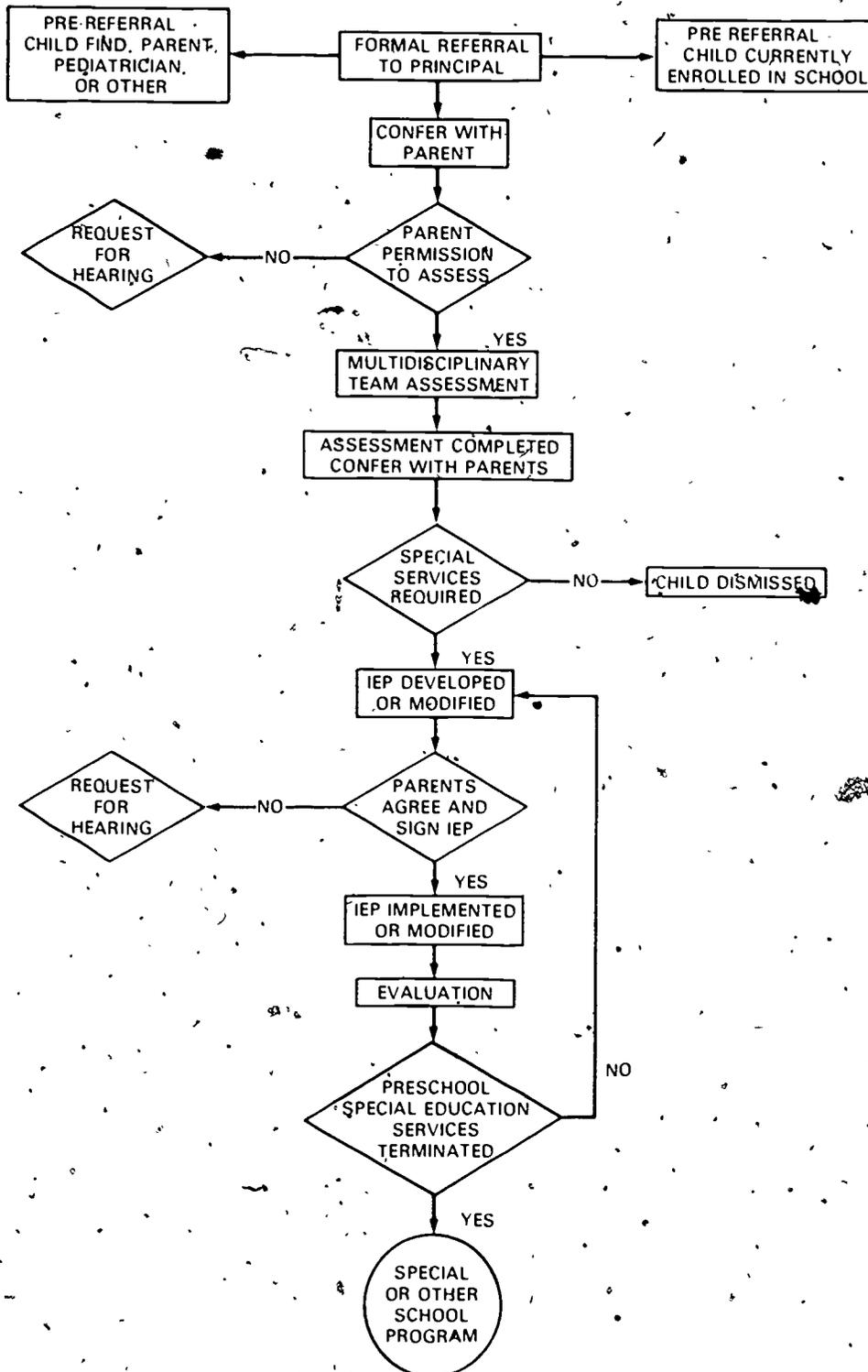
1. Provide social/emotional support in helping parents understand their preschool exceptional child.
2. Provide information concerning the child's ongoing instructional objectives and educational program.
3. Provide parent training related to specific techniques for skill development and stronger parent/child interactions. The above may include child rearing techniques and practices, methods for optimizing everyday experiences as learning situations, and techniques for reinforcing specific skills.

G. REFERRAL PROCEDURES

Once identified, youngsters must follow the referral procedures for the preschool program.

This is illustrated in the Referral Procedures Flowchart (Chart 1) and is described on the following pages.

CHART 1: REFERRAL PROCEDURE FLOWCHART



Pre-Referral: CHILD FIND, Parent, Pediatrician, or Other

Preschool exceptional children may be identified through the ongoing Child Find Program conducted by all schools in each region. The purpose of Child Find is to locate and identify all children between the ages of 0 and 6 who may be in need of special education services, whether or not they presently are enrolled in overseas dependents schools. Child Find consists of a massive awareness campaign, as well as screening activities. These activities will be conducted by the school in cooperation with other public or private agencies.

In addition to Child Find, other referrals may be initiated by the parent, family physician, or anyone with knowledge of, and concern for, the child. As a result of this type of referral, the local school will screen the youngsters to determine if further assessment and special services are needed.

Pre-Referral: Child Currently Enrolled in School

Children enrolled in a kindergarten program who require preschool special education services may be identified by the teacher. However, identification could be initiated by anyone with knowledge of, or concern for, the child.

Before a child is referred for special education, the teacher and parents should discuss possible modifications in the child's regular program. Available resources and consultants should be used to individualize instruction. If the child requires further diagnosis, a formal referral should be made.

Preschool Multidisciplinary Team Assessment

With parental consent, trained professionals on the preschool multidisciplinary diagnostic team will assess the child to determine the child's strengths and weaknesses and to prescribe the most appropriate educational placement. The preschool multidisciplinary team should include:

- One preschool education teacher
- A specialist with knowledge in the area of the suspected disability
- Child's teacher, when appropriate
- A person qualified to conduct individual diagnostic examinations (e.g., school psychologist, speech/language pathologist, remedial reading teacher)

- Pediatrician, when appropriate
- Counselor
- Social worker

Team members will coordinate testing so that the child does not repeat similar assessment items with different examiners.

In schools where a preschool special education program does not exist and, therefore, a preschool multidisciplinary team is unavailable, the CSC will be responsible for assessment activities and other placement procedures in behalf of the child. The CSC, when necessary should request the advice and assistance of the preschool special education teacher within the region.

Tests and other assessment materials must:

1. Be selected and administered so as not to be racially or culturally discriminatory.
2. Be administered in the language or other mode of communication appropriate to the child.
3. Have been validated for the specific purpose for which they are used.
4. Be administered by trained personnel and conform with the instructions provided by their producer.
5. Include devices tailored to assess specific areas of educational need and development. An IQ test alone is not sufficient.
6. Be selected to insure that when a test is administered to a student with impaired sensory, manual, or speaking skills, the results accurately reflect the student's aptitude or achievement level, rather than the student's impairment.
7. Not be the sole criterion for determining an appropriate educational program for a child.
8. Include, but not be limited to, the following:
 - a. Psychological assessment, including individually administered intelligence measures.
 - b. Assessment of adaptive behavior.
 - c. Medical and developmental history.

- d. Current physical status.
- e. Current functional level within a developmental sequence of cognitive, perceptual motor, and language abilities.
- f. Speech/hearing/language evaluation.
- g. Social/family history, including interview with child's parents in order to obtain the child's social and educational strengths and weaknesses in the home environment.

Assessment Completed Confer with Parents

Parents must be invited to attend the preschool multidisciplinary team meeting where assessment results are given and program recommendations are discussed. As a result of this meeting:

1. No services may be required.
2. Parents or school personnel may disagree with program recommendations and follow due process procedures in seeking a change in this decision.
3. Special education services may be required.

IEP Developed or Modified

If special education services are necessary, parents and the preschool multidisciplinary team will participate jointly in the development of the Individualized Education Program (IEP). The IEP is an agreement between parents and school personnel to provide educational and/or related services based on the identified needs of the student. The IEP must provide for placement of a child in the least restrictive environment most like his/her nonexceptional peers, while meeting his/her special needs. The individualized education program will include:

1. A statement of the present levels of educational performance of the student.
2. A statement of annual goals, including short-term instructional objectives.
3. A statement of specific educational and related services to be provided to the student and the extent to which the student will be able to participate in a regular educational program.
4. Projected date for initiation and anticipated duration of service.

5. Appropriate criteria and evaluation procedures to measure whether or not students meet short-term objectives.

The following personnel will participate in the development of the IEP:

1. An administrator
2. Early childhood special education teacher
3. One or both of the child's parents
4. At least one member of the preschool multidisciplinary assessment team

After receiving parents' approval, the special education and related services staff should aim to implement the individualized education program no later than 30 days after the child becomes eligible. Service cannot be initiated prior to the development of the IEP.

If appropriate services for a preschool exceptional child are not available in the local DoD dependents' school, the CSC may recommend a home-based program, contracting for services, a private school placement at no cost to the parent, or a compassionate reassignment for the child's parents.

Evaluation

The purposes of evaluation are:

1. To provide an ongoing, comprehensive, and complete record of a student's development, as measured by formal devices, informal devices, and observation.
2. To communicate a child's progress, achievement gains, and ongoing needs with parents and the preschool multidisciplinary team or CSC.
3. To provide a record which will assist in the ongoing instructional planning for the student.

Evaluation includes updating the individualized educational plan by identifying short-term objectives that have been met and specifying new developmentally sequenced objectives. This process should occur at least every 3 months and must include a final end-year report specifying recommended placement for the following year.

For children or students transferring outside the school system or to another school within DoDDS, upon approval of the child's parent, a written report must be forwarded to the new school. This narrative should include:

1. Specific description of the child's present level of functioning tied to the goals and instructional objectives of the written individualized educational program.

2. Comments about materials and methods used successfully to implement the child's instructional program.

Termination of Services

If, after evaluation, it appears that the youngster no longer needs the preschool special education program, the teacher should contact the CSC so that a less restrictive placement may be determined.

Special provisions should be made for a youngster whose sixth birthday is after December 31 of the upcoming school year and who may be in need of continual special education services. If an appropriate placement for the following year appears unavailable, the regional special education coordinator should be contacted.

H. RESOURCE EDUCATORS' PARTICIPATION IN PRESCHOOL SPECIAL EDUCATION PROGRAM

1. Resource educators directly involved in a preschool program for exceptional children include:
 - a. Preschool Special Education Teacher
 - b. Speech and Language Therapist
 - c. School Counselor
 - d. School Psychologist
 - e. Social Worker
 - f. Health Nurse
 - g. Physical Therapist
 - h. Occupational Therapist
2. Responsibilities common to all resource educators are to:
 - a. Identify and refer children.
 - b. Conduct assessment activities to:
 - (1) Determine functional levels in psychomotor, cognitive, and affective development.
 - (2) Examine individual learning styles through teacher interviews, parent interviews, and student observations.

- (3) Identify and utilize resources found in the home, school, and community environment in meeting needs of preschool exceptional children.
- c. Participate in the activities of the preschool multidisciplinary team or CSC, as appropriate.
 - d. Participate in the development of individualized instructional programs and seek to provide:
 - (1) A structured child-centered environment which is conducive to diagnostic/prescriptive teaching.
 - (2) Instruction and experiences geared to individual needs, which are determined through ongoing assessment and evaluation of the student.
 - (3) Opportunities for youngsters to receive instruction in the most appropriate learning environments.
 - e. Participate in ongoing progress reports and communicate achievement of students to parents and school personnel.
 - f. Participate, as appropriate, in routine and annual reviews of the individualized education program.
 - g. Coordinate with medical personnel for assessment, treatment, consultation, and parent/child counseling.
 - h. Determine other services which the child may need, such as further instruction, counseling, or support activities.
 - i. Train and supervise educational assistants (aides), when assigned.

RECOMMENDED LEVEL OF KNOWLEDGE FOR PERSONNEL WORKING WITH PRE-SCHOOL EXCEPTIONAL CHILDREN

	ADMINISTRATIVE										TEACHER										SUPPORT					
	REGIONAL ADVISORY BOARD FOR SP. ED	NATIONAL ADVISORY BOARD FOR SPECIAL EDUCATION	REGIONAL DIRECTOR	REGIONAL COORDINATOR FOR SPECIAL EDUCATION	EDUCATION PROGRAM MANAGER ASSISTANT PRINCIPAL	BUILDING PRINCIPAL	ODS COORDINATOR	ADMIN. SUPERVISOR OF SP. ED	EARLY CHILDHOOD/SPECIAL EDUCATION TEACHER	TEACHER AIDE	SCHOOL PSYCHOLOGIST	SPEECH/LANGUAGE CLINICIAN	OCCUPATIONAL THERAPIST/ PHYSICAL THERAPIST	SOCIAL WORKER	SCHOOL COUNSELOR	REGULAR EDUCATION TEACHER	PHYSICAL EDUCATION TEACHER	READING IMPROVEMENT SPECIALIST	NURSE	BUS DRIVER	BASE COMMANDER	HOSPITAL DIRECTOR	MEDICAL PERSONNEL	PARENT	REGIONAL ADVISORY BOARD FOR SP. ED.	
1. PROGRAM PURPOSE AND ELIGIBILITY	A	A	A	E	W	W	E	E	R	E	W	E	E	W	E	E	A	W	A	W	A	A	A	W	W	A
2. IDENTIFICATION PROCESS: CHILD FIND, SCHOOL REFERRALS	A	A	W	E	W	E	E	E	E	A	W	W	A	W	E	W	W	W	W			A	E	A		
3. ASSESSMENT AND IEP DEVELOPMENT	A	A	A	E			E	E	E	W	E	E	E	E	W	W	E	W					W	W		
4. SERVICE DELIVERY MODELS, METHODS AND MATERIALS	A	A	A		W	W	E	E	E	E	W	W	W	W	W	A	W	A	A				A	W		
5. EVALUATION			A	E	A	W	E	E	E	W	E	W	W	E	E	W	W	W					A	W		

A = AWARENESS
W = WORKING KNOWLEDGE
E = EXPERT



**CHAPTER 2.
CHILD FIND**

2

CHAPTER



WHAT IS CHILD FIND?

Child Find is an assertive educationally directed campaign to locate youngsters in need of early special education. It is an active, ongoing process of identifying, screening, and, if need be, assessing handicapped children so that they may receive a free, appropriate education. The handicapped children sought in this activity may be grouped as *unserved* (those not currently enrolled in school) and *underserved* (those enrolled in school, but not receiving an education appropriate to their special needs)



Child find is an activity required by P.L. 94-142 to locate handicapped children and youth from birth through age 21. While DoDDS is committed to developing a Preschool Handicapped Program for children 3-6, the Child Find activities (identification, screening, and assessment) include the ages 0-21 years. The children, ages 0-3, are identified for the purpose of assessing and projecting future special education program needs within the regions.



WHO IS RESPONSIBLE FOR CHILD FIND?



ROLE OF SPECIAL EDUCATION COORDINATOR, WASHINGTON

ODS, Washington, will notify all regional special education coordinators of Child Find procedures through DoD Instruction 1342.12, "Education of Handicapped Children in the DoD Dependents Schools," December 17, 1981. Through this instruction, all regional coordinators are responsible for Child Find in their respective regions. These results should be reported to the ODS special education coordinator, using the Child Find reporting documents.

ROLE OF REGIONAL SPECIAL EDUCATION COORDINATOR

The regional special education coordinator is responsible for establishing Child Find procedures throughout his/her region and assisting principals and others in implementing these special education activities. The regional special education coordinators' responsibilities include:

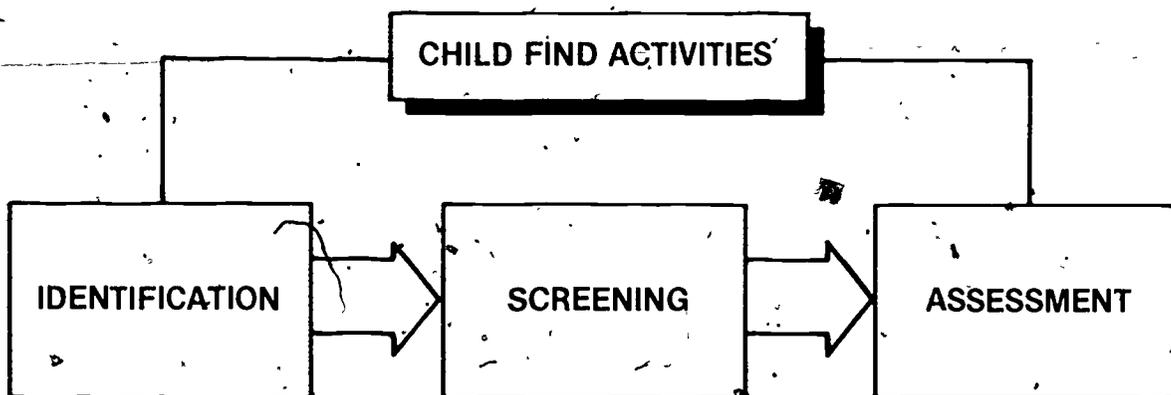
1. Assuring that Child Find is an ongoing process.
2. Designating a special time period with each respective regional director for a massive awareness campaign.
3. Providing each principal with information on how to conduct an effective, vigorous program.
4. Collecting Child Find data and reporting it accurately.
5. Publicizing Child Find by:
 - Contacting community services within his/her region.
 - Providing information to the Stars and Stripes, AFN Radio/TV, FEN Radio/TV, or any regional information service.
 - Contacting key personnel at Headquarters Command through visits or by letter. These might include the Surgeon General, chaplain, key medical personnel, and individuals in charge of community or social units (Army Community Service, Navy Family Community Service, Air Force Community Service).

ROLE OF LOCAL SCHOOL PRINCIPAL

Each school principal, his/her designee, or committee established by the principal, will be charged with conducting Child Find in each school's local community. The principal must insure that target groups of Child Find are addressed.

HOW?

- By informing the school faculty and parents of students presently enrolled in school that Child Find aims to locate the *underserved* child in need of special education.
- By providing a broad information campaign throughout the community to identify *unserved* children not enrolled in school. This massive information program prominently should project the value of early childhood intervention.
- By establishing a committee to conduct Child Find activities including the development of procedures for receiving and acting upon referrals.



WHAT IS CHILD IDENTIFICATION?

Child identification begins with a massive public awareness program to inform the community that handicapped young children are able to make educational gains which would be lost, or severely delayed, if the child had to wait until school age.

Most handicapped children should be identified and referred to school programs through Child Find activities.



ACTIVITIES FOR IDENTIFYING YOUNGSTERS:

- Notify school-faculty and parents of students presently enrolled of the purpose of Child Find.
- Review present performance of children with kindergarten teachers, nursery school teachers, etc.
- Discuss Child Find activities in parent/faculty bulletins and through parent/teacher groups.
- Make posters, and display them in schools, on bases, posts, and throughout communities: Main Exchange, "Four Seasons," Thrift Shop, Base Hotel, and commissary.
- Publicize Child Find activities through local community publication or media.
- Arrange for announcements at chapels.
- Provide house-to-house delivery of hand bills by Scouts or other youth groups.
- Contact any local club or civic organization for the purpose of describing Child Find: Army Community Service, Navy Family Community Service, Air Force Community Service, and Ombudsmen Council.

CHILD FIND DATA SHEET

A data form should be kept by the phone for immediate use when a referral is made. It is a fast, easy way of getting initial information on a child. It should include:

- a. Name of child and address, with name of sponsor.
- b. Telephone number.
- c. Disposition or status of child: determination of served, unserved, or under-served.
- d. Date.
- e. Designated school responsible for screening.

MacArthur Elementary School
Developmental Center

Referral Form

Name _____ Birthdate _____

Referred by _____ Date of Referral _____

Nature of Problem: _____

Pertinent Medical Information _____

School Child Currently Attends _____

Teacher _____

Major Language _____

Parents Name _____

Address for bus transportation _____

Duty Phone _____ Home Phone _____

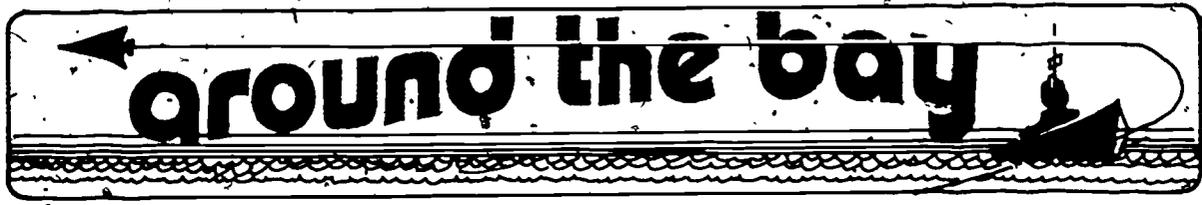
Deros Date _____

Sample Child Find Announcements

MARCH 14, 1980

SUBIC BAY NEWS

PAGE 5



DoD schools conduct survey of special education needs

The Department of Defense Schools system conducting a survey of all children, ages 3-21, special educational needs.

Special education is a general term which includes a wide range of specific learning disabilities such as mental retardation, emotional maladjustment, hearing and special impairment, as well as visual and other physical handicaps.

The survey is a preliminary step in helping identify the needs of all children, including the handicapped, in the community.

If you know of a handicapped person between the ages of 3 and 21, please call the Kalayaan Elementary School at 2-3236 2951/3311 between noon and 3 p.m. on April 2 through 4, or fill out the survey form provided below and drop it at the school office.

_____	_____
Name of Handicapped Individual	Age

Educational Handicap	
_____	_____
Name of Sponsor	Phone Number(s)



People
just like you

_____	_____
Name of Handicapped Individual	Age

Educational Handicap	

Name of Sponsor	

Duty Phone No./Home Phone No.	



**DEVELOPMENT
CENTER**

**STUTTGART ELEM/JR. HIGH SCHOOL
ROBINSON BARRACKS**

TEL: SM (2/21)—6044

SCREENING DATES FOR 1980:

JAN 21 MON
JAN 28 WED
JAN 25 FRI

FEB 20 WED
FEB 22 FRI

APR 21 MON
APR 23 WED
APR 25 FRI

SCREENING FOR PRE-SCHOOL HANDICAPPED PROGRAM (CURRENTLY IN OPERATION.) AS WELL AS FOR OTHER CATEGORIES OF MILD MODERATE SEVERE AND MULTIPLE HANDICAPS IN AGE CATEGORIES FROM 3-18 WILL BE CONDUCTED.

**Sample Child Find
Announcements**

THE EMOTIONAL

**Disability
Survey**

MUSCULAR DYSTROPHY...

DO YOU KNOW OF A HANDICAPPED PERSON BETWEEN THE AGES OF 3-21?

If so, Please have their sponsor or relative assist in a survey by calling
Kalayaan School at

23236 or 22951 or 23311

From 1200-1500

SPEECH DISORDERS

HEARING DISORDERS

WEDNESDAY
April 2

THURSDAY
April 3

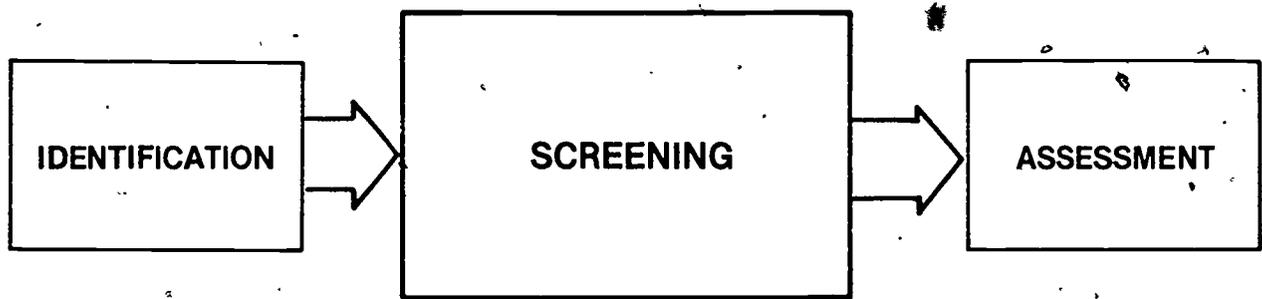
FRIDAY
April 4

or by filling in the back of this sheet and dropping it at the
Kalayaan Elementary School Office

Cerebral Palsy

LANGUAGE DISORDERS

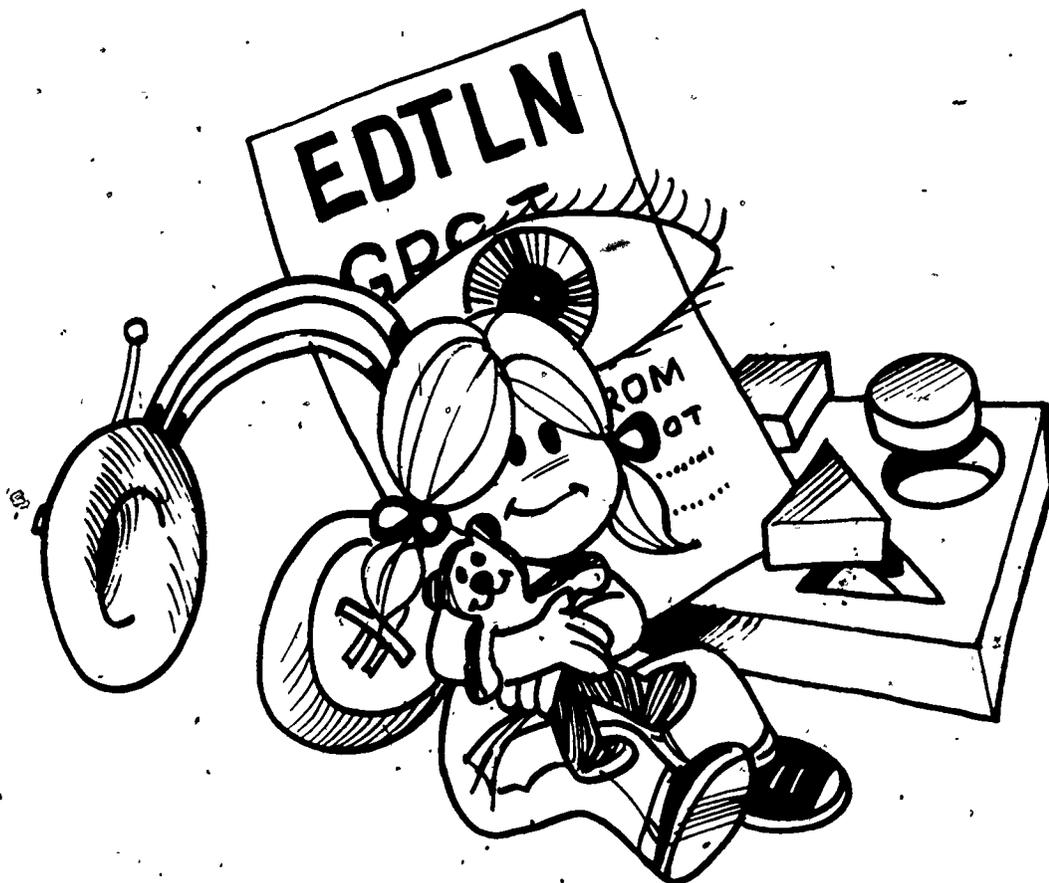
*Mentally
Retarded*



Screening is a quick, informal, information gathering period to determine if a child has special needs and/or to confirm the need for further assessment. It is not designed to be an in-depth identification of strengths and weaknesses in a child.

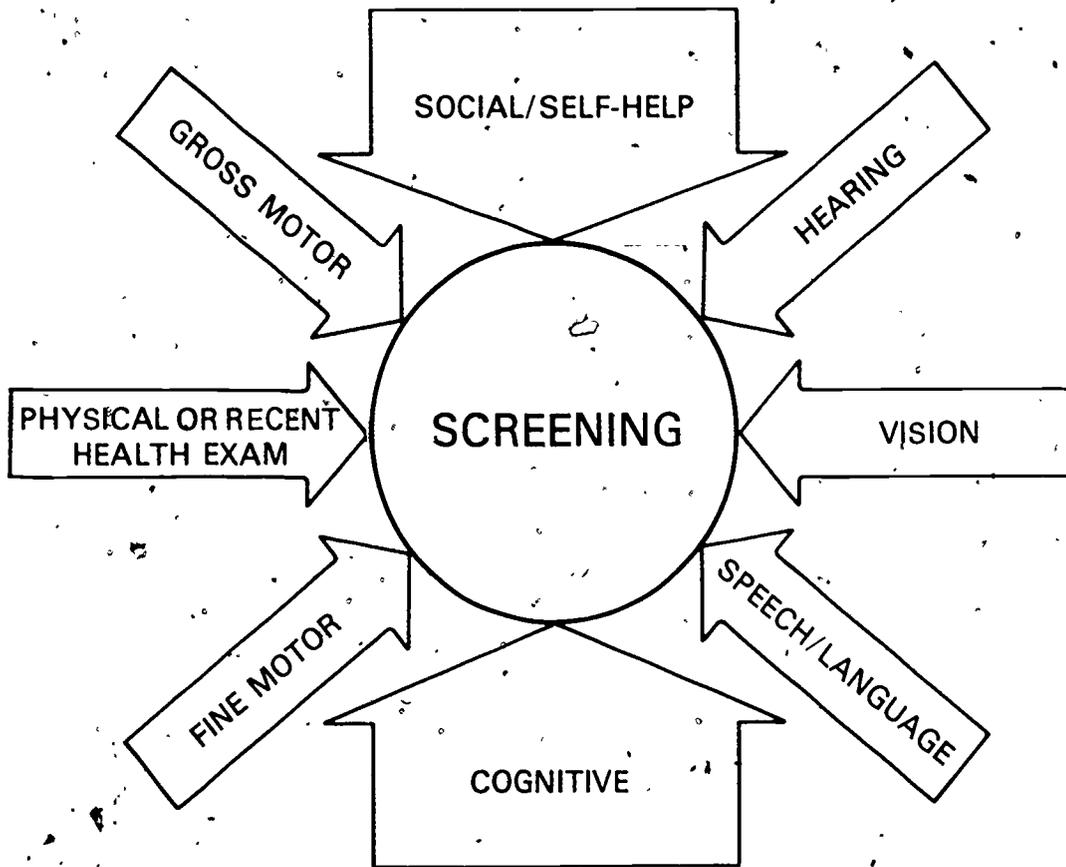
All identified children will be reported to local elementary schools where qualified staff will conduct screening activities.

Elementary schools in a "metro area," or near a school with a preschool program, may refer those identified to the preschool multidisciplinary team for screening and/or assessment. If a preschool resource is not nearby, then the Case Study Committee of the local elementary school will determine if that child has special educational needs.



WHAT AREAS ARE INCLUDED IN SCREENING?

Results from the screening process and the developmental history from parents and pediatricians should provide a profile in the following areas:



WHO MAY HELP WITH SCREENING?

- Preschool Special Education Teacher
- Members of Preschool Multidisciplinary Team or Case Study Committee
- School Nurse
- Speech Therapist
- Psychologist
- Social Worker
- School Administrator
- Paraprofessional Aides
- High School Students
- Junior High School Students

HOW DO YOU PLAN YOUR SCREENING TIME?

Preschool screening should not exceed one and one-half hours to assure test results are valid and reliable. The average 4-year-old can attend to directed activities for one-half to three-fourths of an hour. Screening results should give a balanced picture of the child's strengths and weaknesses in different learning and social areas. A parent questionnaire should be part of the screening and include a medical history, family history, physical growth and language milestones, social behavior, self-help skills, and preschool experiences.



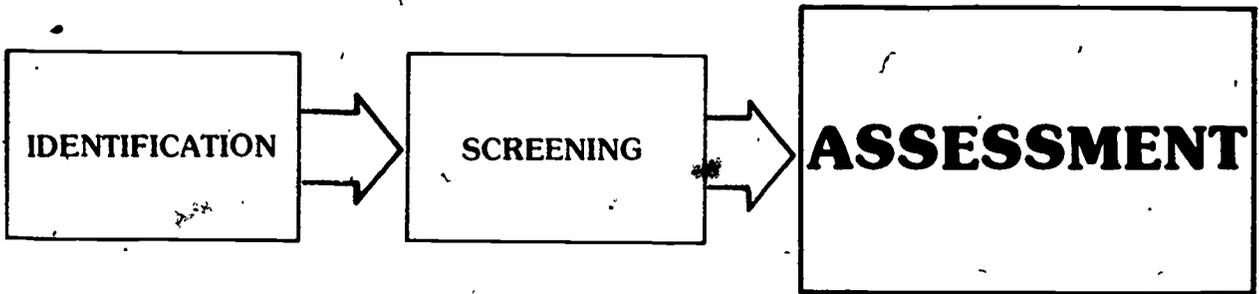
SAMPLE SCREENING SCHEDULE*

5 MINUTES	30-45 MINUTES	30 MINUTES	10 MINUTES	TOTAL
"HELLO"	SCREENING TASKS	OBSERVATION OF CHILD'S PLAY, INTERACTION WITH OTHER CHILDREN AND ADULTS	FINAL QUESTIONS	1-¼
WARM-UP	AUDIOMETRIC	SNACK TIME	AND	TO
BATHROOM	VISUAL	PARENT INTERVIEW	"GOOD-BYE"	1-½
		SCHOOL REGISTRATION PROCEDURES		HOURS
		INDICATIONS OF RESULTS OF SCREENING DATA		

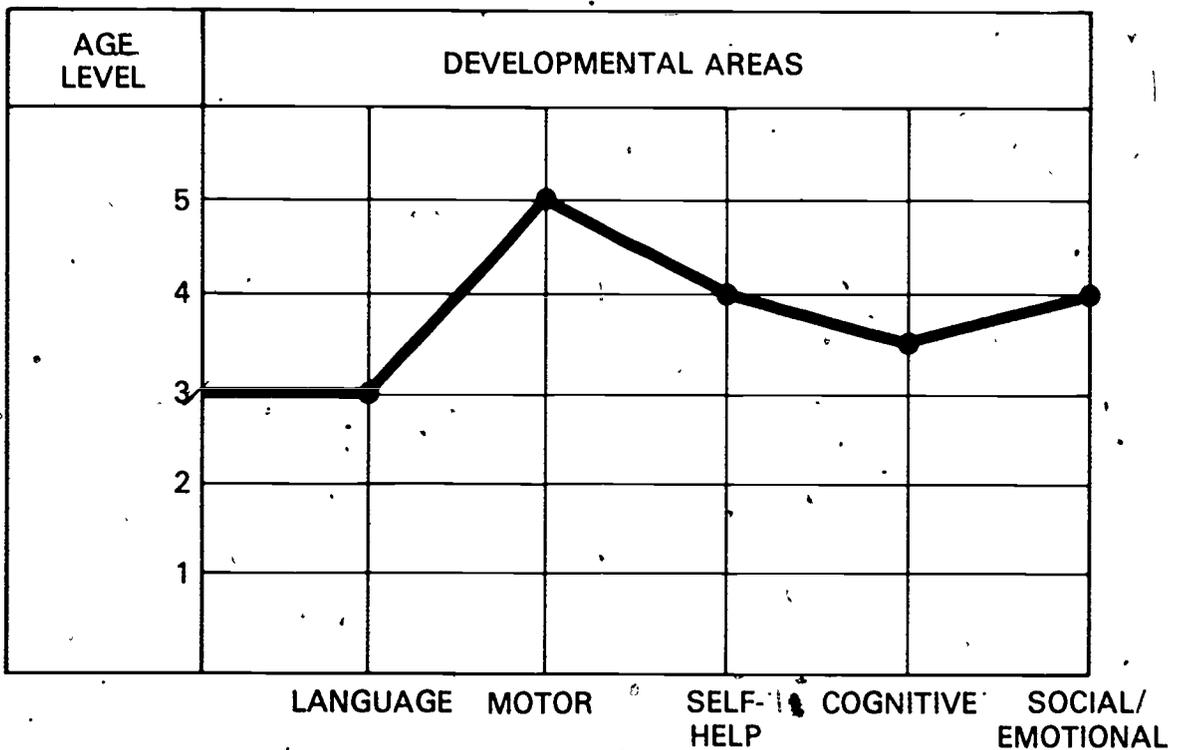
* ADAPTED FROM PROJECT MAINE STREAM OUTREACH PROGRAM

In many DoD schools, screening includes only a few children at a time and does not require a "screening day." To assure that the Child Find procedures (identification, screening, and assessment) are ongoing, several regions set aside a specific time each week/month when staff is available to screen, assess, and/or evaluate students.

Depending upon the referral and the severity of the handicapping condition, the screening process may be eliminated and a complete assessment conducted at that time.



The Federal Register (December 30, 1976) defined assessment as the "...procedures used to determine whether a child is handicapped and the nature and extent of the special education and related services the child needs. The term means procedures used selectively with an individual child and do not include basic tests administered to or procedures used with all children in a school, grade, or class."



The purpose of assessment is to get an accurate and complete picture of a child's performance and functional level in major developmental areas. Through assessment, the child's specific strengths and weaknesses are "pinpointed," and, as a result, an effective educational program may be developed. To be accurate, multiple techniques and devices should be used. Also, it is important that the child is in a comfortable and natural environment for assessment activities. For some children, this may be at home.

Specialized assessment tools include formal, as well as informal devices. Norm-referenced tests are formal, and compare a child's performance with other children of the same chronological age. These tests generally present a limited number of items, and may or may not be developmentally sequenced.

Another formal device, criterion-referenced tests, compare the performance of individual children against a set of standards relating to specific tasks. These standards are generally in developmental order and measure the child's functional level. This enables the examiner to compare the child's skill development from one point in time to another. They are useful tests in developing appropriate short-term objectives within a long-range developmental goal. Often publishers include follow-up curriculum ideas once the functional levels have been determined (Learning Accomplishment Profile, Portage Project Checklist).

OBSERVATION:

Classroom observations, an integral part of the assessment process, can verify formal assessment results. Informal observation provides an opportune time to learn about unique developmental skills and needs of a child, especially in social and emotional areas. Observation should occur both in the classroom and home environment. In this way the child can be seen globally:

- With peer group
- Within family unit
- In a structured setting
- In an open setting



CHECK YOURSELF BEFORE ASSESSING:

- Are materials appropriate for the child?
- Is he/she comfortable (e.g., chair the right size)?
- Is he/she alert?
- Do you have child's attention?
- Does he/she understand the directions?
- Does he/she need a "potty" break?
- Are you watching for signs that he/she is getting tired?

AFTER THE INITIAL ASSESSMENT:

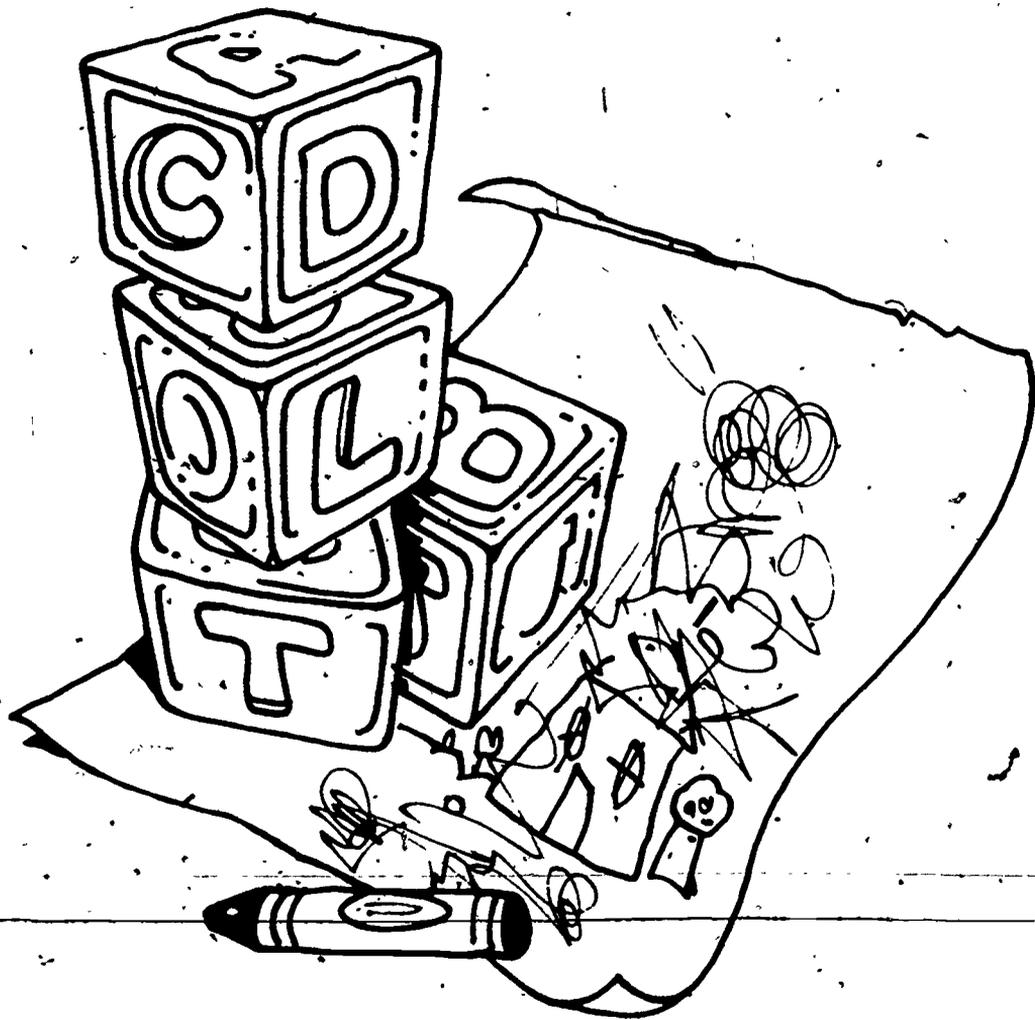
- "Pin-point" strengths and weaknesses of the child.
- Meet with other preschool multidisciplinary team members and parents to share findings.
- Identify long-term goals.
- Break tasks down, and determine short-term objectives.



Remember! Assessment is an ongoing process. It identifies what skills the child has mastered, what skills the child is currently learning, and, in fact, whether the child is acquiring new skills. Keep the assessment ongoing!!



SCREENING AND ASSESSMENT TOOLS



SCREENING AND ASSESSMENT TOOLS

The following are names and descriptions of instruments commonly used in pre-school screening and assessment programs. Prices are approximate. Most instruments are available "on approval" from the publisher. A more extensive "Early Childhood Assessment List" is available from the Northeast Regional Resources Center, 168 Bank Street, Hightstown, New Jersey, 08520, and in the book "Preschool Test Descriptions," Wayne Johnson, Charles C. Thomas Publishing Co. All summaries noted with an asterisk (*) were adapted from "A First Look Project Maine Stream Outreach Program."

These devices are coded as follows:

S = Screening

A = Assessment

(S,A) *AAMD Adaptive Behavior Scale*

Publisher: American Association On Mental Deficiency
5101 Wisconsin Avenue
Washington, D.C. 20016

Age range: Adult

Price: \$7.00 Manual
\$1.00 Test Booklet

This test for the profoundly to mildly handicapped child may be used for assessment and individual program planning and evaluation. The test has two parts: Part 1 is a checklist of sequential developmental areas, including such areas as physical development, economic activity, language development, numbers and time, etc. Items in Part 2 are rated according to frequency of occurrence in antisocial behaviors, including rebellion and self-abuse.

(S) *ABC Inventory* (N. Adair, G. Glesch)

Publisher: Research Concepts
1368 East Airport Road
Muskegon, Michigan, 49554 1965

Age range: 3-1/2 to 6-1/2 years. Price: \$5.90 (50 copies)

The test used is designed to determine kindergarten and school readiness. It consists of human figure drawing, conceptual information, arithmetic comprehension, auditory sequential memory, and eye-hand coordination tasks. The raw scores earned on the tests are converted into a readiness age. Norms through age 5 are provided.

(A) *BRIGANCE™ Diagnostic Inventory of Early Development* (A. Brigance)

Publisher: Curriculum Associates, Inc.
North Billerica, Massachusetts 01862 1978

Age range: 0 to 7 years Price: \$49.95 (includes 10 recordbooks)

The inventory determines developmental levels, maps performance records, and assists in developing objectives. Skills assessed are: Psychomotor (including pre-ambulatory, gross motor, and fine motor), self-help skills, communication skills (pre-speech, speech, and language), general knowledge and comprehension, reading skills, and math skills. Record book presents skills in sequence, aiding task analysis. For example, all walking skills are grouped together. Group record books are also available. The BRIGANCE™ is currently being used in seven of the DoDDS preschool programs.

** (S) Clifford W. Beers Developmental Screening - Preschool Level Infant Level Downward Extension (Experimental)*

Publisher: Outreach Project, New Haven Preschool Program, the Calentano School
400 Center Street,
New Haven, Connecticut, 06511 1974

Age range: Preschool edition 3-1/2 to 5-1/2 years
Infant level 1 month to 3-1/2 years

Price: \$5.00

The preschool edition is a 20-30 minute individual test to estimate developmental levels in such areas as language and cognition, visual-motor concept, visual discrimination, gross motor, and number and digit span awareness. General norms are provided. The infant edition is available for pilot use. The tool is inexpensive and requires no special equipment.

** (S) Comprehensive Identification Process - CIP (R Zehrbach)*

Publisher: Scholastic Testing Service
Bensenville, Illinois, 60106 1975

Age range: 2-1/2 to 5-1/2 years

Price: \$54.50

This preschool screening system was developed to identify every child in a community who is eligible for a special preschool program or needs some kind of medical attention or therapy, to function at full potential in school. It includes speech and expressive language, cognitive-verbal, fine motor, gross motor, and socio-affective development. There are suggestions for the screening of hearing and vision. Different tasks are given, beginning at each 6-month age interval. There are guidelines for observing children's behavior. A parent interview form is included. A lightweight kit with forms and materials is provided, and other additional props are necessary.

** (S) Denver Developmental Screening Test (W: K. Frankenburg, 3, Dodds)*

Publisher: LADCOA Project and Publishing Foundation
East Slat Avenue and Lincoln
Denver, Colorado, 80216 1970

Age range: 2 weeks to 6 years

Price: \$10.50

The test has been widely used in screening for serious developmental delays. It evaluates four aspects: Gross motor, fine motor-adaptive, language, and personal-social. The test should be given by trained people who have experience in child development. A training package and film are available. A kit with materials is included.

*(S,A) *Developmental Profile* (G. Alpern, T. Boll)

Publisher: Psychological Development Publications
7150 Lakeside Drive
Indianapolis, Indiana, 46278 1972

Age range: Birth to pre-adolescence Price: \$10.00

The profile is intended to provide information which leads to separate physical, self-help, social, academic, and communication "ages" for each child. It relies on prior acquaintance with the child and consists of questions about the child which the parent or child worker answers. Information can be checked by observing the child. Norms have been standardized, but there are only a few items at each age interval.

*(S,A) *Early Childhood Assessment - A Criterion Referenced Screening Device - STRATEGIES* (R. Wandt)

Publisher: Comparative Educational Service, Agency 13
Waupun, Wisconsin, 53963 (Title III Project) 1975

Age range: 3 to 6 years Price: \$8.00

This unique test helps bridge the gap between initial screening, classroom management, and curriculum planning. Covering auditory, visual, motor and verbal skills, it is developmental and sequential, but includes no age guidelines or norms. The model includes a curriculum guide. Training by the developers can be arranged for examiners.

*(S) *Goodenough-Harris Draw-A-Man* (F. Goodenough, D. Harris)

Publisher: Harcourt, Brace, Jovanovich, Inc.
Test Department
757 3rd Avenue
New York, N.Y., 10017 1963

Age range: 3 to 15 years Price: \$6.25

Draw-A-Man is a nonverbal test of cognitive and fine motor abilities. Separate norms for boys and girls, ages 3-15, include standard scores and percentile ranks, etc. The child is asked to draw a man, woman, and himself. Guidelines for scoring are included. The test should not be used as a single device for skill identification.

*(A) *Illinois Test of Psycholinguistic Abilities—ITPA* (S. Kire, J. McCarry, W. Fire)

Publisher: University of Illinois Press
Urbana, Illinois 61801

Publishers say the ITPA identifies communication abilities and disabilities in order to help teachers plan remedial activities. Subtests are aimed at auditory-vocal and visual-motor communication channels and attempt to analyze reception, organization, and expression at the highly organized representational and less voluntary automatic levels. The ITPA includes tests on closure, sequential memory, and sound blending. Formal training is required to administer the ITPA.

* (A) *Learning Accomplishment Profile* - LAP (A. Sanford, D. Bailey, W. Johnson, J. Leonard, P. O'Connor) 1974

Early Learning Accomplishment Profile - E-LAP (E. Glover, S. Preminger, A. Sanford)

Publisher: Kaplan Press
600 Jonestown Road
Winston-Salem, North Carolina, 27103

Age range: LAP - 1 month to 6 years (strongest on 3- to 6-year range)
E-LAP - Birth - 36 months

Price: \$4.50/LAP and manual, \$4.50/E-LAP

LAP gives sequential task-level objectives at the developmental age at which the skill appears. It has been used successfully in preschool programs for children and infants with special needs and consists of gross motor, fine motor, self-help, social, language, and cognitive areas. Suggestions for curriculum follow-through are provided in both editions. The LAP and E-LAP may be adapted for purposes of assessing some skills in the severely and profoundly handicapped.

* (S) *McCarthy Scales of Children's Abilities* (D. McCarthy)

Publisher: Psychological Corporation
30B E. 45th Street
New York, N.Y., 10017

Age range: 2-1/2 to 8-1/2 years Price: \$59.00

This tool measures children's intellectual level, strengths, and weaknesses. The scales consist of 18 subtests that make up 6 scales: Verbal, perceptual-performance, quantitative, memory, motor, and general cognitive. Reliability and validity data are available.

* (S) *McCarthy Screening Test* (D. McCarthy)

Publisher: Psychological Corporation
30B E. 45th Street
New York, N.Y., 10017

Age range: 4-1/2 to 6 years Price: \$27.50

Condensed from the McCarthy Scales of Children's Abilities, this screening tool is designed to identify children who will need special educational assistance. The six subtests are right-left orientation, verbal memory, draw-a-design, numerical memory, conceptual grouping, and leg coordination. The publisher states that the test presents normative information based on the standardization of the McCarthy Scales on "normal" children.

* (S,A) *Peabody Picture Vocabulary Test* (L. Dunn)

Publisher: American Guidance Service,
Publisher's Building
Circle Pines, Minnesota, 55014 1965

Age range: 2-1/2 to 18 years Price: \$14.00 regular
\$19.50 special

This test was designed to provide an estimate of a child's receptive vocabulary through nonverbal interpretation of a series of pictures. It requires some special training to administer. For the purpose of data analysis, raw scores are converted into national percentile ranks. Some testers report that certain vocabulary words are regional, or not current, and may require adaptation. Other devices are recommended for measuring receptive language skills.

*(A) *Portage Guide to Early Education* (S. Bluma, M. Shearer, A. Frohman, and J. Hilliard)

Publisher: Cooperative Education Service Agency #12
Portage Project
Box 564
Portage, Wisconsin 53901 Revised, 1976

Age range: Birth to 5 years Price: \$32.00 (manual, checklists, cards)

These materials are useful in educational planning for children whose developmental ages range from birth to 5 years. They were designed in a home-based project, but can be used in any type program. The Developmental Checklist is color-coded, and the skill sequence corresponds to specific activities in the Activity Card File.

*(S) *Preschool Inventory* (B. Caldwell)

Publisher: Educational Test Service
Box 2814
Princeton, N.J., 08540

Age range: 3 to 6 years Price: \$3.00 specimen set

This screening tool is designed for individual use and measures areas considered vital to school success: Basic information and vocabulary; number concepts; concepts of size, shape, motion, color, time, and classification; visual-motor performance; following instructions; and personal-social ability. A few simple props are necessary. Standardized test norms are included.

*(S) *Slosson Intelligence Test - SIT*

Publisher: Slosson Educational Publications
140 Pine Street
East Aurora, New York, 14052

Age range: 4 years and over
(can be used with younger children) Price: \$7.00

This is a widely used diagnostic test of mental ability with heavy emphasis on verbal ability. It may be used on infants and children under 4 with less validity. The early childhood items are adapted from the Gesell Development Schedules. The SIT may be used as a quick screening device, but should not be relied on as the sole factor in important placement decisions.

*(A) *Vineland Social Maturity Scale* (Edgar A. Doll, Ph.D.)

Publisher: American Guidance Service, Inc.
Publishers' Building
Circle Pines, Minnesota 55014

Age range: 3 months-adulthood Price: \$7.00

The Vineland is a questionnaire that consists of a detailed performance outline to measure skills in social responsibility or personal independence. This test is useful in determining certain functional levels of the severely and profoundly handicapped and is answered by a person who is primarily responsible for the child.

(A) *Vulpe Assessment Battery* (S. Vulpe)

Publisher: National Institute On Mental Retardation
Toronto, Ontario, Canada M3J HP3
Revised 1979

Age range: Birth To 6 Years.

Price: \$17.00

This is one of the more effective assessment devices for the severely and profoundly handicapped child and includes a performance analysis, as well as program planning techniques. The interactive procedure is designed to determine the functional level of the child in specific developmental areas including "splinter" areas which are often excluded in other preschool assessment devices. The following areas are assessed: Basic senses and functions, gross motor, fine motor, language (receptive and expressive), cognitive processes and specific concepts, organizational behaviors, and activities of daily living. An assessment of the child's environment also is conducted, which includes identifying characteristics of his/her basic living environment, the appropriateness of the educational setting, and the knowledge and personal feelings of adequacy of the caregiver.

(S) *Yellow Brick Road* (Christine Kallstrom)

Publisher: Teaching Resources
50 Pond Park Road
Hingham, Maryland 02043

Age range: 2-6 Years

Price: \$42.95

This game-like approach to screening children includes four areas: Gross and fine motor, visual, auditory, and language. The "Wizard of Oz" theme carried throughout the batteries encourages participation by the children. Highest correlations (.80) were found with the Illinois Test of Psycholinguistic Abilities (ITPA) and the Metropolitan Readiness Test (MRT). Normative scores are provided.

BRIGANCE™ DIAGNOSTIC INVENTORY OF EARLY DEVELOPMENT *

A. PRE-AMBULATORY MOTOR SKILLS AND BEHAVIOR

16-9	Sitting Position: 1 *Head sags forward 2 *Head set forward with some control but also with some bobbing 3 *Steadies head but does not hold it erect. 4 Holds head erect and steady 5 Sit supported.	6 Sits briefly, leaning forward on hands 7 Sits briefly with hands free to manipulate 8 Sits erect and unsupported for five minutes	9 Leans forward from sitting position and re-erects 10 Sits with balance
Developmental Age _____			
Notes _____			
20-3	Standing Position: 1 *No support 2 *Supports small fraction of weight 3 *Supports half of full weight on balanced	8 Stands holding on to an object for support 9 Pulls to standing position 10 Stands unsupported for five seconds 11 Lifts foot when hand is held	12 Walks with both hands held 13 Walks sideways holding on to furniture 14 Walks with one hand held. 15 Walks forward holding on to furniture 16 Walks alone
Developmental Age _____			
Notes _____			

SAMPLE: Administer only after thoroughly reading and understanding the manual which accompanies this test.

*Disappearing behavior present only at this level of development (see page 3 of inventory)

B. GROSS MOTOR SKILLS AND BEHAVIORS

27-9	Standing: 1 *Stands with broad stance 2 *Stands with normal stance 3 Stands on one foot with one hand held by another person. 4 Stands on either foot with one hand held 5 *Squats to pick up object from floor and then re-erects	6 Stands with heels together 7 Stands on tiptoes momentarily 8 Bends at waist to pick up object from floor 9 Attempts to stand on one foot with no help	10 Stands on one foot momentarily 11 Stands on either foot momentarily 12 Stands on one foot for five seconds 13 Stands on either foot for five seconds 14 Stands on one foot for ten seconds	15 Stands on either foot for ten seconds 16 Stands on one foot momentarily with eyes closed 17 Stands on one foot for ten seconds
Developmental Age _____				
Notes _____				
30-3	Walking: 1 *Walks with broad stance 2 *Walks with knees slightly bent and shoulders slightly hunched 3 *Walks holding hands out for balance rather than at side 4 Walks with hands swinging at side 5 Walks sideways	6 Walks well and rarely falls 7 Walks fast 8 Walks stepping 5 cm by 9 Walks with steps of 2 m 10 Walks on straight line 11 Walks circular 25 mm line	12 Walks forward on line heel and toe a distance of 2 m 13 Walks scissor steps across 25 mm-wide line a distance of 2 m 14 Walks backward toe to heel six steps 15 Walks backward toe to heel a distance of 2 m	
Developmental Age _____				
Notes _____				
34-5	Stairs: 1 *Walks up stairs with one hand held 2 *Walks up stairs with one hand held holding rail 3 *Walks up stairs with one hand held holding rail 4 *Walks up stairs with one hand held holding rail 5 *Walks up stairs with one hand held holding rail	6 Walks down stairs with one hand held holding rail 7 Walks alone up stairs holding rail 8 Walks alone down stairs holding rail 9 Walks up stairs alternating feet with one hand held holding rail	10 Walks down stairs alternating feet with one hand held holding rail 11 Climbs ladder of low play equipment 12 Walks up stairs alternating feet while holding rail 13 Walks down stairs alternating feet while holding rail	14 Walks up stairs carrying object in one hand without holding rail 15 Walks down stairs carrying object without holding rail 16 Walks up and down stairs carrying objects in both hands
Developmental Age _____				
Notes _____				

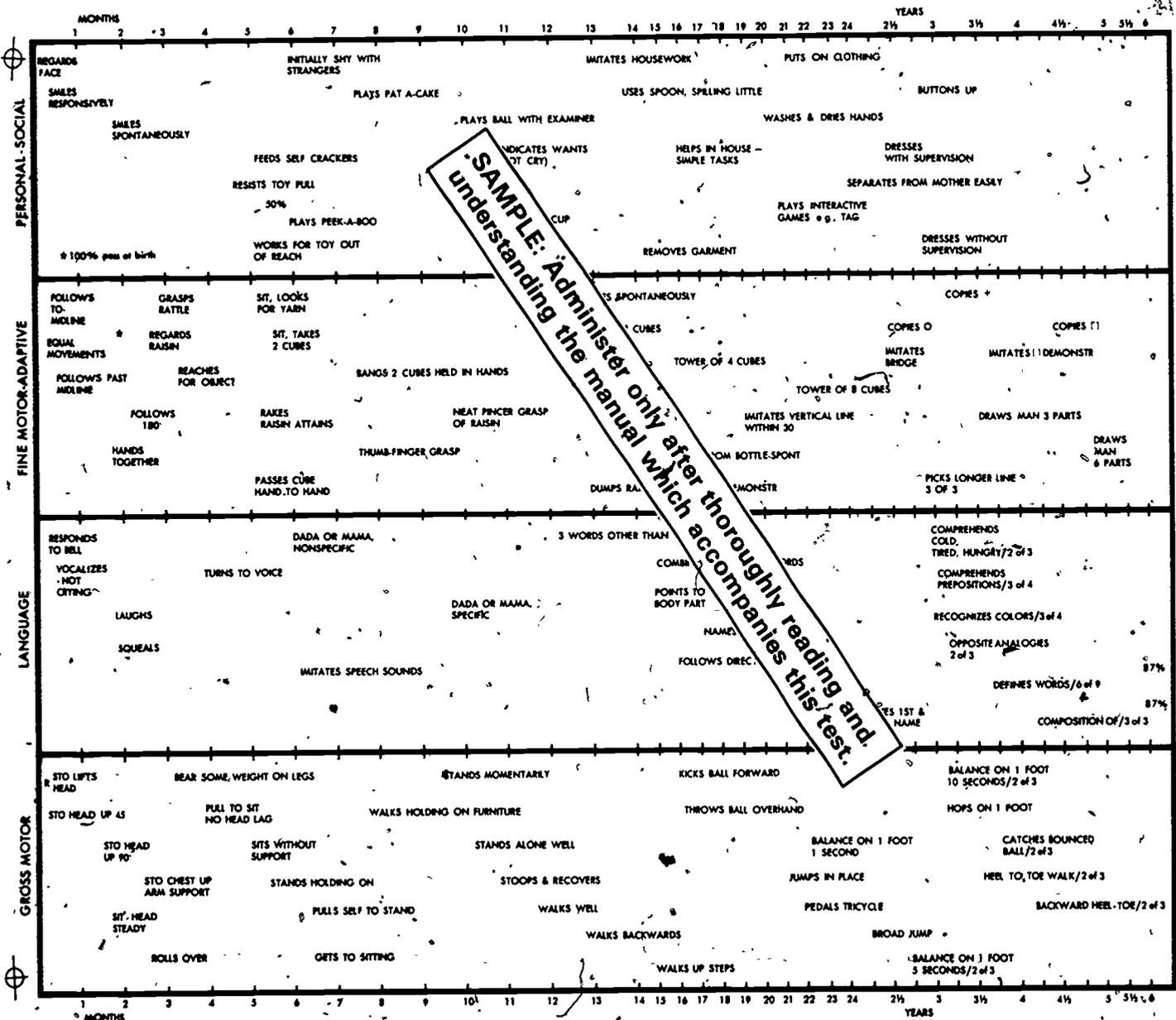
SAMPLE: Administer only after thoroughly reading and understanding the manual which accompanies this test.

*Reproduced by permission from the BRIGANCE™ Diagnostic Inventory of Early Development © 1978, Curriculum Associates, Inc., North Billerica, Massachusetts 01862.

DENVER DEVELOPMENTAL SCREENING TEST

STO = STOMACH
SIT = SITTING
Age passed by report: 25 50 75 90
Examiner No. _____ Test Name _____
Date of Exam _____

Name _____
Date _____
Birthdate _____
Height No. _____



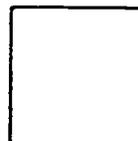
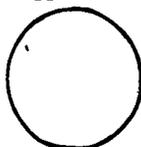
SAMPLE: Administer only after thoroughly reading and understanding the manual which accompanies this test.

©1969, William K. Frankenburg, M.D., and Joseph B. Dodds, Ph.D., University of Colorado Medical Center

DENVER DEVELOPMENTAL SCREENING TEST

1. Try to get child to smile by smiling, talking or waving to him. Do not touch him.
2. When child is playing with toy, pull it away from him. Pass if he resists.
3. Child does not have to be able to tie shoes or button in the back.
4. Move yarn slowly in an arc from one side to the other, about 6" above child's head. Pass if eyes follow 90° to midline. (Past midline; 180°)
5. Pass if child grasps rattle when it is touched to the backs or sides.
6. Pass if child continues to look where yarn disappeared or where it should be dropped quickly from sight from tester's hand.
7. Pass if child picks up raisin with any part of hand.
8. Pass if child picks up raisin with the thumb using an over hand approach.

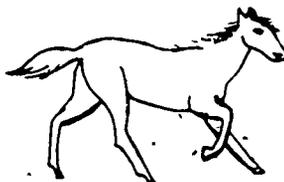
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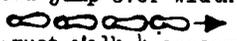
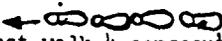


9. Pass any enclosed form. Fail continuous round motions.
10. Which line is longer? (Not bigger.) Turn paper upside down and repeat. (3/3 or 5/6)
11. Pass any crossing lines.
12. Have child copy first. If failed, demonstrate

When giving items 9, 11 and 12, do not name the forms. Do not demonstrate 9 and 11.

13. When scoring, each pair (2 arms, 2 legs, etc.) counts as one part.
14. Point to picture and have child name it. (No credit is given for sounds only.)



15. Tell child to: Give block to Mommie; put block on table; put block on floor. Pass 2 of 3. (Do not help child by pointing; moving head or eyes.)
16. Ask child: What do you do when you are cold? ..hungry? ..tired? Pass 2 of 3.
17. Tell child to: Put block on table; under table; in front of chair, behind chair. Pass 3 of 4. (Do not help child by pointing, moving head or eyes.)
18. Ask child: If fire is hot, ice is ?; Mother is a woman, Dad is a ?; a horse is big, a mouse is ?. Pass 2 of 3.
19. Ask child: What is a ball? ..lake? ..desk? ..house? ..banana? ..curtain? ..ceiling? ..hedge? ..pavement? Pass if defined in terms of use, shape, what it is made of or general category (such as banana is fruit, not just yellow). Pass 6 of 9.
20. Ask child: What is a spoon made of? ..a shoe made of? ..a door made of? (No other objects may be substituted.) Pass 3 of 3.
21. When placed on stomach, child lifts chest off table with support of forearms and/or hands.
22. When child is on back, grasp his hands and pull him to sitting. Pass if head does not hang back.
23. Child may use wall or rail only, not person. May not crawl.
24. Child must throw ball overhand 3 feet to within arm's reach of tester.
25. Child must perform standing broad jump over width of test sheet. (8-1/2 inches)
26. Tell child to walk forward,  heel within 1 inch of toe. Tester may demonstrate. Child must walk 4 consecutive steps, 2 out of 3 trials.
27. Bounce ball to child who should stand 3 feet away from tester. Child must catch ball with hands, not arms, 2 out of 3 trials.
28. Tell child to walk backward,  toe within 1 inch of heel. Tester may demonstrate. Child must walk 4 consecutive steps, 2 out of 3 trials.

DATE AND BEHAVIORAL OBSERVATIONS (how child feels at time of test, relation to tester, attention span, verbal behavior, self-confidence, etc.):

LEARNING ACCOMPLISHMENT PROFILE

LAP - Sanford (C)

- 45 -

LANGUAGE DEVELOPMENT (Cont.)

Bibliog. Source	Behavior	Age (Dev.)	Assessment Date	Date of Achievement	Comments (Criteria, materials, problems, etc.)
13	Talks to self in long monologue mostly concerned with the present, including make-believe activities	36-48 mos.	*		
9, 13, 6	Relates experiences, describes activities				
7	Uses most frequently words: it, you, that, a, do, the, not, the	36-48 mos.			
9, 3	Can give sensible answer to "Why do we have stoves?" etc.	36-48 mos.			
9	Can name what he has drawn after scribbling	36 mos.			
9	Carries out four-step command, using prepositions	48 mos.			
9	Articulates, not in infantile style	54 mos.			
9	Defines four words in terms of use of	54 mos.			
13	Gives home address	48-60 mos.			

SAMPLE: Administer only after thoroughly reading and understanding the manual which accompanies this test.

*Mark + for positive demonstration of skill
 Mark - for negative demonstration of skill



Age Level	Card	Behavior	Entry Behavior	Date Achieved	Comments
0 1	1	Removes cloth from face that obscures vision		/ /	
	2	Looks for object that has been removed from direct line of vision		/ /	
	3	Removes object from open container by reaching into container		/ /	
	4	Places object in container in imitation		/ /	
	5	Places object in container on verbal command		/ /	
	6	Shakes a sound making toy on a string		/ /	
	7	Puts 3 objects into a container, empties container		/ /	
	8	Transfers object from one hand to the other to pick up another object		/ /	
	9	Drops and picks up toy		/ /	
	10	Finds object hidden under container		/ /	
	11	Pushes 3 blocks train style		/ /	
	12	Removes circle from		/ /	
	13	Places		/ /	
	14	Performs		/ /	
1 2	15	Individualizes 6 objects from container		/ /	
	16	Points to one body part		/ /	
	17	Stacks 3 blocks on request		/ /	
	18	Matches like objects		/ /	
	19	Scribbles		/ /	
	20	Points to self when asked "Where's (name)?"		/ /	
	21	Places 5 round pegs in pegboard on request		/ /	
	22	Matches objects with picture of same object		/ /	
	23	Points to named picture		/ /	
	24	Turns pages of book 2-3 at a time to find named picture		/ /	
2 3	25	Finds specific book on request		/ /	
	26	Completes 3 piece formboard		/ /	
	27	Names 4 common pictures		/ /	

SAMPLE: Administer only after thoroughly reading and understanding the manual which accompanies this test.

OBSERVATION OF CHILDREN'S BEHAVIOR AND PLAY SKILLS
DURING PRE-KINDERGARTEN SCREENING (FOR 4- AND 5- YEAR-OLDS)

Child's Name _____ Screening Date _____

List of Materials in Play Area: _____

_____ Number of minutes child is in the play area.

Directions: Check appropriate child behaviors.
Double check those most frequently observed.

(-) Evaluate or refer. (?) Questionable, check further in program. (+) O.K.

Any minus (-) or a majority of question marks (?) may indicate need for a follow-up evaluation. Ask parent if observed behavior was typical of the child.

I. SOCIAL BEHAVIOR

A. Type of Play

- _____ (-) 1. Refused to leave parent or enter play area.
- _____ (?) 2. Observed others, but did not participate.
- _____ (?) 3. Engaged in solitary play only.
- _____ (+) 4. Played near other children with similar materials, but minimal interaction.
- _____ (+) 5. Played with others in common activity.

B. Interaction with Others

- _____ (-) 1. Constantly in physical conflict with another child over a toy or area.
- _____ (-) 2. Was extremely passive and let others take things from him or her.
- _____ (?) 3. Bossed other children and demanded own way, but took turns after adult intervened.
- _____ (?) 4. Did not interact with other children.
- _____ (?) 5. Played only with siblings or much younger children. (Circle which.)
- _____ (+) 6. Was able to share and take turns with little or no prompting from adults.
- _____ (+) 7. Organized others in cooperative play.

C. General Approach

- _____ (-) 1. Extremely negative, would not participate.
- _____ (-) 2. Aggressive and destructive.
- _____ (?) 3. Timid, played mechanically, anxious for parent to return.
- _____ (+) 4. Stood with parent briefly or came to play area quickly, enjoyed playing, showed parent what she/he did.

Developed - May 1977 by: D. Juster/F. Hale
Project Maine Stream Outreach Program
Maine School Administrative District 51
Cumberland Center, Maine 04021

SAMPLE

OBSERVATION OF CHILDREN'S BEHAVIOR AND PLAY SKILLS
DURING PRE-KINDERGARTEN SCREENING (FOR 4- and 5-YEAR-OLDS)

II. PLAY SKILLS

A. Activity Selection (Briefly note what child did)

- (-) 1. Used no materials.
- (?) 2. Played only with object brought from home.
- (+) 3. Large motor equipment. _____
- (+) 4. Puzzles and manipulative toys. _____
- (+) 5. Housekeeping corner. _____
- (+) 6. Bricks and trucks. _____
- (+) 7. Others that you have planned - list: _____

B. Play Style

- (-) 1. Threw or broke toys.
- (-) 2. Was extremely passive and let others take things from him or her.
- (+) 3. Selected desired activity, knew how to use materials appropriately with little assistance.

C. Attention Span (Indicate type of toy or activity.)

- (-) 1. Used no materials.
- (-) 2. Impulsive and distractible; tried many things and stayed with nothing for more than a minute or two. _____
- (?) 3. Selected one activity; persevered or repeated use without expansion (e.g., rolled truck back and forth for most of period). _____
- (+) 4. Selected several activities, but did not complete any unless adult intervened. _____
- (+) 5. Overwhelmed by choices at first, but finally settled on one or more activities for at least 5 minutes. _____
- (+) 6. Stayed with and completed each activity selected. _____

D. Language

- (-) 1. No language.
- (-) 2. Used single words only.
- (-) 3. Unintelligible speech.
- (?) 4. Mumbled inaudibly.
- (?) 5. Shouted all commands.
- (+) 6. Used language to describe activities and to communicate with adults and/or children.

NOTES:

SAMPLE

REFERRING TEACHER CHECKLIST

Child's Name _____
Date of Birth _____ Age _____
Referring Teacher _____ Date _____

X Indicated Ability to Perform Task

- 1. Says first name
 Says first and last name
 Recognizes written name
 Answers to name when called
- 2. Knows his sex
 Knows colors, shapes
- 3. Knows body parts (head, hands, arms, knees, elbows, legs, feet, eyes, ears, nose, mouth, hair)
 Can point to when named
 Any others?
- 4. Puzzles - how many pieces?
 Knob puzzles
 Regular
- 5. Counting - how far can he count by rote?
 What numbers does he recognize in/out of sequence?
- 6. Sings simple songs (Happy Birthday, etc.)
- 8. Speaks in simple sentences - how many words?
1-2 words _____ 4-6 words _____
2-4 words _____ more than 6 words _____
- 9. Follows simple instructions. (Example: Give me the block)
Show me your shoes)
Point to your eyes)
- 10. Recognizes names of most common objects (ball, truck, etc.)
- 11. Can share, take turns.
- 12. Can work/play independently.
 Requires constant supervision.
- 13. Relates experiences verbally
 Is speech understandable?
- 14. Can child identify colors?
red _____ yellow _____ blue _____ orange _____ green _____
purple _____ brown _____ black _____ pink _____ gray _____ white _____
- m - match
n - names
- 15. Has attention span of _____ minutes, (_____ sitting _____ movement activity)
 Works well in a small group
 Requires one-on-one
- 16. Can cut with scissors - Yes - No
Left-handed _____
Right-handed _____
Hasn't decided _____
Special scissors (helper, etc.)
required? _____

SAMPLE

- 17. — Can discriminate left and right. (Pick up the ball with your left hand)
- 18. — Is toilet trained
- 19. — Can dress self
 - Snap _____ Button _____ Put on shoes _____
 - Buckle _____ Lace _____ Put on socks _____
 - Zipper _____ Tie _____

- 20. — Uses crayon and pencil if appropriate
 - Fist grasp _____ 3 finger _____
 - Draws meaningful objects and/or shapes _____

Shapes - M - can match, N - can name

SAMPLE

VULPE ASSESSMENT BATTERY *

PERFORMANCE ANALYSIS/DEVELOPMENTAL ASSESSMENT

22

Date:

Name: Birthdate:

Developmental Area: **ORGANIZATIONAL BEHAVIOURS - INTERNAL BEHAVIOUR**
CONTROL RELATED TO RECOGNITION AND RESPONSE TO ENVIRONMENTAL LIMITS

SCALE SCORE

COMMENTS INFORMATION PROCESSING AND ACTIVITY ANALYSIS

Age	Activity & References	Equipment & Directions	SCALE SCORE							COMMENTS INFORMATION PROCESSING AND ACTIVITY ANALYSIS
			1 No	2 Attention	3 Phys. Assis.	4 Soc./Emot. Assis.	5 Verbal Assis.	6 Independent	7 Transfer	
-12 mo.	5. Control over goal-oriented, integrated motor activity. 92,115.	Paper tissue: Observe the response when a paper tissue is gently placed over the child's eyes. The child organizes body movements so as to remove tissue, for example, by moving head, reaching hand to face, etc.								1. Analyse activities considering component parts of each and relationship to: Basic Senses & Functions Organizational Behaviors Cognitive Processes & Specific Concepts Auditory Language Gross & Fine Motor 2. Information Processing Consider: Input Integration Feedback Assimilation Output
	6. Control over temperament. 57,87,88,92,96,97,99,108,109,111,115,156.	Ask or observe the child's ability to adapt in various situations - usual temperament (irritable etc.), and the ease with which child is soothed when								
	7. Predominance of time spent exploring environmental limits, to learn appropriate behaviours.	Ask or observe: The child explores boundaries of social interaction and experiments with ways to ensure continuing attention of primary adult. For example, sulking for attention, crying or clinging to avoid separation, repeating activities rewarded previously, etc.								
	8. Experiments to maintain social interaction. 4,63,119,124.	Ask or observe: The child begins to express hunger, pain, pleasure, desire for attention, etc., by distinctive cries or vocalizations.								
	9. Vocal expression of inner state. 4,62,65,124.									

SAMPLE: Administer only after thoroughly reading and understanding the manual which accompanies this test.

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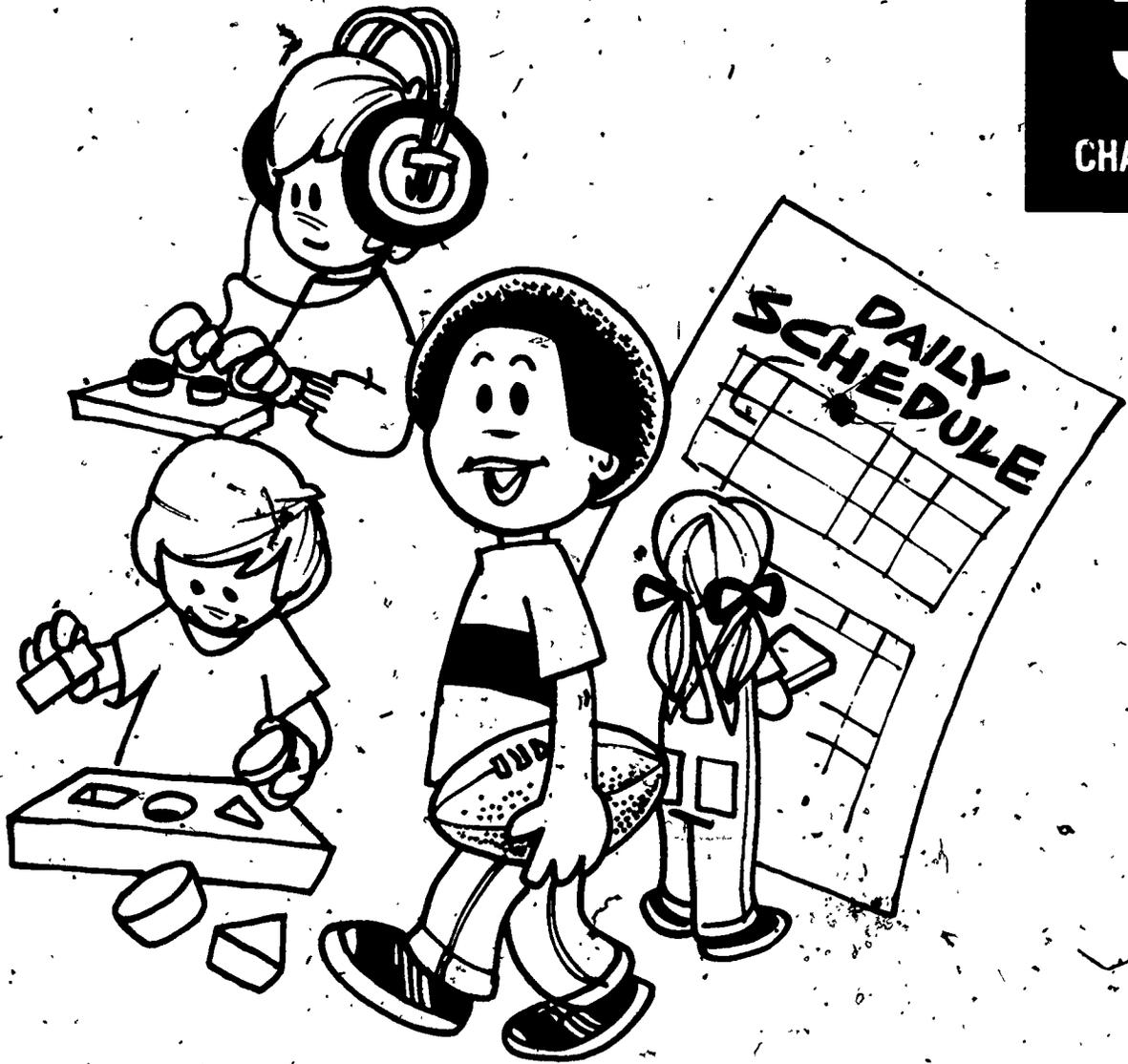
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PERFORMANCE ANALYSIS/DEVELOPMENTAL ASSESSMENT

CHAPTER 3.
PROGRAM IMPLEMENTATION

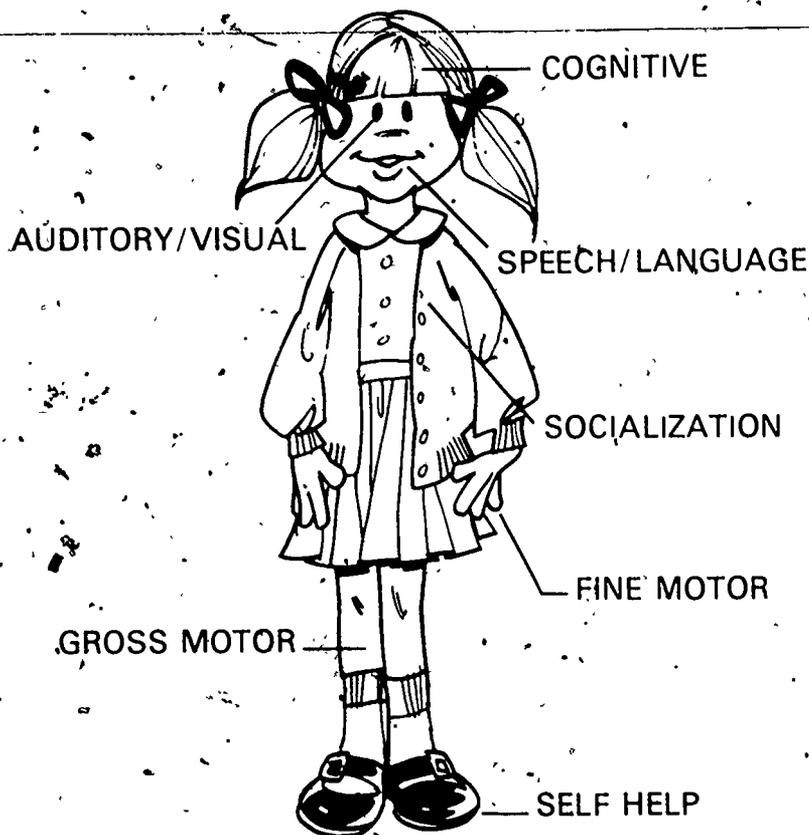
3

CHAPTER



WHAT WILL BE TAUGHT AND HOW?

Preschool special education remediates weaknesses and reinforces strengths by providing individualized activities in several developmental areas:



It is difficult, if not impossible, to separate finite activities and skills into distinct curriculum areas. For example, cognitive development is heavily integrated with language—a child cannot reason which objects match or “go together” until he/she knows what the objects are. The following pages provide you with a few activities for each developmental area. It is imperative that activities for handicapped youngsters be integrated into a total program where skills are taught continuously with reinforcements rather than instructed in isolation.

Remember, suggested activities are not comprehensive nor do they cover the range of activities used with preschool handicapped children. Such activities are numerous and relate to the specific needs of the child. Some preschool assessment devices (LAP, Portage Project, Volpe) and various activity kits (Peek) provide more detailed activities based on the developmental areas and the child's functional levels.

CONTENT AREA: GROSS MOTOR

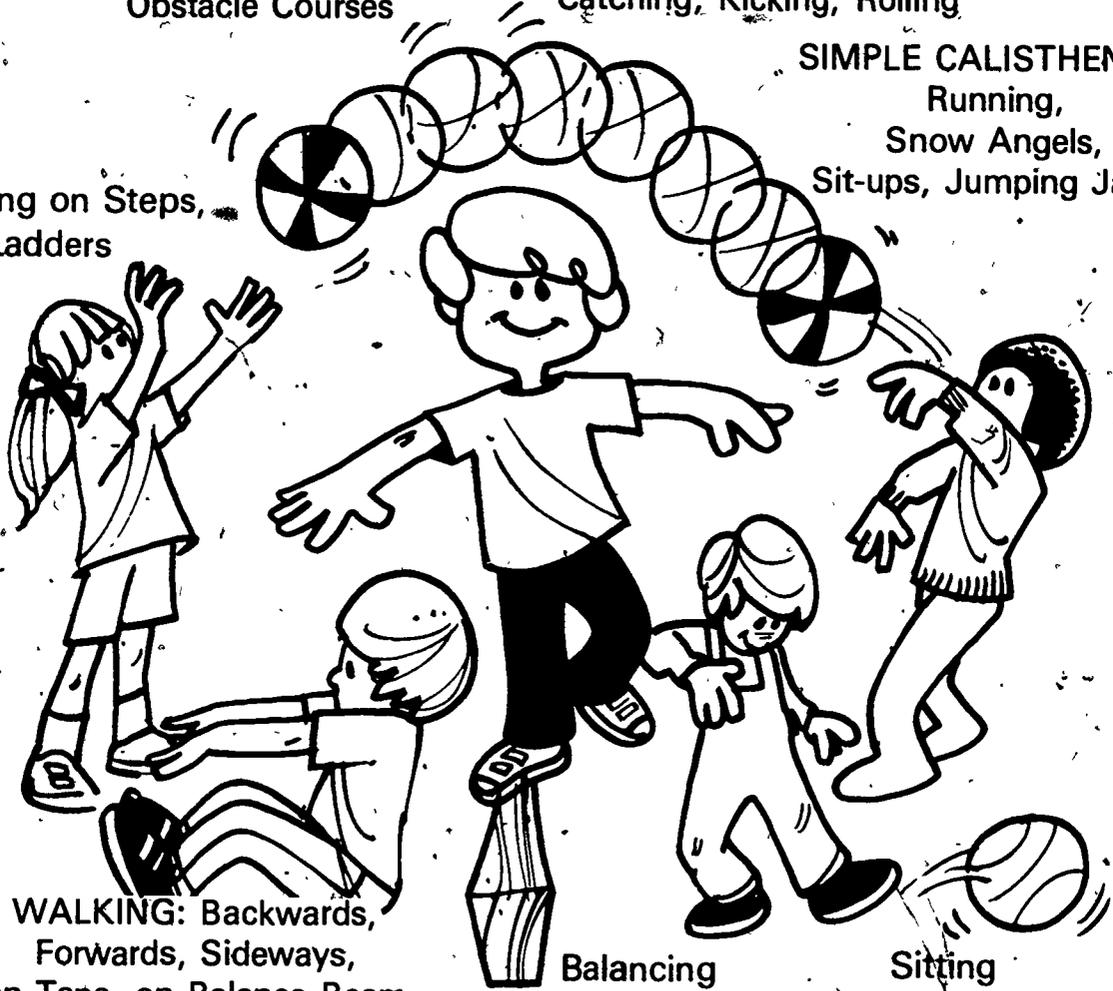
Development of large muscle skills, balance, strength and agility, and general body coordination.

CLIMBING: On Jungle Gyms,
Through Mazes,
Obstacle Courses

BALL THROWING:
Catching, Kicking, Rolling

SIMPLE CALISTHENICS:
Running,
Snow Angels,
Sit-ups, Jumping Jacks

Walking on Steps,
Ladders



WALKING: Backwards,
Forwards, Sideways,
on Tape, on Balance Beam

Balancing

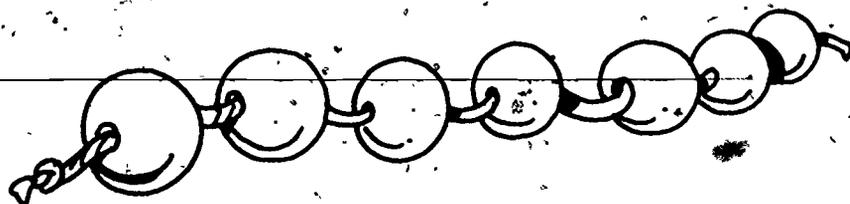
Sitting
Unassigned



**AND DON'T FORGET TO
ADD A LITTLE MUSIC!**

CONTENT AREA: FINE MOTOR/MANIPULATIVE

Development of small muscle coordination, eye-hand control, finger dexterity, wrist flexibility, arm and hand steadiness, and finger speed.



CONTENT AREA: FINE MOTOR/Writing

Development of small muscle coordination, eye-hand control, finger dexterity, wrist flexibility, arm and hand steadiness, and finger speed as they relate to writing.

CHILD ACTIVITIES

Following Paths

Tracing,
Copying Shapes

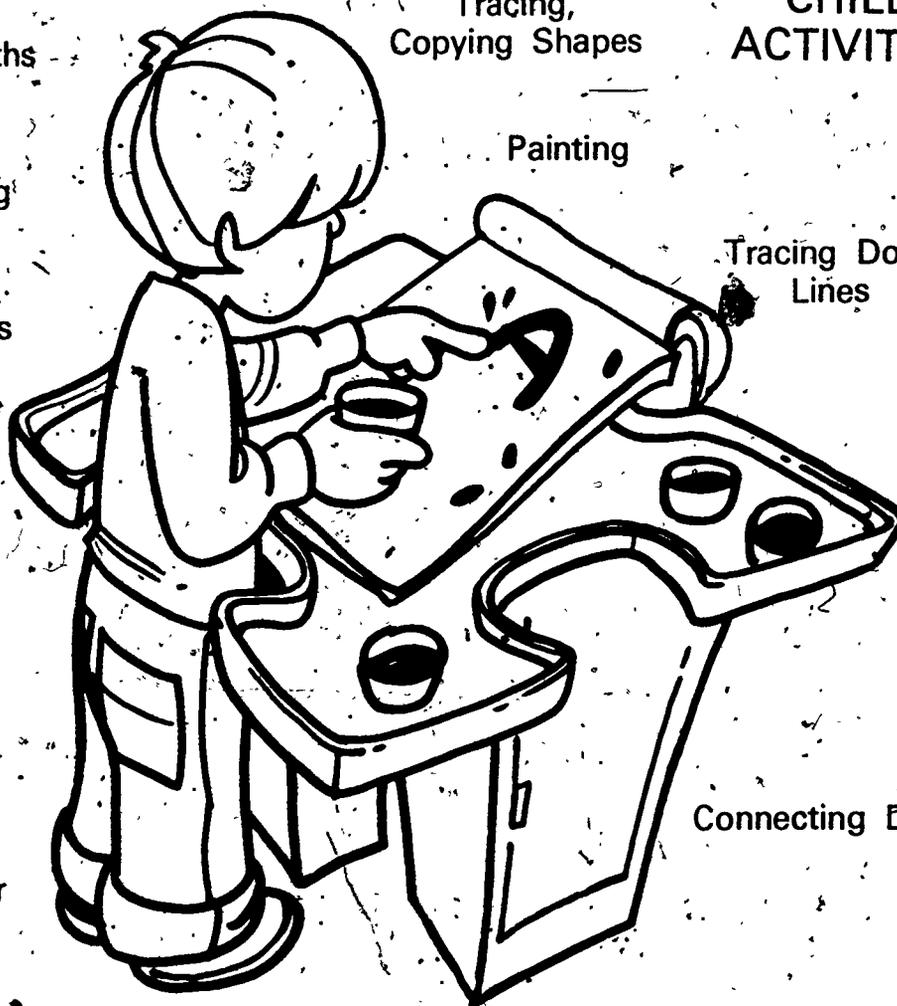
Tracing

Painting

Tracing
Copying Letters

Tracing Dotted
Lines

Curves



USE:
Sand Writing
Tempora Paint
Fingerpainting
Magic Markers
Paint with Water
Primary Pencil
Chalk on Board

Connecting Dots

CONTENT AREA: COGNITIVE DEVELOPMENT

Development of thinking and reasoning skills which include the ability to remember, to determine relationships between ideas and things, to solve problems, and to interpret shapes and symbols. The child expresses these skills in verbal and non-verbal ways.

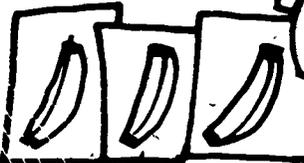
Establishing Object Permanence



Sequencing pictured events into proper time order

1 2 3 4

Identifying Numbers



Counting Objects/
Making Sets

A B C D

Matching
Identifying, Naming
Colors, Objects

Sorting abstract symbols or
figures that belong
in groups

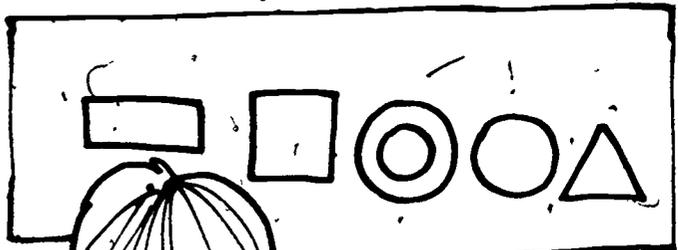
Matching objects that go
together (Toothbrush,
Toothpaste)

Matching part of
object to its whole
(Leg to Person)

CONTENT AREA: PERCEPTUAL DEVELOPMENT/VISUAL

Quality of visual development which attaches meaning and order to incoming stimuli.

Selecting Picture from Memory



Identifying Likenesses,
Differences in Objects, Pictures,
Numbers, Letters, Words

Discriminating
Design Reversals

Identifying the
Sequence of Symbols,
Numbers, Letters
(Visual Memory)

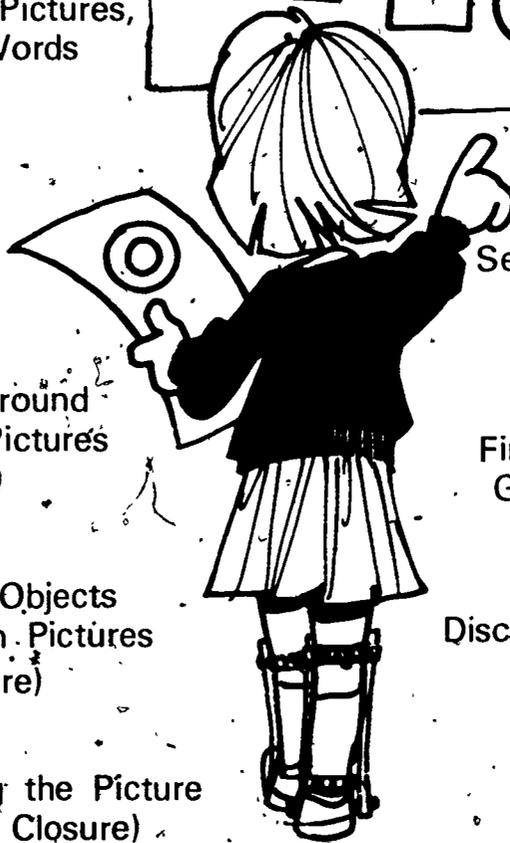
Distinguishing Foreground
and Background in Pictures
(Figure-Ground)

Finding Overlapping
Geometric Shapes

Finding Hidden Objects
Animals, People in Pictures
(Visual Closure)

Discriminating Picture
Reversals

Completing the Picture
(Visual Closure)



CONTENT AREA: PERCEPTUAL DEVELOPMENT/AUDITORY

Quality of auditory development which attaches meaning and order to incoming stimuli.

DISCRIMINATING RECORDED ENVIRONMENTAL SOUNDS
Trains, Airplanes, Animals, Household Appliances, by Names or Selecting Pictures To Go With Sounds

DISCRIMINATING TEACHER SOUNDS: Dropping Pencil, Tearing Paper, Bouncing Ball

DISCRIMINATING LETTER SOUNDS

DISCRIMINATING SOUNDS: Loud/Soft, Near/Far, High/Low

DISCRIMINATING FOOD SOUNDS: Celery, Carrots, Apples

Listening for Sound or Command Against Background of Music (Figure Ground)

Supplying Missing Words or Parts of Words to Sentence (Auditory Closure)

Identifying the Sequence of Sounds (Auditory Memory)

DISCRIMINATING EMOTIONAL SOUNDS: Crying, Laughing, Screaming



CONTENT AREA: LANGUAGE/SPEECH

Systematic means of receiving and expressing information and thereby communicating with others.

Responding to Name

Gesturing Wants or Needs

Giving Information About
SELF: Name, Address,
Phone Number, Sex

Rhyming

Identifying/Naming
Common Objects,
Foods, People

Identifying/Naming Use
of Objects

Story-telling
Sequencing

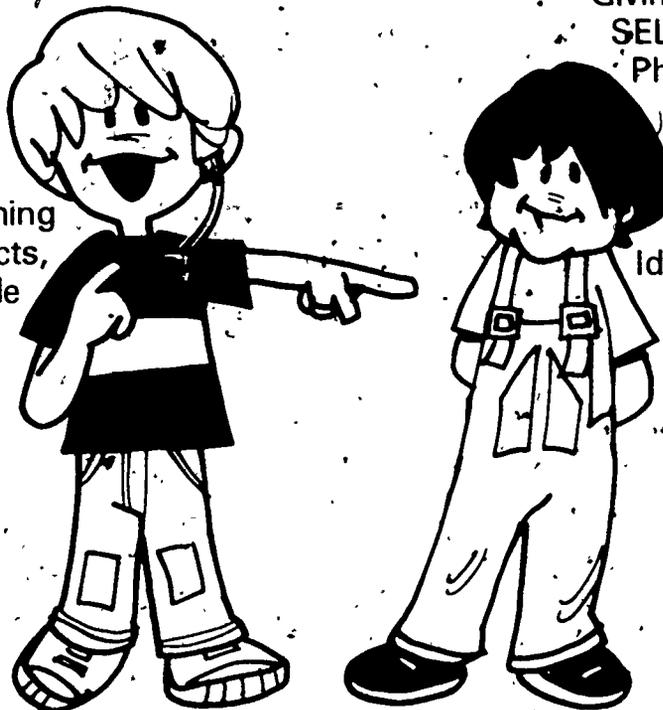
Identifying/Naming
Action in Pictures

Describing
Activities

Following Series
of Directions

Describing Activities
Yesterday, Today,
Tomorrow

Relaying Nursery Rhymes
Finger Plays



CONTENT AREA: SOCIAL BEHAVIOR

Ability to relate to the environment and others in a positive and meaningful way.

Sharing Games,
Toys

Helping with
Household Tasks

Taking Turns

Recognizing and Taking
Pleasure in One's
Accomplishments

Listening Attentively
in Groups

Showing Concern
and Sympathy

Playing with
Other Children



CONTENT AREA: SELF-HELP

Ability to function independently in meeting general physical needs.

Using Spoon and Fork
Correctly for Eating

Dressing



Spreading
Soft Foods with
a Knife

Washing/Drying
Hands

Using Toilet
Independently

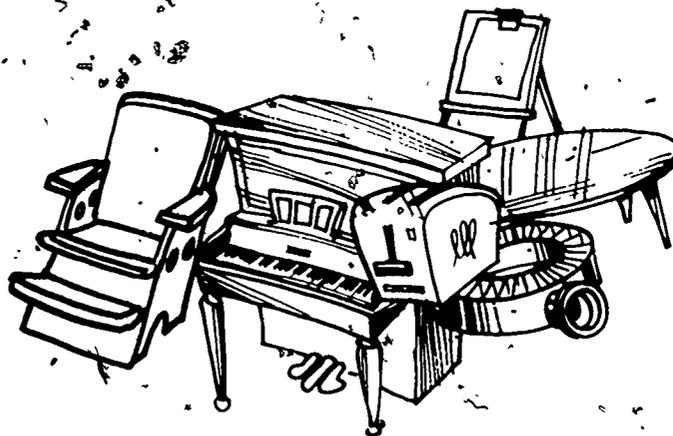
Zippering, Buttoning,
Unbuttoning

MATERIALS

Instructional materials for preschool handicapped children include items which meet individual developmental needs.

BASIC CLASSROOM EQUIPMENT:

Tables, small and large
Chairs and cube chairs
Large group table, preferably "kidney-shaped"
Teacher's desk and a few adult-size chairs
Primary-type typewriter
Easel/lowered chalkboards and bulletin boards
Individual support table or standing table (for non-ambulatory children)
Mats or cots
Sand and water table (try a dishpan full of sand or gravel)
Phonograph with plug for listening center - 15-20 records of games, songs, stories
Tape recorder with plug for listening center
Filmstrip projector/screen
Piano, if possible, or autoharp, pitch pipe
School supplies (clay, chalk, paper, pencils, crayons, markers, scissors, glue)



FOR COOKING:

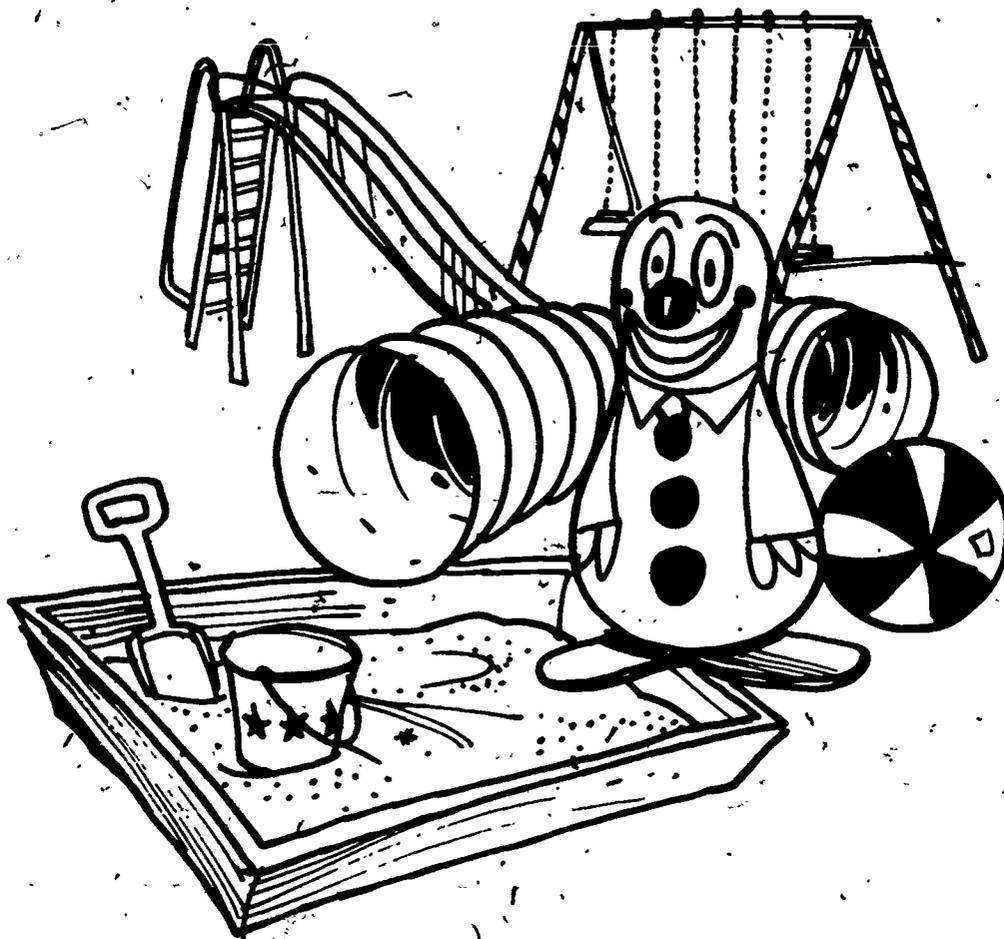
Stove or hot plate
Toaster oven
Electric fry pan
Refrigerator
Electric mixer

INDOOR EQUIPMENT:

Slides
Tunnels
Ride-on toys
Large plastic or cardboard blocks
Playhouse
Dollhouse

MATERIALS: GROSS MOTOR

- Punching Clowns
- Jumping ropes
- Parachute
- Slides
- Swings
- Climbing apparatus
- Balls, beanbags
- Tunnels
- Sand/water toys
- Wheel toys - tricycles, wagons, ride-on toys, scooter boards
- Balance Board



*Basic to a beginning program

MATERIALS: LANGUAGE/SPEECH/AUDITORY PERCEPTION

*Language Kit:

- Peabody Language Development Kits (PEEK - Peabody Early Experience Kit or Level P)
- MEST Kit (Materials for Expressive Syntax Therapy, Novato Unified School District, Novato, California)
- GOAL (Goal Oriented Acquisition of Language)

*Story and picture books

Large teaching picture sets

Flannel board story sets.

Hand puppets/finger puppets

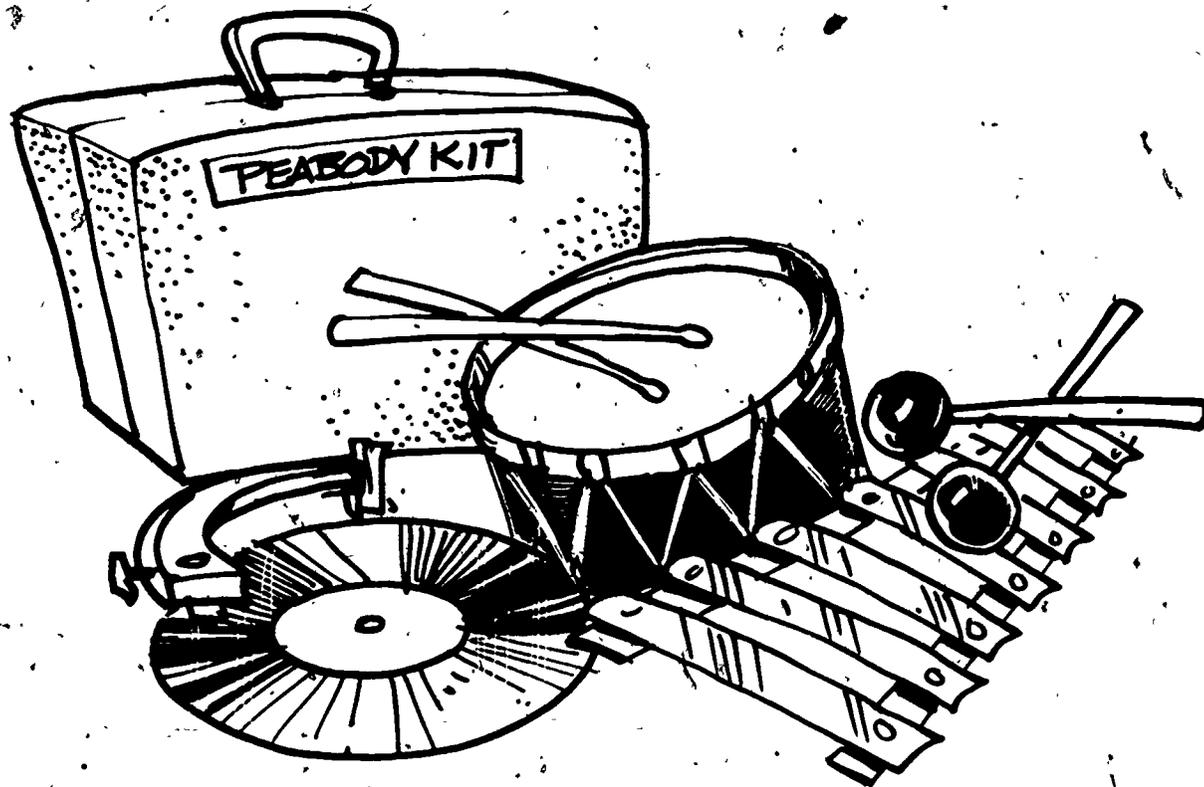
Play story character sets

Photographs of children or places visited

Musical instruments

*Records (Hap Palmer, Ella Jenkins, Sesame Street)

*Calendar (Teacher-made are the best!)



*Basic to a beginning program

MATERIALS: COGNITIVE

Cuisenaire rods

Attribute blocks

*Materials dealing with color, shape, size, texture

*Picture cards (DLM) for teaching: opposites, sequencing, matching same/different

Games: Lotto

Candyland

Chutes and Ladders

Card games

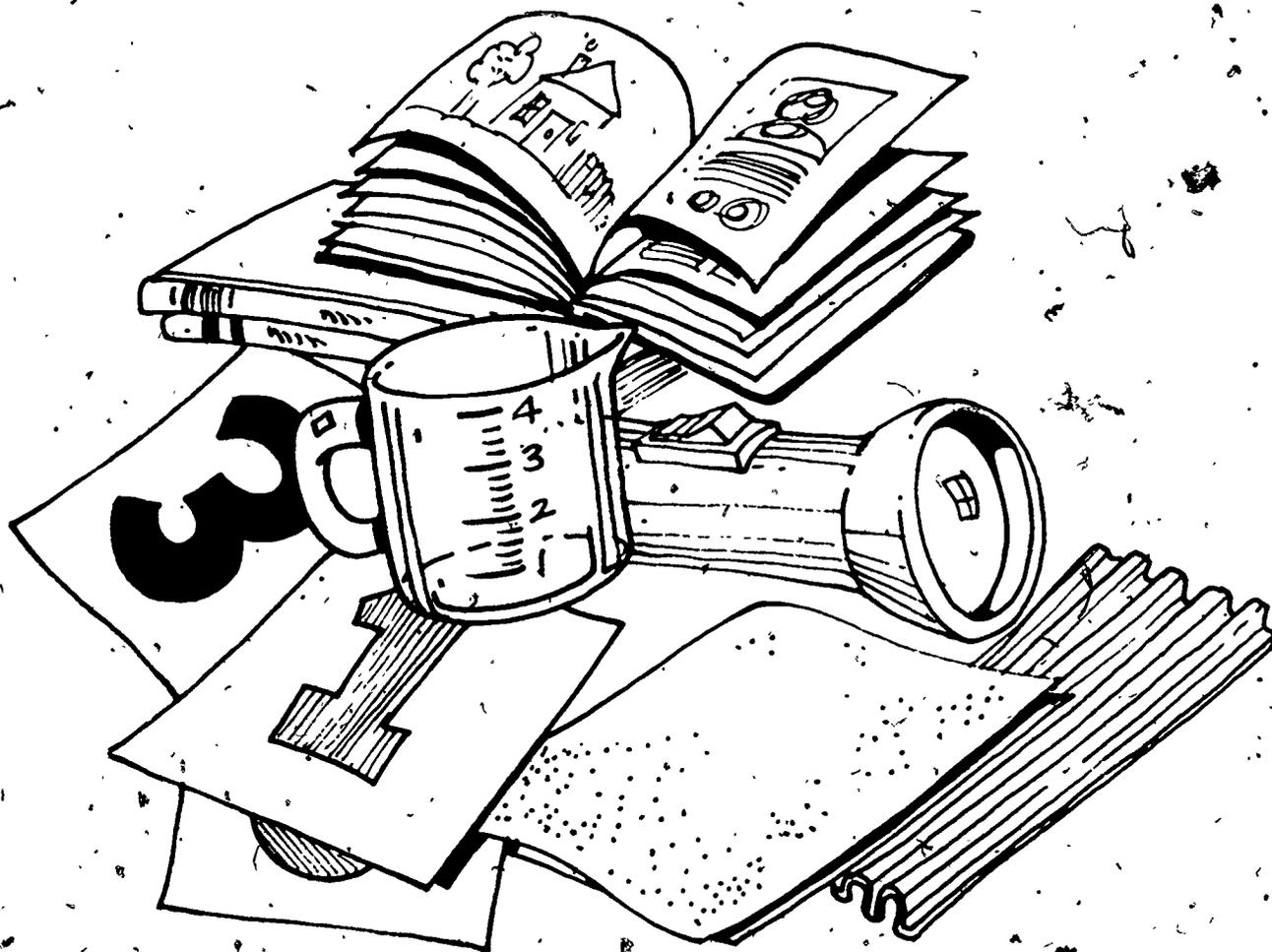
Bingo

Pattern blocks

*Number concept materials

Measuring cups

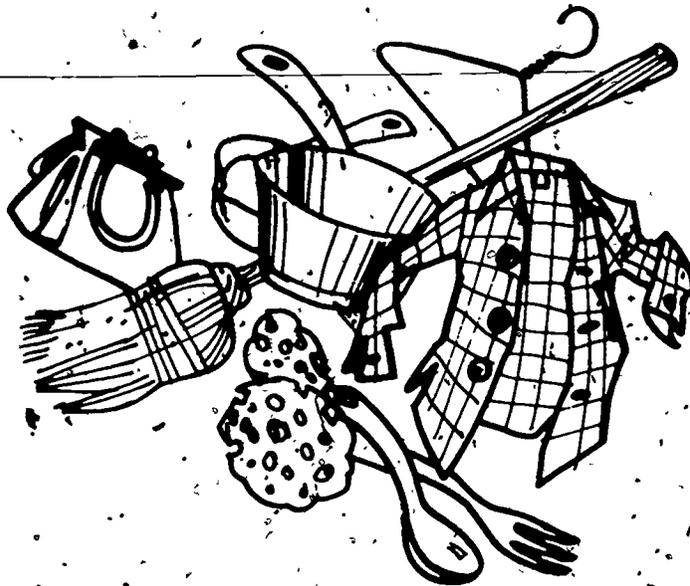
Weather thermometer



*Basic to a beginning program

MATERIALS: SOCIAL/SELF-HELP

- *Dress up clothes for role playing
- Brooms, small size
- Floor brushes
- Dust pans, small
- Hangers
- Mop, sponge, and string
- Pails, different sizes
- *Sponges
- Dishpan
- Draining rack
- *Paper towels, napkins
- *Pitchers, easy pour, good handles
- Trays, large and small
- Baskets for serving snacks
- Plates, plastic, breakfast size
- Mats, paper or plastic
- *Dolls
- Doll bed - big enough for children to curl up in
- *Cooking utensils, aluminum or plastic
- Dressing frames
- *Mirror
- *Old clothes with buttonholes enlarged, bigger buttons sewn on, zipper pulls attached (pants, shifts, tee shirts, coat)
- *"Housekeeping" corner with dishes, utensils, furniture, food containers, a "sink"



*Basic for a beginning program

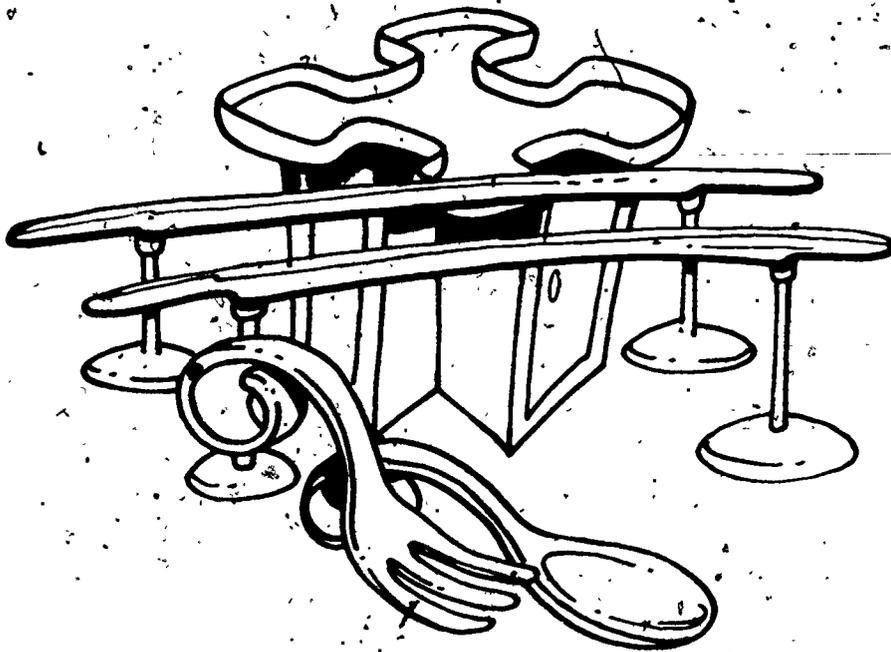
SPECIAL MATERIALS FOR THE SEVERELY AND PROFOUNDLY HANDICAPPED

Although many materials are available for the mildly and moderately handicapped preschool child; fewer are available for the severely and profoundly handicapped child. See Chapter 7 for appropriate resources including:

- *Education of Moderately and Severely Handicapped Youngsters* (Alpern and Boll, 1971)
- *Systematic Instruction of the Moderately and Severely Handicapped* (Martha E. Snell, 1978)
- *Programmed Environments Curriculum* (James W. Tawney, 1979)

Teacher creativity, resourcefulness, and collaboration are needed to adapt commercially available materials for handicapped preschool children, and to develop unique activities for instruction and reinforcement of specific splinter skills. It is important that the preschool special education teacher, the physical therapist, and the occupational therapist work together so that feeding tools, standing tables, movement devices, and other special apparatus may be constructed to meet the specific needs of these children.

A vehicle for communicating and sharing successful ideas and practices should be developed for those in our system who work with youngsters with similar needs. For instance, the preschool newsletter might be a very effective method for sharing new ideas and successful techniques.



Generally, materials and activities for the severely and profoundly handicapped preschool child concentrate on sensory stimulation. The child learns about himself in relation to his environment through a concentrated effort to activate his senses. In addition to the materials listed on the previous pages, these basic ideas may help:

VISUAL STIMULATION

- Light sources
- Flashlight (eye tracking)
- Colored Cellophane
- Mobiles and toys that can be attached to carpeted walls at various distances for reaching, grasping (even better if they make noise)
- Large single-colored objects/shapes

AUDITORY STIMULATION

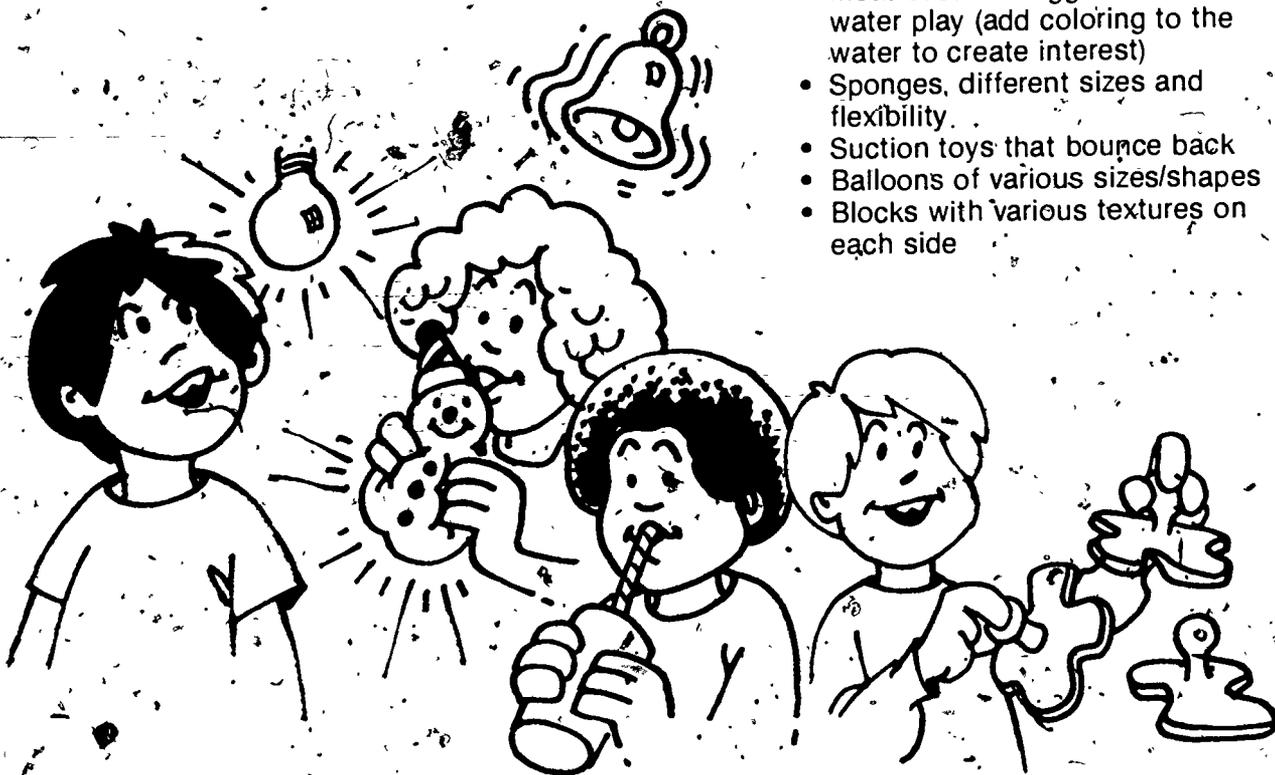
- Music (place youngster's hand on phonograph to "feel" the vibrations)
- Squeek toys (particularly ones that can be easily grasped to strengthen the "Palmer Grasp")
- Chimes, bells
- Rattles, drum, xylophone
- See 'n Say
- Puppets

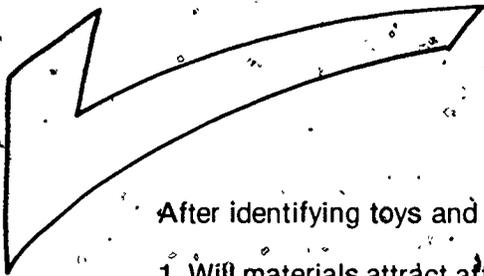
ORAL STIMULATION

- Various textured foods and finger foods
- Bubbles for blowing
- Horns to blow
- "Ping Pong Balls" to blow across the table
- Straws for sucking/blowing

MOTOR STIMULATION

- Busy Box
- Playschool "Stack-a-Ring"
- Large 2-3 piece puzzles with knobs (often these can be made by high school woodshop students)
- Containers for "workjobs" where small objects or pegs can be placed
- Flexible toys with different degrees of hardness and softness
- Meat baster or egg beater, for water play (add coloring to the water to create interest)
- Sponges, different sizes and flexibility
- Suction toys that bounce back
- Balloons of various sizes/shapes
- Blocks with various textures on each side





After identifying toys and materials you need, check your selection:

- 1. Will materials attract attention and sustain the interest of children in the age range for which the toy was designed?
- 2. Will they elicit a wide range of behavioral responses?
- 3. Will fine motor materials require a child to participate rather than just watch the object move?
- 4. Are they safe?
- 5. Will the materials continue to be of interest over long periods of time?
- 6. Is there adequate space for use and storage of the materials?
- 7. Are self-correcting materials included?



Remember! Keep an inventory of your materials so that you are able to easily identify what you have and what you need!

PRESCHOOL CLASS MATERIALS INVENTORY:

GROSS MOTOR	FINE MOTOR	LANGUAGE	COGNITIVE	SOCIAL	SELF HELP
2 SM. BALLS	4/3 PCE PUZZLES	DLM OPPOSITE CARDS	PARQUETRY BLOCKS	1 DOCTOR'S KIT	3 BOYS' SHIRTS

SCHEDULING

Half-time and full-time school-based programs should include large and small groups and individual instruction in all of the preschool curriculum areas. Several sample daily schedules for half-time and full-time programs follow:

*I. DAILY SCHEDULE - FULL DAY

- 8:10 Opening Exercises: Songs, finger plays, show and tell
- 8:20 Calendar and Weather: Report the weather for the day, post the day's weather on the calendar, and dress paper dolls according to the weather
- 8:30 Health Check
- 8:35 Snack
- 8:45 Children wash hands and face and brush teeth
- 8:55 Language Development (entire class)
- 9:30 Structural Arithmetic: Groups I and II
Aides work with children in interest centers while the teacher takes a group for arithmetic; then children change groups. Interest centers include: housekeeping corner, puzzles, string beads, blocks, water play, clay, "wonder box," trucks and cars, dress-up, books, and lacing boards.
- 9:50 Recess
- 10:00 Cognitive Fine Motor Skills Activities: Group I, Group II, and Group III
Teacher and Aide rotate working with groups, while remaining groups work at individual tasks.
- 10:30 Music (entire class)
- 11:00 Lunch
- 11:30 Bathroom
- 11:50 Nap
- 12:40 Gross Motor Activities (entire class)
- 1:00 Perceptual-Motor Activities
- 1:30 Language/speech - small groups

2:00 Art

2:25 Clean-up and departure

*II. Half-day full time program

12:30 - 1:00 Child-initiated activities (emphasis on social, language, and self-help skills)

1:00 - 1:15 Individual preacademic tasks

1:15 - 1:30 Group preacademic games (Lotto, Diater Language, and Matrix Game)

1:50 - 2:00 Puzzles

2:00 - 2:15 Group time, snack, music, and rhythms

*Adapted from project PEECH (Precise Early Education for Exceptional Children), University of Illinois, Champaign, Illinois

9:15 - 9:20 *Transition (greeting)*. After returning materials to shelves, children gather as a group for a greeting activity that develops concepts and attending behaviors.

9:20 - 9:35. *Structured small group activity*. Children meet with teachers (one to four children per teacher) for language development, math readiness, or social studies.

9:35 - 9:55. *Snack*. Toileting, handwashing, setting table, preparing food, where the emphasis is on spontaneous conversation, as well as the development of specific language concepts. Children often help prepare the foods. Social behavior and self-help skills can be taught meaningfully in this context.

9:55 - 10:10 *Structured small group activity*. Language development, math readiness, or fine motor development are emphasized.

10:10 - 10:15 *Transition (movement)*. Children and teachers participate in short preplanned activities involving music and movement.

9:20 - 9:35 *Structured small group activity*. Children meet with teachers (one to four children per teacher) for language development, math readiness, or social studies.

10:30 - 11:00 *Physical activities.* Playground activities, under the direction of the supervisor of physical activity and integrated behavior, develop the child's motor abilities, and provide an extension of the child's cognitive development.

11:00 - 11:20 *Quiet time.* Children and teachers divide into small groups and participate in relaxed play sessions with manipulative toys or books.

11:20 - 11:35 *Music.* The entire group participates in songs that teach basic concepts and in auditory discrimination activities, using simple rhythm instruments.

11:35 - 11:55 *Directed play.* Children select from blocks, a house-keeping corner, and art activities (including cutting, tearing, pasting, painting, and clay).

11:55 - 12:00 *Departure.* Children put on coats and name tags. Teachers accompany them to waiting transportation.

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HOME-BASED PROGRAM

Teachers working with parents may provide a home-based program for students. The program can include activities to develop skills in all instructional areas. Parents, under the direction of a preschool special education teacher, serve as their child's teacher by implementing the prescribed curriculum and by recording their child's progress.

A complete program for home-based teaching has been developed by the Portage Project, CESA 12, 412 East Slifer Street, Portage, Wisconsin 53901. Materials available include a card file of 580 activity cards, and a correlated behavior checklist, instruction manuals, parent instruction manual, and a complete parent program, and parent readings.

Regional Special Education Coordinators should be able to tell you if these materials are already available in your region, or they may provide you with ordering information.



CHAPTER 4.
PROGRAM FACILITY AND CLASSROOM SETTING



4

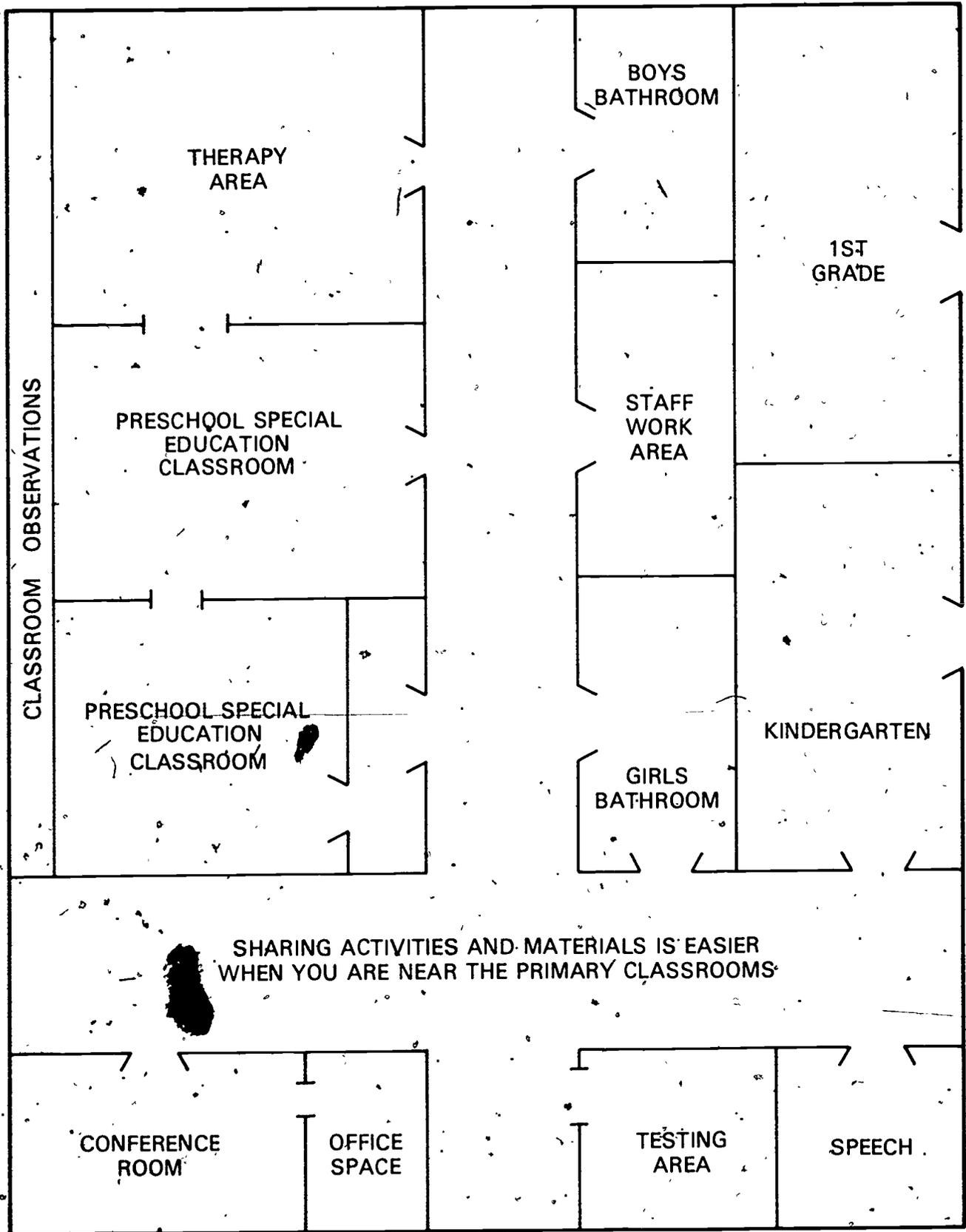
CHAPTER



WHAT SHOULD THE SCHOOL OR FACILITY INCLUDE?

1. A reception area, which is attractive and colorful (climbing toys, comfortable chairs).
2. Bathroom. Since this is an important area for one-to-one interaction of teacher or therapy staff and child, it should be adjacent to the therapy area and to the classroom. It can include: "Potty chairs" with arms, low on the floor; a table for changing diapers; space for children's clothes (clean and soiled); and a washer and dryer. Keep this area attractive with meaningful pictures and charts.
3. Therapy area. This could be a single room serving speech, occupational, and physical therapy. It should be located adjacent to the classroom to permit free interchange between staff and children. The room is used as a consulting area for teaching staff and parents in addition to providing a place for individualized evaluation and therapy. Therapists often work in the classroom and outdoor areas.
4. Observation room or area. A one-way window and intercom are desirable, but a simple muslin curtain over a window will suffice for viewing classroom, therapy, and bathroom areas.
5. Staff work areas for planning, record keeping, and developing instructional materials.
6. Storage areas.
7. Conference room suitable for informal gatherings of parents, staff conferences, and group meetings.
8. Kitchen area: refrigerator, stove, and a sink area with running water.

SAMPLE SCHOOL WITH PRESCHOOL SPECIAL EDUCATION PROGRAM:



WHAT SHOULD THE PRESCHOOL CLASSROOM LOOK LIKE?

A preschool environment should facilitate educational experiences and allow for the free flow of interaction between:

- Adult and child
- Child and child
- Child and materials

When planning the classroom, aim to give each child as much room for development as possible. Provide specific areas for varied multisensory experiences that encourage independence and self-care.

* *Be adaptable.* Consider the special needs of the children and families being served:

Doorway Accessible
to Wheelchairs

Incandescent
Lighting

Specific "Cubbies"
for Each Child

Adjustable Chairs
and Tables



**Be flexible.* Allow for change and novel stimulation while providing safety for very young children:

Small desks and tables
for individualized activities

Movable cupboards that allow
for division and redivision
of the room



Bean bag chairs for
sitting and balancing
as children climb over them

Quiet place away
from interaction
where the child
can be alone

**Present an inviting and comfortable appearance:*

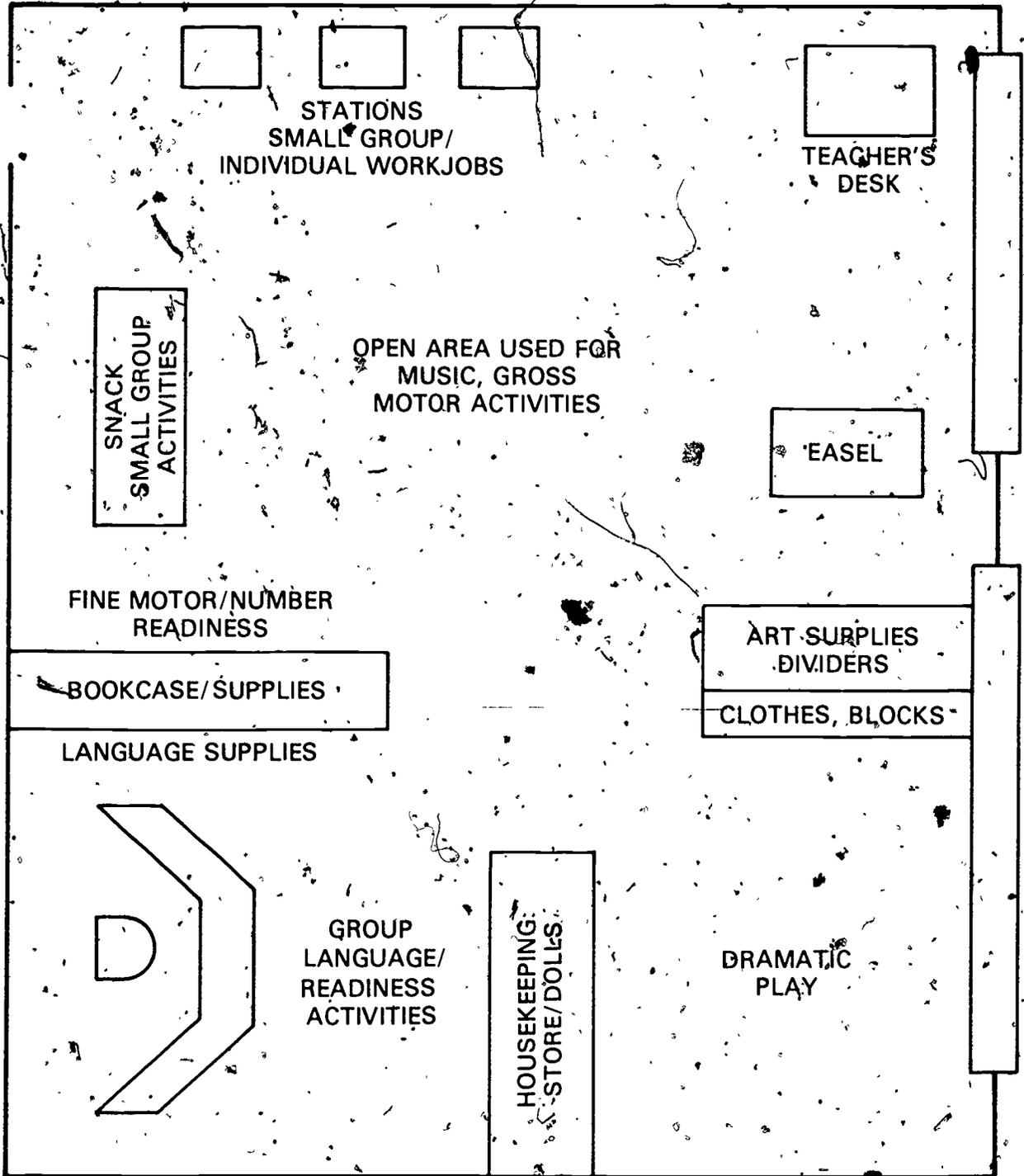
Interesting murals

Hanging baskets for storage

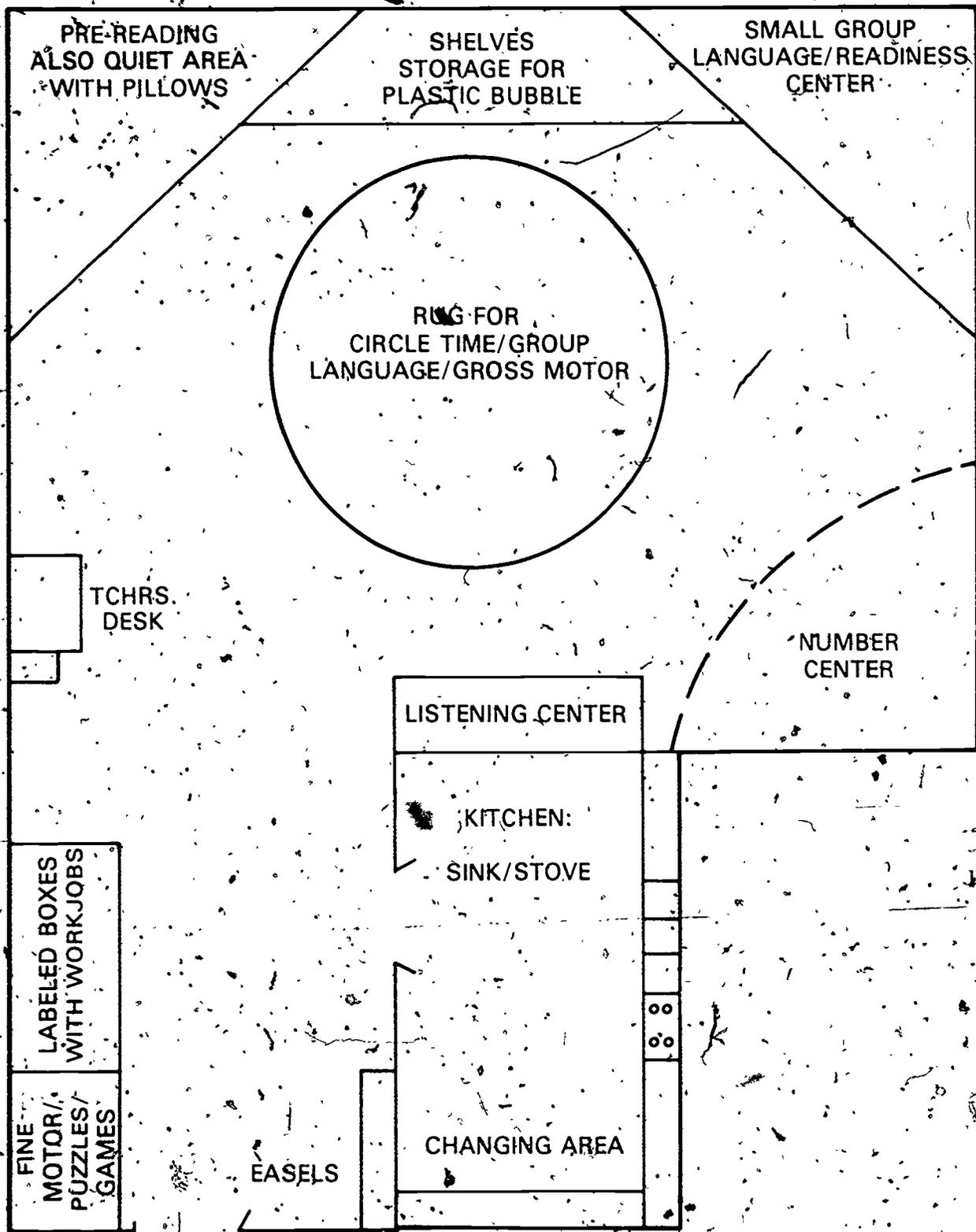
Cute curtains

Pictures of toys

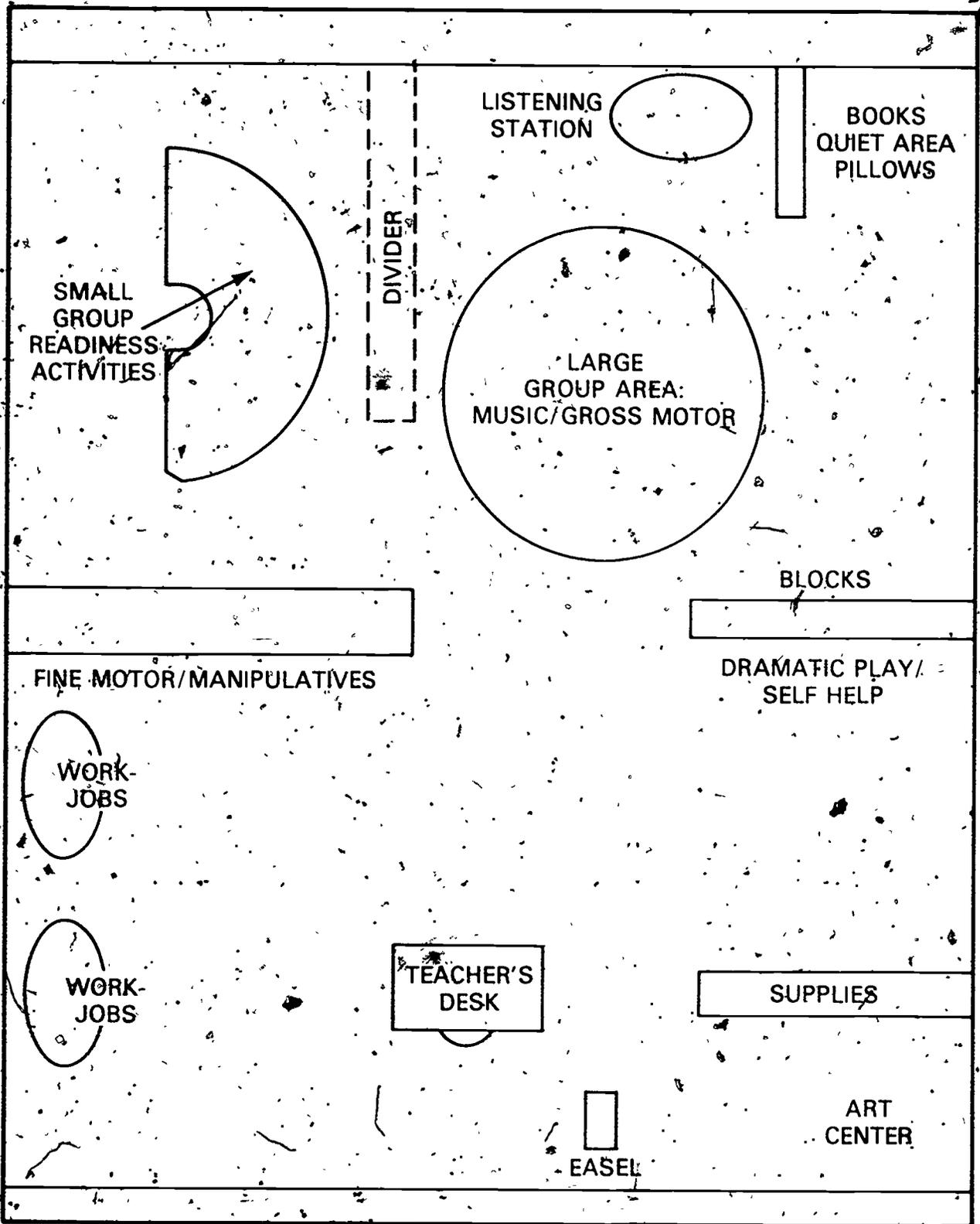
HOW SHOULD THE CLASSROOM BE SETUP? HERE'S ONE WAY



ANOTHER WAY TO SETUP YOUR CLASSROOM



AND STILL ANOTHER CLASSROOM ARRANGEMENT



**CHAPTER 5.
VOLUNTEERS**



5
CHAPTER

WHO MIGHT BE A VOLUNTEER?

Volunteers are drawn from many areas of the overseas community. Some of these sources include:

- Parents/Family
- Red Cross Volunteers
- Military Personnel
- PSAT Volunteers
- College Students
- Student helpers - Students in other classrooms or other schools

Junior high and high school students may serve daily as instructional aides if this elective program is available and schools are located close to a DoDDS preschool program.

Army/Air Force Community Services (or Navy Family Services) or the local Red Cross Chapter may have a list of people wishing to do volunteer work with children. Military personnel or dependents often wish to contribute to their communities while expanding the scope of their own experiences.

Overseas community colleges, colleges, and universities offer courses in education and psychology. These college students may benefit greatly by being able to work directly in a preschool special education program—and the program benefits, too.

Parents and PTSA members may wish to volunteer regularly, or to come into the classroom for special activities, such as cooking, art, music, or field trips.

WHAT IS THE ROLE OF VOLUNTEERS IN MEETING THE INSTRUCTIONAL NEEDS OF PRESCHOOL YOUNGSTERS?

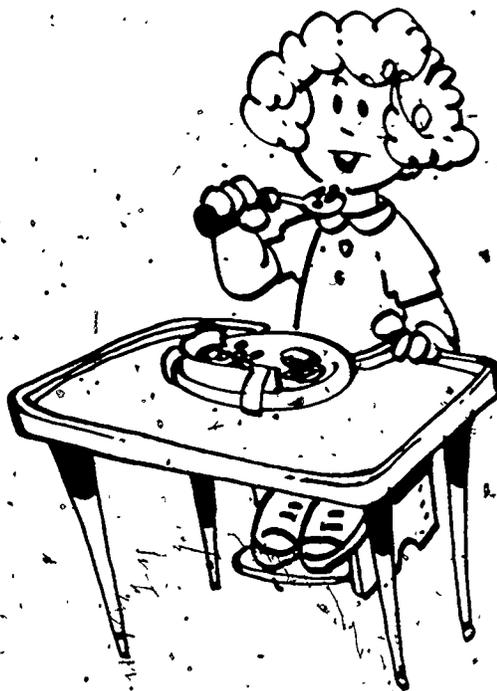
Volunteers can make important contributions in the preschool classroom. Under the guidance of the teacher, volunteers can assist children in completing tasks in many curriculum areas, can prepare instructional materials, and can provide individual attention to youngsters in work and play situations. Volunteers can help on field trips, provide special talents for classroom projects, and can indirectly support the program through clerical assistance, fund-raising, or contribution of materials and supplies.

Volunteers may participate on a regular, daily, or weekly basis, or may attend only for special activities. Some volunteers may concentrate their activities outside the classroom.

WHAT ARE SOME CRITICAL GUIDELINES FOR INTEGRATING VOLUNTEERS INTO THE PROGRAM?

- Volunteers need direction and purpose. Prepare and provide instruction for materials or activities which you want the volunteers to use. Be sure that volunteers understand how to keep records.
- Volunteers need to understand WHY it is important for them to be regular and dependable if they participate on an ongoing basis. Don't assume that a volunteer understands the amount of planning you do for his/her participation. Explain carefully the volunteer's role in part of the total program—an **IMPORTANT** part.
- Volunteers need feedback on their performance. Take time to ask your volunteers how they felt about their day. Inquire if they've had any problems, or if they have questions to discuss with you. Help the volunteers in their jobs by offering tips or guidance.
- Volunteers need to know that they are needed and appreciated. Say thank you often! Let volunteers know *specific* ways they have contributed to the program.

"Bill, Your work with Sally has really made a difference. She can eat by herself now!"



HOW TO GET AND KEEP VOLUNTEERS

- Provide a wide range of volunteer opportunities so that varied interests and skills can be accommodated.
- Establish procedures for recruiting volunteers. Differentiate between staff responsibilities and volunteers' tasks.
- Survey the volunteers' areas of interest, and assign them to enjoyable areas.
- Make sure assignments meet both the needs of the program, and skills and interests of the volunteers.
- Give volunteers a chance to observe the children. This will be helpful training.
- Publicize volunteers' contributions through newsletter.
- Consider holding a luncheon or dinner to honor volunteers, and present them each with a certificate of appreciation.
- Keep a log of volunteer attendance and activities so that you know what they are doing and how they feel.

VOLUNTEER ACTIVITY LOG	
NAME: <u>John Day</u>	
DATE	DESCRIPTION OF ACTIVITY/REMARKS
4/10/81	David sorted groups of 4 with limited assistance
	Jan identified pictures that were the same - missed 3 out of 20

SAMPLE

SURVEY OF VOLUNTEER INTERESTS

Name _____

Check if you would like to participate in any of the following activities:

- Play games with the children.
- Cook or bake with the children.
- Read a story to some of the children.
- Teach a song or some music activity.
- Conduct an art activity.
- Work with small groups on learning skills.
- Work puzzles with small groups.
- Conduct gross motor activities.
- Help make classroom materials.
- Prepare and help serve nutrition break.
- Help plan and prepare a field trip.
- Do typing for the center.
- Help make playground equipment.
- Share your hobby in class.

What is your hobby? _____

Other ideas you may have: _____

CHAPTER 6.
PARENT INVOLVEMENT



6

CHAPTER

GOALS OF A PARENT PROGRAM

- To provide the most effective program to meet the needs of the child.
- To support parents of exceptional children and to help fulfill their personal needs as individuals.

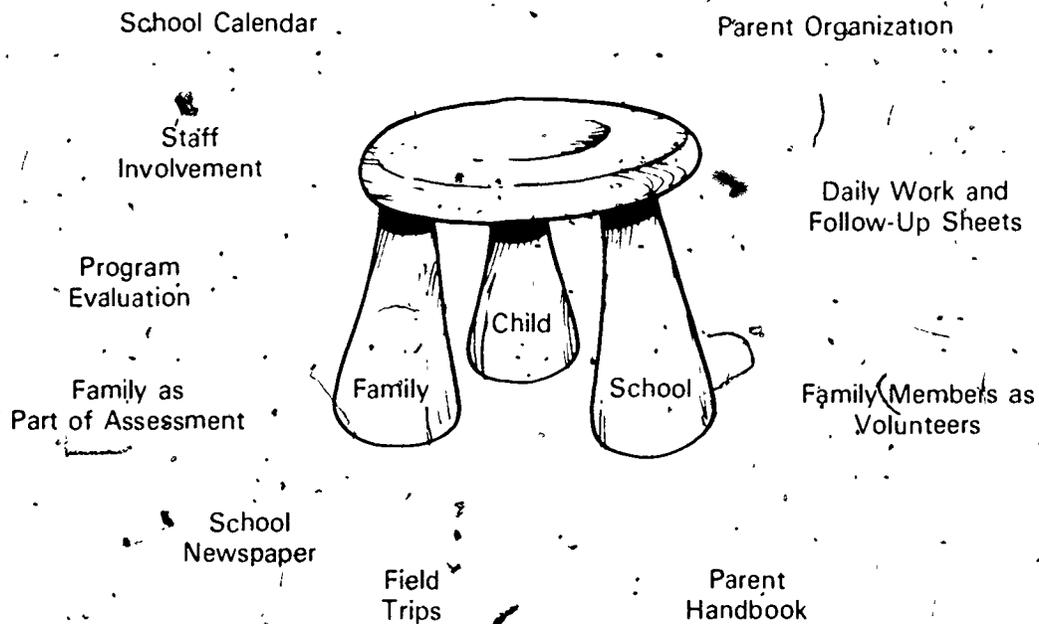
WHAT ARE THE PURPOSES OF A PARENT-INVOLVEMENT PROGRAM?

1. *To acknowledge parents' rights to be involved in the educational process of their children.* If parents are to be held accountable for their child's development, it is essential that we support their involvement. According to the Privacy Act of 1974, DoDDS must provide parents with access to official records. Therefore, it is extremely important that we assist parents, so they can understand their child's records and needs.
2. *To enable parents and teachers to work as an educational team.* If parents are encouraged and trained to reinforce skills at home, then the child's program becomes optimally effective. This consistency between school and home will not only reinforce academic skills, but will also provide emotional stability.
3. *To assist in providing an appropriate individual program for each child.* When parents and teachers work as an IEP team, they develop more appropriate objectives by sharing their knowledge of, experience with, and observation of the youngster. Parent involvement can greatly accelerate the child's rate of learning in achieving goals developed in the IEP.
4. *To provide the teacher an opportunity to inform family members about child development and learning skills.* The teacher should assist the parents in recognizing their child's accomplishments and helping them to reward their child through the use of positive reinforcement. With time and guidance, the parents and teachers will learn to recognize the child's accomplishments. As teachers' and parents' positive perceptions of the child increase, their sense of pride and self-worth also increases.

5. *To form a supportive organization for parents of the exceptional child.* It is impossible to have all the answers as a teacher, but you can help to provide solutions and alternatives. Through a parent-teacher organization, the parents of exceptional children will learn to support each other and provide practical advice. Parents and teachers should be encouraged to participate on community committees, councils, and other organizations advocating for exceptional children.

6. *To assist families in gaining support from needed community services.* Teachers and administrators should take an active role in identifying community resources for exceptional children and their families, especially where no preschool school program exists. Community resources also can add to services provided by DoDDS in schools where programs are ongoing.

ACTIVITIES FOR A SUCCESSFUL PARENT PROGRAM



Activities for a Successful Parent Program

1. STAFF INVOLVEMENT

- I see my students' families as core members of this team.
- I believe parents have a justified right in being an active member of this team.
- I will look at each family individually and try to build on their strengths and improve their weaknesses.
- I will be flexible in dealing with each family, realizing how different they each are.
- I will encourage total family involvement, but will accept whatever level each family gives and still remain supportive.
- I will find the *positives* in each parent as I do in each child.

2. CHILD ASSESSMENT AND THE FAMILY

The tone during the assessment activities will affect significantly the role parents feel they should play if and when their child becomes involved in the preschool program for exceptional children. Use the initial assessment meeting to share ideas about the program and their concerns. These ideas may help:

- Let parents tell you about their child, and then ask them to complete the student information sheet. (Ex. 1.)
- Provide a brief explanation of your program: philosophies, goals, policies and parents' responsibilities.
- Share a copy of the parent handbook with them.
- Ask the parents to complete a parental checklist, identifying their needs and concerns for their child and areas in the program where they may want to be involved. (Ex. 2.)

3. DAILY WORK SKILLS AND HOME FOLLOW-UP SHEET

A weekly one page sheet should inform parents of skills you are working on at school, so they can provide follow-up at home. The Follow-Up sheet is a continuous, simple progress report that will support the child's learning process. Encourage your aides and volunteers to provide input for the Follow-Up Sheet. Some things to recommend:

- Activities the child is presently working on or is capable of mastering at home within a week. (Ex. 3.)
- Activities that will fit into the family's daily routine: simply described with examples.
- Reinforcement for follow-up activities at home or help they have provided—include siblings whenever possible.

4. PARENT ORGANIZATION

Involve parents in planning the organization: its goals, objectives and specific activities. Here are some helpful hints:

- Prepare a parent organization interest form to assess the needs and desires of the parents. (Ex. 4.)
- Always provide parents with a copy of the agenda at the meeting. (Ex. 5.)
- At the first meeting, make a tentative outline of proposed activities and meetings for the school year.
- Encourage social/emotional support among the parents through the use of resource educators/pediatricians/community leaders who can provide information on desired topics.
- Use the parent organization as an opportunity for parents and staff to share ideas on child-raising techniques and practices, how to utilize everyday experiences as learning situations, and how to use community resources in providing for learning activities.
- Always ask for parents to evaluate the meeting. Their feedback is important in determining future needs and encouraging more complete involvement. (Ex. 6.)



5. SCHOOL NEWSPAPER

A newsletter is a means of bridging the gap between home and school. It insures that *all* parents are informed of school interests and activities. It also may be used as an effective public relations tool by expanding your mailing list to include school officials, interested military personnel, and civilian or military organizations. Some hints for your paper:

- Make it attractive and exciting by selecting content based on the needs and interests of your families.
- Provide articles that give information for home activities. These may be from the staff, other teachers, or published materials. Best of all, use contributions from parents, and give them the "glowing" recognition.
- Use first names when referring to your students—families enjoy seeing their child's name in print!
- Make your newsletter a team effort; encourage parents, teachers, volunteers, and children to contribute.
- Keep it simple, enjoyable, and informative. (Ex. 7-8.)
- Encourage parents to talk with their child about activities described in the newspaper. This is important particularly for the child who otherwise can't tell, "mommy what he/she did in school this week."

6. SCHOOL CALENDAR

A school calendar gives parents a quick, easy reference for daily activities and upcoming events. Try some of these ideas:

- Send it home prior to the beginning of each month.
- Use graphics as much as possible for simplicity and aesthetic appeal—that way, the child can “read” it, too! (Ex. 9.)
- Provide a calendar at your parent meeting so that parents can contribute to upcoming activities.
- Instruct parents how to use the calendar as a teaching tool for their child.
- Post one in the classroom, or an enlarged duplicate, and refer to it with the children.



7. PARENTS/FAMILY MEMBERS AS VOLUNTEERS

Encourage any family member, including grandparents, aunts, uncles, brothers, and sisters, to participate as a volunteer. Their assistance will enable them to become enthusiastic and knowledgeable advocates. Provide a wide range of activities for families to be involved in:

- Direct classroom activities, working with small groups or individual students.
- As a helper on field trips.
- As a guest to demonstrate a skill or to share some ideas about his/her work.
- On a specific committee within the parent organization.

- To develop games or activities to use in the classroom—brothers and sisters often enjoy this.
- As an advocate within the community, sharing information concerning the program.

8. PARENT HANDBOOK

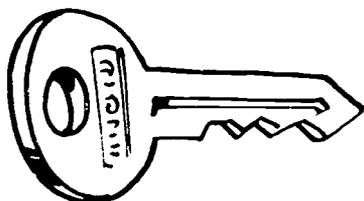
A parent handbook is a very valuable and tangible way to inform and include parents in your program. The purpose of the handbook is to give parents pertinent program information and to provide a reference guide when questions arise. (Ex. 10.)

Helpful Hints:

- Involve parents in the planning of your parent organization book.
- Circulate books either at enrollment or soon after.
- Discuss the contents of the handbook verbally, as well as in writing.
- Distribute the handbook to agencies or organizations who have contributed or who may want to contribute a donation to your program.
- Keep the book updated and reviewed.
- Keep text simple with graphic illustrations.

9. FIELD TRIPS

Field trips often require more supervision than your staff can provide, so parents become a valuable resource for these experiences. The selection of field trips can identify local points of interest that may be free or inexpensive; ask parents for their ideas, too! Field trips also offer parents and staff a better chance to become acquainted.



Key Point

Provide clear information about your field trip:

- Purpose of the trip.
- Time involved

- Parents' responsibilities
- Behavior expected of the children
- Recognize in a special way parents who volunteered.
(Your newspaper comes in handy here.)



10. PROGRAM EVALUATION

Continuous evaluation is the key to a successful program. It helps unite parents and staff by supporting each other's efforts and encouraging further planning. Some ideas:

- Evaluate each step of your parent program through staff and parent feedback.
- Keep records of your program activities and the growing evaluation process.
- Meet with staff weekly to evaluate your program that week.

PARENT INVOLVEMENT
SAMPLE
FORMS AND ACTIVITY SHEETS

CHILD FIND STUDENT INFORMATION FORM

Date _____

Name of Child _____ DEROS Date: _____

Name of Parents _____ Age _____

Unit _____ Unit Tel: _____

Home Address _____ Home Tel. _____

Emergency Name _____ Emer. # _____
(A friend, neighbor, family)

Name of Pediatrician _____ Tel. # _____

Is your child presently taking medication? _____ YES _____ NO

If so, please list type of medication and dosage _____

Does your child have any specific physical or medical needs other than medication?

Is your child presently attending: Preschool _____ Day care _____

If so, where? _____

Names of brothers and sisters	Ages
_____	_____
_____	_____

Who referred you to this program? _____

Reason for referral/areas of concern: _____

Below this line answer only when first applying to program.

AUTHORITY Title V, Sec. 301, Title X, Sec. 133; Title XX, Secs. 921 & 922; EO 9297, PL 94-142

PRINCIPAL PURPOSES To obtain basic background information on prospective participants in DoDDS preschool handicapped program

PRINCIPAL USES Form will be used by educational specialists as part of background file for preschool handicapped child

MANDATORY/VOLUNTARY DISCLOSURE/EFFECT OF NON DISCLOSURE Voluntary Failure to provide information may result in inability to admit child to program

96101

PARENTAL CHECKLIST FOR NEEDED SERVICES

EXAMPLE 2

Please check appropriate answer.

	LITTLE IMPORTANCE	SOME IMPORTANCE	VERY IMPORTANT
1. Interpretation of your child's test results			
2. Training in classroom activities for carry through at home			
3. Training as a classroom assistant			
4. Training in managing bad behavior, toileting, eating habits, etc.			
5. Counseling for family problems			
6. Assistance in acquiring needed community services			
7. Assistance in acquiring appropriate bus transportation			
8. Physical therapy for your child			
9. Occupational therapy for your child			
10. Speech therapy for your child			
11. Suggestions and demonstrations for home activities			
12. A need for a parent organization			
13. Receiving a monthly calendar			
14. Receiving a newsletter			
15. Teaching siblings to work with their exceptional brother/sister			
16. Frequent parent/teacher conferences			

**DAILY WORK SKILLS
AND
HOME FOLLOW-UP SHEET**

DATE: _____

This week _____ will be working on...

(1) Tracing lines

Tod will be working on these skills at school:

- (1) Tracing straight lines on the blackboard.
- (2) Tracing straight lines on the easel with paint.
- (3) Tracing his name on lines made with a blue marker.

Here are some skills you can try at home:

- (1) Let John (Tod's brother) draw a simple picture for him, and he can trace it. He may want to color it also - encourage him not to touch his pretty lines.
- (2) Draw 2-inch letters with big dotted lines for him to trace. Use letter T.

Sincerely,

PARENT ORGANIZATION INTEREST FORM

Please (X) the programs you would like to have presented at our meeting. Put two X's (XX) by the programs in which you will assist (arranging for the speaker, setting up materials, cleaning up, etc.).

Programs Available

- | | |
|---|---|
| <input type="checkbox"/> Behavior Management | <input type="checkbox"/> Children's Toys |
| <input type="checkbox"/> Nutrition | <input type="checkbox"/> Children's Books |
| <input type="checkbox"/> Language Development | <input type="checkbox"/> Benefits of Jogging for Children |
| <input type="checkbox"/> Developing a Positive Self-Concept | <input type="checkbox"/> Discipline |
| <input type="checkbox"/> Childhood Diseases | <input type="checkbox"/> Sterilization |
| <input type="checkbox"/> Hyperactivity | <input type="checkbox"/> Sex and the Handicapped Child |
| <input type="checkbox"/> P.L. 94-142—Special Education Act | <input type="checkbox"/> |
| <input type="checkbox"/> Kindergarten Curriculum | <input type="checkbox"/> |
| <input type="checkbox"/> Preschool Curriculum | <input type="checkbox"/> |

Social Activities

- Pot Luck Dinner with Children
- Pot Luck Dinner without Children
- Family Picnic
- School Play

Do you have a craft or skill you could share with us (example: sewing, cooking, building, electrifying, painting, art, music, weaving, woodworking, etc.)?

Would you contribute refreshments at our meetings?

..... YES NO

..... NAME

**PARENT ORGANIZATION
MEETING AGENDA**

WHEN: October 21, 1980

WHERE: Center for Exceptional Children

WHAT:

A. Mixer Game

B. Introduce Guest Speaker: Nancy Stanton

Topic: Discipline in the Home

Slide Presentation: "Positive Ways to Handle Bad Behavior"

Discussion

Parent Handouts

C. Refreshments

D. Parent Information

1. List events on school calendar

2. Articles for newsletter

3. Information for volunteers

4. Game - Nailboard

Board spray painted. Parent can pound nails

(36 rows, six per row). Parent can make

designs on 6- by 6-inch cards. Children will

reproduce designs with colored rubber bands.

E. Evaluation of Meeting

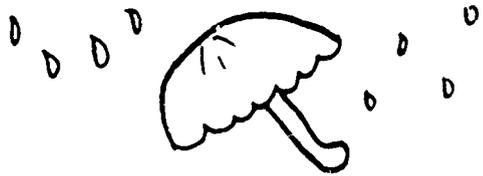
**PARENT ORGANIZATION
MEETING EVALUATION SHEET**

DATE OF MEETING: _____

1. Was the meeting well organized?
2. Did you find the meeting interesting?
3. Did you find the material presented informative?
4. Was the material clearly presented?
5. Was there enough time allowed for your questions?
6. Were the objectives of the meeting clear?
7. If you would change this meeting to fit your needs, what would you change?

8. What topic would you like to discuss at our next meeting?

THE CENTER SAYS



Rain, Rain, go away, little children want to play! Yes, it has been raining these last two weeks. We have been studying units on fruits, body parts and circus animals. Ask us about what we learned!



"What's Happening"

Our students have been working so hard: our line to and from the bathroom is just beautiful and we can hang up our coats with almost no help! Chad is our natural leader and the architect of the group. He has created several interesting structures with our blocks and when he teams up with Sara in our kitchen--- WATCH OUT!! They completely redecorate. We are super-proud of Bert--- he knows all his body parts. Hurrah!

MONEY

We have a great recipe for you to make at home. We tried it at school and it is nutritionally packed with protein.

2 cups powdered milk
2 cups peanut butter
1 cup honey
1 cup wheat germ



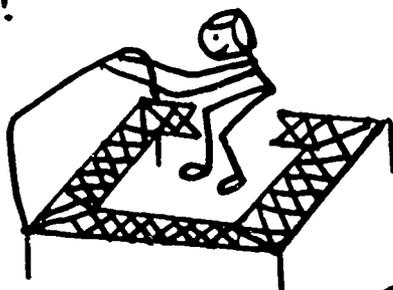
Make into bite size balls and roll in wheat germ, nuts, or coconut.

FRIDAY NEWS

Dear Mom and Dad,

These are some of the things we did in school this week:

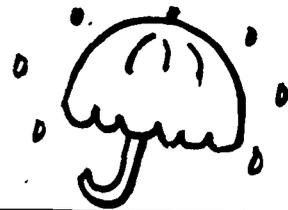
- ① We got a little trampoline. We had fun jumping on it!



- ② We went to the zoo. Ask me about these animals!



APRIL



EXAMPLE 9

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1 Bowling 9:45-11:10 	2
3	4 Mrs. Cone coming to make pizza M-m-m-m Good!	5	6 Field Trip to the hospital! 	7	8 Bowling 9:45-11:00 	9
10	11 TB TINE TEST AT SCHOOL	12	13 Parent Meeting at 	14	15 9:45-11:00 Swimming	16
17	18	19 Happy Birthday, Susie	20	21 Mrs. Jones coming to plant seeds 	22 9:45-11:00 SWIMMING	23 1
24	25	26	27	28	29 9:45-11:00 Bowling 	30

104

105

PARENT HANDBOOK

○	INTRODUCTION WITH AN EXPLANATION OF THE PRESCHOOL PROGRAM.
	PROCEDURES FOR ADMISSION INTO PROGRAM.
	PROGRAMS AND SERVICES PROVIDED BY THE TOTAL STAFF. INCLUDE THE DAILY SCHEDULE, EVALUATIONS, ACTIVITIES, CONSULTANTS, PHYSICAL THERAPY, OCCUPATIONAL THERAPY, HOME EDUCATION, FAMILY SERVICES, MEALS, ETC.
	STAFF DIRECTORY NAMES, POSITIONS, AND PHONE NUMBERS, WHEN APPLICABLE.
○	
	PARENT INVOLVEMENT INFORMATION. SUCH AS PARENT VOLUNTEERING, CLASSROOM OBSERVATIONS, HOME VISITS, CONFERENCING, ETC.
	FORMS USED IN CENTER SUCH AS NEWSLETTER, CALENDAR, FIELD TRIP PERMISSION, STUDENT REPORT FORMS, ETC.
	STUDENT NEEDS, SUCH AS CLOTHING, OR SCHOOL MATERIALS.
○	YOU MAY INCLUDE MANY MORE ITEMS WHICH MAY BE OF INTEREST TO PARENTS, BUT REMEMBER NOT TO BE TOO LENGTHY. WE WANT PARENTS TO READ THIS HANDBOOK AND REFER TO IT.

CHAPTER 7.
RESOURCES AND BIBLIOGRAPHIES

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- Parents Working with Their Child
- Activities for Home and School
- Bibliography

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CHILDREN TODAY. Superintendent of Documents, Government Printing Office, Washington, D.C. 20402. A magazine published through the Department of Health, Education, and Welfare Administration, Children's Bureau. It includes current events, programs, and research relating to the life of children from infancy through the high school years (bimonthly - \$6.10 per year).

DAY CARE AND EARLY EDUCATION. 72 Fifth Avenue, New York, NY 10011. A magazine published by the Day Care and Child Development Council of America. It is written for day care, preschool, or early childhood staff and parents. It contains articles on current issues concerning the education of young children and various learning activities.

EARLY CHILDHOOD NEWSLETTERS - A SELECTED GUIDE. Available from Publication Office, College of Education, University of Illinois, 805 West Pennsylvania Avenue, Urbana, IL 61801. A listing of newsletters and other serial publications concerned with topics of interest to educators working with young children (pub. #106, \$.75).

EARLY YEARS. Circulation Service Center, PO Box 1069, Skokie, IL 60076. Contains articles dealing with the education of young children, many of which are contributed by current teachers. It also contains many excellent teaching ideas in the "Green Pages", which are ideas submitted by teachers (9 issues - \$8.00).

Parents' Magazine Films, Inc.
Department of "F": 52 Vanderbilt Avenue
New York, NY 10017
Available from:

Division of Elementary & Secondary Education
Section for Exceptional Children
State Capitol Complex
Pierre, SD 57501

SOURCES FOR INFORMATION- Pamphlets and materials are available from these sources for little or no cost.

AMERICAN ASSOCIATION OF MENTAL DEFICIENCY
5201 Connecticut Avenue NW, Washington, D.C. 20015

AMERICAN INSTITUTE OF FAMILY RELATION
5287 Sunset Blvd., Los Angeles, California 90027

ASSOCIATION FOR CHILDHOOD EDUCATION INTERNATIONAL
3615 Wisconsin Avenue, NE
Washington, D.C. 20016

COUNCIL FOR EXCEPTIONAL CHILDREN
1920 Association Drive
Reston, Virginia 22091

EDUCATION DEVELOPMENT CENTER
Early Childhood Education Study
55 Chapel Street
Newton, Massachusetts 02150

EPILEPSY FOUNDATION OF AMERICA
1828 L Street, NW
Washington, D.C. 20036

NATIONAL ASSOCIATION FOR RETARDED CITIZENS
1522 K Street, N.W.
Washington, D.C. 20005

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