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ABSTRACT

The document serves as a directory of federal projects in the Handicapped Children's Early Education Program (HCEEP). An introduction describes the HCEEP network and briefly summarizes results of a recent evaluation study. The overview section then describes the five types of HCEEP projects: deomonstration projects, outreach projects, state implementation grant projects, early childhood research institutes, and the Technical Assistance Development System (TADS). The bulk of the document is composed of project-written abstracts for each of the 117 HCEEP projects. Abstracts typically include information on address, fiscal agency, administrative personnel, characteristics of the target population, the program for children, measures of child progress, the program for parents, and features and products. Indexes by type and by subtopics within each type (such as integration experiences, philosophical approach, and child assessment measures for planning instruction) conclude the document. (CL)

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Handicapped Children's Early Education Program

1982-83 Overview
and Directory
Produced by the
Technical Assistance
Development System (TADS)
for Special Education Programs
U.S. Department of Education

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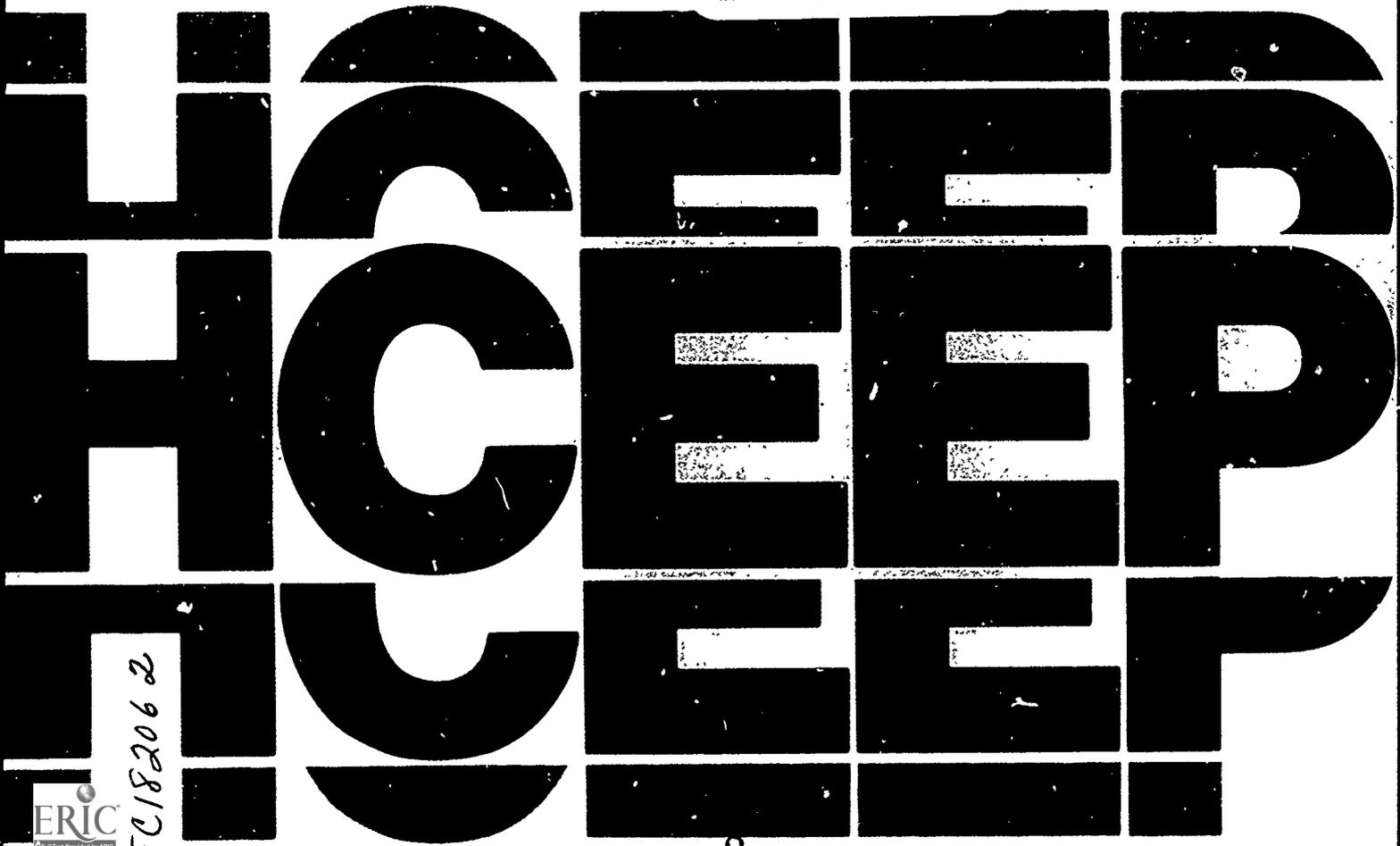
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Managing Editor: Daniel Assael
Assistant Editor: Joni Porter
Data Processing: Tanya Suarez, Ella Akin
Editorial Assistant
and Typist: Terry Rothra
Cover Design: Daniel Rogers

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Gary Lambour, Project Officer to TADS
Special Education Programs
U.S. Department of Education
400 Maryland Avenue, S.W.
Washington, D.C. 20202

Pascal L. Trohanis, TADS Director and Principal Investigator

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PREFACE

This document, produced by the Technical Assistance Development System (TADS) for Special Education Programs (SEP) of the U.S. Department of Education, is a directory of projects supported by SEP grants and contracts in the Handicapped Children's Early Education Program (HCEEP). This document also presents an overview of HCEEP's activities.

The 1982-83 HCEEP Overview and Directory contains five sections:

- * The Introduction describes the HCEEP network and the results of a recent evaluation study.
- * The Overview section summarizes the activities of the five types of HCEEP projects: demonstration, outreach, and State Implementation Grant (SIG) projects; early childhood research institutes; and the technical assistance center.
- * The Directory section includes project-written abstracts for each of the 117 HCEEP projects.
- * The number assigned to each project on the Project Listing represents the page on which each project's abstract appears in the Directory section. These numbers also represent the projects in the Index section.
- * The Index provides a guide to projects' pertinent characteristics (e.g., handicapping conditions of children served, parent activities offered, curricula used, etc.).

This document presents the national effort of the HCEEP network in a manageable perspective for use by those directly or indirectly involved in that effort. Families may look to this book to find out who and what programs can help their children. Service providers may use it to collaborate with other professionals. Lawmakers, administrators, and other policy makers may refer to the Overview and Directory for a comprehensive, up-to-date portrait of the diverse activities their decisions may affect. SEP and TADS hope the Overview and Directory will stimulate interest in the needs of America's young handicapped children and their families and further the aim of HCEEP -- to create more and better services for all young handicapped children.

INTRODUCTION

by
Jane DeWeerd
Early Childhood Section Chief
Special Education Programs
U.S. Department of Education

The mandate of the Handicapped Children's Early Education Program (HCEEP) is to help the development and carrying out of experimental preschool and early childhood programs that show promise of promoting a comprehensive approach to the special problems of handicapped children. The program is fulfilling this mandate through five complementary components.

- The demonstration component supports the development of models for effective services for young children and their families.
- The outreach component provides an opportunity for projects which have completed the three-year demonstration phase, and obtained continuation funding from state or local sources, to respond to requests for assistance in replicating/adapting their models.
- The State Implementation Grant (SIG) component provides resources for state education agencies for the development and implementation of comprehensive statewide plans for early childhood.
- Technical assistance is provided to demonstration, outreach and SIG projects through a technical assistance contract.
- Early childhood research institutes conduct research in areas relevant to early intervention for children from birth to age 6 years.

BACKGROUND AND CURRENT STATUS

In 1968, the U.S. Congress held hearings that led to the passage of legislation establishing the Handicapped Children's Early Education Program, sometimes called the "First Chance Network." The hearings pointed to the need for locally designed ways to serve infants, young children, and their families; for more specific information on effective programs and techniques; and for the distribution of visible, replicable models throughout the country.

In the summary and discussion of the provisions, the drafters of the original legislation pointed out that the law, H.R. 17829, addressed the important need of providing major services to handicapped children at a very early age. Only early intervention with tested and successful models, they affirmed, would allow professionals to deliver the best services to handicapped children.

Bipartisan support for the legislation was strong, and the committee's intent was clear. The subcommittee, chaired by Congressman Carl Perkins of Kentucky, submitted a report to the House Education and Labor Committee emphasizing that HCEEP was a model demonstration program and not a service program. In addition, the report asserted that those programs promising meaningful approaches to the education of the handicapped should be eligible for permanent legislation in the future.

HCEEP affords an opportunity for any public or private nonprofit organization to develop and demonstrate high-quality services for a selected group of children and their families. It also affords an opportunity to prove the effectiveness of the locally designed approach and disseminate it anywhere in the nation to other agencies that choose to use the model rather than to invest the time and resources to develop their own programs.

HCEEP began as a small program of 24 demonstration projects. As circumstances in the field changed, HCEEP evolved into an effort with five major, complementary components (see Figure 1).

Figure 1

Handicapped Children's Early Education Program

PURPOSE To Assist in Developing and Implementing Innovative Experimental Programs for Young Handicapped Children (Birth to Eight Years) and Their Families

PROJECTS	DEMONSTRATION	OUTREACH	STATE IMPLEMENTATION	EC INSTITUTES	TECHNICAL ASSISTANCE
ACTIVITIES	DEVELOPMENT OF EXEMPLARY MODELS SERVICES TO CHILDREN SERVICES TO PARENTS STAFF DEVELOPMENT PROGRAM EVALUATION COORDINATION WITH PUBLIC SCHOOLS DEMONSTRATION AND DISSEMINATION	STIMULATION OF INCREASED AND HIGH QUALITY SERVICES TRAINING CONSULTATION STATE INVOLVEMENT AND COORDINATION DISSEMINATION OF INFORMATION PRODUCT DEVELOPMENT AND DISTRIBUTION	DEVELOPMENT AND IMPLEMENTATION OF EARLY CHILDHOOD STATE PLANS ASSESSMENT OF NEEDS AND RESOURCES TRAINING DATA COLLECTION AND ANALYSIS INTERAGENCY AGREEMENTS DEVELOPMENT OF GUIDELINES, STANDARDS, CERTIFICATION REQUIREMENTS, ETC.	LONG-TERM INVESTIGATION OF SELECTED ASPECTS OF EARLY EDUCATION FOR HANDICAPPED CHILDREN RESEARCH INTO DIRECT APPLICATION OF EARLY EDUCATION PROGRAMS IN TYPICAL SETTINGS	TECHNICAL ASSISTANCE TO DEMONSTRATION PROJECTS, OUTREACH PROJECTS AND STATE IMPLEMENTATION GRANT PROJECTS ASSESSMENT OF NEEDS PROGRAM PLANNING EXPERT CONSULTATION EVALUATION
ELIGIBLE PARTIES	PUBLIC AND PRIVATE NONPROFIT AGENCIES	FORMER DEMONSTRATION GRANTEE'S MEETING CRITERIA	STATE EDUCATION AGENCIES	PUBLIC AND PRIVATE NONPROFIT AGENCIES	PUBLIC AND PRIVATE NONPROFIT AGENCIES
TYPE OF FUNDING	GRANT	GRANT	GRANT	CONTRACT	CONTRACT
FUNDING PERIOD	3 YEARS ANNUAL RENEWAL	1 YEAR POTENTIAL FOR RENEWAL	2 YEARS RENEWAL	5 YEARS	3 YEARS ANNUAL RENEWAL

Demonstration

There are presently 55 demonstration projects sponsored by private agencies, universities, local schools, state education agencies, and other organizations. Demonstration projects feature these components: child identification and assessment, educational/therapeutic programming for children, evaluation of child progress, active parent/family participation, in-service training, coordination with public schools and other agencies, evaluation of project objectives, and demonstration and dissemination of project information. The demonstration projects have cooperated with a wide array of other agencies at the local, state, and regional levels.

The demonstration projects form HCEEP's base. They have a difficult mandate to carry out in a three-year period, but the record shows that nearly all the projects meet, and many surpass, their objectives. The projects have demonstrated that many young children with handicaps are capable of making greater gains during the critical early years than their prognoses had indicated.

During 1982-83, several projects are attempting to chart new ground:

- * The ERIN Project, Dedham, Massachusetts, is producing screening material in 13 languages for nondiscriminatory testing.
- * The Petersburg, Virginia, project is producing materials for use with parents who are handicapped. The materials, which are categorized by the parents' handicap, list special modifications in training, communicating and working with parents with different kinds of disabilities.
- * The Madison, Wisconsin, Public School is developing materials that guide heavy parent participation in the "Individualized Education Program" process. In this project, parents learn about child development and how to provide accurate, useful information on how their children function in the home and in neighborhood settings.
- * The Providence (Rhode Island) Mental Health Center is working with children of parents who have experienced psychotic episodes and in some cases have abused drugs.
- * Two projects -- at the JFK Child Development Center, Denver, and the University of Pittsburgh -- work with severely emotionally disturbed children to integrate them into regular public schools.
- * The University of Arkansas project is working with hard-to-assess children not adequately diagnosed in other assessment centers.
- * At the Utah State University Social Integration Project, peer training is being used in regular daycare centers that are beginning to include handicapped children.

The current focus of the HCEEP demonstration program is on development and demonstration of new approaches and on effective models with high potential for widespread use. These priorities are listed in the application packet for new demonstration applications for the 1983-84 year:

- o The needs of the birth-to-age-3 population;
- o The needs of special populations of handicapped children, such as immigrants, refugees, foster children, migrants, economically disadvantaged minorities, and other children in need of special services;
- o The need for models for successful transition of children from the project site into an appropriate follow-up placement;
- o The needs of children and their families in rural, sparsely populated areas;
- o The needs of chronically ill, visually handicapped, and deaf-blind children;
- o The need for models for joint development and expansion of exemplary programming through a partnership of state or local agencies;
- o The need to better use technology in the delivery of preschool special education services.

Outreach

HCEEP's outreach component was developed in 1972. During the 1982-83 funding year, HCEEP supports 45 outreach projects. They are working to meet two goals: to stimulate the development of high-quality services and to develop models for outreach activities.

Outreach projects stimulate new or improved services and train staff of agencies requesting assistance. Experience has shown the necessity for awareness activities to inform decision makers of the importance and effectiveness of early intervention and of the features and effectiveness of the model developed during the demonstration phase. Product development and distribution and involvement with state agencies concerned with providing services to young children are other frequent activities. Current target audiences for outreach efforts are public schools, private nonprofit agencies, state education agencies, Head Start programs, mental health and mental retardation agencies, daycare programs, Indian tribes, nursery schools, medical programs, health departments, and universities.

The variety and range of outreach activities are illustrated by these examples of current work:

- * The University of Idaho's outreach effort includes replication of a cost-efficiency component.
- * Vanderbilt University is computerizing a rural data bank to provide rural areas with easy access to assistance in initiating or improving preschool services.

- * The Northern Westchester (New York) BOCES, a public school regional education entity, has formed a consortium of adoption sites which meets regularly to evaluate the extent of incorporation of the model.
- * Ohio State University is extending training in its pediatric residency curriculum to new medical training facilities.
- * In Maine, the Washington County outreach project provides training for services in a very isolated, rural part of the state.

For the grant competition for 1983-84, emphasis is being given to the applicants who:

- o have evidence of effectiveness and are programmatically and economically advantageous;
- o respond to state and local policy -- e.g., models that relate to a state plan for early childhood services;
- o promise a high level of results in stimulating new services and improving existing services,
- o have developed models which have not been funded previously for outreach activity.

This approach is responsive to the recommendation made in the Littlejohn impact analysis (discussed later in this Introduction) that both highly productive, previously funded outreach projects and projects never before funded for outreach be supported to sustain impact and to introduce new models to outreach.

State Implementation Grants

The State Implementation Grant (SIG) component began in 1976. This component is designed to help state education agencies build their capacity to plan for the development and expansion of early intervention services for handicapped children. SIG grants help states develop long-term, comprehensive, full-service plans for the preschool education of the handicapped. Toward this purpose, SIG projects convene planning groups, disseminate established plans, develop preschool program standards and guidelines, and develop and support consortia. SIG grants provide resources for administration rather than direct services to children. The SIGs can help states by making available trained personnel who have the time to devote to needs and resource assessment, detailed planning, and state-level coordination of services among agencies. Thirteen SIGs are funded in 1982-83.

Noteworthy features of the current SIGs include:

- * The Connecticut SIG staff focuses on collaborative efforts with other state and local agencies. Presently the geographic boundaries of the

various service agencies are different for each agency. The SIG staff, recognizing the resultant confusion for parents and professionals, is planning cooperatively toward the development of coterminous service districts among all agencies within the state.

- * Through the Tennessee SIG, the Preschool Services Planning Committee has set forth a basic philosophy concerning early education and is identifying and agreeing on services based on their philosophical statement. The Tennessee Commission for Children, an independent state commission, is conducting the grant activities under the administration of the Tennessee Department of Education.
- * The California State Board of Education Annual Program Plan for Special Education states that the state education agency expects the 1982-83 SIG to "focus on the development and implementation of a comprehensive plan to systematically assist the state and local agencies to meet the full-service goal."
- * The state legislature has authorized the Colorado SIG to conduct a statewide study of existing preschool programs to assess the effectiveness of early intervention for handicapped children under age 5 years. Another important activity focuses on continued impact upon parents through a strong network of support and information sharing.
- * The South Dakota SIG is forming a networking system to maintain contact among early childhood coordinators of states in the region. This network will enable the coordinators to share documents, provide support and information concerning legislation, channel information to technical assistance agencies, and communicate with other regions.
- * The Wisconsin SIG is designing a state-coordinated technical assistance system to aid those working with infants and toddlers from birth to age 2 years. Through this technical assistance system, materials and personnel resources within the state will be identified and made accessible in a resource databank.

The application material for SIGs for 1983-84 states that the grant period will be for two years, to allow for more continuity and more effective planning. Because of the wide diversity of legislative mandates, appropriation levels, percentages of young children served, experience with preschool and early intervention, interagency coordination, and resources among the states, different levels of funding are being offered for 1983-85. Since the goal of the SIG program is to accelerate progress toward the provision of effective full services and to provide an incentive for that acceleration, higher funding levels are being proposed for states which have progressed farthest along the continuum of comprehensive planning and services.

The application material this year stated that:

- o Among states with a comprehensive plan for early childhood services approved by the state board, attention will be given to applicants proposing to: 1) complete the development of materials and interagency agreements; 2) carry out pilot implementation of the plan so that in-

creased numbers of children and families will receive new and improved achievement-based services; and 3) collect efficacy data. Grants to states at this stage of development will be approximately \$120,000 per year.

- o Among states which have completed a needs assessment and have a (draft) plan for early childhood services under development, attention will be given to applicants with well-defined procedures for completing a comprehensive plan and related guidelines, directories, parent materials, resource surveys, certification standards, working interagency agreements, etc., in response to state and local policy. Grants to states at this stage of development will be approximately \$70,000 per year.
- o Among states which have conceptualized the direction they wish to take but do not yet have a written, comprehensive early childhood plan, attention will be given to applicants who are able to state their concepts clearly and define their plans to carry out needs assessments, resource assessments, interagency collaboration, and other planning procedures which show promise of resulting in a workable draft plan responding to state and local policy. Experience indicates that grants of approximately \$45,000 per year are adequate for initial planning.

The approach outlined in the application materials has met with positive response thus far, and it is hoped that this effort to work individually with each state will encourage new applications and serve as an impetus to faster progress toward the comprehensive planning and full services goal.

Early Childhood Research Institutes

Early childhood research institutes, a joint effort with SEP's Research Projects Section, is HCEEP's most recent component. Three institutes began work in 1982 with a five-year project period for longitudinal investigation of research areas relevant to early intervention for children from birth to age 6 years. The three institutes are concerned with programming for autistic-like children, with cost and efficacy data, and with programming for families.

Technical Assistance

Technical Assistance is an important component within HCEEP. The Technical Assistance Development System (TADS) works with demonstration projects to develop quality programming by helping projects meet their objectives and needs. Since 1971, this agency has pioneered procedures for the systematic delivery of technical assistance and is active in information dissemination. In addition, TADS works with outreach projects and state education agencies (including the SIGs) and maintains liaison with the three HCEEP early childhood research institutes.

This year, the TADS workscope has been expanded to include other programs within SEP. However, direct technical assistance to projects is being provided only to HCEEP. Design, development, and evaluation of technical assistance for early childhood by TADS has been a key factor in the success of the HCEEP program and represents a unique national resource.

IMPACT DATA

The most extensive information on the impact of the HCEEP projects over the ten-year period from 1969-70 (when the first 24 projects were funded) through 1979-80, became available with the completion of an "Analysis of the Impact of HCEEP," conducted by Roy Littlejohn Associates, Inc., under contract with the U.S. Department of Education. Surveys and site visits were used to obtain data on the impact of the 280 projects that had completed the three-year period of demonstration prior to 1981; some of these projects also carried out outreach activities in response to requests from other agencies.

The objectives of this impact study were to:

- o Determine the extent of: a) continuation of projects with non-HCEEP funds after the end of the three-year period of federal support for demonstration; b) replication of models developed by the program; and c) placement of children graduating from the projects;
- o Analyze factors affecting each project's impact;
- o Collect descriptive and analytical information on some of the exemplary projects having the greatest impact.

Almost all the projects that met the criteria for inclusion in the study were reached through surveys or telephone contact. Twenty site visits were made to randomly selected projects to determine if the services reported in continuation and replication sites were fundamentally like the model described in the abstracts of the original demonstration projects; it was determined that they were. Information on the placement of children leaving the program was obtained from projects that kept this type of record.

Roy Littlejohn Associates, Inc., attempted to determine HCEEP's impact as a catalyst for the development and dissemination of increased and improved services for young handicapped children and their families. The study found that the accomplishments of the HCEEP projects as shown by the survey results are greater and more varied than for any other documented education program they have been able to identify, and that the program paid for itself many times over. Specifically, the study found that:

- o Eighty percent of the 280 projects continue -- independent of HCEEP funding -- to serve children.
- o More than 30,200 children have been served in continuation projects at no cost to HCEEP.

- o HCEEP projects stimulated 2,157 replications -- 1,991 by outreach projects and 166 by projects in the demonstration phase.
- o For every programming dollar spent by HCEEP, \$18.37 had been generated for programming for children and their families.
- o Replication programs served 107,850 children.
- o For each child served directly by demonstration projects, 6.4 children received services through continuation of demonstration projects and through replication of projects.
- o For each demonstration project, an average of 33 children per year were served with other funds.
- o Projects have been active in urban and rural areas in every state and in several U.S. territories, as specified by the legislation.
- o Fifty-five percent of the children who left HCEEP demonstration projects were placed in integrated settings with nonhandicapped children (less expensive than more specialized placements).
- o Sixty-seven percent of the children who left HCEEP demonstration projects performed in the average and above-average ranges in relation to their peers, according to staff of the regular and special education programs into which the children passed.
- o Twenty-two HCEEP projects have been approved for dissemination by the Joint Dissemination Review Panel of the U.S. Department of Education on the basis of evidence of effective programming and cost of replication.
- o HCEEP projects developed and disseminated more than 3,000 print and audiovisual products; many products were purchased by commercial publishers.
- o Extensive training has been requested by and provided to personnel of other agencies.
- o Many foreign countries have adopted models developed by the HCEEP programs.

Materials developed by the projects have been widely used. The Chapel Hill (North Carolina) outreach project developed the Learning Accomplishment Profile (LAP), which has become the most widely used assessment instrument in the Head Start program. Some of the projects with common concerns and interests have formed consortia, in part to increase the effectiveness of their dissemination. One group of projects, the Rural Network, developed a series of monographs providing information on 11 topics (including transportation and coordination between health care and education) of special concern to programs located in rural areas. INTER-ACT, a consortium of projects serving infants and toddlers from birth to age 3 years, developed its second monograph in 1982, Basic Competencies for Personnel in Early Intervention Programs: Guidelines

for Development. TADS, the technical assistance agency, has produced numerous monographs, series papers, and proceedings documents providing information the projects have requested during needs assessments and as they develop their projects. A recent list of publications available from TADS appears with their abstract on page 120.

Many materials have been developed in several languages and are translated for use across the country and abroad. Materials developed by the Portage (Wisconsin) Project, for example, have been translated into eight languages. The Portage Project is but one example of large-scale impact that went well beyond the original objectives of the project.

State and national impact of HCEEP programs has been both varied and extensive. The Kentucky State Department of Special Education selected the Chapel Hill (North Carolina) outreach project to train personnel at all 180 Kentucky school districts. Kentucky elected to use its entire State Preschool Incentive Grant funding for this purpose, and the state department of education's early childhood coordinator has stated that without the experienced assistance and prepared materials of the Chapel Hill project, Kentucky would not have made the progress it has made phasing-in kindergarten programs that integrate handicapped children.

The SKI*HI Project (Utah) provides an illustration of impact on other systems through its development of a statewide screening for newborns. This project, working with the Utah State Health Department, produced a revised birth certificate format which includes high-risk indicators for hearing loss. The model offers follow-up help through home visits to every infant in the state who is found to be at risk for hearing impairment.

National impact is illustrated by the collaborative relationship of HCEEP and Head Start. Thirteen of the 15 Resource Access Projects (RAPS) charged with locating appropriate special services for handicapped children within Head Start are current or former HCEEP projects. In 1981, the RAPS had a key role in enabling Head Start to fill 12 percent of its enrollment slots with children with diagnosed handicaps -- a total of 45,430 children. HCEEP and Head Start continue to cooperate in planning services and in developing and distributing materials.

Another HCEEP goal has been to develop new ways to diffuse proven practices at other locations desiring to use the results of prior work. As mentioned earlier, a number of working consortia have been developed. For example, the Rural Network disseminates information about each of the HCEEP rural projects. The results of the Littlejohn impact analysis show that impact has successfully crossed state and regional lines, so that an agency wishing to receive information or help to introduce proven practices can select and use a model developed elsewhere in the country.

EFFICACY DATA

The impact data from the Littlejohn study complemented an earlier study carried out under a contract with the Battelle Institute of Columbus, Ohio. That study sought to assess children's progress, the status of "graduates" of the projects, parent participation, and replication by other agencies. In 1975, 129 randomly selected children in 29 projects were tested, and progress in the

personal-social, motor, cognitive, and communication domains was assessed. Battelle's final report showed that within all handicapping conditions, children made 1.5 to 2 times greater gains than would have been expected without the benefit of the project experiences. In some cases, as with educable mentally retarded children in the personal-social domain, the gains were even larger.

Battelle also evaluated parental satisfaction. Ninety-seven percent of parents perceived in their children positive changes or improvements which the parents attributed to the project.

Since a major goal of early childhood projects is to prepare children to enter regular classrooms whenever possible, the Battelle study looked at the placement of graduates, finding that 74 percent of the children in the sample were placed in public-school settings (64 percent were in regular placement, with half receiving ancillary services).

The Joint Dissemination Review Panel (JDRP) of the U.S. Department of Education provides further evidence of HCEEP's effectiveness. Projects may apply for approval for dissemination by submitting evidence of effective programming for children and information on the cost of replication. JDRP has thus far approved for dissemination 22 projects developed with HCEEP funds, including one that was approved after Littlejohn's impact analysis was completed.

The Journal of the Division for Early Childhood: Efficacy Studies in Early Childhood Education, volume 4, December 1981, contains additional data on effectiveness, much of it authored by staff of HCEEP projects. This journal is available from the Division of Early Childhood, Council for Exceptional Children, 1920 Association Drive, Reston, Virginia, 22091.

Overview

Developed from survey information collected in 1982-83, this Overview section presents and compares the types and range of activities pursued by the five types of HCEEP projects.

OVERVIEW

Projects funded by the Handicapped Children's Early Education Program

The Handicapped Children's Early Education Program (HCEEP) leads a federal effort that fosters diverse and innovative approaches to the education of young handicapped children. HCEEP supports 117 grants and contracts throughout the United States and U.S. territories. Some projects demonstrate direct services to children and families. Other projects provide outreach activities, conduct research, plan statewide programs, or provide technical assistance. To show the range of activities of these projects, Special Education Programs (SEP) of the U.S. Department of Education, contracted the Technical Assistance Development System (TADS) to conduct a survey of all projects funded during 1982-83. The results of this survey follow.

Demonstration Projects

HCEEP demonstration projects provide parents, communities, and professionals with innovative models for the early education of handicapped children. Projects are located in rural areas and inner cities, in small towns and suburban communities; the children have diverse social, ethnic, and economic backgrounds. During 1982-83, HCEEP funds 55 projects to demonstrate model programs.

A variety of intervention approaches help children with a broad range of handicaps. Some projects concentrate on a particular handicapping condition; other projects concentrate on factors such as age or cultural group, regardless of the handicap. Table 1 shows a breakdown by age and handicap of children served by demonstration projects. Eight of every ten children are under age 5 years. Speech impairments and mental retardation are the most common handicaps of the children served by the projects. Note that 16 percent of the children are multihandicapped in addition to having a primary handicapping condition.

TABLE 1

Demonstration: Handicapping Conditions and Ages of Children Served

Type of Handicap	Number of Handicapped Children Served by Age				Number of Children Served	Percent of All Children Served
	0-24 months (28.4%)	25-60 months (52.1%)	61-96 months (19.7%)	over 96 months (0.2%)		
At-risk	332	192	51	-	575	28
Other	49	248	269	1	567	27
Speech-impaired	34	174	11	1	220	11
Trainable mentally retarded	50	97	17	1	165	8
Orthopedically impaired	44	80	11	1	136	6
Educable mentally retarded	21	86	23	1	131	6
Deaf/hearing-impaired	23	75	1	-	99	5
Specific learning disabilities	5	38	15	1	59	3
Seriously emotionally disturbed	4	39	8	-	51	2
Visually handicapped	18	22	2	-	42	2
Other health-impaired	12	19	3	-	34	2
Deaf-blind	2	8	-	-	10	<1 (0.004)
TOTAL	594	1078	411	6	2089	100
Multihandicapped children	98	218	38	5	327	16

Projects responding to survey question: N = 53

Over 85 percent of the projects stress services to an ethnic/cultural group (see Table 2). In keeping with their responsibility to demonstrate their models, most of these projects can share expertise, products, or practices with other projects that serve children of particular ethnic/cultural minorities.

TABLE 2

Demonstration: Major Focus or Stress on Service to Ethnic/Cultural Minorities

Ethnic/Cultural Group	Number of Projects	Percent of All Projects
Black	8	15
Hispanic	6	11
Asian	3	6
American Indian	3	6
Other	3	8

Projects responding to survey question: N = 53

Ultimately, HCEEP projects seek to improve opportunities for handicapped children. Part of the HCEEP philosophy is that families provide important first experiences for their infants and young children. Over half of the projects list parent(s) and child as primary targets for direct services, while less than one-quarter list only the child as the primary target (see Table 3). Some projects target neither the parents nor the child and instead serve professionals in the field.

TABLE 3
Demonstration: Primary Targets of Direct Services

Targets	Number of Projects	Percent of All Projects
Parent(s) and child	36	68
The child	12	23
Other professionals	2	4
Other	3	6

Projects responding to survey question: N = 53

While primary targets for services vary, all the projects stress some sort of parent or family participation. Table 4 indicates the various types of parent and family involvement activities offered by HCEEP demonstration projects. Conferences with project staff and participation on advisory boards are activities offered by almost all these projects. Over half the projects involve parents in identifying needs, in the transition of their child to the next educational placement, in classroom observation and teaching, in training workshops, and in formal communication (newsletters, hot lines, etc.). Most projects provide several parent or family activities.

TABLE 4

Demonstration: Parent/Family Activities

Type of Activity	Number of Projects	Percent of All Projects
Parent/staff conferences	49	92
Participation on advisory board	49	92
Identification of parental needs and learning goals	44	83
Training workshops	37	70
Transition to next placement service	37	70
Classroom observation or teaching	34	64
Formal communications (e.g., newsletter, notes, telephone hot-lines, etc.)	30	57
Maintenance of child progress records	26	49
Counseling groups	26	49
Advocacy	25	47
Social groups	24	45
Development of instructional materials	22	42
Therapy supervision	15	28
Fundraising	14	26
Other noneducational or therapeutic services (e.g., job placement, public assistance, medical services, etc.)	14	26
Parents training other parents	13	25
Provision of respite care	4	8
Formal support groups for siblings	2	4
Other	14	26

Projects responding to survey question: N = 53

Demonstration projects are primarily educational in focus. However, their fiscal agencies and the environment in which they deliver services vary. Table 5 indicates the types of fiscal agencies that sponsor demonstration projects. The three most common agencies are institutions of higher education, local education agencies, and private nonprofit organizations. Most institutions of higher education that sponsor demonstration projects have an educational rather than a medical focus. Several projects are sponsored by nonacademic health institutions. Two projects are sponsored by Indian tribes.

TABLE 5
Demonstration: Fiscal Agencies

Type of Agency	Number of Projects	Percent of All Projects
Private, nonprofit organization	15	29
Institution of higher education (nonmedical)	12	23
Local education agency (LEA)	7	13
State educational agency (SEA)	4	8
Health institution (e.g., hospital or other nonuniversity medical facility)	3	6
Institution of higher education (medical)	3	6
Regional or intermediate educational agency	3	6
Public agency (other than educational)	2	4
Other	3	6

Projects responding to survey question: N = 52

Table 6 lists the primary service delivery settings of the demonstration projects. Over half the projects serve children in their natural environment -- the home. The great majority of these programs combine home intervention with outside services; only nine percent of the projects serve children exclusively in the home. Home and center (not public school) is the most common setting for intervention by HCEEP demonstration projects.

TABLE 6

Demonstration: Service Delivery Settings

Primary Service Setting	Number of Projects	Percent of All Projects
Home and center (not public school)	21	40
Center (not public school)	11	21
Public school	6	11
Home	5	9
Home and public school	4	8
Hospital or health center	3	6
Home and health center	2	4
Other	1	2

Projects responding to survey question: N = 53

Certain settings make it possible for handicapped children to learn and play with nonhandicapped children. Integration experiences may involve special classes in regular schools, or they may involve handicapped and nonhandicapped children learning side by side. In Table 7, projects categorize their handicapped/nonhandicapped integration opportunities. Almost half the projects indicate that they provide some sort of integration experience for their children, and over two-thirds of those projects fully integrate handicapped and nonhandicapped children in either regular or special settings. One-quarter of the projects find that the question of integration is inappropriate to their situation. Since over half the projects provide services in the home, some may have had difficulty describing their overall programs in terms of the integration statement choices provided in the survey. Aside from the projects listing "not appropriate," only eight percent provide no integration opportunity.

TABLE 7

Demonstration: Integration Experiences

Types of Experiences	Number of Projects	Percent of All Projects
Handicapped and nonhandicapped children are fully integrated in a regular early education setting	13	25
Handicapped children are served in a special setting with nonhandicapped children integrated into that special setting for some activities	4	8
Handicapped children are served in a special setting with nonhandicapped children fully integrated into that special setting	4	8
Handicapped and nonhandicapped children are not integrated	4	8
Handicapped children are integrated into a regular setting for some activities	3	6
Not appropriate to the project	14	27
Other	9	18

Projects responding to survey question: N = 51

TABLE 8

Demonstration: Primary Focus for intervention

Developmental Area	Number of Projects	Percent of All Projects
Language-communication	8	15
Social emotional	3	6
Sensorimotor	1	2
Cognitive-academic	3	6
All the above areas and self-help	34	64
Other	4	8

Projects responding to survey question: N = 53

The particular developmental focus of intervention often depends on the model being demonstrated, as well as on the individual needs of the child. U.S. Special Education Programs requires projects to develop for each child an individualized education program (IEP) that specifies goals, teaching methods, and materials. As the child's needs change, so does the IEP. In Table 8, projects list the particular developmental areas on which they focus their intervention services. Language-communication is the individual developmental area most of the projects name for their primary focus. Fifteen percent of the projects list that area, and many more list it along with other areas. In fact, though projects were asked to choose one primary area when describing their focus, over half indicate that they focus on all areas of development.

The primary philosophical approaches of demonstration projects' model curricula span a continuum from child-directed to teacher-directed learning (Table 9). Over one-third of the projects align themselves with a diagnostic-prescriptive approach, and over one-third list "other" approaches.

TABLE 9

Demonstration: Philosophical Base of Curricula

Philosophical Approach	Number of Projects	Percent of All Projects
<u>Child-Directed</u>		
Experimental or traditional child-centered nursery school	4	8
Montessori-specific	-	-
Piagetian-specific	5	9
Diagnostic-prescriptive	19	36
Behavioral	7	13
<u>Teacher-Directed</u>		
Other	18	34

Projects responding to survey question: N = 53

Projects indicate they use a variety of curricular packages or approaches. The Overview and Directory Index lists curricula (used by each project with over half their children) by name and indicates which projects use each package. Many of the curricular packages or approaches were developed by the projects themselves, and most of the packages or approaches are available to be shared with other projects.

Projects also use a variety of commercial and project-developed methods or devices to assess child progress for the purposes of planning instruction for the children and evaluating the program. The Overview and Directory Index lists these methods and devices by name and purpose and indicates which projects use each method (individual project abstracts in the Directory section list administration schedules). Many projects have developed their own assessment devices, and most of these can be shared with other projects.

Refer to the Index section and to the project abstracts in the Directory section for more information about the 1982-83 demonstration projects.

Outreach Projects

The concept of model demonstration programs is carried a step further by HCEEP outreach projects. After three years of HCEEP demonstration funding, selected projects have the opportunity to enter an outreach phase, where they no longer place first priority on demonstrating a service model. Rather, these projects primarily encourage replication of their models while keeping in operation some portion of their direct service model. This year, 45 HCEEP outreach projects are "reaching out" to communities across the nation.

Outreach activities are varied. Table 10 shows the amount of time project staff devote to particular replication activities. Almost all the outreach projects train personnel. One project spends over 75 percent of its time on training. Most outreach projects spend some time on each activity listed in Table 10.

TABLE 10

Outreach: Staff Time Spent in Outreach Activities

Activities	Number of Projects by Proportion of Staff Time				Number of Projects Engaging in Activity	Percent of All Projects Engaging in Activity
	1/4 or less	1/4 to 1/2	1/2 to 3/4	3/4 or more		
Training	14	25	4	1	44	96
Product development and dissemination	34	8	-	-	42	91
Increasing awareness	39	2	-	-	41	89
Stimulating sites	25	8	2	-	35	76
Stimulating state involvement	32	3	-	-	35	76
Other consultation activities	36	2	-	-	38	83
Other	9	1	-	-	10	22

Projects responding to survey question: N = 46

TABLE 11

Outreach: Materials Developed and Available to Share

Types of Material	Number of Projects	Percent of All Projects
In-service training or staff development materials	33	73
General awareness materials	26	58
Parent education materials	26	56
Program management/evaluation materials	25	54
Curricula for children	23	51
Bibliographies/reference materials	23	50
Observational checklists	23	50
Child progress assessment instruments (0-3)	18	39
Teacher competencies or needs assessments	16	35
Curricula for parents	13	29
Child progress assessment instruments (3-8)	10	22
Child screening instruments (3-8)	6	13
Child screening instruments (0-3)	4	9
Product development guides	3	7
Other	14	30

Projects responding to survey question: N = 45

Almost all the projects develop and disseminate products (publications, curricula, assessment devices, audiovisual presentations, etc.). Products are designed for parents, teachers, administrators, health professionals, and the general public. Table 11 reveals the productivity and innovation of dissemination efforts and the variety of materials available within the HCEEP network. In-service training or staff development materials are available from almost three-quarters of the projects. Over half the projects can share general awareness materials, parent education materials, curricula for children, and program management/evaluation materials. Refer to the Index and the Directory sections for specific products available from individual outreach projects.

TABLE 12
Outreach: Fiscal Agencies

Type of Agency	Number of Projects	Percent of All Projects
Institution of higher education (nonmedical)	14	30
Private, nonprofit organization	12	27
Local education agency (LEA)	5	11
Institution of higher education (medical)	4	9
Regional or intermediate educational agency	3	7
Public agency (other than educational)	3	7
State educational agency (SEA)	1	2
Health institution (e.g., hospital or other nonuniversity medical facility)	1	2
Other	2	4

Projects responding to survey question: N = 45

The transition from demonstration to outreach services, involves a change in funding. The breakdown of fiscal agencies that administer outreach and demonstration projects are similar (Tables 5 and 12), but the funding strategies differ. Though outreach projects receive HCEEP funds for replication

efforts only, U.S. Special Education Programs still requires these projects to maintain some portion of the direct services to children the projects provided in the demonstration phase. Outreach projects must therefore look to other sources to fund their direct services to children and families. Table 13 shows sources of continuation funding for direct service. Eight percent of the outreach projects receive some funds from local and state education agencies. Note that private contributions and foundations account for less than 25 percent of funding for only 15 projects and 50 to 75 percent of funding for only one project. Almost half the projects receive 75 percent or more of their funds from a single source.

TABLE 13

Outreach: Sources of Continuation Funding for Direct Services

Type of Source	Number of Projects by Proportion of Funding				Number of Projects Funded by Source	Percent of All Projects Funded by Source
	1/4 or less	1/4 to 1/2	1/2 to 3/4	3/4 or more		
State educational agencies	9	5	3	2	19	42
Public agencies (other than educational)	6	1	5	6	18	39
Local educational agency	3	3	4	7	17	37
Private contributions	8	2	2	-	12	26
Private foundations	7	-	-	1	8	17
Institutions of higher education	5	-	3	-	8	17
Federal educational agencies	5	1	-	1	7	15
Private, nonprofit organizations	3	2	-	1	6	13
Regional or intermediate educational agencies	1	2	-	1	4	9
Other	11	-	1	1	13	28

Projects responding to survey question: N = 45

Characteristics of the education models of the outreach projects are similar to those of demonstration projects. For instance, HCEEP concern for parents and families is evident in the thrust of outreach project direct services; Table 14 indicates that over half the projects list the parent(s) and the child as primary targets for direct services.

TABLE 14

Outreach: Primary Targets of Direct Services

Targets	Number of Projects	Percent of All Projects
Parent(s) and child	26	59
The child	11	24
Both parents	1	2
Other professionals	6	13

Projects responding to survey question: N = 44

Table 15 lists the settings of the outreach projects. Forty percent of the projects provide at least some service in the home.

TABLE 15
Outreach: Service Delivery Settings

Primary Service Setting	Number of Projects	Percent of All Projects
Center (not public school)	13	29
Home and center (not public school)	9	20
Public school	7	16
Home and public school	5	11
Home	3	7
Hospital or health center	3	7
Other	4	9

Projects responding to survey question: N = 44

Table 16 lists the developmental areas projects see as a primary focus for intervention. Though projects were asked to indicate one primary area, three-quarters stated that they focus on all areas of development.

TABLE 16
Outreach: Primary Focus for Intervention

Developmental Area	Number of Projects	Percent of All Projects
Cognitive-academic	3	7
Language-communication	2	5
Sensorimotor	2	5
Social emotional	1	2
All the above areas and self-help	32	74
Other	3	7

Projects responding to survey question: N = 43

Outreach projects indicated the primary philosophical approach of their model curricula on a continuum from child-directed to teacher-directed learning (Table 17). Almost half the projects use the diagnostic-prescriptive approach as their primary base, and over one-third indicate they use "other" approaches.

TABLE 17
Outreach: Philosophical Base of Curricula

Philosophical Approach	Number of Projects	Percent of All Projects
<u>Child-Directed</u>		
↑ Experiential or traditional child-centered nursery school	1	2
Montessori-specific	-	-
Piagetian-specific	4	9
Diagnostic-prescriptive	18	42
↓ Behavioral	5	11
<u>Teacher-Directed</u>		
Other	15	34

Projects responding to survey question: N = 43

Outreach projects themselves developed many curricular packages they use for direct services to children. In keeping with their responsibility to encourage replication of their models, most of these packages are available to share with other programs for children. The Index lists names of curricula developed or used by the projects.

Refer to the Index section and to the outreach project abstracts in the Directory section for more information about the 1982-83 outreach projects.

State Implementation Grants

In 1976, the federal government established the State Implementation Grant (SIG) program to help states plan and coordinate new or expanding statewide early intervention services for handicapped children. SIG grants are awarded for up to two-year periods and may be renewed. Table 18 lists the 13 states funded during 1982-83. This year, only one state is new to the SIG program.

TABLE 18
Current SIG States and Years Funded*

State	Year of Funding	State	Year of Funding
Arizona	3	New York	7
California	5	South Dakota	6
Colorado	6**	Tennessee	3
Connecticut	5	Washington	7
Louisiana	6	Wisconsin	7
Maryland	5**	Wyoming	2
New Jersey	4**		

*The SIG program has been funded for six years since September 1976.

**Nonconsecutive years

Most states have passed legislation that requires local school systems to serve handicapped children. However, these laws vary, particularly in respect to the ages and handicaps of the children the laws protect. Within the SIG program, for example, Arizona mandates services for children age 5 to 21 years, regardless of handicap. South Dakota state law, on the other hand, mandates services for severely and profoundly handicapped children birth to age 21 years and for children age 3 to 21 years who are mildly and moderately handicapped or gifted. Some states have passed permissive legislation which allows local school systems to choose whether or not to serve the designated children. State legislation for each SIG state is included in the SIG abstracts in the Directory section of this book.

SIG planning activities fall into five broad categories:

- * SIG program development activities lead to new directions in services to children and families. Creating pilot sites, strengthening existing service programs, and stimulating local educational agencies to provide intervention are activities that fall under this category.
- * The area of administration/management/evaluation incorporates a variety of SIG activities, from designing approaches for better state management of the SIG grant itself to consulting with local programs about improving methods of evaluating child progress. Early childhood data systems, program guidelines and standards, and evaluation and monitoring strategies are developed under this area of activity.
- * SIGs invest substantial resources planning for personnel development. Several states design training opportunities for parents as advocates and "teachers" for their own young handicapped children. Professionals receive training through workshops, institutes, seminars, and graduate-level practicums.
- * Communication and dissemination activities influence or inform specified audiences through a variety of print materials, audiovisual products, statewide conferences, and radio and TV promotions. Products developed by and available from the SIGs are listed in the individual abstracts in the Directory section of this book.
- * SIGs plan and implement cooperative efforts among state and local agencies that serve young handicapped children. Interagency coordination can save money and eliminate fragmented services at the local level.

Table 19 shows that 83 percent of the SIG projects developed formal or informal interagency agreements. Over half the SIGs planned in-service training in early childhood special education. A third of the SIGs developed early childhood special education teacher certification standards.

Table 20 shows that over half the SIG states have approved early childhood special education guidelines and have in place a comprehensive state plan. Almost half the SIG states have early childhood special education rules, regulations, or standards.

TABLE 19
SIG Activities

Activities	Number of SIGs	Percent of All SIGs
Providing in-service training	7	58
Developing formal or informal interagency agreements	10	83
Developing and distributing early childhood special education teacher certification standards	4	33

SIGs responding to survey question: N = 12

TABLE 20
Features of SIG States

Features	Number of SIGs	Percent of All SIGs
State-approved early childhood special education guidelines	7	58
State-approved early childhood special education rules, regulations, or standards	5	42
Statewide tracking system for children identified as handicapped or at-risk	1	8
Comprehensive state plan for serving young handicapped children	7	58

SIGs responding to survey question: N = 12

Refer to the Index section and to the SIG abstracts in the Directory section for more information about the 1982-83 SIGs.

Early Childhood Research Institutes

Three early childhood research institutes (ECRIs) have the mission to discover and disseminate knowledge that can be used to improve services and programs for exceptional young children and their families.

***Carolina Institute for Research on Early Education for the Handicapped (CIREEH), University of North Carolina at Chapel Hill**

CIREEH researchers focus on the families of young moderately and severely handicapped children birth to age 5 years; develop and disseminate intervention materials for parents and professionals; train graduate students to conduct research in this area; conduct a self-evaluation; and coordinate CIREEH's activities with those of the other ECRIs.

***Early Childhood Research Institute
University of Pittsburgh**

The major purpose of this ECRI is to develop procedures for assessing and teaching social and related skills to autistic-like preschool children so these youngsters will be able to participate successfully in instructional settings with nonhandicapped or less handicapped children.

***Early Intervention Research Institute
Utah State University, Logan**

Major objectives of this ECRI are to examine previously conducted research on early intervention to determine what is known, what gaps exist, and where future research should focus; to develop a model for cost effectiveness analysis; to conduct research to identify the most important problems and issues encountered in typical service settings; to disseminate information about the institute's findings to a broad audience of professionals and families; to train graduate students and research assistants in research techniques and effective intervention methods; to evaluate the impact of the institute's findings and products; and to solicit criticism and feedback on the institute's activities.

For more information about the ECRIs, refer to the abstracts in the Directory section of this book.

Technical Assistance

Helping handicapped and at-risk children and their families is a complex task, so U.S. Special Education Programs provides support to HCEEP through a contract with a technical assistance agency. The term "technical assistance" refers to ongoing, systematic, and nonevaluative help.

The Technical Assistance Development System (TADS) has been serving as a technical assistance agency for demonstration, outreach, and SIG projects since 1971. TADS is a program of the Frank Porter Graham Child Development Center of the University of North Carolina at Chapel Hill.

TADS offers a broad range of support services that help HCEEP grantees manage programs and accomplish goals. Projects receive this responsive assistance through individual on-site consultation, small-group workshops, large meetings, and an extensive publications program. TADS also arranges field visits between projects to promote collaboration and transfer of new practices, knowledge, and products.

Refer to the TADS abstract in the Directory section for more information about this technical assistance agency.

Directory Section

This section contains abstracts of all 117 HCEEP projects. The projects are grouped by type (demonstration, outreach, State Implementation Grant, early childhood research institutes, technical assistance center) and listed alphabetically (according to state and city) within each group.

Samoa's Cooperative Early Education Model

ADDRESS: Special Education Division
Pago Pago, American Samoa 96799

PHONE: 011-684-633-1323
YEAR OF FUNDING: 3

FISCAL AGENCY: Special Education Division, Department of Education

DIRECTOR: Kuth Ann Rasbold

HEAD TEACHER: Peter Tinatali

OTHER STAFF TITLES: teachers; aides; speech therapist; other support personnel

CHARACTERISTICS OF TARGET POPULATION:

The project serves children birth to age 6 years with any handicapping condition.

PROGRAM FOR CHILDREN:

Children birth to age 3 years are served in a home-based program. Children age 3 to 6 years are served in a special center-based program. When possible, children are also served in existing Village Early Education Centers.

MEASURES OF CHILD PROGRESS:

The project staff uses the Denver Developmental Screening Test, the Learning Accomplishment Profile, the Hawaii Early Learning Profile, the Portage Behavior Checklist, and the Teaching Research Test.

PROGRAM FOR PARENTS:

Parents are actively involved in the IEP process. They receive training in intervention techniques with their children both in the home and at the center.

FEATURES AND PRODUCTS:

The project is developing a screening instrument that can be administered by teachers in the Village Early Education Centers.

Project ENRICH

Early Need Recognition Involving Children with Handicaps

ADDRESS: Department of Special Education
549 North Stapley Drive
Mesa, Arizona 85203

PHONE: (602) 898-7862
YEAR OF FUNDING: 2

FISCAL AGENCY: Mesa Public Schools

DIRECTOR: Harold J. McGrady
COORDINATOR: Leslie Small
OTHER STAFF TITLES: early childhood program specialist; early childhood teacher;
speech/language specialist; teachers' aides; secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 15 to 25 children age 3 to 5 years whose delayed language and cognitive development indicates that special educational facilities will be required for the children upon reaching kindergarten age.

PROGRAM FOR CHILDREN:

The project's transdisciplinary model is based on a cognitive/developmental approach. Components of the service model include systematic educational assessment, individual educational and implementation plans, mainstreaming, a school/home component, coordination with community agencies, and ongoing evaluation efforts. The project also provides psychometric, audiological, and occupational and physical therapy evaluations. The half-day classroom component uses an individualized diagnostic-prescriptive curriculum with a transdisciplinary approach. Project staff make regular home visits to help parents work with their children. Project participants are integrated into regular community education preschool programs as appropriate.

MEASURES OF CHILD PROGRESS:

Child growth is assessed in terms of teaching objectives as determined by the IEP and pre- and post-data on normative test instruments. Individual implementation plans are developed to monitor continuous assessment of developmental teaching objectives, criterion-referenced objectives, and individual behavioral objectives as determined by the IEP. Project participants receive complete post-program evaluations to ascertain progress. The 4-year-old children are administered the Readiness Skills Inventory developed by the Mesa School District.

PROGRAM FOR PARENTS:

The project provides parent home training and teaching modules, a parent in-service program which focuses on parent-child interaction, and a parent information and resource center. Additional activities include parent group meetings, classroom observation and participation, individual conferences, and participation in IEP development and regular review. Parents are directly involved in the classroom at least once a month; home visits by staff are made weekly. The project's advisory council encourages parent participation.

FEATURES AND PRODUCTS:

The project is developing a curriculum guide which reflects the sequential development of language, listening, and cognitive skills. Project ENRICH is actively working to document the process of establishing a public school program for preschool handicapped children and disseminating information to legislators and educators in an attempt to bring Arizona state laws into congruence with national trends and practices.

Project YAQUI

An Environmentally Based Program for Young Native American Children

ADDRESS: 4821 West Calle Vicam
Tucson, Arizona 85746

PHONE: (602) 883-4678
YEAR OF FUNDING: 2

FISCAL AGENCY: Pascua Yaqui Tribe

DIRECTOR: Carol Loumeau

OTHER STAFF TITLES: preschool teacher (early childhood special education); preschool teacher (child development, family relations); resource assistants

CHARACTERISTICS OF TARGET POPULATION:

The project serves 45 Yaqui children birth to age 5 years and their families who reside on the reservation. Children have mild physical, speech, language, or hearing delays.

PROGRAM FOR CHILDREN:

A preschool serves 3- to 5-year-olds for three hours four mornings weekly. Three 1-1/2 hour parent/child interaction sessions are provided weekly (one session each for infants, toddlers, and twos). Program emphasis is on identifying delayed areas and providing remediation in culturally appropriate ways that consider the families' trilingual environment.

MEASURES OF CHILD PROGRESS:

Initial information is provided by the parent through an interview process using an adaptation of the Minnesota Child Development Inventory, screening information from the Assessment by Behavior Rating, and teacher-staff anecdotal records collected during Play Weeks. Evaluation and assessment of children is provided while considering both the cultural and linguistic needs of the children. Data from a modification of the ABACUS and the ABR provide pre and post information and program objectives.

PROGRAM FOR PARENTS:

Parents and other family members receive direct training from project staff, participate in child-find activities, work in the classrooms, participate on the advisory board, and attend monthly meetings.

FEATURES AND PRODUCTS:

The project adapts screening and assessment tools to meet the cultural and linguistic needs of the children. The project also coordinates with Head Start, public schools, and tribal agencies that provide initial and ongoing services, including follow-up of children who have entered the public schools. Project Yaqui is developing a trilingual assessment tool in cooperation with the public schools and other agencies.

Focus Classroom

ADDRESS: Focus on Children, Inc.
2905 King Street
Jonesboro, Arkansas 72401

PHONE: (501) 935-2750
YEAR OF FUNDING: 2

FISCAL AGENCY: Focus on Children, Inc.

DIRECTOR: Barbara L. Semrau
OTHER STAFF TITLES: teachers, aides, physical therapist, speech therapist, signing specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 12 handicapped children age 3 to 5 years whose handicaps include moderate and severe/profound mental retardation, visual and hearing impairments, and multihandicapping conditions.

PROGRAM FOR CHILDREN:

The project uses an individualized developmental approach to student curriculum that emphasizes language development and individual learning style. Project staff members design meaningful early childhood units aimed at the needs of each child. The project is housed in a public school building that includes four Head Start classrooms and is across the street from the public school's kindergarten building. A second classroom in another part of the county will be established this year to further individualize instruction and to eliminate transportation of the children over great distances.

MEASURES OF CHILD PROGRESS:

The project uses the DASH and the LAP-D to assess child progress.

PROGRAM FOR PARENTS:

The project coordinates with the Step Ahead Project (an existing home visitors program based at the DDS community provider center in Jonesboro) for its parent component. Because of the many new children involved in the second year, parents have developed a genuine sense of ownership toward the project and are working to continue it beyond its funding cycle.

FEATURES AND PRODUCTS:

Features of the program include the training of paraprofessionals and the development of a training manual for aides working with young handicapped children. A curriculum is being developed to emphasize functional communication during all parts of the day, at school and at home. The program also studies the social acceptance of handicapped children by their nonhandicapped peers, using the reactions of nonhandicapped children in the same building and of the kindergarten children across the street. The support of local community groups, including United Cerebral Palsy and local service organizations, is being enlisted to establish the Classroom as a community provider in the county.

DEEP

Developmental Early Education Project

ADDRESS: Department of Rehabilitation and Special Education
University of Arkansas at Little Rock
33rd and University
Little Rock, Arkansas 72204

PHONE: (501) 663-9496
569-3169

YEAR OF FUNDING: 2

FISCAL AGENCY: University of Arkansas at Little Rock

CO-DIRECTORS: Judith Freund and Bettye Caldwell
PROJECT ADMINISTRATOR: Larry Dickerson
OTHER STAFF TITLES: medical coordinator; project evaluator; head teacher;
occupational therapist; physical therapist; speech therapist;
teachers' aide; project secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 28 children birth to age 6 years with a variety of disabilities. Service preference is given to younger children and to children about whom diagnostic or management questions remain after an initial evaluation within other settings.

PROGRAM FOR CHILDREN:

The main feature of this project is an intensive, time-extended, assessment-oriented educational experience for young handicapped children. Individual education and home management plans are developed for each child. Eight children can be served at a time, for periods ranging from two to twelve weeks.

MEASURES OF CHILD PROGRESS:

The project measures child progress with a variety of instruments to cover the wide age-range of children participating in the program. In addition to age-appropriate standardized and published procedures (Bayley, LAP, Brigance, Portage), a locally developed individual progress chart called AID (Advances in Development), which resists a single score, is used. In addition, children are described in terms of learning process profiles from which practical teaching strategies for parents and other caregivers are derived.

PROGRAM FOR PARENTS:

Parents are observed interacting with their children in the home environment according to the HOME (Home Observation for Measurement of the Environment) Inventory. In addition, the needs of parents for support services are assessed, and from these assessments, two sources of data are developed for the family. Intervention activities are both individual and group-based and use services provided by other community agencies as well as DEEP. Particular use is made of programs and materials available in a local parent center.

FEATURES AND PRODUCTS:

The major products are "Individualized Education and Home Management Plans" and Daily Exercises for Educational Play, a book of activities for parents to perform at home with their children.

Pasadena Area Special Infant Toddler Project

ADDRESS: 1741 Silverlake Boulevard
Los Angeles, California 90026

PHONE: (213) 664-2937
YEAR OF FUNDING: 3

FISCAL AGENCY: Child, Youth and Family Services

DIRECTOR: Bea Gold
COORDINATOR: Sheila Wolfe
OTHER STAFF TITLES: child development specialist; social worker; occupational therapist; evaluator

CHARACTERISTICS OF TARGET POPULATION:

The project serves 20 children birth to age 3 years and their families in the Pasadena community. The children have a variety of handicapping conditions.

PROGRAM FOR CHILDREN:

The project uses a developmental approach that focuses on individual strengths, needs, and learning styles. A child-centered, experiential model is used in the home and in the mainstream center. The children participate in either a home-, center-, or home-and-center-based program.

MEASURES OF CHILD PROGRESS:

The staff administers the Sewall Early Education Developmental Profile (SEED) to assess child development upon entrance and at 6- to 12-month intervals. The staff monitors child goal attainments by using Individual Program Plans (IPPs), ongoing observations, reassessments, and parent perceptions. Child progress is correlated with family progress.

PROGRAM FOR PARENTS:

The project's family-centered program promotes positive interaction and support between the parent and child. The project offers parents individual and group education, family counseling, family group activities, resource assistance, and opportunities to learn about normal child development, special education, and therapy activities for their child.

FEATURES AND PRODUCTS:

The project acts as coordinator of community services for families of children enrolled in the program and works closely with the Pasadena Head Start program and other community agencies to provide program continuity. Services are provided according to family schedules and needs. Products being developed include a revised SEED Developmental Profile, a correlated early childhood education and therapeutic curriculum, a family education notebook, and a recordkeeping system compatible with other early childhood programs, including Head Start.

Intensive Care Nursery Interact Project

ADDRESS: Child Development Center
51st & Grove Streets
Oakland, California 94609

PHONE: (415) 428-3351
YEAR OF FUNDING: 3

FISCAL AGENCY: Children's Hospital Medical Center

DIRECTOR: Nancy Sweet
OTHER STAFF TITLES: medical director; infant educators; ICN follow-up nurse;
psychologist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 108 medically high-risk infants birth to age 1 year who are prone to developmental disabilities due to prematurity or serious neonatal illness. These infants are identified in the Intensive Care Nursery (ICN) of Children's Hospital Medical Center, a tertiary treatment resource for ICNs in the northern California area. Infants are eligible if they are expected to be hospitalized one month or more following birth.

PROGRAM FOR CHILDREN:

Developmental intervention begins in the Intensive Care Nursery at Children's Hospital and continues when recovering infants return to local secondary care ICNs; intervention extends to the infant's home upon release. Developmental intervention is based on neonatal assessment and multidisciplinary review. Individual developmental intervention plans include daily developmental therapy goals, environmental modifications, and procedures for participation of parents and ICN nurses. During the first year of life, the infant receives neonatal assessment, home-based follow-up, and if needed, developmental therapy.

MEASURES OF CHILD PROGRESS:

In the ICN the Assessment of Premature Infant Behavior and the Brazelton Newborn Assessment Scale are used. At 1 year corrected age, the Bayley Scales of Infant Development are administered, and other assessments are made as needed.

PROGRAM FOR PARENTS:

Education and support for parents which will facilitate attachment, care, and developmentally appropriate interaction with the high-risk infant begin in the ICN and continue at home. A support group for parents of premature babies, both in the ICN and afterward, also has been created.

FEATURES AND PRODUCTS:

The model combines developmental intervention in the ICN with comprehensive neonatal follow-up during the first year of life. The model includes training and participation of ICN nurses at Children's Hospital ICN and selected secondary ICNs in developmental intervention with high-risk infants. A key feature of the project is the individualized developmental plan for premature babies, which may be implemented as early as 26-28 weeks gestational age.

CEID

Center for Education of Infant Deaf

ADDRESS: 1428 Bush Street
San Francisco, California 94109

PHONE: (415) 775-5700
YEAR OF FUNDING: 3

FISCAL AGENCY: Hearing Society for the Bay Area, Inc.

CO-DIRECTORS: Jill Boxerman and Mary Molacavage
OTHER STAFF TITLES: teacher; classroom aides; psychiatric consultant; audiological consultant

CHARACTERISTICS OF TARGET POPULATION:

The project serves children who are at-risk for hearing loss. Most of the children have severe to profound bilateral sensori-neural hearing loss. One-third of the children are multihandicapped (either deaf-cerebral palsied or deaf-blind).

PROGRAM FOR CHILDREN:

CEID is a home- and center-based project with weekly home visits. An experiential, child-centered nursery school began operation in March 1981, with a Head Start program. CEID uses total communication with the children and their families. Signing Exact English is the reference for the program's sign language component; Parent-Infant Communication is the language curriculum.

MEASURES OF CHILD PROGRESS:

To develop the IEP, the staff administers two criterion-referenced measurements upon enrollment and at the end of the year: Koontz Child Development Program and Parent-Infant Communication.

PROGRAM FOR PARENTS:

Parents and siblings are involved in home visits, nursery school, sign language classes, and parent information and support groups. Parents maintain records of children's language development and participate on the advisory board. Some parents have been hired to work as aides in the nursery school program.

FEATURES AND PRODUCTS:

A hearing-screening program was developed to be used as a part of routine well-baby checkups at San Francisco General Hospital in October 1982. A high-risk register is completed on each child born at SFGH, and those children who are at-risk are screened with the Hear Kit (developed by M. Downs) at their 2-, 6-, and 12-month well-baby visits. The nurse practitioners at SFGH well-baby clinics have been trained to administer the hearing and screening tests. The project stresses involvement with professional and nonprofessional members of the deaf community. The project runs an in-service training program for mental health personnel serving minority families with deaf children. CEID graduates are mainstreamed into the Head Start program on-site.

The Playschool

A Preschool for Emotionally Disturbed Children

ADDRESS: University of Colorado Health Sciences Center PHONE: (303) 394-8606
Rocky Mountain Child Development Center YEAR OF FUNDING: 2
4200 East Ninth Avenue
Denver, Colorado 80262

FISCAL AGENCY: University of Colorado Health Sciences Center

DIRECTOR: Sally J. Rogers
OTHER STAFF TITLES: psychologist, teacher, teachers' aides

CHARACTERISTICS OF TARGET POPULATION:

The project serves 14 children age 2 to 5 years with severe emotional or behavioral disorders. Most of the children demonstrate developmental delays in other areas.

PROGRAM FOR CHILDREN:

The project provides a half-day classroom program four days weekly. The curriculum is based on Mahler's (1971) ego development theory and emphasizes communication skills, constructive play skills, and social relationships with peers and adults. Classroom emphasis will be on learning through play, and play will be the primary vehicle for fostering developmental growth and change.

MEASURES OF CHILD PROGRESS:

The project staff measures child progress by pre- and posttest changes based on videotaped samples of various behaviors, communication with parents and teacher, stranger and separation distress, approach to peers, level of free-play behavior, level of symbolic play, and dyadic interactions with mother and teacher. The project also assesses language development with the SIOD; psychological development with the Stanford-Binet, Leiter, and Vineland; and classroom progress with the Developmental Programming for Infants and Young Children.

PROGRAM FOR PARENTS:

Parents participate directly in parent groups and in both center- and home-based programs.

FEATURES AND PRODUCTS:

The project proposes to adapt the University of Michigan's Early Intervention Developmental Profile and the Preschool Developmental Profile. Other products will include the development of teaching guidelines for integrating emotionally disturbed children into generic early childhood programs, a play assessment tool, and a play curriculum for severely disturbed young children.

TIIP

Training and Infant Intervention Program

ADDRESS: Department of Pediatrics and Child Health PHONE: (202) 745-1595
 Howard University Hospital YEAR OF FUNDING: 3
 2041 Georgia Avenue, N.W.
 Washington, D.C. 20060

FISCAL AGENCY: Howard University College of Medicine

DIRECTOR: Eva T. Molnar
 COORDINATOR: Selerya O. Moore-Catherine
 OTHER STAFF TITLES: parent educator/peer parent trainer; administrative assistant/dis-
 semination coordinator; secretary; graduate student; peer parent
 trainee; supplementary hospital staff; nursing staff; social worker;
 pediatrician; neonatologists

CHARACTERISTICS OF TARGET POPULATION:

TIIP serves 10 to 15 inner-city infants birth to age 3 years and their parents. The children have handicapping conditions or a risk factor of 10 percent or higher for developing moderate to severe handicapping conditions.

PROGRAM FOR CHILDREN:

TIIP provides early educational/developmental intervention integrated with interdisciplinary health care. The project provides direct services through a neonatal intensive care unit (NICU) program and a home/clinic program. The NICU program is implemented in the Howard University Hospital High-Risk Clinic and in the infant's home. Intervention activities are selected from the Education for Multihandicapped Infants (EMI) High-Risk Nursery Intervention Curriculum, EMI Curriculum Pool of Materials, Portage Project materials, and other developmental curricula.

MEASURES OF CHILD PROGRESS:

TIIP uses anecdotal records, daily observations, recorded daily prescribed activities, and parent and staff notations to assess child progress. The project's staff members administer the EMI Assessment Scale every three months and the Bayley Scales every 6, 12 and 18 months adjusted age and every 24 and 36 months chronological age.

PROGRAM FOR PARENTS:

TIIP works with parents within 24 hours after the birth of their child. The project provides educational counseling in child rearing and remediation strategies and skills in the hospital and the home. TIIP also provides counseling in the hospital and home to parents who experience the death of their handicapped or at-risk infant.

FEATURES AND PRODUCTS:

TIIP conducts early assessment of minority parents' and families' child-rearing and psychosocial needs while in the hospital after the birth of their infants. The project's staff members work directly with minority pediatric residents through the Model Office, a simulated private pediatric setting. The project director and a neonatologist have developed a noncategorical identification system to screen infants for the program. This system is ready for publication. Project staff members will develop a protocol for the child development specialist or early childhood educator working within a primary-care pediatric training setting or a private physician's office. This publication will be available June 1983. The project director developed a protocol of "Psychosocial Considerations in Case of Fetal or Neonatal Death," which is ready for distribution.

UNIsensory Project

ADDRESS: 3016 Lanier Drive, NE
Atlanta, Georgia 30319

PHONE: (404) 237-6141
YEAR OF FUNDING: 3

FISCAL AGENCY: Auditory Educational Clinic, Inc.

DIRECTOR: Ellen A. Rhoades
COORDINATOR: Sally Tannenbaum
OTHER STAFF TITLES: parent advisors/therapists; secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 hearing-impaired children; 20 children are birth to age 6 years, and 10 children are birth to age 3 years.

PROGRAM FOR CHILDREN:

The full-year program provides weekly home- or center-based demonstration-therapy sessions using the auditory-verbal or UNIsensory approach. Parents act daily as co-therapists. The project mainstreams all children age 2 to 6 years in community pre-schools; staff members visit these children monthly. In addition, the project offers comprehensive, community-based audiological management.

MEASURES OF CHILD PROGRESS:

UNIsensory administers general pre and post measures using the Alpern-Boll Developmental Profile II and tests general communication development quarterly using the Sequenced Inventory of Communication Development. The project uses other instruments for formative and summative measures in the areas of receptive language, expressive language, speech, listening, auditory memory, and home parent-child interaction.

PROGRAM FOR PARENTS:

Parents act as co-therapists in the UNIsensory approach and carry out activities demonstrated in the weekly therapy sessions. They collaborate with the staff in audiological management and mainstreaming, participate in dissemination activities, and serve on the advisory council. During an intensive orientation period, the project provides information on audiological management and on understanding hearing loss. Parents meet monthly to discuss individual child progress and attend meetings with staff to discuss interests of the parents.

FEATURES AND PRODUCTS:

Staff and parents participate in preservice orientation to become organized and informed of project goals and program planning, implementation, and evaluation. Follow-up meetings foster interagency cooperation, and bimonthly staff meetings include analysis of videotapes and written reports. Evening or weekend instruction is available.

Family Centered Care for Infants at High Risk of Developmental Difficulties

ADDRESS: Department of Pediatrics
1319 Punahou Street
Honolulu, Hawaii 96826

PHONE: (808) 947-8511
ext 752
YEAR OF FUNDING: 3

FISCAL AGENCY: Kapiolani Children's Medical Center

DIRECTOR: Setsu Furuno
COORDINATOR: Katherine O'Reilly
OTHER STAFF TITLES: physical therapist; occupational therapist; speech pathologist;
early education specialist; infant enrichment nurse; social worker;
clerk

CHARACTERISTICS OF TARGET POPULATION:

The project serves infants birth to age 18 months and their families. Criteria include infant residence in the Neonatal Intensive Care Unit (NICU) and birth weight under 1500 grams; criteria exclude obvious birth defects as these infants already receive service. The project monitors infants for 9 months after their discharge from the hospital.

PROGRAM FOR CHILDREN:

Intervention occurs in three phases. A transdisciplinary team works with the infant and parent daily during the subacute and recovery phases and weekly during the outpatient phase. The project staff uses the EMI-ART curriculum during the subacute phase and the Hawaii Early Learning Profile (HELP) and Activity Guide during the later two phases.

MEASURES OF CHILD PROGRESS:

Assessments include the Brazelton Neonatal Assessment Scale, Amiel-Tisson, Uzgiris-Hunt, REEL, Bayley, and standard assessments by the occupational therapist, physical therapist, speech pathologist, audiologist, infant educator, physician, and psychologist.

PROGRAM FOR PARENTS:

Parents receive direct intervention along with the infant. Major goals include the promotion of parent-infant bonding and increased knowledge of child development and basic parenting skills. Parent group meetings are also a regular part of the program.

FEATURES AND PRODUCTS:

The project is preparing a staff development program for working in an NICU. Already completed is a slidetape presentation that describes the program. Another slide-tape show, to orient parents to the NICU, is nearing completion.

EIP

Early Intervention Project

ADDRESS: 2300 Children's Plaza
Chicago, Illinois 60614

PHONE: (312) 880-4844
YEAR OF FUNDING: 3

FISCAL AGENCY: Children's Memorial Hospital

DIRECTOR: James John Reisinger
COORDINATOR: Victoria V. Lavigne
OTHER STAFF TITLES: teacher; speech and language specialist; secretary

CHARACTERISTICS OF TARGET POPULATION:

EIP serves children age 18 months to 5 years. The children display problem acting-out behavior such as noncompliance, tantrums, aggression, or developmental delays or deviations. Developmental problems include overall delay, speech and language problems, and learning disabilities.

PROGRAM FOR CHILDREN:

The program is a modular system with entrance into each module based on need. In the Toddler Management module, problem behavior is changed by instructing the parent to use behavioral strategies. In the Individual Tutoring module, the parent learns how to systematically facilitate the child's language. The Preschool module promotes social behavior and facilitates academic readiness skills. Other modules include a Theory Training Group for mothers and a Liaison module to coordinate communication with agencies receiving EIP children.

MEASURES OF CHILD PROGRESS:

The Toddler Management, Individual Tutoring, and Preschool modules incorporate a systematic data collection procedure to assess the children's initial functioning as well as day-to-day progress during intervention. The staff uses the Brigance Inventory of Early Development in the Preschool Module.

PROGRAM FOR PARENTS:

Parents receive one-on-one instruction in behavioral change strategies, including behavioral observation, principles of behavior change, and planning programs for their child. When appropriate, parents also learn specific ways to facilitate their child's language. All parents attend group theory training in behavior modification. When parents have successfully met goals set for their child, they train new parents or assist in the Preschool module.

FEATURES AND PRODUCTS:

EIP emphasizes the training of parents as primary change agents. These parents become a work source for the project, thus allowing EIP to provide cost-effective service for young handicapped children. The data collection procedure incorporated into the daily program enhances EIP's accountability to the consumer and allows parents to continuously monitor their child's progress. In addition, this procedure ensures updated program planning for each child.

RIEP

Rural Infant Education Program

ADDRESS: Wabash & Ohio Valley Special Education District PHONE: (618) 378-2131
Box E YEAR OF FUNDING: 2
Norris City, Illinois 62869

FISCAL AGENCY: Norris City-Omaha Community Unit District #3

DIRECTOR: Lawrence Enj
OTHER STAFF TITLES: early childhood teachers; program aides

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 to 40 children birth to age 3 years who are determined through medical, psychological, environmental, and educational assessment to be at-risk in terms of their physical, cognitive, language, sensory, or social/motivational development.

PROGRAM FOR CHILDREN:

Each child receives an Individualized Education Plan. Activities for these plans are selected according to need from the Small Wonder Performance Objectives for Preschool Children, the Developmental Programming for Infants and Young Children, the Uniform Performance Assessment System, the Learning Accomplishment Profile, and the Coordinated Assessment and Planning System. Supplemental services (psychological, social, audiological, speech and language, physical therapy) are provided through cooperation with the Wabash & Ohio Valley Special Education District. The project screens about 400 birth-to-3 infants yearly.

MEASURES OF CHILD PROGRESS:

The project implements initial child assessment through the Brookline Early Education Project Medical At-Risk Inventories and standardized tests, including the Alpern-Boll Developmental Profile, the Bayley Scales of Infant Development, the Peabody Picture Vocabulary Test -- Revised, the McCarthy Scales of Children's Abilities, and the Brigance Inventory. Criterion-referenced tasks and observations of child and child-parent interactions are also used for assessment purposes.

PROGRAM FOR PARENTS:

Parents receive training and are directly involved in home-based activities as primary interventionists. Parent information, counseling services, and family psychological and social services are available to the family. In addition, parents are involved in ongoing planning and evaluation.

FEATURES AND PRODUCTS:

One of the features of this project will be an adaption of the Brookline Early Education Project Medical At-Risk Inventory for use in other rural areas. The project will also develop a criterion-referenced assessment and curricular package. The training, in-service, and screening components of the project are viewed as significant replication components.

Project FINIS

Families with Infants in Networks of Interactional Support

ADDRESS: 502 North 12th Avenue
Marshalltown, Iowa 50158

PHONE: (515) 752-0103
YEAR OF FULFILLING: 3

FISCAL AGENCY: Area Education Agency #6

DIRECTOR: Damon L. Lamb
OTHER STAFF TITLES: teacher; occupational therapist; physical therapist; pediatric nurse; social worker; psychologist; speech and language pathologist

CHARACTERISTICS OF TARGET POPULATION:

Project FINIS serves 35 to 45 children birth to age 36 months. Handicapping conditions include mental disabilities (mild to severe/profound), communication handicaps, orthopedic impairments, and multiple handicaps.

PROGRAM FOR CHILDREN:

The project provides center-based services. Emphasis is on child development, infant-caregiver interactions, and family development. Children receive instructional services ranging in frequency from one session per week to daily sessions. The project uses the Adaptive Performance Instrument and the Hawaii Early Learning Curriculum for the mild and moderate population.

MEASURES OF CHILD PROGRESS:

Summative (pre/post) measures of infant progress include the SICD, Bayley Scales of Infant Development, HOME, and the Marshalltown Behavioral Developmental Profile. Formative measures include curriculum-linked assessments and IEP progress data.

PROGRAM FOR PARENTS:

Services for families include Pilot Parents, family life education classes, parent knowledge base of infant development classes, Saturday morning and evening father-infant sessions, and family systems counseling. A family development plan (FDP), which follows assessment of the family system, is established with all families. Assessment focuses on system parameters and communication/problem-solving skills. Short-term (no more than one half-day per week) respite service is available for families.

FEATURES AND PRODUCTS:

Project FINIS applies the principles of family development theory and systems theory to deliver services to families with handicapped children. Developmental intervention services are provided within the context of the family in a manner which facilitates both child and family development. Structured interview procedures are used to assess family systems (boundaries, sub-systems, hierarchies, alliances). An Interactional Analysis Scale (IAS) developed by the project is used to assess infant-caregiver interactions. Additional materials developed include: Project FINIS Procedures Manual; Monograph #1, Approaches to Early Identification of Potential Special Needs Children; Monograph #2, Infant-Caregiver Interactions: Assessment and Intervention; Monograph #3, Family Assessment; Monograph #4, Sensorimotor Development: A Curriculum for Parent Education; and Monograph #5, Family Life Education: A Curriculum Supplement for Parent Education Programs.

Lawrence Early Education Program

An Interagency Integrated Early Intervention Approach to Early Childhood Special Services

ADDRESS: 2017 Louisiana
Lawrence, Kansas 66044

PHONE: (913) 842-6222
ext 319
YEAR OF FUNDING: 2

FISCAL AGENCY: Lawrence Unified School District #497 Special Services

DIRECTOR: Janet Wedel

OTHER STAFF TITLES: class coordinators; occupational therapist; speech therapists;
program assistants; secretaries

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped children birth to age 5 years. Handicapping conditions include learning, communication, and visual impairments; mental retardation; autism; physical handicaps; and severe multiple impairments.

PROGRAM FOR CHILDREN:

The project uses community resources and two special classrooms to provide a continuum of service delivery alternatives for the children and their families. A centralized child intake and monitoring system is used to screen, evaluate, place, monitor, and re-evaluate children receiving services. Children placed in the special classrooms receive intensive individualized treatment using incidental teaching and generalization programming strategies.

MEASURES OF CHILD PROGRESS:

The project staff measures child progress with a battery of standardized tests given every six months and behavioral observations specified as part of each child's IEP.

PROGRAM FOR PARENTS:

Services for parents are provided on community, classroom, and individual levels. Parents are directly involved in the development and implementation of their child's education plan. Individual parent training is available at the center or at home upon request, and a regular program of parent training workshops is provided.

FEATURES AND PRODUCTS:

The project's features include a centralized screening, evaluation, placement, and monitoring system; a cooperative interagency approach; a continuum of least restrictive services; and a parent participation program. Products will include a slide show, a continuum-of-services resource guide, workshops, journal articles, and a handbook for developing community-based early childhood education systems.

The S-E-KAN Project

ADDRESS: Parsons Research Center
Parsons, Kansas 67357

PHONE: (316) 421-6550
YEAR OF FUNDING: 3

FISCAL AGENCY: University of Kansas, Bureau of Child Research

DIRECTOR AND

COORDINATOR: Lee Snyder-McLean

OTHER STAFF TITLES: handicapped infant development specialist; language/communication curriculum specialist

CHARACTERISTICS OF TARGET POPULATION:

The project provides early intervention services for handicapped children birth to age 5 years residing in a rural area in southeastern Kansas. Currently, 30 children age 2 months to 5 years are receiving services through this program.

PROGRAM FOR CHILDREN:

The project delivers services through various programs ranging from primarily center-based to primarily home-based and provides additional support services to individual parents and parent groups on the basis of identified needs. The curriculum reflects an interactive model of learning in both generic and specific skill areas.

MEASURES OF CHILD PROGRESS:

The project staff administers the S-E-KAN Curriculum Assessment, Alpern-Boll, SICD, and a standardized language sample annually; additional language/communication assessments (e.g., Carrow and "Oliver") are administered as needed. Specific criterion-referenced probe tests are used weekly to assess progress toward IEP objectives.

PROGRAM FOR PARENTS:

All parents participate in the assessment and IEP process and are responsible for some degree of program carry-over and monitoring in the home. Parents and project staff individually negotiate further involvement and provision of support services.

FEATURES AND PRODUCTS:

The focus of this project is to develop a program model with an interactive, comprehensive curriculum that allows targeting of essential generic and specific skills for the children. Moreover, the program model is designed to accommodate the differing needs of these children and their families, while maintaining maximum efficiency in terms of teacher/staff time required for administrative activities versus direct services to the children. Project staff members are currently working on a microcomputer program storage of curriculum objectives and creation of IEPs.

Infant/Parent Training and Early Childhood Development Program

ADDRESS: 2050 Versailles Road
Lexington, Kentucky 40504

PHONE: (606) 254-5701
YEAR OF FUNDING: 2

FISCAL AGENCY: Cardinal Hill Hospital

DIRECTOR: Linda Dyk
OTHER STAFF TITLES: teachers; social worker; psychologist; physical therapist;
occupational therapist; speech therapist; nurse; consultant
audiologist; neurologist; ophthalmologist

CHARACTERISTICS OF TARGET POPULATION:

The program serves 30 children birth to age 5 years with the following handicaps: hydrocephalus, myelomeningocele, cerebral palsy, blind or visually impaired, deaf/blind, other low-incidence syndromes, or a severe developmental delay in two or more areas.

PROGRAM FOR CHILDREN:

The program for children shifts from a transdisciplinary approach to a modified interdisciplinary approach with three levels of service: 1) The Infant-Parent Program, for children birth to age 2 years, meets weekly and emphasizes parent training; 2) Developmental I, for children 2 to 4 years chronological age or 1 to 2 years mental age, meets at the center for two half-day sessions weekly (the child attends with one other child, and parents participate once a week); 3) Developmental II, for children 4 years chronological age or 2 years mental age, meets for five half-day classes weekly (six children attend this class, and a teacher coordinates team efforts.) Each of the three levels of service contains a home-based component.

MEASURES OF CHILD PROGRESS:

The project administers Early LAP or LAP-D, Alpern-Boll, Cattell, Stanford-Binet, Wisconsin Behavior Rating Scale, and Vineland to all children. In addition, staff use other tests for children with specific identified handicaps.

PROGRAM FOR PARENTS:

Parent needs in the areas of child development, legal issues, social services, and behavior management are assessed by the Minnesota Childhood Development Inventory and by CHEAP (Cardinal Hill Early Assessment of Parents). The project develops parent IEPs. Parents receive assistance through parent-teacher/therapist interaction, group meetings, small-group discussions, a parent library, and in a parents-as-teachers program.

FEATURES AND PRODUCTS:

The transdisciplinary to modified interdisciplinary model is a unique feature. The project maintains a close working relationship with two neonatal units to facilitate an early and comprehensive referral system. Other features include the CHEAP and the Individualized Parent Program.

Early Education Program for Children with Down's Syndrome

ADDRESS: Durrett Education Center
4409 Preston Highway
Louisville, Kentucky 40213

PHONE: (502) 456-3290
YEAR OF FUNDING: 3

FISCAL AGENCY: Jefferson County Public Schools

DIRECTOR: Joyce Paul
COORDINATOR: Juanita Landers
OTHER STAFF TITLES: classroom teachers; classroom assistants; parent educator (certified teacher)

CHARACTERISTICS OF TARGET POPULATION:

The project serves children with Down's syndrome and their parents in three general education school sites.

PROGRAM FOR CHILDREN:

The project involves two preschool classes in a school setting for children age 3 to 5 years. Classes operate on a full-day schedule five days weekly. Programs for children are individualized following established developmental sequences in motor, communication, social, cognitive, and self-help skills. The curriculum is based on the Seattle model and the Adaptive Behavior Curriculum. Project staff members also use the district's general education kindergarten curriculum and other instructional materials. Children interact with their general education peers as much as possible in social or academic experiences identified to meet their needs. Parents participate in every phase of the child's educational program.

MEASURES OF CHILD PROGRESS:

Project staff obtains baseline criterion data on the Adaptive Behavior Curriculum upon the child's entry to the program and two to three times yearly. Other instruments used at the teacher's discretion include the Brigance Inventory of Early Development, LAP, Infant LAP, the Developmental Sequence Performance Inventory, the revised PPVT, and the Preschool Language Scale. The Cattell or Bayley is administered to children after age 3 years.

PROGRAM FOR PARENTS:

A parent education program is structured to heavily involve parents in skill development training to address every phase of their child's social, emotional, motor, and cognitive development. Children birth to age 5 years participate with their parents on a regular basis. A staff parent educator (certified teacher) works with parents individually and in groups to address their needs and interests. Workshops are provided on topics identified by parents or project staff to increase parents' skills and awareness. Parents participate as members of the advisory and parent committees. The program offers peer support and encourages sharing and communicating through telephone networking, the monthly parent newsletter, parent meetings, and social events. Parental participation in assessment, IEP development, and carrying out the instructional program and data collection is a major component of the project.

FEATURES AND PRODUCTS:

The project has available a pamphlet which gives full details of options available through the program, as well as sample copies of the parent newsletter, Up, Up and Away.

Project Welcome

ADDRESS: 333 Longwood Avenue
Boston, Massachusetts 02115

PHONE: (617) 735-6939
YEAR OF FUNDING: 3

FISCAL AGENCY: Wheelock College

DIRECTOR: Linda Gilkerson
OTHER STAFF TITLES: medical director; social work consultant; social worker; nurse consultant; parent/infant educator; early intervention liaison; assistant to the director; parent coordinator

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 newborn infants at biological, established, or environmental risk for developmental delays. Biological criteria include: birthweight 1250 grams or less, intraventricular hemorrhage, newborn seizures, sepsis, or Apgar below three at five minutes.

PROGRAM FOR CHILDREN:

Infants receive developmental consultation by the parent/infant educator in the NICU and in the community hospital. The educator uses the Neonatal Behavioral Assessment Scale (NBAS) and the Assessment of Premature Infants' Behavior Scale (APIB) to assess infants and serves as a resource to the nurses in the planning and implementation of a developmental program for each newborn. Follow-up home visiting or developmental consultation to community-based early intervention programs is provided. This year a training-the-trainers model has been developed, in which selected nurses are trained as developmental specialists and then supported as they train their peers in developmental assessment and intervention. This model for developmental consultation training is operating in five hospitals (three NICUs and two community hospitals).

MEASURES OF CHILD PROGRESS:

The program administers the NBAS and the APIB.

PROGRAM FOR PARENTS:

Parents of target children receive social service support during and, if needed, after hospitalization. Three types of peer support are available to all parents after their infants are discharged from the NICU: parent-to-parent telephone support through the project, a monthly educational series, and a parent newsletter. Consultation with the project's parent/infant educator is also available.

FEATURES AND PRODUCTS:

Features include: a developmental training program in five hospitals; the use of the NBAS and the APIB in assessment and development programming; parent-as-staff-member, using the peer leadership model; and an extensive outreach education program for physicians, visiting nurses, community hospital nurses, and early intervention teams. Products include: The Preterm Infant: Development, Assessment and Intervention; an article describing the use of the NBAS and the APIB in developmental consultation; the Parent Program Manual; Referral Criteria to early intervention; a Statewide Directory of Early Intervention Programs; two program descriptions -- The Dignity of Risk and Developmental Consultation: The Role of the Parent/Infant Educator in a Hospital/Community Coordinated Program for High-Risk Premature Infants; a pamphlet for parents on premature infant development; and two papers for people who work with premature infants and their parents.

ERIN Bilingual Demonstration Program

ADDRESS: 376 Bridge Street
Dedham, Massachusetts 02026

PHONE: (617) 329-5529
YEAR OF FUNDING: 2

FISCAL AGENCY: ERIN, Inc.

DIRECTOR: Peter Hainsworth
OTHER STAFF TITLES: teacher training specialists; materials production specialist;
secretary

CHARACTERISTICS OF TARGET POPULATION:

The program serves 16 to 20 bilingual children in several language groups at a pre-school handicapped and kindergarten level. The children's mild to moderate handicaps are compounded by limited English proficiency.

PROGRAM FOR CHILDREN:

Services and curriculum include ERIN (Outreach) program components for bilingual populations, screening, learning environment designs, language and motor skills, and parent involvement.

MEASURES OF CHILD PROGRESS:

The program administers the Preschool Screening System adapted in 15 languages (and other ERIN measures) administered pre and post.

PROGRAM FOR PARENTS:

Parents participate in a regular communication exchange with the project.

FEATURES AND PRODUCTS:

Mildly to moderately handicapped children from 15 language and cultural groups are screened.

Perkins Infant-Toddler Program (0-3)

ADDRESS: 175 North Beacon Street
Watertown, Massachusetts 02172-9982

PHONE: (617) 924-3434
ext 330

YEAR OF FUNDING: 3

FISCAL AGENCY: Perkins School for the Blind

DIRECTOR: Charles C. Woodcock

COORDINATOR: Sherry Raynor

OTHER STAFF TITLES: social worker; home teachers; head teacher (assistant to the coordinator); secretary;
contracted services include an audiologist, psychologist, speech and language therapist, occupational therapist, physical therapist, and a media specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 12 visually handicapped infants birth to age 3 years and their parents or principal caregivers. The children are legally blind or have a visual impairment which will require evaluation, modification of equipment or environment, special techniques, understanding, and materials to adapt better to the home or future school setting.

PROGRAM FOR CHILDREN:

The project provides a weekly home-teaching program stressing parental involvement and a planned parent and infant group program which meets at the project three times a month. Objectives for the children's growth are facilitated by the development of a "life-learning" curriculum. These learning activities concentrate on using the child's natural environment -- the home, neighborhood, family, extended family, and community.

MEASURES OF CHILD PROGRESS:

To measure child progress, the project uses observation, parent reporting, the Maxfield-Bucholz Social Maturity Scale for Use with Preschool Blind Children, Vision-Up, and the Oregon Project for Visually Impaired and Blind Preschool Children.

PROGRAM FOR PARENTS:

Services to parents include home teaching, day and evening center-based participation, support services, information exchange, program planning, and evaluation.

FEATURES AND PRODUCTS:

The project provides weekly home teaching and coordination with other agencies for additional services for parents and teachers. Center-based meetings three times monthly allow for the use of a home-like setting for instructional purposes for children and parents. Monthly evening meetings facilitate greater participation by fathers.

Handicapped Children's Early Education Program

ADDRESS: Route 7, Box 21
Philadelphia, Mississippi 39350

PHONE: (601) 656-5251
YEAR OF FUNDING: 3

FISCAL AGENCY: Mississippi Band of Choctaw Indians

DIRECTOR: Louise Wilson
COORDINATOR: Jo Anne Corley
OTHER STAFF TITLES: research and instructional aide; secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped Choctaw Indian children birth to age 8 years.

PROGRAM FOR CHILDREN:

Handicapped children presently receive services from a variety of educational and social service programs. This project focuses on parent training and orchestrates a multi-staff, multi-program effort to serve young handicapped children. Pre-kindergarten, kindergarten, and primary school instructional materials have been translated into Choctaw.

MEASURES OF CHILD PROGRESS:

Children are assessed with the DDST, McCarthy, and Bayley translated into Choctaw. When appropriate, the staff uses other assessment tools in the following areas: oral expression, listening comprehension, basic reading skills, math calculation/reasoning, and written expression.

PROGRAM FOR PARENTS:

The project developed a curriculum for parents which includes an expectant-mother basic information program. The project holds parent seminars throughout the school year for parents of handicapped children, and parents of school-aged children form a parents auxiliary designed to aid in crisis intervention.

FEATURES AND PRODUCTS:

The program translated pre-kindergarten, kindergarten, and primary school instructional materials into Choctaw, as well as translating the DDST, McCarthy, and Bayley assessment instruments. A curriculum for parents that features an expectant-mother basic information program was also completed.

Pearl River Infant Project

ADDRESS: 801 Sixth Avenue
Picayune, Mississippi 39466

PHONE: (601) 798-7132
YEAR OF FUNDING: 3

FISCAL AGENCY: South Mississippi Retardation Center

DIRECTOR: Robert M. Samms

COORDINATOR: Judy Jones

OTHER STAFF TITLES: special educator; parent educator; speech pathologist; teacher aide;
physical therapy consultant; physical therapy assistant

CHARACTERISTICS OF TARGET POPULATION:

The project serves 25 developmentally disabled children birth to age 5 years (6 years if not eligible for public schools) residing in Pearl River County, Mississippi.

PROGRAM FOR CHILDREN:

The project serves the children in the home and in a center. The home-bound children are gradually phased into the center. The project has adapted the Portage Project and the Small Wonder Kit into the program curriculum. The project uses a transdisciplinary approach with home-bound infants and an interdisciplinary approach with center-based infants.

MEASURES OF CHILD PROGRESS:

A team consisting of a psychologist, special educator, speech language therapist, nurse, dietician, pharmacist, and social worker conducts the initial comprehensive interdisciplinary evaluation. Further evaluation by the center staff includes the Early LAP, pre and post REEL, and observation. IEPs are written for each child, with an evaluation goal every six months and a complete evaluation at the end of each year.

PROGRAM FOR PARENTS:

Upon placement recommendation by the diagnostic and evaluation team, the parent educator makes a home visit to help parents complete the admission and medical forms. When the child's IEP is written, the parents contract to come to the center for a specified number of hours of training to enable them to continue the infant's program in the home. The staff conducts parent training in the form of workshops and one-on-one consultation. Parent assessment in pre- and posttest knowledge forms is used to evaluate the parent education component.

Project LINCS

Linking Infants in Need with Comprehensive Services

ADDRESS: Department of Special Education
515 South Sixth Street
Columbia, Missouri 65211

PHONE: (314) 882-3741
YEAR OF FUNDING: 2

FISCAL AGENCY: University of Missouri

CO-DIRECTORS: Sandra Gault and Joel Ray
OTHER STAFF TITLES: community liaison person; home trainers

CHARACTERISTICS OF TARGET POPULATION:

The project serves 20 at-risk or handicapped children birth to age 3 years and their mothers. All types of disabilities are represented in the population.

PROGRAM FOR CHILDREN:

The project staff members identify services in the community and help the service agencies provide developmental services to handicapped children and their families. The project emphasizes maximizing service delivery by expanding the role of existing service providers.

MEASURES OF CHILD PROGRESS:

The project monitors child progress by the Denver Developmental Screening Test and the Ordinal Scales of Psychological Development.

PROGRAM FOR PARENTS:

The parent program trains parents to work directly with their child with assistance from project staff and agency personnel. A formal parent education program in child health and development is offered.

FEATURES AND PRODUCTS:

The outstanding feature of the project is the Linkage service delivery model for use in rural areas. Community and agency analysis strategies and related materials have been developed.

Big Sky Early Education Center

ADDRESS: 401 Social Science Building
University of Montana
Missoula, Montana 59812

PHONE: (406) 243-5467
YEAR OF FUNDING: 3

FISCAL AGENCY: Montana University Affiliated Program

DIRECTOR: Richard van den Pol

PRINCIPAL

INVESTIGATOR: Robert Crow

OTHER STAFF TITLES: special education teacher; speech pathologists; parents; volunteers; paraprofessional instructional therapists

CHARACTERISTICS OF TARGET POPULATION:

The project is designed to be appropriate for Montana's "permissive mandate" and rural/remote circumstances. Thus, classrooms are noncategorical with intervention techniques designed for effectiveness with most severely and multiply handicapped through mildly handicapped. The project accomplishes home-based parent training through an interagency agreement, and a center-based program for children (beginning at age 24 months) and families is available.

PROGRAM FOR CHILDREN:

The project services children and families through three components: individualized assessment and program planning, classroom and home service delivery, and program evaluation. Classroom and home service delivery includes individualized formal instructional programs, language stimulation, parental participation, nonhandicapped peer modeling, parent-implemented training in the home, close home-school communication through report cards, classroom group activities, and kindergarten preparedness training (including behavior management and social skills).

MEASURES OF CHILD PROGRESS:

Project staff members and parents collect daily measurements of progress to assess criterion levels of performance on children's individualized objectives. In addition, the staff uses Bayley and Brigance, as pre- and posttests, with PPVT, SICD, and Binet as needed.

PROGRAM FOR PARENTS:

Parents help design their child's IEP, in assessment, and in delivery of instructional programs in the home and center. Basic parent training programs are integrated with basic staff development activities, which permits common knowledge and skills bases. This also permits excellent parent-staff rapport. The project, with community-based agencies, provides great accessibility to support groups and community and state social services resources for parents.

FEATURES AND PRODUCTS:

The project operates in close cooperation with community-based, state-funded projects that serve handicapped preschoolers in seven rural counties in Montana. Products currently being developed include a data-based staff and volunteer training and supervision system, a social skills training package, an exportable procedures manual and parent training manual.

PEACH

Public Education for Autistic Children and the Home

ADDRESS: Educational Improvement Center/NE
2 Babcock Place
West Orange, New Jersey 07052

PHONE: (201) 731-8400
YEAR OF FUNDING: 2

FISCAL AGENCY: Educational Improvement Center/NE

CO-DIRECTORS: Marjorie T. Goldstein and Robert DiTursi
COORDINATOR: Judith Greenwald
OTHER STAFF TITLES: special education teacher; teaching assistant; social worker;
consulting pediatric psychiatrist

CHARACTERISTICS OF TARGET POPULATION:

The project serves seven autistic children age 3 to 5 years. The project expects to serve ten children.

PROGRAM FOR CHILDREN:

The curricula focus on developmental skill sequences designed to promote the autistic child's adaptability to his or her environment in the areas of communication, socialization, and self-help skills that foster school readiness. Behavioral techniques are used to implement the program. PEACH operates in an urban public school setting.

MEASURES OF CHILD PROGRESS:

Criterion-referenced measures, drawn from the curricula wherever possible, are used to measure student progress. The curricula include: Perceptual Motor Play Program of the Social Learning Curriculum, the AIM Program for deaf-blind students, and the Lovaas approach to language development. Extensive teacher and parent reports are also used.

PROGRAM FOR PARENTS:

The family training program provides parents with skills in the following areas: nature and needs of the autistic child, behavior modification principles, methods to reduce socially inappropriate behaviors, and techniques for language development. Project staff provides experiences and training for the family on-site and in the home.

FEATURES AND PRODUCTS:

This project is a consortium involving a regional education agency (Educational Improvement Center/NE) and a local education agency (a Jersey City public school). The products to be developed by the project include: a project brochure, Family/Home Management Handbook, Directory of Community Resources, Classroom Teacher's Handbook for Pre-school Autistic Children, and a slide-tape presentation. The project also produces videotapes.

PIPE Project

Pueblo Infant-Parent Education Project

ADDRESS: P.O. Drawer J
San Felipe, New Mexico 87001

PHONE: (505) 867-3396
YEAR OF FUNDING: 2

FISCAL AGENCY: Southwest Communication Resources, Inc.

DIRECTOR: Norman Segal
COORDINATOR: Ruth Miksovic
OTHER STAFF TITLES: occupational therapist; speech and language therapist; community health representatives

CHARACTERISTICS OF TARGET POPULATION:

The project serves approximately 25 children birth to age 3 years from seven Pueblo communities; the children have a variety of handicapping conditions.

PROGRAM FOR CHILDREN:

The project implements a home-based service model with an interdisciplinary team of community health paraprofessionals and professional child development specialists. The curriculum is prescriptive and is adapted from the more visually based curriculum materials available (such as Small Wonder, Illustrated Portage (Alaska), and others).

MEASURES OF CHILD PROGRESS:

The project staff members measure child progress with the Bayley Scales of Infant Development every nine months. The EARLY Learning Accomplishment Profile provides ongoing assessment and is the basis for determining specific training objectives for children. The Bromwich Parent Behavior Progression Checklist is used to assess parent-child interactions.

PROGRAM FOR PARENTS:

Parents participate in weekly staff-parent training activities and conferences in the home. Parents also participate in a more formal set of training activities (a six-week parent group) upon their entry into the program. Parent representatives serve on the project's advisory council and also assist staff with community liaison and education activities.

FEATURES AND PRODUCTS:

The project's most unique feature is the training of community health paraprofessionals to serve as the primary facilitators of infant intervention and parent education, thereby enabling the project to provide appropriate bilingual/bicultural services. The project is developing for parents materials which will illustrate Native American child-rearing practices and will be used to stimulate infant development. This product will incorporate traditional activities from many tribes and will be disseminated to Indian communities throughout the country.

New Vistas Program for Infants with Special Needs

ADDRESS: P.O. Box 2332
Santa Fe, New Mexico 87501

PHONE: (505) 988-3803
YEAR OF FUNDING: 2

FISCAL AGENCY: New Vistas

DIRECTOR: Mary K. Russell
COORDINATOR: Evangelina Moncayo
OTHER STAFF TITLES: early childhood specialists; occupational therapist; speech therapist

CHARACTERISTICS OF TARGET POPULATION:

The project offers support services, training, and consultation to community service providers interested in initiating and expanding local services to children with special needs. Project activities impact upon children birth to age 5 years and their families. The project serves 53 children and families in eight rural counties in north central New Mexico.

PROGRAM FOR CHILDREN:

Services to community service providers include: awareness and education regarding the importance and benefits of early intervention services; comprehensive training programs in the New Vistas home-based service delivery model; and consultation and workshops dealing with various topics in the area of early intervention and implementation of programs.

MEASURES OF CHILD PROGRESS:

The project staff has developed a needs assessment to help rural service providers identify areas of interest and concern. Consultation is provided to help assess the needs of children and families served by these providers. Evaluation programs are set up using the service providers' system. Assessment tools are recommended based on individual needs of a community.

PROGRAM FOR PARENTS:

Parents are recognized as the primary members of the resource team that serves the child. Parents of children served are active participants in workshops provided to community service providers. As members of the parent advisory council, parents are directly involved in project activities in their respective communities and serve as advocates for children with special needs.

FEATURES AND PRODUCTS:

The project has developed and implemented an early childhood service delivery system for rural communities based on an individual community's needs; developed a comprehensive training package for community service providers who wish to deliver quality services to children with special needs and their families; and developed a parent/professional council to serve as advocates for early childhood services in north central New Mexico.

Project VIVA

Viabie In-Vivo Assessment

ADDRESS: Adelphi University
Special Education
Garden City, New York 11530

PHONE: (516) 294-8700
YEAR OF FUNDING: 2

FISCAL AGENCY: Adelphi University

DIRECTOR: Ruth F. Gold
COORDINATOR: Phoebe Lazarus
OTHER STAFF TITLES: evaluator; speech pathologist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 20 cross-categorical children age 3 to 8 years with varying disabilities who are targeted to be mainstreamed into less restrictive environments.

PROGRAM FOR CHILDREN:

The summer preschool program improves the transition of children from out-of-district placements to district programs. Continuous assessments will be used during the school year to modify programs of mainstreamed children.

MEASURES OF CHILD PROGRESS:

The project uses a criterion-referenced observation scale developed by staff and the Brigance Inventory of Early Development.

PROGRAM FOR PARENTS:

Workshops are held to explain in-vivo assessment and prescription and to identify natural activities parents can use to reinforce skill development.

FEATURES AND PRODUCTS:

Development of a parents' manual and a teachers' manual will begin this year and will be completed in year 3. These products will provide a framework for in-vivo assessment and prescription.

Project ENFOCAR

Education for Ninos and Their Families Organized Around Culture, Advocacy and Respect

ADDRESS: 2253 Third Avenue
New York, New York 10035

PHONE: (212) 289-6650
YEAR OF FUNDING: 3

FISCAL AGENCY: East Harlem Council for Human Services

DIRECTOR: Richard Terry
COORDINATOR: Adaline Santiago Walker
OTHER STAFF TITLES: education strategist; education aides; psychologist, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project can serve 20 mildly to moderately mentally retarded or hearing-, speech-, visually, or orthopedically impaired children age 2-1/2 to 5 years whose parents will commit themselves to weekly parent participation. The project offers all services on a bilingual/multicultural basis.

PROGRAM FOR CHILDREN:

The program consists of three bilingual/multicultural placements: a preschool handicapped program, a mainstreaming preschool program, and a transitional kindergarten program. The project uses a center- and a home-based approach and provides health, education, and social services.

MEASURES OF CHILD PROGRESS:

Each student receives a case study evaluation prior to placement in a program. The project administers the DDST, Vineland Social Maturity Scale, Bayley, and McCarthy Scales on a pre- and posttest basis, using systematic data collection on all IEP goals and objectives.

PROGRAM FOR PARENTS:

Parent involvement activities include parent group meetings, parent/teacher conferences, newsletters, classroom observation, and participation on the advisory committee. During home visits, project staff members focus on parent/child interaction and intervention techniques. The project encourages parents to participate in any and all project training.

FEATURES AND PRODUCTS:

These curriculum guides are available: El Nino en Foco (special education training) describes Project ENFOCAR's approach to the training of professionals, paraprofessionals, and other community personnel in the provision of services to young culturally diverse handicapped children. La Familia en Foco (parent staff training) is a four-part series outlining the way Project ENFOCAR creates the proper environment for increasing the involvement of parents and staff in the programmatic and special education experiences of their young culturally diverse handicapped children. La Familia en Foco includes home assistance (HAPPY) packets for each family to help with parent/child interaction and the transfer and reinforcement of the center-based IEP activities.

The project has a community-based bilingual/multicultural delivery system (Spanish and English). To provide more time for those children who need it, the project offers a "buy-in" system for parents, when appropriate, and a "buy-back" system from the local kindergarten.

Early Childhood Intervention Program

ADDRESS: Plainedge Primary School
North Baldwin Drive and Kentucky Avenue
North Massapequa, New York 11758

PHONE: (516) 293-6050
YEAR OF FUNDING: 3

FISCAL AGENCY: Board of Cooperative Educational Service (BOCES) of Nassau County

DIRECTOR: Maureen Metakes
COORDINATOR: Nanette Blank
OTHER STAFF TITLES: social worker/psychologist; speech and language therapist; physical therapist; occupational therapist; special education teacher

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped children birth to age 3 years, their parents, and their extended families.

PROGRAM FOR CHILDREN:

The program is an early intervention model designed to serve handicapped children and their parents or primary caregivers. Children enroll in either the home or home/school program. The home program consists of a weekly home visit by a parent trainer who focuses on parent-child interaction and training parents in intervention techniques relating to cognitive, language, speech, self-help, and motor areas. The home/school program provides weekly home visits and daily three-hour classes in Plainedge School. The school program promotes child development through music, art, and adaptive physical education and helps fulfill individualized educational programs.

MEASURES OF CHILD PROGRESS:

The Bayley, Alpern-Boll and the HOME are administered upon enrollment and semiannually before IEP revisions. Parents and staff use daily and weekly data to measure changes in behavior and skill acquisition both at home and in school.

PROGRAM FOR PARENTS:

Parents participate in an extensive orientation program. They then take part in screening, assessment, evaluation, weekly home visits, and daily classes. Parent workshops are held weekly on topics such as behavior management, speech and language development, motor development, nutrition, and feeding techniques.

FEATURES AND PRODUCTS:

Parents, staff, and service providers are involved in the program's ongoing development. A curriculum is being developed which can be adapted for use with children who have various handicaps.

Project TAP

An Early Aid Demonstration Model of Comprehensive Services for Preschool Handicapped Children

ADDRESS: P.O. Box 19643
North Carolina Central University
Durham, North Carolina 27707

PHONE: (919) 683-6509
YEAR OF FUNDING: 3

FISCAL AGENCY: North Carolina Central University

CO-DIRECTORS: Octavia B. Knight and Barbara K. McCloud
OTHER STAFF TITLES: teachers; parent coordinator; secretary; consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves 15 to 20 predominantly minority children age 3 to 6 years who are high-risk, mildly handicapped, or developmentally delayed.

PROGRAM FOR CHILDREN:

Curriculum content is based on Thurstone's Primary Mental Abilities, with the curricula process composed of acquisition and generalization stages. The project implements a structured curriculum, the Carolina Developmental Program, in a day-care setting. Demonstration classes are located in a local day-care center.

MEASURES OF CHILD PROGRESS:

The project uses the McCarthy Scales of Children's Abilities as a pre- and posttest for program evaluation. The Carolina Developmental Profile provides the basis for writing the IEP and planning the instructional program for each child.

PROGRAM FOR PARENTS:

Parent needs are assessed using two instruments: A self-appraisal inventory completed by the parents and a needs assessment completed by the parent coordinator. Parent activities include monthly training sessions (topics are based on the needs assessment, regular home visits, and advisory board participation.

FEATURES AND PRODUCTS:

The project uses a replication package consisting of a replicability assessment, a manual, and a training agreement. Three sites are known to be using components of the demonstration model.

Branching Out

United Labor Agency's Child Development Center

ADDRESS: 776 Mentor Avenue
Painesville, Ohio 44077

PHONE: (216) 357-9043
YEAR OF FUNDING: 2

FISCAL AGENCY: United Labor Agency, Inc.

DIRECTOR: Joan M. Hanson
COORDINATOR: Deborah Gluyas
OTHER STAFF TITLES: therapy aide

CHARACTERISTICS OF TARGET POPULATION:

In the third year of the project, the program will serve fifteen developmentally delayed children who are age 18 months to 8 years. Handicapping conditions vary from mild to severe.

PROGRAM FOR CHILDREN:

All children are integrated into preschool classes which provide opportunities for individualized learning experiences within the context of the classroom. Ancillary services such as physical therapy, speech and language, and occupational therapy are contracted through other community agencies. A cognitive learning model combined with data on learning style, multimodality learning, and left/right brain research will be used to develop an arts-based curriculum model to assist in the acquisition of developmental skills. Peer modeling and pairing are also used.

MEASURES OF CHILD PROGRESS:

The Minnesota Child Development Inventory is used as an initial screening tool. In addition, the Uniform Performance Assessment Scale and data collection by the parents, teachers, and special education coordinator are used.

PROGRAM FOR PARENTS:

Parents are involved in home visitation, the lunch-with-child policy, parent/teacher education topical sessions, and meal celebrations. The Parent as Educator Inventory is used for evaluation.

FEATURES AND PRODUCTS:

An arts-based curriculum combining features of the cognitive curriculum multimodality learning and the arts will be developed. In addition, a teacher/paraprofessional training in-service model based on the arts-based curriculum will be written. A video-tape training series for parents and teachers will also be developed. Since the project is labor-sponsored, educationally oriented day-care products will be packaged for dissemination and replication to other labor-sponsored agencies and centers.

Preschool C.H.I.L.D.

ADDRESS: McKesson School
1624 Tracy
Toledo, Ohio 43605

PHONE: (419) 666-5181
YEAR OF FUNDING: 3

FISCAL AGENCY: Toledo Public Schools

DIRECTOR: Carol Quick
COORDINATOR: Helen Orringer
OTHER STAFF TITLES: dissemination specialist; speech/language therapist; developmental language teacher; audiologist; psychologist; social worker

CHARACTERISTICS OF TARGET POPULATION:

The project serves approximately 50 children birth to age 5 years with linguistic handicaps secondary to recurrent otitis media. Children enrolled must have: normal development in all areas but language; confirmed language delay; and audiological and medical documentation of recurrent otitis media.

PROGRAM FOR CHILDREN:

The project provides a coordinated triad of services, including medical treatment of the otitis condition with ongoing audiological monitoring, supportive parent education, and individualized child language development programs for implementation in the home or preschool. The curriculum focuses on meeting the auditory processing needs of the target population. The majority of child programs are implemented through community preschool programs and Head Start.

MEASURES OF CHILD PROGRESS:

The project administers the Merrill Palmer Test and audiometric screening and impedance testing upon admission. To children with language above 36 months, the project administers the Sequenced Inventory of Communication Development, Allied Agencies Developmental Scales, and Goldman-Fristoe Test of Articulation at six to eight weeks into the program and again at the end of each year.

PROGRAM FOR PARENTS:

Parent education focuses on information needs regarding medical aspects of otitis media, audiological testing, and meeting the individual language development needs of their child. The project offers support services geared toward effective use of community medical, social, and welfare resources.

FEATURES AND PRODUCTS:

Products developed by project staff include: "Understanding Otitis Media," a slide/tape show focusing on the nature and educational implications of recurrent otitis media; two language development manuals, one designed for early childhood educators and the other for parents; an annotated bibliography of related research; and a Preschool Communication Observation System, designed to determine areas of strength and weakness in relation to the development of communication skills in an early childhood classroom (presently being used as an important part of the teacher training program developed by project staff).

Linn-Benton-Old Mill School Project

ADDRESS: Old Mill School
532 N.W. 8th Street
Corvallis, Oregon 97330

PHONE: (503) 757-8068
YEAR OF FUNDING: 2

FISCAL AGENCY: Linn-Benton Community College

DIRECTOR: Mary Spielde
COORDINATOR: Bev Larson
OTHER STAFF TITLES: head teacher; teacher; outreach coordinator; occupational therapist; counselor; speech therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 45 children and their families in mainstreaming environments. The children are age 2-1/2 to 6 years and represent all types of disabilities.

PROGRAM FOR CHILDREN:

The project offers an urban, center-based program for either three mornings or three afternoons weekly. Instructional sessions (2-1/2 hours) include individual and small- and large-group activities. Experiential learning activities have been developed in the developmental areas of language, cognitive, fine motor, and gross motor skills. Curriculum activities are developed to give children experiences which will help them acquire targeted skills as outlined on curriculum cards. Objectives allow activity to be used with children functioning at developmental ages of 2 to 6 years. Procedures are specific enough to give adequate information to parent and volunteer aides and flexible enough to allow the activity to be adapted to the materials available, to children's needs, and to adults' teaching styles. Objectives and accompanying activities are appropriate for non-handicapped as well as mildly and moderately handicapped children ages 2 to 6 years.

MEASURES OF CHILD PROGRESS:

The project staff members measure child progress with the Brigance and individual professional diagnostic tests. Data relating to the objectives of each child's IEP are collected weekly. Videotapes and observational measures are also used to measure the children's development.

PROGRAM FOR PARENTS:

Parent education meetings are held on a regular, scheduled basis. Each parent works with his or her child and other children in the classroom. These sessions may be videotaped and discussed with the parent. Each parent participates in developing his or her own goals, and some parents may receive home activities and counseling services. Parents also participate on the advisory council.

FEATURES AND PRODUCTS:

The project proposes to develop a curriculum which will enable preschool programs to effectively integrate mildly and moderately handicapped children. The curriculum is designed to be used in small groups (three to five children). It includes developmental objectives and corresponding activities. The curriculum teaches skills through activity and interactional procedures. Children can learn from each other, the adult, and their own exploration and involvement.

Early Intervention Program

ADDRESS: 901 East 18th Street
Eugene, Oregon 97403

PHONE: (503) 686-3568
YEAR OF FUNDING: 3

FISCAL AGENCY: Center on Human Development, University of Oregon

DIRECTOR: Diane Bricker
COORDINATOR: Andrea McDonnell
OTHER STAFF TITLES: teachers; assistant teachers

CHARACTERISTICS OF TARGET POPULATION:

The project serves 25 toddlers age 15 to 36 months with a variety of handicapping conditions. In addition, approximately 100 at-risk infants are being monitored by their parents.

PROGRAM FOR CHILDREN:

A center-based program is provided for the toddlers. Comprehensive programming is provided, with individual instructional goals incorporated into classroom and home activities. One-third of the children in each class are nonhandicapped, and they are integrated with the handicapped children during all activities. At-risk infants are monitored through the use of developmental questionnaires completed by parents.

MEASURES OF CHILD PROGRESS:

The project uses the Gesell Developmental Scales and the Comprehensive Early Evaluation and Programming System.

PROGRAM FOR PARENTS:

Parents are expected to be the primary teachers or change agents for their children. Educational programs and counseling services are available.

FEATURES AND PRODUCTS:

The focus of the intervention is on the caregiver-child dyad, rather than on the child or the mother. The project is developing a monitoring system, using developmental questionnaires completed by parents, to track the development of at-risk infants. A program description and procedural manual for the toddler program have been developed.

Least Restrictive Environment for Handicapped Children

ADDRESS: Stevens Administrative Center
Room B2, 13th and Spring Garden
Philadelphia, Pennsylvania 19123

PHONE: (215) 351-7254
YEAR OF FUNDING: 3

FISCAL AGENCY: School District of Philadelphia

DIRECTOR: Ann H. Barrick
OTHER STAFF TITLES: special education teacher; classroom aide

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped children of school-entry age (4 years 7 months as of September 1). The population includes those handicapped children who ordinarily would be placed in a self-contained special education class with minimum exposure to regular education or in regular kindergarten classrooms with insufficient support services. The population represents all disability categories recognized in P.L. 94-142.

PROGRAM FOR CHILDREN:

The project assigns eight exceptional children with a kindergarten class team-taught by a regular education kindergarten teacher and a special education teacher, with the support of a classroom aide. The morning session has both nonhandicapped and special students. The handicapped children remain in school for a full day. Their afternoon is spent in a self-contained class with the special education teacher, working according to a criterion-referenced curriculum in consonance with each child's individualized educational program (IEP).

MEASURES OF CHILD PROGRESS:

Prior to enrollment, the project's instructional staff members administer a battery of diagnostic tests and the assessment battery routinely given to children with developmental delays before school entry. The initial assessments determine strengths and weaknesses in the areas of cognition, socialization, communication, and gross and fine motor development. These five target areas are reassessed throughout the school year in December, March, and May-June. Instruments used include the Santa Clara Inventory of Developmental Tasks, Brigance, Portage Guide to Early Education, and the Learning Accomplishment Profiles.

PROGRAM FOR PARENTS:

The project conducts family workshops throughout the school year on issues such as child management, the home as a learning center, and instructional materials made from ordinary objects. The project trains family members to be instructional aides for all classroom children. The project offers a family support group and counseling through supplementary services.

FEATURES AND PRODUCTS:

A descriptive brochure has been published. Plans for year 3 include the publication of a manual for potential replicators.

Learning Experiences

An Alternative Program for Parents and Preschoolers

ADDRESS: 201 DeSoto Street
Pittsburgh, Pennsylvania 15213

PHONE: (412) 624-0815
YEAR OF FUNDING: 2

FISCAL AGENCY: WPIC/University of Pittsburgh

DIRECTOR: Phillip Strain
OTHER STAFF TITLES: parent trainers; developmental specialists

CHARACTERISTICS OF TARGET POPULATION:

The project serves 12 preschoolers age 3 to 5 years. Six children are developing normally, and six display autistic-like behavior.

PROGRAM FOR CHILDREN:

The 11-month, cost-free program operates five days weekly from 9 am to noon in a local community public school. The classroom component contains academic and social activities typical of a traditional preschool within a highly structured setting. A systematic design for movement from small-to large-group instruction is implemented and another is employed for integration into free play settings. A unique design of curriculum planning encompasses individual needs of all students within a group training setting. Normally developing age-peers serve as the intervention agents to improve the social and academic skills of the autistic-like children. Observational data is maintained on all children in academic and social settings.

MEASURES OF CHILD PROGRESS:

The program administers the Alpern-Boll, McCarthy Scales, and LAP; observational data are collected daily.

PROGRAM FOR PARENTS:

Parents of both populations of children participate in the program in some capacity. In addition, parents of the handicapped population receive instruction in an individualized and core curriculum three mornings weekly. Evaluation is conducted by assessing the effects of parent training on both child and parent target behaviors. Nonprogrammable changes in the social functioning of the family are assessed through pre- and post-assessments of stress variables within the family, extra-family social contacts, and self-perception. The parent component includes skill training for parents in school, home, and the community to ensure maintenance and generalization of behavior change.

FEATURES AND PRODUCTS:

This program has a strong research orientation and hopes to establish a treatment contrast group. The project also is collaborating closely with the Pittsburgh public schools (the project is located in a public school building). The project will train the teachers who will receive the children when they leave the center program. Anticipated products include curriculum procedures, parent training procedures, and receiving-teacher training materials. Products to date include a core parent curriculum and an instructional design for individualization within a group teaching setting, regardless of the developmental level of the child.

Severely Handicapped Communication Program

ADDRESS: P.O. Box 64
Foster, Rhode Island 02825

PHONE: (401) 728-3376
YEAR OF FUNDING: 3

FISCAL AGENCY: Educational Technology Center, Inc.

DIRECTOR: Edmond S. Zuromski

OTHER STAFF TITLES: speech pathologists; special education teachers

CHARACTERISTICS OF TARGET POPULATION:

The project serves 15 severely/profoundly handicapped children age 3 to 8 years. All children live at home and attend school.

PROGRAM FOR CHILDREN:

The Severely Handicapped Communication Program is based on the combined use of active stimulation programming and augmentative communication. This approach allows a multihandicapped child to control environmental events through the use of special switching or assistive devices with response-contingent stimulation (i.e., ideas are expressed through assistive devices).

MEASURES OF CHILD PROGRESS:

The project uses the Callier-Azusa Scale, Hoskins-Squires Test for Reflex and Gross Motor Development, and the Vulpe Assessment Battery.

PROGRAM FOR PARENTS:

In a home-based training program, parents learn to plan and carry out activities coordinated with the classroom teacher's goals.

FEATURES AND PRODUCTS:

The project has developed an Active Stimulation Programming Manual and is writing a communication manual for severely/profoundly handicapped children.

Project Child

ADDRESS: Services for Children, Families & Youth
520 Hope Street
Providence, Rhode Island 02906

PHONE: (401) 274-2500
YEAR OF FUNDING: 2

FISCAL AGENCY: Providence Mental Health Center

DIRECTOR: Fredericka B. Bettinger
COORDINATOR: Haven Miles
OTHER STAFF TITLES: Ph.D. and C.A.G.S. psychologists; Masters-level early childhood and special educators

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 families of children birth to age 5 years. The children are at risk for delays in cognitive or emotional development, and one or both parents have experienced one or more psychotic episodes and subsequent interruption or regression in their ability to parent.

PROGRAM FOR CHILDREN:

Project CHILD provides home- and center-based services. Treatment focuses on helping the parent resume his or her role in the family, improving parenting skills and parent-child interaction, providing stimulation to the child to remediate delays, maintaining interaction in periods of family stress, and modifying family reactions to the parent's illness. Playgroups are provided for children under age 3 years.

MEASURES OF CHILD PROGRESS:

The project administers the Denver Developmental Screening Test, the Bayley Scales of Infant Development, the Alpern-Boll Developmental Profile II, and the McCarthy Scales of Children's Abilities.

PROGRAM FOR PARENTS:

Parents can be involved in a day treatment program for development of socialization skills and occupational therapy. Project CHILD videotapes parent/child interactions every three months to document change. Parents can be involved in a parent/child group devoted to developing reciprocity between parent and child.

FEATURES AND PRODUCTS:

The project is developing a training program on successful treatment strategies to provide background information to staff of other agencies already involved with these families and to assure continuity of care. A training manual on working with this population also is planned. The project will increase understanding of clinical issues involving psychotic parents and their effects on young children.

Little Tennessee Valley Education Cooperative (LTVEC)

Birth-Thru-Three Program

ADDRESS: Route 9, Box 316
Lenoir City, Tennessee 37771

PHONE: (615) 986-5646
YEAR OF FUNDING: 2

FISCAL AGENCY: Little Tennessee Valley Educational Cooperative

DIRECTOR: Jerome H. Morton
COORDINATORS: Pamela Potocik, Karen Keith, Cindy Marshall
OTHER STAFF TITLES: physical therapist; occupational therapist; speech/language pathologist; teacher of the visually impaired; teaching assistants/aides

CHARACTERISTICS OF TARGET POPULATION:

The program serves 30 children birth to age 3 years who meet one of the following criteria: 1) medical diagnosis of a condition associated with mental retardation; 2) cognitive abilities measured on standardized test instruments within the moderate, severe, or profound range of mental retardation; 3) moderate to severe delay in two of the five developmental areas -- cognitive, language, gross motor, fine motor, personal-social.

PROGRAM FOR CHILDREN:

A precision-teaching instructional approach is incorporated into a center-based program which the children attend two mornings weekly. Home-based programming is provided to each child. The three sites share the expertise of their site directors; one is an early childhood psychologist, one is a family counseling psychologist, and one is a special educator. The center-based program uses learning centers for curricular areas. The project provides specialized services to children at center sites as determined through diagnostic assessments by specialists.

MEASURES OF CHILD PROGRESS:

The project uses the Bayley Scales of Infant Development, the Stanford-Binet Intelligence Scale, the Brigance Inventory of Early Development, the Memphis Scale, the PEACH Scale, Assessment in Infancy -- Ordinal Scales of Psychological Development, the Developmental Checklist (Cunningham and Sloper), Sequenced Inventory of Communication Development, Oliver, Environmental Prelanguage Battery, and the Spontaneous Communication Sample (administered at least biannually).

PROGRAM FOR PARENTS:

Parent involvement includes training, classroom involvement, and participation on the advisory board and multidisciplinary teams. The project helps parents establish respite care arrangements. Parent Information Centers have been established.

FEATURES AND PRODUCTS:

As a regional agency, LTVEC will develop a cost-effective delivery strategy using professional staff in three rural counties. Proposed products include: program replication, paraprofessional staff training guidelines, hiring procedures, a parent handbook, pamphlets, and forms to use at the centers.

Cognitive Education for Preschool Handicapped Children A Curriculum Development Project

ADDRESS: Box 40 George Peabody College
Vanderbilt University
Nashville, Tennessee 37203

PHONE: (615) 322-8978
YEAR OF FUNDING: 2

FISCAL AGENCY: Vanderbilt University

PRINCIPAL

INVESTIGATORS: H. Carl Haywood and Penelope Brooks
DIRECTOR: Susan Burns
OTHER STAFF TITLES: teachers; teacher assistants, parent trainers; data collector;
psychological tester

CHARACTERISTICS OF TARGET POPULATION:

The project serves 33 children age 3-1/2 to 5 years who meet specified psychometric and high-risk criteria.

PROGRAM FOR CHILDREN:

The program for children focuses on the development of a curriculum for cognitive education; the emphasis is on teaching children how to think and learn. The curriculum is process oriented (precognitive and cognitive functions are taught with teacher-mediated learning experiences). The center-based program uses two sites: the Kennedy Center Experimental School and the community-based program in a low-income area. Children attend class year-round, about seven hours daily, four or five days weekly.

MEASURES OF CHILD PROGRESS:

The project administers the McCarthy Scales pre- and posttest to determine cognitive gains. Several tests of motivation are administered throughout the year. Criterion-referenced measures of curricular progress, observations of classroom behavior, and teacher ratings of behavior are used. Children's performances on transfer cognitive tasks are measured and observed twice yearly.

PROGRAM FOR PARENTS:

Parent trainers develop parent activities consistent with the curriculum, and they instruct parents in implementation. Parents implement the activities at home and record their children's responses on a Parent Training Record. Parents are advised of counseling, social, and educational services. Parents serve on the advisory committee.

FEATURES AND PRODUCTS:

Cognitive progress of project children is compared with progress of children in a regular Head Start program. Gains will be compared across the two groups at the end of the program in an analysis of variance design. The degree to which teachers accept and implement the curriculum is measured by questionnaire and by observation three times yearly. The program is based on the theories of Feuerstein and Vygotsky.

Child Success Through Parent Training

ADDRESS: F.O. Box 22487 - TWU Station
Denton, Texas 76204

PHONE: (817) 387-6063
YEAR OF FUNDING: 3

FISCAL AGENCY: Texas Women's University

DIRECTOR: Sue Schafer
OTHER STAFF TITLES: physical therapist; speech-language pathologist; social worker;
occupational therapist; secretary; graduate research assistant;
student assistants

CHARACTERISTICS OF TARGET POPULATION:

The project serves children birth to age 36 months who have identified developmental problems or who are at risk of acquiring them. Parents must be willing to participate in their child's program. The project serves a maximum of 40 children from two counties in rural north Texas.

PROGRAM FOR CHILDREN:

The project uses the Developmental Programming for Infants and Young Children (DPIYC) for assessment and to identify behavioral objectives in the areas of gross and fine motor, perceptual, self-care, social, cognitive, and language development. During center and home visits, parents receive instruction and help to implement their child's developmental activities.

MEASURES OF CHILD PROGRESS:

Children receive DPIYC assessments upon program entrance and at three-month intervals. The project staff and parents also review child progress toward individualized objectives at three-month intervals. The project also uses case studies and CIPP evaluation.

PROGRAM FOR PARENTS:

Parents actively participate in all aspects of services to their child. Through discussion, demonstration, and practice, parents learn about child development, their child's handicapping conditions and areas of strength, and ways to promote their child's development through daily family routine. With assistance from the project staff, the parents target specific areas for training. A contract is established to include: areas of need targeted by the parents, parent goals expressed in behavioral terms, training methods to be used for each goal, specific responsibilities for parents and project staff, and expected outcomes. The contract is evaluated and revised by the parents and staff on a quarterly basis in conjunction with the child's reassessment.

FEATURES AND PRODUCTS:

The project features a transdisciplinary team of professionals who serve as case managers for children with all types of handicaps and their parents. The project is developing a parent training guide, a staff development package to teach professionals how to instruct parents of delayed/handicapped infants, and methods for including alternate caretakers in the child's program.

Project TOTAL

To Offer Tots Alternative Language

ADDRESS: 3309 Richmond Avenue
Houston, Texas 77098

PHONE: (713) 521-9584
YEAR OF FUNDING: 2

FISCAL AGENCY: Mental Health and Mental Retardation Authority of Harris County

DIRECTOR: Marlene Hollier
COORDINATOR: Christine Watkins
OTHER STAFF TITLES: teacher; teacher aide; speech pathologist; project evaluator

CHARACTERISTICS OF TARGET POPULATION:

The project serves 12 children age 18 months to 3 years who are developmentally delayed or at risk for delay. All children have additional significant language delays, and all have normal hearing.

PROGRAM FOR CHILDREN:

The program for children consists of two 4-hour group sessions weekly for each child. Total communication is used in training all areas of development including cognitive, social, fine motor, gross motor, and language skills. The parent attends class one day per week with the child. Home visits assist with carry-over activities.

MEASURES OF CHILD PROGRESS:

The project assesses child status twice yearly with the Sequenced Inventory of Communication Development, Receptive Expressive Emergent Language Scale, Gesell Scale of Infant Development, and forms and checklists developed by the project staff.

PROGRAM FOR PARENTS:

Each parent attends the child's class one day (four hours) weekly. Two hours of that class time are spent in a parent training group (instruction in signing and other topics) and planning parts of the child's class. The remaining two hours are spent in the class with the child.

FEATURES AND PRODUCTS:

A special feature of the program is training provided to infant educators in total communication for normal-hearing, delayed children. Products being developed include a curriculum for instruction using total communication and a parent training curriculum.

Early Childhood Special Education Program

ADDRESS: Department of Education
P.O. Box I
Christiansted, St. Croix,
U.S. Virgin Islands 00820

PHONE: (809) 773-7997
YEAR OF FUNDING: 2

FISCAL AGENCY: Virgin Islands Department of Education

COORDINATOR: Ellie Hirsh

OTHER STAFF TITLES: classroom teachers; home and school resource teachers; aides;
physical therapist; speech and language therapist; social worker

CHARACTERISTICS OF TARGET POPULATION:

The project serves 64 children age 3 to 5 years with diverse handicaps. The children represent various cultural backgrounds; most children are from the islands of the West Indies.

PROGRAM FOR CHILDREN:

The project has a center on the island of St. Thomas and one on the island of St. Croix. The centers operate for ten months yearly. All children and their families receive weekly home visits for parent counseling and training and direct child services. Depending on need, the project serves the child in a self-contained classroom, mainstream classroom, or a combination of the two. A diagnostic-prescriptive approach is used. A variety of curriculum methods and materials are used to assist each child in the achievement of goals and objectives. Selection of the appropriate approach is based on each child's strengths, weaknesses, needs, and learning style.

MEASURES OF CHILD PROGRESS:

Portions of both the Brigance Inventory of Early Development and the Preschool Program of Studies (Fairfax County, Virginia) are used to measure child progress.

PROGRAM FOR PARENTS:

Parents participate in individual and group counseling and a home and group training program. Parents and families are encouraged to visit the centers and participate in program activities. A library of materials and resources is available to parents.

FEATURES AND PRODUCTS:

The project is a highly individualized program in terms of educational planning, placement, and service delivery. The multicultural character of the West Indies is addressed through its music in relation to body awareness and motor development. A file of daily living home activities is being developed for parents to use with their children. A program manual is also being developed.

Since many children enrolled in the project are mainstreamed in Head Start, day care, and private school programs, the project provides the teaching staffs of these programs with a library of materials and resources and weekly technical assistance and training in working with the handicapped child in the classroom.

Social Integration Project

ADDRESS: Exceptional Child Center
Utah State University
UMC 68
Logan, Utah 84322

PHONE: (801) 750-1991
YEAR OF FUNDING: 2

FISCAL AGENCY: Utah State University

DIRECTOR: Joseph J. Stowitschek
CO-DIRECTORS: Sebastian Striefel, Craig Boswell
COORDINATOR: Sarah Rule
OTHER STAFF TITLES: project teacher; liaison specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves ten children directly and eight indirectly. The children are age 2 to 6 years and present mild to severe handicaps, including behavior disorders, developmental delays, mental retardation, and sensorimotor impairment. Eligibility criteria are those identified in the Developmental Disability/Mental Retardation Policy Manual for the state of Utah.

PROGRAM FOR CHILDREN:

The program focuses on integrating handicapped children into day-care centers through systematic, individualized preschool curricula with an embedded social interaction training program. A home social integration training component is also implemented. Parents and siblings are trained as primary intervention agents.

MEASURES OF CHILD PROGRESS:

The project measures child progress by standardized tests and direct observation. Assessment instruments include, but are not limited to, the Program Planning and Assessment Guide, the California Preschool Social Competency Scale, and the McCarthy Scales of Children's Development.

PROGRAM FOR PARENTS:

Parents participate in home visits, day-care orientation, child advocacy, and development and evaluation of the home training component of the social integration model.

FEATURES AND PRODUCTS:

The features of this project are the integration of handicapped children into day-care centers with an accompanying home program, the training of parents and siblings as agents of social interaction, and the development of a cost-effective alternative to self-contained special education programs. Products include the Basic Skills Training Manual and the Let's Be Social curriculum.

INSITE

In-Home Sensory Impaired Training and Education

ADDRESS: 846 20th Street, West
Ogden, Utah 84401

PHONE: (801) 399-9631
ext 264

YEAR OF FUNDING: 2

FISCAL AGENCY: Utah Schools for the Deaf and the Blind

CO-DIRECTORS: Thomas C. Clark, Harlan Fulmer

COORDINATOR: Elizabeth Morgan

OTHER STAFF TITLES: psychologist; evaluator; ophthalmologist; parent advisors; physical therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 20 visually impaired (most have additional handicaps) and four deaf-blind children. All children are birth to age 5 years.

PROGRAM FOR CHILDREN:

Children are identified as close to birth as possible. After diagnosis, appropriate prosthetic devices or adaptive equipment are recommended, and maximum attention is given to early treatment of the sensory disorder. The child is then served as a member of the family in a home-based program. The family receives weekly visits by a parent advisor who models developmental activities for the parents. The parent advisor also shares basic information with parents through special parent lessons. For the multihandicapped, a local therapist makes home visits each semester. Occasionally, additional support is provided to homes of deaf-blind, severely impaired, or neglected children.

MEASURES OF CHILD PROGRESS:

Each child receives a pre-treatment assessment within one month of program entry. The same assessment is given each semester, and results are analyzed to determine programming for the next semester. Weekly and monthly behavioral data are kept on the child's goals. Instruments used are the Callier Azusa, Bromwich, and the project developmental checklist cross-referenced to existing curricula such as the HELP, Oregon Project, and the Teaching Research Curriculum.

PROGRAM FOR PARENTS:

The parent program is based on an ecological/environmental model with parents used as an integral part of the program for children. The parent advisor works with the parent on every home visit to make the home a meaningful environment for the child's development. Parent group sessions are offered at least twice yearly. Parent advisors and parents plan informal social gatherings as desired. A lending library of books and some adaptive equipment is available to parents.

FEATURES AND PRODUCTS:

There are four major features of the project: delivery of services by one caregiver to all sensory-impaired children living in a large geographic area, the treatment of the sensory disorder through prosthetic devices, treatment in the home in conjunction with medical agencies, and the use of local part-time parent advisors paid per visit to ensure a cost-effective delivery model. The main product will be a comprehensive manual on delivery of services to sensory-impaired children. Curriculum materials will be available fall 1983.

RIFE

Rural Infant-Family Education Project

ADDRESS: 11 Seminary Street
P.O. Box 646
Middlebury, Vermont 05753

PHONE: (802) 388-3171
YEAR OF FUNDING: 2

FISCAL AGENCY: Parent/Child Center

CO-DIRECTORS: Cheryl Mitchell and Sue Harding
OTHER STAFF TITLES: speech and language pathologists; infant/family educators

CHARACTERISTICS OF TARGET POPULATION:

The project serves 40 children under age 3 years with a mixed range of handicaps.

PROGRAM FOR CHILDREN:

RIFE considers the parent the central figure in the child's growth and education. The team supports and educates the parent through modeling, curriculum presentation, discussion, support groups, and evaluation. Program options include: 1) a weekly home visit (focus on remediation objectives of the IEP) and a weekly mainstream playgroup (art, music, drama, socialization); on alternate weeks, parents and children participate together or parents meet to discuss family issues while children play together; 2) a mainstream group in the Infant-Toddler Center four mornings weekly; parents participate two hours weekly; 3) a full day of developmental child care for children of working parents; 4) physical and occupational therapy and other specialized services. Communication skills are considered vital to children and families.

MEASURES OF CHILD PROGRESS:

In addition to monitoring progress of each child's IEP, the project administers the Bayley Scales, Uzgiris-Hunt, and Early LAP as pre/post measures. Videotapes of children's activities and parent/child interactions are analyzed to determine change.

PROGRAM FOR PARENTS:

RIFE's Parent/Child Center offers parents a range of services and classes: child development, home management, assertiveness training, time management, crafts, etc. Parent support groups are ongoing, and a parent cooperative is established where parents share babysitting, baby equipment and clothes, and experience. A strong community service network helps families receive all desired services to which they are entitled. Parents serve as volunteers at the center and as trainers. The parent stipend program consists of a 20-hour-per-week intensive training program stressing both parenting skills and prevocational skills.

FEATURES AND PRODUCTS:

This is a rural program that must overcome great physical distances to serve families. The project will develop a series of kits for teachers to use in the homes. Also, RIFE has a van with materials to convert church halls or garages into temporary child-care centers.

HIMM

Hampton Institute Mainstreaming Model

ADDRESS: Special Education Program
Hampton Institute
Hampton, Virginia 23668

PHONE: (804) 727-5434
YEAR OF FUNDING: 2

FISCAL AGENCY: Hampton Institute

CO-DIRECTORS: James B. Victor and Shirley Vulpe

OTHER STAFF TITLES: intake/mainstreaming teacher; mainstreaming teacher; teacher aides

CHARACTERISTICS OF TARGET POPULATION:

The project serves children with significant developmental delays in motor, social, language, and cognitive behavior. The project integrates nonhandicapped children from urban and rural locales with 20 to 40 handicapped children age 2 to 5 years. HIMM emphasizes services to unserved minority and low-income children.

PROGRAM FOR CHILDREN:

HIMM adheres to the developmental interactional approach to learning. The purpose of the Hampton Model is to bring about a greater degree of social competence in children and to enhance school success through the acquisition of developmentally appropriate skills. The integration of handicapped and nonhandicapped children is critical to the model. The curriculum is based on the Vulpe Assessment Battery which provides developmental performance analysis and individualized programming for typical and atypical children. The program features an Intake Room and offers services ranging from intake and mainstreaming assessment to full integration into the Early Childhood center with nonhandicapped children.

MEASURES OF CHILD PROGRESS:

For screening purposes, the project uses the DDST, PPVT, Goldman-Fristoe Test of Articulation, the Preschool Language Scale, and Pureton Audiometric Testing. The project uses both criterion-referenced and normative assessment instruments, with the Vulpe Assessment Battery for developmental performance analysis and individualized programming and the Leiter and McCarthy for normative evaluation.

PROGRAM FOR PARENTS:

Parents may assist in the classroom and participate in guided observations of classroom activity (through one-way mirrors), individual and small-group training sessions, and informal group meetings. The project offers counselling and referral services and a parent lending library.

FEATURES AND PRODUCTS:

HIMM features an Intake Room for systematized classroom integration and a nonmainstreamed control group. The project provides an in-service training program for regular teachers (orientation, weekly training sessions, site visits, and tuition rebates) and a pre-service master-level intern training program. Project staff have expertise in working with minority children and families.

TIMMI

Training and Intervention to Multihandicapped Mothers and Infants

ADDRESS: Infant Intervention Program
2008 Wakefield Street
Petersburg, Virginia 23805

PHONE: (804) 862-9940
YEAR OF FUNDING: 2

FISCAL AGENCY: District 19, MH/MR Services Board

DIRECTOR: Stephanie Parks
OTHER STAFF TITLES: infant educators; occupational therapist; mental health therapist;
speech therapist

CHARACTERISTICS OF TARGET POPULATION:

The treatment program serves 20 handicapped (noncategorical) infants birth to age 2 years, more than half of whom have handicapped parents. The monitoring program serves 30 to 40 high-risk infants.

PROGRAM FOR CHILDREN:

The program administers weekly home- and center-based individual intervention (targeting all developmental areas) to train parents to become their child's primary teacher. The project uses a team/transdisciplinary approach.

MEASURES OF CHILD PROGRESS:

The program uses the Bayley annually and HELP, CRIB, staff observation protocols, Milani, HOME, and Parent/Infant Interaction Ratings every four to six months.

PROGRAM FOR PARENTS:

The primary caretaker is involved in all intervention sessions. Parent needs are assessed individually and a concurrent intervention plan is developed when indicated. Parent support, education, and training meetings are held monthly.

FEATURES AND PRODUCTS:

The project coordinates intervention services with the diagnostic evaluation services (medical, psychological, social) of the Crater Child Development Clinic to ensure smooth transition from evaluation to intervention and integration of evaluation recommendations. The project will also develop transition procedures for graduates into the LEAs, will focus on developing alternative strategies in service delivery for handicapped parents, and will adapt curricular activities and materials for use with handicapped parents (e.g., MR, deaf, physically disabled).

Umbrella for Families

A Cooperative Rural Model for Early Childhood Services

ADDRESS: P.O. Box 1057 P.O. Box 1057 PHONE: (509) 762-5518
Moses Lake, Washington 98837 YEAR OF FUNDING: 2

FISCAL AGENCY: Early Childhood Services Organization

DIRECTOR: Karen LaGrave Small
OTHER STAFF TITLES: speech therapist; physical therapist or occupational therapist;
physician; social worker; educational specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 25 children birth to age 5 years, representing all handicaps except emotionally disturbed and learning-disabled. The children live in a sparsely populated rural area of central Washington.

PROGRAM FOR CHILDREN:

The program for children consists of home- and center-based individual intervention programs and the gradual development of group intervention services. The services are individualized, with three options for participation: a home-based program (minimum one-hour session, biweekly); one to eight one-hour visits monthly to the center for individual treatment; and participation in weekly two-hour parent-infant group sessions supervised by an interdisciplinary staff team.

MEASURES OF CHILD PROGRESS:

The Bayley Scales of Infant Development or the McCarthy Scales of Children's Abilities are used with each child at six-month intervals. Other assessment tools are used by team members as needed. The West Virginia Data Collection System is used to document specific areas of progress for each child.

PROGRAM FOR PARENTS:

Parents have several options for involvement, including notebooks, home visits, observation, participation in treatment, conferences, family therapy, parent meetings, parent task forces, project evaluation, and extended family participation.

FEATURES AND PRODUCTS:

The major feature of this project is the team of professionals who provide continuation of services for young handicapped children in this rural area. Another feature is the development of individual notebooks containing all the relevant information required for initial and future evaluations. Products will include a brochure on the project and videotapes of visiting medical specialists.

Northwest Center Infant/Toddler Development Program

ADDRESS: 1600 West Armory Way
Seattle, Washington 98119

PHONE: (206) 285-9140
YEAR OF FUNDING: 3

FISCAL AGENCY: Northwest Center for Retarded

DIRECTOR: Linda Gil

OTHER STAFF TITLES: occupational therapist; CDS (speech pathologist); special education teachers; early childhood teachers; nutritionist; home specialist; nurse

CHARACTERISTICS OF TARGET POPULATION:

The program serves 48 children birth to age 36 months; 24 children are handicapped, and 24 are developing normally. The handicapped population includes developmentally delayed children with mild to severe handicapping conditions.

PROGRAM FOR CHILDREN:

The project is home and center based. The center-based, full-day program features developmentally integrated groupings of handicapped and normally developing children (eight children in each group). To provide balanced programming, the children participate in activities with their age-appropriate peer group. Activities are offered within a cognitively oriented framework with direction toward specific skill development. Experienced special education teachers share in team-teaching with early childhood teachers; therapists work within the classroom.

MEASURES OF CHILD PROGRESS:

The project staff members initially evaluate children using the Bayley Scales and at least two other assessment tools from the following: Koontz Child Development Program, Portage Guide, Developmental Programming for Infants and Young Children, Early LAP, Hawaii Early Learning Profile, or RIDCS. The staff uses the Washington Social Code Assessment Tool, Uzgiris-Hunt, Test for Gross Motor and Reflex Development, Sequenced Inventory of Communication Development, and other tools to measure ongoing child change.

PROGRAM FOR PARENTS:

The home specialist makes initial contact in the home and assesses parent and child needs. Staff members then determine which program (center-based, home-based, or a combination) is most appropriate. Parents are involved in monthly evening parent meetings, classroom activities, and parenting skills development sessions. A full-time home specialist provides services in the home-bound program and a half-time home specialist focuses on in-center parents' needs and programs. Individualized programs are provided for developmentally disabled parents.

FEATURES AND PRODUCTS:

Each staff member has a staff development plan monitored by the project director, and quarterly in-service training is directed toward topics of special interest. Handicapped adults receive training in a Child Care Aide Training Curriculum to work as classroom aides. With other agencies, the project offers single-parent counseling groups at the center. Cooperative contracts with major colleges and universities provide a practicum site for teacher, nursing, and nutrition interns and volunteers. The project also offers a parent lending bank for clothes, equipment, and educational items. Handicapped and nonhandicapped children are completely integrated in a full-day setting.

SEFAM

Supporting Extended Family Members: An Ecological Program for Families of Handicapped Children

ADDRESS: Experimental Education Unit
University of Washington WJ-10
Seattle, Washington 98195

PHONE: (206) 543-4011
YEAR OF FUNDING: 2

FISCAL AGENCY: University of Washington

DIRECTOR: Rebecca R. Fewell
COORDINATOR: Donald Meyer
OTHER STAFF TITLES: family trainer; materials specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 families of handicapped children birth to age 5 years. The children are mentally retarded, hearing impaired, visually handicapped, orthopedically impaired, or multihandicapped. The majority of children are enrolled in direct service programs offered by other agencies. During the first year, the primary emphasis is on the father/child dyad, with a continued emphasis on this pair during the entire three-year program. In the second year, siblings of the handicapped child will be included. In the third year, extended family members (grandparents, other relatives, babysitters, etc.) are targeted for services.

PROGRAM FOR CHILDREN:

SEFAM provides biweekly Saturday morning sessions and individual family conferences. Fathers and their handicapped children participate during the project's first year; siblings and extended family members are added in the second and third years. Children are referred to the program from the Model Preschool for Handicapped Children Outreach Project, the Northwest Center Infant/Toddler Development Program, and other programs in the Seattle area.

MEASURES OF CHILD PROGRESS:

The program uses a management-by-objectives approach, based on Tyler's Objective Attainment Framework. Within the context of this system, change is monitored through measures of parents' knowledge of community resources, social support networks, level of depression, role satisfaction, and general/specific beliefs about coping. The Bayley is used to monitor child progress.

PROGRAM FOR PARENTS:

The project focuses primarily on the father/child dyad, with extension to siblings and other family members. Mothers are welcome to participate in many of the program activities and are completing several of the measures being used to evaluate program impact on the family. The major emphasis of the program is to help family members be better caregivers, educators, and advocates.

FEATURES AND PRODUCTS:

The project will develop a curriculum for training fathers, siblings, and extended family members to increase their skills in coping with, interacting with, and educating their child with special needs and in fostering a nurturing environment.

The Development of Active Decision Making by Parents

ADDRESS: Specialized Education Services
545 West Dayton Street
Madison, Wisconsin 53703

PHONE: (608) 266-6152
263-5824
YEAR OF FUNDING: 2

FISCAL AGENCY: Madison Metropolitan School District

CO-DIRECTORS: Lisbeth Vincent and Jon Miller
OTHER STAFF TITLES: curriculum product specialists

CHARACTERISTICS OF TARGET POPULATION:

The project serves parents of children birth to age 6 years presently enrolled in the Early Childhood Special Education Program of the Madison Metropolitan School District.

PROGRAM FOR CHILDREN:

The Madison Metropolitan School District operates a zero-exclusion program serving all handicapped children in regular public school buildings where normal peer models are included in early childhood classrooms. The school district staff includes early childhood special education teachers, speech and language clinicians, physical and occupational therapists, audiologists, mobility specialists, social workers, and school psychologists.

MEASURES OF CHILD PROGRESS:

The project staff measures child growth biannually with standardized developmental tests and with quarterly criterion-referenced teacher-developed tests. IEP follow-along and systematic follow-up studies are conducted on all program graduates.

PROGRAM FOR PARENTS:

Parents are offered a menu of services from which they and staff can choose options that best fit the family and the child's needs. Services include home visits, school visits, and parent workshops. The project works with parents, teaching them to participate in the IEP process and planning for the child's out-of-school activities.

FEATURES AND PRODUCTS:

The program's purpose is to provide products for distribution through the Madison Metropolitan School District. The aims of the program's products are ongoing data collection by parents, use of non-school environments, and written IEP goals developed by parents for out-of-school activities. The project proposes to develop a procedural manual for involving parents in planning for the transition of their child from an early childhood program into a traditional school program.

Project First Chance Interactive Outreach Program

ADDRESS: Department of Special Education PHONE: (602) 626-3214
College of Education
University of Arizona
Tucson, Arizona 85721

FISCAL AGENCY: University of Arizona

DIRECTOR: Jeanne McRae McCarthy
OTHER STAFF TITLES: assistant director; coordinator of personnel development; secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
P.L. 94-132 funds to local education agency (Sunnyside School District #12)

DESCRIPTION OF DEMONSTRATION MODEL:

Project First Chance is a center-based program serving mildly, moderately, and severely handicapped children across all categories of handicapping conditions except hearing impairment. The project combines an applied behavior analysis approach to instruction and classroom management with a cognitive approach to communication and preacademics and a strong developmental approach to children's learning. The model emphasizes individual programming, including a systematic data monitoring system. The model is particularly relevant for culturally diverse populations.

MAJOR OUTREACH GOALS:

- To stimulate the improvement of comprehensive services in Arizona, strengthening and extending services provided by the state education agency through the State Implementation Grant and the Preschool Incentive Grant.
- To continue to stimulate the development or improvement of comprehensive services in the Southwest and nationwide, with emphasis on current replication sites and their efforts to develop second-generation sites through training.
- To further develop the Interactive Outreach model, a cognitive-behavioral-developmental approach to the education of young handicapped children.

MAJOR OUTREACH SERVICES:

The project provides training and technical assistance to newly funded model VI-B discretionary programs, Preschool Incentive programs, Head Start, and day-care programs serving Hispanic, Native American, and other minority children.

FEATURES AND PRODUCTS:

The ABACUS curriculum, assessment tool, language program, and data monitoring system reflect the Hispanic, Native American, and Anglo traditions of the Southwest. The model has proven quite useful with Native American Head Start programs.

* 150 sites are known to be using components of the project's demonstration model.

UCLA Intervention Program

ADDRESS: 1000 Veteran Avenue
Room 23-10
Los Angeles, California 90024

PHONE: (213) 825-4821

FISCAL AGENCY: University of California at Los Angeles

DIRECTOR: Judy A. Howard
COORDINATOR: Eleanor M. Baxter
OTHER STAFF TITLES: research coordinator; teachers; physical therapist; occupational therapist; social worker

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Infant Discretionary Fund, California Regional Centers, parent fundraising, and private insurance

DESCRIPTION OF DEMONSTRATION MODEL:

Thirty children birth to age 3 years, including handicapped and a few nonhandicapped children, are served in a primarily center-based program with a home component. All children are viewed in the context of normal development, with both similar, basic needs and unique, individual needs. Play is valued as a learning process, and specific interventions are incorporated into individualized play programs. The model focuses on parent-child relationships and involves parents in several ways. The staff members measure child progress every six months with the Gessell Scale. Nonstandardized measures include videotaped observations of the child/parent interactions and of the child at play; the Parent Behavior Progression is also used.

MAJOR OUTREACH GOALS:

To promote understanding among educators, social service providers, and medical personnel (pediatric nurses, interns, residents, and pediatricians) of:

- the interdisciplinary nature of long-term care and management of young handicapped children and their families;
- the need to individualize services to parents in a manner that supports the parents' confidence and competence;
- how handicapped and nonhandicapped young children can be provided for in a manner that benefits both.

MAJOR OUTREACH SERVICES:

The project offers intensive training of medical personnel and students, on-site demonstration of model components, coordination with local school districts, and consultation with state agencies.

FEATURES AND PRODUCTS:

The project emphasizes integration of handicapped and nonhandicapped, interdisciplinary coordination and training, and services to parents. A library of video tapes made by the project is used in training. The project has organized a national infant conference, produced a monograph based on the conference, and disseminated products (articles, questionnaires, videotapes).

* 10 sites are known to be using components of the project's demonstration model.

Project SPEED

System for Planning, Evaluation and Efficacy Demonstration

ADDRESS: California Institute on Human Services
 Sonoma State University
 1801 East Cotati Avenue
 Rohnert Park, California 94928

PHONE: (707) 664-2416

FISCAL AGENCY: Sonoma State University

DIRECTOR: Thomas Cooke
 COORDINATOR: Joan Ruskus
 INSTITUTE DIRECTOR: Tony Apolloni
 OTHER STAFF TITLES: technical assistance coordinator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
 Local education agency

DESCRIPTION OF DEMONSTRATION MODEL:

The SPEED model provides technical assistance to other early intervention programs in areas where many programs do not have expertise: program planning, staff training, and program evaluation. The model is based in northern and southern California.

MAJOR OUTREACH GOALS:

- To stimulate high-quality early intervention programs.
- To support the goals of other programs by offering supplemental technical assistance.

MAJOR OUTREACH SERVICES:

The project provides program planning services (needs assessment, budget preparation, cost-effectiveness analysis, proposal writing), staff training services (pre-service, in-service, placement exchange), and program evaluation services (data collection, analysis, design, and evaluation reports).

FEATURES AND PRODUCTS:

This project is not a model for replication; rather, it provides technical assistance, developed through the demonstration model, in areas that are critical to high-quality program planning and implementation.

* 8 sites are known to be using components of the project's demonstration model.

INREAL/Outreach

ADDRESS: Department of CDSS, Campus Box 409
University of Colorado
Boulder, Colorado 80309

PHONE: (303) 492-8727

FISCAL AGENCY: University of Colorado

DIRECTOR: Rita S. Weiss
COORDINATOR: Elizabeth Heublein
OTHER STAFF TITLES: trainer; office manager

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

University of Colorado and local contributions from participating school districts

DESCRIPTION OF DEMONSTRATION MODEL:

INREAL (INclass REActive Language) was an HCEEP-funded demonstration project from 1974 through 1977. The major goal of the project was to improve the language and related learning skills of 3- to 5-year-olds, including bilingual (Spanish-speaking) children, by the INREAL method of intervention in a naturalistic, non-stigmatizing model.

MAJOR OUTREACH GOALS:

- To replicate or adapt the INREAL model to individual school district needs.
- To certify INREAL specialists and trainers.

MAJOR OUTREACH SERVICES:

The project provides pre-service, in-service, and INREAL certification training from the INREAL home office and from 15 second-generation trainers in Colorado and six other states. In addition, the project assures quality control of replicated/adapted projects by annual review.

FEATURES AND PRODUCTS:

Products developed include training videotapes, a manual, NewsREAL (INREAL newsletter), and the INREAL Training Evaluation Model. Demonstration data show that INREAL intervention significantly affects language improvement in the experimental group. Longitudinal data show that use of the INREAL method at preschool and kindergarten levels results in a greatly reduced need for later remedial services. Cost effectiveness data are available in Weiss, R.S., "INREAL Intervention for Language Handicapped and Bilingual Children," Journal of the Division for Early Childhood, vol. 4 (December, 1981).

* 100 sites are known to be using components of the project's demonstration model.

Project UPSTART

ADDRESS: 3640 Martin Luther King, Jr. Avenue, SE
Washington, D.C. 20032

PHONE: (202) 563-0410

FISCAL AGENCY: District of Columbia Society for Crippled Children

DIRECTOR: D. Lee Walshe

COORDINATOR: Larry Szuch

OTHER STAFF TITLES: occupational therapist, special educational specialist, speech pathologist consultant

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

District of Columbia Society for Crippled Children, an Easter Seal Agency; private foundations; Developmental Disabilities

DESCRIPTION OF DEMONSTRATION MODEL:

Based on the rationale that improvement of neuro-sensorimotor function will contribute to educational progress, Project UPSTART weaves techniques of neuro-developmental therapy and sensory integration into the educational program. The classroom operates five days weekly for two or three weekly three-hour intervention periods and provides training in all curriculum areas. The project developed a plan for service delivery along a neuro-sensorimotor sequence and uses this program to develop individualized plans for each child. The gross and fine motor program is integrated into the classroom structure and includes individual handling, positioning, and control of the sensory environment through therapeutic intervention. The project measures child progress with the GMRD, REEL, and Early LAP.

MAJOR OUTREACH GOALS:

- To expand services to rural southern Maryland, suburban Prince Georges County (Maryland), and urban Washington, D.C.

MAJOR OUTREACH SERVICES:

The project provides training and consultation to two classrooms in Washington, D.C. Project activities in Maryland include training and consultation to St. Marys County, two classrooms in Charles County, one in Prince Georges County, and graduate course instruction in Washington, D.C.

FEATURES AND PRODUCTS:

Project UPSTART developed the "Parent Help Wanted and Help Received" questionnaires. The Sequence Neuro-Sensorimotor Program, a method of service delivery which prepares the severely handicapped child for learning, is available.

* 11 sites are known to be using components of the project's demonstration model.

Rutland Center Developmental Therapy Model

ADDRESS: 125 Minor Street
Athens, Georgia 30606

PHONE: (404) 542-6076

FISCAL AGENCY: University of Georgia

DIRECTOR: Karen R. Davis
OTHER STAFF TITLES: training associates; evaluator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
State department of education

DESCRIPTION OF DEMONSTRATION MODEL:

Developmental Therapy is a psychoeducational curriculum for teaching young children with severe emotional and behavioral disorders. The approach has particular pertinence to children age 2 to 8 years and is applicable to children of varying ethnic and socio-economic groups. The basic curriculum areas are behavior, communication, socialization, and academics. Within each of these areas, a series of developmental objectives are sequenced into stages of therapy. The project uses these objectives as a measure of child progress.

MAJOR OUTREACH GOALS:

- To stimulate growth of specialized, high-quality services to seriously emotionally disturbed and other handicapped children age 2 to 8 years and their parents and teachers.
- To offer technical assistance to selected target audiences and individuals to facilitate the use of the Rutland Center Developmental Therapy Model.

MAJOR OUTREACH SERVICES:

The project assists in program planning and design, staff development (including identification and referral process), intake and diagnostics, developmental therapy curriculum, school liaison, parent services, and staff evaluation. In addition, the project disseminates information and helps establish effective evaluation systems.

FEATURES AND PRODUCTS:

Materials available include textbooks, films, videotapes, filmstrips, and brochures.

* 78 sites are known to be using components of the project's demonstration model.

Idaho Outreach Project

ADDRESS: Special Education Department
University of Idaho
Moscow, Idaho 83843

PHONE: (208) 882-6159

FISCAL AGENCY: University of Idaho

DIRECTOR: Dale Gentry
COORDINATOR: Jennifer Olson

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Private endowment fund

DESCRIPTION OF DEMONSTRATION MODEL:

The university preschool serves children birth to age 5 years with moderate and severe handicaps. Programming is determined by the child's individual strengths and needs, parent input, accessibility to the center, and assessment information. A functional curriculum approach based on the theory of systematic instruction is used to determine daily programs and daily data collection procedures. Strategies for involving parents in varying capacities are implemented based on the individual needs of the families. A transdisciplinary approach is used.

MAJOR OUTREACH GOALS:

- To increase awareness of the need for early intervention programs within Idaho.
- To revise and disseminate major project materials -- i.e., assessment tools, the parent involvement package, guidelines for application of systematic instruction procedures to the preschool setting.
- To provide technical assistance to preschool sites throughout the state.

MAJOR OUTREACH SERVICES:

The project sponsors a state task force on early education for young handicapped/disabled children and participates in training workshops throughout the state that are sponsored by agencies currently responsible for providing service to handicapped children from birth to age 5 years. The project also provides preservice training to special education/elementary education students in the areas of early childhood education, systematic instruction, and parent/professional relations.

FEATURES AND PRODUCTS:

The project works with severely handicapped children in a rural, sparsely populated area. Developed products include: a parent involvement package of three 20-minute videocassettes and a training manual, a teacher training manual on the social skills curriculum for preschool children, a manual on the application of systematic instruction procedures to the preschool setting, and a manual on delivering sensitive information to parents.

* 9 sites are known to be using components of the project's demonstration model.

PEECH

Precise Early Education for Children with Handicaps

ADDRESS: University of Illinois
Colonel Wolfe School
403 East Healey
Champaign, Illinois 61820

PHONE: (217) 333-4894

FISCAL AGENCY: Institute of Child Behavior and Development

DIRECTOR: Merle B. Karnes
COORDINATOR: Wendy Boyce Sercombe
OTHER STAFF TITLES: program evaluator; replication specialists

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Joint agreement between Rural Champaign County Education Cooperative and the University of Illinois

DESCRIPTION OF DEMONSTRATION MODEL:

PEECH is a center-based program serving handicapped children age 3 to 5 years and their families. Although the primary population is the mildly to moderately handicapped, procedures have been adapted for lower-functioning, sensory-impaired children. The project obtains pre- and posttest data on all children. Teachers assess each child's abilities, set individual goals and objectives, and continually evaluate child progress.

MAJOR OUTREACH GOALS:

- To train site personnel in procedures for developing, implementing, and demonstrating a model early education program for preschool handicapped children.
- To prepare and disseminate materials to help early childhood personnel educate handicapped children.

MAJOR OUTREACH SERVICES:

PEECH provides intensive training to each year's replication site. Component workshops are presented on topics relevant to early childhood special education. The project mails materials to interested professionals throughout the United States.

FEATURES AND PRODUCTS.

Available from the project are manuals on classroom planning and programming, manuals on family involvement, and handouts describing components of the early childhood special education program.

* 48 sites are known to be using components of the project's demonstration model.

RAPYHT

Retrieval and Acceleration of Promising Young Handicapped and Talented

ADDRESS: University of Illinois
Colonel Wolfe School
403 East Healey
Champaign, Illinois 61320

PHONE: (217) 333-4894

FISCAL AGENCY: University of Illinois

DIRECTOR: Merle B. Karnes
COORDINATOR: Wendy Boyce Sercombe
OTHER STAFF TITLES: program evaluator; replication specialists

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Joint agreement between Rural Champaign County Education Cooperative and the University of Illinois

DESCRIPTION OF DEMONSTRATION MODEL:

The RPYHT model, a complete approach to identifying and programming for individual gifted/talented handicapped children age 3 to 6 years, has been demonstrated as effective in a variety of preschool special education settings. Direct services are provided to teachers who assess and improve individual talent area capabilities. The program also offers information and materials to the families of those children identified as gifted/talented. Pre- and posttest data, obtained on all children, offer additional areas of emphasis for programming.

MAJOR OUTREACH GOALS:

- To train site personnel to screen, identify, assess, and provide appropriate educational services for gifted/talented handicapped preschool children.
- To facilitate awareness and disseminate materials in order to provide improved services for gifted/talented handicapped preschoolers.

MAJOR OUTREACH SERVICES:

The project provides regular visits to the site by outreach specialists, in-service training workshops at the site, and printed materials necessary to implement the model.

FEATURES AND PRODUCTS:

Results from previous research support the contention that RPYHT programming promotes growth in the following areas: creative thinking, social functioning, and motivation to achieve. The Preschool Talent Checklist and Nurturing Talent in Early Childhood (series in eight talent areas) have been developed and are available from the project.

* 11 sites are known to be using components of the project's demonstration model.

Macomb 0-3 Regional Project: A Rural Child/Parent Service

ADDRESS: 27 Horrabin Hall
Western Illinois University
Macomb, Illinois 61455

PHONE: (309) 298-1634

FISCAL AGENCY: Western Illinois University

DIRECTOR: Patricia L. Hutinger
COORDINATOR: Bonnie Smith-Dickson
OTHER STAFF TITLES: training coordinator; trainer/evaluator; consultant/trainer

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

State of Illinois Department of Mental Health/Developmental Disabilities (McDonough County Rehabilitation Center and Fulton County Community Workshop and Training Center, Inc.)

DESCRIPTION OF DEMONSTRATION MODEL:

The project provides a home-based remediation/education service to handicapped children birth to age 3 years and their families. This rural infant service delivery model provides home visits and Sharing Centers which incorporate child activities, parent/study topics, and water activities. Parents are involved in all components. The model project demonstrates significant practical and statistical child gains based on core curriculum activities.

MAJOR OUTREACH GOALS:

- To increase or improve high-quality specialized services in rural areas to handicapped and high-risk children birth to age 3 years and their parents.
- To develop an effective Outreach model for rural communities.
- To ensure the continuation of services to handicapped children birth to age 3 years by helping early childhood programs develop evaluation/documentation plans to show program effectiveness.

MAJOR OUTREACH SERVICES:

Services include awareness-building activities; stimulation of replication sites; training of other providers; consultation; national, state, and local involvement and coordination; project development, refinement, and revision, program evaluation/documentation plan development; and HCEEP Rural Network activities.

FEATURES AND PRODUCTS:

Parents are involved in all activities of this home-based program. The Sharing Center, a unique component of the program, is a popular and effective means of bringing parents and children together to engage in learning activities. Program evaluation/documentation is available in addition to regular outreach services. The project has developed and sells Baby Buggy books and papers. A series of videotapes and slide-tapes are available for rent.

* 17 sites are known to be using components of the project's demonstration model.

JDRP--approved

Peoria 0-3 Outreach Project

ADDRESS: 320 East Armstrong Avenue
Peoria, Illinois 61603

PHONE: (309) 672-6358

FISCAL AGENCY: United Cerebral Palsy of Northwestern Illinois; Peoria Association for Retarded Citizens

DIRECTOR: Kristine Montgomery

OTHER STAFF TITLES: motor consultant; speech/language pathologist; child development specialist; materials/information coordinator; secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Department of Mental Health and Developmental Disabilities, United Fund, contributions; and services fees

DESCRIPTION OF DEMONSTRATION MODEL:

The project is based on a developmental task analysis approach to prescriptive teaching delivered primarily in the home by parents. The program serves mildly to severely developmentally delayed children birth to age 3 years and their families. The service program's components include: awareness and identification of young handicapped children; comprehensive diagnostic and evaluation services; IEP planning and home-based programming using the Functional Profile to assess child progress; center-based programming; occupational, physical, and speech/language therapy; and parent education and support.

MAJOR OUTREACH GOALS:

- To improve the quality of intervention services to developmentally delayed children birth to age 3 years and their families.
- To provide on-site technical assistance, training, and supplemental materials for agencies initiating or expanding services based on the Peoria 0-3 Model.
- To demonstrate a comprehensive system of services which could be adapted to both rural and urban settings.
- To develop materials to increase awareness and help development of programs for unmet and underserved handicapped infants and toddlers and their families.

MAJOR OUTREACH SERVICES:

The project provides technical assistance and training to replicating programs using the Peoria 0-3 Replication Rating Scale as a guide to identify areas for training emphasis and to measure training effectiveness. Awareness, introductory, and topical workshops are held each year at the local, state, regional, and national levels. In addition, the project disseminates thousands of project materials each year.

FEATURES AND PRODUCTS:

These materials are available: slide-tape presentations on normal and abnormal motor development; a videotape on alternate communication; a program manual; handouts on parent education and motor and speech/language development; the Functional Profile (child progress assessment instrument for birth to 6); and others.

* 134 sites are known to be using components of the project's demonstration model.

JDRP-approved

Project RHISE

ADDRESS: 650 North Main Street
Rockford, Illinois 61103

PHONE: (815) 965-6745

FISCAL AGENCY: Children's Development Center

DIRECTOR: Steven Lynn Smith

OTHER STAFF TITLES: training consultants; secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Illinois Department of Mental Health, United Way, fees, gifts, and contributions

DESCRIPTION OF DEMONSTRATION MODEL:

The program serves handicapped infants birth to age 3 years in both home- and center-based sites using the consultancy model, a transdisciplinary approach. The program emphasizes parent training and support through the parent-to-parent approach. Community relations activities and a strong organizational framework round out the comprehensive program. Clinical consultants measure child progress through formal, standardized assessments, while the parent-infant educator uses educational assessments.

MAJOR OUTREACH GOALS:

- To develop comprehensive, high-quality programs for handicapped infants.
- To provide long-term training and topical workshops.
- To disseminate project materials to increase both public awareness of early intervention and participation in state-level activities, including the state consortium.

MAJOR OUTREACH SERVICES:

Technical assistance offered by the project includes program needs assessments, long-term training for model replication, short-term training, workshops on specific topics, on-site consultation, observation and training at the Children's Development Center (demonstration site), product dissemination, and information services.

FEATURES AND PRODUCTS:

The consultancy model is being replicated in both rural and urban settings. Available materials include a curriculum syllabus, Rockford Infant Development Evaluation Scales (RIDES), parent needs assessment, parent learning packages, a parent-developed filmstrip, child-find workshop proceedings monograph, child development chart, bibliographies, and articles describing the program.

* 32 sites are known to be using components of the project's demonstration model.

PEEEC

Project for Early Education of Exceptional Children

ADDRESS: West Kentucky Educational Cooperative
Special Education Building
Murray State University
Murray, Kentucky 42071

PHONE: (502) 762-6965

FISCAL AGENCY: West Kentucky Educational Cooperative

DIRECTOR: Melba Casey

COORDINATOR: Jerri A. Millican

OTHER STAFF TITLES: parent involvement coordinator; project manager

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Murray Independent Schools, Calloway County Schools, and Caldwell County Schools

DESCRIPTION OF DEMONSTRATION MODEL:

PEEEC offers Home-School Instruction services (home-based) or Developmental Learning Center services (classroom) to multihandicapped and some high-risk children age 3 to 8 years. The project uses diagnostic-prescriptive methods of intervention and provides annual preschool screening for 2-1/2- to 5-1/2-year-old children in the community. Individual parent services are based on needs assessments.

MAJOR OUTREACH GOALS:

- To develop and implement an effective Outreach model.
- To provide awareness activities to increase services.
- To develop and distribute products to enhance the quality of services.
- To provide training and technical assistance to early childhood providers in order to ensure comprehensive educational planning and to stimulate high-quality programs in western Kentucky and other designated sites.
- To stimulate state involvement in the support and provision of programs.

MAJOR OUTREACH SERVICES:

The project disseminates products and information and provides training and technical assistance (workshops and on-site consultations) to interested sites.

FEATURES AND PRODUCTS:

The project is represented on the Kentucky State Advisory Committee for Handicapped Services in Head Start. Project staff members are working with the Bureau of Education for Exceptional Children, the Head Start State Training Facility, and the Kentucky Department of Education to stimulate statewide involvement and interagency coordination.

* 2 sites are known to be using components of the project's demonstration model.

The Louisiana Curriculum for Infants with Handicaps

ADDRESS: LSU Medical Center
Children's Center, Building 119
1100 Florida Avenue
New Orleans, Louisiana 70119

PHONE: (504) 948-6881

FISCAL AGENCY: LSU Medical Center

DIRECTOR: Patsy Poche
COORDINATOR: Carolyn J. Seymour

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
State Department of Education

DESCRIPTION OF DEMONSTRATION MODEL:

The project provides evaluation and serves as an intervention model.

MAJOR OUTREACH GOALS:

- To replicate and field-test the Louisiana Curriculum for Infants with Handicaps.
- To increase the number and quality of educational programs and services to handicapped infants.

MAJOR OUTREACH SERVICES:

The project provides technical assistance to new and existing infant programs throughout the state. Staff training is provided for field tests to revise, refine, and improve the curriculum.

* 6 sites are known to be using components of the project's demonstration model.

WCCP

Washington County Children's Program

ADDRESS: P.O. Box 311
Machias, Maine 04654

PHONE: (207) 255-3426

FISCAL AGENCY: Child and Youth Board of Washington County

DIRECTOR: Jane Wei

OTHER STAFF TITLES: training coordinator; product development coordinator; secretary;
bookkeeper

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Title XX, contracts, Bureau of Mental Health, local funds, Department of Education, Bureau of Mental Retardation, Medicaid, and small foundation and church grants

DESCRIPTION OF DEMONSTRATION MODEL:

WCCP began as a home-based model and has expanded to include group experiences for children and parents. Group placement in normal group settings (Head Start, family day care, nursery schools) is emphasized. In areas where no groups exist, WCCP staff members form groups for children and parents. With increasingly younger referrals and acceptance of early intervention, the program has an increasing emphasis on infants and toddlers.

MAJOR OUTREACH GOALS:

- To increase the number and quality of services through training.
- To affect policy, legislation, and funding decisions at the state level.
- To develop and disseminate print and audio materials.
- To increase public awareness.

MAJOR OUTREACH SERVICES:

The project supports the Maine Early Intervention Consortium, a small group of established early intervention professionals in Maine. This consortium developed a policy and recommendation paper, "An Ounce of Intervention," which has influenced policy and legislation. In 1982-83 the project will be involved with state-level planning for handicapped children birth to age 3 years and in planning cross-professional training.

FEATURES AND PRODUCTS:

Materials available include: Helping Children Grow, a series developed during demonstration and Outreach years; Helping Parents "Group", a set of materials on developing and working with mothers' groups; Living with a Handicapped Child: Readings for Parents, a set of 18 reproducible bulletins written by parents and professionals; a set of four packets designed for family day-care providers; audiotaped interviews with three parents of handicapped children; a speech, language, and hearing questionnaire to be used by parents; a checklist for observing how language is being reinforced by staff in nursery schools, Head Start programs, day-care centers, etc.; a prenatal questionnaire; and the Policies and Procedures Manual. Products for 1982-83 are: "how-to" booklets on developing a public service announcement campaign, a "materials to rural libraries" project, and a booklet entitled Helping Professionals Grow, which will be available in June, 1983.

* 3 sites are known to be using components of the project's demonstration model.

ERIN

Early Recognition Intervention Network

ADDRESS: 376 Bridge Street PHONE: (617) 329-5529
Dedham, Massachusetts 02026

FISCAL AGENCY: Early Recognition Intervention Network, Inc.

DIRECTOR: Marian L. Hainsworth
OTHER STAFF TITLES: training specialists; administrative assistant; secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local public schools

DESCRIPTION OF DEMONSTRATION MODEL:

The ERIN system features special and regular education settings. The specialized combination preschool/home programs serve children age 2 to 7 years with moderate to severe special needs, and their parents. The regular early childhood and primary K-1 program serves mildly to moderately handicapped children who are integrated with nonhandicapped children.

MAJOR OUTREACH GOALS:

- To increase the number of children served and to improve the quality of programs using the ERIN model.
- To help 20 outreach sites in seven states develop quality replications of the ERIN model.
- To provide services through these sites to other groups in their states.
- To disseminate ERIN print and audiovisual material.
- To provide summer training programs.

MAJOR OUTREACH SERVICES:

ERIN conducts five-day Leadership Training Institutes for trainers, coordinators, and teachers at ERIN or at regional locations. The project provides additional training and support to trainers and implementers via special topic workshops. The project makes two to four on-site visits to each replication program. ERIN is developing self-study training print and audiovisual materials and is disseminating awareness materials.

FEATURES AND PRODUCTS:

Project-developed materials include: Preschool Screening Systems, a child test and parent questionnaire; Developmental Inventory of Learned Skills, a criterion-referenced checklist for children birth to age 8 years; Implementing the ERIN Program, a teacher/coordinator kit (modules on environment, evaluation/screening, planning, and teaching -- with support slide-tapes and materials); and resource books on teaching language, visual-perceptual-motor, body awareness, and control skills. A complete list of products is available from ERIN.

* 60 sites are known to be using components of the project's demonstration model.

Project OPTIMUS/Outreach

ADDRESS: 77 Parkingway
Quincy, Massachusetts 02169

PHONE: (617) 471-0350
(617) 773-2479

FISCAL AGENCY: South Shore Mental Health Center

DIRECTOR: Geneva Woodruff

OTHER STAFF TITLES: therapeutic coordinator; educational coordinator; administrative assistant; parent and motor consultants

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Third-party payments, Title XX funds, 89-313 contract, state mental retardation contract, and donations

DESCRIPTION OF DEMONSTRATION MODEL:

The demonstration component is a center- and home-based program for handicapped children birth to age 3 years and their families. The project uses a modified transdisciplinary approach with a primary provider for direct services and a team to assess, plan, and evaluate. Staff members measure child progress every three months using developmental assessment and observation.

MAJOR OUTREACH GOALS:

- To train program administrators and personnel in the transdisciplinary model.
- To provide quality services to handicapped children, particularly those with moderate to severe disabilities.

MAJOR OUTREACH SERVICES:

Workshops, replication services, technical assistance, and materials development constitute the major portion of the project's training efforts.

FEATURES AND PRODUCTS:

Materials developed by the project include: The Parent Involvement Manual and slide-tapes on the transdisciplinary service delivery model, parental involvement, and the ARENA assessment in a transdisciplinary service delivery model.

* 50 sites are known to be using components of the project's demonstration model.

HIGH/SCOPE First Chance Outreach Project

ADDRESS: 600 North River Street
Ypsilanti, Michigan 48197

PHONE: (313) 485-2000

FISCAL AGENCY: High/Scope Educational Research Foundation

DIRECTOR: Clay Shouse
COORDINATOR: Bettye McDonald
OTHER STAFF TITLES: education consultants

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
High/Scope Educational Research Foundation

DESCRIPTION OF DEMONSTRATION MODEL:

The project is located in an integrated classroom where the Cognitively Oriented Preschool Curriculum has been shown to have a positive impact on nonhandicapped and handicapped children. The curriculum, based in Piaget's child development theory, presents a framework for supporting total development of the child.

MAJOR OUTREACH GOALS:

- To provide quality services to young handicapped and nonhandicapped children.
- To disseminate program information.
- To select and provide technical assistance and training to five replication sites.
- To certify selected replication site staff who will provide dissemination activities in their local areas

MAJOR OUTREACH SERVICES:

The project conducts needs assessments, training visits and services, on-site consultations, demonstration classrooms, teacher and trainer institutes, project evaluations, and monitoring assistance to replication sites and to projects interested in replication. The project also disseminates the High/Scope Curriculum and provides awareness information through introductory workshops, mail, and telephone contacts.

FEATURES AND PRODUCTS:

The High/Scope Curriculum is documented in Young Children in Action: A Manual for Preschool Educators. Many audiovisual materials are available to support training in this model. Pre- and posttesting with the McCarthy Scales indicate that the children, as a group, advanced 2.02 months in mental age for each month in the program.

* 73 sites are known to be using components of the project's demonstration model.

Early Education Center Outreach Project

ADDRESS: P.O. Box 10356 PHONE: (601) 353-1664
Westland Station
Jackson, Mississippi 39209

FISCAL AGENCY: Early Education Center, Christian Educational Services, Inc.

DIRECTOR: Sharon Booth
OTHER STAFF TITLES: outreach trainers; secretary/bookkeeper

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
State Department of Public Welfare, State Department of Education, and private and community donations

DESCRIPTION OF DEMONSTRATION MODEL:

The model program provides developmental training for handicapped children birth to age 6 years. A multidisciplinary team designs programs to meet each child's individual needs. Staff members use the "clipboard system" to record child progress. This system provides performance data in the areas of gross and fine motor, social, language, self-help, cognitive, and behavioral skills.

MAJOR OUTREACH GOALS:

- To stimulate replication and adaptation of the model.
- To provide technical assistance and training.
- To conduct workshops and seminars for professionals and paraprofessionals serving young handicapped children.
- To disseminate information and materials to increase public awareness.

MAJOR OUTREACH SERVICES:

The project has provided training to 51 agencies and groups and has sponsored or participated in 18 major workshops statewide. It has also contributed to developing and updating the MESH Resource Directory, now in its third printing. The project also developed, field-tested, and is distributing the A.P.P.L.E., a task-analyzed assessment curriculum system for use with children of developmental ages birth through 8 years.

FEATURES AND PRODUCTS:

The project has developed the following modules: programming for individual needs, the EEC Clipboard System, augmentative communication, therapeutic feeding, children's developmental disabilities, programming from assessment instruments, and the EEC Model. The following materials are available: Outreach Training Modules (pretests, posttests, curricula, handouts, overheads, videotapes, and slide presentations); MESH Resource Directory (a comprehensive listing of agencies serving young handicapped children in Mississippi); Feeding/Language Assessment, a checklist of feeding patterns and prelanguage skills; and the A.P.P.L.E.

* 14 sites are known to be using components of the project's demonstration model.

Project RUN/Outreach

ADDRESS: P.O. Box 967
Oxford, Mississippi 38655

PHONE: (601) 234-1476

FISCAL AGENCY: North Mississippi Retardation Center

DIRECTOR: Lisa Romine
OTHER STAFF TITLES: speech-language pathologist; secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
North Mississippi Retardation Center

DESCRIPTION OF DEMONSTRATION MODEL:

Project RUN offers a diagnostic/therapeutic program for children who are functioning at a preschool developmental age level and who are severely/profoundly multihandicapped. The Project RUN Assessment/Curriculum is used for each child's treatment program. The system includes four areas of infant development (auditory discrimination, visual/fine motor, communication, and gross motor) within the birth to 48-month age range. The program employs behavior modification principles of reinforcement and prompting cues for eliciting desired responses; one-to-one programming is used for program implementation. Two special education teachers, who also serve as the child's case manager, a teacher aide, and a physical therapy aide carry out the treatment program. The ultimate goal of the program is to prevent institutionalization or to facilitate deinstitutionalization, if appropriate, of young severely/profoundly multihandicapped children.

MAJOR OUTREACH GOALS:

- To stimulate high-quality service programs for preschool handicapped children and their families through an effective outreach/demonstration model.
- To effect increased interest in serving the young severely/profoundly handicapped through awareness and coordination activities.

MAJOR OUTREACH SERVICES:

Project RUN offers replication and model use assistance, awareness and coordination activities, and training to interested projects. In addition, the project develops and disseminates products and information.

FEATURES AND PRODUCTS:

A four-day workshop at the facility and four days of technical assistance at the agency site are provided for replication/use of the model. Several types of assistance for training are offered to university students and direct service agency staff, depending on stated needs. Assistance is offered through presentations/short-term workshops and dissemination of printed materials to a national audience. The project-originated materials include: A Parent Component: Involvement and Training, Therapeutic Feeding Manual, Learning is FUN: A Guide for Parents, Project RUN -- Bibliography of Resources for Serving the Handicapped, and the Project RUN Early Education Assessment Curriculum for the Severely/Profoundly Multiply Handicapped (available from the J.A. Preston Corporation).

* 7 sites are known to be using components of the project's demonstration model.

Albuquerque Integration/Outreach Project

ADDRESS: 3501 Campus Boulevard, NE
Albuquerque, New Mexico 87106

PHONE: (505) 266-8811
(505) 268-0213

FISCAL AGENCY: Albuquerque Special Preschool

DIRECTOR: Gail C. Beam
CO-COORDINATORS: Mary Fortess and Deborah McCue
OTHER STAFF TITLES: integration specialists; speech and occupational therapy consultants; secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
New Mexico Health and Environment Department Developmental Disabilities Bureau,
United Way of Greater Albuquerque, and the Albuquerque Special Preschool

DESCRIPTION OF DEMONSTRATION MODEL:

Handicapped and nonhandicapped children age 2 through 5 years are integrated in classrooms where ratios of handicapped to nonhandicapped vary. Using a transdisciplinary approach, a developmentally oriented curriculum is implemented with support from speech and occupational therapists. Early childhood special educators are cross-trained in the use of both a diagnostic and a cognitive-developmental approach. Progress is measured with the Learning Accomplishment Profile, the Westby Symbolic Play Scale, and a checklist of behaviors which facilitate success in an integrated setting. Research emphasis is on the selection of children and their progress in an integrated setting. Parent involvement is a strong component of the project.

MAJOR OUTREACH GOALS:

- To stimulate the development of programs which integrate young handicapped and nonhandicapped children in urban and rural New Mexico.
- To train professionals and paraprofessionals in the assessment, selection, placement, and education of young handicapped and nonhandicapped preschoolers in integrated settings.
- To stimulate state involvement through assistance in the development of a state plan for early childhood services for the developmentally disabled.
- To develop, field-test, and disseminate products to facilitate training in the integration model.

MAJOR OUTREACH SERVICES:

The project provides technical assistance through agency needs assessments, on- and off-site training, workshops, and consultation. The project demonstrates application of the integration model to university students, professionals, and lay personnel.

FEATURES AND PRODUCTS:

The project has developed a criteria checklist and a guide to integrating handicapped and nonhandicapped preschoolers, Making Integration Work -- A Teacher's Perspective. Handbook for Parents and a parent attitude survey will be available later this year. Research results are also available from the model period (focus on play behavior and developmental growth) and from a year of study on the placement of children using the Criteria Checklist (1981-82).

* 7 sites are known to be using components of the project's demonstration model.

Chapel Hill Training-Outreach Project

ADDRESS: Lincoln Center
Merritt Mill Road
Chapel Hill, North Carolina 27514

PHONE: (919) 967-8295

FISCAL AGENCY: Chapel Hill-Carrboro Public Schools

DIRECTOR: Anne R. Sanford

OTHER STAFF TITLES: special education trainers; family involvement coordinator; secretaries; curriculum consultant; behavior modification consultants

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Kentucky, Louisiana, and North Carolina state education agencies; Administration for Children, Youth and Families; Title I; North Carolina Mental Health Services; and North Carolina Division of Day Care Services

DESCRIPTION OF DEMONSTRATION MODEL:

The project uses the LAP and parental needs assessments to establish individual learning objectives for children. The Chapel Hill model offers a variety of service-delivery systems, including center-based, home-based, resource room, and mainstream settings. Teacher training in task analysis, behavior modification, parent involvement, and the assessment-curriculum design are basic model components.

MAJOR OUTREACH GOALS:

- To stimulate replication of the Chapel Hill model in new programs for young handicapped children and their families through incentive grants from Louisiana and Kentucky state education agencies, the North Carolina Division of Day Care Services, and Region IV Head Start.

MAJOR OUTREACH SERVICES:

The Kentucky State Department of Education has applied all its incentive grant funds to the replication of the Chapel Hill model in 153 counties. The Chapel Hill-Carrboro Schools have established a model replication site, and Head Start programs throughout Region IV have replicated the model.

FEATURES AND PRODUCTS:

The United Arab Republic has translated and adapted the Chapel Hill model. The project provided two weeks of intensive training to personnel in Guam to replicate the model in public health and department of education programs. The Chapel Hill materials have been translated into Korean and form the basis for preschool programs in that country. Project-developed materials include slide-tape programs, public service announcements, and manuals and other print materials on topics such as assessment, curriculum, family involvement, P.L. 94-142, and competency-based training. "New Friends," a training program designed to develop positive attitudes toward handicapped individuals, is a major component of the mainstreaming efforts. Contact the project for a comprehensive list of materials.

* 900 sites are known to be using components of the project's demonstration model.

JDRP-approved

Project for Motor-Impaired Infants and their Families

ADDRESS: Children's Hospital Medical Center of Akron PHONE: (216) 672-3854
281 Locust Street
Akron, Ohio 44308

FISCAL AGENCY: Children's Hospital Medical Center of Akron

DIRECTOR: Philippa H. Campbell
COORDINATOR: Karen Clegg
OTHER STAFF TITLES: project specialists; project assistant; physical therapist;
secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM.
Children's Hospital Medical Center of Akron

DESCRIPTION OF DEMONSTRATION MODEL:

The model promotes individualized team programming that emphasizes an integrated approach to intervention based on Neurodevelopmental Treatment (NDT-Bobath). Teachers are trained in a six-week summer course using data continuously collected to provide measures of child progress, both in training and in replication at the home site.

MAJOR OUTREACH GOALS:

- To stimulate replication of the model through training.
- To ensure ongoing replication by using graduate-level training.
- To develop and distribute products.

MAJOR OUTREACH SERVICES:

The project trains interdisciplinary personnel to replicate the model. The project also distributes written and other materials to support training and replication efforts.

FEATURES AND PRODUCTS:

A number of products have been developed and are available.

* 24 sites are known to be using components of the project's demonstration model.

IS/PT

Infant Stimulation/Parent Training

ADDRESS: Department of Pediatrics
College of Medicine
University of Cincinnati
231 Bethesda Avenue
Cincinnati, Ohio 45267

PHONE: (513) 872-5341

FISCAL AGENCY: University of Cincinnati

DIRECTOR: Earladeen Badger

COORDINATOR: Lisa Miles

OTHER STAFF TITLES: nurse, neonatal physician's assistant; special educator; secretary/data collector

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

University Hospital, Department of Pediatrics (Newborn Division), and the Ohio State Department of Health (Maternal and Child Health)

DESCRIPTION OF DEMONSTRATION MODEL:

The project offers a hospital-based (neonatal, special-care, and full-term nurseries) early education intervention program in infant stimulation and parent education and support. IS/PT also provides a class program for high-risk parent-infant pairs during the infant's first year of life.

MAJOR OUTREACH GOALS:

- To increase the number of hospital-based early intervention programs.
- To coordinate birth-to-three programs in Ohio through leadership of USEP.
- To demonstrate the importance of primary and secondary prevention programs during the first year of life.
- To certify 0-3 program delivery personnel in Ohio (instruction and practicum).

MAJOR OUTREACH SERVICES:

The project trains hospital-based maternity and infant care nursing staff and community agencies serving socially high-risk parents (adolescents) in replication of the IS/PT education model.

FEATURES AND PRODUCTS:

IS/PT developed the book Infant/Toddler: Introducing Your Child to the Joy of Learning (available from Instructor/McGraw-Hill, Paoli, Pennsylvania). The project has also produced high-quality 3/4" videocassette training films in parent-infant interaction, baby massage, administration of the Mini-Brazelton, the Infant/Toddler Learning Program, and the newborn nursery's infant stimulation program.

* 67 sites are known to be using components of the project's demonstration model.

Pediatric Education Project

ADDRESS: The Nisonger Center
1580 Cannon Drive
Columbus, Ohio 43210

PHONE: (614) 422-8365

FISCAL AGENCY: The Ohio State University

DIRECTOR: Michael Guralnick
COORDINATOR: Karen Heiser

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local university and hospital support

DESCRIPTION OF DEMONSTRATION MODEL:

The project provides pediatrics residents with a one-month rotation in the care and treatment of handicapped children. The residents' progress on a variety of clinical and objective instruments is assessed.

MAJOR OUTREACH GOALS:

- To establish replication in nine major residency training programs across the country and promote a mandatory rotation in this topic area for all residents.

MAJOR OUTREACH SERVICES:

The project provides technical assistance, workshops, and supportive educational materials and participates in policy sessions and conferences on critical issues.

FEATURES AND PRODUCTS:

A comprehensive curriculum is available, including content outlines, clinical protocols, case studies, and evaluation instruments.

- * 21 sites are known to be using components of the project's demonstration model.

CIEEP

Community Interaction Early Education Project

ADDRESS: The University of Tulsa
Lorton Hall 206
600 South College Avenue
Tulsa, Oklahoma 74104

PHONE: (918) 592-6000
ext 2569

FISCAL AGENCY: University of Tulsa

DIRECTOR: Kaye Theimer
COORDINATOR: Nancy Pilkington
PRINCIPAL

INVESTIGATOR: Judy Berry
OTHER STAFF TITLES: educational therapists; educational aide/secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
United Way Safety Net Fund and private donations

DESCRIPTION OF DEMONSTRATION MODEL:

CIEEP serves handicapped children birth to age 5 years who have been identified (through a screening process) as learning disabled, mentally retarded, emotionally disturbed, or severely handicapped. CIEEP offers home-, community-, and school-based individualized instruction to children and their parents. The children are seen weekly for center and home visits, and educational therapists schedule school visits for alternating weeks. The curriculum for all children is designed around a Behavioral Objective Taxonomy which proceeds developmentally from concrete to abstract and includes stimulus, content, and mode-of-response components.

MAJOR OUTREACH GOALS:

- To offer technical assistance and training for agencies that are either beginning or expanding services to handicapped children birth to age 5 years, using one or more key elements or components of the CIEEP demonstration model: family resource network, curriculum development, home visits, community interaction, screening/assessment, and staff development.

MAJOR OUTREACH SERVICES:

The project offers workshops on specific topics and model project components. Also, short-term technical assistance is offered to programs wishing partial or full implementation of the model or assistance in a particular area.

FEATURES AND PRODUCTS:

CIEEP will focus on the development and distribution of several products: a program planning guide, The Family Center: A Parent/Child Interactional Approach; video training tapes; a slide-tape presentation; a newsletter; brochures; and training modules.

Teaching Research Infant and Child Center Data-Based Classroom

ADDRESS: Todd Hall
345 North Monmouth Avenue
Monmouth, Oregon 97361

PHONE: (503) 838-1220
ext 401

FISCAL AGENCY: Division of State System of Higher Education

DIRECTOR OF
TRAINING: Torry Piazza Templeman
OTHER STAFF TITLES: in-service trainers

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local education agency

DESCRIPTION OF DEMONSTRATION MODEL:

The project is a classroom-based behavioral program emphasizing individual instruction, trial-by-trial data, and the use of volunteer instructors. The project uses the Teaching Research Task-Analyzed Developmental Curriculum.

MAJOR OUTREACH GOALS:

- To stimulate quality replication of the model's key components.

MAJOR OUTREACH SERVICES:

The project offers a five-day demonstration center training at Teaching Research, Monmouth, and two follow-up technical assistance visits at the trainee's site. The project also provides awareness workshops.

FEATURES AND PRODUCTS:

The project offers demonstration classroom training. The project staff members identify in-service objectives and provide evaluation at the time of training and follow-up. Publications authored by project staff include: The Data-Based Classroom for Moderately and Severely Handicapped; Teaching Research Curriculum (units include Language, Self-Help, Cognitive, and Gross and Fine Motor); Toilet Training for the Severely Handicapped; and the training manual.

* 200 sites are known to be using components of the project's demonstration model.

Community Training Program for Teachers, Aides and Parents

ADDRESS: Children's Program
Good Samaritan Hospital and Medical Center
2215 NW Northrup, 2nd floor
Portland, Oregon 97210

PHONE: (503) 229-7220

FISCAL AGENCY: Good Samaritan Hospital and Medical Center

DIRECTOR: David N. Grove
COORDINATOR: Carol A. Leitschuh

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Good Samaritan Hospital and Medical Center, Portland Public Schools, and the Multnomah County Mental Health Department

DESCRIPTION OF DEMONSTRATION MODEL:

Two diagnostic-prescriptive classrooms for moderately to profoundly handicapped children provide instruction using task-analyzed sequences in the areas of motor skills, self-help, language, and cognitive and social skills. One classroom serves multiply handicapped and the other classroom serves physically handicapped with unstable medical conditions such as neurologic impairments, metabolic disorders, respiratory inconsistencies, genetic anomalies, and sensory impairment. In addition, physical and occupational therapy, speech/language pathology, and monitoring of medical treatment are incorporated into the classroom activities. Parents receive training in prescriptive programming and behavior management and constitute a key component of the program.

MAJOR OUTREACH GOALS:

- To individualize training experiences by developing an individual training plan with detailed objectives for each trainee.
- To provide pre-assessment and posttraining at the trainee's work site.

MAJOR OUTREACH SERVICES:

The project trains teachers, aides, and students in its classroom diagnostic-prescriptive model. It also trains parents, with an emphasis on working with children birth to age 3 years.

FEATURES AND PRODUCTS:

The project uses a diagnostic-prescriptive approach to serve preschoolers with multiple handicaps and unstable medical conditions with severe developmental delay in language, motor, cognitive, and socialization skills.

* 10 sites are known to be using components of the project's demonstration model.

FCRP

Family-Centered Resource Project

ADDRESS: Albright College
P.O. Box 516
Reading, Pennsylvania 19603

PHONE: (215) 921-2381
ext 236

FISCAL AGENCY: Pennsylvania Department of Education

DIRECTOR: Gilbert M. Foley
ASSISTANT DIRECTOR: Louise M. Bridges
OTHER STAFF TITLES: pediatric consultant; physical therapist; occupational therapist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Berks County Intermediate Unit-Preschool Special Needs Program

DESCRIPTION OF DEMONSTRATION MODEL:

FCRP serves multihandicapped infants and preschoolers in a family context, with emphasis on children with mental retardation and neuromotor dysfunction. The project's theoretical orientation integrates a developmental frame of reference with object-relation analysis. This approach implies sequential learning and mastery of skills to meet age-appropriate expectations. Service delivery is transdisciplinary.

MAJOR OUTREACH GOALS:

- To increase and enhance services to preschool handicapped children in Pennsylvania and the nation through awareness training and replication of the FCRP model.
- To train preschool personnel in the model and methodologies of FCRP, including the transdisciplinary approach, family development planning, assessment, and facilitation of attachment-separation-individuation.

MAJOR OUTREACH SERVICES:

The project provides needs assessment, training, follow-up site visits, individualized technical assistance, one-day orientation workshops, participatory conferences, keynote addresses, parent groups, and college courses.

FEATURES AND PRODUCTS:

Project staff have expertise in transdisciplinary assessment and program planning, family intervention (particularly as it relates to loss-grief reactions), and facilitating the process of attachment-separation-individuation in handicapped children. Products include: Medical Perspectives on Brain Damage and Development, Attachment-Separation-Individuation Scale, Family Development Planning: A Process Manual, and Cognitive Observation Guide.

* 20 sites are known to be using components of the project's demonstration model.

Project SCOOTER for Hearing-Impaired Children

ADDRESS: Department of Communicative Disorders
University of South Carolina
Columbia, South Carolina 29208

PHONE: (803) 777-7876

FISCAL AGENCY: University of South Carolina

DIRECTOR: William A. Cooper, Jr.
OTHER STAFF TITLES: audiologist/trainer; teacher/trainer

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Public schools, University of South Carolina, and Richland Memorial Hospital

DESCRIPTION OF DEMONSTRATION MODEL:

The project provides a High-Risk Register program in area hospitals and parent/infant, toddler, and parent programs.

MAJOR OUTREACH GOALS:

- To create statewide awareness among professionals and the public of the need for early identification and education of young hearing-impaired children.
- To train professionals throughout the state.
- To stimulate and train personnel from other South Carolina agencies to develop and implement mechanisms for effective child-find programs for hearing-impaired children.

MAJOR OUTREACH SERVICES:

Project SCOOTER provides awareness activities; statewide child-find workshops; methods, materials, and curriculum workshops; consultations; pre-service and in-service training; and product development and distribution.

FEATURES AND PRODUCTS:

Project SCOOTER coordinates a statewide High-Risk Register program in 26 replication sites for the early detection of hearing loss. The project makes numerous presentations to professional organizations and develops audiovisual materials for public awareness and demonstration purposes. The project developed a toddler curriculum and other educational assessment instruments. SCOOTER is presenting a series of regional workshops on identification and intervention with hearing-impaired children.

* 29 sites are known to be using components of the project's demonstration model.

OUTFIT Project

ADDRESS: Box 151
George Peabody College
Vanderbilt University
Nashville, Tennessee 37203

PHONE: (615) 322-8425

FISCAL AGENCY: John F. Kennedy Center for Research on Education and Human Development,
Peabody College of Vanderbilt University

DIRECTOR: Bob Kibler
COORDINATORS: Elizabeth Gerlock and Mary Porter
CO-PRINCIPAL
INVESTIGATORS: Bob Innes and Harris Gabel
OTHER STAFF TITLES: secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Title XX, DDSA, private donations, and local fundraising activities

DESCRIPTION OF DEMONSTRATION MODEL:

The Family, Infant, and Toddler (FIT) model was designed to serve mentally retarded and multihandicapped children birth to age 4 years residing in rural middle Tennessee. An activity program is developed for each child in gross motor, personal/social, hearing and speech, nonverbal communication, eye-hand coordination, and gestural and verbal imitation. Parents participate in individual training sessions. The project also offers training programs for extended-family members and local allied professionals.

MAJOR OUTREACH GOALS:

- o To inform parents, professionals, and the public about the FIT model and the needs of young handicapped children and their families in rural communities.
- o To distribute products to training and technical assistance target groups.
- o To help at least one agency replicate the FIT model.
- o To train teachers, allied professionals, university faculty and students, and public health department personnel.
- o To develop a Rural Resource Bank which will be used to link rural agencies that desire assistance with appropriate projects and professionals.

MAJOR OUTREACH SERVICES:

OUTFIT provides information services concerning the FIT model; state networking services; resources available through the Rural Resource Bank; and technical assistance -- training, program planning, and demonstration. All services are based on needs assessments.

FEATURES AND PRODUCTS:

OUTFIT training materials include: An Early Intervention Curriculum Matrix, Parent Group Guide: Topics for Families of Young Handicapped Children, Family, Infant, and Toddler (FIT) Guide, and The FIT Training Guide. The Tennessee Early Intervention Network for Children with Handicaps helped develop the proposal for the Tennessee SIG and will participate in a state preschool planning committee to implement the grant's planned activities.

* 5 sites are known to be using components of the project's demonstration model.

ADAPT Project

ADDRESS: AISD Developmental Center
910 East St. Johns Avenue
Austin, Texas 78752

PHONE: (512) 453-5651
(512) 451-6539

FISCAL AGENCY: Austin Independent School District

DIRECTOR: Fred Tinnin
COORDINATOR: Alison Ryan
OTHER STAFF TITLES: teacher/demonstrator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Austin Independent School District and state foundation funds

DESCRIPTION OF DEMONSTRATION MODEL:

ADAPT is a multifaceted, process-model curriculum for severely and profoundly multi-handicapped children, offering a complete training and data collection system. The project features more than 900 objectives in six areas that have been task-analyzed with generalization steps. The project conducts one- to two-day workshops with training media and provides follow-up visits.

MAJOR OUTREACH GOALS:

- To disseminate the ADAPT curriculum through training materials and media.
- To measure progress of severely/profoundly handicapped children birth to age 9 years using a performance evaluation.
- To revise and update curriculum material to meet the needs of the preschool multi-handicapped population.

MAJOR OUTREACH SERVICES:

The project conducts one- to two-day workshops with media and demonstration and offers follow-up visits. The project produces brochures and journal articles and abstracts.

FEATURES AND PRODUCTS:

ADAPT has consistently demonstrated significant improvement in rates of learning of students enrolled in the curriculum. ADAPT is easily adapted for different populations, such as deaf-blind or the orthopedically impaired. The ADAPT system is quickly learned by paraprofessionals or parents. It provides a framework in which ancillary services (occupational and physical therapy, speech, nursing, psychology, counseling) can work efficiently. Sixteen sites have implemented a formal replication of the ADAPT model.

* 162 sites are known to be using components of the project's demonstration model.

Project KIDS

ADDRESS: Stephe J. Hay School
3801 Herschel
Dallas, Texas 75219

PHONE: (214) 526-0199

FISCAL AGENCY: Dallas Independent School District

DIRECTOR: Ruth Turner
COORDINATOR: Ruth Wilson
OTHER STAFF TITLES: evaluation and parent involvement specialists

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Dallas Independent School District

DESCRIPTION OF DEMONSTRATION MODEL:

Project KIDS is a home-to-center transition model serving infants (birth to age 2 years) in the home, toddlers (2 to 3 years) in a center, and preschoolers (3 to 5 years) in early childhood public school classes. The project uses a developmental/prescriptive approach with strong parent involvement and evaluation components.

MAJOR OUTREACH GOALS:

- To replicate all Project KIDS program components in all early childhood sites in Dallas public school districts.
- To continue replication activities of selected program components in the regional outreach school districts currently being served.
- To replicate all or a portion of the program components in additional school districts in the area served by the educational service centers in Texas.
- To conduct demonstration and information-sharing activities to increase public awareness of the program model and of the importance of early intervention.
- To participate in the Triple T Consortium, a statewide organization for projects serving handicapped infants and toddlers, to promote and encourage programs for handicapped infants (birth to age 3 years) and to promote early intervention.
- To disseminate Project KIDS appraisal, curriculum, staff development, evaluation, and parent involvement packages to other early childhood programs, public and private schools, and regional service centers to facilitate the development of quality programs.

MAJOR OUTREACH SERVICES:

Project KIDS distributes media materials and trains personnel to use program components.

FEATURES AND PRODUCTS:

Materials available from the project include packets on parent involvement, program evaluation, appraisal, and staff development.

* 39 sites are known to be using components of the project's demonstration model.

Project Transition Outreach Services

ADDRESS: 3309 Richmond Avenue
Houston, Texas 77098

PHONE: (713) 521-9584

FISCAL AGENCY: Mental Health Mental Retardation Authority of Harris County

DIRECTOR: Marlene Hollier

COORDINATOR: Mary McGonigel

OTHER STAFF TITLES: Outreach trainers; secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
local fiscal agency

DESCRIPTION OF DEMONSTRATION MODEL:

Project Transition provides local early childhood programs with transitional support services for parents and children leaving our community infant program to enter public schools. The transitional support services are combined with liaison services to the schools for the children and families.

MAJOR OUTREACH GOALS:

- To provide training and technical assistance to infant/preschool programs and public school early childhood programs which will enable them to provide parents with transitional support services and training.
- To provide replication sites with technical assistance and materials in the areas of program development and curriculum.

MAJOR OUTREACH SERVICES:

The project provides training and technical assistance in the areas of curriculum, program planning, and other services to children; parent training and other transitional support services; and liaison between public schools and infant/preschool programs.

FEATURES AND PRODUCTS:

The project developed and distributes a parent training notebook (available in Texas, Louisiana, and New Mexico editions), a birth-to-3 curriculum, and a 3-to-5 curriculum.

* 80 sites are known to be using components of the project's demonstration model.

DEBT Outreach Training Staff

ADDRESS: 1628 19th Street
Lubbock, Texas 79401

PHONE: (806) 747-2641
ext 455

FISCAL AGENCY: Lubbock Independent School District

DIRECTOR: Gloria Galey
OTHER STAFF TITLES: teacher trainers

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local education agencies and service organizations

DESCRIPTION OF DEMONSTRATION MODEL:

The project identifies young handicapped children in the community, provides medical evaluations, develops a weekly home instructional program for parents and children, and assists families with services offered by state and community agencies. In addition, the project provides a weekly play and water program, parent-study groups, child play groups, parent resource programs, follow-up services, and preservice and in-service training for staff, volunteers, and university interns. Other activities include a volunteer program and local, regional, and national information dissemination. Assessment and screening processes include informal observation in the home, case history data, the Vineland Scale of Social Maturity, Denver, Koontz, REEL, and a medical evaluation by the child's private physician or the DEBT pediatric consultant.

MAJOR OUTREACH GOALS:

- To train volunteers, paraprofessionals, and professionals in skills needed to implement home-based programs that provide comprehensive services for parents of very young handicapped children.
- To disseminate DEBT Project model information, service delivery systems, and training materials.
- To conduct research and disseminate results to state decision makers to impact state legislation.

MAJOR OUTREACH SERVICES:

The project provides preservice and in-service training for those in health, education, and social services. It also provides ongoing consultation to urban and rural replication sites. The project staff provides on-site training for medical students and pediatric residents at Texas Tech Medical School.

FEATURES AND PRODUCTS:

Optional components of the DEBT model include a Water Play Program, Stay and Stitch Activities, parent study groups, play groups, and a Saturday morning Adaptive Equipment-Building Workshop for fathers and volunteers. DEBT's research documenting child progress and parental involvement is available. Other products include: DEBT Developmental Scale from Birth to Six Years, DEBT Teaching Activities Packet Birth to 36 Months, Comprehensive Training Notebook, DEBT GOSPEL Guidebook, DEBT Model Project (brochure), DEBT Outreach Project (brochure), Love Your Baby, and a bibliography of literature on child growth and development, intervention techniques, and parental communications.

* 50 sites are known to be using components of the project's demonstration model.

JDRP-approved

Multi-Agency Project for Preschoolers

ADDRESS: UMC 68
Utah State University
Logan, Utah 84322

PHONE: (801) 750-2029

FISCAL AGENCY: Exceptional Child Center, Utah State University

DIRECTOR: Glendon Casto
COORDINATOR: Debra Tolfa
OTHER STAFF TITLES: physical therapist; occupational therapist; dissemination coordinator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Title XX

DESCRIPTION OF DEMONSTRATION MODEL:

The project is a home- and community-based intervention program serving handicapped children birth to age 5 years in rural and remote areas with few professionals trained to work with handicapped children. The program teaches parents of children birth to age 3 years to act as intervention agents for their handicapped children by providing a specific curriculum, training, and weekly monitoring. For handicapped children age 3 to 5 years, the program provides curriculum materials and training to parents and teachers in preschools and community day-care programs.

MAJOR OUTREACH GOALS:

- To develop and disseminate products.
- To stimulate replication.
- To train rural service providers.
- To work with state education agencies.

MAJOR OUTREACH SERVICES:

The project provides curriculum materials and training for the children birth to age 5 years in the areas of receptive and expressive languages, self-help, and motor and social/emotional development. The project also provides technical assistance in program evaluation. A pre-academic program is currently being field-tested.

FEATURES AND PRODUCTS:

Project staff members administer standardized and criterion-referenced pre- and posttests, including the Bayley Scales of Infant Development, the Peabody Picture Vocabulary Test, the Assessment of Children's Language Comprehension, and the Visual Motor Integration Scale. Criterion measures developed by the project are also used. Results from these assessments showed significant child gains over a nine-month period. The project has developed curriculum materials and criterion tests in five developmental areas; these are available for dissemination through Walker Publishing Co., New York City.

* 60 sites are known to be using components of the project's demonstration model.

JDRP-approved

Project SKI*HI Outreach

ADDRESS: UMC 10
Utah State University
Logan, Utah 84322

PHONE: (801) 750-1369

FISCAL AGENCY: Utah State University

DIRECTOR: Thomas C. Clark
COORDINATORS: Dorothy Jensen and Roselee McNamara
OTHER STAFF TITLES: information disseminator; research and development specialist;
evaluator; certified trainers

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

State of Utah legislative appropriation through the Utah School for the Deaf

DESCRIPTION OF DEMONSTRATION MODEL:

The administration component includes child identification and processing and program management. The project provides direct services to hearing-impaired children birth to age 6 years and their families. These services include home visits; curriculum teaching; hearing aid management; and auditory, communicative, and language skills training. Support services include audiological, psychological, and materials support.

MAJOR OUTREACH GOALS:

- ° To help educational agencies provide high-quality home intervention services for underserved and unserved preschool hearing-impaired children.

MAJOR OUTREACH SERVICES:

The project offers awareness activities, dissemination conferences, development of curricular materials, training, information dissemination, on-site technical assistance, and program evaluation through a nationwide data bank.

FEATURES AND PRODUCTS:

During Year One of replication, the project offers basic training in a series of on-site workshops covering the curriculum and program management. During Year Two, the project offers on-site workshops in early identification and support services. SKI*HI provides regional workshops for several geographically neighboring replication sites sharing similar training needs. And, SKI*HI offers a national summer conference for personnel from replication sites and other interested persons. The program has developed and made available a curriculum manual, a total communication curriculum, eight slide-tape programs, two flipcharts to help illustrate lessons to parents, a parent resource book, two language assessment instruments, two videotaped training packages, Spanish-language translations of several curricular components, and a series of monographs on subjects relating to programming for young hearing-impaired children and their families. The project provides to all replication sites a yearly summary of child and parent data.

* 98 sites are known to be using components of the project's demonstration model.

JDRP-approved

CDR Outreach

Child Development Resources Outreach Project

ADDRESS: P.O. Box 299
Lightfoot, Virginia 23090

PHONE: (804) 565-0303

FISCAL AGENCY: Williamsburg Area Child Development Resources, Inc.

DIRECTOR: Barbara Acree Kniest
COORDINATOR: Sharon E. Kiefer
OTHER STAFF TITLES: outreach staff; secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Community Mental Health and Mental Retardation Services Board, United Way, private contributions, and fees

DESCRIPTION OF DEMONSTRATION MODEL:

The rural-based project offers transdisciplinary programming for handicapped and developmentally disabled children birth to age 2 years, using the parent as the primary teacher. The project assesses child progress every four months. Case managers conduct weekly home visits to help parents teach children skills included in the IEP. Parent group meetings provide information about child development, management, and advocacy. The project provides developmental day care for handicapped children and their siblings during parent meetings. The model is readily adaptable to a center-based setting. Program evaluation is based on parent satisfaction questionnaires, pre- and posttesting of infants on a standardized instrument, and the achievement of goals set during program planning.

MAJOR OUTREACH GOALS:

- To increase quality services to handicapped and developmentally disabled infants birth to age 2 years and their families through replication of model components.
- To coordinate CDR Outreach Project activities with those state agencies responsible for the education and treatment of young handicapped children.
- To maintain and increase local awareness, support, and funding.

MAJOR OUTREACH SERVICES:

The project's primary service is to provide training and technical assistance to those agencies wishing to replicate components of the CDR Infant Program. The project gives priority to agencies in rural and unserved or underserved communities. The project also develops and disseminates products and information and offers short-term technical assistance and workshops.

FEATURES AND PRODUCTS:

CDR plays a leadership role in the Virginia Association of First Chance Projects, Virginia Infant Programs Consortium, statewide committees involved in interagency program planning for young children, the Rural Network, and INTERACT. Materials available are: Skills Inventory for Parents, a system of measuring change in parental skills; Skills Inventory for Teachers, a system of evaluating skills of home-based teachers; Parent Group Curriculum, designed to meet information and skill development needs of parents of young handicapped children; and Teaching Activities for Parents, for use by parents of infants birth to age 2 years.

* 23 sites are known to be using components of the project's demonstration model.

Model Preschool Center for Handicapped Children

ADDRESS: Experimental Education Unit
University of Washington WJ-10
Seattle, Washington 98195

PHONE: (206) 543-4011

FISCAL AGENCY: University of Washington

DIRECTOR: Rebecca R. Fewell

COORDINATOR: Patricia Oelwein

OTHER STAFF TITLES: field trainer (communication model); field trainer (Down's model);
materials dissemination specialist; program evaluator; secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

University of Washington and several local education agencies in King County

DESCRIPTION OF DEMONSTRATION MODEL:

The Program for Children with Down's Syndrome and Other Developmental Delays is designed to accelerate and maintain children's gains in fine and gross motor, self-help, social, communications, and cognitive areas. The Communication Program uses systematic instructional programming in communication and language to modify the deficiencies in children based on classroom observation and assessment. Children in the Program for Children with Down's Syndrome are assessed twice yearly with the DSPI. The Communication Program uses the SICD and the Preschool Profile.

MAJOR OUTREACH GOALS:

- To provide training and other assistance to programs.
- To prepare and provide materials to programs and individuals.
- To promote awareness and stimulate improved services.

MAJOR OUTREACH SERVICES:

The project offers field-based and center-based training, technical assistance, instructional and informational materials, and follow-up assistance as requested.

FEATURES AND PRODUCTS:

The program has demonstrated effectiveness in working with communication-delayed children and those with Down's syndrome and other developmental delays. Parent involvement techniques are particularly useful in maximizing child gains, as parents and other members of the interdisciplinary team coordinate efforts both at home and at school on behalf of the pupils.

* 50 sites are known to be using components of the project's demonstration model.

JDRP-approved

The Portage Project

ADDRESS: 626 East Slifer Street
P.O. Box 564
Portage, Wisconsin 53901

PHONE: (608) 742-8811

FISCAL AGENCY: Cooperative Educational Service Agency #12

DIRECTOR: George Jesien

FEDERAL PROJECTS

COORDINATOR: Paul Gundlach

OTHER STAFF TITLES: training specialists; evaluation coordinator/materials development specialist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

twenty-three local school districts in south-central Wisconsin in cooperation with the Wisconsin Department of Public Instruction

DESCRIPTION OF DEMONSTRATION MODEL:

The project follows a precision teaching model which focuses on effective parent involvement to facilitate long-term early childhood intervention. The program provides a home teacher (weekly) to help parents assess the child's present skill level in five developmental areas, target emerging skills, develop skills necessary to teach the child, define appropriate teaching techniques, and evaluate the child's performance.

MAJOR OUTREACH GOALS:

- To facilitate awareness.
- To stimulate services.
- To evaluate outreach activities.
- To develop materials.
- To train professional and paraprofessional staff members.
- To provide technical assistance to replication sites.

MAJOR OUTREACH SERVICES:

The Portage Project offers replication and demonstration site training, awareness workshops and materials, and conference presentations. In addition, the project provides technical assistance to home-based programs and to center-based programs with a home-based component.

FEATURES AND PRODUCTS:

A key feature of the project is the Portage Parent Program, a systematic parent-training component to improve parental skills in teaching and managing the child. The component includes a Parental Behavior Inventory, Parent Readings, and an Instructor's Manual. Also available is the Portage Guide to Early Education (Spanish and English).

* 70 sites are known to be using components of the project's demonstration model.

Comprehensive Training Program for Infants and Young Cerebral Palsied Children

ADDRESS: 9001 West Watertown Plank Road
Wauwatosa, Wisconsin 53226

PHONE: (414) 259-1414

FISCAL AGENCY: Curative Rehabilitation Agency

DIRECTOR: Rona Alexander

OTHER STAFF TITLES: assistant project director; technical program assistant; typist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Federal and state funding, insurance, and private patient fees

DESCRIPTION OF DEMONSTRATION MODEL:

The project serves children birth to age 3 years with neuromotor involvement resulting in feeding, speech, or language problems. Services include speech, physical and occupational therapy, nutrition, psychology, special education, and social and medical services. Pre- and posttest data are analyzed using the Bzoch-League REEL Scale, Mecham Verbal Language and Development Scale, and Peabody Picture Vocabulary Test.

MAJOR OUTREACH GOALS:

- To train teams of staff from replicating agencies in six-day Fundamental Guidelines Workshops.
- To train each team's speech pathologist in the Pre-Speech Assessment Scale.
- To present lectures and workshops on a national basis, emphasizing the need for early intervention and programming for handicapped children.
- To develop and revise materials in nutrition, pre-speech/feeding, and pre-linguistics/cognition.

MAJOR OUTREACH SERVICES:

The project trains teams from replicating agencies in six-day Fundamental Guidelines Workshops and trains speech pathologists in the Pre-Speech Assessment Scale. Project staff members visit all new replication sites. In addition, the project makes available new materials to new and previously trained sites in pre-speech/feeding/nutrition and pre-linguistics cognition.

FEATURES AND PRODUCTS:

The project's Pre-Speech Assessment Scale (1982 edition) is available through the J.A. Preston Corporation.

* 70 sites are known to be using components of the project's demonstration model.

Project WISP/Outreach

ADDRESS: P.O. Box 3224 University Station
Laramie, Wyoming 82071

PHONE: (307) 766-6145

FISCAL AGENCY: University of Wyoming

DIRECTOR: Janis A. Jelinek
COORDINATOR: Morita N. Flynn
OTHER STAFF TITLES: outreach trainer

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Albany County Association for Retarded Citizens

DESCRIPTION OF DEMONSTRATION MODEL:

WISP provides a comprehensive preschool program using both center- and home-based intervention. The project serves handicapped infants and toddlers and their families residing in Albany County, Wyoming, a significantly rural area. The basic intervention model is developmental-prescriptive. The major measure of child progress is the E-LAP; other measures are used as necessary.

MAJOR OUTREACH GOALS:

- To disseminate awareness materials and conduct short-term awareness sessions focusing on the WISP model and the need for early intervention
- To provide training and technical assistance to selected replication sites
- To provide training in model components to parents, professionals, community groups, and college and university students
- To develop and disseminate products

MAJOR OUTREACH SERVICES:

The project provides training and technical assistance to programs in Wyoming and other states that wish to replicate the WISP model. In addition, the project researches materials and topics according to expressed needs and makes this information available to individuals and agencies. The major emphasis during fiscal year 1982 has been to stimulate high-quality sites and short-term training and awareness activities for various groups.

FEATURES AND PRODUCTS:

The project maintains a toy-lending library available to parents and other programs. The project offers free developmental screenings to any child birth to age 3 years in Albany County. During fiscal year 1982, the staff trained individuals at 15 replication sites, conducted mass media and formal awareness activities, and provided competency-based training. Eight products are available for dissemination.

* 16 sites are known to be using components of the project's demonstration model.

Arizona

SIG DIRECTOR: Al Dunstan PHONE: (602) 255-3183

SIG COORDINATOR: Sara Robertson PHONE: (602) 255-3183

STATE DIRECTOR
OF SPECIAL EDUCATION: Diane Petersen PHONE: (602) 255-3183

SIG MAILING ADDRESS: Special Education
Arizona Department of Education
1535 West Jefferson
Phoenix, Arizona 85007

PERIODS OF SIG FUNDING: 1982-83

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: 5 through 21 years.

MAJOR SIG OBJECTIVES AND PURPOSES FOR 1982-1983:

- o To develop systematic procedures for the identification and referral of handicapped preschool children by establishing interagency planning committees at state, regional, and local levels.
- o To develop state, regional, and local plans for the expansion of preschool special education through interagency planning efforts.
- o To develop recommendations for Preschool Special Education Standards which address considerations unique to serving young handicapped children and their families.
- o To develop recommendations for teacher certification/endorsement requirements for teachers of preschool handicapped children.

FEATURES AND PRODUCTS:

The Arizona SIG is assisted by an actively supportive and productive Preschool Advisory Task Force and Consortium. The task force is composed of a diverse group of individuals representing a cross-section of statewide agencies and schools providing services to preschool handicapped children and their families. The consortium members represent model preschool special education programs and teacher training programs. Each group meets monthly to discuss current SIG activities. Products of the joint effort include: Guidelines for Developing Services for Handicapped Preschool Children, Special Education Standards for Preschool Programs (not mandated), addition of a "Preschool Appendix" to the state of Arizona monitoring handbook, assessment of service capabilities and needs of existing preschool programs for handicapped children, assessment of training and technical assistance needs of preschool special education programs, and a survey of agencies which provide identification, evaluation, and referral services for handicapped preschool children.

California

SIG DIRECTOR: Betsy Qualls PHONE: (916) 323-6673

SIG COORDINATOR: (vacant)

STATE DIRECTOR
OF SPECIAL EDUCATION: Louis S. Barber PHONE: (916) 323-4768

SIG MAILING ADDRESS: Office of Special Education
721 Capitol Mall
Sacramento, California 95814

PERIODS OF SIG FUNDING: 1978-83

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: 3 years for those requiring "intensive special education and services."
Permissive: birth to 3 years for those requiring "intensive special education and related services," except in those districts that provided a program in 1980-81.

MAJOR SIG OBJECTIVES AND PURPOSES FOR 1982-1983:

- To develop a comprehensive statewide plan for the implementation of a coordinated full-service delivery system among all service providers.
- To develop interagency agreements.
- To assist in the development of consortia of persons involved in early childhood special education.
- To develop and implement a SIG evaluation.

FEATURES AND PRODUCTS:

The California SIG has developed an intra-departmental plan to maximize use of all existing Department of Education service programs for young handicapped children. In addition, the SIG has established criteria for teacher accreditation and developed a needs assessment instrument for training and technical assistance needs. The SIG has developed two workshops: Establishing Programs for Handicapped Preschool Children, and Mainstreaming Young Handicapped Children. The print materials developed by the SIG include: Guidelines for Providing Services to Infant and Preschool Individuals with Exceptional Needs; Interstate Conference on Consortium Development; Selected Programs Serving Handicapped Infants and Preschool Children: A Compendium of Program Descriptions for California Educators; Early Warning Signs; a child-find brochure; Early Intervention: A Working Paper, providing baseline information on early intervention programs in California public school systems; and The Efficacy and Cost Effectiveness of Early Education for Handicapped Infants and Preschool Children, a review of the literature.

Colorado

SIG DIRECTOR: Brian A. McNulty PHONE: (303) 866-2728

SIG COORDINATOR: Elizabeth W. Soper PHONE: (303) 866-2728

STATE DIRECTOR
OF SPECIAL EDUCATION: Peter S. Fanning PHONE: (303) 866-2728

SIG MAILING ADDRESS: 201 East Colfax Avenue
Denver, Colorado 80203

PERIODS OF SIG FUNDING: 1977-80; 1981-83

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: 5 to 21 years.

Permissive: birth to 5 years.

MAJOR SIG OBJECTIVES AND PURPOSES FOR 1982-1983:

- To influence state legislation for preschool population by Effectiveness Study of Colorado Programs.
- To implement local interagency collaboration planning and activities for preschool handicapped.
- To promote parent training and networking.

FEATURES AND PRODUCTS:

These documents have been developed by (and are available from) the Colorado SIG: Effectiveness of Preschool Education in Colorado; Interagency Collaboration Strategies (proceedings of a symposium); Early Childhood Special Education Guidelines and Certification Standards; Child-Find Manual; and My Baby's Book/Libro de Mi Bebe (a bilingual child development publication).

Connecticut

SIG DIRECTOR: Virginia Volk Guldager PHONE: (203) 566-5225

SIG COORDINATOR: Holden T. Waterman PHONE: (203) 566-5358

STATE PROGRAM MANAGER
OF SPECIAL EDUCATION: William J. Gauthier, Jr. PHONE: (203) 566-5079

SIG MAILING ADDRESS: Room 350
State Department of Education
P.O. Box 2219
Hartford, Connecticut 06145

PERIODS OF SIG FUNDING: 1978-83

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: 3 (by January 1 of school year) to 21 years.
Permissive: birth to 3 years.

MAJOR SIG OBJECTIVES AND PURPOSES FOR 1982-1983:

- To continue the Interagency Early Intervention Committee of representatives from all agencies which serve young children with special needs; the committee will implement action strategies relative to three program standards for early intervention: assessment, case management, and periodic review/accountability.
- To develop an action plan concerning at least two of the remaining program standards developed during this fiscal year.
- To form committees to explore a coterminous service (catchment) area for the state's major social service agencies and coordination and consolidation of programs within five designated full-service regions statewide.
- To update and refine an information bank and retrieval system of statewide service agencies.

FEATURES AND PRODUCTS:

The Connecticut SIG has developed: The Connecticut Case for Interagency Collaboration; a State Department of Education/Administration for Children and Youth and Families (Head Start) interagency agreement; and SDE/ACYF procedures for collaboration.

Louisiana

SIG DIRECTOR: Pat Cooper PHONE: (504) 342-3631

SIG COORDINATOR: Daphne Thomas PHONE: (504) 342-1641

STATE DIRECTOR
OF SPECIAL EDUCATION: Pat Cooper PHONE: (504) 342-3631

SIG MAILING ADDRESS: Joint Project for Parent and Children Services
1272 Laurel Street
Baton Rouge, Louisiana 70802

PERIODS OF SIG FUNDING. 1977-83

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: 3 to 5 years.

Permissive: birth to 2 years (goal for mandated legislation is 1985).

MAJOR SIG OBJECTIVES AND PURPOSES FOR 1982-1983:

- To implement and field-test a plan developed by the Louisiana Department of Education along with the offices of Mental Retardation, Health Services, and Head Start, for identifying, implementing, and evaluating services to preschool handicapped children.

FEATURES AND PRODUCTS:

Products developed by the SIG include: A Replication Guide for Collaborative Service Delivery Utilizing Health and Educational Services; interagency agreements between the Louisiana Office of Health Services, Head Start, and the SEA; and Suggestions for Temporary Care for Illnesses and Emergencies.

Maryland

SIG DIRECTOR: Lin Leslie PHONE: (301) 659-2542
SIG COORDINATOR: Carol Barnes PHONE: (301) 659-2542
STATE DIRECTOR
OF SPECIAL EDUCATION: Martha Irvin PHONE: (301) 659-2489
SIG MAILING ADDRESS: Division of Special Education
200 West Baltimore Street
Baltimore, Maryland 21201

PERIODS OF SIG FUNDING: 1980-83

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: birth through 20 years.

MAJOR SIG OBJECTIVES AND PURPOSES FOR 1982-1983:

- To pilot the existing statewide plan in a representative sample of local school systems.
- To revise the statewide plan based upon test data.
- To conduct limited technical assistance.
- To continue state-level interagency coordination.
- To implement a network plan with SEA early childhood coordinators in a federally assigned region.

FEATURES AND PRODUCTS:

The thrust of this project is twofold. First, the project involves the application of the existing draft of Maryland's statewide plan for young handicapped children in a sample of local school systems. This approach will ensure the application of the statewide plan throughout Maryland. Second, the project will continue to pursue state-level interagency coordination for the purpose of improving services for young handicapped children and their families. Additional results will include the provision of limited technical assistance to local school systems, and a multistate network for dissemination of early childhood special education information.

New Jersey

SIG DIRECTOR: Patricia Munday Hill PHONE: (609) 292-0147

SIG COORDINATOR: Gretchen Holm PHONE: (609) 228-6000
ext 211

STATE DIRECTOR
OF SPECIAL EDUCATION: Paul Winkler PHONE: (609) 292-8616

SIG MAILING ADDRESS: New Jersey Department of Education
CN 500
Trenton, New Jersey 08625

PERIODS OF SIG FUNDING: 1977-79; 1981-83

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: birth to 21 years (as of July 1, 1983).

MAJOR SIG OBJECTIVES AND PURPOSES FOR 1982-1983:

- To develop the product, Implementation Guide for Early Intervention Programs: Birth to Three Years of Age.
- To develop the product, Implementation Guide for Preschool Programs for Handicapped Children: Three to Five Years of Age.

FEATURES AND PRODUCTS:

The products listed above will interpret and elaborate on the program standards presented in the administrative code (which presents minimum standards). The implementation guides will also discuss exemplary practices. The guides be available for distribution by fall, 1983.

New York

SIG DIRECTOR: Lawrence Gloeckler PHONE: (518) 474-5132

SIG COORDINATOR: Michael Plotzker PHONE: (518) 474-8917

STATE DIRECTOR
OF SPECIAL EDUCATION: Louis Grumet PHONE: (518) 474-5548

SIG MAILING ADDRESS: New York State Education Department
Office for Education of Children with Handicapping Conditions
Division of Program Development
Room 1069 EBA
Albany, New York 12234

PERIODS OF SIG FUNDING: 1977-83

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: 5 to 21 years.

Permissive: Parents may petition through the Family Court in their county of residence for special educational services for handicapped children below age 5 years.

MAJOR SIG OBJECTIVES AND PURPOSES FOR 1982-1983:

- To develop a comprehensive state plan for handicapped children age 3 to 5 years.
- To accelerate services to handicapped infants through Regional Early Childhood Direction Centers.

FEATURES AND PRODUCTS:

The SIG continues to be instrumental in establishing links between Early Childhood Direction Centers (designed to help parents and professionals secure services for handicapped children below age 5 years) and Regional Perinatal Centers. These agreements allow handicapped children identified at birth to be matched to services as soon as a problem is identified. During the past year, SIG staff members were involved in the development of a guidebook, Special Education for Handicapped Children Birth to Five, which describes special education programs for handicapped children in New York. SIG staff members have worked with Incentive Grant staff in the development of the publication Identification and Referral of Young Handicapped Children, The Physician's Role, designed to help pediatricians and family practice physicians identify young handicapped children. Current SIG efforts have resulted in the development of a "Memorandum of Mutual Understanding" between the New York State Education Department and Head Start grantees in the state. The SIG staff continues to prepare information materials and develop alternative strategies in support of legislation that mandates educational services to young handicapped children beginning at age 3 years. The SIG staff members are working closely with the state plan officer in the development of a new state plan that incorporates objectives and activities for early childhood special education.

South Dakota

SIG DIRECTOR: Susan Phillips PHONE: (605) 773-3678

STATE DIRECTOR OF SPECIAL EDUCATION: George Levin PHONE: (605) 773-3678

SIG MAILING ADDRESS: R.F. Kneip Building
700 North Illinois
Pierre, South Dakota 57501

PERIODS OF SIG FUNDING: 1977-83

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: birth to 21 years for children in need of prolonged assistance (severe and profound); 3 to 21 years for children in need of special assistance (mild and moderate); grades 1 through 12 for gifted children.

MAJOR SIG OBJECTIVES AND PURPOSES FOR 1982-1983:

- To revise existing interagency agreements and strategies for cooperation.
- To formulate a state-wide plan for the LEA or cooperative catchment area to use in the coordination of public/private agencies at the local level.
- To coordinate SIG and Preschool Incentive Grant activities in order to field-test the statewide plan for interagency coordination at the local level.
- To form a regional networking system to maintain contact among SEA early childhood coordinators in the region.

FEATURES AND PRODUCTS:

The South Dakota SIG has developed four state interagency agreements. An interagency council has been formed that consists of representatives from approximately 30 agencies with the potential to serve preschool handicapped children. The SIG provides in-service training in early childhood and special education. New preschool handicapped programs have been initiated, and established programs have received technical assistance in continuing and expanding their programs. Materials developed by the SIG include: South Dakota Preschool Guidelines; South Dakota Preschool Curriculum; Parental Involvement Manual; South Dakota Special Education Administrative Handbook; a resource data bank; and several brochures.

Tennessee

SIG DIRECTOR: Bette Berry PHONE: (615) 741-2851
SIG COORDINATOR: Pam Frakes PHONE: (615) 741-5274
STATE DIRECTOR
OF SPECIAL EDUCATION: Wanda Moody PHONE: (615) 741-2851
SIG MAILING ADDRESS: Tennessee Children's Services Commission
Attn: Pam Frakes
James K. Polk State Office Building
Suite 1600, 505 Deaderick Street
Nashville, Tennessee 37219

PERIODS OF SIG FUNDING: 1982-83

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: 4 to 21 years (from 3 years if deaf).

MAJOR SIG OBJECTIVES AND PURPOSES FOR 1982-1983:

- To identify a desirable continuum of comprehensive services to meet the identified needs of young handicapped children (birth to 6 years) and their families.
- To inventory existing services.
- To analyze the discrepancies between the desired comprehensive service delivery system and the existing practices.
- To develop strategies for alleviating those discrepancies through plans of shared state resources.
- To prioritize those discrepancy strategies in the form of a long-range interagency plan for implementation.

Washington

SIG DIRECTOR: Joan Gaetz PHONE: (206) 753-0317

STATE DIRECTOR
OF SPECIAL EDUCATION: Greg Kirsch PHONE: (206) 753-6733

SIG MAILING ADDRESS: Early Childhood Coordinator
Superintendent of Public Instruction
Division of Special Services
Old Capitol Building-FG-11
Olympia, Washington 98504

PERIODS OF SIG FUNDING: 1976-83

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: 4 to 21 years.
Permissive: birth to 4 years.

MAJOR SIG OBJECTIVES AND PURPOSES FOR 1982-1983:

- To develop a comprehensive state plan for the delivery of services to handicapped children birth to age 5 years.
- To establish two Regional Interagency Centers to facilitate the development of local interagency agreements.
- To adopt the Preschool Program Guidelines statewide.
- To replicate and refine model child-find procedures.

FEATURES AND PRODUCTS:

The project has developed the following materials: Assessment Manual, Childfind Manual and Update, Preschool Program Guidelines, Guidelines for Home-Based Programs, Interagency Coordination Guidelines, first draft of the Coordinated Plan for Early Intervention, and Early Childhood Connections (a preschool interagency directory).

Wisconsin

SIG DIRECTOR: Betty Rowe PHONE: (608) 266-6981
 SIG COORDINATOR: Jenny Lange PHONE: (608) 267-9172
 STATE DIRECTOR
 OF SPECIAL EDUCATION: Victor Contrucci PHONE: (608) 266-1649
 SIG MAILING ADDRESS: Wisconsin Department of Public Instruction
 Division for Handicapped Children and Pupil Services
 P.O. Box 7841
 Madison, Wisconsin 53707

PERIODS OF SIG FUNDING. 1977-83

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: 3 to 21 years.
 Permissive: birth to 3 years.

MAJOR SIG OBJECTIVES AND PURPOSES FOR 1982-1983:

- To design a statewide system for technical assistance to personnel serving handicapped children birth to age 2 years.
- To effectively coordinate and implement a technical assistance system for birth-through-2 program staff.
- To evaluate the effectiveness of the technical assistance services and system.

FEATURES AND PRODUCTS:

The Wisconsin SIG has developed two products for assessment and intervention: Formal Assessment Instruments for Exceptional Children Under Five and Out of the Nest. For the Wisconsin EC:EEN programs, the SIG has produced a 24-minute slide-tape presentation of family involvement, "Teaming Up With Parents," and Teaching EC:EEN, a print presentation of ten resource modules (screening, assessment, curriculum, instruction, instructional materials, family involvement, paraprofessionals and volunteers, interagency cooperation, administration aspects, and self-improvement).

Wyoming

SIG CO-DIRECTORS: Janis A. Jelinek PHONE: (307) 766-6145
Joseph Reed (307) 777-6391

SIG COORDINATOR: Patricia Spencer PHONE: (307) 766-6145

STATE DIRECTOR
OF SPECIAL EDUCATION: Gayle Lain PHONE: (307) 777-7417

SIG MAILING ADDRESS: P.O. Box 3224
University Station
Laramie, Wyoming 82071

PERIODS OF SIG FUNDING: 1981-83

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: SDE, 6 to 12 years; Health and Social Services, birth to 6 years.

MAJOR SIG OBJECTIVES AND PURPOSES FOR 1982-1983:

- To finalize the comprehensive Planning Document undertaken during 1981-82.
- To develop implementation strategies for those recommendations suggested in the Planning Document.
- To develop in cooperation with the appropriate agency representatives:
 - uniform standards and guidelines for services to Wyoming's preschool handi-capped children;
 - a model of personnel preparation, certification, recruitment, and retention;
 - a coordinated service delivery system.
- To develop implementation strategies for the standards, models, and delivery system described above

FEATURES AND PRODUCTS:

Upon completion of the 1982-83 year, the documents mentioned above (Objectives and Purposes section) will be available for review.

CIREEH

Carolina Institute for Research On Early Education of the Handicapped

ADDRESS: Suite 300, NCNB Plaza
Chapel Hill, North Carolina 27514

PHONE: (919) 962-2001

FISCAL AGENCY: Frank Porter Graham Child Development Center,
University of North Carolina at Chapel Hill

PRINCIPAL
INVESTIGATOR: James J. Gallagher

COORDINATOR: Jean W. Gowen

MAJOR OBJECTIVES:

The major objectives of the second Carolina Institute for Research on Early Education of the Handicapped are to: 1) conduct three coordinated five-year research projects that focus on the families of young moderately and severely handicapped children (birth to age 5 years); 2) develop intervention materials to be used by parents and professionals; 3) disseminate these materials, results from the research projects, and other institute papers on families of handicapped children; 4) train graduate students to conduct research in this area; 5) conduct a self-evaluation; and 6) coordinate activities of this institute with those of the other two early childhood research institutes.

Divisions of the institute include:

- Fathers Present/Fathers Absent (Marie Bristol, James J. Gallagher, and Eric Schopler, Investigators)

This study looks at the father's role in families with handicapped children by analyzing paternal involvement in two-parent families. It also looks at the effects of alternative sources of support in one-parent families of handicapped children. The study has four objectives: 1) to assess the effects of the father's support in two-parent families on the mother's well-being and the child's development; 2) to measure the extent to which the mother's success in rearing a handicapped child in a single-parent home is enhanced by formal and informal support; 3) to assess the generalizability of the initial findings; and 4) to use the results of these two projects to develop training materials which service providers can use to strengthen support in two-parent and single-parent families.

- Facilitating Parent-Child Reciprocity (Nancy Johnson, Dale Farran, Barbara Goldman Lynne Feagans, and Jean Gowen, Investigators)

This study is investigating longitudinally the effectiveness of an intervention program designed to sensitize parents to the unique interactive capabilities of their handicapped infants. It is expected that these parents will feel more positively about their infants, will establish more synchronous interaction patterns with them, will promote more advanced levels of play, and will undergo less of the withdrawal and psychological stress experienced by parents without such training. The objectives of the project are: 1) to assess both the short- and long-term effects of the intervention; 2) to provide descriptive data on the interaction of

mothers and their handicapped infants and on the play behavior of handicapped infants; and 3) to produce intervention materials to be used by professionals working with parents of handicapped infants.

- o The F.A.M.I.L.I.E.S. Project [Family Assessment, Monitoring of Intervention, and Longitudinal Investigation of Effectiveness Studies] (Rune Simeonsson and Don Bailey, Investigators)

This project has three objectives: 1) to document changes in families served by a statewide home visitation program that takes a family approach to helping handicapped infants; 2) to evaluate the effectiveness of intentional changes made in the intervention services; and 3) to design, develop, and implement a computer-based system to monitor intervention services provided to the families.

MAJOR ACTIVITIES FOR 1982-83:

During its first year, the institute is developing the conceptual framework for its research projects; selecting and developing assessment procedures; pilot-testing these procedures, as needed; and preparing literature reviews on the topics to be studied.

At least ten graduate students are being trained in various aspects of the research process through participation as research assistants in the three research projects. A weekly two-hour seminar on families of handicapped children, with presentations by all CIREEH II investigators and graduate assistants, is being conducted from January to May, 1983.

The mailing list for CIREEH II is being developed, announcements of CIREEH II activities are being mailed to a diverse audience, the printed version of the CIREEH I Final Report is being completed and disseminated, and the CIREEH Abstracts are being updated.

Information documenting training, dissemination, research, and administrative activities is being collected. Procedures for collecting satisfaction and impact data are being developed.

RESOURCES AVAILABLE:

CIREEH I Final Report, CIREEH I Abstracts, and Announcement of CIREEH II.

Early Childhood Research Institute

ADDRESS: University of Pittsburgh
3811 O'Hara Street
Pittsburgh, Pennsylvania 15261

PHONE: (412) 624-2012

FISCAL AGENCY: University of Pittsburgh

PRINCIPAL
INVESTIGATOR: Phillip S. Strain

ASSISTANT
DIRECTORS/
COORDINATORS: Steven R. Lyon, Co-Investigator; Samuel L. Odom, Research
Associate Principal

MAJOR OBJECTIVES:

The major purpose of the Early Childhood Research Institute is to develop procedures for assessing and teaching social and related skills to autistic-like preschool children in order for these youngsters to participate successfully in instructional settings with nonhandicapped or less handicapped children.

During the institute's first two years, treatment procedures will be developed which will produce child behavior gains in the areas of social interaction, language development, independent work and play skills, and the elimination of disruptive behavior. In addition, training procedures will be developed to produce gains in parenting skills. In the final three years of the institute, these treatment gains will be validated by assessing whether autistic-like children who receive all these treatments in the context of a preschool classroom will be placed in less restrictive environments than similar children who participate in other preschool programs. The experimental and comparison groups of preschool children will be assessed and compared: a) during their preschool years, to compare child progress; b) following placement in public schools, to compare follow-up progress and the restrictiveness of placement; and c) in the home (during and after preschool treatment), to assess changes in family stress, insularity from the community, and depression as functions of treatment.

MAJOR ACTIVITIES FOR 1982-83:

The following are specific objectives for the institute's first two years; the institute will test and refine treatment procedures in each of the five skill areas:

1. To conduct a thorough experimental analysis of a new, non-aversive, rapid treatment procedure for self-stimulation -- "Sensory Extinction."
2. To develop and field-test a treatment protocol for Sensory Extinction that others can use independently to treat self-stimulation.
3. To conduct a thorough experimental analysis of an assessment procedure which is intended to analyze the motivation of self-injury and aggression, and to validate that assessment procedure by testing its treatment implications.

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4. To develop and field-test an assessment instrument that others can use independently to decide which treatment is appropriate for a given case of self-injury or aggression.
 5. To develop and field-test treatment protocols for each of the treatment strategies which might be required to treat self-injury or aggression.
 6. To conduct a thorough experimental analysis of an assessment instrument designed to show which autistic-like preschoolers will benefit more from speech training and which from sign training.
 7. To develop and field-test an assessment instrument which others can use independently to determine whether a child will benefit more from speech or sign training.
 8. To conduct a thorough experimental analysis of treatment procedures to establish independent (unsupervised) work and play in autistic-like children.
 9. To develop and field-test a treatment protocol that others can use to help establish independence in autistic-like children.
 10. To conduct a thorough experimental analysis of an intervention for teaching parents to use behavior modification procedures appropriately with their autistic-like children which will, in turn, result in desired child behavior gains produced in the home.
 11. To develop and field-test a detailed protocol for training parents in the use of behavior modification with their autistic-like preschool children.
 12. To experimentally identify the social interaction skills which differentiate between preschool children at various levels of social competence and acceptability.
 13. To develop and field-test peer-mediated treatment procedures that will teach the social interaction skills which produce improved social competence and acceptability in autistic-like preschool children.
 14. To conduct a thorough experimental analysis of the peer-mediated treatment for social interaction skills, examining components of the treatment and effects on peer trainers.

Early Intervention Research Institute

ADDRESS: Exceptional Child Center
Utah State University, UMC 68
Logan, Utah 84322

PHONE: (801) 750-2029

FISCAL AGENCY: Utah State University

PRINCIPAL
INVESTIGATORS: Glendon Casto; Karl White

ASSISTANT
DIRECTORS/
COORDINATORS: Cie Taylor; Ann Austin; Dave Shearer

MAJOR OBJECTIVES:

- To integrate the findings on conclusions from previously conducted research on early intervention to determine what is known, what gaps exist, and where future research should focus, and to update this review annually and integrate the findings from this update with the institute's own ongoing work.
- To conduct an integrated program of early intervention research (including longitudinal research) focused on the most important problems and issues encountered in delivering early intervention in typical service settings.
- To disseminate information about the institute's findings and products to a broad audience of professionals and families concerned with early intervention for the handicapped.
- To train graduate students and research assistants in research techniques and effective methods of intervention applicable to preschool handicapped populations.
- To formally evaluate the impact of the institute's findings and products on the field of early intervention.
- To solicit input, criticism, and feedback from a broad constituency (advisory committee members and others) to ensure that the institute's direction and procedures are appropriately focused and are being carried out in a way that will result in the broadest possible impact of institute findings and accomplishments.

MAJOR ACTIVITIES FOR 1982-1983:

- Use meta-analysis techniques to review and integrate the findings from the hundreds of completed research reports concerning early intervention with handicapped children. From this comprehensive integration of existing research, the Institute will determine what conclusions can be drawn from existing research, what gaps exist, and how conclusions about effectiveness vary across handicapping conditions and types of intervention.

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- Prioritize and focus future research efforts by identifying those research questions which need further investigation and replication as opposed to those questions which have already been sufficiently investigated, documented, and replicated.
 - Develop a model for cost-effectiveness analysis for use with early intervention programs for the handicapped.
 - Compare the efficacy and cost effectiveness of center-based early intervention for matched groups of children who either had or did not have a home-based intervention program before receiving center-based services.
 - For hearing-impaired children, compare the effects of early intervention before age 30 months, early intervention after age 30 months, and no early intervention.

RESOURCES AVAILABLE:

Meta-Analysis Training; Cost-Analysis Training

Technical Assistance Development System (TADS)

ADDRESS: 500 NCNB Plaza
Chapel Hill, North Carolina 27514

PHONE: (919) 962-2001

ADMINISTRATIVE/
FISCAL AGENCY: Frank Porter Graham Child Development Center
University of North Carolina at Chapel Hill

DIRECTOR: Pascal Trohanis

SERVICES:

TADS provides technical assistance to projects of the Handicapped Children's Early Education Program (HCEEP) in the U.S. Department of Education's Special Education Programs (SEP). In FY 1982-83, TADS serves 55 demonstration projects, 45 outreach projects, 13 State Implementation Grant (SIG) projects, and three early childhood research institutes.

TADS coordinates technical assistance services through a central staff located in Chapel Hill, North Carolina, and draws on a bank of consultants and other resources throughout the country to meet the needs of its client programs. TADS and each program's staff jointly assess that program's needs and agree on plans for services designed specifically to address those needs. Technical assistance services may address areas such as program planning, evaluation, curriculum development, services to children, parent involvement, staff development, demonstration and dissemination, continuation funding, and project administration.

TADS also provides various types of assistance to professionals and agencies and SEP programs other than HCEEP.

PRODUCTS AVAILABLE:

Over the past 12 years, TADS has developed many publications as part of its technical assistance services. A complete listing of books, monographs, bibliographies, and manuals is available from TADS.

Recent publications include: Planning for Dissemination (1983); Print (1983); Competency-Based Teacher Education (1983); C-BAM (1983); Mainstreaming in Early Education (1983); Affecting State Legislation for Handicapped Preschoolers (1983); Six State Collaborative Projects (1983); Analyzing Costs of Services (1982); Interagency Casebook (1982); Curricula for High-Risk and Handicapped Infants (1982); Strategies for Change (1982); Early Childhood Special Education Primer (1981); Planning for a Culturally Sensitive Program (1981); Gathering Information from Parents (1981); Special Education Mandate from Birth (1981); Serving Young Handicapped Children in Rural America (1980); Planning and Services for Young Handicapped American Indian and Alaska Native Children (1980); The Young Black Exceptional Child: Providing Programs and Services (1980); and Finding and Educating the High-Risk and Handicapped Infant (1980). TADS, with WESTAR, a former technical assistance agency, produced the 1978-79, 1979-80, 1980-81, and 1981-82 editions of the HCEEP Overview and Directory (TADS produced this year's edition); Program Strategies for Cultural Diversity: Proceedings of the 1980 HCEEP Minority Leadership Workshop (1980); Issues in Neonatal Care (1982); and The Health Care/Education Relationship (1982). TADS, with SEP, produced A Practical Guide to Institutionalizing Educational Innovations (1981). TADS also produced the videotape "Ideas on Change" (1982).

Project Listing

The Project Listing includes all 117 HCEEP projects funded by SEP during 1982-83. The projects are grouped by type (demonstration, outreach, State Implementation Grant, early childhood research institutes, technical assistance center) and listed alphabetically (according to state and city) within each group. The number assigned to each project indicates the page number on which the project's abstract appears in the Directory Section. These numbers also represent the projects in the Index.

PROJECT LISTING

DEMONSTRATION PROJECTS

1. PAGO PAGO, AMERICAN SAMOA
Samoa's Cooperative
Early Education Model
2. MESA, ARIZONA
Project ENRICH
3. TUCSON, ARIZONA
Project YAOUI
4. JONESBORO, ARKANSAS
Focus Classroom
5. LITTLE ROCK, ARKANSAS
Project DEEP
6. LOS ANGELES, CALIFORNIA
Pasadena Area Special Infant Toddler
Project
7. OAKLAND, CALIFORNIA
Intensive Care Nursery Interact Project
8. SAN FRANCISCO, CALIFORNIA
CEID
9. DENVER, COLORADO
The Playschool
10. WASHINGTON, D.C.
TIIP
11. ATLANTA, GEORGIA
UNIsensory Project
12. HONOLULU, HAWAII
Family Centered Care for Infants at
High Risk of Developmental Difficulties
13. CHICAGO, ILLINOIS
EIP
14. NORRIS CITY, ILLINOIS
RIEP
15. MARSHALLTOWN, IOWA
Project FINIS
16. LAWRENCE, KANSAS
Lawrence Early Education Program
17. PARSONS, KANSAS
The S-E-KAN Project
18. LEXINGTON, KENTUCKY
Infant/Parent Training and Early
Childhood Development Program
19. LOUISVILLE, KENTUCKY
Early Education Program for Children
with Down Syndrome
20. BOSTON, MASSACHUSETTS
Project Welcome
21. DEDHAM, MASSACHUSETTS
ERIN Bilingual Demonstration Program
22. WATERTOWN, MASSACHUSETTS
Perkins Infant-Toddler Program (0-3)
23. PHILADELPHIA, MISSISSIPPI
Handicapped Children's Early Education Program
24. PICAYUNE, MISSISSIPPI
Pearl River Infant Project
25. COLUMBIA, MISSOURI
Project LINC'S
26. MISSOULA, MONTANA
Big Sky Early Education Center
27. WEST ORANGE, NEW JERSEY
PEACH
28. SAN FELIPE, NEW MEXICO
PIPE Project
29. SANTA FE NEW MEXICO
New Vistas Program for Infants
with Special Needs
30. GARDEN CITY, NEW YORK
Project VIVA
31. NEW YORK, NEW YORK
Project ENFOCAR
32. NORTH MASSAPEQUA, NEW YORK
Early Childhood Intervention Program
33. DURHAM, NORTH CAROLINA
Project TAP
34. PAINESVILLE, OHIO
Branching Out
35. TOLEDO, OHIO
Preschool C.H.I.L.D.
36. CORVALLIS, OREGON
Linn-Benton-Old Mill School Project
37. EUGENE, OREGON
Early Intervention Program
38. PHILADELPHIA, PENNSYLVANIA
Least Restrictive Environment
for Handicapped Children
39. PITTSBURGH, PENNSYLVANIA
Learning Experiences
40. FOSTER, RHODE ISLAND
Severely Handicapped Communication
Program
41. PROVIDENCE, RHODE ISLAND
Project Child
42. LENOIR CITY, TENNESSEE
Little Tennessee Valley Education
Cooperative
43. NASHVILLE, TENNESSEE
Cognitive Education for Preschool
Handicapped Children

44. DENTON, TEXAS
Child Success Through Parent Training
 45. HOUSTON, TEXAS
Project TOTAL
 46. ST. CROIX, U.S. VIRGIN ISLANDS
Early Childhood Special Education Program
 47. LOGAN, UTAH
Social Integration Project
 48. OGDEN, UTAH
INSITE
 49. MIDDLEBURY, VERMONT
RIFE
 50. HAMPTON, VIRGINIA
CHIMM
 51. PETERSBURG, VIRGINIA
TIMMI Project
 52. MOSES LAKE, WASHINGTON
Umbrella for Families
 53. SEATTLE, WASHINGTON
Northwest Center Infant/Toddler Development Program
 54. SEATTLE, WASHINGTON
SEFAM
 55. MADISON, WISCONSIN
The Development of Active Decision Making by Parents
- OUTREACH PROJECTS
56. TUCSON, ARIZONA
Project First Chance Interactive Program
 57. LOS ANGELES, CALIFORNIA
UCLA Intervention Program
 58. ROHNERT PARK, CALIFORNIA
Project SPEED
 59. SAN FRANCISCO, CALIFORNIA
Project MORE
 60. BOULDER, COLORADO
INREAL/Outreach
 61. WASHINGTON, D.C.
Project UPSTART
 62. ATHENS, GEORGIA
Rutland Center Developmental Therapy Model
 63. MOSCOW, IDAHO
Idaho Outreach Project
 64. CHAMPAIGN, ILLINOIS
PEECH
 65. CHAMPAIGN, ILLINOIS
RAPYHT
 66. MACOMB, ILLINOIS
Macomb 0-3 Regional Project
 67. PEORIA, ILLINOIS
PEORIA 0-3 Outreach Project
 68. ROCKFORD, ILLINOIS
Project RHISE
 69. MURRAY, KENTUCKY
PEEEC
 70. NEW ORLEANS, LOUISIANA
The Louisiana Curriculum for Infants with Handicaps
 71. MACHIAS, MAINE
UCCP
 72. DEDHAM, MASSACHUSETTS
ERIN Outreach
 73. QUINCY, MASSACHUSETTS
Project OPTIMUS/Outreach
 74. YPSILANTI, MICHIGAN
HIGH/SCOPE First Chance Outreach Project
 75. JACKSON, MISSISSIPPI
Early Education Center Outreach Project
 76. OXFORD, MISSISSIPPI
Project RUN/Outreach
 77. MONTCLAIR, NEW JERSEY
CLIP
 78. ALBUQUERQUE, NEW MEXICO
Albuquerque Integration/Outreach Project
 79. YORKTOWN HEIGHTS, NEW YORK
A Regional Program for Preschool Handicapped Children
 80. CHAPEL HILL, NORTH CAROLINA
Chapel Hill Training-Outreach Project
 81. AKRON, OHIO
Project for Motor-Impaired Infants and their Families
 82. CINCINNATI, OHIO
IS/PT
 83. COLUMBUS, OHIO
Pediatric Education Project
 84. TULSA, OKLAHOMA
CIEEP
 85. MONMOUTH, OREGON
Teaching Research Infant and Child Center Data-Based Classroom
 86. PORTLAND, OREGON
Community Training Program for Teachers, Aides and Parents

- 87. READING, PENNSYLVANIA
FCRP
- 88. COLUMBIA, SOUTH CAROLINA
Project SCOOTER for Hearing-Impaired
Children
- 89. NASHVILLE, TENNESSE
OUTFIT Project
- 90. AUSTIN, TEXAS
ADAPT Project
- 91. DALLAS, TEXAS
Project KIDS
- 92. HOUSTON, TEXAS
Project Transition Outreach Services
- 93. LUBBOCK, TEXAS
DEBT Outreach Training Staff
- 94. LOGAN, UTAH
Multi-Agency Project for Preschoolers
- 95. LOGAN, UTAH
Project SKI*HI Outreach
- 96. LIGHTFOOT, VIRGINIA
CDR Outreach
- 97. SEATTLE, WASHINGTON
Model Preschool Center for
Handicapped Children
- 98. PORTAGE, WISCONSIN
The Portage Project
- 99. WAUWATOSA, WISCONSIN
Comprehensive Training Program for
Infants and Young Cerebral Palsied
Children
- 100. LARAMIE, WYOMING
Project WISP/Outreach

STATE IMPLEMENTATION GRANT PROJECTS

- 101. PHOENIX, ARIZONA
- 102. SACRAMENTO, CALIFORNIA
- 103. DENVER, COLORADO
- 104. HARTFORD, CONNECTICUT
- 105. BATON ROUGE, LOUISIANA
- 106. BALTIMORE, MARYLAND
- 107. TRENTON, NEW JERSEY
- 108. ALBANY, NEW YORK
- 109. PIERRE, SOUTH DAKOTA
- 110. NASEVILLE, TENNESSEE
- 111. SEATTLE, WASHINGTON
- 112. MADISON, WISCONSIN
- 113. LARAMIE, WYOMING

EARLY CHILDHOOD RESEARCH INSTITUTES

- 114. CHAPEL HILL, NORTH CAROLINA
CIREEH
- 116. PITTSBURGH, PENNSYLVANIA
Early Childhood Research Institute
- 118. LOGAN, UTAH
Early Intervention Research Institute

TECHNICAL ASSISTANCE CENTER

- 120. CHAPEL HILL, NORTH CAROLINA
TADS

Index

The Index serves as a key to specific demographic and operating information about the HCEEP demonstration, outreach, and State Implementation Grant projects. Identification numbers represent the projects as indicated in the Project Listing (immediately preceding this section). The numbers also indicate the page number on which each project's abstract appears in the Directory Section.

DEMONSTRATION PROJECTS

AGES OF CHILDREN SERVED

Birth to 24 months. 1-15, 17-20, 22, 24-25, 28-29, 32, 35, 37, 40, 42, 44, 48, 49, 51-55

25 to 60 months. 1-6, 8-11, 13-18, 22, 24, 26, 28, 29-37, 40, 42, 44-49, 52, 54, 55

61 to 96 months. 1-3, 5, 13, 19, 21, 24, 29, 34, 36-40, 43, 48, 54, 55

Over 96 months. 1, 34

HANDICAPPING CONDITIONS OF CHILDREN SERVED

Trainable mentally retarded. 2, 4-6, 13-17, 19, 21, 24, 26, 28, 29, 34, 37, 42, 45-47, 49, 51, 52, 54

Educable mentally retarded. 1-3, 6, 13-18, 21, 26, 28-29, 31, 33, 37-38, 42-43, 45-49, 51, 52, 54

Specific learning disabilities. 3, 5, 13, 14, 18, 30, 31, 33, 34

Deaf-blind. 8, 14, 18, 26, 48, 52

Deaf/hearing-impaired. 1, 4-6, 8, 11, 13-17, 24, 28, 34, 35, 42, 46, 51

Visually handicapped. 5, 13-16, 22, 28, 32, 36, 38, 42-43, 46, 48, 49, 52, 53

Seriously emotionally disturbed. 1, 3, 5, 9, 9, 13, 17, 24, 31, 38, 42, 43, 46, 52, 53

Speech-impaired. 1-3, 5, 6, 10, 13-18, 24, 26, 28, 31, 32, 34, 36, 37, 42, 43, 46, 47, 49, 51-53

Otherwise health-impaired. 5, 6, 10, 13, 15, 17, 18, 25, 26, 28-30, 34, 36, 37, 42, 43, 46, 49

Orthopedically impaired. 1, 4-6, 13-18, 24, 26, 29, 32, 34, 36, 40, 42, 43, 46, 48, 49, 53

At-risk. 1, 7, 10, 13, 15, 17, 20, 21, 24, 25, 28-30, 34, 36, 43, 44, 48, 52, 53

Multihandicapped. 1, 3-6, 8, 9, 11, 13-18, 21-22, 24-26, 28, 29, 31-34, 37, 40, 42, 44, 46-49, 51, 52, 54

Other. 13, 15-17, 24, 27, 29, 31, 34, 39, 43, 45, 47-49, 51-53, 55

PROJECTS WITH A MAJOR FOCUS ON SERVING ETHNIC/CULTURAL MINORITY GROUPS

Black. 6, 8, 10, 24, 31, 33, 46, 53

Hispanic. 6, 8, 21, 31, 46, 53

American Indian. 3, 28, 31

Asian American. 6, 8, 12

Other. 1, 6, 21

FISCAL AGENCIES

Local educational agency (LEA). 2, 16, 19, 32, 35, 38, 55

Regional or intermediate educational agency. 14-15, 27

State educational agency (SEA). 1, 24, 46, 48

Public agency (other than educational). 45, 51

Institution of higher education (nonmedical). 5, 17, 20, 25, 30, 33, 36, 37, 43, 44, 47, 54

Institution of higher education (medical). 9, 10, 39

Private nonprofit organization. 4, 6, 8, 11, 18, 21, 22, 28, 29, 31, 34, 40, 49, 52, 53

Health institution. 7, 12, 13

Other. 3, 26, 42

SERVICE DELIVERY SETTING

Home. 14, 25, 28, 41, 48

Center (not public school). 3, 15, 16, 18, 32-34, 37, 43, 45, 54

Home and center (not public school). 5, 6, 8, 9, 11, 17, 22, 24, 26, 29, 31, 35, 36, 40, 42, 44, 46, 49, 51-53

Public school. 4, 19, 21, 27, 30, 38

Home and public school. 1, 2, 39, 55

Hospital or health center. 12, 13, 20

Home and health center. 7, 10

Other. 47

INTEGRATION EXPERIENCES

Fully integrated in regular setting. 11, 21, 30, 33-36, 38, 39, 43, 47, 49, 53

Fully integrated in special setting. 16, 26, 37, 55

Some integration in special setting. 5, 6, 8, 22

Some integration in regular setting. 4, 9, 15

No integration. 2, 17, 40, 52

Not appropriate to project. 3, 7, 10, 12, 14, 20, 24, 25, 27, 29, 32, 42, 44, 51

Other. 1, 13, 18, 19, 31, 45, 46, 48, 54

PRIMARY TARGETS FOR INTERVENTION

The child. 16, 17, 21, 30, 32-35, 38, 40, 41, 47

Parent(s) and child. 1-14, 18, 19, 22, 24, 26-29, 31, 36, 37, 39, 42-45, 48, 49, 51-53, 55

Other. 15, 46, 54

PHILOSOPHICAL APPROACH

Experiential or traditional child-centered nursery school. 6, 24, 32, 36

Piagetian-specific. 10, 15, 25, 35, 53

Diagnostic-prescriptive. 1, 2, 5, 7, 12, 14, 19, 21, 22, 26, 28, 30, 31, 33, 38, 42, 44, 46, 51

Behavioral. 4, 13, 18, 27, 40, 45, 47

Other. 3, 8-9, 11, 16, 17, 20, 29, 34, 37, 39, 41, 43, 48, 49, 52, 54, 55

DEVELOPMENTAL FOCUS

Socio-emotional. 9, 13, 54

Cognitive-academic. 21, 33, 43

Sensorimotor. 25

Language/communication. 2, 4, 8, 11, 35, 37, 40, 45

All of the above. 1, 5, 6, 10, 12, 14-19, 22, 24, 26-32, 34, 36, 38, 39, 41, 44, 46-49, 51-53, 55

Other. 3, 7, 20, 42

CHILD ASSESSMENT MEASURES FOR PLANNING INSTRUCTION

Adaptive Performance Instrument. 15, 53

Alpern-Boll Developmental Profile. 14, 18, 32, 52

Assessment in Infancy: Ordinal Scales of Psychological Development. 12, 15, 17, 25, 42, 51, 53

Assessment of Premature Infant Behavior (APIB). 7, 20

Bayley Scales of Infant Development. 7, 10, 12, 14, 15, 24, 26, 31, 32, 38, 41, 42, 46, 49, 52, 53

Brazelton Neonatal Assessment Scales. 12, 20

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