The first of three volumes on the Rocky Mountain Regional Resource Center provides an overview of the Center's functioning from its inception in 1970 through 1974. A perspective is provided on regional resource centers (RRC) in general, including such aspects as the educational system's link to an RRC and the relationship of the RRC to the instructional process. Specifics of population, region, special educational services, philosophy and history are detailed for the Rocky Mountain RRC. The program is described with respect to the statistician (service/training) component; the Outreach Program; operational aspects of the joint programs; training, service, evaluation and communication components; synopses of Project Outreach in Idaho, Montana, Utah and Wyoming; program analysis; and program procedures and problems. Budget and staffing are considered. The above components are reported to have contributed to such accomplishments as the following: the development and field testing of the statistician model of a special education resource person to regular classroom teachers; development of a training program for state or district personnel to use in training the resource person; facilitation of regional services in a four-state region in priority areas identified by state leadership; and direct services to handicapped children and their teachers. (GW)
Final Report

Project No. 542930
Grant No. OEG-0-70-4178 (808)

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Rocky Mountain Regional Resource Center
Department of Special Education
University of Utah
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THE ROCKY MOUNTAIN REGIONAL RESOURCE CENTER: AN OVERVIEW
Volume I of III

November, 1974

U. S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

Office of Education
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The work reported herein was performed pursuant to a grant with the Office of Education, U. S. Department of Health, Education and Welfare. Contractors undertaking such projects under Government sponsorship are encouraged to express freely their professional judgment in the conduct of the project. Points of view or opinions stated do not, therefore, necessarily represent official Office of Education position or policy.

U.S. DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE

Office of Education
Bureau of Education for the Handicapped
The purpose of this report is to compile and document the history of the Rocky Mountain Regional Resource Center (RMRRC). The compilation is a limited analysis of the program, and seeks to isolate activities which provide information on the operation of regional centers serving handicapped children and special education. This compilation is the final report on the RMRRC's four-year history (1970-1974).

The narrative focuses on the concept of Regional Resource Centers (RRCs), and on the development and growth of the RMRRC specifically. The general special education needs, the educational system and the concepts of regionalization are discussed in broad terms.

There are many innovative special education programs scattered through the nation, and there are many, many dedicated special education teachers and administrators who are pioneering new ways to serve handicapped children and youth. It is not the intent of this paper to ignore the existence of such lead efforts nor to diminish the significance of the individuals who are now working on new approaches to special education. The emphasis, however, is on the overall milieu and on how a regional center can serve, and how the RMRRC did serve, as a meaningful resource to a region.

The materials in this report come from RMRRC reports, internal memoranda, and from other documentation on the RRC system. The internal documents will generally not be referenced; however, external documents will be referenced when appropriate. One exception is portions of Section I which were drawn from a working report on the University of Oregon's RRC. The work was never published by the Oregon center but was used as an informal discussion paper that received limited circulation. The work was expanded and documented by Adaptive Systems Corporation (ASC), San Mateo, California, and will be used freely in this document (Melichar, August, 1973).

This report includes analysis of major activities since the center's inception and includes the
implications indicated by this analysis for further activities. Any unevenness in results has not been minimized, but rather is seen as a stage in the development of an improved planning base for the future operations of the center. The analytic aspect is seen as an important ingredient in building improved methodology for the further development of regional services to handicapped children.

The RMRRC is indebted to Joseph F. Melichar, ASC, for his work in compiling information from RMRRC records and from reports by center staff members. Mr. Melichar also analyzed the activities performed, organized the contents, and prepared the first draft of the report. Through this extensive involvement by a third party, the RMRRC hopes this final report will provide balanced, objective information on the RRC system and on the Rocky Mountain Regional Resource Center.
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CHAPTER 1

THE REGIONAL RESOURCE CENTER: A PERSPECTIVE

The Rocky Mountain Regional Resource Center (RMRRC) has now completed four years of work directed at improving special education services for handicapped children. This report chronicles those four years. This first chapter seeks to put the center in perspective with the educational system of its region and with the Regional Resource Center (RRC) Network. The next chapter describes the development of the RMRRC, and subsequent chapters focus on the specific activities of the center. This chapter defines the context for those activities.

The Educational System Environment

The decade from 1964-1974 was one of rapid growth and development for educational programs for handicapped children. Yet many handicapped children still do not receive an appropriate education. More federal legislation was enacted during this period to promote educational opportunities for handicapped children than in education's entire history in this country. One law passed during this decade was a statute promoting the development of Regional Resource Centers for handicapped children. It is doubtful that the drafters of that legislation could have predicted the changes new laws would bring in special education and the important role regional resource centers would serve in facilitating appropriate evaluation and programming activities for handicapped children.

Recent actions in various state courts to assure the educational rights of exceptional children in areas where the educational system has been negligent emphasize the need for appropriate evaluation and programming. Courts, however, can only speak to the vindication of rights, and in areas such as education do not have the expertise to establish systems to vindicate these rights. Appropriate identification, assessment, programming and evaluation are essential ingredients for this vindication, and states are
receiving more and more pressure to provide these services to their handicapped children.

With the development of social and political changes, educators across the country became aware of a tremendous need to revitalize existing structures and attitudes on instructional methods and goals. As a part of this larger problem, there was an increased interest in the mildly handicapped student. Previously, many of these students were served only by special classrooms, but the need for alternative special placements to better meet individual needs appeared basic to appropriate programming.

Enhancing this viewpoint was concern that special education had never yet been able to adequately meet the needs of all children requiring special help. This inadequacy was attributed to many factors, including: a lack of trained personnel, inadequate or limited space, expense of operation compounded by the requirements of having to provide educational services within disability label confines, and of having to use the special class as the receptacle of children for whom the regular class was inadequate. This period of educational history could be characterized as a time of turmoil in which internal evaluation and external pressures created the basis for change.

Many educators concluded that both regular and special education were reacting, instead of acting, to fulfill the educational needs of children. As Dunn (1968) stated, "Failures are program and instructor failures, not pupil failures." (p.13). Education, in general, was caught in an administrative web which viewed children by labels rather than as individuals. During this period, education, by evolution, realized—as society had done many years earlier with institutions—that special classes were not the sole answer to educational problems.

Then a different approach began to develop in which both regular and special education jointly worked for a child’s educational needs. Special educators were to relinquish the attitude that they should be the sole providers of instructional programs for handicapped children. On the other hand, regular educators were to be more willing to restrict the use of special education so it did not become a "dumping ground" for children who do not fit the
mold of the regular-class student. A cooperative effort was to be undertaken in education and its related disciplines to insure that a more realistic and humane approach for teaching children would develop.

The outgrowth of the described condition was an effort to bring the handicapped child back into regular or "mainstream" education when appropriate. Education began to focus on the educational needs of the individual student and to avoid defining students by handicaps. New categories of educational deficiency, such as learning disabled, were defined to fit this perspective. Both special and regular education began to focus on children with less severe disabilities who often were needlessly termed handicapped.

This movement's extreme position was that all handicapped children, regardless of the severity of their handicap, could be served in the regular class. Various efforts were initiated in an attempt to implement this concept, and they met with varying degrees of success. Generally, however, the successes were less than spectacular. As these results were replicated, special education began to review the initial studies and the basic premises and arguments for the mainstreaming movement. The early studies suggested that the less severely involved child would be a good candidate for integration into the regular classroom, if the regular classroom teacher could be trained to work with the child's special needs, and if supplemental resource and instruction support were provided.

The argument behind this effort to integrate the students rested on the concept that the reintroduction of the child into the mainstream reduced the effect of the disability by easing the eventual adjustment to life, and on the idea that the integration insured the child his legal, equal educational opportunity. The educators supporting this concept also argued that the child in a special class received a poorer education than his peers in the regular classroom.

The controversy over the quality of education grew when it became compounded from studies on minority and low socioeconomic status (SES) groups; these studies indicated the effects of cultural deprivation
and/or cultural difference often resulted in special class placement of children. Low scores on culturally unfair intelligence tests often were interpreted as indicating educable mental retardation. It was argued that special class placement in many situations created unfair segregation of children from different cultures and backgrounds and was in direct violation of the children's civil rights.

In concept, these goals of equal educational opportunity are valid, justified, and necessary, but, in practice, there are considerable operational difficulties. A basic flaw in the argument for total integration is identical to the flaw that created the need that first led to mainstreaming. Handicapped children cannot be treated as a homogeneous group as their specialized learning problems must be treated individually. Differences exist between the needs, abilities, and potentials of those with various handicapping conditions and differing causative factors, as well as within groups with specific handicapping conditions from similar causative factors.

The educational response to each child must be made individually. There must be a response to the difference between causative factors, to the severity of the handicap, and to its effects on the adaptive behavior and functional ability of the individual child. Educationally, a difference exists between a child who, because of cultural factors or environmental deprivation, functions by society's norm as educable mentally retarded, and a child whose retardation is pathogenic. Similarly, a difference exists between the mentally retarded child and the learning disabled child.

As the mainstreaming effort gained momentum, the need for individualized programming became increasingly evident. There were some models available since the highly individualized type of educational programming that responds to a student's specific need was pioneered in special education. But, most programs had been isolated geographically to a particular school, district, or a university related program. Others had been either poorly conceptualized or inadequately operated. However, some trends had emerged from these programs, including:
1. A shift from categorical definitions to behavioral descriptions of the educationally handicapped student;

2. The increased usage of programmed and computer-based learning experiences;

3. A more intensive utilization of teaching theories and/or methodologies based on research related to the exceptional child;

4. An increased awareness of "avenues of learning" in the teaching-learning process;

5. A change of attitude toward the role of special educators (the current trend is in the direction of the clinical-teacher approach and as resource persons for regular educators rather than as a teacher in the traditional sense);

6. The emergence of diagnostic classes not concerned with labels, per se, but with behavioral descriptions of children;

7. An impetus in recruiting and training the paraprofessional as a part of an educational team;

8. The feeling that parent involvement in the educational process had been neglected and needed increased concern; and

9. An awareness that all teachers involved in the teaching-learning process needed to be more sensitive to the needs of all children.

As a result of these trends the National Advisory Committee on Handicapped Children recommended that a broader application of knowledge be provided (Kirk, 1969). It had become imperative that empirically documented teaching approaches be instituted to meet the curricular needs of all teachers of educationally handicapped students.

The problem emerged as one of not only providing teachers with basic information on a student, but with providing teachers with educational information that could be used for effective instruction of handicapped children—educational information that included specialized techniques, methods, and materials.
A second aspect of the problem involved diagnostic and evaluative procedures. Engelmann (1969) points out that slow learners classified on the basis of intelligence test scores are labelled and treated accordingly. The emphasis on test scores, and not on teacher-related information, seemed to be part of the larger problem in finding relevant programs for handicapped children. The problem became one of providing teachers with the knowledge necessary to accurately evaluate children educationally and to prescribe a program tailored to meet individual needs.

An additional national focus within the last few years also effected education. Under the leadership of Dr. Edwin W. Martin, Bureau of Education for the Handicapped (BEH), more attention began to be directed toward the needs of the more severely involved child. Efforts were to maintain gains (in terms of avoiding unnecessary labeling or special class placement), and to also meet the needs of the more severely handicapped child.

The preceding discussion outlines a perspective of the educational system into which the RMRRC emerged. These movements formed forces and constraints on the operation of the center which are reflected in its directions and its results.

The center was also constrained by BEH guidelines and operations as BEH sought to meet the needs of the educational community through the RRCs and other similar programs. The Bureau and the center were, like the field of special education, developing the skills and techniques to initiate, develop, and manage large-scale, directed programs. This ongoing, joint learning process was reflected in many changed directions, alterations of policy, and poor communications. This learning process also was a part of the center's history and is reflected in its development.

The Regional Resource Center Concept

The impetus of the preceding flow of events in education created some problems for the classroom teacher and some for the administrator who provided resource services to the teacher. Instruction was more individualized and responsive to the needs of
the handicapped children, with a particular focus on the provision of services where appropriate within the regular classroom. The focal point of this movement was the less severely involved child who became a nondifferentiated class member.

Educators were then faced with the difficulty of educational diagnosis and prescription for these less severely involved children. The movement to reduce categorization had introduced a group of children for whom educational diagnosis was more elaborate than for others in the classroom. The educational prescriptions were complex and required additional resources, materials, and resource personnel. The requirements for these resources varied with the children, the sophistication of the teacher, the available resources, the population density, and the structure of the educational systems.

Although the need for services existed, there generally were limited resources to respond to the need. A summary of needs facing education during this period is outlined in Table 1.1. As a partial answer to help meet these observed needs, BEH and Congress enacted legislation for the development of regionally based resource systems for teachers. The centers in this system were designed to improve the educational services to handicapped children through provision of diversified resource services, development of improved educational methods, and classroom teacher training. They were to be teacher-oriented, concentrating on reaching children through educational services.

Each RRC was designed to include three basic components: educational services, methodological research, and training. Each RRC was based in either a university or a state department of education with close university ties to take advantage of the university's faculty and training facility. Wherever housed, the centers were to be a cooperative venture between state agencies and universities to share and develop resources to better meet the needs of handicapped children in a given region. The centers' staffs were to build links to the educational community in the region. These links were to provide the avenues of interaction through which the RRC could provide its services to the educational community and to the handicapped child.
Table 1.1
A SUMMARY OF INITIATING NEEDS FOR THE RRC SYSTEM

There is a need to provide improved educational services to handicapped children by:

1. Providing diagnostic, curriculum development, evaluation, and media services to improve educational methods of the classroom teacher of the handicapped child;

2. Organizing and coordinating deployment of resource services within state and local educational programs to assist teachers;

3. Determining the kinds of resources needed by teachers and to identify skills and knowledge necessary to provide the needed resource services;

4. Shifting from a focus on problems of children to a focus on the problems of education, and to reinforce the position that the hope for handicapped children lies in effective teaching;

5. Developing a reduced dependence on handicapping labels by use of a diagnostic-prescriptive approach to teaching;

6. Including parents in the educational process and in providing better resource services to them;

7. Developing a better socioeconomic perspective of handicapping conditions in the educational process and in the design of educational programs;

8. Developing a better methodological basis for the planning, evaluation, and management of educational resources;

9. Developing a monitoring system to determine the needs of the educational system, parents, and handicapped children.
The RRCs were launched as an experimental program in 1969 to facilitate development of resources to provide a diagnostic-prescriptive approach to education that focused on the individual child and his developmental needs, not on the handicap and its limitations. Within a year six centers were funded on a one-year planning grant and/or contract with options for an operational grant or contract renewable yearly.

The first four RRCs were funded in 1969. These centers were located in New York, New York; Coralville, Iowa; Las Cruces, New Mexico; and Eugene, Oregon. In 1970 two additional RRCs were established: one in Harrisburg, Pennsylvania, and one in Salt Lake City, Utah—the Rocky Mountain Regional Resource Center (RMRRC), funded through the Department of Special Education, University of Utah. Expansion of the centers to other regions was delayed while the operation of the first six centers was analyzed and working concepts for the system developed.

A cooperative endeavor between the six RRCs was desired from the onset—an endeavor from which the establishment of a National Resource System for Handicapped Children could be formed. This system was seen by the RRC directors as parallel to the companion existing resource systems: Research and Development (R&D) Centers, Education Resources Information Center (ERIC), and the Special Education Instructional Materials Centers (SEIMCs), as depicted in Figure 1.1. The national resource network was not to duplicate existing services or materials, but was to serve as an interface to facilitate delivery of explicit information from any of these sources (including the RRCs) to a specific teacher with a problem. Information on available human resources was to be an integral part of this network and the direct responsibility of the RRC component, and was to include a listing of qualifications and locations of people with diagnostic or consultative skills, or with a specialized, educational background. When areas were identified where the available resources were insufficient to meet educational needs, or where they were nonexistent, the network was to stimulate development of these resources whenever possible.

This depicted system is still being formulated. The RRCs are presently being expanded throughout the
Parallel resource system, including:

- **R&D CENTERS**
  - ERIC/CEC
- **EDUCATIONAL LABORATORIES**
- **NATIONAL EDUCATIONAL RENEWAL CENTERS**
  - SEIMC's
- **FEDERAL AND STATE EDUCATIONAL PROGRAMS**
- **EARLY CHILDHOOD CENTERS**

---

### National Resource System for Handicapped Children

<table>
<thead>
<tr>
<th>National resource network</th>
<th>Regional resource center system</th>
<th>State resource system</th>
<th>Intermediate (and/or metropolitan) resource system</th>
<th>Local resource system</th>
<th>Teacher/Learner</th>
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<tr>
<td>Service</td>
<td>Information, acquisition, storage, dissemination</td>
<td>Information retrieval and dissemination (needs, programs, resources)</td>
<td>Field centered manpower development</td>
<td>Field centered manpower development</td>
<td>Field centered manpower development</td>
</tr>
<tr>
<td>Training</td>
<td>Program utilization, feasibility, implementation</td>
<td>Program utilization, feasibility, implementation</td>
<td>Personnel development</td>
<td>Personnel development</td>
<td>Personnel development</td>
</tr>
<tr>
<td>Research</td>
<td>Needs assessment, program evaluation, data bank development</td>
<td>Needs assessment, program evaluation, data bank development</td>
<td>Needs assessment, program evaluation</td>
<td>Needs assessment, program evaluation</td>
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### State Resource System for Handicapped Children

<table>
<thead>
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</tbody>
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**Target population**
- L.D, D.B.
- E.D, P.H.
- E.Y.R., T.M.R.

---

**Fig. 1.1**

INTEGRATION OF NATIONAL SYSTEMS

21
United States in redesigned regions that coincide with regions for the Area Learning Resource Centers (ALRCs) which are replacing the SEIMC network. The development of instructional materials for this system is envisioned to come from the National Center for Educational Media and Materials for the Handicapped (NCEMMH), which would link the research and development system and the classroom. Coordinating offices for both the ALRCs and RRCs will be established.

The BEH strategy for the evolution of the RRCs was developed because of the complex nature of a regional center. BEH originally considered two alternative strategies for operations of the RRCs: tight and restrictive guidelines based on a precise articulation of the concept, or minimal guidelines and articulation (Melichar, Vol: 6, 1972). The "minimal" alternative was selected in keeping with the experimental nature of the program, the regional and operational complexities of individual centers, and the need to make the concept attractive to potential grantees. It was hoped the less restrictive guidelines would create a greater range of center designs, and would allow the prospective sites more latitude in adopting the concept to their region.

In keeping with the theme of maximizing the design freedom of each prospective center, the guidelines developed did not provide a strong problem statement with defined needs and expected outcomes. The program statement and possible alternative strategies to link needs and desired outcomes into a center design were also weakly made, as was the plan for relating program strategies to operational procedures. The responsibility for each center's development of operational elements was left to its management and staff.

Individual centers functioned autonomously since a national coordinating office was not formed. This lack of system development and coordination placed important operating constraints on the centers because support services were not provided even though expectations for them were established and plans formulated.

Concurrently, with the slow evolution of the national system, the RRCs faced changes in federal leadership. Although project officers were changed, specific guidelines, except for general operations and submission of proposals, were never developed.
This lack of articulation of purpose of the centers, especially on an operational level, provided for considerable latitude in operation; hence, the centers responded with a range of directions. These directions were often redirected by BEH and resulted in some confusion and lost effort in the development of the individual centers.

The interaction between the information and instructional materials network never materialized except through individual efforts. The linkage between these systems and the RRCs was weak, as was the linkage to national R & D activities. These weaknesses were reflections of the lack of integration in the basic national plan. Accordingly, the centers operated in an autonomous mode, focusing on providing services to their regions with only minor interregional or national interactions.

The RRC as a Regional Agent

An RRC, a regional agent, acts as an external agent to the educational system, and interjects resource services into the educational process. The purpose of a regional center is to increase the effectiveness, quantity, and quality of the educational system. The resource services applied by a center are those services provided to, or in support of, the instructional unit exclusive of instructional materials through state departments of special education and through demonstration projects.

The educational process is an ongoing part of the social system—the process by which society transfers its knowledge, order, mores, and laws to succeeding generations. An RRC is specifically concerned with those children who, by the nature of some developmental deviancy, are exceptional (generally greater than a standard deviation from some population norm). A center serves as an advocate for these children under the above conditions, aiding them in entering the educational system and in extracting its maximum value. To accomplish this objective, a center continuously analyzes the operating educational system, the target population, and its services to determine how to improve the effectiveness of the educational process for the target segment of society.
On a simplistic level a center can alter effectiveness either by introducing a child into the educational process, or by altering the process. The introduction of a child into the process means that a suitable educational process is available and that the children of the targeted population are located. Once a child is in this system, the RRC's effort would be transferred to improvement of services. Within this context the center's basic program can be described as the identification and diagnosis of target children, the development of service programs for these children, and the improvement of existing programs.

The three basic functions attributed to an RRC can be found in LEAs and SEAs* and, in fact, in all educational service systems to some degree. The crucial factor in describing an RRC's function is the term "degree"; the center's role is that of an advocate attempting to alter the degree of service of society's educational channels. This definition stresses a facilitative or advocacy role with some minimal service role. A center seeks to mobilize and to maximize educational services such as increasing the degree of provision of service.

Special educational services are provided through a complex network of public and private agencies. The "services" are broad, varying in scope and disciplines and responding to the differing handicapping conditions and needs of the child. An RRC, attempting to effect educational change, has a wide range of intervention points to consider. The operational objective of an RRC is to determine which, and how many, of the intervention points to use and how to work with them so that the center's available resources are utilized most effectively to the maximum.

Interventions can be made through basic modes of information, services, resources, or a combination. For the purposes of this initial paper the basic modes are defined in the broadest terms. Information is the transfer of ideas, concepts, or knowledge through any medium (auditory, visual, or manual). Services are the provision of personnel or activities in support of the educational process. The term resources connotes the transfer of hard items, such as monies or materials. A review of these elements suggests that they are rarely independent and that most activities the center might undertake will

* Local Educational Agencies & State Educational Agencies
include all three elements. Also, one common denominator of the activities is the exchange medium of dollars. Allocation of resources to basic activities can then be analyzed by the basic resource variable against the intervention activities.

The Educational System's Link to an RRC

The preceding discussion defined a center as an external agent to the operating educational system with mandatory intervention points loosely defined by BEH. For an RRC to effectively function, the center must determine intervention points. This determination cannot be effectively made until a definition of the system is made and related to the RRC. Education will be defined as a broad concept that basically reflects the development of adaptive behaviors of a child with respect to his environment. Education, therefore, is a series of activities and operations performed with respect to the child to aid his development of adaptive behaviors relative to society; in effect, the socialization of the child.

The educational process is the continuous transference of stimuli and responses between the child and the environment that results in the development of behaviors through which the child can operate. These behaviors are defined as basic internal operational structures and learned behaviors or skills. The environment consists of physical and societal elements which define the constraints and conditions to which the child must react. Concurrently with this interaction, the child's natural maturation is occurring. The key factors in this analysis are the time dependence of the process and the heavy influence of the external environment—in fact, the dependence of the developmental process on the environment.

Traditionally, the process is defined as education, composed of formal and informal components. The formal component reflects the elements that society decides it must transmit to each generation to maintain the social order. This transmittal of information is undertaken in formal settings such as schools, guided by prescribed (legislated) curriculums. This formal process is an ordered presentation of content knowledge and procedures, which are predetermined elements of the social process.
Concomitantly, the child is undergoing another set of experiences in his other daily interactions with his environment. These experiences could be termed informal education since they do not represent any ordered approach or pedagogy. The informal routes have many areas in common with the formal system because the child is interacting with the environment which was reflected in the formal process. The consideration of the education of any child, therefore, is the consideration of both elements.

An RRC operates relative to this basic process. The process is represented in a schematic format in Figure 1.2. Society and the environment are depicted as a plane composed of an infinity of elements, including the social order, values, ethics, the physical environment, plus the educational services and the child and his family as subsets. The depicted process is time dependent, reflecting the child's growth and the change in society over time. Within this representation the paradigm depicts the formal and informal components of education.

The separation is critical to an RRC. As in the intervention strategies, the effect of the informal channel must be weighed. This statement also suggests that the effects of social forces must be considered, since they establish and constrain the educational services of special education. The term "special" indicates society responding to a perception in difference in the population, i.e., "handicapped," has defined a difference in service.

A center, therefore, has an interest in children who, by some social definition, are atypical or exceptional and require specialized educational services to improve their adaptive ability. These definitions of atypicality are most often legislated in state or federal laws supplying monies to operate educational services and/or an RRC. A center, in its operation, needs only to define these populations within the service region, the programs that serve the populations, and the additional, needed programs. This last statement is identical to the initial premise of the three major functions the RRC can perform relative to the educational service system.

The preceding discussion has reviewed the obvious common knowledge of all peoples interested
Fig. 1.2. PARADIGM OF THE GENERAL EDUCATIONAL PROCESS
in education, yet within these statements lie the main constraints on the design and operation of an RRC. The basic problem is to place the functions of an RRC into a format that is more suitable to an analytic or planning process without losing the relationships that form the system's framework. The selected approach is to model varying levels of this system as well as to form a global model from which implications for center design can be drawn.

The Relationship of the RRC to the Instructional Process

The discussed process operates as a system; the RRC responds to the system in its interventions. The system is a complex hierarchy growing out of a basic educational activity—the learning situation; the system pyramids in state departments of education, which are the regulatory arm for state-legislated education laws. The learning situation can alternatively be termed the instructional unit and has been schematically represented in Figure 1.3. Conditions in the model were defined as internal and external to the instructional unit. This model suggests that the teacher integrates and applies instructional objectives, through various media, materials, or approaches to a student or students under a set of conditions (internal). Figure 1.4 depicts state educational system hierarchy—which, though external, directly affects the instructional unit.

These simple paradigms indicate that even at the most basic level a closed educational system does not exist. The instructional unit and the learning situation are constrained by, and respond to, a wide range of forces. These forces form the organizational unit and social systems that surround and support the learning situation. An RRC, therefore, cannot simply react to this basic situation. Instead, it must consider its milieu and its interactions with the larger parts of the educational system. Consideration of the amount of available money with which an RRC must help effect change is another constraint.

The ultimate target of an RRC's services is the handicapped child in the context of the instructional process. This statement presumes (based on the legislative mandate) that the primary emphasis of an RRC is to intervene in the formal educational process.
Figure 1.3
AN INTEGRATIVE MODEL OF THE INSTRUCTIONAL UNIT
(Melichar, Vol. 10, December, 1972.)
Figure 1.4
THE STATE EDUCATIONAL SYSTEM HIERARCHY

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The formal process, constrained by the forces outlined earlier, is dominated by the SEA, although the actual instructional process is dominated by the teacher. To intervene in this process an RRC, therefore, must provide or facilitate provision of resources to teachers who, in turn, provides access to handicapped children. This provision and/or facilitation must go through the SEA.

Since an RRC is external to this system and to the instructional unit, the teacher must have some motivation to ask for the intervention. An RRC's services must reduce a need of teachers observed by the SEA without seriously adding to the SEA's or the teacher's work load. Since the role of intervention is not mandated, it exists by invitation. The legitimization of a Regional Resource Center's status in the educational system is achieved only by the continued acceptance of its services. This status sets the tone for the operational style of a service system such as an RRC relative to the instructional unit.

Within the instructional unit the intervention can focus on a range of factors that are defined in Figure 1.3 (which are categorized as: instructional objectives, approach, media, teacher implementation, and internal factors). The intervention can focus on any or all of the factors, depending on the intervention strategy. If the RRC's basic diagnostic-prescriptive approach were used, then, hypothetically, all of the factors would be considered. One difficulty exists in this conceptualization: the term "diagnostic-prescriptive" is explicit, but the actual application of the concept, in terms of procedures, is not well defined. The resource specialist, in order to serve the instructional unit, is required to select or devise an intervention strategy and procedures and supplement them with personal experience.

In considering all possible instructional situations and problems, it is unlikely that one person could effectively respond to all needs. The resource specialist, therefore, needs a resource pool. If the individual begins to draw heavily from the resource pool, then the specialist's role is altered from that of a classical consultant to that of an intermediary between the resource pool and the need. The resource specialist becomes a problem diagnostician, a link to the problem solution, an interpretive agent in the prescriptive process, and finally a follow-up agent.
The instructional unit in the educational hierarchy is the base for the LEA. This base is broad and varied according to need and societal expectations in a given district. A model illustrating the most common range of service delivery models from the special school to the regular school is depicted in Figure 1.5. In terms of the basic instructional unit model (Figure 1.3), the different delivery models create variations in the parameters that define the learning situation and that broaden the intervention modes with which the RRC must respond. In these more complex models the RRC also must begin to select intervention points to maximize the effects of its services relative to effort.

An intervention directly applied to the child would be expected to show the greatest behavioral change, but an intervention in the service system would affect more children with smaller changes. The trade-off between intervention points, therefore, is based on the estimate of which gain is the greatest. Although cost can be ascribed fairly easily, the benefit parameters are not so easily established. This process of allocation of center resources is the crux of planning; therefore, the establishment of benefit parameters is of major interest, but has not been extensively analyzed.

Concurrently, with an RRC’s allocation process, allocations are being made within the systems. The allocations alter the strength of the relationships between the components of the educational system. In combination, they form constraints for the RRC’s operation and for its allocation process. Again, as stated earlier, an RRC is dependent in its operation on the conditions imposed by both the structure and the operation of the educational system. If this dependence exists, then the selection of intervention points, strategies, and procedures is not a totally free choice.

For example, based on an LEA’s allocation, its educational system will be a mix of the services depicted in the model in Figure 1.5. The mix of special programs, services, and schools, with respect to regular schools, is a local decision constrained by federal, state, and local law and policy. The educational programming will also reflect the preferences of local educators, such as a greater use and integration of special classes in regular school.
The terms resources, services, and information are used in the broad contexts defined earlier in the paper.

"Expectations" is used to connote the transference of the social values and desires of society in the establishment of educational services.

Figure 1.5
A PROFILE OF AN LEA STRUCTURE AND ESTIMATE OF SYSTEM FLOWS
programs as opposed to a larger special school program. The intervention strategy selected by an RRC must reflect these factors. A unilateral decision by an RRC to provide services only to integrated classes would most likely require an alteration in the school structure, or a portion of the target population would not be served.

Within the above constraints an RRC, as a regional advocate, can select intervention points and types of interventions appropriate to their legislated mandate. The paradigm in Figure 1.5 indicates some of the major flows of resources, authority, services, and information within the local educational system. The RRC can intervene hypothetically at any point and can augment any flow to alter the change in the child via the educational process, including the timing and amount of augmentation. For all practical purposes there is an infinite choice of alternatives.

The farther removed the intervention is from the child, the more intervening variables are interposed and the harder it is to measure cause and effect (of the intervention). If, hypothetically, the center wanted to alter the mix of program types (Figure 1.5), whether for a child, groups of children, or all children, there would be little chance for success by an intervention at the single child level. Intervention would have to be made on a program or legislative level and might be achieved through provision of services, information, and/or resources. The center would select an entry point, implement a strategy, and then undertake to provide support for that change.

In summary, the intervention strategy outlined has included several major factors: a need for change, a plan, an implementation, and continuing support. The strategy is undertaken relative to the defined educational system which establishes the constraints on the potential alternative courses of selected action. The entire allocation and intervention strategy processes are generally approached informally and have lacked defined, supportive methodologies and procedures. This weakness has not only reduced the effectiveness of the allocation and intervention process, but has also hindered planning and reduced the effectiveness and impact of the centers.
An Integrated Model of Operation

In order to develop an integration of the preceding, outlined activities, a more global level has to be considered—one which reflects the entire educational operating system. The entire operating system includes the discussed educational subsystems, but on the global level the subsystems must be integrated into an operational unit that provides the educational services. A complete description of the entire system is prohibitively complex; hence, to simplify the presentation only major educational subsystems will be represented. The factors of interest in this type of representation are the relationships between the system's elements. The four selected relationships are resource, service, information flows (as per the earlier defined generic definitions) and control. Control is used to denote the concept of limitation or constraint on actions. These four types of relationships are interjected into a model of a global operating educational system depicted in Figure 1.5.

The model of the existing system (presented in Figure 1.6) would be termed a relational model as it shows the linkages which exist between the educational system components. The links between systems represent flows of resources, services, information, or authority. The result is a set of relationships between the elements of the system. To simplify the representation the links shown are the estimated, primary avenues; secondary channels and linkages exist, but will not be considered.

The model has obvious limitations. For example, the shown system approximates any real system. The generic definitions do not provide any differentiations in the relationships between different elements of the system (e.g., control does not have the same specific meaning in all contexts), and the potential interaction between the factors altering the relationships (e.g., resource flow has a permeating controlling element). These limitations can be reduced, but at the cost of a reduced overview. The remainder of this section will discuss the RRC system within the context of this model.

The control/authority pathways connote many different types of flows or relationships, with varying degrees of power and reaction time. Society's control through the political process is slow and
Fig. 1.6 A Model of the RRC Operational System
(Based on Melichar, August, 1973)
general in character. Response time and specificity increase in the smaller organizational units. A directive from a large unit, therefore, would pass through succeeding levels and gain specificity which may or may not necessarily reflect society's original intent.

The control/authority flow also is complicated by the fact that one element of the system may provide input to other elements and to the system at several levels. Society, therefore, provides inputs to Congress, state legislatures, and local school boards. At each succeeding level the input is from a smaller subset of society which may or may not reflect the input to the system from the larger units. The long process of school desegregation is an example of this process in which federal, state, and local mandates from society often differed greatly.

The amount and degree of directive control also varies between different state and local systems. The control links shown have different meanings between and within states. The application of the general model to any specific situation would require more precise definitions. There is also a fairly strong control function that can be ascribed to resource flow, i.e., the conditions under which resources will be granted and, to a lesser degree, the information and service flow provided to each subunit.

The model also reflects the concept that organizations are formed to carry out functions established by society. The component organizations may or may not carry out the directives, or they may interpret them. The interpretations and alterations may reflect interests that respond to the organizations' and/or individuals' needs more than to social directives. The interjection of personal motives or biases and "political considerations" is a real factor and non-ideal effects are introduced.

Each node in the graph of Figure 1.6 represents a transformation of an input flow to an output. The above concept of non-ideal additions could be considered in terms of the mathematical transfer-function model. A directive or flow would be operated on by a series of transformation functions. The functions would alter the flow over a rather potentially large range. The transformation functions at
each node would probably be different for each separate flow.

One of the most interesting and important aspects of the depicted system is the control factor. The RRC has no lines of control over any agency in the educational system. This factor is philosophically important because this nation has historically maintained that the education of its children must rest under local control. Only broad legislative guidelines are enacted to establish safeguards for a reasonable equality of educational services. These safeguards can be observed as control lines in the depicted system, but the regional center is not an element of this control system.

Operationally, this characteristic is an important constraint on the provision of services. Center operation is facilitative, not regulatory. Any service or resource offered to any educational agency or individual is accepted voluntarily. Conditions placed on the provision of that service often affect the acceptance of that service. Operational strategies must reflect this mode of operation, and coercive or directive management styles must give way to supportive approaches which encourage use of the center's services.

The above operational characteristic casts the center in a more important role—the role of advocate for the target population of handicapped children across all layers of the educational system. In this role the center can provide feedback to the educational system on how needs are being met, can pose remediative solutions, and can provide stop-gap resource services in limited cases. The center in this conceptualization is a resource to the formal structure, and is also an alternative pathway for service or remediation action with respect to defined needs.

The center's operational mode must be responsive and flexible, and must be able to cope with a less defined organizational structure. The less defined structure results from its external agent role, a role without reporting or control lines to provide guidelines. The center must forge this structure for itself. But with the breadth of its activity, the lack of directive control, and its advocacy role, it must devise and utilize a more sophisticated operating
Control of the center's operation is effectively accomplished through these procedures, which are developed via feedback loops from the operating educational system. The BEH control line must be limited unless its information about the region's operating system and needs is better than the center's. The BEH control role would appear to be more in the vein of general guidelines, general conceptualization of the regional center, monitoring of the center's activities to insure compliance with guidelines and performance specifications, and general administration. If the BEH control process attempts to exceed these boundaries, then conflict with the center's basic purpose for the educational agencies and targeted populations ensues.

The depicted educational system has sufficient gaps in control so that a directive and autocratic system cannot operate. Generally, overt directiveness from the larger organizational units will not achieve the desired ends unless the intermediate and small organizational structures are in basic agreement with the desired direction. Particularly, BEH and the regional centers are in this position, so the service they offer must fill a need or be sufficiently persuasive so that the educational system will utilize them as resources. Because the federal resources legislated to support these organizations are allocated to a target population in society—handicapped children—it, therefore, becomes a mandate to operate with the system constraints to achieve stated national priorities.

The control concept in the paradigm of the operational system has been used to connote a series of constraints or limitations on actions. Absolute control has been indicated as uncharacteristic of the system, and any operation undertaken relative to the system must accept this situation as a basic premise. Similarly, the number of alternative paths for any flow to a particular element is too great for restrictiveness to be an operational goal. For example, information is depicted as flowing within the system; however, new information can be introduced at any level and can simply be directed at a target group (such as professional journals). The RRC, in seeking to accomplish any objective, must then select path, element, and input flow in any intervention strategy.
Another interesting characteristic of the system is the alternative paths provided by special and private service agencies. The agencies range from advocacy to direct service functions and parallel the service format of the regional center. The RRC in its assessment of services to provide and in selection of strategies adds another dimension for consideration. The regional center should not provide services which these agencies provide, but rather should utilize these services in its master plan for services.

The discussion in this subsection is, in effect, considering a basic issue in the RRC concept, regionalism. The argument is not inherent in the legislation other than by default, as the term "regions" is not defined. The BEH guidelines used the term to define any geographic subarea of the United States from a major metropolitan area to a group of states. Initially, the argument resulted in the investiture of an RRC in a multi-state region instead of in a state government. The preceding discussion has suggested a multi-state system, since this issue is central to the development of the RMRRC. The following subsection will expand on the comments about operational characteristics and will reflect considerations of regionalism.

Comments on Regionalism

The outlined operational characteristics are, in essence, inherent elements of an argument for regionalism versus direct state or national programs. These points could be summarized by indicating that the regional center has the following advantages: (1) a flexibility of response and action; (2) a provision of alternative funding channels and the possibility of providing resources for a unification of existent activities; and (3) the ability to enter the educational system at any level. The constraint set effectively defines a responsive synthesizing agent for a region—a goal-directed advocate that can provide effective communication links between the various elements of the educational service system.

The overall educational service system as modeled in Figure 1.6 separates into two operational systems based on resource flow and authority. The separation comes between the regional level, with the regional system's federally supported super-structure,
and the state and locally financed and operated direct-service elements. This separation is the crucial element in arguments concerning regionalism, from the operational or philosophical viewpoint. The following arguments will revolve about the existing separation of authority and control within the system.

The primary link between the two systems is the flow of information and services between the regional, the state and local operations. The interface, therefore, is a voluntary one where cooperation governs performance; particularly, as the state and local group do not form a unit block. The operation of the center's service interface is not dependent on a single decision, but rather on a group of decisions from the region's individual state directors of special education and local unit needs. Two separate resource flows are required to initiate and to operate the system, which indicates that some cooperation must exist. The center must retain a flexible posture in terms of its responses to the interface situation in order to take advantage of existing avenues of cooperation and to foster new channels. The argument for regionalism centers on flexibility and a separation of powers inherent in our educational philosophy.

Another factor is economy of scale for specialized services and resource information. In each resource system a base resource unit to supply services and information must exist. There would be common elements in each resource unit, hence a potential for significant redundancy exists. A good design for a regional system, therefore, should illustrate economics by bridging inter- and intra-state needs with a common resource pool. The bridging would range from specialized diagnostic services for a specific handicapping condition or educational problem to planning and operating large-scale programs.

If a national system exists, i.e., a system in which exchanges of information and resource packages exist, then there is the question of system management, even in a decentralized mode. A state-centered system requires a monitoring and coordination of fifty efforts, a rather awesome task. Also, if a state-centered system is devised, then it would seem wasteful not to use the existing Elementary and Secondary Education Act (ESEA) channels. The concept of the legislated RRCs seems contrary to this approach.
It could be posed that states should band together for monitoring purposes, reducing the national integration and monitoring effort. If, in fact, this procedure is undertaken, then the formed consortium is a regional body. The consortium would not, however, have LEA representation and would represent SEA-centered interests, which are indirect-service oriented. To meet the legislated mandate--and to ultimately effect change--regional centers must be responsive to direct service needs.

Another factor is the flexibility of the regional center. It is not hampered by the red tape that often surrounds local and state bureaucracies, and this flexibility increases capability to provide needed services and to transfer knowledge, methods, and procedures between states and local areas. The regional center, in addition to possible operational efficiencies, can help to form a check-and-balance system, which is provided by the Constitution in the design of the federal government. A flexible third-party has been added to the existing system, which should increase the service flow to teachers, children, and parents.

The introduction of the third-party can put some pressure for educational reform on state and local educational agencies, since it provides an alternative resource. Although in many cases this added resource is not always necessary, it does respond to those cases in which needs are not being met. It would appear the interest in some states to control the RRC system is aimed at reducing the third-party alternative and at acquiring control of the federal monies to support existing programs. The service/resource needs through alternative channels should be included in the review of operational needs of regionalism that were suggested earlier.

This discussion of regionalism seeks to present the rationale consistent with the legislation to use in viewing the operational structure of the center. The assumption in this approach is that the BEH system is rational, responsive to educational needs, will adhere to the legislative intent, and will maintain a reasonably consistent posture. To approach a major system design on the basis of irrational and continuous policy change is undesirable. The approach of most regional centers has been to respond to the educational system and its needs within the bounds
of the legislation based on logic and rationalism.

The review of the regionalism concept suggests that a regional center must respond to the educational system needs in an advocacy model, but in a mode that provides for economy of scale. The center must be able to respond to any level of the educational system from the individual child to state or regional agencies' needs and to the modes of operation to foster cooperation. The center must protect and foster its third-party role as an important contribution to the educational system. A cooperative effort to exchange resource information with other regional centers must be undertaken.

Closing Comments

The preceding discussion sought to present a perspective of the evolution of the RRC system. The presentation's objective was to present the milieu in which the RMRRC evolved and the situational variables and parameters which affected its development. These parameters and variables are inherent to an RRC's operation and, in effect, constrain the range of activities for any center. The preceding discussion sought to present these relationships to form a perspective for the RMRRC discussion.

The RRC concept can be summarized by the following outline:

1. Handicapped children need improved services.

2. Educational services are mainly provided through teachers; therefore, by improving teachers' skills and teaching methods, services are improved, handicapped children receive a better education, and thereby can adapt better and lead fuller lives.

3. Parents are a second avenue through which services can be provided to the child and can augment an educational program for the child.

4. The RRC has a regional focus for increasing effective teaching through providing testing and educational evaluation services, developing educational programs as a function of defined needs, and providing educational services to schools.
5. The RRC has been developed as a program to test and to develop the resource concept, and to establish its potential for a large-scale implementation.

The constraints on its operation are summarized in Table 1.2 and the assumptions underlying each center's operation are presented in Table 1.3 (these Tables are based on Melichar, August, 1973.) The listings define the general framework of the centers. What is not defined is the effort required to translate these concepts into a center that provides services to the children of a region of the United States. The following chapters chronicle the transformation from concept to reality as undertaken by one center, the Rocky Mountain Regional Resource Center of the University of Utah.
Table 1.2

GENERAL FUNCTIONS, BASIC OPERATIONS, BASIC PREMISES AND CONSTRAINTS ON RRC OPERATION

General Functions
1. An RRC is an external agent with the objective of increasing quality, quantity, and effectiveness of the educational system.
2. The educational process is an ongoing part of the social system.
3. The center plays an advocate role for handicapped children.

Basic Operations
4. Screening and diagnosis of children is one basic operation.
5. One basic operation is to provide or arrange for provision of programs.
6. Improvement of the effectiveness of existing programs is one aim.
7. Interventions can be made through three basic modes: resources, services, or information.

Basic Premises
8. A social process is being considered with its inherent value structure.
9. The operation of the center program is done within the time frame of social process but is time dependent.
10. The elements of the social process produce informal education which must be reflected in the RRC planning.
11. The terms "special" and "exceptional" are relative terms defined by social value and mores.

System Constraints
12. The instructional process is constrained by and operates under the influence of a wide range of factors.
13. Delivery of educational services can occur through a range of different organizational formats within a state.
14. The educational system functions through a range of different organizations of varying breadth of scope.

15. Control of organizational functions and operations varies greatly within the system which requires RRC access. Procedure to obtain access to each organization varies.

16. Rigid control in the extended system is not a realistic goal.

17. The educational system is comprised of a wide range of alternative pathways between organizational elements.
Table 1.3
ASSUMPTION UNDERLYING OPERATION

1. Regionalization of services is desirable.

2. Provision of services via a center type model is cost effective, i.e., more services can be provided per unit cost.

3. There is a need to provide some direct services, but these services are of a demonstration type which can be translated to a broader service base.

4. The RRC will operate through existing state educational agencies.

5. The core of the RRC service process is the diagnostic-prescriptive model.

6. Improved services result in improved education and better adaptive behaviors of handicapped children.

7. The center is a resource for improved educational services.

8. Effective working ties to educational organizations can be provided by an external agent.

9. A managerial and technological base for a regional center type operation can be developed.
CHAPTER 2

THE ROCKY MOUNTAIN REGIONAL RESOURCE CENTER

During the late 1960's members of the Department of Special Education, University of Utah, and of the Utah State Board of Education (USBE) were discussing ways to provide better educational services to handicapped and nonhandicapped children in Utah. The goal was to find a method to use in cooperatively solving problems of mutual concern. The method was one in which each child would be reviewed individually and her/his education tailored to fit particular needs. The Utah educational community was particularly concerned about developing the resource potential to carry out individualized education.

In 1969 the University of Utah submitted a proposal to BEH for the support of a Regional Resource Center, and was awarded a grant in June of 1970. The basic philosophy of the Utah educational community was transferred to the new RRC, forming the foundation for future work. This foundation was a critical element of the center's development because definitive operational guidelines for the operation of the newly funded RRCs were not formulated by BEH. The Rocky Mountain Regional Resource Center (RMRRC) sought to transform the initial intent of the Utah educational community into the broad framework of a regional center provided in the legislation and in the application guidelines.

The basic framework evolved about the general RRC model developed from the legislation, and guided the early organization of the center's activities. Within the confines of this general model, which all RRCs generally followed, the RMRRC sought to develop and to maintain a set of consistent guidelines. Of the developed guidelines the following have remained consistent throughout the RMRRC's grant:

To respond to states' and districts' needs that fall within the RRC mandate, and to avoid imposing plans upon SEAs or LEAs, for they, not the RRC, have the legal responsibility to educate the handicapped children in each state;
To investigate the affective domain; to try to identify teacher personality characteristics that make teachers effective/ineffective with handicapped children;

To serve children without labeling wherever possible;

To recognize that special educators should assume leadership in seeing that all children are served;

To cooperate wherever possible with other RRCs, Special Education Instructional Materials Centers (SEIMCs), and other agencies in the region charged with serving handicapped children;

To provide opportunities for professional growth in staff members wherever possible: workshop attendance, site visits, classes, planning and presentation responsibilities, dissemination of working papers.

Initial Concerns

Within the above guidelines the RMRRC is designed as a vehicle to develop new methods and procedures to assist teachers in providing better educational services to exceptional children. The RMRRC became engaged in determining (1) what problems were encountered by teachers, schools, districts and states in attempting to provide educational services to exceptional children; (2) what was currently being accomplished toward identifying and meeting educational needs; and (3) what problems were associated with existing services and/or approaches that prevent the provision of an adequate educational program for the exceptional child in both regular and special education programs.

In an effort to ascertain and to understand the nature of these problems, the RMRRC initially tried to define the parameters (affect, placement and teacher resource) which encompassed the problems; this was accomplished through cooperation with schools and state agencies, and also through direct interventions in selected schools. These approaches were productive and provided preliminary information which was used to guide the center in developing future avenues of investigation.
It was apparent that the development of educational-service delivery models had to be undertaken in a broad context to respond to the complexity of the task. The strategy of the center, to gain this breadth, was to engage in the development of inservice and pre-service training packages and of a regional resource system from data collected through (1) direct interventions in classrooms; through (2) investigation of the ecological ramifications in schools; and from (3) provision of information on ongoing programs in the state and region. These inservice and pre-service training packages were utilized to provide teachers, supervisors, ancillary and administrative personnel with appropriate teaching strategies (models) to assist them in better meeting the needs of exceptional children.

This task required that the RMRRC operate in a broad spectrum. The defined need was for more than just a repackaging of old approaches. It called for a reconceptualization of educational approaches, their development into practical methods, and their application to upgrade educational delivery systems and teaching strategies. In order to respond to this change, new packages had to be developed based on an understanding of child psychology, human development and learning, on an understanding of the ecological components of an area, and on ways to present the material in the most effective, nonthreatening way to school personnel.

In order for the RMRRC to efficiently and effectively carry out its plans, the center undertook a thorough analysis of student-teacher interactions and processes and conducted a concurrent, comprehensive investigation of the ecological determinants within and surrounding schools. The center felt that a total impact on educational problems could only be made when the unique interactions of each principal component of the educational situation was fully understood and appropriately fused into the packages for inservice and pre-service training programs and for resource support systems. To meet the developmental needs, the center sought to mold the research base and knowledge of the university staff with the pragmatic needs of the educational community.

Philosophically, the center has remained consistent in its concerns (from the initial proposal to date) such as better serving more handicapped children, avoiding labeling wherever possible, and utilizing school and
district resources to meet individual needs. The RMRRC initially sought to build a data base for the first packaged materials and to build the foundation for a regional outreach thrust as it was requested by the surrounding states. This carefully measured base was the foundation for the broad range of activities to be discussed in this report.

The Target Population and the Region

The Rocky Mountain Regional Resource Center has provided services to Utah, Idaho, Montana, and Wyoming. These states are composed of geographically isolated urban and rural school districts. Due to the nature of the region, many unique problems are manifested in the states' educational systems (i.e., lack of nearby referral agencies, isolation from institutions of higher learning, inadequate inservice training and supervision, limited financial resources, lack of trained personnel, low incidence in a given area, geographic barriers, etc.). These problems historically have hindered the delivery of educational services to the exceptional child. As a result, services have been limited. A demographic map of the region is presented in Figure 2.1, and a general profile of socioeconomic status (SES) and socioeconomic educational services is presented in Table 2.1.

Within this geographically dispersed population are a variety of subcultures isolated by distance. Compounding the cultural and population variations are wide SES differences. In many sections of the RMRRC region these factors intermesh, such as in the multilanguage areas with people of Spanish, Indian, and Anglo-Saxon heritages. A number of the educationally handicapped children and youth in this region come from the existing minority groups of the isolated communities and school districts.

The data in Table 2.1 present a general overview of which further specific characteristics of the region can be defined. These specific characteristics are summarized in the following outline:

The region is sparsely populated with a four-state average of 8 people per square mile (range 4 to 14).

The sparseness of the population is enhanced because a large percentage of the population is in rural areas (range 55.1 to 80.8 percent). The effect of urbanization in the population density
Figure 2.1

Demographic Profile of the Region
### Table 2.1
Educational and Socioeconomic Status Data by State within the Region

<table>
<thead>
<tr>
<th></th>
<th>Idaho</th>
<th>Montana</th>
<th>Utah</th>
<th>Wyoming</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population total 1964</td>
<td>*</td>
<td>668</td>
<td>702</td>
<td>973</td>
<td>338</td>
</tr>
<tr>
<td>1971</td>
<td>*</td>
<td>737</td>
<td>710</td>
<td>1095</td>
<td>339</td>
</tr>
<tr>
<td>Urban population 1964</td>
<td>*</td>
<td>317</td>
<td>338</td>
<td>667</td>
<td>188</td>
</tr>
<tr>
<td>1971</td>
<td>*</td>
<td>55.1</td>
<td>53.4</td>
<td>80.8</td>
<td>62.2</td>
</tr>
<tr>
<td>Nonwhite pop. 1964</td>
<td>*</td>
<td>1.5</td>
<td>24</td>
<td>17</td>
<td>7</td>
</tr>
<tr>
<td>1970</td>
<td>*</td>
<td>0.3</td>
<td>0.3</td>
<td>0.6</td>
<td>0.8</td>
</tr>
<tr>
<td>Black pop. 1970</td>
<td>*</td>
<td>78</td>
<td>81</td>
<td>128</td>
<td>38</td>
</tr>
<tr>
<td>Population under age 5 1964</td>
<td>*</td>
<td>196</td>
<td>195</td>
<td>294</td>
<td>93</td>
</tr>
<tr>
<td>Population school age (5-17) 1964</td>
<td>*</td>
<td>194</td>
<td>190</td>
<td>307</td>
<td>90</td>
</tr>
<tr>
<td>Estimated school age population (5-17) 1972</td>
<td>*</td>
<td>194</td>
<td>190</td>
<td>307</td>
<td>90</td>
</tr>
<tr>
<td>Birth rate 1971 (no. of live births per 1,000 pop.)</td>
<td></td>
<td>19.1</td>
<td>17.2</td>
<td>25.8</td>
<td>17.4</td>
</tr>
<tr>
<td>Estimated number of infant deaths 1971 (per 1,000 live births)</td>
<td></td>
<td>16.6</td>
<td>20.7</td>
<td>14.1</td>
<td>21.1</td>
</tr>
<tr>
<td>Deaths under age one 1964 (per 1,000 live births)</td>
<td></td>
<td>22.2</td>
<td>26.6</td>
<td>20.0</td>
<td>29.0</td>
</tr>
<tr>
<td>Death rate children under 21 1964 (per 10,000)</td>
<td></td>
<td>31</td>
<td>45</td>
<td>49</td>
<td>33</td>
</tr>
<tr>
<td>Estimate population (5-13) 1970</td>
<td>*</td>
<td>145</td>
<td>144</td>
<td>237</td>
<td>69</td>
</tr>
<tr>
<td>(14-17) 1970</td>
<td>*</td>
<td>62</td>
<td>60</td>
<td>99</td>
<td>29</td>
</tr>
<tr>
<td>(18-21) 1970</td>
<td>*</td>
<td>52</td>
<td>52</td>
<td>83</td>
<td>25</td>
</tr>
</tbody>
</table>

*Numbers in thousands*
Table 2.1 continued

<table>
<thead>
<tr>
<th>Idaho</th>
<th>Montana</th>
<th>Utah</th>
<th>Wyoming</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>5</td>
<td>14</td>
<td>4</td>
<td>59</td>
</tr>
<tr>
<td>173.7</td>
<td>166.7</td>
<td>286.4</td>
<td>86.3</td>
<td></td>
</tr>
<tr>
<td>182</td>
<td>176</td>
<td>304</td>
<td>86.9</td>
<td></td>
</tr>
<tr>
<td>185</td>
<td>172</td>
<td>305</td>
<td>86</td>
<td></td>
</tr>
<tr>
<td>92.2</td>
<td>109.3</td>
<td>166.3</td>
<td>49.9</td>
<td></td>
</tr>
<tr>
<td>92.8</td>
<td>107</td>
<td>165</td>
<td>46.5</td>
<td></td>
</tr>
<tr>
<td>81.5</td>
<td>57.5</td>
<td>120.1</td>
<td>36.4</td>
<td></td>
</tr>
<tr>
<td>89.5</td>
<td>69</td>
<td>139</td>
<td>40.4</td>
<td></td>
</tr>
<tr>
<td>95.2</td>
<td>90.6</td>
<td>99.3</td>
<td>95.6</td>
<td>88.6</td>
</tr>
<tr>
<td>177</td>
<td>160</td>
<td>288</td>
<td>81</td>
<td>42,277</td>
</tr>
<tr>
<td>NA</td>
<td>88.6</td>
<td>99.2</td>
<td>94.8</td>
<td>87.4</td>
</tr>
<tr>
<td>51.7</td>
<td>37.5</td>
<td>62.4</td>
<td>44.8</td>
<td>46.9</td>
</tr>
<tr>
<td>23.9</td>
<td>21.8</td>
<td>26.5</td>
<td>20.3</td>
<td></td>
</tr>
<tr>
<td>22.7</td>
<td>21.0</td>
<td>26.8</td>
<td>19.0</td>
<td>22.3</td>
</tr>
<tr>
<td>24.5</td>
<td>21.3</td>
<td>28.3</td>
<td>20.1</td>
<td>24.3</td>
</tr>
<tr>
<td>21.0</td>
<td>20.6</td>
<td>25.2</td>
<td>17.9</td>
<td>19.8</td>
</tr>
<tr>
<td>7,621</td>
<td>8,514</td>
<td>8,850</td>
<td>9,611</td>
<td>10,211</td>
</tr>
</tbody>
</table>

*Numbers in thousands.
Table 2.1 continued

<table>
<thead>
<tr>
<th></th>
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<th>Montana</th>
<th>Utah</th>
<th>Wyoming</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population 25 and older with less than five years schooling 1970</td>
<td>%</td>
<td></td>
<td></td>
<td></td>
<td>5.5</td>
</tr>
<tr>
<td>Population 25 and older with less than one year high school 1970</td>
<td>%</td>
<td></td>
<td></td>
<td></td>
<td>28.3</td>
</tr>
<tr>
<td>Median years of schooling completed by population 25 and older 1970</td>
<td>years</td>
<td></td>
<td></td>
<td></td>
<td>12.1</td>
</tr>
<tr>
<td>Draftees failing mental requirements for military service 1971</td>
<td>%</td>
<td></td>
<td></td>
<td></td>
<td>12.4</td>
</tr>
<tr>
<td>1966</td>
<td>%</td>
<td></td>
<td></td>
<td></td>
<td>7.8</td>
</tr>
<tr>
<td>1959</td>
<td>%</td>
<td></td>
<td></td>
<td></td>
<td>24.7</td>
</tr>
<tr>
<td>Number of school districts 1969</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>157</td>
</tr>
<tr>
<td>Per capita Income 1964</td>
<td>$</td>
<td></td>
<td></td>
<td></td>
<td>2,441.</td>
</tr>
<tr>
<td>Educational expenditure per capita Income 1964</td>
<td>%</td>
<td></td>
<td></td>
<td></td>
<td>7.3</td>
</tr>
<tr>
<td>Educational expenditures personal income 1969</td>
<td>%</td>
<td></td>
<td></td>
<td></td>
<td>6.9</td>
</tr>
<tr>
<td>Personal income per capita 1971</td>
<td>$</td>
<td></td>
<td></td>
<td></td>
<td>4,156.</td>
</tr>
<tr>
<td>Personal income per pupil in average daily attendance 1971</td>
<td>$</td>
<td></td>
<td></td>
<td></td>
<td>20,208.</td>
</tr>
<tr>
<td>Expenditure per pupil ADA 1970-71</td>
<td>$</td>
<td></td>
<td></td>
<td></td>
<td>970</td>
</tr>
<tr>
<td>Estimated expenditure per pupil ADA 1971-72</td>
<td>$</td>
<td></td>
<td></td>
<td></td>
<td>970</td>
</tr>
<tr>
<td>State expenditures per capita 1971 all education</td>
<td>$</td>
<td></td>
<td></td>
<td></td>
<td>171</td>
</tr>
</tbody>
</table>
Table 2.1 continued

<table>
<thead>
<tr>
<th></th>
<th>Idaho</th>
<th>Montana</th>
<th>Utah</th>
<th>Wyoming</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>State and local expenditures per capita 1970-71</td>
<td>$157</td>
<td>$201</td>
<td>$190</td>
<td>$260</td>
<td>$202</td>
</tr>
<tr>
<td>State direct expenditures for public welfare as % of all state education 1971</td>
<td>46.3</td>
<td>44.5</td>
<td>39.9</td>
<td>27.8</td>
<td>66.6</td>
</tr>
<tr>
<td>Children receiving child welfare services 1964</td>
<td>*965</td>
<td>1,389</td>
<td>2,209</td>
<td>492</td>
<td></td>
</tr>
<tr>
<td>Aid to families of dependent children 1964</td>
<td>* 10</td>
<td>7</td>
<td>3</td>
<td>22</td>
<td></td>
</tr>
<tr>
<td>Farm income (cash receipts) in millions 1971</td>
<td>690.1</td>
<td>568.6</td>
<td>231.1</td>
<td>239.3</td>
<td>51,632.8</td>
</tr>
<tr>
<td>Median household effective buying income 1971</td>
<td>$7,127</td>
<td>7,496</td>
<td>7,811</td>
<td>7,371</td>
<td>8,463</td>
</tr>
<tr>
<td>Households with cash incomes of $5,000 or less 1971</td>
<td>%32.1</td>
<td>31.7</td>
<td>25.0</td>
<td>30.4</td>
<td>26.4</td>
</tr>
<tr>
<td>Households with cash incomes over $10,000 1971</td>
<td>%26.3</td>
<td>30.5</td>
<td>30.2</td>
<td>28.4</td>
<td>38.7</td>
</tr>
<tr>
<td>Total general revenue of all state and local governments per capita 1970-71</td>
<td>$649.</td>
<td>743.</td>
<td>685.</td>
<td>961.</td>
<td>703.</td>
</tr>
<tr>
<td>Public school revenue receipts per pupil in ADA 1971-72</td>
<td>$841.</td>
<td>977.</td>
<td>865.</td>
<td>1,125.</td>
<td>1,140.</td>
</tr>
<tr>
<td>Public school revenue receipts as % of personal income 1971-72</td>
<td>%5.9</td>
<td>6.2</td>
<td>6.6</td>
<td>7.0</td>
<td>5.6</td>
</tr>
</tbody>
</table>

*Numbers in thousands
is probably the greatest in Utah where 80.8 percent of the population lives in an urban area.

There is a high percentage of non-white people—Indians and Chicanos—in Montana and Utah, but in all four states the population of blacks is very low (0.3 to 0.8 percent, compared to a national average of 11.1 percent).

The population growth in the last decade has been approximately 10 percent in each state, but elementary school enrollments and total school enrollments have remained relatively stable.

The median educational attainment of adults (years of schooling) is above the national average in all four states (range 12.3 to 12.5 years, versus a 12.1 year national average) with the percentage of draftees failing mental requirements for military service being between 20 and 35 percent of the national average.

The personal and per capita income tends to be lower than the national average and the expenditures per unit of average daily attendance (ADA) lower than the national average, but in terms of expenditures as a percentage of per capita income the region is above the national average.

Teacher's salaries are below the national average, but parallel the lower general levels of personal income in the region.

The region produces about 3 percent of the national farm income.

The expenditures on welfare in relation to education are significantly lower in the region than the national average (27.8 to 46.3 percent in the region versus a national average of 66.6 percent).

The general lower expenditure level has to be weighed against general lower income levels, but also against a generally lower cost base for the rural (versus urban) character of the region.

The initial focus of the center was directed toward two sociocultural areas in Utah. The two target populations were used in pilot projects that possessed general characteristics of the entire region. It was felt that by beginning within a limited area of the
state of Utah that it would facilitate communication and access to the pilot program. The pilot "areas" were used as exemplary demonstration programs for the region. They include:

(1) Rural, three school districts located in rural areas of the state of Utah;

(2) Urban, two school districts located in urban areas of the state of Utah.

The primary target of RMRRC activities was handicapped children (K-6). Administrative categories (i.e., mentally retarded, emotionally disturbed, etc.) were avoided in educational programming in describing the subject population. Through the use of the broader term, educationally handicapped, it was hoped that the more generic approach to education would be taken relative to commonalities, teaching strategies, and curricular implications of specific categories of exceptionality.

Although the use of categorical labels was avoided in educational programming, common handicapping descriptors were used to insure that the handicapped children received the services mandated by the RRC legislation. Within the legislative constraints the center's target population was mentally retarded, emotionally disturbed, crippled or other health impaired, learning disabled, visually or hearing impaired, or multiply handicapped. The center initially focused on the less involved child, and then shifted its emphasis to include the severely involved child. In effect, all children who met the special education requirements of exceptionality in a given state were potential recipients of RMRRC service.

Classroom teachers in the public schools were the primary professional group served by the center. Both teachers of "special" and "regular" classes were recipients of direct help. It was felt that both groups needed additional understanding and instructional strategies for educationally handicapped children and youth. Providing training and support to these teachers for educational programs and behavioral changes was emphasized.

The second major professional group served was administrative and supervisory personnel in the school districts. This group was singularly important because it provided a vehicle for general implementation. The support of this group for RMRRC activities facilitated
and enhanced the concept of instructional programs for the educationally handicapped child in "regular" or "special" classrooms.

Auxiliary personnel such as school psychologists, social workers, remedial reading teachers, and counselors constituted the third major group to receive center support. It was of utmost importance that this group's goals and objectives be directly related to the center's intentions for educational programming.

Teacher aides and other paraprofessionals were considered to be legitimately included. This group was an important adjunct to the teacher in promoting the effectiveness of the instructional process in the classroom.

The fifth major group was comprised of undergraduate and graduate students in the behavioral sciences and special education. This group received instruction, training, and practical experiences related to the center's functions and goals. The students involved participated in training and observation, data collection, data analysis, student evaluation, prescriptive programming, and field implementation. This experience was a valuable addition to those students preparing for special education careers.

The provision of services to the five groups above was to reach the primary target population--children. The concept, therefore, suggested a strong emphasis on the child-teacher as a single unit. It was assumed improvement of teacher performance implied an improvement in the child's educational opportunity. This relationship will be explored more deeply in later discussions of the center's philosophy and direction.

A Description of Special Education in the Region

An estimate of the region's handicapped children population was developed using census data and applying incidence figures. A sampling technique was piloted in two states, Idaho and Utah, to verify by actual tallies the handicapped children. Specifically, the number of handicapped children* in the region were:

*Handicapped children include all categories except learning disabled. The figures reflect services for speech-impaired children.
Actually identified

<table>
<thead>
<tr>
<th>IDAHO</th>
<th>MONTANA</th>
<th>UTAH</th>
<th>WYOMING</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>11,867</td>
<td>5,270</td>
<td>22,509</td>
<td>9,063</td>
<td>48,709</td>
</tr>
</tbody>
</table>

Based on expected incidence figures*

<table>
<thead>
<tr>
<th>IDAHO</th>
<th>MONTANA</th>
<th>UTAH</th>
<th>WYOMING</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>22,380</td>
<td>32,000</td>
<td>45,360</td>
<td>9,058</td>
<td>109,598</td>
</tr>
</tbody>
</table>

The estimated number of children in the region by handicapping condition is presented in Table 2.2.

The number of these children being served by formal educational programs was determined to be as follows: (a more detailed breakdown is presented in Table 2.3):

<table>
<thead>
<tr>
<th>IDAHO</th>
<th>MONTANA</th>
<th>UTAH</th>
<th>WYOMING</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>6,694</td>
<td>4,358</td>
<td>20,009</td>
<td>9,036</td>
<td>39,997</td>
</tr>
</tbody>
</table>

Enrolled in regular public schools

Received special education services

9,747 | 4,760 | 22,509 | 5,942 | 42,958 |

The provision of educational services to these children varied in each state. Profiles, by states, of available services in addition to public school programs are presented in Tables 2.4 through 2.7. These services, when combined with RMRRC service, define the additional resources available to handicapped children in the region.

The RMRRC, by request of BEH, developed activities initially for Utah. The milieu in which these activities developed was greatly affected by the 1969 state legislative enactment of mandatory legislation to insure that equal educational opportunity was provided to all children, and specifically, to handicapped children.

*The expected incidence figures were projected by using 12% of the total school-aged population reported by each state.
TABLE 2.2
SCHOOL-AGED HANDICAPPED CHILDREN INCIDENCE IN RMRRC REGION
ACADEMIC YEAR 1972-1973

<table>
<thead>
<tr>
<th></th>
<th>PMR</th>
<th>TMR</th>
<th>EMR</th>
<th>VISUALLY HANDICAPPED</th>
<th>HEARING IMPAIRED</th>
<th>CRIPPLED</th>
<th>SERIOUSLY EMOTIONALLY DISTURBED</th>
<th>MULTIPLE HANDICAPPED</th>
<th>TOTALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>In programs</td>
<td>703</td>
<td>2895</td>
<td>7,326</td>
<td>544</td>
<td>846</td>
<td>483</td>
<td>3,414</td>
<td>202</td>
<td>16,413</td>
</tr>
<tr>
<td>Projected</td>
<td>nf</td>
<td>2594*</td>
<td>17,296*</td>
<td>864*</td>
<td>4972*</td>
<td>4324*</td>
<td>17,296*</td>
<td>518*</td>
<td>47,864*</td>
</tr>
<tr>
<td></td>
<td>nf</td>
<td>2728°</td>
<td>26,093°</td>
<td>1666°</td>
<td>5301°</td>
<td>2796°</td>
<td>23,458°</td>
<td></td>
<td>62,042°</td>
</tr>
</tbody>
</table>

* denotes combined USOE incidence estimates based on the states' total school-aged population.
° denotes the combined estimates used by states which may or may not agree with USOE estimates.
nf = no figures

NOTE: The total in programs for the region is 34% of the USOE estimate and 26% of the combined states' estimate.

Spring 1973
### Table 2.3

**SCHOOL AGED SERIOUSLY HANDICAPPED INCIDENCE**
**ACADEMIC YEAR 1972-73**

<table>
<thead>
<tr>
<th>State</th>
<th>Total served in various programs</th>
<th>Which is:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>IDAHO</strong></td>
<td>2,790; which is: 1% of total school population</td>
<td>27% of Idaho's estimated population of 10,266; 26% of USOE estimated handicapped population</td>
</tr>
<tr>
<td><strong>MONTANA</strong></td>
<td>3,223; which is: 1% of total school population</td>
<td>13% of Montana's estimated handicapped population; 26% of USOE estimated handicapped population</td>
</tr>
<tr>
<td><strong>UTAH</strong></td>
<td>8,375; which is: 2% of total school population</td>
<td>35% of Utah's estimated handicapped population; 40% of USOE estimated population</td>
</tr>
<tr>
<td><strong>WYOMING</strong></td>
<td>1,997; which is: 2% of total school population</td>
<td>36% of Wyoming's estimated handicapped population; 43% of USOE estimated handicapped population</td>
</tr>
<tr>
<td>Agency</td>
<td>City</td>
<td></td>
</tr>
<tr>
<td>-----------------------------------------------------------------------</td>
<td>------------</td>
<td></td>
</tr>
<tr>
<td>Associate Special Education Instructional Materials Center (ASEIMC)</td>
<td>Boise</td>
<td></td>
</tr>
<tr>
<td>SEIMC</td>
<td>Pocatello</td>
<td></td>
</tr>
<tr>
<td>SEIMC</td>
<td>Moscow</td>
<td></td>
</tr>
<tr>
<td>Idaho Elks Rehabilitation Center</td>
<td>Boise</td>
<td></td>
</tr>
<tr>
<td>Idaho Special Mental Retardation Project</td>
<td>Boise</td>
<td></td>
</tr>
<tr>
<td>Lincoln School for Handicapped</td>
<td>Emmett</td>
<td></td>
</tr>
<tr>
<td>Idaho School for the Deaf and Blind</td>
<td>Gooding</td>
<td></td>
</tr>
<tr>
<td>University of Idaho Special Education Program</td>
<td>Moscow</td>
<td></td>
</tr>
<tr>
<td>Idaho State School</td>
<td>Nampa</td>
<td></td>
</tr>
<tr>
<td>Idaho State University Speech and Hearing Center</td>
<td>Pocatello</td>
<td></td>
</tr>
<tr>
<td>Ricks College Speech and Hearing Clinic</td>
<td>Rexburg</td>
<td></td>
</tr>
<tr>
<td>St. Anthony Training School</td>
<td>St. Anthony</td>
<td></td>
</tr>
</tbody>
</table>
Table 2.5
EDUCATIONAL, DIAGNOSTIC, EVALUATION
AND SERVICE AGENCIES IN MONTANA

Region I.

| Child Development Center           | Missoula |
| Opportunity Foundation Workshop  | Missoula |

Region II.

| Preschool Community/Regional Program | Great Falls |
| Easter Seal Rehabilitation Center    | Great Falls |

Region III.

| Boulder River School and Hospital   | Boulder |
| Butte Sheltered Workshop            | Butte   |

Region IV.

| Home Living Skills Training         | Billings |

Region V.

| Eastmont Training Center            | Glendive |

Other agencies offering educational, evaluation and diagnostic services are:

- Montana Children's Center          | Twin Bridges |
- Montana Center for Handicapped Children | Billings |
- Yellowstone Easter Seal Speech and Hearing Center | Billings |
- Eastern Montana College Reading Clinic | Billings |
- Easter Seal Rehabilitation Center Speech and Hearing Clinic | Great Falls |
- Shodair Crippled Children's Hospital | Helena |
- Montana State School for Deaf and Blind | Great Falls |
- SEIMCs                             | Helena, Billings, Butte, Great Falls, Glasgow, Kalispell |
<table>
<thead>
<tr>
<th>Multi-district cooperatives</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Southwestern Educational Development Center</td>
<td>Cedar City</td>
</tr>
<tr>
<td>Northeastern Utah Ed. Dev. Center</td>
<td>Heber City</td>
</tr>
<tr>
<td>Southeastern Utah Education Service Center</td>
<td>Price</td>
</tr>
<tr>
<td>Cooperative Service Agency</td>
<td>Richfield</td>
</tr>
<tr>
<td>Utah State Training School</td>
<td>American Fork</td>
</tr>
<tr>
<td>Garden Home Training Center</td>
<td>Clearfield</td>
</tr>
<tr>
<td>Utah State University</td>
<td></td>
</tr>
<tr>
<td>Edith Bowen Laboratory School</td>
<td>Logan</td>
</tr>
<tr>
<td>University Affiliated Facility</td>
<td></td>
</tr>
<tr>
<td>Utah School for the Blind*</td>
<td>Ogden</td>
</tr>
<tr>
<td>Utah School for the Deaf*</td>
<td>Ogden</td>
</tr>
<tr>
<td>Utah State Hospital</td>
<td>Provo</td>
</tr>
<tr>
<td>Holladay Children's Center</td>
<td>Salt Lake City</td>
</tr>
<tr>
<td>Primary Children's Hospital</td>
<td>Salt Lake City</td>
</tr>
<tr>
<td>University of Utah College of Medicine</td>
<td>Salt Lake City</td>
</tr>
<tr>
<td>University of Utah Speech and Hearing Clinic</td>
<td>Salt Lake City</td>
</tr>
<tr>
<td>USEIMC</td>
<td></td>
</tr>
<tr>
<td>SEIMC</td>
<td></td>
</tr>
<tr>
<td>SEIMC</td>
<td></td>
</tr>
<tr>
<td>SEIMC</td>
<td></td>
</tr>
<tr>
<td>Utah State University SEIMC</td>
<td></td>
</tr>
</tbody>
</table>

* There are 24 extension schools scattered throughout the state; they are usually housed in public schools.
Table 2.7

EDUCATIONAL, DIAGNOSTIC, EVALUATION AND SERVICES AVAILABLE IN WYOMING

| Natrona County Exemplary Project for hard of hearing, mentally retarded children* | Casper |
| Work Training Center | Casper |
| Woods School | Casper |
| Wyoming School for the Deaf | Casper |
| Child Development Center | Cheyenne |
| Diagnostic Center | Cheyenne |
| Opportunity School | Cheyenne |
| STRIDE Learning Center | Cheyenne |
| Eastern Wyoming Tri-County Cooperative Services | Couglas |
| Wyoming State Hospital | Evanston |
| New Hope Day Care Center | Evanston |
| Southside School Resource Center | Lander |
| Wyoming State Training School | Lander |
| ASE1MC | Lander |
| Gottsche Rehabilitation Center | Thermopolis |
| University of Wyoming Language, Hearing & Speech Clinic | Laramie |
| St. Joseph School | Torrington |
| Green River Day Care Center | Green River |

*Funded in part by RMRRC Project Outreach-Wyoming
Following the enactment of this legislation, special education services were to be developed in the 40 districts and the more than 600 public schools within the state. Some of the districts were then providing some special education services, but were required by the legislation to extend services to the more seriously involved children. Other districts began planning their first special education programs.

The Utah State Board of Education (USBE) encouraged and ultimately required district identification of handicapped students; USBE also encouraged development of diagnostic, prescriptive and individualized instructional procedures, and facilitated the building of needed resource systems. This effort by the USBE was designed to secure educational service programs that met student needs within the available fiscal resources. Many districts formed cooperatives to develop and/or provide special education services.

The total process was aided by the development of two programs by USBE, Project Identification and Project ACCESS. Project Identification was designed to identify handicapped children within existing schools who were not being served by special education programs. Project Identification was initiated by development of a preliminary screening instrument, designed by USBE and pilot-tested by selected regular classroom teachers. A revised form was used on a statewide basis in the 1972-73 school year. The revised screening instrument was validated on a random sample of schools with an identification effectiveness rate in excess of 85 percent as established by a battery of diagnostic instruments.

The resulting incidence data are presented in Table 2.8. The data collection process also produced information on the children's types of handicaps which is presented in Table 2.9. This entire effort was part of a broader system called Project ACCESS (A Cooperative Comprehensive Educational Services System). The ACCESS goal is to facilitate the implementation of a comprehensive educational program for handicapped students, which can be applied across the state. The three components of ACCESS are:

1. Identification of all handicapped students and an in-depth assessment of student needs;

2. Evaluation of urban and rural special education delivery services; and
Table 2.8
SUMMARY OF UTAH’S SPECIAL EDUCATIONAL NEEDS

<table>
<thead>
<tr>
<th></th>
<th>Educable Mentally Retarded</th>
<th>Trainable Mentally Retarded</th>
<th>Learning Disabilities</th>
<th>Emotionally Handicapped</th>
<th>Hard of Hearing</th>
<th>Speech and Hearing Impaired</th>
<th>Motor Handicapped</th>
<th>Visually Impaired</th>
</tr>
</thead>
<tbody>
<tr>
<td>On Program, School year 1971-72</td>
<td>3,454</td>
<td>1,055</td>
<td>10,763</td>
<td>2,341</td>
<td>254</td>
<td>141</td>
<td>9,397</td>
<td>112</td>
</tr>
<tr>
<td>Percent of Total (27,565) On Program Being Served</td>
<td>.125</td>
<td>.038</td>
<td>.390</td>
<td>.034</td>
<td>.009</td>
<td>.005</td>
<td>.338</td>
<td>.004</td>
</tr>
<tr>
<td>Projected Number of Handicapped (Direct Identification)</td>
<td>1,399</td>
<td>8,436*</td>
<td>13,206*</td>
<td>14</td>
<td>894</td>
<td>11</td>
<td>16</td>
<td></td>
</tr>
<tr>
<td>Percent of Total 23,967, by Category</td>
<td>.058</td>
<td>.352*</td>
<td>.551*</td>
<td>.006</td>
<td>.037</td>
<td>.056</td>
<td>.0005</td>
<td>.0007</td>
</tr>
<tr>
<td>Total Utah School Age Handicapped</td>
<td>4,344</td>
<td>1,055</td>
<td>19,199</td>
<td>15,519</td>
<td>254</td>
<td>155</td>
<td>10,201</td>
<td>123</td>
</tr>
<tr>
<td>Percent of Total (51,532) by Category</td>
<td>.094</td>
<td>.016</td>
<td>.017</td>
<td>.301</td>
<td>.005</td>
<td>.003</td>
<td>.198</td>
<td>.002</td>
</tr>
<tr>
<td>Utah Incidence Rate (Based on School-Age Population of 305,916)</td>
<td>.016</td>
<td>.034</td>
<td>.627**</td>
<td>.0507**</td>
<td>.0008</td>
<td>.0005</td>
<td>.0334</td>
<td>.0004</td>
</tr>
<tr>
<td>U.S. Office of Education Incidence</td>
<td>.020</td>
<td>.03</td>
<td>.010</td>
<td>.020</td>
<td>.0075</td>
<td>.005</td>
<td>.035</td>
<td>.0056</td>
</tr>
<tr>
<td>Projected Number Based on School-Age Population of 305,916</td>
<td>6,118</td>
<td>918</td>
<td>3,059</td>
<td>6,118</td>
<td>2,294</td>
<td>1,530</td>
<td>10,707</td>
<td>1,713</td>
</tr>
<tr>
<td>Utah Previously Used Incidence</td>
<td>.020</td>
<td>.004</td>
<td>.030</td>
<td>.020</td>
<td>.0008</td>
<td>.005</td>
<td>.050</td>
<td>.001</td>
</tr>
<tr>
<td>Projected Number Based on Previous Experience</td>
<td>9,118</td>
<td>1,224</td>
<td>9,177</td>
<td>6,118</td>
<td>2,294</td>
<td>1,530</td>
<td>15,296</td>
<td>306</td>
</tr>
</tbody>
</table>

*Does not include MR population from American Fork Training School

**Does not include EH population from Youth Center, Utah State Hospital

*Data developed by Project ID which found that emotionally handicapped children than learning disabled children have emotional needs for more education.

**Data skewed toward a larger number of LD children serves many EH children in LD classes and data based on classroom enrollment.
### Table 2.8

**SUMMARY OF UTAH'S SPECIAL EDUCATIONAL NEEDS**

<table>
<thead>
<tr>
<th></th>
<th>Educable Mentally Retarded</th>
<th>Trainable Mentally Retarded</th>
<th>Learning Emotionally Handicapped</th>
<th>Hard of Hearing</th>
<th>Speech and Hearing</th>
<th>Motor Handicapped</th>
<th>Visually Impaired</th>
<th>Deaf-Blind</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>School year 1971-72</strong></td>
<td>3,454</td>
<td>1,055</td>
<td>10,763</td>
<td>2,313</td>
<td>254</td>
<td>141</td>
<td>9,307</td>
<td>112</td>
<td>161</td>
</tr>
<tr>
<td>(27,565) On Handicapped (of Handicapped Stimulation)</td>
<td>.125</td>
<td>.038</td>
<td>.390</td>
<td>.086</td>
<td>.009</td>
<td>.007</td>
<td>.338</td>
<td>.004</td>
<td>.006</td>
</tr>
<tr>
<td>(23,967) by Category</td>
<td>.058</td>
<td>.352</td>
<td>.551</td>
<td>.0006</td>
<td>.037</td>
<td>.005</td>
<td>.003</td>
<td>.002</td>
<td>.003</td>
</tr>
<tr>
<td><strong>Age Handicapped</strong></td>
<td>4,844</td>
<td>1,055</td>
<td>19,199</td>
<td>15,519</td>
<td>254</td>
<td>155</td>
<td>10,201</td>
<td>123</td>
<td>177</td>
</tr>
<tr>
<td>(51,532) by Category</td>
<td>.094</td>
<td>.020</td>
<td>.373</td>
<td>.301</td>
<td>.005</td>
<td>.003</td>
<td>.198</td>
<td>.002</td>
<td>.003</td>
</tr>
<tr>
<td><strong>Late (Based on School-Age 5,916)</strong></td>
<td>.016</td>
<td>.0034</td>
<td>.0627**</td>
<td>.0507**</td>
<td>.0008</td>
<td>.0005</td>
<td>.0334</td>
<td>.0004</td>
<td>.0006</td>
</tr>
<tr>
<td><strong>Education Incidence</strong></td>
<td>.020</td>
<td>.003</td>
<td>.010</td>
<td>.020</td>
<td>.00075</td>
<td>.003</td>
<td>.0035</td>
<td>.0006</td>
<td>.0001</td>
</tr>
<tr>
<td><strong>Based on School-Age 5,916</strong></td>
<td>6,118</td>
<td>918</td>
<td>3,059</td>
<td>6,118</td>
<td>2,294</td>
<td>1,530</td>
<td>10,707</td>
<td>1,713</td>
<td>306</td>
</tr>
<tr>
<td><strong>Used Incidence</strong></td>
<td>.020</td>
<td>.004</td>
<td>.030</td>
<td>.020</td>
<td>.0008</td>
<td>.005</td>
<td>.050</td>
<td>.001</td>
<td>.0006</td>
</tr>
<tr>
<td><strong>Based on Previous</strong></td>
<td>6,118</td>
<td>1,224</td>
<td>9,177</td>
<td>6,118</td>
<td>245</td>
<td>1,530</td>
<td>15,296</td>
<td>306</td>
<td>122</td>
</tr>
</tbody>
</table>

---

*Data developed by Project ID which found that there were more emotionally handicapped children than learning disabled, and that 80% of all handicapped children have emotional problems.*

*Data skewed toward a larger number of LD children because Utah serves many EH children in LD classes and data collected are based on classroom enrollment.*
Table 2.9
Children Being Served in Utah School Year 1971-72, by Handicapping Condition

<table>
<thead>
<tr>
<th>Area</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Educable Mentally Retarded</td>
<td>3,454</td>
</tr>
<tr>
<td>Trainable Mentally Retarded</td>
<td>1,055</td>
</tr>
<tr>
<td>Learning Disabled</td>
<td>10,763</td>
</tr>
<tr>
<td>Emotionally Handicapped</td>
<td>2,313</td>
</tr>
<tr>
<td>Deaf</td>
<td>254</td>
</tr>
<tr>
<td>Hard of Hearing</td>
<td>141</td>
</tr>
<tr>
<td>Speech and Hearing</td>
<td>9,307</td>
</tr>
<tr>
<td>Motor Handicapped</td>
<td>112</td>
</tr>
<tr>
<td>Visually Impaired</td>
<td>161</td>
</tr>
<tr>
<td>Deaf-Blind</td>
<td>5</td>
</tr>
<tr>
<td>TOTAL</td>
<td>27,565</td>
</tr>
</tbody>
</table>

Children Expected to be Served from F-1 Estimated Data Reports 1972-73

<table>
<thead>
<tr>
<th>Area</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Speech and Hearing</td>
<td>7,096</td>
</tr>
<tr>
<td>Emotionally Handicapped</td>
<td>1,098</td>
</tr>
<tr>
<td>Learning Disabled</td>
<td>6,82</td>
</tr>
<tr>
<td>Motor Handicapped</td>
<td>107</td>
</tr>
<tr>
<td>Educable Mentally Retarded</td>
<td>2,040</td>
</tr>
<tr>
<td>Trainable Mentally Retarded</td>
<td>1,409</td>
</tr>
<tr>
<td>Visually Impaired</td>
<td>93</td>
</tr>
<tr>
<td>Hard of Hearing</td>
<td>139</td>
</tr>
<tr>
<td>Deaf</td>
<td>217</td>
</tr>
<tr>
<td>Deaf-Blind</td>
<td>10</td>
</tr>
<tr>
<td>Resource Program</td>
<td>7,890</td>
</tr>
<tr>
<td>Educable Mentally Retarded</td>
<td></td>
</tr>
<tr>
<td>Emotionally Handicapped, Learning Disabled and Communication Disorders</td>
<td></td>
</tr>
<tr>
<td>Homebound, Hospitalized</td>
<td>2,410</td>
</tr>
<tr>
<td>TOTAL</td>
<td>29,371</td>
</tr>
</tbody>
</table>
3. Implementation of strategies for providing comprehensive educational services.

In 1972 BEH requested the RMRRC initiate services in Idaho, Montana and Wyoming. In 1973 Idaho legislated mandatory education for all handicapped children. Between 1973 and 1975, Idaho's 175 districts will offer special educational service to their handicapped students. Presently 79 districts offer special educational services in 345 classrooms.

In support of this effort, the RMRRC Outreach-Idaho instituted an incidence study of exceptional children in 60 randomized school districts and communities. Data collected from this study are being compiled and tabulated. A preliminary view of 75 percent of the data indicates the following comparison of the data collected to national incidence figures as shown in Table 2.10.

The sample data imply that approximately 16.8 percent of the Idaho school-age population are exceptional. It must be cautioned that the above percentage figures are preliminary since they represent only 75 percent of total collected data. The collected data generally follow the incidence estimates provided by the national sources--at least within the bounds of normal incidence data variations. The largest discrepancy is in the learning disabilities area which is extremely variable because definitions between states vary greatly. Many of these learning disabled children exhibit minimal learning disorders which may be served by the regular educational process.

Figure 2.2 presents data on the growth in the number of Idaho school districts offering some type of special education services over the last six years. The RMRRC has served Idaho for the last two years only. The chart indicates a growth of services from 36 districts offering special education services in 1968-69 to 79 districts offering special education programs in 1973-74. It must be noted that these figures indicate quantity rather than quality. School districts enumerated as offering special education services are not necessarily serving all children projected to be exceptional.

The availability of special education classes as related to size of the district during the 1973-74 school year is presented in Figure 2.3. The chart indicates that 100 percent of the very large school districts are offering special education services as
TABLE 2.10
A Comparison of Idaho and National Incidence Figures of Exceptional/Handicapped Children.

<table>
<thead>
<tr>
<th></th>
<th>Idaho % Estimates</th>
<th>Dunn &amp; Mackie % Estimates</th>
<th>BEH % Estimates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visually Handicapped</td>
<td>.4%</td>
<td>.2%</td>
<td>0.160</td>
</tr>
<tr>
<td>Auditory Handicapped</td>
<td>.6%</td>
<td>1.5%</td>
<td>0.575</td>
</tr>
<tr>
<td>Crippled/Orthopedically Handicapped</td>
<td>N.A.</td>
<td>1.5%</td>
<td>0.5</td>
</tr>
<tr>
<td>Speech Handicap</td>
<td>1.9%</td>
<td>2.0%</td>
<td>3.5</td>
</tr>
<tr>
<td>Specific Health Problem</td>
<td>N.A.</td>
<td>1.5%</td>
<td>N.A.</td>
</tr>
<tr>
<td>Emotionally Disturbed or Socially Maladjusted</td>
<td>2.9%</td>
<td>2.0%</td>
<td>2.0</td>
</tr>
<tr>
<td>Gifted</td>
<td>1.5%</td>
<td>2.0%</td>
<td>N.A.</td>
</tr>
<tr>
<td>Mentally Retarded</td>
<td>*2.7%</td>
<td>2.0%</td>
<td>2.3</td>
</tr>
<tr>
<td>Specific Learning Disability</td>
<td>**6.1%</td>
<td>N.A.</td>
<td>1.0</td>
</tr>
<tr>
<td>Physically Handicapped</td>
<td>.7%</td>
<td>N.A.</td>
<td>N.A.</td>
</tr>
<tr>
<td>Total</td>
<td>16.8%</td>
<td>12.7%</td>
<td>10.035</td>
</tr>
</tbody>
</table>

*Data from several Child Development Centers still outstanding.
**Thorough testing on many children reported as Learning Disabled was unavailable.
N.A. = Not Available
Fig. 2.2 Number of School Districts Offering Special Education Programs Over the Last 5 Years Within Single or Multi-District Administrative Units.
Fig. 2.3  Size of District Related to Availability of Special Education Classes, 1973-74 in Idaho
compared to 91 percent of large, 87 percent of medium, 44 percent of small, and 22 percent of very small school districts. The data point out the need for the development of a delivery of special education services within small, rural districts with fewer numbers of exceptional children to educate. This difference may imply differences in training and logistical arrangements within the state in order to provide appropriate services.

School districts offering special education services are not necessarily serving all children projected to be exceptional within their districts. It is estimated that approximately 50-55 percent of Idaho's projected number of exceptional children are presently being served in local school district special education classes, speech and hearing services, contractual arrangements with child development centers, mental health centers, other public and private agencies, and state institutions such as Gooding State School for Deaf and Blind, Nampa State School, and the St. Anthony Training School. If mandatory special education were to be fully implemented, all 115 school districts would be serving all resident exceptional children within their district or on a contractual basis.

The relationship between the number of classrooms and the projected numbers of exceptional children being served in special education programs in each of the last five years is presented in Figure 2.4. These figures are based on a 9 percent and 12 percent incidence figure (excluding speech handicapped). During 1968-69, it is estimated that 6-8 percent of the total projected number of handicapped children in Idaho were being served in 123 classrooms. During 1970-71, about 13-17 percent of the exceptional children were served in 204 classrooms. During 1972-73, approximately 22.29 percent of the estimated numbers of exceptional children were being served in special education classrooms. At this rate of growth, it is estimated that full implementation of mandatory special education services could not occur until between 1988-1990. These data point out the need for more rapidly increasing the services available to exceptional children. Part of this increase could be developed by improved inter-agency cooperation, such as with regional child development centers, mental health centers, and other Idaho state agencies and institutions.

In order to implement mandatory special education, qualified persons must be available to teach handicapped
Fig. 2.4 Percentage of Projected Numbers of Exceptional Children being Served in Special Education Programs in Idaho (based on 9% and 12% national incidence figure*).

*Excluding speech handicapped.
children. The RMRRC Outreach staff in Idaho became involved in the documentation of the potential training resources available in Idaho to meet the manpower demands of mandatory special education. The data gathered to carry out this objective included growth of special education manpower over the last five years; manpower resources providing training of special education teachers; longevity of special education trainees from various training institutions in-state and out-of-state; percent of special education trainees from specific institutions remaining within Idaho and teaching for specified time periods; a contrast of special education manpower available to the manpower needed to implement mandatory special education; retirement rate and newly certificated teacher rate on a yearly basis over the last five years, and manpower resources needed to meet special education objectives by different specified periods of time (1975, 1980, etc.). The growth rate of numbers of special education teachers during the last five years is shown in Figure 2.5. The mean growth of special education teachers for these 5 years was 39 teachers.

The analysis of the training of teachers is graphically depicted in Figure 2.6; 57 percent of teachers teaching in Idaho during 1968-69 were trained by university training institutions within the state and 43 percent out-of-state. During the next four years, approximately half of all teachers teaching in Idaho were trained by in-state training institutions and half by out-of-state institutions. The states that contribute the greatest number of special education teachers to the Idaho education system include Colorado, Washington, and Utah.

A further analysis of special education teacher manpower data indicated that approximately half of Idaho's special education teachers (trained from within-state or out-of-state) teach for one or two years and then leave special education positions. The reasons for leaving special education jobs vary and include higher salaries, retirement and death, advancement to supervisory positions, returns to regular education, etc. At the present time a survey is being undertaken of teachers having taught one or two years and leaving Idaho special education positions; this survey will obtain a more detailed profile of their reasons for leaving.

Sections 33-2003, Idaho Code, states that no child shall be enrolled or placed in any special
Fig. 2.5 Growth Rate of Special Education Teachers in Idaho (1968-1974).
Fig. 2.6  Manpower Training Resources of Idaho's Special Class Teachers
education class unless he has received a comprehensive evaluation. Such comprehensive evaluations require the services of supportive personnel such as psychologists, social workers, and speech and hearing pathologists. Any adjustment of a child's educational program is a serious matter and should be carefully evaluated by competent multi-disciplinary personnel. The growing availability of ancillary personnel over the last five years is depicted in Figure 2.7.

This chart indicates that during the 1968-69 school year there were 3 social workers in one school district; 16 psychologists in 11 school districts; and 23 speech and hearing pathologists in 16 school districts. During 1973-74, ancillary personnel increased to 12 social workers in 10 school districts; 49 psychologists in 60 school districts; and 61 speech and hearing therapists in 67 school districts. However, when all ancillary personnel were combined, there were only 122 speech and hearing pathologists, psychologists, and social workers serving exceptional children during the 1973-74 school year. It would seem that a significantly larger number of such personnel will be needed during the next five years as special education programs develop in Idaho's 115 school districts.

Because of the data indicating a shortage of the special education manpower needed to fully implement mandatory special education and because of the high attrition rate of Idaho's special education teachers, efforts were initiated to review the present special education manpower certification requirements. The RMRRC-sponsored Outreach Idaho staff contacted all states for information on special education certification—particularly for competency-based certification.

Preliminary plans have been initiated to review Idaho's certification requirements with the university teacher-training-institution personnel so changes can be made.

Montana did not enact mandatory special education legislation until mid-1974. During the 1973-74 school year, approximately one-third of the more than 600 school districts offered special education services to handicapped children through multi-county districts and regions. In 1971-72, Montana was serving approximately 5,000 of an estimated population of 32,000 handicapped children.
Fig. 2.7 Growth of Ancillary Personnel Working With Idaho Exceptional Children

* Figures in ( ) indicate numbers of school districts employing ancillary personnel.
To increase the services provided and to serve as a demonstration effort, the RMRRC-sponsored Outreach-Montana helped plan a statewide service system and helped demonstrate services in selected areas of Montana. This system will be operational throughout the state in the 1974-75 year. Five regional coordinators will be utilized to facilitate the program. The program of services consists mainly of Area Resource Teachers (ARTs) who perform identification, diagnostic-prescriptive services, train teachers by demonstration and explanation on how to incorporate SEIMC materials and resources, and followup on referrals after initial response to determine the effective degree of the diagnostic-prescriptive service. Outreach pilot programs utilizing ARTs were underway in 1972; the service sought to provide an identification and diagnostic resource, usually consisting of the administration of individual mental and academic tests with the formulation of an educational prescription that was interpreted for a teacher or parent of a handicapped child. In 1972-73, 737 handicapped children received direct services, and 1,410 students received indirect services. A breakdown of the handicapping conditions follows:

<table>
<thead>
<tr>
<th>Condition</th>
<th>Percentage</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visual</td>
<td>12.0%</td>
<td>88</td>
</tr>
<tr>
<td>Auditory</td>
<td>7.5%</td>
<td>55</td>
</tr>
<tr>
<td>Motoric</td>
<td>8.0%</td>
<td>59</td>
</tr>
<tr>
<td>Physical</td>
<td>2.5%</td>
<td>18</td>
</tr>
<tr>
<td>Speech</td>
<td>8.0%</td>
<td>59</td>
</tr>
<tr>
<td>Poor General Social Performance (ED and Behavior Disorders)</td>
<td>8.5%</td>
<td>63</td>
</tr>
<tr>
<td>Specific Learning Difficulty</td>
<td>14.5%</td>
<td>107</td>
</tr>
<tr>
<td>Poor General Academic Performance (EMR, TMR)</td>
<td>35.0%</td>
<td>258</td>
</tr>
<tr>
<td>Other (Multiple or Undetermined)</td>
<td>4.0%</td>
<td>30</td>
</tr>
<tr>
<td><strong>Total Number Directly Served</strong></td>
<td></td>
<td><strong>737</strong></td>
</tr>
</tbody>
</table>

A screening instrument to identify handicapped children and youth in Montana has been completed. It was distributed throughout the state. This will provide Montana's first comprehensive identification data. Montana's special education was considerably strengthened by passage of the special education legislation in 1974. A comprehensive statewide special education system will hopefully be the result.

When the RMRRC outreach work began in Wyoming, which does not have mandatory education legislation,
the Office of Exceptional Children, Wyoming State Department of Education, supplied the following information, based on data from 1971-72:

1. There is a lack of comprehensive special educational services in many school districts, especially in isolated areas. Only 60.6 percent of all school districts in Wyoming offer special educational services (see Figure 2.8).

2. Only a small percentage of certain identified handicapped children are being served; i.e., hearing impaired, crippled, multiply handicapped and other health impaired. Children served in 1971-72 compared to the projected number to be served in 1975 (as determined by several state studies) indicates an increased need for service pattern development in most areas (see Table 2.11).

Outreach Wyoming began working on several thrusts, some designed to immediately ameliorate specific problems and some designed for long-range improvement of delivery of services throughout the state. These efforts, which are detailed in Volume III, included identification of unserved handicapped children, compilation and dissemination of information about services now available, preparation of a legal document on due process for Wyoming, and active participation in planning, equipping and establishing an exemplary program which serves hearing impaired, mentally retarded children. Facilitation of the development of a state plan to serve the severely handicapped was provided through participation of Wyoming teachers, administrators and parents at the RMRRC conference on services for the severely, multiply handicapped.

The RMRRC entered the four-state region at a time of accelerated planning for special education. The states with minimal special services were planning to expand services; all four states were and are still developing comprehensive educational plans for handicapped children. Hopefully, these plans will result in the availability of comprehensive services throughout the region within this decade. The formative nature of the services was a factor in determining the services the RMRRC provided and will be discussed in later chapters.
Fig. 2.8  Number of school districts operating in Wyoming and those offering special education services
Table 2.11

Number of Handicapped Children Served
in Wyoming in 1971-72
Compared to the Number Projected to be Served by 1975

<table>
<thead>
<tr>
<th>HANDICAPPED</th>
<th>Served in 1971-72</th>
<th>Projected to be served by 1975</th>
</tr>
</thead>
<tbody>
<tr>
<td>TMR</td>
<td>425*</td>
<td>346</td>
</tr>
<tr>
<td>EMR</td>
<td>852</td>
<td>2101</td>
</tr>
<tr>
<td>Hearing impaired</td>
<td>158</td>
<td>602</td>
</tr>
<tr>
<td>Deaf</td>
<td>39</td>
<td>115</td>
</tr>
<tr>
<td>Speech impaired</td>
<td>3945</td>
<td>4231</td>
</tr>
<tr>
<td>Visually impaired</td>
<td>185</td>
<td>184</td>
</tr>
<tr>
<td>Emotionally disturbed</td>
<td>298</td>
<td>2308</td>
</tr>
<tr>
<td>Crippled</td>
<td>27</td>
<td>231</td>
</tr>
<tr>
<td>Learning disabled</td>
<td>1135</td>
<td>5159</td>
</tr>
<tr>
<td>Other health impaired</td>
<td>98</td>
<td>1153</td>
</tr>
<tr>
<td>Total</td>
<td>7162</td>
<td>16430</td>
</tr>
</tbody>
</table>

*246 TMR students are in residential institutions
During the period 1968-69, the educational staffs of the public schools of Utah and the University of Utah sought to establish a basis for the improvement of educational programming for the handicapped child within the state. The enactment of the enabling RRC legislation provided an outlet by which a wide variety of resource people could be brought together to look at common educational problems. The University of Utah submitted an unsuccessful proposal in 1969 for a center to serve Utah as a mutual, cooperative venture. The revision of the proposal in 1970, which included a broadening of the region to include Idaho, Montana, and Wyoming, was funded and established the basis for the RMRRC.

The underlying precept of the proposed center was that neither the university nor the public schools alone could respond to the many needs and issues that had to be addressed in order to improve special educational services. The center was envisioned as a way to link the resources of both types of agencies, i.e., to provide academic and planning resources to the practicing educator and, in turn, to relate the university’s training and research programs to the pragmatic needs of everyday education. The purpose of the effort was to increase educational innovation in the region, but, more importantly, the outcome would be to better describe, identify, and replicate (under certain situations), the concepts and activities of the classroom.

In the proposal planning it was concluded that educators talked about individual differences, but continued to place children into categorical boxes. The RRC was viewed as a vehicle for a softening of labels and a shift toward looking at the child’s behavior as the most significant variable in educational programming. To effect this change it was felt that the added available resources for the education community were crucial, and the RMRRC became a key focal point in the transition of educational attitudes.

It was anticipated that the reduction of labeling would help educators, who were accustomed to looking at regular and special education as separate units, look at the total educational spectrum. This combination—reduction of labeling and increased awareness of educational possibilities—should encourage development of models which would take the best from both regular and special education and utilize the best in
designing appropriate, individualized educational programs for individual children. The center provided the vehicle to undertake this transition process by providing a resource staff to develop model programs and to collect the necessary supportive information and resources.

The concept of reversing the trend that makes a child fit the system to one that adjusts the system to serve the child was a basic element of the RMRRC's operations. It was understood that this reversal would not be a simple task, because it is much easier for a teacher or administrator to say, "The child either goes into the special class or into the regular class," than it is to look at alternatives for appropriate educational placement. Part of the effort on trend reversal was focused on retraining and motivating the classroom teacher to use the center's alternative methods.

When the Utah State Legislature passed the nation's first mandatory special education law in 1969, it called for alternative educational models that were financially and educationally accountable. In order to help the Utah educational community meet its new commitment, the RMRRC developed a program of support services. The center started to collect information on existing educational needs within Utah, to identify types of educational alternatives for placement of handicapped children, to identify and facilitate ways of matching child characteristics to educational programming, and to provide support to teachers serving handicapped children.

The philosophy of the center was developed by considering an overview of educational process and then focusing on component elements. Through this process the center staff sought to identify the variables that affected the educational process and to develop resource packages that educators could use to bring about change. The selected process was to develop and then to field-test each package, to evaluate the results of the pilot, and to improve the package prior to an active dissemination effort. The effort's outcome relevant to the university was the provision of information and data from the public school classroom to the Department of Special Education. The information was to be used by the department in its program development efforts to change its training programs in teacher preparation to better meet the needs identified in the public school classroom.

Since from its inception the center was a mutual
effort of the Utah educational community, it was imperative to maintain a continuing dialogue with the state department, local districts, and the university. In responding to the educational community's needs, the center was determined to avoid the tempting trap of only meeting immediate needs. A goal was established to continually search for and to integrate the broader perspective of education and of long-range problems and roles. A communication channel to the educational community was essential in enabling the continuation of this direction and in illustrating that the RMRRC could produce immediate services and could concurrently facilitate long-range planning requirements.

During the first year of operation the center staff had frequent meetings with state department personnel (from regular and special education), LEA representatives, and the university staff to identify and to prioritize the special education needs and to determine the best way the center could meet its philosophical objectives in addressing these needs. Observers were trained and spent time in schools obtaining data on interactions with and services for handicapped children. The purpose of this activity was to base center planning on the actual needs within the practicing educational community.

In addition to the observers' data, another strategy was to place persons in the schools to collect in-depth information on services for handicapped children. Although the differences in each school were recognized, it was also felt that the person would collect data on general problems. The data collection agent would be permanently assigned to a school on a full-time basis. The person (data collector) was named "stratistician," implying the development and application of educational strategies.

The strategy's inherent premise was that the center had to "earn" the right to obtain data; hence, the center attempted to develop a role so these persons could meet an identified service need in schools. The idea of using the stratistician as part of a model did not evolve until districts indicated the success of the stratisticians and their own needs for this type of service person. As the center staff became excited about the stratistician as a service person in the continuum of special education services, it started to look toward additional ways of helping a special education teacher gain necessary skills so he could become a resource person to regular teachers.
The evolution of this approach as a focal service provision model developed at the end of the second year of operation (after the first year of the statistician in the field) and was an important facet of the operating philosophy during the remaining year of the center's grant.

Within the context of this established philosophical position, the center operated from a philosophy that was responsive to the general guidelines of the Regional Resource Centers. The RRCs developed from the concern of BEH and of Congress that many handicapped children were not served by the most appropriate educational methods. The RRCs were established to facilitate the education of handicapped children by a concerted, unified national effort to help educators meet individual, educational needs.

Basic to the resource concept was the recognized need for supportive resource services to teachers of handicapped children—a concept which acknowledges that teachers can perform more efficiently and that every child can learn. Furthermore, responsibility for failure to meet a child's educational needs was placed upon the schools, not upon the child. Maximum degrees of freedom were provided in the resource concept to encourage each established center to develop and to identify ways to provide better educational services to their region's children.

This general philosophy of the national program was consistent with the philosophy and intent of the RMRRC founding principles. The center's philosophic perspective became a fusion of the basic educational perspective of the Utah group and the BEH rationale for RRCs. The philosophy was translated into operations through the BEH operational structure outlined earlier, which suggested that three major activities should be the common core for all centers: service, research, and training of personnel.

The emphasis of the service dimension was placed on provision of back-up resources to teachers of handicapped children. The centers were not expected to assume responsibility for the direct instruction of children. Services offered by each center were initiated by referrals from teachers who needed help in coping with individual children. The referral basis was the breakdown of the teacher-child interaction to such an extent that the child was not learning as much as expected. The center staff was to follow through on
a given problem until the teacher could work effectively with the child. This approach focused on the solution of teaching problems, rather than on labeling or categorizing individual children.

The enabling legislation (Title VI B of the Elementary and Secondary Education Act) provided the following guidelines on the types of services for teachers:

Centers established or operated under this section shall: (1) provide testing and educational evaluation to determine the special educational needs of handicapped children referred to such centers; (2) develop educational programs to meet those needs; and (3) assist schools and other appropriate agencies, organizations and institutions in providing such educational programs through services such as consultation (including in appropriate cases consultations with parents or teachers of handicapped children at such regional centers), periodic reexamination and other technical services.

The legislation did not restrict the type of service model for each center, so various delivery models were developed to provide these services to teachers. The RMRRC selected the statistician concept as its basic service delivery model.

The research dimension in the RRC concept was the interaction of teacher and child in the educational environment. These concerns included methods, curriculum, placement, and other relevant factors in the teaching-learning milieu. The research efforts evolved from the service and training components and were applied in nature. Again, the centers were not constrained on the research activities they could undertake to support their delivery of services.

The training dimension was composed of two major facets: inservice and preservice training. The data from the applied research activities and from the "real-world" problems identified by referrals provided the fertile ground for identifying and introducing new ways for teachers to view children. In essence, the service and research activities were needs assessments to identify and to introduce new strategies. These strategies were developed into inservice training programs, existing preservice training models, and construction of new educational programming models.
The outlined, joint RMRRC/National RRC philosophy was based on the assumption that there are three basic factors in the most appropriate placement of a handicapped child and in the establishment of an effective educational program. They are diagnosis, prescription, and intervention (programming). The operation strategy states that few teachers are trained in all of these skills, and that few districts have the resources to provide help to teachers on these procedures. A common outcome was the categorization and labeling of children from an IQ stimulus which negates decision-making based on individual needs by emphasizing differences rather than programming for them. Compounding this diagnostic problem was the great number of educationally handicapped children who receive services in regular classrooms, without needed special services. These concerns on the procedures of diagnosis, prescription, and intervention, and the logical progression between them, became the basic ingredient for the development of the RRC service strategy. These foci were viewed by the RMRRC and its sister centers as vital ingredients in maximizing short- and long-range effectiveness of personnel training programs and, in turn, the education of exceptional children.

The early philosophy of the RMRRC and the other regional centers focused on developing services for the less-involved child. During the first half of 1972 this direction was altered by BEH directives which increasingly emphasized the more severely involved child. Concurrently, with this alteration in target group focus, a change also was requested for a more active outreach posture. For the RMRRC this required the development of several new organizational strategies and a broadening of the original center philosophy and service pattern.

The RMRRC had developed methods for clarifying services of the RRC mandate while fulfilling obligations in Utah, and was not to commit resources to the new regional charge. This dual responsibility was met by completing core-money mandates as developed under the original "guidelines" and by supporting the development of regional services as defined by the RRC law and BEH guidelines, mainly with flow-through money available for outreach efforts. Added flow-through monies were given to the RMRRC to serve Idaho, Montana, Utah, and Wyoming. Montana and Wyoming, along with the Dakotas, had submitted an unsuccessful proposal for a center the previous year. BEH had decided to serve the states by the existing centers, and the RMRRC was assigned to serve Montana and Wyoming.
However, the relationship of the states to the RMRRC program was not clearly articulated nor were the limits defined by the RRC law. The lack of clear communication from the funding agency required the outreach effort to begin by fence mending.

The center's operational philosophy in Utah was established slowly with direction. The center outreach philosophy, however, developed reactively with crisis orientation. The basic philosophy of communication in working with SEAs and LEAs, however, provided the framework for the interaction with the outreach states. A basic concern for children and a true desire to facilitate the development of improved special education services were core concerns for both state and RMRRC staffs and served to bridge the problems of this difficult period. The philosophy based on the facilitation and technical assistance activities of the outreach effort was different, however, than that of the original center. After the first hectic year both philosophies were meshed into productive guidelines that were mutually supportive to both efforts.

History of the RMRRC

The Rocky Mountain Regional Resource Center (RMRRC), funded June 1, 1970, was one of the original six RRCs. The grant was awarded to the Department of Special Education, University of Utah, by BEH. Throughout the grant period, project activities were identified by and planned in conjunction with state and local educational agencies in a joint effort to help improve services to handicapped children. The following narrative presents an historic perspective of the center; an outline of major activities is presented in Appendix A.

In addition to the shared goal of a national resource system, each RRC was asked to explore the unique needs of their regions and to devise innovative pilot programs to help meet these needs. Consequently, the first year of the RMRRC project was devoted to a needs assessment within the state of Utah and to planning ways to meet these needs. As explained in previous sections, this confinement of center activities to the state of Utah was requested by BEH and continued for two years. During the initial year representatives from the Utah State Board of Education (USBE) and from selected districts met with staff members, and an advisory board composed of members from these same groups is still actively involved in the project. The needs assessment
indicated that in 1969-70, more than 42 percent of the expected population of handicapped children in Utah were not receiving any support services.

The needs assessment also posed questions in several areas, such as:

What are the actual problems in the classroom?

Are these problems centered mainly around the exceptional children who are not receiving special education services?

What affective variables can be measured or observed which identify teachers who are successful in teaching handicapped children?

Could the regular class teacher more easily cope with special education problems and improve the learning climate if a special educator were present to give on-the-spot help to the teacher?

What variables influence the success of intervention?

Would inservice training help teachers in similar situations in the future?

Would there be a ripple effect of inservice training which would facilitate educational improvement for all the children in the class, not just the referred child?

What areas of teacher training need to be strengthened in the preservice training curriculum?

What kinds of inservice training packages would be of most help to teachers?

Which packages would most likely be put into practice?

What resources are available to either the special or regular class teacher, and how are they used?

The RMRRC decided that the data base needed to answer these questions could be obtained only from information gathered in the classroom. If these data were to be reliable and useful in implementing change, they would have to be collected by someone who understood classroom dynamics, yet who could maintain enough
distance to remain objective about the involved processes. The established strategy was that the data would be the basis for the three major RMRRC thrusts: to effect longitudinal change of the instructional process by input into preservice training programs; to provide more effective inservice training packages; and to provide relevant information to the classroom teacher and school administrator to enable them to utilize the resource system network.

From these needs, a role evolved for a special educator who could collect the needed information and could also serve teachers who requested help. This person would have to be available in the school, would have to be able to work easily with teachers in a nonthreatening manner, and would have to have a diverse background in intervention and diagnostic and prescriptive skills. The RMRRC hoped, both for exploration of the position and for teacher acceptance, that the person could enter the school environment without preconceived notions of the role he/she would play, except that he/she would be a resource for the teacher. The person would serve as an educational strategist and diagnostician and these two descriptors coalesced into the title "stratistician."

Recruitment of stratisticians extended throughout the first part of 1971. The employment requirements were: a master's degree, special education background, and public school teaching experience. These basic qualifications were relatively easy to document; but, more elusive and important were the personal social skill variables which would be needed if the stratisticians were to transfer their teaching knowledge and experience to teachers. Six candidates with the required background who seemed to possess an open, nonjudgmental manner of interacting with others were finally selected, based on personal recommendations of district administrators, from letters of recommendation, and from extensive interviews.

The backgrounds of the six were varied educationally and experientially. One had training and experience with learning disabled and emotionally handicapped children; one held an educational diagnostician certificate and had taught children with learning disabilities; another had taught the educable mentally retarded and had participated for several years in formulation of biological science curricula for the handicapped; two other people had certificates and experience as school psychologists; and the last had
taught educable mentally retarded children and had professional and research experience in deviant behavior. All had some type of administrative experience, and all had public school classroom experience.

The stratisticians participated in a six-week summer workshop to increase their competence in the following skill areas: observation, screening and diagnosis, planning, organizing ideas and selecting clues, communication skills, evaluation, and re-programming.

When school started in September, 1971, the six stratisticians were ready for placement. Five were placed in elementary schools: Central and Dugway in Tooele District; Franklin and Timpanogas in Provo; Alta View in Jordan. From the perspective of the national resource network these five stratisticians were viewed as part of a local resource system. The sixth pilot situation was provided by a stratistician who worked in the SEIMC in the Southwest Educational Development Center (Iron, Beaver, Washington, Kane, and Garfield Districts) and who tested the resource model at the intermediate level.

The elementary schools represented a wide range of available support services. One school was a Title I school in an urban area; one school with a highly mobile student body was located on an isolated military base where the school population represented a cross-section of cultural attitudes, values, and socio-economic status. One pilot school initiated a resource room; two other schools had existing resource rooms. Various types of team teaching were represented in the five schools. Two of the schools had extensive support staff services (psychologist, speech therapist, remedial reading teacher, . . .), and the three other schools had minimal services.

Regardless of the available support services, the six stratisticians found it difficult to facilitate all the potential educational opportunities for the handicapped children. Within broad limits, the five stratisticians assigned to faculty in-house roles operated in similar ways despite their different academic backgrounds. Based on experience, they developed an awareness of the importance of sophisticated observational techniques and of the need for each individual to sharpen his/her observation skills.
The principals of the five pilot schools were involved in the stratistician operation, but the stratisticians were not part of the administrative structure, and they did not evaluate the teachers. Occasionally the stratistician, at the teacher's request, taught a lesson in order to demonstrate a new teaching method or teaching style which the teacher wished to learn. The initial contact always was made by the teacher, either regular or special, and all observations were undertaken with the teacher's permission.

The stratistician's emphasis in the provision of services was to better equip the teacher with tools and techniques to teach handicapped children. A key element of this strategy was the development of informal assessment techniques to supplement formal assessment or when this information was not available to provide the entire assessment base. If evaluation data were not available in a child's file, testing was requested, but experience has shown that the stratistician was more likely to find a voluminous file of test data for the handicapped child. Although the data in the file were extensive, usually there weren't any indications of suggested prescriptive or remediative methods or materials that would enable the teacher to better serve that child. Part of each stratistician's job was to share experience and knowledge so the teachers could expand their diagnostic-prescriptive skill repertoire. The key element of this approach was informal assessment techniques that used regular lesson materials to establish a student's academic skill profile and, in turn, provided an effective guide for planning a program of remediation steps.

Data collection forms were evolved to record the intervention processes. In addition to information identifying the child, the teacher, and the stratistician, the reporting form included a two-part anecdotal problem description as perceived by the teacher and by the stratistician. The alternative educational strategies were listed, plus the source of the strategies (teacher or stratistician). The rationale for selection or rejection of any strategy also was listed.

For example, the first alternative considered by the stratistician may not have been used because the teacher did not have the necessary training to implement the strategy. This information was used as an
informal needs assessment by RMRRRC staff to determine what inservice training packages should be designed by the center. Considering the selected strategy, expected behavioral changes were noted, and the success or failure of the various strategies recorded, again with the outcome as perceived by both the teacher and the statistician. Data on the various facets of support or lack of support from the home were also contained in the record.

The data from the forms were utilized in many ways because they presented an ongoing account of change and growth in individual children, teachers, and statisticians: The primary use of these data was to determine existing needs and their priorities, and then to formulate packages of techniques or alternative strategies for specific problems. This information also contained implications for change in preservice programs, and formal methods for transferring this knowledge to universities were being developed as the program ended.

Because of the many demands placed on the statisticians, and because of the ambiguities inherent in an evolving role, it was felt that opportunities for dialogue between the statisticians and the RMRRRC resource staff should be built into the pilot program. Consequently, one day each week the six statisticians met with the complete RMRRRC staff. These sessions allowed time for an open dialogue on problems, concerns, questions, and for sharing of interventions and solutions. Some structured presentations on data collections, implications, and new methods or materials were usually included. These weekly meetings helped to maintain focused communication between the statisticians placed in the schools and the back-up personnel at the center.

The statisticians, placed in the RMRRRC's second year, were primarily to collect data and were extremely well received in their schools. Their one-to-one, on-the-spot, inservice function appeared to fill a real need of teachers. The qualifications and characteristics which determine success in the role could not be precisely determined, but it appeared that the original estimate of the equal weight of personal skills of the statistician with the academic and experiential background was correct. Generally, the introduction of the new role in the educational system resulted in serving more handicapped children more efficiently, and caused the re-definition of existing roles in the traditional support patterns.
As stated in the original proposal, the RMRRC concept was based upon two premises: (1) all teachers can become more efficient in their teaching, and (2) all children can learn, regardless of their handicap, if appropriate methods can be identified and implemented. These premises are still basic to the project, and the acceptance of the pilot programs reinforces confidence in these statements. The base data collected by the statisticians in the schools, plus data collected and research conducted by the central staff members, were directed toward formulas for change which considered the unique needs and resources of districts, schools, and teachers as they relate to improved learning opportunities for all educationally handicapped children.

In June, 1972, BEH requested that the RMRRC extend services to Idaho, Montana, and Wyoming, as well as continuing services to Utah. Outreach activities were then initiated in these states. The activities in each state were selected and designed in cooperation with the respective State Departments of Special Education. All regional activities and planning were coordinated by a Steering Committee composed of state directors of special education in the assigned region, and one other representative from each state selected by the state director. Also participating in Steering Committee meetings were representatives from regional and state Special Education Instructional Materials Centers (SEIMCs), state resource coordinators,* and RMRRC staff members.

Initial RMRRC endeavors, identified by SEA and LEA advisory boards, aimed at developing an innovative support service model to expedite special educational services to children who were identified as handicapped, but who were not receiving any special services in the public school system. The statistician demonstration model evolved as described earlier. This model was aimed at providing a multiplier effect; the statistician served teachers responsible for educating handicapped children in regular as well as special classrooms and, therefore, became a key ingredient of

*State resource coordinators were funded by RMRRC outreach funds and were selected by the state directors of special education in each state to coordinate resource activities designated by the state and to serve as a liaison person between the RMRRC and the State Department of Special Education.
the outreach effort. By the 1973-74 school year the
stratistician program expanded to 17 LEA-sponsored
special educators filling the stratistician role and
helping to meet needs of handicapped children where
other services were not available. The model was
shown to be transportable and could be implemented by
rural or urban districts in any state. A training
manual for use in training stratistician-type inter-
ventionists is available for use in developing this
type of model in districts.

In addition to the stratistician demonstration
project, state identified needs--delimited by the
parameters of the RRC legislation--were addressed
by the RMRRC in each state in the assigned region, i.e.:

Providing technical assistance in accumulating
data needed to fund and implement educational
programs demanded by new state mandatory legisla-
tion for all handicapped children (Idaho).

Providing technical assistance in regionalizing
administration of and accountability for special
education services (Montana).

Initiating a stratistician-type program (with
Area Resource Teachers) in remote areas of a
state (Montana).

Providing technical assistance to identify handi-
capped children and resources (Wyoming).

Facilitating establishment of a demonstration
project for mentally retarded, hearing-impaired
students (Wyoming).

Providing technical assistance to articulate the
processes involved from needs assessment through
programming and evaluation to serve all handi-
capped children in a given district (Utah).

An elaboration of the types of RMRRC outreach programs
of each state is presented in a later chapter.

In addition to assisting the states as briefly
summarized above, the RMRRC provided, at the request
of the states, two nationally prominent special educa-
tors (Maynard C. Reynolds of Minnesota and David L.
Lillie of North Carolina) to provide ongoing consulta-
tion to the outreach states. A final third-party evalua-
tion report prepared by Dr. Lillie can be found in
Volume III.
CHAPTER 3

PURPOSE AND DIRECTION

This chapter will present the transition of the purpose and rationale of the RMRRC into the goals and objectives which guided the center's operation. The discussion in the first and second chapters established the basis for this transition, discussing the basic purpose and philosophy of the national and regional resource systems. These discussions represent global views from which evolved the specific RMRRC program elements.

This chapter is comprised of sections which reflect part of that transition. The first section discusses the role of the RMRRC as perceived by the center staff. The second section uses this perspective to define the center's role as a regional agent. From these statements a series of goals, objectives, and expectations are defined in subsequent sections. The materials will reflect some unevenesses which show both the growth of the center and the changes in the RRC guidelines.

The Role of the RMRRC

The RMRRC was established to stimulate change in the field of education through the generation of new models of services for handicapped children. Such new models have implications for the service, evaluation, and training dimensions of the educational system. Thus, the process of stimulating change will demand the cooperative efforts of state departments of public instruction, school districts and universities. The role of the RMRRC is seen as one of a focal agent for these agencies, about which an effective regional system of resources can be generated.

This role of the center was based on the following premises and observed needs:
1. Traditionally, there has been an over-reliance on the self-contained special class as the modus operandi for providing services for handicapped children. The efficacy of this approach for meeting the needs of all handicapped children has been challenged. In addition, available financial and personnel resources suggest that all children in need of special services will not be served in a self-contained classroom;

2. There is a need to reconceptualize services for handicapped children that transcend the traditional organizational schemes. As an initial step in this direction, the RMRRC perceives the need for regular and special education to identify cooperative means by which these services can be effected in lieu of the traditional dichotomy for delivery;

3. There is a need to minimize labeling as the vehicle for delivery of educational services, so attention needs to be given to children's problems as perceived by teachers before formal labeling occurs;

4. As an initial step in the study of these variables, the RMRRC assumes the need to study problems of the current delivery of services for the handicapped in schools with different delivery systems.

The preceding premises were the underlying elements of the role the RMRRC envisioned for itself during its first year. From this experience and that of other centers, a broader perspective evolved and the basic premises were expanded to reflect a role of a regional resource agent and of a synergistic element. With this broader view, the following basic premises and needs were added to the foundation elements of the RMRRC role:

5. There is a need to develop and maintain a regionally based resource system that could provide support to individual states and could help diffuse validated educational techniques and procedures;
6. There is a difference between the needs of LEAs and SEAs in terms of resource staff and technical assistance;

7. An RRC needs to be responsive to the varying needs of the region, and also foster cooperation between agencies to increase the effectiveness of available resources and monies to handicapped children;

8. There needs to be better definition of the needs and existing services of the region, from a large-scale view (state-wide) to the viewpoint of the educational process within the classroom;

9. There is a need for development of methods of interacting effectively with states and of an integrated outreach program to add to the delivery of resources across the region;

10. There is a need to affirm to SEAs that a regional center can provide added resources to enhance state capabilities to serve handicapped children.

11. There is a need for the center to function in an advocacy, stimulus and resource role to the educational systems in the region, without preempting their primary educational function and responsibility.

The preceding definition of basic premises suggests that two main interaction roles can be defined for the RRC, one on the instructional unit and one on the regional charter in support of the first role. These roles can be considered to relate in a primary or direct service function, and a secondary, or indirect service function respectively. The remainder of this section will deal with the RMRRC instructional unit role.

The instructional role can be seen as child-centered via the immediate instructional process; this contrasts to the regional role, which is also child-centered, but focuses on the educational system that supports the process of instruction. In this
context the RMRRC could pose its primary role in terms of the center's basic concern; namely, that many handicapped children were not being serviced by the most advantageous or appropriate educational methods. The companion concern inherent in the basic RRC concept is that it is not necessary to categorize or label children within an educational setting to provide appropriate educational services, and therefore, the negative aspects of labeling can be avoided. Based on these charter concerns, the RMRRC saw a need to help reconceptualize the role of special education so that the total education community assumed responsibility for solving the problems of exceptional children.

The outgrowth of these concepts has been that the responsibility for failure of children in schools must be accepted by schools, and that there was a need for the educational process to concentrate upon the interaction between individual children with teachers in the teaching/learning situation. Two basic premises are involved in this philosophy, that every child can learn regardless of handicap, and that better utilization of educator-to-educator resources can improve teaching.

The basic premises defined the RMRRC's role. The teacher, as the controlling agent in the instructional situation, was the primary target if the center hoped to affect the education of handicapped children. Due to the scope of its charter and the number of unserved handicapped children, the RMRRC could not assume responsibility for the direct instruction of children, but rather it focused on providing resource persons (stratisticians) to facilitate individual teacher's interactions with exceptional children. The range of the special needs of handicapped children required that the RMRRC develop strategies to eliminate the tenuous idea that one teacher can cope effectively with the needs of all children. In developing these strategies the RMRRC sought to illustrate available resource people who could be used most effectively in the instructional process.

With increasing frequency, schools recognized this defined need for backup resources for teachers and handicapped children. To provide this service the center needed models of special and regular classrooms. The identification and development of
these models became part of the RMRRC's self-defined role. The development of the models, in turn, provided a procedure for continuously improving the center's role definition.

The RMRRC model that focused on the instructional process within the educational system (and its role) is depicted in Figure 3.1. The model was selected because of its flexibility in educational programming of children, the well-known and accepted representation of special education's goals, and the consistency with the basic precepts of the RMRRC philosophy. Specifically, the RMRRC saw its role on this model as helping to increase a child's options for mobility in the educational service system which allow for transitions to services closer to a regular class placement when appropriate.

The adaptive and flexible nature of this service model increases the flow of students, resources, and services across administrative boundaries. For teacher effectiveness in the instructional process, it is imperative that all phases of educational programs and activities for each child be interrelated, not dichotomized. To achieve this integration, the coordination emphasis must be placed on a teacher's role, and the administrative and supervisor activities must be geared toward facilitating and enhancing the instructional process. Often a teacher has not been able to operate as a manager of educational resources for each child. Instead, the functions that were intended as supportive, (administrative, resource services) have often become the programming agents. The instructional process is the core of the educational process, so the teacher should coordinate educational resources to facilitate the learning process. In this conceptualization, the teacher is the focal point of the RMRRC's activities.

For maximum effectiveness the teacher needs diagnostic information on each child and on how to effectively use these data. This information must be available to the teacher as needed for specific classroom situations. The development of resource systems to insure the availability, vitality, and applicability of such information includes the following components:
Fig. 3.1. Continuum For Delivery of Services
A Framework for Considering Some Issues in Special Education*

(1) Individual learning characteristics of children in descriptive terms;

(2) Learning objectives for each child written in behavioral terms and descriptions;

(3) Directions for curricular organization and implementation;

(4) Continual evaluation and reassessment of each child in order to redefine and to facilitate instructional methods and procedures;

(5) Information on behavioral consequences and expectancies as a result of techniques, methods, and specified conditions provided the teacher;

(6) Assistance in maintaining learned behavior through behavioral strategies consistent with learning objectives.

As indicated from this list, the emphasis in the center's role is on behavioral definitions that are concomitant with instructional needs. Traditional information (intelligence test scores and other gross data information) is in a secondary role, providing backup diagnostic data. The intervention role stresses developing and utilizing a common language to aid the teacher in integrating the large volume of information on the educational system, i.e., curriculum, diagnosis, evaluation, instruction, and administration. Such information rarely provides the teacher with data directly applicable to instructional procedures. One major function of the center has been to develop models and programs used in preparation of educational prescription. This procedure is viewed conceptually in Figure 3.2.

The process depicted was a critical variable in the development of the center's role and its operation. The dimensions in the model became key elements in the center's program and activities, and heavily influenced its role. This interaction was observed in the implementation of the prescription process for individual children as defined by the following:
What information is needed for writing educational prescriptions, e.g., family history, teacher reports, clinical observations, etc.? What are the ingredients of an educational prescription, e.g., what behavior is targeted to aid children in the learning process? How is an educational prescription utilized by a teacher to aid children in the learning process?
<table>
<thead>
<tr>
<th>Stages</th>
<th>Implementation Responsibility</th>
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<tbody>
<tr>
<td>I. Observing, identifying and describing behavior.</td>
<td>I. RMRRC staff in cooperation with school personnel, et.al.</td>
</tr>
<tr>
<td>II. Hypothesizing a strategy or strategies (for teacher and/or child).</td>
<td>II. RMRRC staff and individual teachers.</td>
</tr>
<tr>
<td>III. Testing hypothesis through teaching.</td>
<td>III.</td>
</tr>
<tr>
<td>IV. Hypothesis evaluation</td>
<td>IV. Teacher and RMRRC staff.</td>
</tr>
<tr>
<td>V. Generalizations and conclusions; projections.</td>
<td>V. Teacher, school administrative personnel, and RMRRC staff.</td>
</tr>
</tbody>
</table>

Furthermore, the implementation process was viewed sequentially, specifically and/or globally by the center. For example, a child may need one or more prescriptions over a number of years, and these prescriptions may relate to specific behaviors (i.e., psychological climate). Figure 3.3 illustrates these concepts.

The theoretical or conceptual framework (outlined in the preceding discussion) of the RMRRC was eclectic so a broad package of educationally relevant strategies could be developed. This eclecticism was facilitated by using observable behaviors rather than by labeling children or relying on theoretical assumptions.

The initial RMRRC operational goals reflected this basic definition of the center's role:

1. To develop educational strategies for teachers to better serve exceptional children and to provide information relevant to flexible alternatives for child placement, teacher education, and teacher/child interaction skills;
Fig. 3.3 Nature and Variety of School Experience
2. To serve children by applied research methods through resources to teachers and by collecting data relevant to the operational model of the center;

3. To respond to problems identified by generalizing developed strategies and to disseminate this information throughout the region and/or nation via workshops, case studies (of districts as well as of children), simulation models, newsletters (if applicable), IMC satellites, through teacher training techniques, and through a national data bank, when developed;

4. To develop training models for preparing people (students and/or teachers) to serve as resource persons for teachers of exceptional children.

The center's growth and development was based on this definition of its role on the instructional aspect of the educational system. As it matured it began to develop a role that, although it encompassed the instructional aspect, was much broader, since it dealt with the system's structure as viewed regionally. The RMRRC became a regional focus for special education and for the processes of effective instruction of the handicapped child. The following section discusses the center's larger role as it is envisioned.

The Regional Role of the RRC Program

The primary goal of BEH is to assure an appropriate educational program for all handicapped children by 1980. The RRC mandate, as specified in January 1974, is to assist in the accomplishment of this goal:

The Regional Resource Center Program has as its goal encouraging and promoting the development and application of exemplary appraisal and educational programming practices by State and Local educational agencies.
RRCs are to help the nation reach this goal by working with SEAs to assure effective appraisal and educational program placement for all handicapped children by providing technical assistance and demonstrations of systematic, comprehensive appraisal for handicapped children which result in children receiving appropriate, quality special educational services, and provide assistance to educational agencies in adopting such appraisal practices. A systematic comprehensive appraisal process includes:

1) referral and screening;
2) individual assessment;
3) development of appropriate individualized educational program and placement;
4) implementation of the educational program based upon effective communication and coordination among essential personnel;
5) provision and maintenance of testing and evaluation practices to determine the effectiveness of the individual educational program and also to assure the continued appropriateness of the educational program and placement.

Implicit in this stated RRC role is the need to develop and to implement procedures for shared and extended resources that assure exemplary appraisal and programming practices. This statement also implies that a major part of the RRC role is that of a stimulus for change within the region. The stimulus is provided by developing resource system responsiveness to need so that SEAs and LEAs will use the components of the systematic, comprehensive, appraisal process.

Planned change can be accomplished and described in a number of ways. One approach by Havelock (1973) suggests four ways or "functions" to facilitate planned change or planned innovation. Havelock relates
these functions to operations by individuals --catalysts, solution givers, process helpers and/or resource linkers. The interactions of the user through these four types of staff functions with RMRRC services is represented in Figure 3.4.

The catalyst stimulates the potential user to think about and work on an observed or reported serious problem or need. The catalyst also seeks to fuse elements of the system so persons of common interests can interact with provided services. Although the catalyst may upset the status quo, he does not necessarily have any particular solution. When alternative solutions are offered, the role changes to one of the other three functions.

The solution giver has a definite idea or suggestion for the user. His primary task is to know when and how to offer the solution and to be able to adapt it for the user's specific situation.

The process helper knows how change occurs in individuals and in organizations and can assist the user in the process. The process helper shows the user how to: 1) recognize and define his needs; 2) diagnose problems and set objectives; 3) acquire relevant resources; 4) select or create solutions; 5) adapt and install solutions; and 6) evaluate the installed solution.

The resource linker assists the user in finding and using available resources inside and outside the user's system. Resources are defined broadly and include: 1) financial; 2) knowledge of solutions; 3) knowledge and skills in diagnosing problems; 4) formulating and adopting solutions 5) expertise on the process of change; and 6) people with time, energy and motivation to be of assistance.

Havelock points out two process-helper issues which relate to the RRC. Firstly, the user's problems and needs must remain the planning focus. Secondly, the goal for the process helper is not the installation and acceptance of the solution, but rather the user's development to handle the problem-solving process on his own. In effect, the process helper works himself out of a job.

Examination of the RMRRC history indicates that
Fig. 3.4 Schematic representation of the interaction between PRRCC roles and the users.
the center has functioned in all four of the above-mentioned roles in the outreach efforts in Utah, Idaho, Montana, and Wyoming. The RMRRC regional role is centered around the problems and needs of handicapped children as defined by the users (State Departments of Education), and by the parameters of the RRC mandate (i.e., appraisal and programming practices). The RMRRC must continue to function in this role of regional catalyst, solution giver, process helper, and resource linker in order to move toward the 1980 BEH goal of an appropriate education for all handicapped children.

The basis for, and the relationships of, the activities defined in the interaction between the RMRRC and the educational system is outlined in Figure 3.5. The interaction process are the four roles suggested by Havelock. The setting defines the organizational elements to which the RMRRC must be responsive.

The interstate setting contains activities that will be provided across all states, based on shared, common needs. This facet of the model illustrates the possible roles the center can play on the provision of unique services. The many intrastate settings provide the vehicles to individualize activities to meet needs of both educational organizations and children as identified by each agency or by independent assessment. The content elements refer to specific activities mandated for RRCs.

The procedure implicit in the model's concept is that the center's response is flexible and can respond to the individual situations. The flexibility is illustrated in Figure 3.6. It depicts various combinations of process responses to a range of content needs of users. This flexibility results from the center's focus on response modes to users needs and problems rather than on classical definitions of staffing functions which are adapted to needs, or as often happens, needs adapted to staffing functions.

The basic process model (depicted in Figure 3.5) also illustrates another key point in the RMRRC's role definition. There is a distinction between the setting elements. There is not a common response to all educational organizational levels, but an adaption to the organizational unit. A distinction is drawn
Fig. 3.5 The RMRRC process model showing the interaction possibilities among RMRRC processes, state needs, and the RFP mandates.
Fig. 3.6 Model of individualized services to states.
between the resource needs of each organizational unit, and a clear separation is made between the needs of organizational units that support the instructional process.

The separation of the RMRRC role relative to user type was a key distinction in RMRRC services. The need for the distinction was not clearly defined in early center history, but grew as the center evolved and became strong as the center's regional role developed with its outreach program. Explicit definitions were developed during the closing year of operation, and the importance of this basic distinction, obvious (in hindsight), became a planning cornerstone for the delivery of services.

The distinction can be further illustrated by considering the needs of the user for setting and process functions, as depicted in Figure 3.7. The focus of the direct service level is instruction, so the objective is to respond to the teachers' and students' needs on educational programming. The response to LEAs and SEAs is a response to the needs of implementing strategies and activities that will support the instructional process with resources, information, and materials.

For example, SEA personnel have discussed the need for training and/or upgrading the skills of existing staff members in SEAs and LEAs as well as in other agencies for handicapped children services. They also have discussed the desirability of developing demonstration programs that could be used statewide. Other requests have reflected questions on procedures for statewide needs assessment, program planning and evaluation, and the location of resource personnel.

LEAs, by contrast, have become increasingly interested in the instructional process, and although information is requested on program planning, evaluation and needs assessment, there has been an increased emphasis on curriculum and diagnostic-instrument selection. The primary interest in the acquisition and application of resources has been to instruct a specific child. The RMRRC as a resource agent to the teacher must respond in terms of specific diagnostic-prescriptive procedures. Each level of the system, and its response, becomes increasingly specific as the instructional process has been approached.
<table>
<thead>
<tr>
<th>Educational System Element</th>
<th>Service Function</th>
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<td></td>
<td>Catalyst</td>
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<td>SEA</td>
<td>I</td>
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<td>IEA</td>
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<td>PARENT</td>
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I = Indirect Focus  
D = Direct Service Focus  

Fig. 3.7 Focus on the RRC Relation to Education Agency Role
The RMRRC regional role is envisioned as an extension and outgrowth of the combination of elements outlined in the preceding discussion. The service and regional role have not been considered mutually exclusive, but rather integrated and related elements of a service aimed at the educational needs of the region's handicapped children. The service functions are a form of needs assessment by which the center determines necessary regional services, and back-up resources for educators. The key concept underlying this approach is the synergy developed through the range and perspective of the center.

The center, in serving an intrastate function, is in a position to determine common problems and to pose solutions. The center, in an interstate function, is also a transfer agent for methods and procedures between states and avoids the costly replication of development of procedures for similar efforts in different states. The center also serves as an advocate for handicapped children.

Additionally, the center provides resources to the SEA with technical assistance, flow-through monies, or links to resource people or information. Another important ingredient of the center's role is its facilitory perspective, and the requirement to develop cooperation for it to deliver services. In all interactions with the educational system the center is a nonregulatory agent; hence, its focus on developing cooperation between agencies and itself serves an important service function.

The discussion has outlined a center role and response to a specific mandate and need. This role definition is a general statement of purpose; a more specific statement is in the goals and objectives that were set to aid in the translation of intentions to actions. The following sections of this chapter present the transition from general to specific.

**Evolution of Goals and Objectives**

The evolution of goals and objectives of the RMRRC was an ongoing process over the history of the center. This evolution reflects the ongoing development of the RRCs as a national system. The early period of the center's history was one in which the
RRC system had recently been legislated and the translation of the initial concepts underlying the legislation had not been articulated into program guidelines. Each RRC evolved its own direction from the general program directives in the proposal guidelines.

The development of each center therefore reflects its own interpretation of the guidelines and legislation. This lack of specificity was a general BEH program strategy for the RRCs, as a means of collecting data on alternative models for the delivery of resource services (stated in the BEH proposal guidelines). The centers had to develop the focus they felt was appropriate and then transfer it into statements of intentions that would form activities.

The methodology for establishing the management and design of a center with the scope of an RRC had never been considered. Each center had to develop its own concept of a regional center's function, as well as try to design and then operate a center without a specified methodology. The problem was treated by Melichar (1972, Vol.6) who the centers after they were in operation for about two years. This review of the system suggested that a major problem in development of effective services through the RRCs was a general lack of articulation of purpose which was evidenced by the lack of directed goals and objectives. A set of objectives was hypothesized (Table 3.1) to represent the direction of the RRC system as it then existed.

The objectives reflect a strong university base and combine service, training, and research functions inherent in the proposal guidelines. These objectives were restated relative to a service and resource operational framework in Table 3.2 in the summer of 1973 to reflect the effects of interim work on the organization of large service systems. The objectives are the same, but they are structured differently.

This change in perspective within the system is further illustrated by the proposed workscope, Table 3.3, developed by the RRC directors in the fall of 1973 (effectively the outline is a series of goals and objectives the center directors felt were desirable). This workscope was the last one developed by RRC directors for submission to BEH, but feedback from the Bureau was never received on this nor on
Table 3.1

Regional Program-To-Objectives Outline*
(From Melichar, December, 1972)

Service Program Objectives

1. To provide improved educational services to handicapped children.

2. To provide additional diagnostic and curriculum development, evaluation, and media services to the classroom teacher of the handicapped child.

4. To develop a reduced dependence on use of handicapping labels by use of the diagnostic-prescriptive model.

5. To provide consultative services for parents of handicapped children.

6. To improve educational resource allocation procedures in the region for the handicapped population.

Training Program Objective

3. To improve educational methods and training of classroom teachers.

Research and Evaluation Program Objectives

9. To determine the need for and provide for supplemental resource services.

11. To determine an effective mode of operation.

16. To develop and undertake an ongoing impact and effectiveness evaluation of center operations.

Management Program Objectives

7. To develop and operate a regional system for coordination of resource services within state and local educational agencies.

8. To capitalize on the existing resources to increase their effectiveness.

* The objectives were developed from the original RRC guidelines and from Melichar (November, 1972).
10. To provide a highly specialized regional center for the diagnostic-prescriptive educational model.

12. To develop ties to state and local agencies.

13. To establish a regional network of associate centers.

14. To establish need, training, and research programs.

15. To establish operational ties to the regional SEIMC system.
Table 3.2

A Hypothetical List of Objectives For The RRC Based on
Reading of Original Listing
(From Melichar, August, 1973)

Service Objectives of RRC

1. To provide improved educational services to handicapped children.

2. To provide additional diagnostic, curriculum development, evaluation, and media services to the classroom teacher of the handicapped child.

3. To improve educational methods and training of classroom teachers.

4. To develop a reduced dependence on use of handicapping labels by use of the diagnostic-prescriptive model.

5. To provide consultive services for parents of handicapped children.

6. To improve educational resource allocation procedures in the region relative to the handicapped population.

Operation Objectives of the RRC

7. To develop and operate a regional system for coordination of resource services within state and local educational agencies.

8. To capitalize on the existing resources to increase their effectiveness.

9. To determine the need for and provide supplemental resource services.

10. To provide a highly specialized regional center for the diagnostic-prescriptive education model.

11. To determine an effective mode of operation.

12. To develop ties to state and local agencies.

13. To establish a regional network of associate centers.

14. To establish need training and research programs.
Table 3.2 Continued

15. To establish operational ties to the regional SEIMC system.

16. To develop and undertake an ongoing impact and effectiveness evaluation of center operations.

**PNC System Management Objectives**

17. To develop a national regional resource center system.

18. To integrate the regional resource center operation with the SEIMC/RRC network.
I. Provide Services for Handicapped Children

1. Provide direct services to referred handicapped children.
   1A. Conduct screening or other identification procedures to locate potential handicapped children.
   1B. Provide diagnostic procedures to determine the "certifiability" of potential handicapped children.
   1C. Provide educational needs assessment and prescriptive services for referred handicapped children.
   1D. Implement educational programs for referred handicapped children.
   1E. Evaluate educational programs implemented for referred handicapped children.

2. Refer handicapped children to appropriate services.
   2A. Cooperate with existing referral agencies for screening and identification of potential handicapped children.
   2B. Cooperate with existing service agencies to arrange for the diagnosis of potential handicapped children.
   2C. Cooperate with existing service agencies to insure appropriate educational needs assessment and prescription for handicapped children.
   2D. Cooperate with existing service agencies to insure appropriate educational programs for handicapped children.
   2E. Cooperate with existing service agencies to insure appropriate evaluation of educational programs for handicapped children.

II. Provide Services for Service Personnel and Parents of Handicapped Children.

1. Provide services to insure needed special education skills in personnel serving handicapped children.
   1A. Provide assistance or training to insure appropriate screening and identification of potential handicapped children.
   1B. Provide consultation or training to insure adequate diagnosis of potential handicapped children.
Table 3.3 Continued

1C. Provide consultation or training to insure appropriate educational needs assessment and prescription for handicapped children.

1D. Provide consultation or training to insure appropriate educational programs for handicapped children.

1E. Provide consultation or training to insure appropriate evaluation of programs implemented for handicapped children.

2. Provide services to assist parents of handicapped children in meeting their children's educational needs.

2A. Provide initial consultation or training to help parents become more effective in helping their handicapped children.

2B. Provide continuing assistance and support to parents of handicapped children upon request.

2C. Refer parents of handicapped children to existing services as necessary and appropriate.

2D. Provide or cooperate with existing service agencies to insure appropriate evaluation of services provided to parents of handicapped children.

III. Provide Services for Schools and Other Agencies, Organizations or Institutions.

1. Provide services to improve special education services programs in local and intermediate agencies, organizations and institutions.

1A. Stimulate and support (i.e., through demonstration projects, technical assistance, etc.) development of improved capability to assess program needs.

1B. Stimulate and support (i.e., through demonstration projects, technical assistance, etc.) development of improved special education program planning and development capability.

1C. Stimulate and support (i.e., through demonstration projects, technical assistance, etc.) improved special education programs.

1D. Stimulate and support appropriate evaluation of educational programs.

2. Provide services to assist state special education agencies in achieving program or systems improvements.

2A. Assist (through application of "flow-through" funds, technical assistance, etc.) the development of improved identification/needs analysis.
Table 3.3 Continued

2B. Assist (through application of "flow-through" funds, technical assistance, etc.) the development of improved program planning, budgeting and evaluation procedures.

2C. Assist (through application of "flow-through" funds, technical assistance, etc.) in the development of improved special education program support services.

3. Provide services to assist other state agencies with responsibility for handicapped children in achieving program and systems improvements.

3A. Assist the development of improved identification/needs analysis.

3B. Assist the development of improved program planning, budgeting and evaluation procedures.

3C. Assist in the development of improved program support services.

IV. Operate a System for the Identification or Development and Distribution of Resources to Improve Educational Services for Handicapped Children.

1. Operate a system for matching special educational needs of handicapped children with resource services (agencies, personnel) and/or program prescriptions.

1A. Identify, classify, and maintain current files on personnel and program resources.

1B. Operate a system to insure effective identification and refinement of personnel and program resources.

1C. Operate a prescription retrieval system to provide informational support to personnel serving handicapped children.

2. Operate a system for the acquisition, classification, retrieval and dissemination of non-prescriptive resource information.

2A. Identify and specify resource information requests.

2B. Operate a system for the acquisition and processing of needed information (i.e., exemplary programs, new research findings, etc.).

2C. Coordinate with other relevant efforts (i.e., NCEMME) to document exemplary special education programs, procedures, etc., and develop information materials which will enable school administrators and others to effectively utilize the best available practices.
Table 3.3 Continued

2D. Operate a system for the dissemination of needed information.

3. Operate a program to develop needed personnel, program, and services resources.

3A. Develop and provide demonstrations or workshops to facilitate identification and utilization of special education resources.

3B. Develop and provide training in the preparation and conduct of demonstrations, inservice training or workshops.

3C. Develop and provide training in the organization and development of personnel development programs.

3D. Conduct demonstrations, inservice training, or workshops to improve special educational programs.

3E. Conduct demonstrations or workshops to promote awareness of current special education needs, trends, strategies, etc.

4. Operate a program to research and develop needed new methods, techniques, devices, and facilities relating to early identification, diagnostic testing, educational evaluation, and/or education of handicapped children.

4A. Specify methods, techniques, devices, etc., which are inadequate, ineffective, or non-existent.

4B. Design and conduct appropriate research and development activities to improve or provide needed methods, techniques, etc., including adequate field-testing or other means of evaluating products (coordinate with R & D).

4C. Arrange for appropriate dissemination of product information (related to IV-2C above).

V. Participate in a National System for Evaluation of Regional Capabilities to Provide Needs-Satisfying Services.

1. Operate systems to specify special education needs in the region.

1A. Obtain and analyze data on population of handicapped children.

1B. Obtain and analyze data on program characteristics and program needs.

1C. Obtain and analyze data on resource requirements.

1D. Periodically summarize needs information relative to Regional program objectives.
2. Cooperate with national, regional, state and local agencies and institutions to facilitate processes of acquisition and utilization of evaluation data.

2A. Assist USOE and other national agencies and organizations in the design and development of a national system.

2B. Cooperate with local, state and regional coordinating agencies, organizations and institutions to retrieve, interpret, and disseminate regional data to the national system.

2C. Promote and facilitate the utilization of national data for local, state and regional agencies for planning and development of short-term and long-term planning objectives.

developed by:

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The ongoing development process illustrated in these statements of RRC purpose constrained and influenced the RMRRRC development. It was constrained by limited methodology, direction statements issued by BEH (or the lack of statements), and thinking and procedures of other centers. The growth of the RMRRRC, therefore, was reflected in its statements of goals and objectives, but also these statements reflected the general state of the RRC systems, and the Bureau's conceptualization of the RRC system and purpose.

The development of the goals and objectives of the RMRRRC can be described in three distinct stages. The first stage comprised its first two years of operation. These early statements of goals and objectives were very general, but not interrelated (see Tables 3.4, 3.5, and 3.6). The second stage reflected the growth of the center's planning capability in developing general and specific objectives. The third stages of development represented the last year of operation in which these objectives were defined and related to specific activities and organizational entities within the center. These last two years will be discussed in following, separate sections.

The goals of the first two years (Table 3.4) reflected the influence of the proposal guidelines, defined target areas of service, applied research, training and a fourth area--dissemination. The consistent element in all goals was the focus on the teachers. Each activity was aimed at making the teacher more effective in serving handicapped children. The general objectives (Table 3.5) followed this pattern, but limited the potential activities of the center which were further restricted by the specific objectives (Table 3.6).

An equally important RMRRRC target was the educationally handicapped child in the regular class. This intention established the continuing basis for RMRRRC activities. This decision reflected the influence of the national trend in special education, the philosophy of key staff members and the observed service needs of educationally handicapped children. This focus remained consistent with the original RMRRRC proposal to BEH; that proposal stressed a noncategorical
Table 3.4

Initial Center Objectives
(1970-1972)

1. To develop educational strategies so teachers can better serve exceptional children and to provide information on flexible alternatives for child placement and programming, teacher education, and teacher/child interaction skills.

2. To serve children by applied research methods; through resources for teachers and collection of data related to the operational model of the center.

3. To respond to problems identified by developed strategies to disseminate this information throughout the region and/or nation, via workshops, case studies (of districts as well as of children), simulation models, newsletters (if applicable), IMC satellites, teacher training techniques, and use of the national data bank, when developed.

4. To develop training models for preparing people (students and/or teachers) to serve as resource persons for teachers of exceptional children.
Table 3.5

General Objectives Years 1 and 2
(1970-1972)

The general objectives of the Regional Resource Center are:

1. To provide structures for the development and refinement of evaluative and prescriptive techniques for educationally handicapped children;

2. To initiate and provide assistance in developing and prescribing experimental and innovative instructional techniques, procedures, and materials;

3. To provide an on-going evaluation of educational and/or behavioral prescriptions;

4. To provide assistance to school districts and agencies in implementing educational programs as a result of center recommendations;

5. To evaluate the center's effectiveness with instructional and administrative procedures; and

6. To conceptualize and implement new or revised existing training programs for professional personnel (e.g., teachers, psychologists, etc.) in colleges and universities in the Rocky Mountain Region.
Table 3.6

Specific Objectives Years 1 and 2
(1970-1972)

The specific objectives of the resource center are:

1. To investigate practices, problems and perceived needs of teachers in implementing the concept of individual differences when working with educationally handicapped children;

2. To analyze the information obtained in #1 and to formulate behavioral objectives for teachers;

3. To formulate various teaching strategies (prescriptive teaching patterns) which may aid in achieving the behavioral objectives;

4. To provide sequential, in-service, teacher-education programs which will assist teachers in understanding behavioral descriptions and their role in implementing teaching strategies;

5. To assist the teachers in implementing this information in their specific classroom;

6. To develop systems for assessing effectiveness of behavioral descriptions and teaching strategies in the classroom;

7. To disseminate information to regional personnel on how to implement in the classroom the prescriptive strategies used with the target population; and

8. To sponsor a series of conferences for higher education personnel in the Rocky Mountain area on creation or modification of professional preparation programs.
description of educational programming, and the stress continued into the third year of funding.

Direct services to handicapped children were generally limited to interventions through teachers. The goals and objectives defined a perspective for the center on development of procedures for altering instruction, rather than for immediate change. The statements established an intent to study the intervention, often through provision of direct services to teachers. However, they did not call for broad changes in the region.

**Goals and Objectives - Third Year (1972-1973)**

The Rocky Mountain Regional Resource Center maintained the focus on the following, overall goal for the 1972-73 operation:

To develop new models (products) to assist teachers in providing better educational services to exceptional children.

To guide the activities aimed at that goal, the RMRRC staff defined three long range planning subgoals for the 1972-73 funding period. These subgoals were:

1. To help improve preservice preparation of teachers of exceptional children;

2. To help improve inservice training of teachers of exceptional children;

3. To facilitate the efforts of teachers of exceptional children through the development of a resource support system.

These subgoals were important because the RMRRC staff was convinced that these three areas promised the greatest potential for maximum, educational impact. Subgoals two and three relate directly to more immediate improvement in the existing educational environment. The goals were defined in response to preliminary data collected during the 1971-72 funding period, and to the expressed concerns of field personnel who indicated the need for both general and specific changes in inservice training for teachers. From this information base, additional needs were
evident which related to the necessity of providing innovative resource support to the classroom teacher. This support was often either unavailable or utilized ineffectively.

Attention to these two subgoals seemed to promise more immediate improvements in service delivery to exceptional children; however, by simply focusing attention on these two areas, it seemed that a continual, static, stopgap operation would result. To work toward overall improvement and the greatest long-range impact, it appeared vital to pay attention so preservice preparation could be more closely aligned with field needs, then the avenues of attack on the center's major goal would be more comprehensive. Subgoal one was viewed as being field-tested by the Department of Special Education at the University of Utah, with the resource center serving a vital and contributory role.

Each subgoal involved multiple strategies to facilitate goal achievement, and these strategies will be further broken down into more direct, operational tasks. Following a modified PPBS approach, these more specific activities will be discussed below. In relation to subgoal one, three strategies were viewed as necessary for achieving "... improvement of preservice preparation of teachers who are involved in the instruction of exceptional children." They were:

1.1 To collect field data on educational problems which may be either circumvented or ameliorated by changes in the preservice preparation of teachers;

1.2 To process information or data on educational problems and alternatives in order to design changes in preservice preparation which improve teacher skills in circumventing educational problems;

1.3 To design and produce educational products (i.e., instructional modules, information packages) which will be incorporated into preservice teacher preparation to implement skills aimed at circumventing classroom problems.
The activities implied by Strategy 1.1 focus on three "tasks." They were:

1.1.1 To collect data on specific educational problems which detract from instructional effectiveness and on interventions of educational strategy alternatives which remove or minimize the deterrent to educational effectiveness;

1.1.2 To collect data on the broader ecological influences on the educational environment which hinder educational effectiveness;

1.1.3 To collect available resource information (e.g., human resources, materials, demonstration projects) which could provide support services for education.

Activities represented by task 1.1.1 were for the 1971-72 funding period, but were also ongoing. The continuation of these activities was essential to gathering more definitive information. Initial exploratory efforts in this area during 1971-72 guided the resource center into the areas represented by Tasks 1.1.2 and 1.1.3.

In relation to Task 1.1.2, preliminary implications, drawn from collected data and subjective impressions by field personnel, indicated that influences outside the classroom had vital impact on instruction. Previously, sporadic evidence indicated that various influences surrounding the school environment—the ecological aspects—were extremely important in effectiveness of instruction.

Resource center field personnel found it necessary to assume a variety of demeanors to maximize their effectiveness in the field. Without fail, identification of and adaptation to influential dimensions of the educational environment (beyond and in addition to the teacher-student dyad) were central to the statistician operation. As the resource center staff became aware of this information it highlighted the need for a more systematic approach to assessing influences on education. Systematic assessment approaches, vital for intervention and inservice training, were maximally effective. Collection of
this data had two-fold importance. Firstly, such information systematically improved the effectiveness of the resource center's field operation for service delivery. Secondly, if this information had potential long-range impact, it was incorporated into the pre-service teacher preparation.

It was anticipated that data collection would focus on the identification of potentially influential factors in the educational environment. These efforts were to describe factors such as parental attitudes toward the school, faculty attitudes, socio-economic status of the school clientele, stability of the student body (i.e., primarily transient or stable), faculty stability or turnover. Data collection flowed through several phases of the work from initial exploratory efforts to more refined queries and to implications relating data to influences on the education.

In relation to "ask 1.1.3, "to collect information on resources which are available in an area (e.g., human resources, materials, demonstration projects) which could provide support services for the educational process," the rationale and implications seemed clear-cut. The initial phases of the operation indicated need for access to educational resources for the field. Direct information on this need had come primarily from the center's work in Utah, but through contacts with educators and administrators from Idaho, Montana and Wyoming, the RMRRC staff felt similar needs existed throughout the region.

The development of a resource system was then incorporated into the conceptual framework for 1972-73. Part of this period was devoted to refining the specific design of such a system. Available information indicated that, in many situations, the absence of an awareness of available resources detracted from effective instruction. Thus, one dimension of an effective resource system for this region seemed to be a data cataloguing of available resources by subregion. This catalogue, when combined with a retrieval system to facilitate access to data on available resources, promised substantial potential for improvement in instructional effectiveness at both the state and regional level.

From the perspective of data management within
the RMRR, the resource system suggested an important data collection function. Collection of information in terms of available resources both within the state of Utah and the broader region was essential if these resources were to be effectively used on an area-wide basis. Although refinement was to come as the system entered the developmental phases, the initial categories of resources which were being considered included:

1) personnel (diagnostic, training, consulting, etc.);

2) materials (instructional, diagnostic, professional information for improvement of personal skills such as bibliographies on certain areas); and

3) ongoing, regional projects (e.g., demonstration projects, educational experiments, service projects, etc.)

For strategy 2, three tasks were identified. To recount, this strategy's aim was "To process information or data on educational problems and alternatives in order to design changes in preservice preparation which improve teacher skills in circumventing educational problems." Other tasks of this strategy were:

1.2.1 To analyze the data and information on educational problems, interventions, ecological influences and support resources to promote improvement in preservice teacher preparation.

1.2.2 To draw implications from data and information analyses for changes in content and/or teaching processes of preservice teacher preparation.

1.2.3 To design new additions, modifications and/or deletions relative to preservice teacher preparation (e.g., instructional modules, packages, staffing patterns, etc.).

These tasks represented process activities which link data collection to the output product activities. Analysis and implications (1.2.1 and 1.2.2) of the field information were essential activities if the
improvement of service delivery through preservice preparation was to be conducted in an orderly and reasoned fashion.

To achieve strategy 1.3 "to design and produce educational products (i.e., instructional modules, information packages) which may be incorporated into preservice teacher preparation to implement skills aimed at circumventing classroom problems)" the following tasks were identified:

1.3.1 To develop packages (e.g., program patterns, instructional modules, etc.) which may be incorporated into preservice preparation programs that promise skill acquisition in areas of intervention service activities in the field;

1.3.2 To refine and polish such preservice training packages as mentioned in 1.3.1 through pilot assessment and field test implementations;

1.3.3 To develop preservice packages which may be incorporated into preservice preparation programs that will facilitate teachers-in-training in acquiring skills in search and access of educationally related resources;

1.3.4 To provide resource retrievals for students in preservice preparation programs as a means of demonstrating both the available resources and the utility of a resource system.

As mentioned previously, the resource center did not intend to undertake preservice teacher preparation, as this role was not the immediate task of RRCs. Much of the center's activities, however, had considerable potential for improvement of preservice preparation. Dramatic changes in preservice patterns were underway in many programs across the country, and in the Department of Special Education at the University of Utah. To lack significant input on these changes from the RMRRC would mitigate the potential improvement in teacher preparation. Subgoal number 1 and its related strategies and tasks were the primary role (in terms
of actualization) of the university, but were presented as a part of the RMRRC conceptual design to highlight one anticipated outcome (impact) of the center's field-based needs assessment and data collection.

On the subgoal level, the second general subgoal of the RMRRC spoke to improvement of inservice training for teachers of exceptional children. To achieve this subgoal, the three strategies were:

2.1 To collect data in the field on educational problems which may be either circumvented or ameliorated by changes in the inservice training for teachers;

2.2 To process information and data on educational problems and alternatives in order to design changes in inservice training patterns and programming which promise teacher skill improvements in circumventing educational problems;

2.3 To design and produce educational products (e.g., information packages, inservice instructional modules) which may be incorporated into inservice training patterns and/or programming to implement skill improvements aimed at circumventing classroom problems.

Each strategy involved several tasks. Tasks for strategy 2.1 were:

2.1.1 To collect data on specific educational problems which detract from instructional effectiveness and on intervention alternatives for inservice, teacher-skill acquisition that establish a more effective educational situation.

2.1.2 To collect data, with the intention of drawing implications for in-service teacher training, on the broader ecological influences which contribute to problems in educational effectiveness.

2.1.3 To collect information on available resources (e.g., human resources, materials,
demonstration projects) since their utilization could enhance inservice information dissemination and could provide support services for education.

In relation to strategy 2.2, three tasks were identified as helping "to process information and data on educational problems and alternatives in order to design changes in inservice training patterns and programming which promise teacher skill improvements in circumventing educational problems." The tasks supporting this achievement were:

2.2.1 To analyze the data and information on educational problems, interventions, ecological influences and support resources in order to promote improvement in inservice teacher training;

2.2.2 To draw implications from data and information analyses for changes in content and/or delivery patterns of inservice teacher training;

2.2.3 To design new additions, modifications and/or deletions in inservice teacher training (e.g., instructional packages, delivery patterns, etc.).

The tasks supporting 2.2 linked data collection to output activities. To facilitate the achievement of strategy 2.3, four tasks were outlined. Strategy 2.3 was "to design and produce educational products (i.e., information packages, inservice instructional modules) which may be incorporated into inservice training patterns and/or programming to implement skill improvements. . ." The tasks for this strategy were:

2.3.1 To facilitate inservice training through interventions with educational strategy alternatives when specific educational problems arise in the statisticians' schools.

2.3.2 To refine and package, through pilot assessment and field test implementations, dimensions of intervention alternatives for broader inservice
training impact.

2.3.3 To develop inservice packages and/or modules which may be incorporated into (or may alter) ongoing, inservice training programs that facilitate teacher skill acquisition for search and access of support resources.

2.3.4 To provide retrieval of information on resources in the area where a teacher is working or, where possible, to facilitate the acquisition of available resources, and to indicate available resources and to demonstrate the utility of a resource system.

The third subgoal stated that the center would "...facilitate the efforts of teachers of exceptional children through the development of a resource support system." To achieve this subgoal, the three strategies were:

3.1 To collect field information and data on educational problems which may be either circumvented or ameliorated by change in or utilization of resource support systems for teachers;

3.2 To process information and resource data in order to design changes in resource systems which promise improvement in assistance to teachers;

3.3 To design and produce resource products (e.g., retrieval of information on available resources, etc.) which may be incorporated into the support system of teachers and which promise improvement in the instruction of exceptional children.

Each of these strategies involve several tasks if educational improvement were to occur. The tasks for strategy 3.1 were:

3.1.1 To collect information on human resources and descriptions of their skills (i.e., diagnostic: educational, psychological, medical; training,
inservice, evaluation; consulting; counseling) which may serve to alleviate educational problems in the field;

3.1.2 To collect information, in cooperation with the Instructional Materials Center, on material resources (e.g., instructional; diagnostic; professional skill information--bibliographies, reviews) and to facilitate appropriate matching to problem areas in the field.

3.1.3 To collect information on resources in terms of demonstration or exemplary projects which are ongoing, through a variety of agencies (e.g., state departments, universities, local districts, private agencies, service programs, volunteer structures) and which may be viewed as ways to alleviate problem areas in the field.

Strategy 3.2 stated that the resource center would "... process information and resource data in order to design changes in resource systems support which promise improvement in assistance to teachers." Two tasks were identified to support the strategy. These tasks were:

3.2.1 To design a system to implement the cataloging of resource information and data which will permit accurate retrieval in a format which maximizes use by field personnel;

3.2.2 To design and implement a retrieval system which will permit access to information concerning resources which are of use to the field.

It was not the intention of the RMRRC to re-discover the "wheel" of information retrieval. The center intended to use the experience gained in previous projects and efforts on this complex process, and wherever possible, the resource center planned to use existing services and resources.

Strategy 3.3 stated that the resource center would "... design and produce resource products..."
(e.g., retrieval of information concerning available resources, etc.) which may be incorporated into the support system of teachers and which promise improvement in the instruction of exceptional children."
The three tasks which supported this activity were:

3.3.1 To provide information retrieval on human, material and other support resources to the field on request;

3.3.2 To develop and provide resource packages or access strategies which meet more general needs in the field than the specific problem requests as in task 3.3.1;

3.3.3 To develop a resource communication system in the state and region in an attempt to meet unique needs.

The progression of activities outlined under subgoal 3 involved several developmental phases during the 1972-73 funding period. Previous experience had taught the center that an information retrieval system or regional communication relationships and systems do not begin fully operational. Sound foundations must be built if the ultimate impact is to be effective. Preliminary work on Strategies 3.1, 3.2, and 3.3 had already begun and proceeded speedily. It was anticipated that partial operational status would be achieved in these areas by spring, 1973.

The operational processes through which development of all of the activities for 1972-73 emanated, at least theoretically, was from the preceding definition of goals and objectives. Each phase—collection, analysis, implication, pilot packaging/testing, and implementation—was intended to be fully supported by feedback loops that produced the potential for recycling activities. This approach was viewed as the only rational process which promised the most likelihood of change. The aspects of the operation were viewed as harmonious with the resource support system concept. These areas involved the RMRRC, the region, state, intermediate and local district levels. Inclusion of these components seemed essential to effect better educational services to exceptional children.

The preceding goals, subgoals, strategies, and
tasks of the 1972-73 proposal are summarized in Figure 3.8. The summary indicates that the definitions of intentions and purpose formed a hierarchy. An interesting feature of the graph is similar branches from each of the three subgoals. The designer apparently intended to develop identical operations on the three key target areas: preservice training, inservice training, and resource support services.

The terminology strategies and tasks are a little misleading since the entire structure is a series of related goals. The term "goal" describes a long-range statement of general purpose, and generally does not specify a specific outcome in a specific time. Goals define general purpose or intent. By contrast an objective defines a specific purposeful intent to be accomplished in a given time. A behavioral objective defines not only the outcome, but an inherent behavior in achieving the desired outcome.

The distinction between goals and objectives is critical for planning or evaluation. Goals define a general direction, leaving a lot of latitude on specific route or desired outcome. The definition of an operation or activity from a goal is interpretive. Translating a goal to an activity reduces the ability to determine if the desired outcome was achieved.

The 1972-73 statement of purpose is effectively a hierarchy of goals and provides some difficulty in interpretation of expected outcomes. Only tasks are clear perspectives of intended outcomes. The discussion of the goals, strategies, and tasks relates to past RMRRRC activities. Also, the lack of specificity allows for a very strong influence of ongoing activities on center plans.

The hierarchy of goals still represented a key transition in the history of the RMRRRC's planning process. The first two years of operation lacked the structure of the 1972-73 goals. The change reflected the increasing planning and management sophistication of the center, and its effort to produce a directed program of activities. In terms of the center's responsiveness to educational needs and analysis of its activities, this step was crucial.

The goals defined a marked transition to training as the central role of the center. The
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<th>SUB GOALS</th>
<th>STRATEGIES</th>
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<td>1.0 Improve Pre-service Training</td>
<td>1.1 Collect Data</td>
<td>1.1.1 Specific Problems</td>
<td>1.1.2 Ecological Influences</td>
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<tr>
<td>1.2 Process Data and Develop Alternatives</td>
<td>1.2.1 Analyze Data</td>
<td>1.2.2 Draw Implications</td>
<td>1.2.3 Design Changes</td>
</tr>
<tr>
<td>1.3 Design and Produce Educational Products</td>
<td>1.3.1 Develop Packages</td>
<td>1.3.2 Refine Packages</td>
<td>1.3.3 Resource Use Packages</td>
</tr>
<tr>
<td>2.0 Improve In-Service Training</td>
<td>2.1 Collect Data</td>
<td>2.1.1 Specific Problems</td>
<td>2.1.2 Ecological Influences</td>
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<tr>
<td>2.3 Design and Produce Educational Products</td>
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<td>3.0 Develop a Resource Support System</td>
<td>3.1 Collect Data and Information</td>
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<tr>
<td>3.2 Process Data and Develop Alternatives</td>
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<tr>
<td>3.3 Design and Produce Resource Products</td>
<td>3.3.1 Information Retrieval</td>
<td>3.3.2 General Packages</td>
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**Figure 3.8**
Goal Structure Summary 1972-1973
stratistician concept was continued as an inservice training activity. The data collection activity was based on the stratistician model, yet the goal structure does not indicate the collection process.

To summarize, the goal structure provided a general statement of intention, but did not provide guidelines on how to achieve the desired goal. Also, the outcomes were not usually specified. These weaknesses caused a poor definition of processes and operations for the center. It would be expected that a difference in purpose existed between different organizational elements of the center.

Goals and Objectives: Fourth Year (1973-1974)

The trend toward more directed activity of 1972-1973 was accelerated in 1973-1974. The goal structure of 1972-1973 was transformed into a goal objective structure as outlined in Tables 3.7 to 3.10. One interesting aspect of these objectives was that they were grouped in a similar manner to the initial set of objectives and to the proposal guidelines (training, service, and applied research). The overall goal for 1973-1974 was: To facilitate development of a resource support system for each handicapped child in the region.

The 1973-1974 objectives also reflected a growing awareness of the need to relate the goal objective structure to organizational components within the center. Defining major groupings of objectives probably reflected the organizational structure—in effect, the reverse of the ideal—but it was an important step toward establishing a need-directed and accountable resource system. In most instances outcomes were specified, and guidelines for processes were established. But the presentation objectives lacked specific relationships to needs and general purpose.

The objectives showed an evolution over a four-year span to a very directed and accountable system. The transition could have been shortened with the provision of technical assistance from BEH project officers with available materials relevant to this evolution. At the end of the four-year period, the RMRRC planning was beginning to develop the necessary
<table>
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<th>TACTICS</th>
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<td>To develop and/or conduct in-service training workshops for teachers, support personnel, and administrators on identified priorities for handicapped children.</td>
<td>1. Determine criteria for selection of persons and districts to participate in program.</td>
</tr>
<tr>
<td>STRATEGY 1: To field test stratistician model in Utah utilizing district personnel trained and facilitated by RMRRC staff member.</td>
<td>2. Select districts, schools, and generalists as part of program, develop a Participating Districts Advisory Committee (PDAC) comprised of administrators in those districts.</td>
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<td>3. Develop training program for the participants.</td>
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<td>4. Provide an ongoing back-up support system from the RMRRC to the participants.</td>
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<tr>
<td>STRATEGY 2: Conduct up to ten workshops on Systematic Observation of Behavior (SOB) and/or competency modules and/or program adjustments.</td>
<td>1. Develop workshop presentation on SOB (relates to Objective III, Strategy 1).</td>
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<tr>
<td></td>
<td>2. Develop workshop presentation on competency modules (relates to Objective III, Strategy 2).</td>
</tr>
<tr>
<td></td>
<td>3. Develop workshop presentation on program adjustments (relates to Objective III, Strategy 3).</td>
</tr>
<tr>
<td></td>
<td>4. Train (at least) three people to each present workshops described in Tactics 1, 2, and 3.</td>
</tr>
<tr>
<td>STRATEGY 3: Conduct up to four workshops in region on responding to requests for identification, diagnosis, or programming for handicapped children.</td>
<td>1. Develop workshop on identification.</td>
</tr>
<tr>
<td></td>
<td>2. Develop workshop of diagnosis.</td>
</tr>
<tr>
<td></td>
<td>3. Develop workshop on programming.</td>
</tr>
<tr>
<td></td>
<td>4. Train three people to each present workshops described in Tactics 1, 2, and 3.</td>
</tr>
<tr>
<td>STRATEGY 1: Develop training modules to individualize Generalist/Stratistrian training and provide information on these modules to universities personnel in region.</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td></td>
</tr>
<tr>
<td>TACTICS</td>
<td></td>
</tr>
<tr>
<td>1. Gather information on competencies needed and ways of teaching them.</td>
<td></td>
</tr>
<tr>
<td>2. Write modules for each competency statement.</td>
<td></td>
</tr>
<tr>
<td>3. Develop presentation and printed information on training programs for universities in the region.</td>
<td></td>
</tr>
<tr>
<td>4. Identify and contact universities in the region indicating availability of training information and disseminate if requested.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 2: Identify competencies needed by resource system personnel (in cooperation with state department personnel for certification guidelines).</th>
</tr>
</thead>
<tbody>
<tr>
<td>TACTICS</td>
</tr>
<tr>
<td>1. Review literature, including ERIC search.</td>
</tr>
<tr>
<td>2. Obtain information from people who have competency programs underway.</td>
</tr>
<tr>
<td>3. Gather information from teachers in the field on competencies they feel are needed to effectively educate handicapped children.</td>
</tr>
<tr>
<td>4. Gistalt information from Tactics 1, 2, and 3 into a list of competency statements, noting the high frequency items.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 3: Respond to university requests for service when possible and disseminate information regarding RMHRC activities where appropriate,</th>
</tr>
</thead>
<tbody>
<tr>
<td>TACTICS</td>
</tr>
<tr>
<td>1. Identify the special education training institutions in the region.</td>
</tr>
<tr>
<td>2. Disseminate relevant information about RMHRC program development to universities.</td>
</tr>
<tr>
<td>3. Respond to requests for services when possible.</td>
</tr>
<tr>
<td>4. Maintain contact with state resource coordinators and involve them in university activities where appropriate.</td>
</tr>
</tbody>
</table>

TRAINING OBJECTIVE II. Stimulate preservice change by curriculum development, by working with state departments in efforts to update certification requirements, and by responding to university requests for services when possible.

Table 3.7 Continued
Table 3.7 Continued

<table>
<thead>
<tr>
<th>STRATEGY 1: Develop a workshop package on Systematic Observation of Behavior (SOB) instrument for use in in-service training.</th>
<th>TACTICS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Collect information prepared by the statisticians on the various aspects of the SOB.</td>
<td></td>
</tr>
<tr>
<td>2. Edit information from statisticians for uniformity.</td>
<td></td>
</tr>
<tr>
<td>3. Determine performance outcomes and write training modules to achieve them.</td>
<td></td>
</tr>
<tr>
<td>4. Train three people to be able to train others on use of SOB.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 2: Develop competency modules for generalist training program for use in preservice training.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Determine competencies.</td>
</tr>
<tr>
<td>2. Determine method of training.</td>
</tr>
<tr>
<td>3. Write modules based on determined competencies to fit desired training methodology.</td>
</tr>
<tr>
<td>4. Assemble all modules into complete package.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 3: Develop a workshop package on program adjustments of which regular classroom teachers need to be aware to more effectively teach children with various handicaps.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Determine program adjustments of which regular teachers need to be aware.</td>
</tr>
<tr>
<td>2. Develop package to facilitate teacher awareness of need for program changes, understanding of methods, and application.</td>
</tr>
<tr>
<td>3. Train three people to be able to present this workshop.</td>
</tr>
<tr>
<td>4. Identify information available on needed program adjustments for specific handicaps.</td>
</tr>
<tr>
<td>STRATEGY 1: Provide technical assistance (TA) to each state director of special education in the region monitoring systems for students, program accountability, and cost effectiveness.</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>TACTICS</td>
</tr>
<tr>
<td>1. Obtain detailed analysis from state directors of need for TA in these areas, and the extent of assistance required to match need.</td>
</tr>
<tr>
<td>2. Facilitate the search in each state for existing efforts.</td>
</tr>
<tr>
<td>3. Locate &quot;experts&quot; in these areas for possible consultation with states.</td>
</tr>
<tr>
<td>4. Arrange for TA by &quot;experts&quot; when requested by states.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 2: Provide monitoring and evaluation of Outreach programs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>TACTICS</td>
</tr>
<tr>
<td>1. Arrange for in-service training to enhance evaluation skills of Outreach state resource coordinators.</td>
</tr>
<tr>
<td>2. Provide &quot;on-line&quot; program assistance by scheduled and monitoring visits to Outreach programs.</td>
</tr>
<tr>
<td>3. Keep accurate records and reports on Outreach efforts.</td>
</tr>
<tr>
<td>4. Hire a full-time evaluation specialist for Outreach consultation on program accountability.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 3: Develop a communication linkage between states in the region by conducting three Steering Committee meetings, by arranging for third-party evaluations, and by written communication.</th>
</tr>
</thead>
<tbody>
<tr>
<td>TACTICS</td>
</tr>
<tr>
<td>1. Plan (at least) three Steering Committee meetings with agenda input from state directors.</td>
</tr>
<tr>
<td>2. Arrange for third-party evaluation.</td>
</tr>
<tr>
<td>3. Respond in writing to all requests for TA.</td>
</tr>
<tr>
<td>4. Expand the EX-SPED system as a basis for a communication network.</td>
</tr>
</tbody>
</table>

Table 3.8 Service Objectives

SERVICE OBJECTIVE I. Provide technical assistance, monitoring, and a communication linkage to Outreach states.
### Table 3.8 Continued

<table>
<thead>
<tr>
<th>SERVICE OBJECTIVE II: Provide direct service throughout the region to individuals, parents, children, or school personnel when requested, if no other services are available.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>STRATEGY 1:</strong> Provide information on due process procedures and/or &quot;need specific&quot; education programs upon request.</td>
</tr>
<tr>
<td><strong>TACTICS</strong></td>
</tr>
<tr>
<td>1. Search literature on due process information and have this information available upon request.</td>
</tr>
<tr>
<td>2. Review existing due process apparatus and legal base services for the handicapped in each Outreach state.</td>
</tr>
<tr>
<td>3. Identify a list of available consultants in area of due process and program development.</td>
</tr>
<tr>
<td>4. Provide TA from the RMRRC regarding due process and/or educational programs upon request.</td>
</tr>
<tr>
<td><strong>STRATEGY 2:</strong> Provide evaluation personnel and/or team to diagnose and/or program for a handicapped child upon request when no other personnel are available to provide this service.</td>
</tr>
<tr>
<td><strong>TACTICS</strong></td>
</tr>
<tr>
<td>1. Obtain assessment skill information from RMRRC core personnel to ascertain possible diagnostic team members on staff.</td>
</tr>
<tr>
<td>2. Formally designate members of such a team with written description of responsibilities.</td>
</tr>
<tr>
<td>3. Collect the necessary tools and instruments with which to give diagnostic prescriptive services.</td>
</tr>
<tr>
<td>4. Identify other agencies and/or persons in region or state to serve as back-up if RMRRC cannot provide needed service.</td>
</tr>
<tr>
<td><strong>STRATEGY 3:</strong> Provide information on ways or procedures to identify handicapped children not receiving services.</td>
</tr>
<tr>
<td><strong>TACTICS</strong></td>
</tr>
<tr>
<td>1. Locate consultants in area of identifying handicapped children not receiving services.</td>
</tr>
<tr>
<td>2. Search literature for information on methods of identifying handicapped children not receiving services.</td>
</tr>
<tr>
<td>3. Compile data on methods and references of unserved, identified handicapped children.</td>
</tr>
<tr>
<td>4. Disseminate compiled data and information upon request.</td>
</tr>
</tbody>
</table>
### Table 3.8 Continued

**SERVICE OBJECTIVE III.** To develop service models needed to provide a resource system for handicapped children.

<table>
<thead>
<tr>
<th>STRATEGY 1: Conduct one regional workshop on identification of and programs for severely handicapped children.</th>
<th>TACTICS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Work with states to get priority needs for a topic conference. a. local planning group b. Steering Committee c. matrix d. national</td>
<td></td>
</tr>
<tr>
<td>2. Program planning: a. agenda b. orchestration c. identify speakers d. print program</td>
<td></td>
</tr>
<tr>
<td>3. Administrative Planning: a. identify facilities b. dates c. participants d. stipendse</td>
<td></td>
</tr>
<tr>
<td>4. Follow-through and evaluation: a. working paper (monograph) b. evaluation</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 2: To develop cooperative service models with regional and state INC's and/or other RRCs and/or other EH programs.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Finalize arrangements with RMHINC for information specialist services.</td>
<td></td>
</tr>
<tr>
<td>2. Contact other RRC's regarding the kinds of packages developed for possible dissemination in RMHINC regions.</td>
<td></td>
</tr>
<tr>
<td>3. Identify other EH programs that might provide information, packages or services to RMHINC regions.</td>
<td></td>
</tr>
<tr>
<td>4. Plan with appropriate regional centers (Greeley, Eugene, etc.) to avoid duplication and to develop complementary services where possible.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 3: Develop and test, on a limited basis, educational service models for populations of school-aged handicapped children found outside the public school.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Identify an &quot;out-of-school&quot; population in a given area.</td>
<td></td>
</tr>
<tr>
<td>2. Research services being received by this population and determine needed services.</td>
<td></td>
</tr>
<tr>
<td>3. Develop alternative service models.</td>
<td></td>
</tr>
<tr>
<td>4. Develop and test delivery of identified services.</td>
<td></td>
</tr>
<tr>
<td>STRATEGY 1: Evaluate and report results of all workshops conducted by the RMRRC</td>
<td>TACTICS</td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
<td>---------</td>
</tr>
<tr>
<td>1. Clarify purpose and scope of all workshops before presentation.</td>
<td></td>
</tr>
<tr>
<td>2. Administer pre- and post-data collection instruments related to each workshop.</td>
<td></td>
</tr>
<tr>
<td>3. Tabulate and disseminate the data gathered from workshops.</td>
<td></td>
</tr>
<tr>
<td>4. Evaluate implementation of workshop objectives.</td>
<td></td>
</tr>
</tbody>
</table>

| STRATEGY 2: Develop a plan for the evaluation of all preservice activities of the RMRRC |
|---------------------------------------------------------------|---------|
| 1. List preservice involvements that fall within the range of RMRRC capacities. |
| 2. Prepare evaluation form and collect information on all preservice involvement by RMRRC personnel. |
| 3. Provide a description of the performance of products of particular preservice programs. |
| 4. Describe conditions under which RMRRC is involved in preservice. |

| STRATEGY 3: Evaluate all packages prepared for dissemination by the RMRRC |
|---------------------------------------------------------------|---------|
| 1. Plan field test of all packages before dissemination. |
| 2. Conduct field test. |
| 3. Evaluate field test. |
| 4. Provide data to RMRRC Executive Committee for decision regarding dissemination. |
### Table 3.9 Continued

**EVALUATION OBJECTIVE II.** Provide evaluation of all Outreach, direct service and service models developed by RMRRC.

<table>
<thead>
<tr>
<th>STRATEGY 1: Evaluate Outreach states' attainment of sub-contract or proposal objectives; evaluate the services rendered by the RMRRC to Outreach states.</th>
<th>TACTICS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Assign one person from evaluation component to have ongoing Outreach evaluation responsibility, and provide back-up support to that person.</td>
<td></td>
</tr>
<tr>
<td>2. Write job description specifying scope of role.</td>
<td></td>
</tr>
<tr>
<td>STRATEGY 2: Revise methods of collecting data on direct services offered by the RMRRC.</td>
<td>1. tabulate services rendered.</td>
</tr>
<tr>
<td>2. Describe changes that occur in the process and/or programs after services are rendered by RMRRC.</td>
<td></td>
</tr>
<tr>
<td>3. Provide diagnostic/programming services when required.</td>
<td></td>
</tr>
<tr>
<td>4. Follow-up for post-test evaluation any direct service conducted by RMRRC personnel.</td>
<td></td>
</tr>
<tr>
<td>STRATEGY 3: Evaluate the service models developed by the RMRRC, e.g., statistical, cooperative services, and out-of-school population.</td>
<td>1. Participate in selection of target schools.</td>
</tr>
<tr>
<td>2. Locate and select instruments for data collection.</td>
<td></td>
</tr>
<tr>
<td>3. Administer or arrange administration of instruments.</td>
<td></td>
</tr>
<tr>
<td>4. Analyze data and write report.</td>
<td></td>
</tr>
</tbody>
</table>
### Table 3.9 Continued

**EVALUATION OBJECTIVE III. Conduct applied research where needed.**

<table>
<thead>
<tr>
<th>STRATEGY 1: Conduct research related to affective variables in the education of handicapped children.</th>
<th>TACTICS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Develop checklist to collect data from teachers.</td>
<td></td>
</tr>
<tr>
<td>2. Administer checklist to teachers in generalist schools and control schools in fall and spring.</td>
<td></td>
</tr>
<tr>
<td>3. Provide in-service training on affective communication to generalists.</td>
<td></td>
</tr>
<tr>
<td>4. Analyze and report data collected in fall and spring.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 2: Research service pattern to populations of handicapped children outside public school system.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Assign one person from the evaluation component the responsibility for the study.</td>
<td></td>
</tr>
<tr>
<td>2. Plan a descriptive study.</td>
<td></td>
</tr>
<tr>
<td>3. Contact various institutions and agencies dealing with handicapped children.</td>
<td></td>
</tr>
<tr>
<td>4. Begin a registry of children not in academic schools and include type of programs in which they are participating</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 3: Conduct a reliability and validity study on the Systematic Observation of Behavior (SOB) instrument.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Train a corps of trainers on use of the SOB.</td>
<td></td>
</tr>
<tr>
<td>2. Arrange to collect data from NHRRC-trained generalists in schools.</td>
<td></td>
</tr>
<tr>
<td>3. Analyze data; make modifications.</td>
<td></td>
</tr>
</tbody>
</table>
### Table 3.10 Management Objectives

**MANAGEMENT OBJECTIVE 1.** Conduct continuous planning toward long- and short-range objectives by use of staff members, consultants and advisory group.

<table>
<thead>
<tr>
<th>STRATEGY 1:</th>
<th>TACTICS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan at least one inner-office planning retreat for the total staff and plan at least two full-day workshops for executive board officers.</td>
<td></td>
</tr>
<tr>
<td>1. Schedule and plan staff retreat.</td>
<td></td>
</tr>
<tr>
<td>2. Conduct staff retreat.</td>
<td></td>
</tr>
<tr>
<td>3. Schedule data for full-day workshops for executive board; plan program and activities.</td>
<td></td>
</tr>
<tr>
<td>4. Conduct executive board meetings.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 2:</th>
<th>TACTICS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bring in at least four consultants to provide service in critical areas, and identify and prepare at least one advisory group(s) once for educational program and consumer input.</td>
<td></td>
</tr>
<tr>
<td>1. Identify and invite members for general advisory board.</td>
<td></td>
</tr>
<tr>
<td>2. Schedule data for general advisory meeting; plan meeting.</td>
<td></td>
</tr>
<tr>
<td>3. Conduct meeting and prepare report.</td>
<td></td>
</tr>
<tr>
<td>4. Be sensitive needs of staff members; locate and bring in needed consultants.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 3:</th>
<th>TACTICS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attend RRI directors’ meetings and other required planning functions.</td>
<td></td>
</tr>
<tr>
<td>1. Communicate regularly with RHI Project Officer.</td>
<td></td>
</tr>
<tr>
<td>2. Attend meetings.</td>
<td></td>
</tr>
<tr>
<td>3. Attend BRI meetings.</td>
<td></td>
</tr>
<tr>
<td>4. Respond to attending other BRI requests when possible.</td>
<td></td>
</tr>
</tbody>
</table>
Table 3.10 Continued

<table>
<thead>
<tr>
<th>STRATEGY 1</th>
<th>TACTICS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prepare and disseminate required progress reports, a renewal proposal and a quarterly newsletter.</td>
<td>1. Assign staff member initial responsibility for progress reports.</td>
</tr>
<tr>
<td></td>
<td>2. Assign staff member initial responsibility for newsletter.</td>
</tr>
<tr>
<td></td>
<td>3. Prepare calendar for submitting reports and newsletter and meet calendar deadlines.</td>
</tr>
<tr>
<td></td>
<td>4. Keep current mailing list of regional and national persons to receive newsletters and/or reports.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 2</th>
<th>TACTICS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conduct on-site visits to related projects; give presentations upon request; and attend national, regional, and local professional meetings.</td>
<td>1. Visit each Outreach state in the RMRRC region at least once.</td>
</tr>
<tr>
<td></td>
<td>2. Attend at least two professional meetings and arrange for staff to attend at least one professional meeting to represent RMRRC.</td>
</tr>
<tr>
<td></td>
<td>3. Present at least twice during year regarding RMRRC activities to national or regional group.</td>
</tr>
<tr>
<td></td>
<td>4. Present at least twice during year to local groups regarding RMRRC.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 3</th>
<th>TACTICS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop media presentations of RMRRC activities.</td>
<td>1. Determine RMRRC activities for media presentation.</td>
</tr>
<tr>
<td></td>
<td>2. Develop presentation.</td>
</tr>
<tr>
<td></td>
<td>3. Develop media for presentation.</td>
</tr>
<tr>
<td></td>
<td>4. Present media package upon request.</td>
</tr>
</tbody>
</table>
Table 3.10 Continued

MANAGEMENT OBJECTIVE III. Maintain adequate personnel, facilities, equipment and supplies to meet RMRC objectives.

<table>
<thead>
<tr>
<th>STRATEGY 1: Hire and maintain competent professional staff.</th>
<th>TACTICS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Interview and hire staff as needed.</td>
</tr>
<tr>
<td></td>
<td>2. Maintain payroll and benefit forms for staff members.</td>
</tr>
<tr>
<td></td>
<td>3. Evaluate staff personnel at least yearly.</td>
</tr>
<tr>
<td></td>
<td>4. Provide in-service opportunities for staff as needed.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 2: Provide adequate facilities for the operation of RMRC programs.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Provide needed space for activities (within budget restrictions).</td>
<td>2. Maintain heating and lights for operations.</td>
</tr>
<tr>
<td>3. Provide adequate telephone services.</td>
<td>4. Arrange for and utilize other facilities when needed.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STRATEGY 3: Provide and maintain equipment and supplies needed to conduct RMRC programs.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Maintain and obtain needed office equipment.</td>
<td>2. Obtain needed office supplies.</td>
</tr>
<tr>
<td>3. Keep accurate record of equipment and supplies expenditures.</td>
<td>4. Obtain required approval from BEM for all equipment purchases.</td>
</tr>
</tbody>
</table>
internal relationships and structure for effective operation.

Many of the major activities implied or stated by the objectives were further broken down into operational descriptions. The further description of intent was strongly undertaken in the descriptions of outreach activities. These descriptions were, in effect, another set of branches of the defined goal-objective structure, and formed the basis for very directed outreach efforts.

The objectives reflected a major change in the breadth of the center's activities. The training objectives basically were identical to the entire goal structure for the 1972-1973 period. The service function combined technical assistance and outreach effort, and reflected the center's increased services to Idaho, Montana, and Wyoming. (The RMRRC was requested to initiate outreach services after the proposal for the previous year had been submitted to BEH, so the 1973-1974 proposal was the first to articulate proposed outreach efforts.) The evaluation function combined accountability measures with applied research, while the management activity reflected a broadened interest in development of a more systematic internal management, better utilization of resources, and better coordination with external agencies.

Hypothetically, the next generation of goals and objectives with specified outcomes could be defined by this past experience. This step would illustrate how the process would continue to evolve, and what level of sophistication should be expected of RMRRC planning. Another approach is to consider the basic impact on past activities and on the organizational structure, and then, based on the two sets of information, another planning effort could be initiated. This approach is being undertaken in this report with the intention of developing the planning base for future RMRRC planning work.

Expected Outcomes

The expected outcomes of the RMRRC were usually stated implicitly in the goals and objectives and in the narrative of the proposals and reports. A basis for ascertaining the difference between intention
and the expected outcomes was developed from the various sources. The lists were developed by reviewing each set of stated goals and objectives and reviewing implicitly stated expectations as positive statements of intended outcomes.

Three basic sets of goals and objectives were used which reflect the periods 1970-72, 1972-73, and 1973-74. The expected outcomes developed from these objectives are presented in Tables 3.11 to 3.13 respectively. The numbering systems refer to the stated goals outlined in the preceding sections of this chapter.
Table 3.11

Expected Outcomes 1970-1972

From Initial Goals

<table>
<thead>
<tr>
<th>Goal</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.a</td>
<td>Educational strategies for use by teachers.</td>
</tr>
<tr>
<td>.b</td>
<td>Information on child placement, teacher education, teacher/child interaction skills.</td>
</tr>
<tr>
<td>2.a</td>
<td>Applied research findings relative to operational model of center.</td>
</tr>
<tr>
<td>.b</td>
<td>Resources provided to teachers.</td>
</tr>
<tr>
<td>.c</td>
<td>Data relevant to center's operational model.</td>
</tr>
<tr>
<td>3.a</td>
<td>Identified general problems of instructing handicapped children.</td>
</tr>
<tr>
<td>.b</td>
<td>Generalized strategies in response to 3.a.</td>
</tr>
<tr>
<td>.c</td>
<td>Above information disseminated through region via (C.1) workshops, case studies (C.2), simulation models (C.3), newsletters (C.4), contacts with IMCs, and (C.5) teacher training techniques.</td>
</tr>
<tr>
<td>4.a</td>
<td>Training models for resource persons.</td>
</tr>
</tbody>
</table>

From General Objectives

<table>
<thead>
<tr>
<th>Obj.</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Structures for development and refinement of diagnostic-prescriptive techniques for the educationally handicapped.</td>
</tr>
<tr>
<td>2.</td>
<td>New instruction techniques, procedures, and materials.</td>
</tr>
<tr>
<td>3.</td>
<td>Evaluations of educational and/or behavioral prescriptions.</td>
</tr>
<tr>
<td>4.</td>
<td>Assistance to school districts and LEAs in implementing educational programs.</td>
</tr>
<tr>
<td>5.</td>
<td>Evaluation of center's effectiveness relative to instructional and administrative procedures.</td>
</tr>
<tr>
<td>6.</td>
<td>New or revised training programs for professional personnel in the Rocky Mountain region universities and colleges.</td>
</tr>
</tbody>
</table>

From Specific Objectives

<table>
<thead>
<tr>
<th>Obj.</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Definition of practices, problems, and perceived needs of teachers in implementing concept of individual differences in teaching educationally handicapped children.</td>
</tr>
<tr>
<td>2.</td>
<td>Analysis of data from 1, and a formulation of behavioral objectives for teachers.</td>
</tr>
<tr>
<td>Obj.</td>
<td>Outcomes</td>
</tr>
<tr>
<td>------</td>
<td>----------</td>
</tr>
<tr>
<td>3.</td>
<td>Teaching strategies (prescriptive-teaching patterns) to reach the behavioral objectives.</td>
</tr>
<tr>
<td>4.</td>
<td>In-service training programs to support 1, 2, and 3.</td>
</tr>
<tr>
<td>5.</td>
<td>Assistance to teachers in implementing programs.</td>
</tr>
<tr>
<td>7.</td>
<td>Dissemination of materials on how to implement the above materials.</td>
</tr>
<tr>
<td>8.</td>
<td>Conference for higher educators to create and modify professional preparation programs.</td>
</tr>
</tbody>
</table>
Table 3.12

Expected Outcomes 1972-1973

1.1 (2.1)* Data on educational problems that can be improved by changes in training programs.

1.1.1 (2.1.1) Data on specific educational problems detracting from instructional effectiveness. Intervention in response.

1.1.2 (2.1.2) Data on ecological influences.

1.1.3 (2.1.3) Information on support services and resources.
  Human resources.
  Resource materials.
  Demonstration projects.

1.2.1 (2.2.1) Analysis of data (1.1.1 to 1.1.3).

1.2.2 (2.2.2) Implications for changes in training.

1.2.3 (2.2.3) Changes in training.
  Instructional modules.
  New instructional packages.
  New starting patterns.

1.3.1 (2.3.1) Packages of skill acquisition in training.
  Program modules.
  Program patterns.

1.3.2 (2.3.2) Pilot tests of (1.3.1)
  Refinement of (1.3.1)

1.3.3 (2.3.3) Training packages.

1.3.4 (2.3.4) Resource retrieval for trainees.

3.1.1 Information human resources as a function of skill.

* 1.-- for in-service training
  2.-- for preservice training
Table 3.12 Continued

<table>
<thead>
<tr>
<th>3.1.2</th>
<th>Information instructional materials resources.</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1.3</td>
<td>Information demonstration and exemplary projects.</td>
</tr>
<tr>
<td>3.2.1</td>
<td>Resource cataloging system.</td>
</tr>
<tr>
<td>3.2.2</td>
<td>Retrieval system. Operation of retrieval system.</td>
</tr>
<tr>
<td>3.3.1</td>
<td>Responses to requests for information on all types of resources.</td>
</tr>
<tr>
<td>3.3.2</td>
<td>Resource packages.</td>
</tr>
<tr>
<td>3.3.3</td>
<td>Regionwide resource communication system.</td>
</tr>
</tbody>
</table>
Table 3.13

Expected Outcomes 1973-1974

| T.1.2 | Conduct up to ten workshops on SOB. Workshop presentation on SOB and/or competency modules. Workshop presentation on competency modules. Workshop presentation on program adjustments. Three people trained in workshop presentations. |
| T.1.3 | Conduct up to four workshops on identification, diagnosis, and programming. Identification Workshop Diagnosis Workshop Programming Workshop. Three people trained in workshop presentation. |
| T.2.1 | Information on competencies. Modules for each competency. Printed materials and presentations on modules. Dissemination of information availability to universities and colleges. |
| T.2.2 | Literature review and ERIC search on competencies. Needs assessment (information) from existing competency programs. Needs assessment (information) from teachers. Combined list of competency statements. Listing of competencies need by resource system personnel. |
| T.2.3 | List of special education training institutions in region. Information on all RRC program disseminated to listed institutions. |

* T.-.- for training objectives
Table 3.13 Continued

Responses to requests
Link state resource coordinators to university programs.
Responses to university service requests.
University involvement in RMRRC activities.

T.3.1 Information on SOB from statisticians.
Edited information on SOB.
Performance outcomes for SOB.
Training modules on SOB.
Three people trained to teach use of SOB.
Workshop package on SOB.

T.3.2 List of competencies for generalists.
Method of training generalists.
Training modules.
Integrated package of training modules.

T.3.3 List of program adjustments.
Packages relative to program adjustments.
Workshop package on program adjustments.
Three people trained to present workshop on program adjustments.
Information of adjustments relative to specific handicapping conditions.

Expected Outcomes 1973-74

S.1.1* Technical assistance (TA) to each SEA, state director of special education.
Detailed analysis from state directors of TA needs and amount of assistance to meet TA needs.
Directory of "experts" by areas.
Consultation to states by "experts."

S.1.2 Program accountability accomplished by monitoring and evaluation.
Inservice training to enhance evaluation skills of Outreach state resource coordinators.
"On-line" program assistance by scheduled and monitoring visits to Outreach programs.
Records and reports on Outreach efforts.

*S.-.- for service objectives
S.1.3 Communication linkage between states.
Three Steering Committee meetings.
Third-party evaluation.
Expansion of EXSPEED system as basis for communication network.

S.2.1 Dissemination of information on vital educational issues.
File of information on due process.
Directory of consultants on due process.
TA from the RMRRC regarding due process and/or educational programs.

S.2.2 Provision of evaluation/diagnostic/prescriptive services for a handicapped child upon request.
Formation of RMRRC diagnostic team.
Written description of responsibilities of RMRRC diagnostic team.
Stockpile of necessary tools and instruments with which to provide diagnostic/prescriptive services.

S.2.3 Information on various procedures to identify handicapped children not receiving services.
Directory of consultants in area of identifying handicapped children not receiving services.
File on methods of identifying handicapped children not receiving services.
Information service to those who request information/materials.

S.3 Service models needed to provide a resource system for handicapped children.

S.3.1 Regional workshop on identification of and programs for severely handicapped children.
List of the states' priority needs for a topical conference.
Evaluation of topical conference.
Post-conference document.

S.3.2 Cooperative service model with regional and state IMC's and/or other RRCs and/or BEH programs.
Services of a RMSETMC information specialist.
Index to other RRC developed packages.
Index to relevant BEH programs that might provide information, packages or services to RMRRC region.
Plan with other RRCs and IMCs to develop complementary services and avoid duplication of services.
Expected Outcomes 1973-74

S.3.3  Educational service models for populations of school-aged handicapped children found outside the public school.

S.3.4  Identification of an "out-of-school" population. Determination of needed services. Description of alternative service models. Development of identified services. Test of the delivery of identified services.

E.1.1*  Evaluation of all in-service and pre-service training, and packaging efforts of the RMRRC. Evaluation of all workshops conducted by RMRRC. Report of results of all workshops conducted by RMRRC. Evaluation of implementation of workshop objectives.

E.1.2  A plan for the evaluation of all pre-service activities of the RMRRC. List of pre-service involvements of the RMRRC. An evaluation form for pre-service involvement. Collection of data from pre-service involvement evaluation.

E.1.3  Evaluation of all packages prepared by RMRRC. Evaluation of field testing of packages, including design and procedure, and results of field testing. Report to RMRRC Executive Committee on field test.

E.2  Evaluation of all Outreach, direct service and service models developed by RMRRC.

E.2.1  Evaluation of Outreach states' attainment of sub-contract objectives; evaluation of services rendered by the RMRRC to Outreach states. One evaluation staff member assigned, who provided back-up support for the Outreach coordinator. Job description of the evaluator assigned to Outreach. Training program for the evaluator assigned to Outreach. Record of behaviorally stated agreements with Outreach projects for evaluation. Evaluation of Outreach projects as behaviorally stated.

*E.-.- for evaluation/research objectives
E.2.2 Collection of data on direct services offered by the RMRRC.
Tabulation of services rendered.
Description of changes that occurred in programs after services were rendered by RMRRC.
Record of diagnostic/programming services requested.
Post-test evaluation of all direct services conducted by RMRRC.

E.2.3 Evaluation of service models developed: statistician, cooperative services, out-of-school services.
List of target schools.
Instruments for data collection.
Record of administration of instruments.
Report of analyzed results.

E.3.3 Applied research.

E.3.1 Research related to affective variables in education of handicapped.
Checklist (instrument) to collect data from teachers.
In-service training on communication (affective) to Generalists.
Report of analyzed data collected on administered instruments in spring and fall.

E.3.2 Research on service to handicapped population outside public school system.
One staff member from evaluation component assigned to research service to handicapped outside public school system.
Outline of a descriptive study of services to handicapped outside public schools.
List of contact with agencies dealing with handicapped children.
Registry of children not in academic schools; listing of the programs these children are participating in.

E.3.3 Reliability and validity estimates established on SOB instrument.
Corps of trained raters on use of SOB.
Report of analyzed data on use of the SOB by Generalists in schools.
Modifications of SOB based on analyzed data.
M.1* Structure for continuous objective setting by staff, consultants, and advisory group.

M.1.1 One inner-office planning retreat for total staff. Two full-day workshops for executive board members. Program and activity schedule for all workshops, retreats. Executive Board meetings.

M.1.2 Meetings with four consultants for TA in critical areas. Meeting of advisory groups for consumer input on educational program. Members of general advisory board identified and invited. Meeting scheduled and reported. Consultants located and brought in as indicated by needs of staff.

M.1.3 Meeting of RRC directors, meetings concerning other planning functions. Communications with BEH Project Officer. RRC meetings. BEH meetings. Responses to other BEH requests.

M.2 Reports of RMRRC activities disseminated throughout the nation/region. Compilation of information applicable to the RMRRC.

M.2.1 Progress reports; a renewal proposal; a quarterly newsletter. One staff member assigned to do progress reports. On staff member assigned to do newsletter. Calendar for submission of reports, newsletter. Mailing list, kept current, of regional and national persons to receive reports and newsletter.

M.2.2 Visits on-site to related projects; presentations given upon requests, meetings attended – national, regional, local – with allied professionals. At least one visit to each Outreach state. Two professional meetings for executives; one professional meeting for staff.

M.-.- for management objectives
Two presentations regarding RMRRC activities to national or regional group.
Two presentations regarding RMRRC activities to local group.

M.2.3 Media presentations of RMRRC activities.

M.3 Adequate personnel, facilities, equipment, supplies to meet RMRRC objectives.

M.3.1 Competent professional staff maintained.
Interviews given; hiring done.
Payroll and benefit forms for staff maintained.
evaluation of staff personnel yearly.
In-service opportunities provided for staff as needed.

M.3.2 Adequate facilities for operation of RMRRC programs.
Space; heating; lights; telephone; other facilities when needed.

M.3.3 Adequate equipment and supplies needed to conduct RMRRC programs.
Office equipment; office supplies; record of above; approval from BEH for equipment purchases.
CHAPTER 4

PROGRAM OUTLINE

Programs grow from goal objectives, organizational structures, available staff preferences, institutional pressures, or some combination thereof. The initial BEH proposal guidelines defined a program structure consisting of research, training, and service components which influenced the selection of goals and objectives and the initial organizational structure for the RMRRC. These goals and objectives, combined with the structure, formed the program outline for the initial years. The program outline will begin by reviewing the organizational structure of the center.

The first organizational structure of the RMRRC is outlined in the schematic of Figure 4.1 and has four major operating units: service, training, evaluation and the director's office. The structure reflected the components of the initial guidelines, and control of the center's operation was very centralized. The structure reflected strict interpretation of the BEH guidelines and presented a basis for center development. Within this context the structure shown was markedly broader and had lost the curriculum, development orientation of the organizational structure originally proposed. (Figure 4.2).

The important issue in developing a perspective of the program outline is that the concept of a Regional Resource Center was a new one, and the concept was poorly articulated by BEH (Melichar, Vol. 6, December, 1972.); the program was experimental; the concept of regional educational services was relatively new, and program planning and operation techniques were still in the developmental stages. The development of the RMRRC program therefore has two separate historic interests, (1) from the viewpoint of the center, the programs it developed, and the people it served; and (2) from the viewpoint of its development as an experimental program with implications for the operation of other large scale educational service
Fig. 4.1 Organizational Structure, November, 1971
Fig. 4.2 Organizational Chart for Proposed Regional Resource Center (Initial Year)
programs. In discussing the evaluation of the program from the basic framework outlined above, this report seeks to present both aspects of program development.

The interesting aspect of the organizational chart is that the training position, a major component, was vacant and had no support staff listed. If the organizational chart for 1973-1974 (Figure 4.3) is compared to this early organizational chart, the training position still existed, but not that of the service coordinator. (The state service coordinator position was formulated after the RMRRC went out into the region.) In actual fact, the service program remained in existence, absorbed the limited training effort and assumed the training title. The beginning of this union of programs and the separation from stated intent can in part be inferred from the goal objective statements in contrast to the discussion of center history in Chapter 2.

The stratistician concept which was the basic element of the service delivery effort had a permeating influence on the center and its operation. The concept was the key driving force for the center's work, but it deviated significantly from the stated objectives. The distortion significantly influenced operations. The operation of the service/training (stratistician) program by mid-1972 became self-directed and self-structured by the individuals involved. The factors involved in this transition and its effect are discussed in more detail in the description of the stratistician model in Volume II, Chapter 5, of this report.

In reviewing the four years of the project to develop a perspective from which to develop this report, another organizational format was developed which is shown in Figure 4.4. The three main groupings are internal functions, services, and advocacy. The components reflect major organizational roles within the center relative to its operation. The relatively equal weights of the components were indicated by the assignment of chapters to each. In reviewing the work from this format, the relative weighting shifted. This shift also reflected the absorption of the research, development and evaluation effort into the service and training area which is graphically depicted in Figure 4.5.

In considering the organization of the RMRRC
Figure 4.3
Rocky Mountain Regional Resource Center
Organizational Chart
1973-74
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Support Staff Activities

Internal Functions
- Management Admin.
- Planning
- Education
- R & D Internal Technical Assistance Evaluation

Service
- Service Model Development (statistician)
- Training (pre & in) Technical Assistance to LFAs

Advocacy
- Information Flow
- Dissemination and Integration flow (including meetings, etc.)
- Coordination with external agencies in region
- Outreach Technical Assistance IFAs and SEAs

Figure 4.4
Stratistician Model

Service/Training

Research and Evaluation

Stratistician Model/Needs Assessment

Workshops

Stratistician Service

Module

Stratistician/Gen'l. Model

Teacher Variables

Outreach

Evaluation

Figure 4.5
Flow of Organizational Components Relative to Stratistician Program
program structure it is then important to consider the separate components, the statistician and the outreach effort. The statistician program was the basic element of the RMRRC; the operation of the center revolved about it completely for two years, and in large part for the entire four-year period. The approaches and program structure for the two areas will be presented separately. A clear separation in philosophy of center operations exists: the statistician concept was an applied R&D with direct service infusion into the system, and the outreach program placed the center in a resource linker and catalyst mode.

Statistician (Service/Training) Component

The initial core effort of the center, the statistician, was envisioned as a combined service-training thrust developed about a core "model." The term model was used to denote the application of a concept to a format that consisted of procedures and activities that the center and its staff would undertake. The overview of this procedure is depicted schematically in Figure 4.6, and also includes a description of the links from the center to external agencies.

The program outlined in the schematic is one in which a series of activities are designed to be undertaken in the special education arena; through these activities data on needs for changes in the existing service level would be defined. The data would be used to build improved program models within schools, but also would be used to provide a base for in-service and preservice training models that should provide longer term changes in the educational system. The program outline allowed for the operation of a pilot program and defined a series of interactions which would occur with various educational agencies from the local to the state level.

The structure of this program in terms of a sequence of strategies was defined in the schematic shown in Figure 4.7. The initial phases of the process can be seen to be conceptualized as a very strong pilot program assessment process, and in these early statements of direction the roots for the statistician program were planted. The center depicted the definition of problems to be evolved
THE NEED
AREN A
EDUCATION/SPECIAL EDUCATION

FORMULATION
OF
PILOT DESIGN(S) TO MEET NEEDS

SERVICE PROGRAMS TEACHERS/CHILDREN UTILIZING DESIGNS

DATA COLLECTION

DATA ANALYSIS

DATA IMPLICATIONS

CREATION OF NEW PACKAGING MODELS FOR SERVICE, TEACHERS/CHILDREN

PILOT ASSESSMENT

PILOT ASSESSMENT

PRE-SERVICE TRAINING UTILIZING MODELS FOR EDUCATION/SPECIAL

IN-SERVICE TRAINING UTILIZING MODELS FOR EDUCATION/SPECIAL

...
1970

Spring
1. Staff Recruitment.
2. Development of Administration procedures and practices for the Center.
3. Formulation and organization of Advisory Board.
4. Formulation of procedures for implementation.

June
5. Identification of target populations.
6. Negotiations with selected school districts.

July
7. Data collection
8. Data Analysis

1971

March

April
Developmental Phase

August

Sept.

September

November

December

1. To implement pilot program.
2. To aid teachers in implementation in their classrooms.
3. To assess the effectiveness of the behavioral descriptions and teaching strategies in actual classroom situations.

1972

August

Sept.

September

November

December

1. To disseminate to regional personnel through various media how the prescriptive strategies used with target populations could be implemented in their school districts and classrooms.
2. To sponsor a series of conferences for personnel in higher education in the Rocky Mountain area to assist them in creating or modifying professional preparation programs.

Regional continuation of educational programs and instructional strategies generated through the Center's effort.

Fig 4.7 Program Development Conceptualization

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from interactions with teachers in schools, including the problems and components of the school situation defined in Figure 4.8. The process was viewed in terms of a Gestalt of activities that impinged together to influence the instructional process.

The stratistician program was seen as the most productive way to gather data on the educational needs of Utah's unserved handicapped children (approximately 40% of the projected total), who were believed to be in regular classrooms. Through stratistician involvement programs could be developed to meet the needs without labeling the children, which was an RMRRC concern. Another influence on the center was Reynold's continuum of services model (Figure 3.1), and the anticipated data should help define blocks or constraints that hinder the movement of handicapped children in the educational system.

A congruence between the stratistician program conceptualization and the problem definition process was evolved through the instructional process. The underlying concept of the program was that better strategies for teaching handicapped children could be identified, developed, and disseminated. The approach of defining these better strategies laid in identifying the variables affecting the instructional process. By studying these variables and their relationships, it was hypothesized that it was possible to better formulate educational programs. The variables occurred in three dimensions: child, process, and instructional placement. The preliminary models defined sixteen variables within these three dimensions as depicted in the diagram of Figure 4.9.

The work undertaken in the center's first year analyzed the variables and from the developed data defined the stratistician as the best method at that time for achieving the program objectives. This decision, in effect, was a major program decision and was the basis of the development of the center's programs for the next three years. The stratistician, as originally conceived, was the needs-assessment link between intervention strategy development and the improvement of training teachers. From the needs assessment it became evident that the stratistician was also an interventionist. This tight and concise conceptualization and formulation became the foundation for the program.

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Emphasis in continuum of services being primarily in the regular classroom with consultation and secondarily in the regular classroom plus resource room service and in full-time special classes.

Fig. 4.8 Interaction of Teacher Problem Perception as a Function of Pilot Program
Fig. 4.9 An Operational Model in Terms of Instructional Situation Variables
An important feature of the conceptualization was the link between the resolution of need and the development of training programs and materials. Every element of the developmental and operational phases in Figure 4.7 eventually pointed towards this end. In the early models of the process the flow from the center to the training activity was mainly informational. In the operational phase the linkage and needs-assessment functions were retained. This decision was, in effect, another major policy decision, a base for the stratistician service program.

The growth of the program became a combination of direct service and inservice training activities. The activity's core was the stratistician—the itinerant interventionist within the regular classroom. The program strategy was to validate the model through pilot programs coupled with rigorous evaluations, and then to disseminate the information. These activities were supported by broad, inservice training and a range of workshops. The linkage to preservice training was through contacts with training institution faculties who had access to the training materials and workshops.

The program of services was also supported by research directed at establishing the impact of the teacher and affective variables on instruction. This research was envisioned as an adjunct to the basic service, so, if the research results did not produce an input to the service/training program, its effectiveness would not be reduced. The research activity was planned as a small part of the overall center effort, and was maintained over the entire project.

An evaluation was meshed with the research program, and assumed an important role. The evaluation was not envisioned as a center-wide validation, but rather as an activity that would operate within and in support of the component programs. The evaluation activities were envisioned as feedback from collected information on the components of the stratistician/training program of the center. The undertaken evaluations were a blend of research, evaluation, and program analysis, and were highly dependent on cooperation between the evaluation and service program staffs.

This basic program structure evolved by the second year of the center's operation and was used throughout its existence. The service/training component was the principal component of the center, with
Outreach and Evaluation/Research as the other two components. The final form of the organization was shown in the organizational chart of Figure 4.3. The outreach effort generally operated independently of the service/training effort (as suggested by the organization structure); hence, the evaluation of the performance of the two approaches was greatly simplified. The separation was not intentional, but rather resulted in the different focuses of the two efforts: the statistician was a validation of a special education service within a school, as opposed to the outreach program's focus on SEAs to help them initiate or improve services within a state.

Outreach Program

The development of the outreach program was different from the statistician training program. BEH, in June, 1972, requested that the RRCs submit proposals for developing the outreach programs for 1972-1973 in addition to their basic operational requests. The program's start was scheduled for that summer. (The RMRRC proposal for 1972-1973 had been submitted to BEH prior to the request for outreach services.)

RMRRC's outreach philosophy came from its early work in Utah and its interaction with the Utah SEA. Before the funds could be obtained from BEH, the state personnel, along with the RMRRC staff, considered courses of action and then drew up plans. The monies were small compared to the states' special education budgets, so the contracts had to respond to needs not covered by the existing budgets. Then, before the final contract was awarded, the RMRRC and BEH reviewed the proposals.

In addition to fiscal resources, the center provided planning, evaluation and other technical assistance. In guiding this effort, a crucial philosophy was developed; the center was a change agent, not a direct intervention agent in the states. Functioning as a change agent became the entire outreach concept. In working with the states the center unobtrusively and cooperatively provided its services. Communication and an information flow with workshops, meetings and seminars between states in the region was this process' major external role.
The outreach program was envisioned by the RMRRC staff as a process of provision of support with development of specific goals and objectives in response to defined, state needs. The program planning and operation of these contracted efforts was as complete and thorough as possible. The center provided each state technical assistance in the development of the program and ongoing evaluation.

The center's objective centered on provision of support, monitoring, facilitating program development and information flow, and development of responses to cross-region (interstate) activities. To accomplish the objectives the strategy of using a small core staff with a limited amount of resource support from the remainder of the core staff was selected and implemented. The main activity in support of the outreach coordinator was support from the project director for interagency contacts, and from the evaluation staff in determining program effectiveness. Therefore, the organizational structure to maintain and to operate the outreach program was simple and small.

The key ingredient in the outreach effort, in terms of developing an effective program, was utilizing tight program planning and management techniques from the state proposals. This strategy was selected to insure that the funds were directed at a specific purpose and that they were effectively utilized. In terms of the outreach program, operation of this strategy was considered the crucial or pivotal element in producing results equal to the cost.

The two main center activities, therefore, were markedly different. The outreach effort was a small core staff using tight programming techniques to produce broad regional changes while considering state needs. The statistician/training program was the development of a specific approach to education, which the center sought to validate and disseminate. Internal planning procedures and definitions of needs were used to program this effort.

Operational Description of the Joint Programs (1973-1974)

To gain a perspective of the operation of the center's programs described in the preceding sections,
an overview of the fourth year of operation will be presented. The overview was drawn from the continuation proposal for the fourth year. The component activities are clearly defined and are focused on the two main center functions: the service/training program and the outreach program.

Consistent with the law and policy guidelines, the RMRRC had further conceptualized educational programs and developed resources to assist teachers in identifying, prescribing and providing for individual differences encountered in the classrooms. However, the regionalization required a restatement of the RMRRC long-range goal. This restatement, which embodies objectives and goals of past years and encompasses operational guidelines, was:

To facilitate development of a resource support system for each handicapped child in the region.

To accomplish this goal, to remain consistent with the law and policy guidelines governing center operations, and to incorporate current BEH emphases from the March 8th memo (an internal document), the efforts of the RMRRC were to facilitate development of resource systems within the region.

A resource support system consists of available back-up support for teachers of handicapped children at local, intermediate, and state levels. At each level, training, service and evaluation should be a consideration (Figure 4-10). With Project Outreach monies, each state was encouraged and assisted primarily in two areas: first, analysis of data obtained in 1972-73; second, development of plans and programs to service all identified, school-aged, handicapped children.

The RMRRC served as the fourth-line back-up support in the resource system; i.e., when a school-aged handicapped child was not served at the local, intermediate, or state level, a referral could be made directly to the RMRRC. The center also provided back-up support, as requested from the state level, in the service, training and evaluation areas. The RMRRC's long-range goal was thus facilitated by initiating the establishment of a total resource support system in each state to serve as rapidly as possible the needs of each handicapped child.
Fig. 4.10
Resource Support System for Handicapped Children
I. **Training**

In an effort to provide back-up services consistent with the proposed state resource support system model, the RMRRC proposed, for the 1973-74 year, that its efforts would be directed in the three component areas of training, service and evaluation (Figure 4-11). The RMRRC emphasized in the training component:

A. **Inservice training** to teachers, support personnel and administrators by developing and conducting requested workshops to meet state priority needs. Training packages to be developed are:

1. Use of a systematic observation of behaviors for assessing needs and prescribing programs;

2. Program adjustments so regular classroom teachers can more effectively teach children with various handicaps.

B. **Preservice training.** It was anticipated that all data collected by the RMRRC would stimulate preservice change. Some specific areas of involvement were:

1. Facilitation of curriculum change;

2. Identification of competencies to better prepare teachers going into special education;

3. Practicum placements.

C. The RMRRC worked with state departments to update, modify or revise certification requirements for existing or new role designations.

D. Establishment of an active packaging dimension: to develop and disseminate packages from field-tested data for inservice training, and for direct service intervention.
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II. Service

The service component of the RMRRC contained three main dimensions: state coordination, direct service and model development.

A. State coordination. This dimension provided:

1. Consultation to each outreach state coordinator in the region through RMRRC liaison support;

2. Regional interstate communication by planning and conducting steering committee meetings;

3. Evaluation by monitoring of states' outreach programs to assure compliance with contracts made with the RMRRC.

B. Direct service: This dimension included services for individual parents, children, and school personnel as requested from the region. Direct service was offered only when a parent, child, or school staff member had exhausted available local, intermediate and state support services and the needs had not been met. Direct service personnel went, when possible, to the area of the request to provide this service.

C. Model development: Service in this area was seen as development of any service models needed at a state, intermediate or local level which required exploration to better meet a state's (or states') needs to provide a resource system for handicapped children. It was projected that any service model developed and field tested would be such that it:

Must improve services to the handicapped;

Must be practical enough to have carry over for those exposed to it;
Must be feasible for school systems and/or other agencies or groups providing service to the handicapped to be able to implement, if desired; and

Must have potential applicability to the RMRRRC region.

In order to make decisions on where and how the RMRRRC should provide services and develop models, identification data from 1972-73 year was analyzed. Location of handicapped children and the adequacies of services had to be determined to know where to facilitate resource development. Since the RMRRRC analysis of past activities indicated the consistency of the model with the needs of Utah and with the law and RRC policies, it was proposed that:

1. The RMRRRC continue emphasis on developing the statistician model. The data input from this emphasis would determine the validity of a statistician as a service model at a local and/or intermediate level for regional transportability.
   a. The RMRRRC placed three statisticians in one or two schools each for the 1973-74 year; the schools were selected on the following bases:
      1. They provided the center with specific kinds of needed data; i.e., minority population, rural and/or isolated population, limited or no special educational services in the school;
      2. They offered strong support to RMRRRC efforts by providing a receptive environment for testing new ideas, models, etc.
   b. The RMRRRC trained and supported 17 district generalists to function as statisticians. This expanded use of "statistician-type" interventionists provided data to test transportability of this service model. This expansion increased the direct service component of the center, and
capitalized on district support of the center by utilizing the 17 district-sponsored generalists.* Following is an outline of the approach:

1. Cooperating districts were determined by:
   a. Ability to sponsor a person with prior training as a generalist;
   b. Agreement that the major focus of cooperating generalists would be on teachers;
   c. Agreement that generalists would be released from their respective schools one day a month during the school year for training at the RMRRC;
   d. Agreement to cooperate in evaluation efforts.

2. Generalists were selected by the following criteria:
   a. They were sponsored by a cooperating district;
   b. They were available for training.

*An official definition of a generalist has not yet been published. A USBE spokesman provided the following information: As a result of described needs of educational specialists working in rural Utah, the concept of a generalist was developed. The purpose is to more broadly train special education teachers so they may serve children in several categories of handicapping conditions. The generalists can work with regular classroom teachers in elementary schools. USBE guidelines for the 1972-73 year made possible, for the first time in Utah, special education funding on a program-planning basis for generalists. A generalist must have certification in some area of special education.
at the RMRRC for two weeks prior to the opening of school and two weeks after the closing of school;

c. Preference was given to generalists in schools in rural areas and/or schools without any other special educational services in the school;

d. They agreed to cooperate in evaluation efforts.

"c." The RMRRC maintained a central staff of three intermediate statisticians whose primary functions were:

1. To provide back-up support and coordinate efforts of up to six generalists;

2. To provide direct service upon request from districts in which they provided back-up support for generalists;

3. To help develop and implement service models, packages, etc. from data obtained.

In the service area, the RMRRC also proposed two other activities which were not accomplished. Firstly the center planned to continue involvement with the Southwestern Educational Development Cooperative (SEDC) where an RMRRC statistician had been placed the previous two years. Due to internal changes in SEDC, this activity was not realized.

A second proposed activity was also unrealized: that of developing and testing on a limited basis educational service models for a population of school-aged handicapped children found outside the public school system. RMRRC staff members contacted the parents of all handicapped children who were on the waiting list for the Utah State Training School. A needs assessment was conducted, but most of the children were receiving services.
III. Evaluation

The third area of the RMRRC was the evaluation component which had the responsibility to:

A. Provide back-up support and evaluation services for the training component, specifically as it relates to:

1. Inservice workshops and packages for teachers, generalists, and administrators;

2. Gathering relevant data in cooperation with the University of Utah and communicating the results to the university for use in the preservice program.

B. Provided back-up support and evaluation services for the service component, specifically relating to:

1. Providing assistance in planning for evaluation of programs within the region in cooperation with the state resource coordinators;

2. Devising methods of collecting data on direct services offered by the center to children, school personnel and parents in the region;

3. Devising procedures for evaluating the service models developed by the center; including the work of the 3 statisticians and the 17 generalists.

C. Continued applied research efforts in:

1. Exploring affective variables in the education of handicapped children;

2. Initiating efforts to investigate service patterns to populations of handicapped children outside the public school system with the main purpose being to assess the extent of available educational services;

3. Arranging field testing and reliability
studies on an instrument for recording observations of children, teachers and their interactions.

IV. Communication

The RMRRC:

1. Developed and distributed a newsletter throughout the region for exchange of ideas and problems, and system-development information to all interested persons within the region;

2. Disseminated information to each state coordinator in the region on the RMRRC back-up service.

PROJECT OUTREACH SYNOPSIS

The following synopsis summarizes proposed Project Outreach activities in 1973-74 for Idaho, Montana, Utah and Wyoming. Not all projected activities were carried out, as the funds granted were half the amount requested. In all cases where major changes were made, the RMRRC subcontracts with each state reflected the renegotiations and plan changes.

Idaho

The second year of operation in Idaho proposed:

A. The initiation of a demonstration model within one of the state's intermediate-level, multi-district regions to experimentally implement a district-service pattern to home-bound, severely handicapped children not receiving educational services;

B. The improvement in service quality to handicapped children in schools. This will be provided by state-level, inservice training to instructional and support personnel through cluster workshops;

C. The development of a state-level, central tracking system. This will be undertaken to provide
for a central registry of handicapped children and youth, and an on-going up-dating of identification data of handicapped children and resources, for appropriate programming. Coordination with other state-level divisions will provide comprehensive information necessary for the tracking and programming of identified handicapped children and youth.

Montana

The 1973-74 project for Montana proposed:

A. The continuation and expansion of the current year's experimental implementation of providing back-up resources for handicapped children through a support system at state, intermediate, and local levels. Added intermediate-level personnel will supervise and implement ongoing or new services and programs that were not feasible during the 1972-73 project year;

1. All of the state's five regions will have a resource person to provide backup support for handicapped children at an intermediate-level in the system.

B. The identification of existing resources for service to handicapped children and youth. Implementation will provide data to complete the Montana needs assessment. Handicapped children and youth are being identified during the current contract period.

Utah

The Outreach program of Utah for 1973-74 proposed three major thrusts:

A. The continuation of the identification, refinement and articulation of the process involved in a school district (intermediate level) to develop and to maintain a program for all handicapped children in that district.

B. A model for the delivery of educational services to handicapped children in rural districts (intermediate level) will be devised and implemented.
C. Efforts to provide districts with information on mainstreaming handicapped children for use when regular class placement is indicated or is the only placement available.

Wyoming

The program for 1973-74 in Wyoming proposed:

A. The initial implementation of a state-level central resource and tracking system which, when fully implemented, will:

1. Provide a registry for handicapped children and youth;

2. Provide for the investigation of methods of service duplication prevention;

3. Collect follow-up data on identified and programmed handicapped population;

4. Facilitate cooperation with other states and intermediate level divisions and agencies as an integral part of the central referral and tracking system.

B. A second objective proposed by Wyoming was to demonstrate the delivery of service to a severely handicapped target population. An intermediate level demonstration model is being planned for deaf/hard of hearing mentally retarded children selected from those identified in the state who are not currently receiving appropriate educational services. (See Figure 4-12)

The separation of the core structure from the outreach program is distinctly visible in the description. The separation occurred in the plan and was evident in the operation of the program for the year. The separation was somewhat an outgrowth of poor planning practice, but the addition of the outreach effort to the core process in 1972-73, and the continued maintenance of the original core focus contributed to the separation. The result was a dual program operation rather than a single integrated effort. The proposal, although including the proposed subcontracts, did not include the function of the core staff in charge of the outreach effort.
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4. Intersaadiatt

St. State 1. = Local

1. Retrieval System

2. Cluster Workshops

RMRRC 79-79

1. Dissemination

2. Institutional follow-up

1. Area Resource Teachers

(2-kind)

1. Deaf/H.E.

Program

Fig. 4.12

Projected Activities in RMRRC Region
1973-74

191
The core staff role in the outreach efforts was crucial as it provided the focus on and fusion of the individual parts of the program. The center's role was to bring in resources and support and to facilitate communication between agencies. This procedure was implemented and operated during the two outreach years primarily by one senior center staff member drawing on support from the project director and the evaluation staff, which averaged a little more than one man-year per year.

Program Analysis

A major goal for the development of the original six RRCs (defined in the original request for proposal guidelines) was testing programs to establish an experimental base for a national network of resource centers. The structure of the center and how the structure affected center operation are important data for the future design and operation of the RRC system, as well as to report on the center's four-year performance. The center, as outlined in the preceding sections of this chapter, utilized two distinct program strategies which provided a good data base for analyzing the effectiveness of the program strategies for providing resource support to educational service agencies in the region.

The core center program developed a specific service-delivery model, validated it, and then implemented the procedures by dissemination. This strategy had many precedents in national educational history and, in effect, was the basis of Title III, Elementary and Secondary Education Act programs on effecting educational change within schools. One difference was that the RRC had a more regional charter than the Title III programs, but the approach was very similar. The center's statistician (service/training) program was an effort of this type.

The base model, evolved over four years, eventually covered 11 districts within Utah in which 17 school-based statisticians provided services in approximately 280 regular classrooms to approximately 6,000 children. The total service program in the four-year history included 31 statisticians (6 in 1971-72; 8 in 1972-73; 17 in 1973-74); they served approximately 550 classrooms and 12,450 children. The concept evolved in three distinct stages, as
described in Part II of this report, which somewhat obscures the evaluation of the effectiveness. This approach provides for one difficulty that can be anticipated from any programming strategy that requires tight control, and operates over a span of time in the educational system.

Once a program leaves the laboratory of a controlled setting, a range of variables are introduced—the outgrowth of factors within the educational system in which the programs are tested. The models, therefore, have to adapt to these variations and changes in the educational situation. Over and above these external influences, the models must reflect a stronger programming than that utilized, in which processes, objectives, and expectations are clearly defined so that the project outcomes can be evaluated.

In contrast to the core program, the outreach form of service model facilitates development of programs. Its concept is that basic elements or ingredients of a service base exist, but that there is a need to link these elements and to supply missing parts for development of a comprehensive service program. The strategy is cast in an advocate role for special education processes and for the handicapped child. A particular service model is not important, but rather the development of effective delivery systems of models or procedures is vital.

In analyzing the differences of the strategies, one approach would be to contrast the models and their results. In recent months the Bureau of Education for the Handicapped issued a Request For Proposal (RFP) for a national network of resource centers which embodied elements of both approaches. The following analysis procedure will use this service delivery model to analyze the two program strategies of the RMRRC, contrasting them to this quasi-standard. One limitation in this approach will be that the RFP model lacks any description of its operational characteristics or its conceptual or philosophic basis, but it does serve as a datum against which to analyze the RMRRC program strategies.

The basic service model defined by the RFP is depicted graphically in Figure 4.13. Two basic functions are: an appraisal program to serve individual children, and a technical assistance program to
Fig. 4.13 Functions as Defined by RFP (Jan. 1974)
states which is to provide flow-through resources. The appraisal program is to be met through an educational evaluation and programming demonstration center, a follow-up program for children tested in the center and a process to help build other assessment centers within each region. The RFP model reflects the two basic components of the RMRRC’s four year operation, the service/training model and the outreach effort. The biggest difference between the two approaches is that the RFP service provision is heavily focused through a center that is not part of the education system, rather than through development of the capability within existing school programs.

In reviewing these structures, an earlier discussion of this concept will be used as a base. The model of RRC operation is presented in the paradigm of Figure 4.14. The separation of the RRC role into functions of the educational system and its services is a key and crucial feature of the program structure. As discussed in Chapter 1, there is a distinct separation between the defined strategies for developing instructional programs and the defined strategies for serving the organizations that provide support to the instructional unit (LEAs, SEAs, etc.). The programming objective, as outlined earlier, is to establish a center structure responsive to these independent, educational service needs. The statistician model is a direct service response within the existing educational structure; the outreach aspect of the RMRRC is a technical assistance effort to the educational support system.

Considering the RMRRC program experience, any far-reaching impact of the service program must be carefully reviewed. The transference of educational prescriptions has consisted of more than developing good diagnostic-prescriptive procedures. It has also required transferring to the teacher the ability to implement the prescription. Earlier Melichar (August, 1973) questioned how effectively a general prescription could be developed outside the normal educational and social setting. The results from the statistician model also suggested that the effectiveness of this process was sometimes inadequate.

The earlier work also suggested that the service model would be more effective if the regional center augmented the resources and services of existing
External Agencies to be Served

Program Organization & Operation Services
- Management
- Planning
- Evaluation
- Needs Assessment

Program Content - Direct Instructional Services
- Curriculum
- Diagnosis
- Prescription
- Operate a demonstration center

Coordinator of Direct Services

Resource Unit
- Resource Services
- Product Development
- Training Packages

Management & Administration
- Planning
- Management Analysis
- Evaluation

Needs Assessment

Programmatic Research

Evaluation & Management Analysis

Flow Between Elements

Fig. 4.14
Organizational Structure
(From Melcher, August, 1973)
agencies and programs. (The resource system in this model is a facilitator, supports others, but does not try to develop internal resource programs.) The outreach program suggested that this method has a high degree of effectiveness; for example, the area resource coordinators in Montana. The center gains leverage as it flows information and resources according to need.

The use of intermediaries (resource coordinators, stratisticians, or itinerant resource specialists) focuses on the movement of people to problems, rather than the movement of the child to the resource people. The results from the RMRRC history show this procedure to be a more effective mechanism, but one problem is that the range of resource skills rises with the increase in range and severity of handicapping conditions. This problem places a constraint on bringing the resource to the instructional situation.

In the outreach work, with the use of central resource pools, the specific problems are met when the needed skills exceed those of a single person. One resource pool in the outreach program provides needed support without reducing the effectiveness of the resource person. Hypothetically, this method could be used with the provision of direct services by the center, but, despite attempts, a good operational procedure was never developed and validated. Successful methods for using the existing resource system were used on smaller scales and proven as viable methods for service delivery. (For an example, see Melichar, December, 1973.)

The crucial element of this approach is that the resource specialist or center has a means for locating needed resources: it is a repository for a resource bank of information, people, service resources, agencies, monies, and diagnostic and prescriptive processes. The center then serves as a resource pool for providing direct and indirect services within the region.

In the RMRRC's outreach program it developed this type of resource file, on a limited scale, for the states. The result was a sharing of resource materials in the region, the influx of resource people as consultants, and a flow of information from the center to the SEAs. On a smaller scale, a similar flow of information was initiated between the center.
staff and the school-based statistician/generalists through the intermediate statisticians of the center's fourth year.

In analyzing the RMRRC history in the perspective of the RFP service model depicted in Figure 4.13, it would appear that the problem of trying to provide a regional diagnostic service through a regional diagnostic center and related centers, would not be effective and, would not, in fact, reach a high percentage of the intended population. Additionally, it would not necessarily supplement or help develop the needed resources within the local regions.

The implications drawn from the RMRRC data base would suggest that the most effective mechanism for providing services is using the regional center as a limited scale model, a focal point from which other resources are utilized. The regional center should establish common problems and solutions in a form of the needs-assessment mechanism and should have a large, available resource pool. The use of the regional center in terms of regional direct services should be limited to the most exceptional cases, and even then it would be best for the center to work with other agencies closer to the child's home.

Also, the RMRRC learned from programming that a range of services was needed to cope with all handicapping problems, but it is difficult to house them in a single center without an extensive budget for staffing the specialties. The better method of program operation was the development of the resource pool. The programming strategy for this data base provided direct service from the existing services system, and the center played the role of the facilitator and resource linker.

In terms of programming, the center also learned that the available monies were miniscule. If it were to provide effective service, it had to establish methods of obtaining leverage for these monies and increasing the marginal rate of return on its investment. For an effective service program, it must seek to be a program which utilized its resources sparingly, avoided replicating existing services, and helped in the delivery of new services.

The relationship between the instructional and the support agencies' services was a critical variable
that was only beginning to emerge after two years of outreach operations. The first efforts emphasized the development of state plans and needs assessments, pinpointing the locations of handicapped children and their required services, and determining available resources. Toward the end of the second outreach year, the RMRRC observed an increase in requests for instructionally centered procedures from the outreach projects.

The center faced the problem of devising internal programming strategies to cope with the interface between the two efforts. The use of the center's common resource pool coupled with a strong program analysis had merit as one solution. The importance of the program analysis was more evident in the outreach effort as the increased need for leverage of staff time and resources grew. The development of ties between the instructional and technical assistance components suggested that this area would be increasingly important.

The importance of the program analysis and the center's operations will be considered in greater detail in the following section since they were found to be a critical and influential dimension. However, they were not afforded sufficient attention in the developmental and experimental aspects of the RMRRC.

A hypothetical model of a new center design based on the RMRRC's experience is presented in Figure 4.15. The objective of this design is to fuse this data base into the operational structure of the new situation, and to suggest a model program structure. The designed structure also incorporates changes in programming techniques to avoid problems that were observed during the initial operation of the center.

The program structure outlined in Figure 4.15 relates directly to the educational system and its needs. The interface links directly to need-based parameters. One external unit of the center structure focuses on instruction and the other on the agencies that support this basic unit. The center's responses are instructionally centered to one unit, and are program-centered to the other. The separation of focus is important since the programming focuses more easily on the needs of the instructional unit.
Input of Director

Internal Support Services

External Support Services

Instructional Unit Focused Services

Administrative Services
- Clerical
- Cost Control
- PR
- Publications

U of U Relations

Progress and Annual Reports

Resource Services
- Information flow and systems
  - people
  - curriculum
  - tests
  - services
- resources
- training
- media/materi- als
  - ARIC
  - NRC

Technical Assistance to Educational Support Agencies

Instructional Program Development

Program Planning, Analysis, and Evaluation

Fig. 4.15
RRC Model (future) from UNRRC Data Base

--- --- information flow
--- --- needs assessment
--- --- joint service
The internal center functions would directly respond to external functions. In effect, the internal functions support the external services in building a regional resource base which the external service units of the center can deploy and utilize in meeting the needs of children, teachers, administrators, LEAs and SEAs. The resource base responds to a weakness of the past RMRRC program where a central resource base was not developed. The design (as posed in Figure 4.15) attempts to remediate without creating an over-emphasis on resource support system development, and to avoid evolving development of a resource system as an end rather than as a means.

The other major, nonadministrative internal function, program analysis, is detailed in the next section. The isolation of the program analysis is a response to the problems experienced during the RMRRC's first four years. Although the center made a continued and varied effort to resolve the difficulties, resolution did not occur. Based on discussions with staff from other RRCs, this problem is seen as basic to the operation of an RRC, hence the need for emphasis.

The depicted center structure is in a modular format, so program planning should consider both the overall center operations and the operation of modules. The modules, by design, are interactive and, therefore, can be managed by separate people or in subgroupings. The key to integrated operation lies in module design and overall structure so that integration is implicit. The development of an effective evaluation is then required to monitor module effectiveness—in effect, a control mechanism for center management.

The management of the center and of the component programs is not depicted in the diagram, which focuses on operational functions. An approach to management suggested in the preceding paragraph evolves control through the ongoing process of program planning and evaluation. The process operates relative to the center as a unit and relative to its component elements. Management is effectively diffused into the process, and operational management of a program resides with each program director.

The preceding process established an operational
procedure, and ideally would not require a director. Pragmatically, the ideal cannot be realized. The optimal way to approach the center's management lies in the utilization of a director's strengths, but in a horizontal form of organizational structure that diffuses responsibility. In the model depicted in Figure 4.15 the director is shown as involved in interactions with external agencies, which requires a director with strong skills in dealing with SEAs and other educational agencies. In this assignment of duties, the center's efforts with national agencies falls within the director's purview.

This management structure requires the development of strong program analysis capability that provides the director with the needed management support of a decision-making information base. If a director's skills were in the program analysis area, then the director could assume that role and delegate contact functions to other staff members. This approach focuses on the process variables and the director's role would be determined by his/her abilities. The definition of functions allows for this latitude, but does require the institution of effective program-planning for guiding the components. The other important factor in implementing this structure is staffing the components with competent people.

An advantage of this approach is that it provides a rather wide flexibility. The management function facilitates defined processes and roles. This facilitation and any necessary regulation is done from program analysis data so the project director can work within any component and also fill a functional role on services.

**Programming Procedures and Problems**

In retrospect one of the center's greatest problems was the development of good program development, analysis, management, and control procedure(s). The programming of a regional center is more complex and requires a rather broad range of skills and techniques that have not been a part of special education. The available techniques were not always directly applicable, nor did they provide the necessary information for effective program operation. As noted in Chapter 3, the center went through a four-year evaluation of procedures for setting objectives, which it was still revising at the end.
The major difficulty was getting a clear definition of intention at the beginning of an activity and then transferring that intention into a specific program plan that could be used as a management and control basis. Most program planning at the beginning of each year was a general guide that focused the center in the desired direction, but was not a useful tool in its operation. In the outreach area this weakness was remedied with some strong planning techniques with each effort in each state, but it could not be generalized to include the entire center operation.

A center management goal was development of mutually supportive but independent component programs within the center. The program structures developed (often as a response to site-visit teams recommendations and BEH guidelines) did not provide the internal linkages necessary to fuse the programs, nor did they provide the necessary information flow between program elements. A problem that grew from these weaknesses was the inability to establish a strong center-wide accountability and evaluation framework although a considerable effort was spent on evaluation. Because of the lack of an integrating structure, however, the efforts usually focused on the problems and goals of components.

Judging from discussions with other center directors, this problem was common. One analysis (Melichar, Vol. 6, December, 1972) suggested that the problems emanated from an unclear conceptualization of program intent by BEH and that the program planning and evaluation techniques were not sufficiently powerful for the problems and complexities of center operations. The data from this center's operations suggest the existence of this situation, and that although methods for more sophisticated planning were available, they were not known to the staff nor were they disseminated by BEH or site-visit teams.

One approach to a controlled program based on integrated planning, evaluation, management analysis, and need assessment, is illustrated in the paradigm of Figure 4.16. An interactive ongoing system of common processes is depicted. Before exploring the relationships, brief definitions of the functions will be provided for a common language (based on work from Melichar, Vol. 6, December, 1972 and Melichar, November, 1972).
Fig. 4.16 A General Model of the Planning, Evaluation, Management, and Needs Assessment Functions (Based on Melichar, Vol. 6, December, 1972 and Melichar, November, 1972.)
Planning, a future-oriented process, provides direction to a system by developing a projection of activities in a formal structure. Over time a real-time process is formed by the operation or performance of the planned activities. The change in activity between any points in time is often termed the property of transformation. An ongoing planning process is the process of studying and regulating the transformation of systems.

The term "regulation" suggests a control of system performance. System optimization against defined performance criteria is often an outgrowth of regulation. If optimization is required, regulation or control must be based on monitoring system performance. Monitoring is an evaluation of internal measures based on stated objectives, and a needs assessment which relates to the establishment of new objectives from observing the external system served.

Evaluation in this framework is a monitor of the system's performance from which planning decisions can be made. Evaluation can be considered in terms of internal (effectiveness) and external (impact) functions. Effectiveness is the measure of how the system performs, its efficiency, how it meets objectives, performance criteria, schedules, and budgets, and the quality of its work. Impact is the measure of how the system affected or altered the primary system it was designed to serve, i.e., amelioration of the initiating need.

Management analysis, by contrast, responds to the system's organizational performance characteristics. The system's organization is analyzed in concert with the effectiveness evaluation to determine if it can function better. Management analysis in this sense bridges planning and evaluation relative to organization and operation.

Needs assessment and analysis, in the context of the preceding definitions, are defined as the data base for planning. These functions, therefore, could be performed separately from the planning, evaluation, and management functions. The purpose of the needs assessment function is to determine what unit needs exist in the primary operating system (teachers, school, children, parents). The analysis of these needs bridges the gap to the planning function which could define an operation to ameliorate a defined
need. Evaluation would then monitor performance (effectiveness) and the impact of the operation on that need. Based on the evaluation, future operational plans would be altered.

The procedure of these functions is a core control process for a system based on a feedback loop from the target population. The introduction of a feedback loop forms an adaptive system model predicated on serving the needs of the objective function of the system (the welfare and well-being of handicapped children via some educational process). The question arises in an RRC: what central or core organizational structure or philosophy will be selected to guide the development of the center and its operation? From a basic philosophy a series of goals can then be formulated to guide both the center's planning and operation.

If an adaptive system is the objective of the design of the RRC structure, assessment, with concurrent planning, evaluation, and management functions, become the core of the center's operation. The control system constantly generates information about the targeted objectives for planning. This function becomes the vital link between the educational system and children's needs and center operations. A center function will depend on this activity for coordination, information, and direction. Evaluation is not a pre post-activity, but an ongoing activity in support of the development of the overall program.

Inherent in this form is the concept of feedback-controlled operations and activities. The term "control" is not used to denote an autocratic directive management, nor conversely is the operation of an RRC to be based on poorly defined and/or documented needs. The term control denotes a process of producing maximum benefits for established needs, and the measured transformation of input resources to gain desired ends. The process is cast in the mold of a learning experience; the gathering of information about how to proceed is based on an assessment of past performance and the anticipated state of the system to which activities will be directed. Control, in this sense, is programmed effort at stated goals. It does not necessarily interject solutions or impinge on professional prerogatives, other than to raise standards on child/service base criterion.
One procedure for instituting controlled, need-directed programming is outlined in the schematic presented in Figure 4.17. The intent of the procedure is to produce clear program statements based on need and intentions which provide not only program-planning guidelines, but also a baseline for activity measurement. The diagram implies the separation of major activities into separate programs which responds to the earlier discussed need of building subunits within the center for specific tasks. The basis for this control system is the goal/objective/expected-outcome structures that both provide direction and criterion reference points.

The RMRRC, in effect, formed a large-scale test for the analysis of testing programming strategies, and of how to try to implement program planning and analysis in the development and operation of a regional center. The preceding discussions of this chapter tried to outline the problems and the solutions considering this data base. The many existing solutions were not obvious responses as the program developed. It is felt that this programming history and the results outlined in this report meet the important initial goal of testing the concept of regional centers and of determining how they should be programmed and how they should operate.
Fig. 4.17  Format Network (Based on Melichar, March, 1972)
CHAPTER 5

RESULTS

This chapter will present the center's quantitative results. The most definitive quantitative data are budget-staff allocations which are presented in the first section of this chapter. Subsequent sections consider quantitative data on center services.

The analysis of quantitative data is interpretive. The provision of indirect service to a child, or of direct service to a child, teacher, or administrator, cannot be assigned a value. Compounding the issue of worth is that as a support agency to educational agencies, the services to children can easily be multiply counted; hence, not only does the problem of ascribing worth exist, but worth on data that are poorly defined.

Budget-Staffing

The overall budgets for the RMRRC's four-year operation are depicted graphically in Figures 5.1 and 5.2. The spending rates reflect the initial budgeting, the budgeting at the end of the planning year, and the budget change introduced by adding outreach efforts. The core budget basically remained consistent throughout the project. The initial low estimate followed the original BEH guidelines, which established the budget level; after the six centers were initiated, funds were available for larger budgets.

The budget data were taken from each year's proposals, which reflect projected plans, but do not show actual changes in monies spent in staffing or programming which may have occurred. This selection represented a common source without undertaking a complete accounting of the center's books. This procedure seemed unnecessary from a program analysis viewpoint since the important data were relative.
Fig. 5.1
Levels of funding for each of four Budgets

Outreach funds
Fig. 5.2
Cumulative funds for four EMRRC budgets

- Core funds
- Outreach funds
weights between program components and general cost levels. (A precise cost accounting of all monies spent will be submitted to BEH in the RMRRC final fiscal report.) Further, precision in cost accounting was not warranted at this time. Shared time of staff members makes time estimates imprecise, but within these general bounds the cost data presented are accurate. The error band between actual and reported allocations is estimated as not more than 5 to 10 percent, based on data collected using three to five center sources to make estimates of the same allocations.

The first step in establishing allocations was developing a staffing profile by year, job title, and percentage of time employed. This tabulation is presented in Table 5.1. The table is based on the yearly proposals and requires some interpretation of job titles, as job descriptions for the various job titles varied between years. With the exception of preservice training, the training and service job titles related mainly to the development of the statistician model and the training packages associated with the model. The "area" consultants were primarily in preservice, but they were utilized as consultants to center staff for the field work, both in direct service and indirect service through consultation and dialogue.

The number of man-years varied between years and, not only reflects budget differences, but also the number of different job levels. For example, this simplistic breakdown weights a secretary and a senior member equally, which produces more man-hours per unit cost, as illustrated in Table 5.2. Since this analysis sought to develop costs in terms of component activities, the distinction was not pursued, but served as the basis for developing more general cost factors. These general cost factors are presented in Table 5.3 by project year based on the cost data from each year's budget as summarized in Table 5.4.

The retabulation of rates was undertaken to develop a job-cost accounting system. Indirect costs were computed on the basis of all costs normally ascribed to overhead. This resulted in an increased overhead rate. The recomputation allowed a distribution of staff cost (which could be allocated by program area) meaning that a cost of operation of a program unit could be determined. Table 5.5 presents the
**Table 5.1**

**STAFFING PROFILE 1970-1974**
*(Projected in Proposals)*

<table>
<thead>
<tr>
<th>Position</th>
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<th>71-72</th>
<th>72-73</th>
<th>73-74</th>
</tr>
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<td>1.0</td>
<td>1.0</td>
<td>1.0</td>
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<tr>
<td>Service Director</td>
<td>1.0</td>
<td>1.0</td>
<td></td>
<td>1.0</td>
</tr>
<tr>
<td>In-Service Director</td>
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<td>1.0</td>
<td>0.5</td>
<td>0.5</td>
</tr>
<tr>
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<td>0.5</td>
<td>0.5</td>
<td></td>
</tr>
<tr>
<td>Evaluation Coordinator</td>
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<td>1.0</td>
<td>1.0</td>
<td></td>
</tr>
<tr>
<td>Resource System Coordinator</td>
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<td>1.0</td>
<td>1.0</td>
<td></td>
</tr>
<tr>
<td>Product Director</td>
<td></td>
<td>0.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychologist</td>
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<td>1.0</td>
<td>2.0</td>
<td>1.0</td>
</tr>
<tr>
<td>Editor/Media Librarian</td>
<td>1.0</td>
<td>1.0</td>
<td>1.0</td>
<td></td>
</tr>
<tr>
<td>System Analyst</td>
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<td></td>
<td>0.5</td>
<td>0.5</td>
</tr>
<tr>
<td>Design, Resource, Evaluation Specialist</td>
<td></td>
<td>0.25</td>
<td>1.0</td>
<td>1.0</td>
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<tr>
<td>Training Specialist</td>
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<td>1.0</td>
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<tr>
<td>Mental Retardation Specialist</td>
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<td>0.25</td>
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<td>&quot;Area&quot; Consultants</td>
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<td>0.75</td>
</tr>
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<td>Secretary</td>
<td>1.0</td>
<td>1.0</td>
<td>2.0</td>
<td>2.5</td>
</tr>
<tr>
<td>Clerk Typist</td>
<td>1.0</td>
<td>1.0</td>
<td>1.0</td>
<td>0.5</td>
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</table>

**Total Man-Years**

|       | 6.85 | 15.75 | 26.125 | 23.0  |

*Number of projected staff*
Table 5.2
Comparison of Rates and Costs (1970-74)

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<td>31%</td>
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<td>35.2%</td>
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<tr>
<td>(University Stated Percent of Salaries)</td>
<td></td>
<td>off</td>
<td>off</td>
<td>off</td>
</tr>
<tr>
<td></td>
<td>38.5%</td>
<td>on</td>
<td>43.9%</td>
<td>on</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee Benefits</td>
<td>10%</td>
<td>6%</td>
<td>62%</td>
<td>6%</td>
</tr>
<tr>
<td>(University Stated Percent of Salaries)</td>
<td></td>
<td>part</td>
<td>part</td>
<td>part</td>
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<tr>
<td></td>
<td>12%</td>
<td>full</td>
<td>12%</td>
<td>full</td>
</tr>
<tr>
<td></td>
<td>12%</td>
<td>full</td>
<td>17%</td>
<td>full</td>
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<td></td>
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<tr>
<td>Effective Overhead Rate</td>
<td>42%</td>
<td>50%</td>
<td>48%</td>
<td>37%</td>
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<tr>
<td>(Total Indirect Costs)</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Total Employee Costs)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overhead &amp; Employee Benefit Rate</td>
<td>57%</td>
<td>66%</td>
<td>64%</td>
<td>56.6%</td>
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<tr>
<td>(Total Indirect Costs + Employee Benefits)</td>
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<td>part</td>
<td>part</td>
<td>part</td>
</tr>
<tr>
<td>(Total Salaries)</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Employee Costs as a Percent of Total Project Costs</td>
<td>65%</td>
<td>57%</td>
<td>60%</td>
<td>63.7%</td>
</tr>
<tr>
<td>(Core Only)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Other Direct Costs as a Percent of Core Project Total</td>
<td>7%</td>
<td>13.2%</td>
<td>10%</td>
<td>12.6%</td>
</tr>
<tr>
<td>(Total Direct Costs)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Total Project Costs)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indirect Costs as a Percent of Core Project Total</td>
<td>27%</td>
<td>28.7%</td>
<td>29%</td>
<td>23.6%</td>
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<tr>
<td>(Total Indirect Costs)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Total Project Costs)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cost per Man Year</td>
<td>12,272</td>
<td>23,786</td>
<td>19,148</td>
<td>21,749</td>
</tr>
<tr>
<td>(Total Project Costs)</td>
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<td>(Total Man Years (From Table 5))</td>
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214
Table 9.3

BUDGET COMPARISON (1970-1974)

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<tr>
<th></th>
<th>70-71</th>
<th>71-72</th>
<th>72-73</th>
<th>73-74</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel Salaries</td>
<td>64,300</td>
<td>194,000</td>
<td>273,780</td>
<td>277,363</td>
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<tr>
<td>Employee Benefits</td>
<td>6,430</td>
<td>20,780</td>
<td>26,659</td>
<td>41,628</td>
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<td>Total Employee Costs</td>
<td>70,730</td>
<td>214,780</td>
<td>302,439</td>
<td>318,991</td>
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<td>Other Direct Costs</td>
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<tr>
<td>In-Service Workshops</td>
<td></td>
<td></td>
<td></td>
<td>8,000</td>
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<td>Summer Workshops</td>
<td></td>
<td>10,000</td>
<td>10,000</td>
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<td>Consultants</td>
<td>1,000</td>
<td>10,000</td>
<td>10,000</td>
<td>7,000</td>
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<tr>
<td>Computer Time</td>
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<td>8,000</td>
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<tr>
<td>Travel</td>
<td>5,650</td>
<td>19,200</td>
<td>25,900</td>
<td>41,038</td>
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<td>Communications</td>
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<td>5,000</td>
<td>5,000</td>
<td>7,000</td>
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<tr>
<td>Total Direct Costs</td>
<td>7,650</td>
<td>52,200</td>
<td>50,900</td>
<td>63,038</td>
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<td>Indirect Costs</td>
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<tr>
<td>Overhead</td>
<td>19,933</td>
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<td>109,874</td>
<td>94,205</td>
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<td>Equipment</td>
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<td>Rent</td>
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<td>Supplies</td>
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<td>Labs (Media/Materials)</td>
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<td>Total Indirect Costs</td>
<td>30,234</td>
<td>107,655</td>
<td>146,894</td>
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<td>TOTAL PROJECT COSTS</td>
<td>108,614</td>
<td>374,635</td>
<td>500,234</td>
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Table 5.4

EMPLOYEE SALARIES PER CORE PROGRAM AREA
1970-1974

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<thead>
<tr>
<th>Item</th>
<th>70-71</th>
<th>71-72</th>
<th>72-73</th>
<th>73-74</th>
<th>Total</th>
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<tbody>
<tr>
<td>I. Management</td>
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<tr>
<td>Management</td>
<td>15,400</td>
<td>25,500</td>
<td>32,592</td>
<td>35,840</td>
<td>109,332</td>
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<td>Research</td>
<td>0</td>
<td>20,500</td>
<td>25,200</td>
<td>13,230</td>
<td>58,930</td>
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<tr>
<td>Evaluation &amp; General Planning</td>
<td>8,000</td>
<td>19,000</td>
<td>32,200</td>
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<td>In-Service Training/Service</td>
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<td>113,000</td>
<td>129,988</td>
<td>139,895</td>
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<td>Pre-Service</td>
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<td>16,000</td>
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<td>53,800</td>
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<td>TOTAL</td>
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<td>In-Service Training/Service</td>
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<td>9,690</td>
<td>52,490</td>
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<td>38,600</td>
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<td>TOTAL</td>
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<td>168,500</td>
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<td>TOTAL LESS MANAGEMENT</td>
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<td>III. Research</td>
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<td>23,600</td>
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<td>44,010</td>
<td>47,635</td>
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216
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<th>Item</th>
<th>70-71</th>
<th>71-72</th>
<th>72-73</th>
<th>73-74</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Management</td>
<td>24,178</td>
<td>44,013</td>
<td>52,082</td>
<td>56,520</td>
<td>176,793</td>
</tr>
<tr>
<td>Research</td>
<td>0</td>
<td>35,383</td>
<td>40,270</td>
<td>20,864</td>
<td>96,517</td>
</tr>
<tr>
<td>Evaluation &amp; General Planning</td>
<td>12,560</td>
<td>32,794</td>
<td>51,656</td>
<td>81,728</td>
<td>178,538</td>
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<tr>
<td>In-Service Training/Service</td>
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<td>207,721</td>
<td>220,614</td>
<td>687,566</td>
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<td>Pre-Service</td>
<td>0</td>
<td>27,616</td>
<td>42,826</td>
<td>75,281</td>
<td>85,723</td>
</tr>
<tr>
<td>Outreach</td>
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<td>0</td>
<td>42,986</td>
<td>42,421</td>
<td>85,407</td>
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<td>TOTAL</td>
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<td>437,341</td>
<td>437,428</td>
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<tr>
<td>II. Management</td>
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<td>44,013</td>
<td>69,500</td>
<td>82,934</td>
<td>220,623</td>
</tr>
<tr>
<td>Research</td>
<td>0</td>
<td>35,383</td>
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<td>20,864</td>
<td>96,517</td>
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<td>In-Service Training/Service</td>
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<td>227,832</td>
<td>222,902</td>
<td>347,908</td>
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<td>Pre-Service</td>
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</tr>
<tr>
<td>Outreach</td>
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<td>0</td>
<td>61,843</td>
<td>60,872</td>
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<td>TOTAL LESS MANAGEMENT</td>
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<td>290,831</td>
<td>367,640</td>
<td>354,494</td>
<td>1,089,938</td>
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<td>47,889</td>
<td>25,740</td>
<td>114,363</td>
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<td>265,012</td>
<td>317,712</td>
<td>945,992</td>
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<td>Pre-Service</td>
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<td>31,793</td>
<td>50,915</td>
<td>18,856</td>
<td>101,564</td>
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<tr>
<td>Outreach</td>
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<td>0</td>
<td>73,524</td>
<td>75,120</td>
<td>148,644</td>
</tr>
<tr>
<td>IV. Research</td>
<td>0</td>
<td>12.2</td>
<td>11.0</td>
<td>5.9</td>
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<tr>
<td>In-Service Training/Service</td>
<td>100</td>
<td>78.3</td>
<td>60.6</td>
<td>72.6</td>
<td>72.2</td>
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<td>Pre-Service</td>
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<td>9.5</td>
<td>11.6</td>
<td>4.3</td>
<td>7.7</td>
</tr>
<tr>
<td>Outreach</td>
<td>0</td>
<td>0</td>
<td>16.8</td>
<td>17.2</td>
<td>11.3</td>
</tr>
</tbody>
</table>
computed rates.

Some general trends were observed in the rates. The most significant factor was that rates remained relatively constant for all four years. Generally, 60 percent of the center's core budget was expended for employee-based costs.

The use of the core budget as a basis for computation allowed budget comparisons for the four years; this comparison excludes contributed costs in schools for the statistician model. The school programs were, in effect, a cost of the program, but one which was not easily computed. For example, in the first year of the statistician program, four of the six statisticians were paid in part—up to 75 percent—by the schools. In the fourth year all 17 schools in the statistician program paid the statistician generalists' salaries. To compute the cost of the model, the cost of these individuals' time was required, and in those cases of partial assignment, the percentage cost would have had to be allocated. This cost analysis was avoided by considering only core staff costs.

The center's activities were separated into management, research, evaluation of general planning, inservice and preservice training, service, and outreach. Table 5.4 presents the direct-salary cost for each of these areas per project year. Three breakdowns are provided: (I) a presentation of cost per activity area; (II) combination of the costs into five activities; and (III) into the four main center activities. In the cost profile (IV) management was allocated by percentages determined from relative costs of the four activities in the second breakdown. The evaluation activities were distributed into their areas; and the general planning activities were placed into the management function. The combination of inservice and training into a single activity reflected their integrated character in the statistician program. The total costs from Table 5.2, excluding direct costs, were then computed using the cost rates from Table 5.2; the results are presented in Table 5.5.

The results in Table 5.5 present a profile of the weighting effort by the projected core staff on each activity. The heaviest effort was allocated to inservice training and service (72.2 percent of the total effort) with a nearly equal separation for the other three areas: research (8.7 percent), preservice
training (7.7 percent), and outreach (11.3 percent). The weighting base on the total is skewed since the first two did not include outreach. In the last two years outreach took about one-sixth of the core staff's efforts.

The cost data indicated that the center placed a heavy emphasis on the inservice training and service components. This emphasis stemmed from the center's initial thrust toward the statistician concept, which required a follow through when outreach began. The center's rationale for completion of the work was evident in the budgeting.

Discussion

The breakdown of costs per program area presented in this chapter must be viewed with caution, since in many instances projected staff was not actual staff. These changes were based upon lack of qualified persons to fill the positions, districts' salary support of positions, and changing perceptions of needs from the time of proposal submission early in the calendar year to the initiation of proposal activities mid-year.

A second caution involves combining inservice training and service activities together with an assumption that these efforts were only in the development of the statistician model. Many workshops and seminars were conducted apart from the specific placement of statisticians in the state of Utah and in the region, and direct services were offered whenever requested. Table 5.6 presents a summary of the services provided by the RMRRC and by the outreach projects in each of the four states. Appendix B contains a chronological listing of workshop and other presentations.

The indicated emphasis on inservice training and service was the basis of the RMRRC involvement throughout its four-year history. Research and development efforts and preservice training per se were minimal in comparison; this weighting of services was considered to be appropriate for a center with a service mandate.

The computation of center expenditures into broad categories shows that one-sixth of core-staff efforts went to outreach during the regional phase of center efforts. This was based, again, upon projected man-years and does not include outreach staff hired by the
Table 5.6
 Summary data chart of services performed by the NMRRC

<table>
<thead>
<tr>
<th>SERVICES</th>
<th>1971-72</th>
<th>1972-73</th>
<th>1973-74</th>
<th>TOTALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Direct</td>
<td>426</td>
<td>1,343</td>
<td>2,859</td>
<td>43,395</td>
</tr>
<tr>
<td>Indirect</td>
<td>3,638</td>
<td>5,448</td>
<td>29,681</td>
<td></td>
</tr>
<tr>
<td>Indirect</td>
<td>4,064</td>
<td>6,791</td>
<td>32,362</td>
<td>43,395</td>
</tr>
<tr>
<td>Teachers contacted</td>
<td>595</td>
<td>6,963</td>
<td>8,485</td>
<td>16,043</td>
</tr>
<tr>
<td>Day Care Centers</td>
<td>4</td>
<td>16</td>
<td>10</td>
<td>30</td>
</tr>
<tr>
<td>Schools</td>
<td>81</td>
<td>4,449</td>
<td>905</td>
<td>5,435</td>
</tr>
<tr>
<td>Agencies and other Federal Projects</td>
<td>11</td>
<td>140</td>
<td>190</td>
<td>341</td>
</tr>
<tr>
<td>Paraprofessionals</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paraprofessionals</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parents</td>
<td>95</td>
<td>1,172</td>
<td>815</td>
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<td>Administrators</td>
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<td>3,163</td>
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<td>Universities</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Presentations</td>
<td>11</td>
<td>20</td>
<td>37</td>
<td>83</td>
</tr>
<tr>
<td>Practicum</td>
<td>6</td>
<td>8</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Presentations</td>
<td>5</td>
<td>25</td>
<td>166</td>
<td>196</td>
</tr>
<tr>
<td>Advisory Groups formed and utilized</td>
<td>4</td>
<td>1</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>Studies conducted</td>
<td>6</td>
<td>7</td>
<td>14</td>
<td>27</td>
</tr>
<tr>
<td>Workshops presented</td>
<td>11</td>
<td>129</td>
<td>81</td>
<td>221</td>
</tr>
<tr>
<td>Serving on boards and/or committees for handicapped</td>
<td>3</td>
<td>15</td>
<td>22</td>
<td>40</td>
</tr>
</tbody>
</table>
SEAs with RMRRC flow-through funds. Each state had at least one full-time professional, and most also had a full-time secretary. Were these persons included in the effort figures, the percentage for outreach would be higher than the computed one-sixth. The 1973-74 proposal was the first to include projected work in the region because the 1972-73 proposal had been submitted before BEH requested regional services from the RMRRC. In addition to the state resource coordinator, whose position continued as stated in the proposal, one full-time evaluator and one full-time resource specialist worked in the outreach area. Other staff members—from management, training, evaluation, and from the secretarial pool—were involved in outreach as needed.

The general figure of 60 percent of the center’s core budget expended for employee-based costs again indicates the center’s emphasis and commitment to a service-based operation. Still this percentage made available a large portion of monies for supplying in other ways service needs not available through center staff, e.g., consultants.

The projected costs per man-year of all direct costs of center operation include workshops, stipends, service travel, and consultant fees. RMRRC staff salaries were in accord with university and state personnel salaries. Thus weighting includes a high percentage of service activities in addition to basic salary figures.

A final caution is needed: this chapter is based on quantitative analysis. Although it is an accepted procedure to evaluate on the basis of quantitative results, qualitative results need to be included when available. The quality of services rendered is often only indicated by the acceptance of these services, by rapport with the consumer, and by “testimonials” offered formally and informally. The RMRRC staff is proud of the quality of services rendered and has appreciated the acceptance by and support of those in the consumer states in this region. The center’s work was accomplished only through the cooperation and support of these persons.
CHAPTER 6

SUMMARY

The preceding five chapters have outlined the educational milieu in which the RMRRC began its four-year service, the history of its growth, the main program components and a quantitative budget analysis. This chapter will report how these parts meshed together into a whole, and how this whole became more than the sum of its parts.

The philosophical milieu in education during this time had a direct influence on the RMRRC staff, the SEA, and the LEA service philosophy. The publicized mainstreaming effort, however, is based upon the much more comprehensive base of normalization which applies to the total continuum of educational services.* The initial RMRRC efforts in development of the statistician model were directed at only one level in the educational continuum (Figure 3.1), and focused on the "normal," or regular classroom setting.

The initial data collected indicated intervention strategies were a priority need at the regular classroom level in Utah. The RMRRC efforts to help meet this need did not negate needs at other levels. Attempts were made by the RMRRC staff to meet these other needs when appropriate, and when requested by the Utah SEA initially, and in the last two years by any SEA in the region. (Table 5.6 summarizes the service activities of the past four years.)

*Wolfensberger (1972) defines normalization as, "utilization of means which are as culturally normative as possible in order to establish and/or maintain personal behavior and characteristics which are as culturally normative as possible (p. 28)."
Initial delimiting of a major RMRRC effort seemed imperative in light of the low operating budget and the many service needs. Through delimitation it was hoped a major impact could be made in at least one area of need. The future utilization of the statistician model and of the RMRRC training packages will be the test of this impact. The impact that can be measured now, and that has been detailed in this report, is mainly on the other service components of the RMRRC structure and on the direct service provided by the statisticians. The selection of a direct service intervention was influenced greatly not only by the service needs but by the accountability needs of the center.

In retrospect, several principal external elements influenced the shaping of the RMRRC development; consideration of these external influences may be useful in the development of other regional efforts. These included the shifting goal base for the Regional Resource Centers and temporal considerations.

Leaders in the federal government, aware of the great need in special education for human resources and primed by BEH staff, attempted to help meet these varied needs by creating regional centers which would identify, facilitate development of, and/or provide resources. In an apparent effort to keep the programs flexible enough to meet the differing resource needs of various regions, global, long-term goals for the centers were never articulated. In an equally strong effort to keep centers accountable, services were attached to direct service interventions. As pointed out in Chapter 1, intervention at an LEA or direct service level is not the same as intervention at an SEA or indirect service level. Yet, if a regional service agency wants to facilitate long-term change, the only legitimate entry point into the educational system is through the SEA. The SEA, legislatively responsible for the education of all children in a given state, must agree that the services of the regional agency will help the SEA better fulfill its legal obligations.

This two-pronged intervention demand presented a dilemma to RMRRC staff for the four years of the center's existence. Development and facilitation of state efforts are not, in most cases, measurable by direct service accountability. Clarification of the point or points of intervention and accountability
congruent with that intervention are imperative for maximum impact.

A second dilemma, presented by the lack of long-term goals, was that when the RRCs became operational, different persons and/or groups with various kinds of control over centers viewed center goals differently: i.e., program officers, project officers, site teams, state leaders, etc. Several times during the short RMRRC history verbal and/or written pressures were exerted by one or more of the above for the center to target all efforts in a given direction--early childhood, severely handicapped, SEIMC cooperation, brokerage services to states, training, etc. The uneasiness caused by these pressures and the lack of information about the legitimacy of these changing goals created staff morale problems and program confusion. A clear, consistent BEH policy, openly supported by top Bureau management, is a second necessary ingredient for the greatest impact of any regional program.

Temporal concerns also influenced program development. Job insecurity in projects funded yearly limits staff applicants, for the most part, to a group of more mobile individuals. As far as is known, research on the characteristics of federal project personnel has not been done, so whether this is an advantage or disadvantage is not known. However, recruitment of prominent, established leaders in the field to a job with no long-term security is difficult at best. Consideration of civil service ratings, or other alternatives, for large-scale federal projects would enhance operation capability.

Of a greater concern is the limitation yearly funding places on the development of relationships with SEAs. Time is needed to establish and plan cooperative relationships--time of much longer duration than might seem necessary. It is difficult to plan and produce in one academic year any direct program intervention. Educational plans are formulated early in the year prior to their implementation. Coordinating center functions on an annual basis, which does not coincide with a state's school calendar, creates many unsurmountable constraints and limits potential impact.

The major program components in the RMRRC design remained consistent throughout the reported four-year
period: evaluation included program evaluation, planning and the limited research activities; training included both preservice and inservice elements; service included direct services to children and teachers and development of a resource registry; outreach included all resources of core and flow-through in subcontractual or proposal form to states and/or agencies. The feedback from one component to another and the utilization of staff in any component where needed increased the overall program strength in multiple ways.

Weekly meetings of an RMRRC Executive Committee (formed by each program component coordinator and the center director) enhanced communication and mandated joint planning. A decreased quality of communication from this planning group to the rest of the staff was apparent throughout the center's history. Various methods were used to decrease this communication breakdown, but none were completely successful—total staff meetings, staff retreats, memoranda, staff representation at executive meetings, etc.

A Broader Executive Committee met monthly; membership consisted of the Chairman, Department of Special Education, University of Utah, an SEA and an LEA representative and the Center's Executive Committee. This group formed the program policy committee for core activities.

A Participating District Advisory Committee, comprised of representatives from each school and district involved in the stratistician program, provided guidance for that model's growth. The LEA representative on the Broader Executive Committee was from this group.

A fourth group, the Outreach Steering Committee, provided all program input for interstate activities. This committee was composed of the four state directors in the RMRRC region, the outreach coordinators hired in each state, and the center's Executive Committee. The SEA representative on the Executive Committee was a member of this group. In this manner direct concerns of each major program effort were represented and advocated by key persons involved on the policy board of the center.

Much has been accomplished by the RMRRC throughout the four-state region; however, the inability to
report the total impact as well as the analyses of center activities in this volume define a need for better advance and on-going planning procedures. Problem areas have been articulated; the analyses should point the way to future improvement in effective planning.

Over the past four years, center activities have evolved from actual special education needs in the field. The mainstreaming philosophy, the accountability need, the RMRRRC staff expertise, and the priority need of a state all culminated in the development and field-testing of the stratistician model--a special education resource person to regular classroom teachers. A training program for state or district personnel to use in training this type of resource person was developed and is available. Regional services were facilitated by center and outreach staff in a four-state region in priority program areas identified by state leadership. Ongoing dialogue--in some instances for the first time--between state leaders in the RMRRC region was facilitated and encouraged by quarterly Steering Committee meetings. University awareness of SEA and LEA needs was enhanced by data sharing. Handicapped children and teachers were served directly. This summation of RMRRC activities adds up the component parts into a whole--the total impact of which has been greater than the sum of the individual parts.
BIBLIOGRAPHY


APPENDIX A

AN OUTLINE OF THE RMRRC HISTORY

Year One: June 1, 1970 to May 31, 1971

The RMRRC was funded June 1, 1970, through the Department of Special Education, University of Utah. The proposal was for a five-year program with refunding to be requested annually. During the first year, the following activities were undertaken:

A. Development of the organizational structure, and planning and RMRRC Philosophy:

1. Obtained space and equipment;
2. Hired personnel;
3. Defined scope and sequence of the center, and developed a statement of purpose.

B. Exploration of the needs and available resources in the Utah and national educational system:

1. Visited established RRCs to gather information on their operations and problems;
2. Visited other educational resource agencies and projects to gather relevant information.
3. Located and developed working relationships with needed consultants;
4. Undertook literature searches;
5. Went to conventions and professional meetings to gather information.
C. Formulation of Advisory Committee to develop plans and provide feedback. The Advisory Committee consisted of:

1. SEA representatives, both regular and special education;
2. LEA representatives;
3. University of Utah, Department of Special Education, personnel.

D. Initiation of a program to explore affective variables; their importance in classroom interactions, possible use in placement of individual handicapped children, and implications for selection of students before college training. This program continued throughout the project and consisted of:

1. Workshops;
2. Classroom observers;
3. Questionnaire on teacher attitudes;
4. Visits to projects;
5. Formal research studies.

E. Establishment of agreement with Provo School District to serve as demonstration district where referred children could receive diagnostic and prescriptive services should the RMRRC receive such referrals. (It was felt the RMRRC had neither the staff nor money to equip and to operate clinical facilities for individual children. This agreement was sought so that referred children could be served. To date, the individual children who have been referred have been served in their home schools, and the Provo District agreement has never been used.)

F. Establishment of a program of formal presentations on the RMRRC and on the RRC concept for conventions, conferences, professional groups, and the general public, etc. was initiated in the first year and continued for the duration of the program.
G. Establishment of communication network:

1. Establish procedures for routine communication among staff or faculty and department;
2. Develop mailing lists;
3. Prepare periodic progress bulletin to disseminate to the Department of Special Education; prepare periodic newsletters, seminar information, memos, etc. to go to the advisory board, school districts, task force consultants;
4. Prepare quarterly reports for the government;
5. Report, talk to special interest groups.

H. Planned statistician model to implement in selected schools in the fall of 1971. The statisticians were to help meet the priority need of Utah State Board of Education: to upgrade educational services for 43 percent of identified handicapped children who remained in regular classes. This required:

1. Definition of criteria for selecting statisticians;
2. Definition of criteria for selecting schools.

Year Two: June 1, 1971 to May 31, 1972

A. Six statisticians were hired with the following qualifications.

1. Master's degree;
2. Training and/or experience in special education;
3. Classroom experience;
4. Ability to interact with other adults in nonthreatening and nonjudgmental manner.
B. Schools for stratistician placement selected using following criteria:

1. Schools represented full range of support services, from none to the best in the state;

2. School and district administrators agreed to allow stratisticians to serve teachers, without any children directly assigned to stratisticians.

C. An Executive Advisory Board was formed to help guide project operations for the remainder of the project.

D. Stratisticians, as they worked in the schools, collected data on teacher needs:

1. Investigation of related projects;

2. Perusal of literature;

3. Observation of children and teachers in classrooms.

E. Workscope and performance profiles were developed for stratisticians. These included:

1. Identification of common elements for the combined R & D and service program:

   a. Development of paradigm, being cognizant of limitations of study, subjects, and locality. Assessed resources of the university, the districts, and schools relative to other ongoing research in the area, district policy, and state curriculum and laws;

   b. Established research controls and framework for all RMRRC research activities.

2. Performance objectives for teacher and child related functions of stratisticians were formulated.

   a. Teacher objectives included:
1. Conditions under which child performs;

2. Variables that affect a teacher working with a handicapped child: class organization, size of class load, size of room, etc.;

3. Difference between city teacher who refers children out of class and rural teacher who keeps children in; i.e., is special education available?

b. Children objectives (terminal behaviors) included the learning styles and needs of children;

c. Criteria of satisfactory performance for statisticians;

d. Curriculum objectives (methods) that:

1. Explored and/or obtained materials, programs available for educationally handicapped children;

2. Surveyed existing curriculum in identified districts.

2. Wrote case studies on children initially observed.

3. Strategies were developed for relating diagnostic data to educational prescriptions:

a. Building prescription based upon existing framework and different learning styles;

b. Utilizing pre- and post-testing.

4. Statistician pilot studies and strategies were evaluated.

5. Dissemination, ongoing projects, evaluations, analysis of data, and development of strategies were continued; including:
a. Adaptation of framework to specific groups in special areas:


F. Work was undertaken cooperatively with other RRCs to develop national position paper on the RRC program.

G. A Participating District's Advisory Committee was formed (PDAC) to help keep communication open between center and district administrators and principals with a statistician placed in their school.

H. The RMRRC was requested by BEH to expand services to include Montana and Wyoming. A meeting was held at RMRRC offices with state department administrators from Utah, Montana and Wyoming, and BEH personnel, to discuss outreach. RMSEIMC personnel were also present.

I. Two staff members served as officers in county parent group (SLARC). Emphasis continues, with more staff members joining consumer and professional groups, and one staff member served on state level (UARC).

J. A continuing program of inservice workshops was begun by RMRRC staff.

**Year Three: June 1, 1972 to May 31, 1973**

A. Idaho was added to the RMRRC region.

B. The statistician program was expanded by adding two rural schools served by one statistician, and by placing another statistician in an inner-city school with a high ethnic-group population. There was a total of eight statisticians in eight schools and in one multi-district area, all sponsored by the RMRRC.

C. Principals and district administrators from generalist schools were invited to join Participating Districts Advisory Committee.
Several administrators from the original stratistician schools continued active membership in this advisory group.

D. The first annual working conference for all RRC staff and BEH personnel held in Iowa. State department representatives from Utah, Montana, and Wyoming also attended.

E. Data from stratistician work during the previous year showed that 159 children received intervention services by stratisticians; approximately 4 times that number were served.

F. Arrangements were made with a district not previously served for inservice training of their generalists; RMRRC invited to provide guidance to program, where the generalist would serve a stratistician-type role.

G. Stratisticians began presenting preservice seminars, workshops or classes in the Department of Special Education, University of Utah. This involvement continued to the end of the project.

H. An Outreach Steering Committee was formed composed of four state directors of Special Education, four outreach coordinators, and RMRRC staff. RMSEIMC and NWSEIMC personnel were also invited to attend all meetings. The committee continued to operate till the end of the project with states rotating hosting of quarterly meetings.

I. Four outreach coordinators began presenting the RRC concept in the outreach states and initiating services outlined in state subcontracts.

J. RMRRC administrators met several times with BEH leaders, RRC, SEIMC, and RMC directors to develop an RRC workscope and to discuss cooperation to prevent duplication.

K. Two consultants selected by the Outreach Steering Committee were retained to provide
ongoing, outside technical assistance to outreach programs.

L. RMRRC staff members met with special education faculty to incorporate field findings and interpersonal communication skills into university curriculum.

M. Department of Special Education faculty assessed the dynamics of a program in a stratistician school where all children from self-contained classrooms have been mainstreamed.

Year Four: June 1, 1973 to May 31, 1974

A. Stratistician services were field-tested, using district-sponsored personnel. RMRRC training of 17 generalists (representing 17 schools in 11 of the 40 Utah school districts) was given the two weeks prior to the opening of school. Ongoing training and backup support was provided by the RMRRC. The evaluation of this program is to be completed in the Fall, 1974. May 31, 1974, marks the end of the fourth year of the RMRRC grant. When the generalist program was planned, it was anticipated that the RMRRC would have one more year of its current grant to complete this work.

B. Inservice training activities were initiated and conducted by outreach coordinators.

C. Six RRC directors formulated a tentative workscope for RRC and presented it to BEH.

D. Inter-RRC conference cosponsored by NWRRRC, SWRRC, RMRRC, and NASDSE investigated better ways to serve the handicapped in rural, remote areas.

E. RMRRC joined the SWRRC to fund identification project on the Navajo reservation at Roughrock, Arizona, through cooperation with BIA.

F. RMRRC staff members participated in inservice
training for special education teams in Arizona; workshops sponsored by SWRRC and SEIMC from California.

G. Close-out of all OE projects and the request for new proposals, plus redefinition of regional boundaries were announced. At the beginning of outreach efforts, state departments articulated their reluctance to wholeheartedly participate in another federal project, saying that they just got something underway and the project is disbanded. The redefinition of the region put Utah in a different region than Idaho, Montana, and Wyoming. Planning was undertaken in these states to make a smooth transition to another RRC.

H. A regional topical conference on the severely, multiply handicapped was sponsored by the RMRRC to meet technical assistance needs of four states in the region. Over 250 participants attended, representing 18 states and the District of Columbia.

I. The RMRRC submitted a proposal to BEH to service the region comprised of Arizona, Colorado, Nevada, New Mexico, Utah and the Bureau of Indian Affairs Schools.

J. Follow-up sessions on the conference for serving the severely, multiply handicapped were held for Idaho, Montana and Utah.
APPENDIX B

WORKSHOPS, SEMINARS AND PRESENTATIONS

1. Date: February 26, 1972
   Place: Panguitch, Utah
   For: SEDC Regional teachers and administrators (85)
   Presenters: RMRRC Staff served as consultants to the workshop.
   Focus: Discussed informal diagnosis, prescription, evaluation, materials and teaching techniques.

2. Date: March 16, 1972
   Place: SEDC Districts (Southwestern Utah)
   For: PDAC Membership
   Presenters: RMRRC Staff
   Focus: Orientation of PDAC regarding needs assessment of special education services in SEDC region.

3. Date: May, 1972
   Place: Franklin School, Provo District, Utah
   Presenter: Barrie Richards
   For: Parents of special ed children, also 13 special educators from district.
   Focus: Skills imparted to parents of children having social-emotional types of behavior problems; based on Norma Randolph’s Self-Enhancing Education techniques.

4. Date: May 23, 1972
   Place: Garfield District Offices, Panguitch, Utah
   For: Garfield District Superintendent and Curriculum Supervisor
   Presenters: RMRRC Statisticians
   Focus: Planning for installation of generalists and discussion of critical areas of inservice need.

5. Date: May 31, 1972
   Place: Ogden School District, Ogden, Utah
   For: Special education teachers in Ogden District
   Presenter: Arthur Welch; Mary Buchanan and Frank South also present
   Focus: Informal diagnosis techniques for reading and mathematics
6. Date: June 15-23, 1972  
Place: Provo, Utah  
For: Faculty members of Franklin Elementary School (13)  
Presenter: Conceptualized by Barrie Richards; Darrell Hadley, principal, conducted sessions.  
Focus: Major activities were to plan programs for identified handicapped children.

7. Date: July 17-28, 1972  
Place: Cedar City, Utah  
For: SEDC multi-county region  
Presenter: Cregg Ingram  
Focus: Video tape by Frank South and Merrill Johnson on Precision Teaching was shown.

8. Date: July 10-14, 1972  
Place: Jordan District, Sandy, Utah  
For: Paraprofessionals employed by district (26)  
Presenter: Judy Ann Buffmire  
Focus: Training aides and teachers of trainable mentally retarded children.

9. Date: August 6-7, 1972  
Place: Utah State University, Logan, Utah  
For: Group of graduate students in special education.  
Presenters: Robert West, Barrie Richards, and Fran Schwaninger-Morse.  
Focus: The implications of the RMRRC Statistician Model as an alternative for special education.

10. Date: August 16-22, 1972  
Place: Ogden, Utah  
For: Weber District administrators and generalists.  
Presenters: Frank South, Mack McCoolskey, Mary Buchanan, Arthur Welch, Barrie Richards, Robert West, Patricia Trujillo, Susan Harrison, Frankie Sheppard and Merrill Johnson.  
Focus: Definition and clarification of RMRRC project for administrators; inservice training for district generalists.

11. Date: August 21-23, 1972  
Place: Millard School District, Delta, Utah  
For: Special and Regular Education Teachers  
Presenters: Frank South and Merrill Johnson
Focus: "Practical Application of Behavior Modification Principles"
Follow-up Evaluation: November, 1972

12. Date: August 23-25, 1972
Place: Bryce Valley High School, Bryce Valley, Utah
For: Faculty and administrators
Presenters: RMRRC psychologist consultation
Focus: Resource assistance for programming for 16-year old educable mentally retarded student.

13. Date: September 19, 1972
Place: Delta, Millard District
For: District administrators and district school psychologist
Presenter: Iva Dene McCleary
Focus: To develop evaluation measurement for Headstart students.

14. Date: September 29, 1972
Place: Utah Education Association Convention
For: CEC Members
Presenter: Frank South
Focus: "Special Educator: Who Needs You?"
Audience saw implications for a wider role in serving Handicapped Children

15. Date: October 10, 1972
Place: Utah State Board of Education (USBE)
For: District special education and pupil personnel directors
Presenter: Dr. Ben Bruse
Focus: Outline RMRRC activities, outreach program To bring project awareness Utah school administrators.

16. Date: October 11, 1972
Place: Delta Elementary Training Center, Delta, Utah
For: Inservice to teachers of trainable retarded
Presenter: Frankie Sheppard
Focus: Outlining of program activities in art, socialization, work readiness and job training.
Follow-up Visit: November 29, 1972.
17. Date: October 26, 1972
Place: St. George, Utah
For: Parents, church youth group, students from Dixie College
Presenter: Judy Ann Buffmire, Frank South, and Frankie Sheppard
Focus: Assistance in how to set up a local Youth Association for Retarded Children.

18. Date: November 10, 1972
Place: USEBE
For: District special education and pupil personnel directors from throughout the state
Presenters: Judy Ann Buffmire, Frank South, Mack McCoulskey, Robert West, Mary Buchanan, and Barrie Richards.
Focus: Overview of RMRRC given; statistician model defined for state personnel.

19. Date: November 29, 1972
Place: Timpanogas School, Provo, Utah
For: Faculties of Timpanogas School and Franklin School
Presenter: Iva Dene McCleary
Focus: Art for the handicapped in the elementary school

20. Date: December 11-12, 1972
Place: Escalante Elementary School, Escalante, Utah
For: Faculty and principal of the school
Presenters: Frank South, Mary Buchanan, Trish Trujillo, Merrill Johnson, and Herman Houston.
Focus: How to help children with special problems in a school where no trained special education teacher exists.

21. Date: December 19-21, 1972
Place: Billings, Montana
For: Project Outreach - Montana personnel.
Presenter: Michael Fredrickson
Focus: Behavioral technology and precision teaching.

22. Date: January 12, 1973
Place: Ephraim, Utah
For: Teachers and principal of Ephraim Elementary School.
Presenters: Team: Frankie Sheppard, Trish Trujillo, Iva Dene McCleary, and Barrie Richards
Focus: Programming for handicapped children; also dissemination of information about the RMRRC.

23. Date: February 25, 1973, and April 26, 1973
Place: Escalante Elementary School
Focus: Two, one-day follow-up workshops to check students' progress in newly devised program.
Presenters: Mary Buchanan, Trish Trujillo, Frank South, and Herman Houston.

24. Date: March 1-2, 1973
Place: RMRRC offices
Presenter: Vance Engleman
For: RMRRC staff, Project Outreach representatives, special education department representatives from the University of Utah, and LEA personnel.
Focus: Imaginal Education as devised at the Ecumenical Institute of Chicago.

25. Date: March 3, 1973
Place: Davis School Office, Farmington, Utah
For: 24 selected resource personnel from both rural and urban schools
Presenters: Project Outreach-Utah (Frank South and Mary Buchanan directly represented the RMRRC)
Focus: Identification of problems presented by handicapped children; also developing a competency-based criteria statement for State Certification.

26. Date: March 12, 1973
Place: Cedar City, Utah
For: Elementary Teachers (30 from 4 districts)
Presenters: Iva Dene McCleary and Herman Houston
Focus: Art and the Handicapped Child

27. Date: March 22, 1973
Place: St. George, Utah
For: Southern Utah Supervisors Association (12)
Focus: Acceptance and communication skills; format included active participation. Future RMRRC involvement requested.
28. Date: March 30, 1973  
Place: Helena, Montana  
For: Montana CEC Conference  
Presenter: Michael Fredrickson - Project Outreach-Montana.  
Focus: "Project Outreach, Phase I and Phase II: Where We've Been and Where We're Going."

29. Date: April 9, 1973  
Place: University of Utah  
For: Department of Special Education faculty and graduate students  
Presenters: Frank South, Susan Harrison, Thomas Valeski and Merrill Johnson  
Focus: To increase skill level in communication; specific methods in dealing with the resistive teacher.

30. Date: April 11, 1973  
Place: Garrison, Utah  
For: Conferred with teachers in Garrison School  
Presenters: Trish Trujillo and Herman Houston  
Focus: Needs of the Chicano students who are identified as handicapped.

31. Date: April 26-27, 1973  
Place: Dallas, Texas  
For: National CEC Convention  
Presenters: RMRRC staff presented a sound-slide presentation and brochure on the Stratistician Role and RMRRC Programs.

32. Date: April 29, 1973  
Place: Wasatch Academy, Mt. Pleasant, Utah  
For: Faculty members  
Presenter: Vance Engleman  
Focus: Discussed problems currently faced by the school including high incidence of students with behavioral problems.

33. Date: May, 1973  
Place: Community Coordinated Child Care Center, Butte, Montana  
For: 35 Teachers  
Presenter: Michael Fredrickson  
Focus: Inservice training of teacher of learning disabled children.

34. Date: May 23-24, 1973  
Place: East Glacier, Montana
For: Seven staff members of Project Outreach-Montana  
Presenters: Robert West, Frank South  
Focus: Communication skills: listening, congruent forthright sending, problem solving and dealing with value collisions.

35. Date: June 4, 1973  
Place: Joaquin Elementary School, Provo, Utah  
For: John Bone, principal and special education teachers of the school  
Presenter: Judy Ann Buffmire  
Focus: Facilitation of a philosophical stance for upcoming workshop on curriculum development in self-contained/resource-type classes.

36. Date: June 10-12, 1973  
Place: Albuquerque, New Mexico  
For: Conference hosted by members of New Mexico Special Education services  
Presenter: Judy Ann Buffmire  
Focus: Stratistician Model presented to group; led discussion groups.

37. Date: July 12, 1973  
Place: University of Utah, Department of Special Education  
For: 14 summer seminar graduate students of Cyrus Freston.  
Presenter: Tom Valeski  
Focus: Full-day session on the Systematic Observation of Behavior Instrument developed by RMRRC.

38. Date: July 17, 1973  
Place: Billings, Montana  
For: 35 Special Education students and faculty members of Eastern Montana College.  
Presenter: Frank South  
Focus: One-hour presentation entitled "The Stratistician: Yet Another Model?" Overview of the RMRRC training modules.

39. Date: July 25, 1973  
Place: Logan, Utah  
For: 12 special education graduate students at Utah State University.  
Presenter: Frank South  
Focus: "The Stratistician Model for Service and a Competency-Based Training Program."
40. Date: August 1, 1973 and August 38, 1973  
Place: RMRRC Offices  
For: RMRRC staff and University of Utah personnel, USBE personnel, Utah Training School representatives and parents.  
Presenters: Judy Ann Buffmire, Vance Engleman, Bob West, and Mack McCoulskey  
Focus: Planning workshops for topical conference on severely multiply handicapped.

41. Date: August 23, 1973  
Place: Delta, Utah  
For: Millard District Opening Conference  
Presenter: Frank South  
Focus: Topic - "The Student as a Human Being." Also gave presentation to Milford Elementary faculty about the RMRRC statistician model.

42. Date: September 13-14, 1973  
Place: Moran, Wyoming  
For: Outreach Steering Committee Meeting  
Presenters: Frank South, Mack McCoulskey  
Focus: Seminar presentation of competency based training program and evaluation design.

43. Date: September 22, 1973  
Place: Salt Lake City, Utah  
For: State Conference on Mental Retardation  
Presenter: Susan Badger Harrison  
Focus: Overview of RMRRC; also "Social and Vocational Competency."

44. Date: October 9, 1973  
Place: Tooele, Utah  
For: Tooele County School District Board of Education  
Presenter: Judy Ann Buffmire and Frank South  
Focus: Discussed the role of the three statistician/generalists from Tooele.

45. Date: October 15, 1973  
Place: Beaver School District  
For: 60 fifth and sixth grade students at Milford Elementary School  
Presenters: Susan Harrison and Trish Clay  
Focus: Workshop to initiate cross-peer Tutorial system.

46. Date: October 17, 1973  
Place: Vernal, Utah
For: 17 people including district director of special education, principals, resource teachers, and counselors from Uintah District. 
Presenters: Trish Clay and Susan Harrison 
Focus: "Referral to Diagnosis: A Decision"

47. Date: October 19, 1973 
Place: Casper, Wyoming 
For: Special education teachers (145) 
Presenters: Project Outreach-Wyoming (Tom McCartney, Coordinator) 
Focus: Based on data collected by the project last year. Program was motor development directed toward the severely multiply handicapped child.

48. Date: October 25-26, 1973 
Place: Denver, Colorado 
For: American Association on Mental Deficiency Conference 
Presenters: Frank South, Mack McCoulskey, Robert West, and Trish Clay 
Focus: Overview of RMRRC on regional, state, and local levels.

49. Date: October 25-26, 1973 
Place: Denver, Colorado 
For: American Association of Mental Deficiency Conference 
Presenter: Susan Harrison 
Focus: Panel discussion on "Alternatives for Programs for the Mentally Retarded."

50. Date: November 12-13, 1973 
Place: Billings, Montana 
For: Faculty and students at Eastern Montana College (3 days - 47, 25 and 17 participants respectively) 
Presenters: Frank South and Thomas Valeski 
Focus: "Planning and Programming for the Severely Handicapped."
Focus: "Informal Diagnosis of Learning Problems," "Systematic Observation of Behavior," and "Teacher Training."

52. Date: November 14, December 5, 1973, January 10, 1974  
Place: Jordan School District, Sandy, Utah  
For: Resource teachers, elementary and secondary  
Presenter: Tom Valeski  
Focus: Diagnosis and Prescription for Special Education

53. Date: November 30 - December 1, 1973  
Place: St. George, Utah  
For: SEDC Learning Disability Workshop  
Presenter: Merrill Johnson  
Focus: The teaching of reading to LD children

54. Date: December 5-7, 1973  
Place: Portland, Oregon  
For: 111 participants (47 from RMRRC region) for topical conference, "Delivery of Effective Special Education in Rural Remote Areas."  
Presenters: RMRRC co-sponsored conference: staff attending Patricia Nelson, Robert West, Frank South, Judy Ann Buffmire, Susan Harrison, Merrill Johnson, Tom Valeski, and Jean Moore

55. Date: January 7, 1974  
Place: University of Utah  
For: Graduate student class  
Presenter: Susan Harrison  
Focus: Identification of handicapped students

56. Date: January 8-9, 1974  
Place: Helena, Montana  
For: University faculty, outreach coordinators, State Department personnel  
Presenters: Robert West, Tom Valeski  
Focus: Consultation on LD and EH population: definition, characteristics and incidence figures

57. Date: January 10-12, 1974  
Place: Billings, Montana  
For: Special educators from the surrounding area and faculty and students from Eastern Montana College  
Presenters: Cosponsored by Mike Fredrickson of Outreach-Montana  
Focus: "Precision Teaching"
58. Date: February 19-21, 1974  
Place: Big Sky, Montana  
For: Montana special education administrators (from entire state)  
Presenters: Robert West, Robert Erdman, and Michael Fredrickson  
Focus: Legislative changes increasing the state's responsibility to handicapped children; indicated needs assessment planning.

59. Date: March 1, 1974  
Place: Sandy Elementary School, Jordan, Utah  
For: School faculty members, principal  
Presenter: Tom Valeski  
Focus: Parent teacher conferences

60. Date: March 11, 1974  
Place: Cheyenne - Laramie County Community College  
For: Resource Teachers  
Presenters: Project Outreach - Wyoming, Tom McCartney Coordinator  
Focus: Information relative to the resource room concept with presentations by experts in the field and materials demonstrations.

61. Date: March 12-13, 1974  
Place: Scottsdale, Arizona  
For: 24 district administrators, and special and regular education teachers from 6 Arizona Districts  
Presenters: Frank South and Mary Buchanan  
Focus: First of a three-phase inservice training workshop in which brainstorming and problems solving for future work sessions took place.

62. Date: March 22, 1974  
Place: Provo, Utah  
For: 150 participants from six-county area served by Utah's Third District Juvenile Court  
Presenters: Project Outreach-Utah. Attended from RMRRC - Robert West  
Focus: "Changing Rights of Children" Identify problems, raise issues and facilitate communication between educators, mental health personnel and Juvenile Court.

63. Date: March 25, 1974  
Place: Boise, Idaho
For: Idaho State Department of Education
Presenter: Robert C. West
Focus: RMRRC's third-party evaluation of Title VI-G project.

64. Date: March 26-29, 1974
Place: Cheyenne and Torrington, Wyoming
For: Technical Assistance to the Wyoming State Department of Education
Presenters: Judy Ann Buffmire and Robert West
Focus: Wyoming's proposed due process document; related procedures regarding assessment of and education planning (Dr. Buffmire also spoke at Wyoming CEC Convention)

65. Date: March 25-28, 1974
Place: Phoenix, Arizona - Franciscan Renewal Center
For: 24 participating members from six districts; teams including teachers, principals, administrators and superintendents plus Special Education Department staff from University of Arizona
Presenters: Frank South and Tom Valeski
Focus: Inservice training in: diagnosis, prescriptive teaching, identification, and needs assessment of local school resource services; proposed program planning for improvement of school resource services

66. Date: March 26, 1974
Place: Alpine School District, Orem, Utah
For: Curriculum Conference for District Special Educators
Presenters: Susan Harrison
Focus: Programming for trainable mentally retarded children; also classroom management in the learning disabilities classroom

67. Date: March 28, 1974
Place: Billings, Montana
For: Technical assistance request from Larry Holmquist, State Director of Special Education and five regional coordinators.
Presenters: Mack McCoul'skey
Focus: Structure statewide evaluation of special education

68. Date: March 29-30, 1974
Place: Billings, Montana
For: Eastern Montana College training meeting
Presenter: Frank South
Focus: Planning for training workshop was subsequently cancelled, due to conflicting dates.

69. Date: April 2, 1974
Place: Salt Lake City, Utah
For: PDAC Members
Presenters: Mack McCoulskey, Susan Harrison, Frank South, Tom Valeski, Judy Buffmire and Jan Mallett
Focus: Evaluation Project Prime was explained

70. Date: April 30, 1974
Place: American Fork, Utah
For: Faculty of Harrington School, Alpine School District
Presenter: Susan Harrison
Focus: Follow-up request to speak to teachers on classroom behavior management with TMR students

71. Date: May 1-3, 1974
Place: Big Sky, Montana
For: Project Outreach Steering Committee Final Meeting
Presenters: RMRRC Staff, Outreach State Personnel and National BEH Officers and consultants
Focus: Final third-party evaluations; presentation by each state about outcomes of objectives and dissemination of packages which have been developed by the states.

72. Date: May 2, 1974
Place: University of Utah - Union Building
For: Resource/Regular Teachers, Jordan School District
Presenter: Tom Valeski
Focus: Project need for Jordan Teachers

73. Date: May 15-16, 1974
Place: Scottsdale, Arizona
For: Inservice training of Arizona special educators
Presenters: Frank South and Tom Valeski
Focus: Final phase of the inservice in which participants reported on their progress in meeting their own objectives and timelines.
74. Date: May 20, 1974
Place: Laramie, Wyoming
For: Technical assistance request from Stan Vasa, University of Wyoming
Presenters: Frank South, Susan Harrison, Tom Valeski, Merrill Johnson, Tom McCartney-
Project Outreach coordinator
Focus: To discuss methodology and strategies for developing training programs for special educators

75. Date: June 3, 1974
Place: Weber School District, Ogden, Utah
For: Opening Summer Institute for all special educators in the district
Presenter: Susan Harrison