This booklet, designed to assist school districts in providing appropriate physical education experiences for developmentally disabled students: (1) describes legislative requirements which mandate physical education services for handicapped students; (2) discusses physical education and individualized education programs (IEPs); and (3) includes special education references which teachers can use to implement appropriate programs. A discussion of the implications of Public Law 94-142 (Education for All Handicapped Children Act of 1975) and of Section 504 of the Rehabilitation Act of 1973 covers major concepts of these laws and the rights of handicapped students. A discussion concerning physical education and IEPs deals with participants in IEP decision making; the content, goals and objectives of an IEP; and student placement. Techniques for adapting physical education activities and equipment are presented. Information is provided about resource materials on implementing physical education services for the handicapped. References for tests, curricular materials, and books are included. The appendixes include examples of an IEP and a task analysis, and illustrations of sign language used in a physical education context. An outline is included of the process which a committee can use to provide services to handicapped students.
ADAPTIVE PHYSICAL EDUCATION:
A Resource Guide for Teachers, Administrators, and Parents

by

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INTRODUCTION

The purpose of this publication is to assist school districts provide appropriate physical education experiences for developmentally disabled students. Specifically, this guide will:

(a) Describe the Legislative requirements which mandate physical education services for handicapped students.

(b) Discuss physical education and the Individualized Education Program, including activity and equipment adaptations.

(c) Include special physical education references which teachers can use to assist in the implementation of appropriate programs.

One major theme will be offered in the following pages: All developmentally disabled youth are entitled to a free, appropriate public education which must include physical education. Although the procedure for meeting this need will vary from teacher to teacher, the process must include physical and motor fitness activities which are developmentally sequenced. In addition, all educational experiences must be data based to demonstrate that the physical education program has produced learning outcomes.
PHYSICAL EDUCATION AND THE LEGISLATIVE MANDATE

The Education for all Handicapped Children Act of 1975, Public Law 94-142, requires that physical education services for the handicapped, including the developmentally disabled, must be an integral part of such children's educational program. Awareness of the physical education needs of handicapped students existed long before the passage of PL 94-142. Research studies in the early 1960's demonstrated that compared to non-handicapped, the developmentally disabled were deficient in the areas of motor skills and physical fitness. Fortunately, these investigations also indicated that children with movement skill deficiencies could be taught basic game, dance, and sport skills. What was needed was an opportunity to learn and practice these skills. PL 94-142 mandates that "equal" opportunities now be provided.

Some of the important sections from the Rules and Regulations for PL 94-142 included in the August 23, 1977 Federal Register are indicated in the following pages. Of primary importance is the observation that special education services include physical education. According to Section 121a.14, the term "special education"

"...means specially designed instruction, at no cost to the parent, to meet the unique needs of a handicapped child, including classroom instruction, instruction in physical education, home instruction, and instruction in hospitals and institutions."

From the above, it is clear that not only is physical education included as a special education service, it is the only curricular area which is specifically identified.

According to the Rules and Regulations for PL 94-142, Section 121a.14, physical education

"...means the development of:

a) physical and motor fitness;
b) fundamental motor skills and patterns; and
c) skills in aquatic, dance, and individual and group games and sports (including intramural and lifetime sports)."
This is a very broad definition which affords ample opportunities to develop appropriate physical education experiences for young as well as older developmentally disabled students. A careful review of physical education curricula should be undertaken by school district personnel to analyze whether their existing programs comply with this definition. For instance, does your school justify physical education as primarily a physical fitness, i.e., health-related program? If so, special note should be made that physical education, according to PL 94-142, includes not only physical fitness but also motor fitness. This means that not only should one use games and exercises to keep children healthy, but that one must also teach children essential motor skills such as throwing, catching, and striking. Parents of developmentally disabled children will also request assistance from educators in teaching their children to learn some skills which some may not perceive to be under the realm of physical education, such as tricycle and bicycle riding. A request of this nature would appear to be consistent with the intent of PL 94-142. Many physical educators have offered cycling as a fitness activity, but few have had to teach the prerequisite skills of mounting, pedalling, and guiding, plus many of the other intricate bicycle skills which do not come naturally for some children.

Although the intent of the Education for All Handicapped Children Act of 1975 is to afford handicapped students an opportunity to participate in regular education, including physical education experiences, this is not always possible or desirable for some children. In such cases, special physical education may be necessary. According to Section 121a.307,

"...If specially designed physical education is prescribed in a child's individualized program, the public agency responsible for the education of that child shall provide the service directly, or make arrangements for it to be provided through other public or private programs."

Therefore, school districts must be prepared and willing to provide specially designed physical education services. When necessary, some school districts may elect to provide special physical education services for children through contractual agreements with other agencies. Of course, the child's home school district is responsible for monitoring the educational program which is provided.
A separate and equally monumental piece of legislation, the Rehabilitation Act of 1973, has also had a tremendous impact on the type of services provided to the handicapped. This law, popularly known as the "Civil Rights Act for the Handicapped", specifies that:

"No otherwise qualified handicapped individual in the United States shall solely by reason of his handicap, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance."

Related to physical education, Section 504 of the Rehabilitation Act specifies that:

"A recipient that offers physical education courses or that operates or sponsors intercollegiate, club, or intramural athletics shall provide to qualified handicapped students equal opportunities for comparable participation in these activities."

Section 504 of the Rehabilitation Act not only reaffirms the right of all handicapped students attending public schools to receive appropriate physical education services, but also extends the concept of physical education into the areas of athletics and intramurals which PL 94-142 only briefly addresses. Essentially, this means that developmentally disabled students should not be denied equal opportunity to participate on regular school teams or comparable special teams. If comparable special opportunities, such as the Special Olympics, are necessary, then these experiences should likewise be funded in a manner consistent with other extracurricular school activities. Awareness of this responsibility may disturb some educators. However, it seems difficult to explain why one who is mentally retarded should solicit financial support through special fund-raising events to attend the Special Olympics meet when other non-handicapped children are guaranteed this right because they are part of an "officially" recognized school team. Improvement in the conduct of activities such as the Special Olympics would also be forthcoming if more physical educators were involved as coaches and meet organizers. These responsibilities, of course, should be recognized as part of their teaching assignment with remuneration for duties outside the teacher's regular contract.

The provisions of both the Education for All Handicapped Children Act of 1975 and Section 504 of the Rehabilitation Act of 1973, indicate clearly that
school districts must provide appropriate physical education services for the handicapped. The purpose of this section is to insure that a greater number of educators are aware of this responsibility. Major concepts discussed included:

1) According to PL 94-142, physical education is defined as an integral part of special education.

2) Physical education includes not only physical fitness, but motor fitness activities as well.

3) Whenever possible, the physical education experience for the handicapped should be part of the regular class program.

4) Some children may require specially designed physical education services provided in other than the regular physical education setting.

5) School districts may provide special physical education services through contracts with other agencies.

6) Section 504 of the Rehabilitation Act of 1973 also mandates that physical education services be provided to the handicapped.

7) In addition, Section 504 stresses the right of handicapped students to participate in intramural and team sports or comparable activities.

PHYSICAL EDUCATION AND IEP CONSIDERATIONS

One of the significant features of PL 94-142 is the commitment to provide individual educational programs (IEP) which are jointly developed by school representatives and the child's parents. It is this feature, the IEP, which truly identifies PL 94-142 as a landmark piece of legislation. In this section information about IEP development and techniques for adapting activities and equipment will be presented. Appendix A contains an IEP example.

IEP Participants

According to PL 94-142, the following individuals must be present at all discussions concerning the developmentally disabled child's individual education program. Each school district is responsible for insuring that the following participants are present at the IEP meeting.

1) A representative of the public agency, other than the child's teacher, who is qualified to provide, or supervise the provision of, special education.
2) The child's teacher;
3) One or both of the child's parents;
4) The child, where appropriate;
5) Other individuals at the discretion of the parents or agency.

These individuals are charged with the responsibility of developing an appropriate educational program for each developmentally disabled youngster. Because physical education is an integral part of special education, the team must also decide on the type of physical education program to provide. This is a critical decision and one which has frustrated many IEP teams. Some of the difficulty arises because of the composition of the team and the absence of a person knowledgeable about the area of physical education. Some school districts have resolved this problem by including a representative of physical education on the IEP team. Other districts, desiring to keep the official IEP team small, have used pre-IEP meetings to obtain the input of specialists such as physical educators. Either system seems to work well. The important point is that the IEP team, as will be discussed next, makes critical decisions which affect the quality of physical education services which are eventually implemented.

**Individualized Educational Program Content**

Each individualized educational program developed must include the following:

1) A statement of the child's present level of educational performance;
2) A statement of annual goals, including short-term instructional objectives;
3) A statement of the specific special education and related services to be provided to the child, and the extent to which the child will be able to participate in regular educational programs;
4) The projected dates of initiation of services and the anticipated duration of the services; and
5) Appropriate objective criteria and evaluation procedures and schedules for determining, on at least an annual basis, whether the short-term instructional objectives are being achieved.

Careful analysis of the above elements is critical to the development of a meaningful IEP. Comments specific to the development of the individualized educational program in physical education are indicated on the following pages.
Present Level of Educational Performance

Present level of educational performance, as the title indicates, simply means what physical education skills the youngster presently possesses. To ascertain this information requires that an appropriate assessment be conducted to determine the child's physical and motor fitness levels. Unfortunately, too many school districts enter the IEP meeting without having this necessary information available. The Rules and Regulations for PL 94-142, Section 121a.532, encourage school districts to assess the child in a variety of areas including motor ability.

The child is assessed in all areas related to the suspected disability including, where appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor ability.

Assessment information about the developmentally disabled child's motor ability level may be derived from a variety of sources. These include:

School Records. What physical education skills has the student previously been taught? How did he do? Were there any problems with the physical education setting? Did the student attend class on time? Was dressing and undressing for class a positive or problem area? Information such as these examples illustrate is valuable and can assist the IEP team.

Norm-Referenced Tests. Many people associate the term assessment with norm-referenced tests. There is considerable value in being able to compare a trainable mentally retarded youngster's performance to age level peers with similar cognitive dysfunction. The Motor Fitness Test for the Moderately Mentally Retarded is an example of a nationally norm-referenced test. Although tests such as this assist one to determine present level of educational performance, they do little to determine acceptable criterion levels.

Criterion-Referenced Tests. This type of test helps the IEP team to determine how far along a continuum of defined behaviors a particular youngster is. Normally, utilization of this approach requires the availability of a curriculum which is sequenced and in which tasks such as throwing a ball are broken down into smaller steps. Fortunately, a nationally validated physical education curriculum for the moderately mentally retarded called I CAN is available. I CAN promotes the concept of criterion-referenced assessment.
Observations. Unfortunately, too few physical educators use their own powers of observation to document the need for special physical education services. Not all children lend themselves to norm or even criterion-referenced assessment procedures. Cerebral palsied, orthopedically impaired, and multihandicapped students are examples of types of disability populations that may require teachers to rely on their observational skills to assess performance levels. Teachers, too, who may be uncertain of their observations can videotape examples of the youngster's movement skills to share with others at the IEP meeting. Such a procedure frequently provides valuable information to help the rest of the team focus on the child's physical education needs.

The assessment process is the foundation upon which the IEP rests. Without accurate and adequate information, conclusions may be drawn that will result in inappropriate goals and objectives as well as inappropriate program placement.

Goals and Objectives

The goals and objectives become the guideposts for determining whether the developmentally disabled student is benefitting from the educational program developed by the IEP team. Goals provide direction and serve as a means to communicate to the child and members of the team that a particular area such as cardiorespiratory endurance needs work. Examples of physical education goals are:

Joe will improve his overhand throw.
Mary will improve her performance on the 600 yard walk-run test.
Matthew will learn to skip.

For each of the above goals, objectives should be developed that define more precisely the behaviors which are going to be taught the student. Essentially, each objective should specify the behavior, the conditions under which the behavior is to be performed, and the level of criteria accepted as appropriate. Using the first goal above, objectives for teaching Joe the overhand throw might include:

1) Using a tennis ball, Joe will throw the ball overhand and hit a 4' by 4' target ten feet away eight out of ten times;
2) Using a tennis ball, Joe will throw the ball overhand and hit a 4' by 4" target twenty feet away eight out of ten times;
3) Using a tennis ball, Joe will throw the ball overhand and hit a 2' by 2' target ten feet away eight out of ten times;
4) Using a tennis ball, Joe will throw the ball overhand and hit a 2' by 2' target twenty-five feet away eight out of ten times.

Depending on the particular child, the objectives might vary in a number of ways, e.g., the size of target, distance to target, as well as the accuracy expected. For some children, the objective might focus simply on the throwing pattern.

One need only develop a sufficient number of objectives for each goal to indicate to other members of the team the process and level of behavior deemed appropriate. Many educators are now developing their objectives including the number to correspond with the school's grading periods. Therefore, if a school has six grading periods, six objectives would be proposed for each goal. For each objective, a projected date for reaching the specified criterion must be provided.

Special Education and Related Services

Public Law 94-142 identifies physical education as a special education service. Primary concern in this section is therefore devoted to the type of physical education program to be provided. Specifically, the question of whether the developmentally disabled student requires special physical education services must be addressed. If the answer to this question is negative, the handicapped student is placed in the regular physical education program and expected to learn at a rate equivalent to that of other non-handicapped peers. For some students, however, this may seem unreasonable and a request for special physical education services should be initiated. Requests of this nature need not eliminate placement in the regular physical education setting. Some children may simply need an aide or a specialized piece of equipment. Of course, more severely developmentally disabled students may require assistance that can best be met in a special physical education experience. If so, services of this nature must be provided. More information on placement options will be offered in a later section.
Concerning related services, many physical educators may need to utilize the services of others to best fulfill the physical education needs of the developmentally disabled. Related services include, but are not limited to, the following:

- Speech Therapy
- Occupational Therapy
- Medical Service
- Transportation
- Physical Therapy
- Work Experience
- Social Services
- Recreation

Obviously, physical educators and the students they teach would benefit from the assistance of many of the professionals identified above. For instance, many Down's Syndrome youngsters experience congenital cardiovascular system problems. Engaging such children in active movement skills without the consultation and advice of a physician would be foolish. Likewise, physical and occupational therapists can assist physical educators to avoid movements which may be contraindicated for some students.

Educators should be cautioned to remember, however, that related services are related and should not be used to supplant physical education programs. Physical therapy, for instance, is a valuable and necessary service for many developmentally disabled students. However, justifying physical therapy as a replacement for a physical education program places too much emphasis on the commonality of the shared word "physical" and does a disservice to professionals in physical therapy, physical education, and the youngster who benefits from both programs.

Blanket medical excuses from physical education are no longer acceptable. Public Law 94-142 indicates clearly that all legally qualified handicapped children, which includes the developmentally disabled, will receive physical education. The medical input necessary for some children should focus on the type of program which is appropriate rather than should the child participate in physical education. Most physicians feel comfortable with this policy, particularly if there is a contact such as a school nurse or adapted physical educator with whom the doctor can communicate when necessary.

Placement

Contrary to what many believe, Public Law 94-142 does not mandate that all handicapped children be included in regular education programs. Instead
of the term "mainstreaming", recent legislation uses the concept of the "least restrictive environment". Essentially, this means that developmentally disabled children should be educated in the environment which is most conducive to their educational advancement. For some developmentally disabled, the least restrictive environment will in fact be placement, at least partially, in regular educational programs. For some who are severely disabled, such a placement is not realistic and may be more restrictive than placement in a special education class.

Special educators have relied for many years on a placement concept referred to as the Cascade System. (See Figure 1). This approach, proposed in the 1960's, suggests that the educational needs of handicapped children require a variety of settings ranging from full-time placement in a special school to placement in the regular classroom. Physical educators, too, have relied on alternative placements for handicapped students. In some school districts, two physical education options are available to handicapped youngsters: either regular physical education or adapted physical education. Unfortunately, this approach, although better than only one placement option, encourages the concept of a placement dichotomy, i.e., the student is either in regular physical education or adapted physical education. Today's consciousness forces us to be more aware of the physical education needs of the developmentally disabled. Although some disabled students will fit into an adapted physical education class or a regular physical education class, most developmentally disabled students will require options somewhere in between these extremes. Indicated in Figure 2 are some physical education settings which most school districts can provide without a great expenditure of funds.
FIGURE 1 THE CASCADE SYSTEM

LESS SEVERE HANDICAPS,
BETTER CHANCE TO MAINSTREAM
RETURN AS SOON AS POSSIBLE

MORE SEVERE HANDICAPS,
GREATER COSTS

HOSPITAL SCHOOL
RESIDENTIAL SCHOOL
SPECIAL DAY SCHOOL
FULL-TIME SPECIAL CLASS
PART-TIME SPECIAL CLASS
REGULAR CLASSROOM WITH A SPECIAL RESOURCE ROOM
REGULAR CLASSROOM WITH ITINERANT TEACHERS
REGULAR CLASSROOM WITH SPECIALIST CONSULTANTS
THE EVERYDAY CLASSROOM

ALL HANDICAPPED CHILDREN

LESS SEVERE HANDICAPS,
BETTER CHANCE TO MAINSTREAM
RETURN AS SOON AS POSSIBLE

RESIDENTIAL SCHOOL
HOSPITAL SCHOOL
SPECIAL DAY SCHOOL
FULL-TIME SPECIAL CLASS
PART-TIME SPECIAL CLASS
REGULAR CLASSROOM WITH A SPECIAL RESOURCE ROOM
REGULAR CLASSROOM WITH ITINERANT TEACHERS
REGULAR CLASSROOM WITH SPECIALIST CONSULTANTS
THE EVERYDAY CLASSROOM

MORE SEVERE HANDICAPS,
GREATER COSTS

MOVE ONLY AS FAR AS NECESSARY

REPRODUCED FROM THE PUBLICATION ONE OUT OF TEN AND UTILIZED BY PERMISSION OF EDUCATIONAL FACILITIES LABORATORIES, NEW YORK, N.Y.
OPTIONS FOR PHYSICAL EDUCATION SERVICES

I. Regular Physical Education
II. Regular Physical Education and Consultative Assistance
III. Regular Physical Education with Assistance
IV. Regular Physical Education plus Part-time Special Class
V. Full-time Special Class
VI. Full-time Special School

Figure 2

Options II, III, and IV require that assistance be provided to the physical educator. For instance, in Option II, a school district may have available a special educator or adapted physical education consultant to provide specific behavior management or program development assistance. Option III necessitates that aides, peer tutors, or volunteers be available to assist with physical education instruction. Such a request is not foreign to classroom teachers of developmentally disabled students. Appropriate physical education experiences for some handicapped students requires the assistance of instructional aides. Many developmentally disabled students will need part-time placement, Option IV, in a special physical education class. To accommodate these needs, school district administrators must be sensitive to the physical education teacher's instructional schedule. A teacher, for example, may need to be released from other responsibilities to provide the required services. Duties which are not instructional in nature, such as supervision and lunch room monitoring, can usually be reassigned without great difficulty. Of course, it may be necessary to reschedule the physical education teacher's class assignment to deliver necessary services to children who have specific physical and motor fitness deficiencies. Smaller school districts may find it financially advantageous
to contract through an Educational Service District to provide special physical education services.

It should be emphasized that the type of service and placement necessary for a child in one academic area is not necessarily the same as for other areas of programming. A child who requires part-time or full-time special class placement for some educational services, e.g., reading and math, may be able to participate in a regular physical education program with little or no special services. Likewise, some children, e.g., the severely involved cerebral palsied student, may need little classroom assistance, but require specially designed physical education services. Although mentally retarded students exhibit deficiencies in both cognitive and motor skills frequently, the relationship is not perfect. Individual differences must always be considered in determining appropriate placements.

Physical Education Program Implementor

Public Law 94-142 does not specify that physical education programs be taught by a physical educator. The law suggests only that the teacher of any special education program should be qualified. Normally, this would mean that the person is certified as an educator and is also knowledgeable in the subject, e.g., physical education. In those districts where professionally trained physical educators are employed, it seems logical that physical education services for the developmentally disabled would be under their direction. Special educators may, however, be expected to provide physical and motor fitness instruction if physical educators are not available. Such a personnel policy does exist in some Oregon school districts, particularly at the elementary level. Of concern to this author is the unfortunate situation where elementary physical education teachers are available, but their service responsibility excludes trainable mentally retarded children. A practice such as this is unwise, inconsistent with the intent of PL 94-142, and likely to be questioned by a concerned parent.

Adapting Activities

The focus of the physical education program should be to assist all children function at their maximum performance level. Achieving this goal can be
facilitated through the individualized educational program. Realistic goals and objectives should be developed that present a challenge, but do not force the child into experiences loaded with failure. To provide positive experiences means that many developmentally disabled children will require instructional activities that are adapted to their particular needs. Some examples of activity adaptations include:

(a) **Modify the rules of an activity.** This can be accomplished in several ways. Some of the common team sports such as basketball have rules which are very complex (as evidenced by the increasing number of college conferences which use three officials). Developmentally disabled children are often denied the experience of the game because of the frequent stops due to rule infractions. Teachers should not be reluctant to modify rules, e.g., four instead of two steps between dribbles, as long as the major objective of the game, i.e., putting the ball in the basket, is not disturbed.

(b) **Accommodate the special needs of children.** For example, visually impaired children can participate in team activities if physical education teachers will adapt different components of the activity. In softball, for instance, the visually impaired youngster could hit the ball from a batting tee, run to first base using a rope, an aide, or a sound of a coach's voice. The same youngster could field a ground ball with the verbal assistance of a teammate. A rule modification that a runner going to first is out if the visually impaired fielder locates, picks up and brings the ball to waist level could be made. A throw to first would not be necessary, thus creating a situation in which a student with a disability becomes an asset for a team and not a liability.

(c) **Avoid elimination games.** The game of dodge ball, for instance, can be changed so that those who are hit become throwers rather than sideline spectators. In addition, children who move slowly and are most likely to be hit first can become throwers only if hit in a designated body region, such as the right foot. Such an adaptation forces throwers to focus on accuracy. In addition, the slower student is not always the first hit and thus quickly eliminated. Changes such as these can be disguised to avoid new labels by designating all players wearing red shirts or players whose names begin with the letter J as the individuals who must be hit on the right foot.
Most activities in physical education can be structured to include rather than exclude children. Even the simple task of asking children to jump over a rope held parallel to the floor can be altered by tilting the rope, thereby avoiding the common problem of children eliminating themselves because the rope is too high or because they tried and fell. Developing activities that include rather than exclude children requires only a teacher who is sensitive to the needs of children.

(d) **Encourage creativity.** Teachers can structure lessons so that children are asked to respond to challenge questions such as "make a bridge with your body", "balance on five body parts", "move forward", "now show me another way to move forward". Such an approach permits students with various disabilities to respond in ways that allow for success. Students in wheelchair, for instance, could respond successfully to each of the above questions by: bending forward with their arms or arching their arms to the side to make a bridge; balance on five body parts by putting their foot on the floor (four wheels on the chair plus the foot); and could successfully move forward two ways using the conventional manner plus using one arm rather than two arms for the second method. Obviously, variations such as these would change from student to student depending upon the type and severity of impairment.

(e) **Reduce the activity area.** Children with some disabilities such as cerebral palsy, talipes, and various forms of paralysis who have movement limitations will benefit from activities in which their area of responsibility or coverage is reduced. For example, in games such as table tennis, the cerebral palsied student may be responsible for defending one-half of the normal table area while the non-disabled opponent is responsible for the regular table area expected in doubles table tennis. When students in wheelchairs are asked to serve as goalies, the goal can be reduced in size. Adaptations such as these permit an equalizing of ability based on a student's movement limitations. Disabled and non-disabled students find alterations such as these acceptable if efforts are made to explain the rationale for the alteration in the activity.
(f) Change the method of communication. Developmentally disabled children sometimes require communication systems that are specific to their needs. For example, verbally explaining a task may not match up well with some children's information processing system. Information which is more specific might be provided in other ways. The instructor or peer teacher, for example, could simply demonstrate the skill. Also, one could permit a student to "feel" the skill by encouraging the child to hold onto the teacher's arm as the instructor demonstrates a skill such as the front crawl in swimming. Some students need to not only hear or see a skill, but to read a description of the skill. This need can be met for poor or non-readers through the use of poster board to which stick figures are attached to show the sequence necessary for a skill like the forward roll.

The suggestions described above can also be adapted to accommodate hearing and visually impaired students. Verbal instructions should be signed, wherever possible, for hearing impaired students. Examples of some of the signs pertinent to physical education are found in Appendix C. Visually impaired students should have written instructional material available in braille or recorded tapes. Stick figures made from felt and attached to poster board can be used to assist visually impaired students to comprehend the sequence of a specific movement skill.
Equipment Modifications

Successful participation in physical activity requires for some handicapped children equipment which has been modified to their particular needs. Requests for purchase or construction of equipment can now be facilitated through the Individualized Educational Plan. If special equipment is necessary to help a youngster achieve in physical education, then it should be identified at the IEP meeting and included on the IEP form. Fortunately, special activity equipment is usually not expensive. Indicated below are some equipment modifications which have been used in the physical education setting. Those illustrated are not an exhaustive list, but should serve as examples of creative ideas generated by concerned teachers.

Two-handed Paddle. Cerebral palsied individuals frequently find it much easier to control a two- rather than one-handled paddle. The paddle also encourages bilateral and, therefore, symmetrical rather than asymmetrical movement.

Hitting Tee. Many children such as the blind, poorly coordinated, and wheelchair students may need to rely initially on a batting tee. This piece of equipment is obviously a good example of an item which encourages teaching through a developmental framework.
Bowling Ball with Handle. Students who do not have sufficient strength or control of the fingers will find a bowling ball with retractable handle a valuable aid. Students who have serious muscular deficiencies may also find the Bowling Ramp an adaptation which permits them to experience a popular leisure activity.

Velcro on a Paddle Handle. Some students who have difficulty with mobility may find velcro attached to the head of a badminton racket as well as the bird a valuable assist to pick up the bird thus permitting them to enjoy the activity and function independently. This adaptation is an example of a very inexpensive modification.

Audible Ball and Goal Indicators. Balls which emit a constant sound are sometimes helpful for the visually impaired students. Frisbees with electric sound devices have also recently been developed and are commercially available. Radios, metronomes, and other electronic devices can be placed on, near or behind targets, baskets, and goals to provide an audible cue for students with perceptual or visual difficulties.
Adjustable Tables. A major improvement in many of our popular table games (e.g., billiards and table tennis) has been the introduction of tables which are height adjustable. Students in wheelchairs now find such games more accessible. Interestingly, too, is the observation that children and short individuals find adjustable tables a helpful modification. Removable sides have also been added to some tennis tables to help keep the ball on the table. This adaptation, valuable in itself, has also created interest from handicapped and non-handicapped people alike in a new game.

Hoops, Ropes, and Balls. Modifying equipment common to any physical education program can assist children learn regardless of their developmental stage. For instance, hula hoops can be used as modified basketball hoops. Not only is the target larger and therefore a more attainable goal for most children, the hoop can be placed at varying heights. Ropes, too, can be selected which have handles, thus permitting students who have problems with grasp to hold onto the rope easier. Balls are available in a variety of sizes from small tennis balls to develop throwing skills, to large ten-inch diameter playground balls for encouraging catching responses. Foam balls, too, are excellent for helping children learn throwing, catching, and striking skills.

Devices to Assist in Moving. Children who are non-ambulatory or who ambulate with difficulty can utilize a variety of assistive devices to extend their opportunities for participation in physical education. Such devices include scooter boards (with handles if necessary), tricycles with built-up pedals and backs, and adapted wheelchairs. Children who require the assistance of canes and crutches can also be permitted to use their aid as a striking implement, for example in an activity such as floor hockey.
Padded Helmets. Children with various disabilities, such as the visually impaired and epileptic, are occasionally restricted from participating in certain physical education activities because of the potential danger from falling or being struck by a ball or implement. With the consent of the child's physician, need for total elimination of certain activities can be avoided through the use of a padded helmet.
RESOURCE MATERIALS

In the following pages information will be provided about material that the physical education teacher will find helpful in implementing physical education services for the developmentally disabled. References for tests, curricular material, and books will be included.

Tests


This guide provides information about physical fitness tests, perceptual-motor scales, and developmental profiles for use with impaired, disabled, and handicapped persons. Summaries of instruments in each of the listed areas contain information about where each device is available, what is measured and how it is measured, administrative considerations, and general comments.


Contains modifications of, and special norms for, moderately mentally retarded persons on the AAHPER/Kennedy Foundation Special Fitness Test. Additional activities and performance scales appropriate for this population are included. An award system developed in terms of moderately mentally retarded children is an integral part of the program.


After extensive study, a seven-item test has been proposed which measures the motor proficiency of trainable mentally retarded children. The publication describes the tests, how to administer them, and provides norms for boys and girls ages 6-21.

The test measures the specific motor skills most needed by handicapped children to function efficiently in everyday life; hence, the skills are referred to as basic skills. Twenty skills are assessed including walking, pushing, ascending and descending stairs, jumping, etc. A criterion of the most effective way to perform each movement was established, and a scale of three levels of performance was set, based on the criteria. The level at which the child being examined performs provides a guide for teaching movement that will enable the child to execute the basic skill more effectively.

Curriculums

I CAN Program. Hubbard Scientific Company, P.O. Box 104, North Brook, Illinois 60062.

A developmental physical education program which is divided into four areas: aquatics, body management, health and fitness, and fundamental skills. The teacher is provided with sequenced materials which include performance objectives, assessment standards, instructional techniques, data forms, and games that reinforce the instructional program.

Project Active. Township of Ocean School District, Oakhurst, New Jersey 07755

Project Active is a comprehensive adapted physical education program. Materials are available to assist teachers provide appropriate physical education for children with a wide range of disabilities. Project Active has been validated by the standards and guidelines of the United States Office of Education as successful, cost-effective, and exportable. It is now available through the National Diffusion Network.

Oregon State University-Teaching Research Data Based Physical Education Curriculum. Available from John M. Dunn, Department of Physical Education, Oregon State University, Corvallis, Oregon 97331.

Oregon State University, Department of Physical Education, through cooperation with Teaching Research, has developed a data based physical education program for moderately and severely handicapped students. Information is
provided to assist teachers place, baseline, implement, and post-test children to determine learning outcomes in physical education. An example of the task-analyzed curriculum is provided in Appendix B.

**PEOPEL Program.** Phoenix Union High School System, 2526 West Osborn Road, Phoenix, Arizona 85017.

The PEOPEL Program consists of a variety of materials including a task-analyzed physical education curriculum adapted for a variety of students with various disabilities. Included in the PEOPEL materials is a guide for training high school peers to work with disabled students in physical education activities.

**Preschool Recreation Enrichment Program (PREP).** Hawkins and Associates, Inc. 729 Delaware Avenue, SW, Washington, D.C. 20024.

This is a publication designed to assist recreation personnel in establishing the content of programs addressing the motor and associative learning needs of preschool children. The PREP Manual is composed of 27 fine and gross motor skills which have been task-analyzed into three developmental levels. Illustrations are provided to describe existing behavior as well as the behavior to be achieved. Accompanying each of the three levels is a set of life experience activities, which suggest tasks for teaching or practicing the skill. Games, reinforcement activities, language activities, and equipment are recommended for each skill.


Let's Play to Grow is a set of simply written illustrated guides to a wide variety of games, sports, family activities, and creative experiences which can be shared with handicapped children of all ages. It can be used to supplement the school physical education curriculum, as a program of daily activities for group homes and as an activity source of activities to do with parents at home.
Texts and Publications


Deals with the what, why, who, when, where, and how of adapted physical education in a clear perspective consistent with current directions and future trends as related to education, philosophy, legislation, and litigation.


Contains details on 28 information systems in the areas of education, special education, the sciences, physical education, recreation, and services available to disabled consumers. Complete name and address, general services provided, and details on use of each system is also included.

Integrating Persons with Handicapping Conditions into Regular Physical Education and Recreation Programs 1977 ($4.00).

An analysis of selected research and program literature concerned with the integration of individuals with handicapping conditions into physical education, recreation and related programs. With selected references and audio-visual aids.

Physical Education and Recreation for Individuals with Multiple Handicapping Conditions 1978 ($2.50).

Contains a brief analysis of literature, abstracts, and information on physical education and recreation for individuals with multiple handicapping conditions--including data becoming available since the original publication in 1975. Sections are presented that include examples of related programs, references, resource contacts, and audio-visual aids.

Practical Pointers ($2.00 each)

A new series of publications providing functional, how-to-do-it information about physical education, recreation, sports, and related activity areas involving impaired, disabled, and handicapped persons. They contain (1) ideas to assist in using various activities to meet unique needs of individuals with different handicapping conditions; (2) adaptations, modifications, and creative approaches that have been successfully used in ongoing
programs; and (3) ideas to stimulate creativeness to find new and innovative ways to meeting needs of participants in either special or regular programs and activities. The several issues of the "Practical Pointers" series are now available.


This book emphasizes the need for gross motor activities in the everyday life of the physically handicapped child and adult. Also, general characteristics of the handicapped child and medical problems encountered in the public schools and hospital settings are emphasized in order to provide understanding of the problems that are involved in the regular and special physical education teaching.


This volume is designed for the elementary and secondary school educator and the specialist in adapted physical education. More specifically, it is intended as a text for college classes offering courses in adapted and physical education. Program information is provided for most of the disability populations.


This publication offers one of the most up-to-date and comprehensive views available concerning students who are orthopedically and multiply handicapped. An attempt is made to present practical information supported by an abundance of excellent resources. Task analysis provides the basic framework for this book.


This book attempts to present in concise lay language the essentials of medical diagnosis, treatment, and prognosis of the major physically handicapping conditions originating in childhood. Although this reference is specific to special education introductory courses, much practical information is presented which is pertinent to the field of physical education.


A theoretical discussion of the motor ability of mentally retarded children. Appropriate literature is reviewed which the research scholar, curriculum specialist, administrator, and teacher will find informative and useful.

This edition is designed for use as a basic text in physical education for the handicapped. The modern-day educational concept of serving all children with special needs who are able to attend public schools makes it imperative that physical educators be given the information necessary to understand and provide for the special needs, interests, and abilities of children with various kinds of physical, mental, and emotional handicaps. It is the objective of this book to provide this information.


This document is must reading for all teachers, administrators, and parents concerned with the quality and appropriateness of educational programs offered handicapped students.


This publication provides practical information on modifying activities for individuals with prevalent handicapping conditions. This approach is based upon functional levels in the affective, cognitive, and psychomotor domains rather than according to categorization of a person relative to a particular handicapping condition.


The text is written for those teachers whose training was in the field of special education with no specialization in physical education. The sequences in the text range from the most simple and basic analysis to the complex and complete stunt or skill in a variety of activities.


This text has been written as a tool for use by the educator in providing individualized and meaningful movement experiences for those children in our society who are mentally retarded or emotionally disturbed.


An introductory text which provides information on the more common disability populations found within the school environment. Information is presented in a very comprehensive, factual and understandable manner. Programmatic ideas are found throughout the publication.


This is a specialized text which focuses on various types and uses of equipment adapted for the handicapped student in physical education.
Pictures throughout the book illustrate the types of adaptations which have been developed by concerned teachers and disabled students.

Wisconsin Department of Public Instruction. Physical Education Curriculum for the Mentally Handicapped. Madison, Wisconsin: The Department, 1974.

A practical guide which physical education and special education teachers will find helpful in developing activity programs for mentally retarded students. Sufficient information is offered to assist school districts develop appropriate physical education experiences.
Appendix A: IEP Example

Case Report for Brian

Brian is an eight-year old trainable mentally retarded child (Down's syndrome). Until this past year Brian received his education at a private residential facility for the mentally retarded. Recently Brian has been placed in a special public school class for the developmentally disabled. His classroom accomplishments, when compared to his special classroom peers, are good.

Brian has had no formal physical education opportunity. He has had some limited experiences playing games with the residential aides at his former school. Assessment information indicates below average performance in both motor and physical fitness as determined through results obtained from the Motor Fitness Test for the Moderately Mentally Retarded. Observational information indicates that Brian also has difficulty with essential game skills, particularly throwing, catching, and hitting. He does perform the basic locomotor skills reasonably well.

The instructional process is sometimes difficult with Brian because of his behavior. Some success has been noted through the use of a structured behavior management program.

Brian's parents are concerned about his lack of endurance. They would also like to see Brian learn some basic game skills.
INDIVIDUAL EDUCATION PROGRAM

INDIVIDUAL IMPLEMENTATION PLAN

Student's Name: Brian

Consideration should be given to academic, social adaptation, pre-vocational/vocational, psychomotor, and self-help skills

<table>
<thead>
<tr>
<th>AREA</th>
<th>Current Level of Educational Functioning (include strengths and weaknesses)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Education</td>
<td>Brian has had limited physical education experiences. Through assessment, deficiencies were found in general motor and physical fitness. Specific weaknesses were noted in the game skills of throwing, catching, and hitting. Brian’s basic locomotor skills appear to be okay.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Long Term Objectives (Annual Goals)</th>
<th>Short Term Objectives (including criteria)</th>
<th>Strategies (to be completed by teacher)</th>
<th>Materials</th>
<th>Start</th>
<th>Complete</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Increase general levels of physical fitness.</td>
<td>1a) Complete the 300 yd. run-walk at 50 percentile using age appropriate norms.</td>
<td>Developmental Motor Present 20%</td>
<td>Fitness Testing Manual</td>
<td>1/7/79</td>
<td>6/1/79</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1b) Maintain flexed-arm hang with overhand grip for 5 secs, keeping chin level and above bar.</td>
<td>1st qtr. 1 s.</td>
<td>&quot;</td>
<td>1/7/79</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2nd qtr. 3 s.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3rd qtr. 4 s.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1c) Complete 10 sit-ups without stopping from supine position, knees flexed, feet held and alternate elbow to knee.</td>
<td>1st qtr. 5</td>
<td>&quot;</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2nd qtr. 7</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3rd qtr. 9</td>
<td></td>
</tr>
</tbody>
</table>

Least Restrictive Instructional Environment:

Special physical education class to work on specific deficiencies noted above.

Procedures for Evaluating Progress Toward Achieving Short Term Objectives:

Post-test on Motor Fitness Test for the Moderately Mentally Retarded

Review of criterion above by quarters

Review of Brian’s behavior pattern in physical education
INDIVIDUAL EDUCATION PROGRAM

INDIVIDUAL IMPLEMENTATION PLAN

Complete as many forms as required

Student's Name __________ Brian

Consideration should be given to academic, social adaptation, pre-vocational/vocational, psychomotor, and self-help skills

<table>
<thead>
<tr>
<th>AREA</th>
<th>Physical Education (cont'd)</th>
<th>Current Level of Educational Functioning (include strengths and weaknesses)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>See page 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Long Term Objectives (Annual Goals)</th>
<th>Short Term Objectives (including criteria)</th>
<th>Strategies (to be completed by teacher)</th>
<th>Materials</th>
<th>Start</th>
<th>Complete</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Improve game skills of throwing, catching, and hitting.</td>
<td>2a) Throw a tennis ball from a distance of 15' at 4'x4' target with 80% accuracy.</td>
<td>Developmental</td>
<td>OSU/TR PE Curriculum</td>
<td>1/7/79</td>
<td>6/1/79</td>
</tr>
<tr>
<td></td>
<td>2b) Catch a 10-inch playground ball tossed underhand by a peer standing 10 feet away with 80% accuracy.</td>
<td>Vary distance and target size</td>
<td>&quot;</td>
<td>1/7/79</td>
<td>6/1/79</td>
</tr>
<tr>
<td></td>
<td>2c) Hit a waffle ball using a plastic bat from a rubber batting tee 90% of the time.</td>
<td>Vary size of ball and bat.</td>
<td>Batting tee</td>
<td>1/7/79</td>
<td>6/1/79</td>
</tr>
</tbody>
</table>

Least Restrictive Instructional Environment:

Procedures for Evaluating Progress Toward Achieving Short Term Objectives:

See page 1
Appendix B: Task Analysis Examples*

* Taken from Dunn, John M., et al, A Data Based Gymnasium, Unpublished manuscript, Department of Physical Education, Oregon State University.
Movement Concepts, General Space

D. To demonstrate awareness of shape and boundaries by moving within a five foot square area without touching objects within this area.

Terminal Objective: Student shall move around the inside of a 5 foot square area without touching objects placed inside the area.

Prerequisite Skills: Movement Concepts, General Space, Skill C.

Phase I
Student will be led completely around a 15' x 15' square area which contains 4 chairs.

Phase II
Student will be led halfway around a 15' x 15' area which contains 4 chairs.

Phase III
Student will be led 1/4 way around a 15' x 15' area which contains 4 chairs.

Phase IV
Student will independently move around a 15' x 15' area which contains 4 chairs.

Phase V
Student will independently move around a 10' x 10' area which contains 4 chairs.

The following steps apply to phases I through V

Steps:
1. 1 chair
2. 2 chairs
3. 3 chairs

Phase VI
Student will move around a 5' x 5' area which contains 4 objects.

The following steps apply to Phase VI above

Steps:
1. 4 tennis balls
2. 4 softballs
3. 4 8-1/2" balls
D. To Demonstrate Awareness of Shape and Boundaries by Moving Within a Five Foot Square Area Without Touching Objects Within This Area.

Teaching Notes:
1. Prior to running this program, the teacher should make a path through the objects. She should instruct the child to follow the path throughout the sequencing of the phase.

Materials: Chalk Line
Game Skills, Basic

F. Kicking With the Toe, Preferred Foot

Terminal Objective: Student, from a standing position, will form a kick by swinging the preferred leg backwards and then forwards striking the ball with the toe of the foot, causing the ball to roll in the direction of a target placed 20 feet away.

Prerequisite Skills: Fine Motor Skills/Lower Extremity, Skill K.

Phase I
Student, from a standing position, will form a kick by swinging the preferred leg backwards and then forwards, striking the ball with the toe of the foot, causing the ball to roll in the direction of a target placed 5 feet away. The teacher will assist the child by placing her hand on his preferred leg and pushing his leg backwards and then forwards, causing it to strike the ball at the toe of the foot.

Phase II
Student, from a standing position, will form a kick by swinging the preferred leg backwards and then forwards, striking the ball with the toe of the foot, causing the ball to roll in the direction of the target placed 5 feet away. The teacher will assist the child by placing her hand on the child's preferred leg, and forcing the leg backwards and prompting it forwards, allowing the leg to strike the ball on the toe of the foot.

Phase III
Student, from a standing position, will perform a kick by swinging the preferred leg backwards and then forward, striking the ball with the toe of the foot, causing the ball to roll in the direction of the target placed 5 feet away. The teacher will assist the student by placing her hand on the preferred leg and forcing the leg backwards allowing the leg to come forward and striking the ball on the toe.

Phase IV
Student, from standing position, will perform a kick by swinging the preferred leg backwards and then forwards, striking the ball with the toe of the foot, causing the ball to roll in the direction of the target placed 5 feet away. The teacher will assist the student by placing her hand on the student's preferred leg and prompting the foot backwards, allowing the leg to then come forward and strike the ball on the toe of the foot.
Phase V

Student, from a standing position, will perform a kick by swinging the preferred leg backwards and then forwards, striking the ball with the toe of the foot, causing the ball to roll in the direction of the target placed 20 feet away.

The following steps apply to Phase V.

Steps:

1. 10'
2. 15'
3. 20'

Suggested Materials: A 8' diameter ball.
Movement Concepts, Personal Space

F. To Move the Body Sideways in Space

Terminal Objective: Student shall move the body to the left by stepping sideways one step and then back to the right by stepping sideways one step.

Prerequisite Skills: Body Orientation, Skill C

Phase I
Student shall move the body to the left by stepping sideways.

Phase II
Student shall move the body to the right by stepping sideways.

Phase III
Student shall move the body to the left by stepping sideways and then back to the right by stepping sideways.

Teaching Notes:
1. If the student is non-ambulatory, another form of locomotion should be utilized.
Appendix C:

Examples of Sign Language Used in Teaching Physical Education
WAYS OF MOVING

GALLOP

ROLL

RUN

SKIP

SLIDE

SWING

WALK
Appendix D: Special Physical Education Checklist

On the following pages is an outline of the process which an adapted physical education committee within a school district can use to provide physical education services to their handicapped students.
Special Physical Education Checklist

STEP I - Review selected materials.
- Read Public Law 94-142, August 23, 1977, Federal Register
- Read Section 504 of the Rehabilitation Act of 1973, May 4, 1977, Federal Register
- Analyze school district's present physical education philosophy
- Review statewide physical education curriculums
- Review adapted physical education material from suggested reference sheet

STEP II - Interact with policy/decision makers
- Discuss special physical education with administrators
- Discuss special physical education with district physical education coordinator
- Select and meet with a parent advisory group
- Meet with district coordinator of special education
- Meet with county Medical Society
- Meet with disabled advocate groups

STEP III - Develop special physical education plan.
- Write district physical education philosophical statement on purpose of physical education which conforms to federal legislation
- Assess instructional staff training needs
- Identify a special physical education coordinator
- Analyze facilities for accessibility and useability
- Identify special equipment needs
- Identify educational books and curricular materials needed as resources
- Share plan with policy/decision makers

STEP IV - Inservice teachers of physical education
- Review federal legislation, PL 94-142 and PL 93-112
- Provide information on society's changing view of the disabled
- Interpret expression "free appropriate public education"
- Discuss screening and referral process
- Analyze the least restrictive environment concept
- Comprehend the individualized education program process

STEP V - Identify special populations
- Review special education census
- Solicit referrals from teachers of physical education
- Review case histories of students medically excused from physical education
- Establish timelines and service priorities
STEP VI - Contact parents concerning identified needs
Coordinate with district special education office
Explain physical education assessment process
Indicate in writing due process guarantees
Obtain written parent permission prior to assessment

STEP VII - Assess identified students' special physical education needs
(physical fitness, motor fitness, leisure development)
Assess all qualified special education students
Assess all non-qualified special education students who do have special
physical education needs, e.g., obese and clumsy children
Assess students with temporary disabilities

STEP VII - Participate in individual education program development
Present and interpret physical education assessment information
Present proposed goals and objectives for physical education
Respond to parent input
Finalize goals and objectives for physical education
Recommend appropriate placement in physical education
Identify any special equipment and supplies which will be needed
Establish program timelines
Recommend assistance from related service areas, e.g., physical
therapy and recreation, if needed
Present physical education evaluation plan
Assist associates develop goals and objectives for other psycho-
motor areas, i.e., self-help and vocational skills

STEP IX - Implement program
Select appropriate physical education placement
Identify receptive teacher of physical education
Review IEP physical education program, including goals and
objectives with teacher
Provide teacher aide, if necessary
Recruit and train volunteers (peers, student leaders, parents,
senior citizens, etc.)
Provide resource consultation to teacher
Establish pre-instructional baseline
Post-test to determine instructional outcomes
Update student's individualized educational program

STEP X - Conduct summative evaluation
Review student individual education program
Analyze pre-post test comparison of individual
Solicit student and parent feedback
Recommend program changes