This paper lists practices recommended by the Council for Exceptional Children's Division for Early Childhood concerning the process of transition in early intervention and early childhood special education programs for infants and young children with special needs and their families. An introductory section defines transition, offers examples of types of transition, and notes that the type of planning and practices that are employed can influence the success of transition and satisfaction with the transition process by all concerned. Several components which influence the success of transition are addressed, including state and local agencies, sending and receiving program providers, families and other caregivers, and children. Other issues that must be addressed in order to facilitate transitions are also noted, including administrative support for planning, personnel training, and evaluation of the transition process. Twenty-two recommended practices for transition are then listed. (JDD)
Transition

Mary Beth Bruder and Lynette K. Chandler

Transition has been defined as an outcome oriented process (Will, 1985), the key elements of which are planning and cooperation. Strategies and procedures that are planned and employed to ensure the smooth placement and subsequent adjustment of a child as he or she moves from one program to another are also important elements (Huttinger, 1982). A successful transition is a series of well planned steps that result in the placement of the child and family into another setting.

Within the field of early intervention and/or early childhood special education transition can be defined as the process of moving from one program to another, or from one service delivery mode to another (Chandler, 1992). While formal program transitions for young children with disabilities typically occur at age three (into preschool) and age five (into kindergarten), transition between services, providers, and programs also can occur throughout these early years. For example, transitions can begin for some children at the moment of birth, if it is determined that their health status requires transfer to a special care nursery. The families of these children may then interact with at least two different hospital staffs and two medical facilities. In addition, some of these children are transferred back to a community hospital prior to discharge home. Each of these moves serves as another transition for the family and infant. Additionally, if the infant enrolls in an early

Members of the working group for this strand were: Robert Boyce, Barbara Fiechtl, Susan Gold, Ann H. Hains, Esther Kottwitz, Cathy Liles, Peggy Stephens, Sharon Rosenkoetter, Beth Rous, Ilene Schwartz, and Gail Trujillo.
intervention program, she and her family will experience other transition points during service delivery. For example, the type and intensity of intervention services may be changed according to child need and/or family request. As services change, so may providers. That is, a family and child may work with a number of providers, and each may represent another transition point for the child and family.

Successful transitions are a primary goal of early intervention and early childhood special education (Fowler, 1982; McCormick & Kawate, 1982; Salisbury & Vincent, 1990). Transition presents children and families with new opportunities for growth and development. However, it also presents many challenges and can create stress for both children and families. Well planned transitions can be an enabling and satisfying experience, while poorly planned or unplanned transitions can be a time of vulnerability and uncertainty for children and families (Rice & O’Brien, 1990). The type of planning and practices that are employed can influence the success of transition and satisfaction with the transition process experienced by all concerned.

According to Wolery (1989), transition should fulfill four goals: a) to ensure continuity of services; b) to minimize disruptions to the family system by facilitating adaptation to change; c) to ensure that children are prepared to function in the receiving program; and d) to fulfill the legal requirements of P.L. 99-457. In order to achieve these goals, it is necessary to assist families and their children. These supports must come from both the sending and receiving program. Both programs should collaboratively insure the continuity of appropriate services to the family and the child. Unfortunately, many programs and services have not adapted formal procedures to facilitate the transition of families and
children either into or out of their program.

In order to develop comprehensive, formal transition procedures, several components which influence the success of transition must be addressed. These are: a) state and local agencies, b) sending and receiving program providers, c) families and other caregivers, and d) children.

State and Local Agency Component

Effective transitions rely on proactive planning to insure a smooth process. This planning must be comprehensive and it must occur prior to the time a child and his or her family actually moves to a new program. Planning for transition should start at the agency level and should occur within (intra-agency) and between (interagency) agencies. Thorough interagency planning will involve the development of interagency agreements that specify the roles and responsibilities of each agency, the composition of the transition team, the policies and procedures related to transition, and timeliness for initiating and completing transition tasks. Interagency agreements will promote interagency cooperation and communication and should ensure the continuity of a child’s program as well as the implementation of transition procedures as planned (Hains, Fowler, & Chandler, 1988).

Intra-agency planning should specify the lines of communication within an agency or program and the roles and responsibilities of providers within a program. Planning within programs can help assure that program providers will have adequate time and resources to plan for transition and to complete transition tasks.

Sending and Receiving Program Providers Component

"Sending" program providers work in the program the child is leaving; "receiving"
providers work in the program to which the child is moving. In order for transition to be successful and for planning to be comprehensive, all team members must participate. This includes program providers, the child when applicable, and the child’s family. The program providers component includes individuals within programs and agencies that provide services to the child and family. Program providers may include home-based or classroom-based teachers, physical and occupational therapists, speech pathologists, nurses, social workers, case managers or service coordinators, and parent coordinators.

Providers in the sending and receiving programs can facilitate the transition process in several ways. Providers in both programs can prepare the child for transition and provide environmental supports to meet the child’s needs during the transition process. They also can involve families and other caregivers in transition planning, to the extent that families desire, and provide information concerning community resources and options for transition to families. Sending and receiving program providers also can facilitate transition by following the guidelines and procedures that were identified on the interagency agreement and during intra-agency planning. Some of these procedures include sharing information between programs, observing in the sending and receiving programs to identify similarities and differences and the requirements of each program, working cooperatively with each other and with the child’s family, preparing individuals in the receiving program for the child’s transition, and completion of the tasks identified on the transition timeline.

Families and Other Caregivers Component

Families and other caregivers are important members of the transition team. They are the constant in a child’s life. This fact is emphasized at every transition point for a child
who participates in early intervention or early childhood special education. The family must be integrally involved in any transition planning. Family involvement should begin upon the child’s entry into a program.

Participation by family members (e.g., parents) can be beneficial for sending and receiving program providers, the child, and family members. Parents and other caregivers can participate in the transition process in several ways, ranging from receiving information about transition to active decision making and child preparation. The level of family and other caregiver participation in transition should be individualized across families and reflect family concerns, resources, and priorities.

All families with a child who will make a transition (and other caregivers as designated by the family) should receive information about the anticipated transition, the transition process or steps and tasks to be completed, options for the child and family for future services, and options for participation in the transition process. It should be emphasized that families also should be considered as equal members of the transition team. As members of the transition team, families should be given opportunities to meet with providers from the sending and receiving programs, to observe possible programs and service options before a transition occurs, to attend all transition meetings, and to participate in programmatic decisions which affect transition.

Child Component

The final component in the transition process is the child. The success of transition is influenced by the skills and behaviors the child exhibits during transition and the match between child skills and behaviors and the expectations and requirements of the receiving
program. This match is dependent, in part, on the preparation for transition provided by sending and receiving program providers, the family and other caregivers, and the environmental supports provided in the receiving program.

An important part of child preparation is the development of transition skills and the generalization of transition skills from the sending program to the receiving program. Transition skills are skills and behaviors that facilitate transition between programs by helping a child function well in and adjust to the next environment. Transition skills may include social behaviors and self-help skills, motivation and problem solving skills, preacademic or academic support skills and task related behaviors, conduct behaviors, and communication skills. Child preparation should focus on the assessment of transition skills that are needed in the receiving program as well as development and implementation of methods to promote acquisition of these skills. Child preparation also should include methods to promote the maintenance and generalization of transition skills as well as other skills and behaviors (e.g., academic skills, child strengths) to the new program. Child preparation also should address environmental arrangements or supports in the receiving program and methods to address difficulties when they occur.

Other Issues

The purpose of transition planning is to support the movement of children and families as they move from program to program or service to service. In order to facilitate transitions, a number of other issues must also be addressed by service providers and the agencies they work for. These issues include administrative support for planning, personnel training and evaluation of the transition process.
Administrative Support for Planning

As part of planning for the transition, staff should be encouraged to visit both the sending and receiving programs in order to share information about similarities and differences between programs and to familiarize themselves with the requirements of each program. Time must be allocated by administrators in both sending and receiving programs to support this activity. Administrative support for this planning activity cannot be underestimated, as time and resources must be provided to program staff as necessary. For example, staff coverage may be necessary to allow members of the transition team time away from direct service to visit other programs and meet with other program providers. Provisions for staff to visit programs and collaboratively plan for transition must be provided through administrative support and documented on the interagency and intragency transition plans.

Personnel Training

In order to address the need for comprehensive, successful transitions, personnel must be prepared to include transition as part of the intervention plan. Transition must be seen as a continuation of a child's intervention plan, and the intervention team must be able to develop, implement, and evaluate any transition involving the child and family. Staff must be skilled at curriculum development and adaptation and they must be able to collaborate across programs and other disciplines.

These requirements for staff should be incorporated into personnel training programs at both the preservice and inservice level. This must also occur within discipline specific training (e.g., for nurses and speech and language pathologists). Transition must be
addressed as a systematic process. Training at an inservice level (i.e., within an agency or between sending and receiving programs) should focus on general issues related to transition planning as well as the specific skills, tasks, and processes that staff will be expected to employ. At a preservice level, personnel training should focus on general issues and recommended practices related to all types of transition, as well as models and options for transitions that may occur at various points in a child's life.

**Evaluation of the Transition Process.** Evaluation of the transition process should occur within each transition component and should include both formative (continuous) and summative (summary) measures. In addition, evaluation should include subjective measures such as parent and teacher satisfaction with, and perception of, the transition process. Subjective information will complement other objective information about the success of the transition process, such as maintenance of the child and family in the receiving program. Evaluation should be multidimensional to address all aspects of the transition process within and between agencies, within and between sending and receiving programs, and within and across individual children, families, and other caregivers.

**References**


DEC Recommended Practices

Transition

Transition is the process of change within or between services that involves children, families, other caregivers, and service providers. The transition process should fulfill the following four goals: (a) ensure continuity of services; (b) minimize disruption of the family system; (c) promote child functioning in the natural environment or the least restrictive environment (e.g., home, mainstreamed preschool program, Head Start, day care, etc.); and (d) involve planning, preparation, implementation, and evaluation within and between programs and with the family. Transition may occur when there is a change in agencies, programs, location or type of services, personnel, program philosophy, regulations, or funding sources.

State and Local Interagency Systems

T1. Administrators, sending and receiving providers, and family and other caregivers develop written interagency agreements.

T2. Formal mechanisms are in place for ongoing communication, within and between agencies.

T3. Program providers, administrators, and families have adequate time to plan and prepare for transition.

Families and Other Caregivers

T4. Program staff inform families about anticipated transition as early as possible.

T5. Families can initiate transition when they believe it is necessary.

T6. Families receive information about the transition process, the components and steps in transition, the child and family’s options for future services, and options for participation in the transition process.

T7. Families have opportunities to visit future program options and to talk to other families as well as service providers about future programs.

T8. Families have the opportunity to jointly meet with sending and receiving providers.

T9. Program providers have or receive adequate training to address issues of transition and to work with families during transition.

T10. Families have a single point of contact (i.e., one individual) concerning transition.

Sending and Receiving Providers

T11. Service providers are familiar with the tasks, timelines, roles and responsibilities of all providers as designated on the interagency transition agreement and related procedures.
T12. Service providers are familiar with service options and resources within the community and are able to make resource referrals.

T13. Service providers visit each other's programs and share observations in planning for transition.

T14. Service providers in the receiving programs prepare other individuals (i.e., children, staff members) for a child’s transition into that program.

Child

T15. Service providers and family members determine the transition skills the child needs in the next or receiving program.

T16. Service providers, family members, and other caregivers assess transition skills in order to determine those skills that a child currently exhibits and those that a child will need in the next or receiving program.

T17. Service providers, the child's family, and other caregivers develop plans to help a child acquire transition skills.

T18. Service providers, the child’s family, and other caregivers arrange or adapt the environment and use adaptive or assistive devices as methods to facilitate the development of transition skills as needed.

T19. When possible, service providers assess and incorporate child preferences and opinions.

T20. Service providers, the child’s family, and other caregivers build supports to anticipate and address difficulties children may have in making transitions (e.g., visits to receiving program, gradual increase in attendance in receiving program).

T21. Service providers, the child's family, and other caregivers plan for or allow adequate time for the child's adjustment to the new service or program.

T22. Service providers, the child’s family, and other caregivers have access to supervision, training, and support necessary to carry out the roles and responsibilities associated with preparing a child for transition.