Assessment for Early Intervention: Best Practices with Young Children and Families

Stephen J. Bagnato, Ed.D., Children’s Hospital/The UCLID Center at the University of Pittsburgh and John T. Neisworth, Ph.D., Penn. State University

Young children with developmental delays and their families have special needs that demand unique professional perspectives and practices. One of the most important practices is how professionals assess and plan effective programs for infants, toddlers and preschool children on an ongoing basis.

This article summarizes professional best practice guidelines on assessment.

ASSESSMENT GUIDES TEAMWORK
One of the most unique features of assessment is that it fosters teamwork, family professional collaboration, and consensus decision-making about child status and needs. This collaboration occurs through the use of a check-and-balance system of combining information gathered across developmental areas, settings, activities, and different professional disciplines through a process of group problem solving. Assessment is not a test-based process. It is a flexible, collaborative decision-making process in which teams of parents and professionals repeatedly revise their judgements and reach consensus about the changing developmental, educational, medical and mental health services needs of young children and their families.

ASSESSMENT IS ADJUSTED TO EACH CHILD’S DEVELOPMENTAL NEEDS
A developmental approach presumes a more whole-child view. Many developmental areas are sampled and child differences, from time-to-time, are highlighted so that the child’s previous performance serves as the baseline for monitoring progress. Professionals use a flexible approach in choosing toys that are motivating for the child and are often the child’s own. They are responsive to the fact that young children rarely sit still at tables or respond on command to typical structured tasks. A developmental approach acknowledges that professionals must adjust their own language, behavior and expectations to the young child’s level of developmental maturity. A more familiar play-based approach is used that does not force conformance to standardized procedures that are at odds with the typical behavior of young children.

ASSESSMENT PROVIDES CURRICULAR GOALS
Assessment prescribes and then measures the impact of developmental and family support services. Teams rely on curriculum-based developmental assessment procedures so that the functional behaviors assessed and taught are similar. A list of developmental skills forms the basis for identifying which skills are acquired, emerging, or absent and for monitoring child progress and treatment outcomes.

ASSESSMENT RELIES ON FAMILY OBSERVATIONS IN NATURAL SETTINGS
Assessment procedures help the family to conduct a self-appraisal of their own needs to help their child develop and learn. Families are viewed as active partners in the assessment process. They can coax the child to perform his or her best, interacting with
their child, and contributing during team collaboration and decision-making about service needs and options.

Professionals working with young children recognize that assessments must be conducted in natural environments to gain an overall view of skill acquisition, i.e.: home and child care, with other children, during everyday activities, and using familiar toys. An ecological assessment analyzes the environmental supports that a child needs to show skills that are useful in daily activities. Assessment emphasizes functional activities, targets useful skills and fosters the goals of normalization, inclusion, and increasing independence. Traits such as intelligence and eye-hand coordination are avoided in favor of competencies that integrate skills across several different developmental areas: social interaction with other children, discrimination, classification, attention and task orientation, and forms of communication. By modifying the tasks for children with visual, hearing, motor, language or behavioral problems, assessment activities accommodate the child’s disabilities.

**ASSESSMENT DESCRIBES CHILD/FAMILY PROGRESS AND PROGRAM IMPACT**
Measuring child progress and results are two important purposes of assessment. A central principle of predicting how quickly a child will develop is impossible unless over time one monitors the child’s response to individualized intervention. For this reason, programs rely on the use of curriculum-based instruments. Only curriculum-based measures have the sensitivity necessary to enable teams to sample a range of skills that can document current levels, set individualized goals, and monitor accomplishments. After a period of early intervention services, measuring the number of curricular goals achieved can provide the more sensitive information required to make informed predictions and diagnoses.

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**Helping Assessments Run Smoothly:**
**TIPS FROM BIRTH TO THREE PROVIDERS**

**Contributing authors:** Doreen Johnson, Special Educator; Jane Bisantz and Janet Lewis, Speech-Language Pathologists; Sue Hunt, Occupational Therapist; Barbara Hall and Marilyn Boehm, Physical Therapists

**When scheduling the assessment:**
- Introduce yourself and your program clearly. Families can be confused about where we fit into the system at this point in the process.
- Be aware of who initiated the referral and what role the parents played in that process.
- Give a clear, step by step description of how the assessment process will work. Put the parent at ease by emphasizing that there will be no specific performance expectations of the child during the assessment session.
- Schedule the assessment at a time that works with the family’s schedule and the child’s routines. Be respectful of nap times, mealtimes, etc.
- Suggest that parents keep a running list of questions they would like the early interventionist to address during the assessment.
- Be sure to leave evaluators’ names, disciplines and phone numbers with parents so that they can contact them prior to the assessment if they need to change the appointment.

**At the assessment session:**
- Remember that Birth to Three assessments are very different from other assessments. You are a guest in someone’s home and it is important to give the family the lead as your hosts.
- Upon arrival, greet the family, introduce yourselves by name and discipline, and then, if the child is interactive, focus on the child. Parents are eager to see professionals interact comfortably with their child.
- Remind yourself that no matter how knowledgeable you may be, this family knows this child best. Reinforce this concept to the parent.
- First impressions can be lasting ones. Be real! We can all sense when someone truly likes and cares about us.
- Ask open-ended questions and give families the opportunity to express their concerns. Ask yourself what kind of questions you would want someone to ask about your child. Listen to families’ needs and assure them that while you don’t have all of the answers, you can work with them to find the answers.
- Describe the assessment process as you go. Explain to parents where your questions are leading and what areas you are trying to assess. Encourage parents to ask questions throughout the session.
- Parents may have things that they want the evaluators to observe. Ask, “Is there anything in particular that you wanted us to see your child do today?”
- Invite parents to interact with their child in typical ways. Enlist their assistance in administering test items when necessary.
- Be relaxed and sensitive to the family and child. Have fun. Be flexible and adjust your style of interacting to fit the behavior and needs of the child and family.
- Be positive. When discussing abilities in various developmental areas, comment on what a child is able to do. Highlight each child’s strengths. Ask parents to share information regarding their child’s special interests and things he/she is good at.

**Before you leave:**
- Summarize the results of the assessment, being careful to note areas of strength as well as areas of concern.
- Leave families with some simple intervention strategies that they can implement during daily routines.
- Leave families with a clear understanding of what will happen next.
- Make sure that families have had an opportunity to pose questions and try not to give the impression that you are in a rush.
- Thank the family for the opportunity to conduct the assessment in their home and for their participation, and make sure they know how to reach you if questions arise after you’ve gone.
**Addressing Parents' Questions Regarding Evaluation**

The following chart was developed by the Birth to Three System and Preschool Special Education for the purpose of addressing the questions and concerns often expressed by parents as they approach the evaluation/assessment of their child. Even though individuals, instruments or settings often differ across the two service systems, parent involvement will always be a key component in both systems. The following is intended to focus on those areas that parents identify as important.

<table>
<thead>
<tr>
<th>Addressing Parents Questions</th>
<th>In the 0 - 3 System</th>
<th>In Preschool Special Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Will the evaluation/assessment of my child be clinical or sterile?</td>
<td>Testing sessions will most often look like play sessions. The parent(s) provide information about what the child can and cannot do, or give the child toys to play with observing and describing what the child does.</td>
<td>Evaluation/assessment takes place in a variety of settings, using more than one specialist, tool, instrument, and strategy. Settings used include school buildings; preschool and child care settings and play-based environments that provide opportunities for collecting information about the child.</td>
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<tr>
<td>Will the evaluation/assessment of my child be adult-centered?</td>
<td>The purpose and focus of the evaluation/assessment is to identify the skills that the child has, what other skills he/she is just learning, and what skills need to be learned. However, it is important to find out from families whether what the child is doing is typical and what types of things parents feel are important for their child to learn.</td>
<td>The focus of the evaluation/assessment is the child. It is tailored to the individual child in order to identify specific areas of educational need. Information provided by the parents is a key component of the process.</td>
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<tr>
<td>Will my information about my child be considered important?</td>
<td>Parent information is most important. Parents know their child best and can identify what the child is able to do in different situations; his likes and dislikes, what things frustrate her, etc.</td>
<td>Any information provided by the parents is considered important and will be included in the collection of evaluation/assessment information. The law provides that the variety of tools used to gather information about the child should include information provided by the parent.</td>
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<tr>
<td>Will I participate in the evaluation of my child and how?</td>
<td>Parent participation is integral to the process of collecting information. The parents take the lead in getting the child to perform at their best.</td>
<td>Parents participate by providing information, as well as through their involvement in various activities in the evaluation/assessment process.</td>
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<tr>
<td>Will a strange setting affect my child's performance?</td>
<td>Evaluations/assessments are most often done in the family's home or a relative's home or a child care center. These locations are considered natural environments and should not affect a child's performance.</td>
<td>Strange settings may affect or inhibit a child's performance. The use of multiple settings and strategies such as using information collected from parents and other providers, observing the child in his/her current program, and providing a play-based environment aid in identifying a profile of the child.</td>
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<tr>
<td>What if my child is not interested in the toys or procedures used during the testing?</td>
<td>The evaluators should be able to use the child's own toys and/or toys that may be unfamiliar but will capture the interest of the child and will motivate him/her to perform at their best.</td>
<td>Some children may demonstrate that they are not interested in a variety of toys or procedures. It is the parent's information that will be critical to determine whether these behaviors are typical of the child or present themselves for other reasons.</td>
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<tr>
<td>What if my child is asked to perform in a predetermined way?</td>
<td>The evaluators will observe the child, use formal testing procedures and will interview the parents. Parent reports of how the child performs in other settings will be an important perspective in better understanding the child. The evaluators will take all the information into consideration before making a predictive opinion about a child's development.</td>
<td>The use of a formal standardized instrument may require a child to respond in a predetermined manner. The results are integrated with information known and collected, such as the child's disability, information presented by parents, other providers, etc.</td>
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<tr>
<td>What if I do not agree with the results of the evaluation/assessment?</td>
<td>If a parent disagrees with some of the conclusions after going over the results with the Birth to Three team, the parent may request that the information in question be removed from the child's record.</td>
<td>A parent has the right to an independent educational evaluation if the parent disagrees with the evaluation obtained by the school district. The school district will provide to parents, upon request, information about where an independent educational evaluation may be obtained.</td>
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Contestando Preguntas de los Padres Sobre la Evaluación

El siguiente cuadro es obra de las agencias Sistema para Infantes a Tres Años de Connecticut y Educación Preescolar Especial. Responde preguntas y preocupaciones que suelen expresar los padres al enfrentarse a la evaluación de sus hijos. Aunque los individuos, instrumentos o ambientes de los dos servicios a menudo difieren entre sí, la participación de los padres es en ambos siempre un componente clave. Lo que sigue pretende cubrir esas áreas que los padres identifican como importantes.

<table>
<thead>
<tr>
<th>Preguntas de los Padres</th>
<th>En el Sistema para Infantes a Tres Años</th>
<th>En Educación Preescolar Especial</th>
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</thead>
<tbody>
<tr>
<td>La evaluación de mi hijo, ¿Será clínica (ambiente de hospital o dispensario)?</td>
<td>Las sesiones suelen parecer sesiones de juego. Los padres indican lo que el niño puede y no puede hacer, o dan al niño juguetes para que jueguen. Se observa y describe lo que hace el niño.</td>
<td>El proceso de evaluación tiene lugar utilizando variedad de ambientes, especialistas, juguetes, rompecabezas especializados, etc., y estrategias. Los ambientes incluyen recintos de escuela, de preescoluela y de cuidado de niños así como de juego, lo que permite recopilar información sobre el niño.</td>
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<tr>
<td>La evaluación de mi hijo, ¿será centrada en los adultos (vgr., los padres)?</td>
<td>El propósito y foco de la evaluación es identificar las aptitudes que tiene el niño, las que está adquiriendo y las que necesita adquirir. Sin embargo, es importante averiguar con la familia si lo que hace el niño es típico, y qué piensan los padres que es importante que aprenda.</td>
<td>El foco de la evaluación es el niño. Está individualizada para identificar áreas específicas de necesidad educativa. La información que aportan los padres es componente clave del proceso.</td>
</tr>
<tr>
<td>La información que doy sobre mi hijo, ¿se considera importante?</td>
<td>La información que ofrecen los padres es de suma importancia. Los padres conocen a su hijo mejor que nadie y pueden identificar lo que puede hacer en situaciones diferentes, lo que le gusta o disgusta, lo que le frustra, etc.</td>
<td>Toda información que aporten los padres se considera importante y será incluida en la recopilación de información de la evaluación. La ley prescribe que la variedad de utensilios que se usan para obtener información sobre el niño incluya la obtenida de los padres.</td>
</tr>
<tr>
<td>¿Participaré en la evaluación de mi hijo y cómo?</td>
<td>La participación de los padres es parte integrante en el proceso de recopilación de información. Los padres están al frente de los esfuerzos para que el niño se manifieste plenamente.</td>
<td>Además de proveer información, los padres participan en varias actividades del proceso de evaluación.</td>
</tr>
<tr>
<td>¿Afectará un ambiente extraño el desenvolvimiento de mi hijo?</td>
<td>La evaluación se hace generalmente en el hogar de la familia o de un pariente, o en un centro de cuidado de niños. Estos lugares se consideran ambientés naturales y no deben afectar el desenvolvimiento del niño.</td>
<td>Un ambiente extraño puede afectar o inhibir la actuación del niño. La variedad de ambientes y las estrategias tales como utilizar información de los padres y otros proveedores, observar al niño en su programa actual, y proporcionarle un ambiente de juego, ayudan a definir un perfil del niño.</td>
</tr>
<tr>
<td>¿Qué pasa si mi hijo no se interesa en los juguetes o procedimientos que se utilizan en la evaluación?</td>
<td>Los evaluadores deben utilizar los juguetes propios del niño u otros que aunque no le sean familiares puedan captar su interés y motivarlo a desenvolverse mejormen posible.</td>
<td>Algunos niños pueden mostrar no estar interesados en un ciertos juguetes o procedimientos. Es la información de los padres lo que será crítico para determinar si tal conducta es típica del niño o si se presenta por otras razones.</td>
</tr>
<tr>
<td>¿Qué si a mi hijo le piden que se manIFIeste de un modo predeRminado?</td>
<td>Los evaluadores observarán al niño, utilizarán procedimientos normales de prueba y entrevistarán a los padres. Los informes de éstos sobre el desenvolvimiento del niño en otros ambientes será una importante perspectiva para mejor comprender al niño. Los evaluadores considerarán toda la información antes de formarse una opinión sobre el desarrollo futuro del niño.</td>
<td>El uso de un instrumento formal standard (vgr., tests) puede necesitar que el niño responda de una manera predeterminada. Los resultados se incorporan a los datos conocidos y obtenidos, tales como la incapacidad del niño, la información de los padres y otros proveedores, etc.</td>
</tr>
<tr>
<td>¿Qué si no estoy de acuerdo con los resultados de la evaluación?</td>
<td>Si un padre o madre está en desacuerdo con algunas de las conclusiones después de repasar los resultados con el equipo de Del Año Cero al Tercero, el padre puede solicitar que la información en cuestión sea eliminada del historial del niño.</td>
<td>Todo padre o madre tiene el derecho a una evaluación educacional independiente si está en desacuerdo con la del distrito escolar. El distrito escolar informará a los padres, a su pedido, los lugares donde pueden obtener una evaluación educacional independiente.</td>
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Program Updates

UPDATE FROM THE BIRTH TO THREE SYSTEM
By Linda Goodman

The focus of this newsletter is assessment. It is important for families to understand that while their children are receiving early intervention services their progress is continually assessed. Assessments serve as guidelines for what children need to learn.

A calendar of developmental milestones of children from birth to age five has been produced. It will help families follow their child's progress. Families can request a copy of the calendar from their service coordinator.

For families whose children are enrolled in both Birth to Three and Early Head Start, it is confusing to have separate service plans and multiple people coordinating services. To simplify this process, there will be only one Individualized Family Service Plan for each family, with all of the information about both programs included. Each program will continue to have its own service coordinator, but those two individuals will work together and attend meetings with the family to ensure that there is no confusion.

Linda Fox of Madison, CT will speak to the Local ICCs, parent groups and Birth to Three programs about ways to involve families and to develop family leaders who can help shape the Birth to Three System. She will present her recommendations by spring. Linda has personal experience with the Massachusetts Early Intervention System. She served on a Family Participation Task Group of that state’s ICC and helped write a booklet for families entitled Working Together.

A public hearing on the changes to the Connecticut Birth to Three Federal application will be held on March 16, 2000 at 460 Capitol Avenue in Hartford. Hearing hours are between 10 a.m. and 12 p.m., and 5 p.m. and 7 p.m. Copies of the application can be obtained from your Birth to Three program or on the website: www.birth23.org Written comments may be sent until April 14 to Linda Goodman, Birth to Three Program, DMR, 460 Capitol Ave., Hartford, CT 06106 or email linda.goodman@po.state.ct.us We look forward to receiving your comments!

FOR PARENTS

PRESCHOOL SPECIAL EDUCATION
By Maria Synodi

The assessment and intervention services that children receive are reflected in four major activities in the special education system.

Step 1: Using Information that is Known in Evaluation/Assessment
Any group, like the child’s planning and placement team, PPT, will need relevant and up-to-date information to make decisions about a child. The two most important decisions that will be made are: to determine a child’s eligibility for special education and, if eligible, to determine what type of individualized educational program is most appropriate. The task of gathering information will begin by looking at what is already known about the child. That may mean an interview with the child’s parents to collect health and developmental history, obtain copies of previous evaluations/assessments from the Birth to Three System, obtain specialty evaluations, etc.

Step 2: Collecting More Information for Evaluation/Assessment
After obtaining and reviewing what information is already available, the child’s PPT, which includes the parent, identifies what additional information is necessary to learn more about the strengths and weaknesses of an individual child. Collecting information occurs in a variety of ways, including information provided by the parents, observations of the child in one or multiple settings, and formal testing.

Step 3: Deciding Eligibility for Special Education
After all evaluation/assessment information is collected a planning and placement team meeting is held to determine if a child is eligible for special education. No child is automatically eligible for special education. The team will review all information collected and determine whether the child needs special education and related services.

Step 4: Developing an Individual Educational Program
If a child is found eligible for special education, the next step in the process is developing and writing an individualized educational program, IEP. The IEP will describe a child’s educational program, the individual goals to be addressed and any special services that may be needed.

This information provides an overview of the sequence of activities and decision making that must occur for each individual child from the time of referral to the point of deciding eligibility for special education and the eventual development of an IEP.
PLAY-BASED ASSESSMENT
By Ellen Cohen and Alexandra Vanderlock, Coordinators of the Consultation Center Program in the Bridgeport Schools

Play-based assessment yields a wealth of information about a young child's capabilities. It is a dynamic, flexible process that takes into account the child's interests, and fosters relaxed and often spontaneous demonstration of skills. When children are comfortable and engaged, they are more likely to show the full extent of their abilities. Tears, frustration, and non-compliance are less likely when evaluators follow the child's lead. Anxieties are eased when parents remain in the evaluation room with their children.

The play-based format can enable observation of many areas of development in a single evaluation activity. Time spent in the kitchen corner, for example, may yield a lengthy language sample, as well as a demonstration of skills in other areas, such as motor or cognition.

Because evaluation is not tied to a rigid protocol, children do not have to experience the repeated failure inherent in determining a scoring ceiling. The evaluating team is free to provide support to increase the child's successes, thereby assessing not only current skill levels, but also individual learning styles. Evaluation serves as the beginning of intervention and lays the groundwork for future programming.

The Parent Perspective
By Elizabeth Guziewicz

Our daughter has slight developmental delays. Her Neurologist suggested that we look into the Birth to Three Program.

Evaluations as well as therapy sessions were conducted at our home where our child was most comfortable. Children are rated by a point system on the activities they can do as well as those they cannot do. The activities range from verbal skills to fine and gross motor skills. At the end of the evaluation it was determined that our child was eligible for the Birth to Three Program. Finally we had a support system that was going to help our little girl.
During a second meeting goals were set for our daughter. The goals were realistic, as was the time frame in which each goal was to be accomplished. The Birth to Three staff focused on what our child could already do and explained how they were going to help our child and us accomplish identified goals.

In closing, I urge any parent who has a child with any developmental delay, no matter how benign you may think it is, to contact Birth to Three. You will receive the support from professional, caring individuals that truly have your child’s best interest at heart.

By Elaine Hofmann

Having a premature baby is an overwhelming, terrifying experience. I had no idea what to expect, no clue that being premature would cause developmental delays. I had never heard of Birth to Three. I didn’t know we would need help.

I learned a lot during my initial meeting with my son’s team. This meeting provided me with some support because I was absolutely terrified.

Never having been a mother before, I didn’t know what a newborn should be doing that Christopher wasn’t doing or needed help to learn. We discussed just about every aspect of Christopher’s life. Did he focus on my face when I spoke to him? Did he follow me with his eyes? Could he bring his hands together by himself? Did he try to make sounds? What was a feeding like? How did he respond when he saw me? They were assessing where my son was and where he needed help.

One thing that has been the most important to me throughout this experience has been the support of my son’s team. They were always receptive to new ideas, not just mine but my family’s as well. They encouraged us to try new things, to experiment. They never laughed at our ideas. When the ideas worked, they applauded, when they failed, they sympathized and encouraged me to try again. Due to the efforts of the other members, I have felt very much a part of the team.

By Maria Deldegan

I took my daughter Victoria to the Bridgeport Consultation Center on a referral from Birth to Three, because I had questions about her speech and other aspects of her development.

Although Victoria’s hearing could not be screened because she was crying, she did participate in a playgroup session, where several different specialists observed her. Everyone was extremely nice and understanding. We talked together, and it was decided that Victoria needed further individual evaluation.

At a second appointment, I observed Victoria being evaluated by a school psychologist, a speech therapist, and a special education teacher. I was asked for information and details about her daily routines and health history. I was very pleased with the way Victoria was evaluated. She was in a stress-free environment, and that helped her be herself.

The outcome of the evaluation was discussed with me and I was given feedback about my concerns. I was very pleased with the feedback and felt that everything observed seemed to be accurate. I knew that my concerns were being taken seriously.

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By Patty Duda, as told to Adrienne Kovachi Schuessler, Psy.D

How did you come to refer your son for a special education evaluation? When he was three years old the doctor was concerned because he only said three-word sentences. I thought he was just slow at that age and would pick up. But he didn’t. So, I had Steven evaluated, and they looked at all of his learning areas.

What did you expect from the evaluation?

I thought they would categorize him as mentally retarded without really seeing what he could do. You’re thinking that something’s wrong with your child. Your palms are sweaty when you come in for the evaluation, but it’s really nothing. It’s fun for the child. They play with him, ask him about his colors, and talk to him. They want to know how much he knows.

What advice would you give to other parents who are considering referring their children for special education?

Don’t be scared. If you see the littlest thing, go to your pediatrician. Go to your preschool and get it checked out.

You will be more worried not to go through testing, so have it done.

If something needs to be corrected, the teachers know how to do it. It helps to listen carefully at the meetings, and if you have to, bring notes, because you will be asked at the evaluation about what age your child crawled, said his first word, cut his first tooth and things like that.

With the whole process new to you, were there things you didn’t understand at first, and how did you deal with that?

Yes, but I asked them to explain it. Everybody was so nice, and they didn’t rush me out the door. It is important to keep all the paperwork they give you at meetings, because you may need to look back at it later.

How has Steven progressed since he entered his preschool program?

I see 100% improvement. Steven can count to 23 and he knows all his colors. He mingle with other children now. Sometimes he will come up with words that I never said, things he learned at school. Brining Steven to preschool was the best thing I have ever done.
Meetings About Nutrition for Young Children

Eastern Region Office DMR
Norwich
All Day
March 13, 15, 2000

South Central Region Office DMR
Long Wharf, New Haven
All Day
May 16, 18, 2000

Nutrition Evenings for Parents
West Hartford Public Library
All at 6:30 - 8:30 p.m.
March 22, 2000

Vernon Town Hall
April 26, 2000

Westport Public Library
May 10, 2000

The following issues will be addressed: Feeding; Underweight/overweight; Nutrition and specific medical conditions; Questions/Answers. Reimbursements of up to $25 are available for child care and travel costs.

Orientation to the Birth to Three System

Eastern Region Office DMR
Norwich
Morning
April 6, 2000

Infant Mental Health, Three Days
Locations: Hartford, two days
New Haven, one day
March 23, April 6, May 11, 2000

Children Who Are Deaf or Hard of Hearing
St. Vincent's Special Needs Center, Trumbull
All Day
April 3, 2000

For more information on how to register for the above, contact Kathy Granata at Birth to Three 860-418-6146

Sessions on Autism in Young Children

Becoming Your Child's Best Advocate:
March - June
Series of Six Workshops
At PPT meetings and other critical Educational Meetings
Special Ed. Resource Center, Middletown

Becoming an Effective Advocate for
Your Child With Autism
April 15, 2000
9:00 a.m.

Infants with Autism
April 15, 2000

Greenspan Approach for Young Children
All day

Radisson Inn, Cromwell

Two Workshops by Rebecca Klaw
on Using the Floortime Approach for
Young Children with Autism
April 28, 2000
9:00 a.m. – 12 noon and/or 1:00 – 4:00 p.m.

Radisson Inn, Cromwell

For information on registering for any of the above, contact Cindy Salemi at SERC 860-632-1485, Ext. 225.

For information about the Bush Center Social Policy Luncheon Series, call the Bush Center at 203-432-9935 or 432-4581.

Together We Will Conference
(Children Birth through Five)
March 28, 2000
All day
Cromwell Radisson; $45 registration waived for parents

For information on registering for the Together We Will Conference, contact Jane Greebel or Kim Gryga, ext. 269, at SERC, 860-632-1485.

Early Childhood Education Council Conference
April 5, 2000
13 locations around the state
Contact Chris Tracy at 860-563-1574.

Integrating Technology and Literacy
for Young Children
April 15, 2000
Hartford area; parent stipends available
Contact Debbie Richards at 860-679-7352.