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• Working together for children with disabilities • INFORMATION FOR FAMILIES AND PROFESSIONALS

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Assessing Young Children to Develop Authentic Goals and Interventions

By Amy Sevell-Nelson, M.Ed.,
Educational and Organizational
Consulting



This article is translated into Spanish on page 2. Ver la versión española de este artículo en la página 2, y todos los artículos a www.birth23.org

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The developmental assessment process often causes confusion and anxiety for many people, in particular, parents of children with a disability.

When parents learn that their child has a developmental delay, they want to know “what can be done to help?” Providing answers to this question is the major mission of the assessment of young children.

Many families can recall a time their child failed to demonstrate a new or desired behavior or skill when requested to do so by a doctor or developmental specialist. Not surprisingly, this frustration is shared by professionals whose job it is to collect developmental information on young children.

Ensuring an accurate view of the child’s behavior and developmental status through the assessment process is essential. It provides the road map for the design of meaningful and appropriate IFSPs/IEPs and informs curriculum and program planning decisions.

Well, there’s good news. Over the past decade, we have learned a lot about how to collect authentic developmental information on young children, which allows a realistic appraisal of a child’s strengths and intervention priorities.

Curriculum-Based Assessment is a flexible, collaborative team approach that fulfills the important purposes of data collection, decision-making

and the development of intervention goals. The process is designed to be child-centered, culturally and linguistically sensitive, and to provide information about the child’s developmental status, preferences, and interactional and learning styles.

Common characteristics of this method include:

- the child is engaged in enjoyable, highly motivating, purposeful activities which take place within natural environments – home, child care and inclusive educational settings
- true family partnerships are developed, which honor parents’ contributions - their unique and valuable knowledge, insights and priorities
- involvement of highly knowledgeable professionals with in-depth understandings of child development and disabilities
- systematic data collection and analysis of the child’s developmental profile based on multiple sources of evidence, including both direct observation and samples of children’s work, over time (e.g. drawings, photographs, audio/video tapes, etc.)
- development of IFSPs and IEPs built upon the child’s strengths, which logically and directly link the child’s abilities to appropriate objectives and worthwhile, functional interventions, teachable within the natural environment
- clear evidence of current child development status and increment-

(Continued on page 2)

tal progress toward goals with program adaptation and modifications based on ongoing data collection, embedded within the child's daily routines

With this frame of reference about Curriculum-Based Assessment, let's take a look from the child's point of view.

Imagine being in a familiar place with interesting toys, some of which are yours. Family members are talking to someone while you play and sometimes one of them joins you. In this scenario, it is easy to picture how comfortable and natural the child and family would feel. The result is likely to be the opportunity to observe a full range of meaningful skills and behaviors within the child's repertoire.

Endorsed by both DEC (The Division for Early Childhood) and

NAEYC (The National Association for the Education of Young Children), Curriculum-Based Assessment methods are considered developmentally appropriate and best practices for young children. Research clearly demonstrates that the developmental sequences and expectancies offer a useful bridge between assessment and early intervention. Although the typical developmental continuum may not apply evenly to a child with disabilities in one or more areas, it provides a reference point for making decisions about the child's strengths and needs and results in the creation of IFSPs and IEPs that focus on intervention goals that promote progress. Sensitive to the scope and progression of child development, behavior is observed within the daily routine and across natural environments, which capitalizes on what children like to do and do best – play.

Child-centered assessment links to child-centered intervention.

The process supports family-professional partnerships and a comprehensive look at the whole child within a real-life context. Intermingling the skills and knowledge of many helps to create IFSP/IEPs that are individual, functional and based on standards. Finally, this collaborative approach increases understandings and, therefore, carryover by caregivers across the child's natural environments. The result - better outcomes for young children with disabilities.



Evaluación de niños menores para desarrollar metas e intervenciones auténticas

Amy Sevell-Nelson, M.Ed
Consultoría de pedagogía e organización

El proceso de valorizar el desarrollo suele causar confusión y ansiedad a muchos, en particular a los padres de niños con alguna incapacidad.

Cuando un padre se percata de que su hijo tiene un retraso en el desarrollo, quiere saber qué se puede hacer para ayudarlo. Dar respuesta a esta pregunta es la misión principal de la evaluación de niños menores.

Muchas familias pueden recordar

cuando su hijo no manifestaba el comportamiento o aptitud nueva o deseada en respuesta a las instancias del médico o especialista en desarrollo. No es sorprendente que compartan esta frustración los profesionales cuyo trabajo es recopilar información sobre el desarrollo de niños de corta edad.

Es esencial lograr una visión precisa del estado del comportamiento y desarrollo del niño mediante el proceso de evaluación. Es la base para el diseño de los planes de servicios individuales a las familias (IFSPs) y programas educacionales individuales (IEPs) e informa decisiones de planificación de programas.

Bueno, hay buenas noticias. Durante el último decenio hemos aprendido mucho de cómo recopilar auténtica información del desarrollo de niños menores, lo que permite

una evaluación realista de las fortalezas del niño y de las prioridades de intervención.

La evaluación basada en programas de estudios (Curriculum-Based Assessment) es un enfoque flexible participativo que satisface los propósitos importantes de la recopilación de datos, la toma de decisiones y el desarrollo de metas de intervención. Por diseño, el proceso se centra en el niño, es cultural y lingüísticamente sensible y proporciona información sobre el estado del desarrollo del niño, sus preferencias y estilos de interacción y aprendizaje.

Las características comunes de este método incluyen:

- el niño tiene actividades que disfruta, que son altamente estimulantes, deliberadas, y tienen lugar en ambientes naturales – el hogar, la guardería, la escuela
- desarrolla verdaderos vínculos familiares, que hacen honor a la contribución de los padres - su conocimiento singular y valioso, sus perspicacias y prioridades
- la participación de profesionales bien preparados con una profunda comprensión del desarrollo de los niños y de las incapacidades.
- recopilación sistemática y análisis de datos del perfil del desarrollo del niño, de múltiples fuentes que incluyen la observación directa y muestras de trabajos del niño a través del tiempo (dibujos, fotografías, cintas, etc.).
- desarrollo de IFSPs e IEPs afinados en los puntos fuertes del niño, que lógicamente y directamente vinculan las habilidades del niño con objetivos pertinentes y valiosas intervenciones funcionales, que es posible enseñar en el entorno natural
- evidencia del estado actual del desarrollo del niño y de su progreso gradual hacia las metas establecidas, con adaptaciones y modificaciones del programa basadas en la recopilación de datos en curso, incorporada en las rutinas diarias del niño.

En este marco de referencia del Currículum-based Assesment, consideremos el punto de vista del niño.

Imagínese estar en un lugar familiar con juguetes interesantes, algunos de los cuales son suyos. Los miembros de la familia conversan con alguien mientras usted juega, y de cuando en cuando uno de ellos se acerca a usted. En este escenario es fácil imaginar cuán confortable y natural se sentirían la familia y el niño. El resultado probable es la oportunidad

de observar una gama de aptitudes significativas y de conductas del niño.

Avalados por el DEC (la División para la temprana infancia) y el NAYEC (la Asociación nacional para la educación de niños menores), los métodos del Currículum-based Assesment se consideran apropiados para el desarrollo y óptimos para niños menores. Los estudios demuestran que las secuencias y expectativas de desarrollo ofrecen un puente útil entre la evaluación y la intervención temprana. Aunque el desarrollo típico puede no ser aplicable parejamente a un niño con incapacidades en una o más áreas, provee un punto de referencia para decisiones relativas a los puntos fuertes y necesidades del niño, y el resultado es la creación de IFSPs e IEPs centrados en metas de intervención que promueven el progreso. Con consideración del alcance y progreso del desarrollo del niño, se observa su comportamiento en la rutina diaria y a través de ambientes naturales, capitalizando en lo que a los niños más les gusta hacer y hacen mejor, jugar.

La evaluación centrada en el niño enlaza con la intervención centrada en el niño.

El proceso apoya una asociación de la familia con el profesional y una mirada abarcadora a la totalidad del niño en un contexto de vida real. El mezclar la capacidad y conocimiento de muchos ayuda a crear IFSPs e IEPs individuales y funcionales basados en normas. Finalmente este enfoque participativo aumenta las comprensiones y por lo tanto se extiende a los cuidadores en los entornos naturales del niño. Produce resultados favorables en los niños menores con incapacidades.

BIRTH through 5 News

Information for Families and Professionals

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Tips for Parents about the Assessment Process

By Claudia Anderson, Early Intervention Coordinator, Danbury Public Schools and Early Childhood Center staff, Fairfield Public Schools

Information is gathered from the family and the preschool or daycare setting about how the child is developing and what concerns they have. When gathering information the whole child is considered.

Observations are made at the community preschool setting whenever possible in order to observe the child in his/her natural environment and to see how the child plays, interacts with peers and familiar adults, follows directions, etc. Some districts have developed a checklist to use during these observations.

Suggestions or alternative strategies may be made to help your child in

the current setting. A simple change such as using a picture schedule may help your child be more successful.

When you bring your child in for a formal evaluation/assessment, let him/her know that he/she is going to play some games with some people. It may be an anxious time for you, but for your child it is usually a fun time of playing a variety of games and being asked to do silly things. Keeping the explanation simple will keep your child relaxed and hopefully you too!

An assessment session typically starts by establishing rapport with your child through play. When conducting an assessment in the home, however, it is helpful if the child is not engaged in an activity (e.g., watching a TV/video) because it is difficult to turn it off so that the evaluation can be completed. If your child speaks another language, every attempt will be made to provide an interpreter in your language for evaluating your child.

During the formal part of the assessment, several people will be asking your child and you questions. You are an important part of the evaluation process. Some of the people that might be included are the special education teacher, the speech pathologist, a school social worker and the school nurse.

Remember, you know your child best. Share your concerns with us, but also all the wonderful things that your child CAN do. You are an important part of the assessment team. That is how we will build a program together!



State Interagency Coordinating Council Plans a Retreat

By Lolli Ross, State ICC Chair

The Birth to Three System depends on the State ICC (Interagency Coordinating Council) for advice and assistance. Just as families review their IFSPs (Individualized Family Service Plans) and IEPs (Individual educational programs) periodically, the ICC plans similar reviews. In September, the ICC held a retreat in order to step away from its day-to-day responsibilities and assess its role and future priorities.

With the federal emphasis on Focused Monitoring to assure quality in state early intervention systems, the ICC intends to carefully align its strategic

planning with identified priority areas for the Birth to Three System. Current priority areas in Focused Monitoring are: IFSPs developed within 45 days of referral, the percent of families that received all services listed on their IFSP, and the percent of transition conferences that were held at least 90 days before the child turned three years.

So, the job in September was to bring ICC members and other invited community members together and use a broad perspective to look at our future. The ICC began to look at its strengths, needs and priorities and develop a vision for the future with long-term outcomes and short-term measurable objectives. This helped prepare the Council to channel its resources, prioritize its needs, and assess its strengths in order to better perform its role in advising the Birth through Three System.

Your input is very welcome. Please send your comments or suggested priority areas to either address below. Thank you!

State ICC, c/o Eileen McMurrer
CT Birth to Three System
460 Capitol Avenue
Hartford, CT 06106
or
Lolli Ross, ICC Chair
ARC Greenwich
132 East Putnam Avenue
Cos Cob, CT 06807.

Early Intervention
Providers Listserv

For more information contact
deb.resnick@po.state.ct.us

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.

Parents' Questions	In the Birth to Three System	In Preschool Special Ed
Will the evaluation/assessment of my child be clinical or sterile?	Testing sessions will most often look like play sessions. The parent(s) provide information about what the child can and cannot do. Typically, the evaluator gives the child toys to play with observing and describing what the child does.	Evaluation/assessment involves more than one specialist, a variety of evaluator and/or assessment tools and strategies and/or information from other sources. It may take place in one or more settings that can include the school, preschool or child care center, a play-based and/or one-to-one setting in order to gather information about a child.
Will the evaluation/assessment of my child be adult-centered?	The purpose and focus of the evaluation/assessment is to identify the skills that the child has, what other skills he/she has, what other skills he/she is just learning, and what skills need to be learned. However, it is important to find out from the family whether what the child is doing is typical and what types of things the parents feel are important for their child to learn.	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.
Will information that I provide about my child be considered important?	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.	Any information provided by parents is important and will be included in the evaluation/assessment of the child. The federal law specifically includes a statement that information provided by the parents be included in the evaluation/assessment of the child.
Will I participate in the evaluation of my child and how?	Parent participation is integral to the process of collecting information. The parents take the lead in getting the child to perform at their best.	Parents participate by providing information, as well as through their involvement in various activities in the evaluation/assessment process.
Will a strange setting affect my child's performance?	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.	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.
What if my child is not interested in the toys or procedures used during the testing?	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 the child to perform at his/her best.	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.
What if my child is asked to perform in a predetermined way?	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 forming an opinion about a child's development.	The use of a standardized instrument may require the child to respond and/or perform in a predetermined manner although this information alone will not be used to make judgments about a child. The information collected will be used in conjunction with other information, including information provided by the parent, in drawing conclusions and making decisions.
What if I do not agree with the results of the evaluation/assessment?	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 be corrected before the report is finalized. If the disagreement is over eligibility, the parent may request a review by the regional manager or an administrative hearing.	A parent has the right to an independent educational evaluation if the parent disagrees with the evaluation completed by the school district. School district personnel may, at the request of the parent, provide information about where an independent educational evaluation may be obtained.

Birth to Three System Update



By Linda Goodman, Director
CT Birth to Three System

As I've written about before in this column, the state has an obligation to oversee all of the Birth to Three programs. One of the ways that we do this is by routinely reviewing data in three important areas, comparing similarly-sized programs, and then going out to visit the low-performing programs to help them figure out what is causing the problem and how to improve. Those program rankings and the reports on those visits are posted on our website (www.birth23.org) under the Quality Assurance section. Many states are doing the same thing and it's called "Focused Monitoring" meaning that

we focus on one problem at a time until it's improved.

What Connecticut Birth to Three is doing differently from any other state is that Alice Ridgeway, our Birth to Three Quality Assurance Manager works with our monitoring team, which is totally comprised of parents of children who have received Birth to Three services. We've completed four reviews so far and we are very pleased with how it is working out. I'd like to give you a little more information about who these terrific folks are:

Joe Pullaro of Washington Depot and his wife have seven children. Four of their five adopted children received services from Birth to Three. They are in the process of adopting another infant with special needs. Joe spent 30 years as an employee for the Department of Mental Retardation prior to retiring.

Pam Kelly-Ralston and her husband live in Milford and are the parents of two sons, ages seven and nine. Her youngest, John, was born severely affected by Pierre Robin Syndrome, a craniofacial disorder.

John experienced severe motor and speech delays and received Birth to Three services. Pam's previous professional background was in manufacturing. She has also held various positions in human services.

Caroline Smit and her husband live in Stamford and have three sons. Her five-year-old, Will, has cerebral palsy and is a graduate of the Birth to Three System. Caroline's background is in corporate community relations and grant writing. She was the Southwest regional coordinator for the Family Support Network.

Joyce Uhelsky lives in Cheshire with her husband and five-year-old daughter Sharolyn, a Birth to Three graduate. Joyce attributes much of Sharolyn's success to early intervention. In the past, Joyce has worked in personnel and as a teacher of both children and adults.

When a Birth to Three program is being monitored, each enrolled family will receive a letter asking for their input, and that could include speaking over the phone with Joe, Pam, Caroline or Joyce.



Our Assessment Story

By Mark and Susan Roser

Our son Wesley is an energetic, loving, sometimes shy little boy. We noticed he had difficulty in making common word sounds when he was two, and decided to have him evaluated by Birth to Three. Two kind, caring, knowledgeable staff from the program (a teacher and a speech pathologist) came to our house, played with Wesley, and performed an assessment. The assessment showed that he did have an expressive speech delay, but because he was at or above his age level in all other developmental areas, he was not eligible for services at that time. A year later, after still having much difficulty understanding our own son (though he loved to chat all day!), we worked with our town's school system

to have him evaluated again. We attended a PPT with the speech pathologists and principal of the school who welcomed us and listened attentively to our concerns. They performed another detailed assessment and found similar speech delays. Wesley was now eligible for speech services through our public school.

We started with speech therapy about three months ago on a twice a week basis. These take place in the speech teacher's classroom—a welcoming, bright space with toys and activities perfect for a three-year-old. It took him only a couple of sessions to warm up to his teacher. We have been pleasantly surprised by how quickly he has begun to improve and add new sounds that he had not been able to form previously. The speech therapist has been able to make the experience

fun for him, and has been willing to find the things that he likes to talk about so that he can learn. For example, when there was an exercise in making the "k" sound that required getting him to bite on a flavored tongue depressor that he did not like, our therapist switched to using a pretzel stick to do the same exercise. Soon, he was making "k" sounds and enjoying the pretzel at the end of each exercise. Wesley looks forward to his pretzels, whistles, bubbles, and many other games with his teacher at "the big boys' and girl's school."

It is most exciting to now see Wesley make an effort at making new pronunciations at home, on his own, without the prompting of his speech teacher. We feel very lucky to have such caring people help us and our family to grow. Thank you to everyone!



Preschool Special Education Update

By Maria Synodi, Coordinator,
Preschool Special Education

Welcome to the new school year!

Here are a few tidbits of news and happenings:

The Individuals with Disabilities Education Act (IDEA) was reauthorized in 2004. The reauthorized IDEA made some changes to transition activities between the Connecticut Birth to Three System and Preschool Special Education. The newly revised IDEA:

- reinforced the requirement that a representative from the child's school district will participate in the transition conference arranged by the child's Birth to Three program;
- added a requirement that an invitation to the child's initial Individual Educational Program (IEP) meeting, at the request of the parent, be sent to the Birth to Three service coordinator and/or other representatives of the Connecticut Birth to Three System to assist with the smooth transition of services;
- reflected that at the child's IEP meeting, the types of services the child received in the Connecticut

Birth to Three System as part of the IFSP are discussed and considered. The statute acknowledged that special education services may change in frequency, duration, and environment and the expectation is that the IEP should explain the changes at the child's IEP meeting.

Another major activity that is reflected in the new IDEA is a requirement that each state develop and implement a state performance plan. A state's performance plan must target improvements in special education, including preschool special education.

The U.S. Department of Education has released proposed regulations for the newly reauthorized IDEA. The proposed amendments to the IDEA regulations are needed in order for states and local school districts to enact the changes made to IDEA as part of the reauthorization. For further information go to <http://www.ed.gov/legislation/FedRegister/proprule/2005-2/062105a.html>.

Preschool Special Education and the Connecticut Birth to Three System are already hard at work with state agency partners, parents and others to plan the 2006 Together We Will Conference. The 2006 conference theme reflects the topics of communication, language and relationships. The conference will be

held on April 7, 2006 at the Radisson in Cromwell.

Anyone interested in presenting at the conference must submit a Request for Proposal (RFP). The RFP can be obtained by contacting Lisa Simoneau at the Special Education Resource Center (SERC). Lisa can be contacted at 860-632-1485 or by e-mail at simoneau@ctserc.org. RFPs are due in September.

Preschool Special Education and the Connecticut Birth to Three System have completed the planning for the 2005-2006 early childhood professional development calendar of events. Parents and professionals can obtain the early childhood calendar of training events by contacting the Special Education Resource Center (SERC) at 860-632-1485 or via SERC's web site at www.ctserc.org.

Lastly, Connecticut continues to make strides towards the creation of a universal preschool system for all three and four-year olds. Recent state legislation enacted in the spring of 2005 includes the establishment of an early childhood cabinet. The early childhood cabinet will be co-chaired by the Governor's Office and the State Department of Education. Check the State Department of Education's Early Childhood web site for news and updates at <http://www.state.ct.us/sde/deps/Early/> 

Training Calendar

Contact the Special Education Resource Center (SERC) at www.ctserc.org or at 860-632-1485 for information on these events:

The Affect-Based Language Curriculum: An Intensive Program for Families, Therapists and Teachers

Diane Lewis, PhD
Wednesday, November 2 and
Thursday, November 3, 2005
9:00 am to 3:30 pm
Hilton Garden Inn, Windsor, CT

Especially for Families! An Introduction to Floortime

Richard Solomon, MD
Monday, November 21, 2005
5:00 pm to 7:30 pm - light dinner is included
SERC, Middletown, CT
(Stipends are available to defray cost of childcare and transportation)

The P.L.A.Y. Project™ Level 1 Workshop

Richard Solomon, MD

Tuesday, November 22, 2005
9:00 am to 3:30 pm
Crown Plaza, Cromwell, CT

Autism Spectrum Disorders: The "SCERTS" Model for Enhancing Communicative and Socio-emotional Competence (2 day session)

Barry Prizant, PhD, CCC-SLP
Thursday, December 15 and Friday,
December 16, 2005
9:00 am to 3:30 pm
Crown Plaza, Cromwell, CT 

Resources

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Cook, Rebecca J., PhD (2004). *Embedding Assessment of Young Children into Routines of Inclusive Settings: A Systemic Planning Approach.* *Young Exceptional Children*, 7 (3). 2-11.

Connecticut State Department of Education (2005)
Preschool Assessment Framework

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Johnson-Martin, Nancy M., Attermeier, Susan M. & Hacker, Bonnie (1990). *The Carolina Curriculum for Preschoolers with Special Needs.* Baltimore: Paul Brookes Publishing Company, Inc.

Linder, Toni W. (1990). *Transdisciplinary Play-Based Assessment: A Functional Approach to Working with Young Children.* Baltimore: Paul Brookes Publishing Company, Inc.

National Association for the Education of Young Children & National Association of Early Childhood Specialists in State Departments of Education (2004). *Where We Stand on Curriculum, Assessment, & Program Evaluation. Position Statement.*

Parks, Stephanie (1999). *Inside HELP (Hawaii Early Learning Profile) Birth – 3 Years Administrative and Reference Manual.* California: VORT Corporation.

Web sites with developmental guidelines:
<http://www.nncc.org/Child.Dev/presch.dev.html>. This is the web site of the National Network for Child Care.

<http://www.thenewparentsguide.com/baby-development-main.htm>. This is the web site of the New Parents' Guide.



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