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Outreach Mobile Delivery System. ESEA Title IV-C Project Report. Annual Evaluation Report, 1980-81.

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Office of Educational Evaluation.

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#### **ABSTRACT**

The major objectives, current and future activities, evaluation findings, and problems of the Outreach Mobile Delivery System of the New York City Public Schools are discussed in this annual report. The purpose of outreach project was to inform parents with handicapped children about ancillary services available to reduce the severity of unmet health, financial and recreational needs for the children and their families. An Outreach Needs Assessment Checklist was designed to determine whether deficiencies had been reduced as a result of the program and to assess the extent of parent involvement in the resolution of family needs. Results showed that the severity of student needs was reduced to a greater extent than the severity of family needs. Likewise, parents showed greater . involvement in the reduction of student needs than in the reduction of family needs. (JCD)

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Outreach Mobile Delivery System.
ESEA Title IV-C Project Report.
Annual Evaluation Report.
1980-81.

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SEQUENCE #: 42-079-4014-1-DEV

## ANNUAL EVALUATION REPORT

NYC'I.D. #: 5001-62-14504

ESEA TITLE IV PART C PROJECT REPORT 1980-81 COVER SHEET

Name & Address of School District:

NEW YORK CITY PUBLIC SCHOOLS

110 LIVINGSTON STREET.

Congressiónal Districts: 6-23

BROOKLYN - NEW YORK 11201

Title of Project: OUTREACH MORILE DELIVERY SYSTEM

District Enrollment: 943,805 PUBLIC; 309,787 PRIVATE

Curriculum Area: SPECIAL EDUCATION

Target Population: HANDICAPPED STUDENTS AND FAMILIES

Grade Lével(s): DOES NOT APPLY

Type & Number of Direct Participants in Project:

Public

Private

Total

Pupils Teachers Others 1·39 0 28 30

. 0 . 28

Total Number of School Districts Served by Project: 1

At End of This Budget Period, Project

Will have Been Funded by Title IV-C: 2 YEARS

Fiscal Year Source of Funds: 1981' Budget Period: 7/ 1/80 To 9/30/81

Type of Project: <u>DEVELOPER</u>

'Project Contact Person:

Evaluation Manager:

ALLISON TUPPER

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#### **ABS TRACT**

File Number: 42-079-4014-1-DEV

1. School District: NEW YORK CITY PUBLIC SCHOOLS 943,805

Popular Name Total Enrollment K-12

110 LIVINGSTON STREET, BROOKLYN N.Y. 11201 Kings

dress County

2. Title of Project: OUTREACH MOBILE DELIVERY SYSTEM

4. Total Budget: <u>\$ 57,722</u>

5. Pupils Served: 139 Number Public . 30 Number Non-Public

### Needs Statement Summary:

The families of disadvantaged handicapped children frequently are uninformed about ancillary services available for aiding their children's development. In many cases, too, the communication link between home and school is weak or absent. This gap can be overcome by an outreach program which uses paraprofessionals trained as family workers to establish contact with parents and aid them in more fully providing for their children's needs,

## Major Objectives:

1. Reducing the severity of unmet health, financial, and recreational needs of 200 handicapped children, as shown by a statistically significant decrease in pupil needs scores on pre- and posttests.

Reducing the severity of unmet health, financial, and recreational needs
of families of the above children, as shown by a statistically signifi-

cant decrease in pupil needs scores on pre- and posttests.

3. Increasing the involvement of the parents of the above children in meeting needs, as shown by a statistically significant increase in parent involvement scores on pre- and posttests.

# Major Activities:

 Direct outreach services to handicapped children, their parents, and other family members, by paraprofessionals trained as family workers and supervised by a social worker.

Consultations with teachers and parents of handicapped children, to assist

them in meeting children's health, financial and recreational needs.

3. Parent workshops on topics of importance to parents in meeting their children's ancillary needs.

# Major Evaluation Finding(s):

Comparisens of pre- and posttest data showed significant reductions in the severity of unmet child and family needs, and a significant increase in parental involvement in the resolution of child needs.

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### OUTREACH MOBILE DELIVERY SYSTEM

### I. NEEDS

Studies have shown that one of the obstacles faced by disadvantaged handicapped children is that their families are frequently uninformed about the ancillary services that are available for ameliorating neglect in the major areas of their lives, i.e., physical and mental health, recreation, housing, and nutrition. In many cases, the communication link between the home and the child's school is weak or absent. In addition, cultural and language barriers, negative and distorted attitudes toward the handicapped, and severe economic distress prevent many families from utilizing the services which they know to be available. The Outreach Mobile Delivery System (hereafter referred to as Outreach) is designed to overcome these obstacles by using paraprofessionals, trained as family workers and supervised by a professional staff including a social worker, to establish contact with parents and aid them in more fully providing for their children's needs.

# II. OBJECTĮIVES

The formal objectives for the 1980-81 school year, which were to be measured by pre- and post-administrations of the <u>Outreach Needs Assessment</u>

Scale, proposed that by June 1981:

--Two hundred handicapped children, aged 6 to 17, in the target population will show a statistically significant (p<. 66) decrease in the severity of health, financial, and recreational needs, as a result of staff contacts with service agencies;

- --the families of these 200 children will show a statistically significant (p<.05) decrease in the severity of current health, financial, and recreational needs, as a result of staff contacts with service agencies; and
- --the parents of these 200 children will increase significantly (p<.05) their involvement in meeting family and child needs, as a result of staff contacts with service agencies.

## III. ACTIVITIES ACCOMPLISHED

Direct outreach services were provided to 169 handicapped public and nonpublic school pupils in Community School District 17, Brooklyn. Direct services were also provided to 22 parents of these children and to six other family members. Accordingly, a total of 197 persons were served directly by the program; i.e., the Outreach staff-actively participated in obtaining agency services for a target student or family. Direct services included making appointments with service agencies and accompanying children and their parents to those appointments.

These services were provided by four paraprofessionals who were trained as family workers, and worked under the supervision of a coordinator and social worker. The staff of 12 public and nonpublic elementary and junior high schools in District 17, which have classes for handicapped children, were informed, in writing and by personal contact, about the program and were encouraged to refer children who might thereby benefit. As referrals were made, individual case files were opened and case histories developed. Each file included a clinical evaluation by a medical institution or appropriate evaluation by a service agency. These evaluations provided the data for the pretest completion of the Outreach Needs Assessment Scale. The

social worker reviewed these data and suggested appropriate intervention strategies which were carried out by the family workers. In June 1981, progress was measured by the posttest completion of the Outreach Needs Assessment Scale by the program's social worker in consultation with the family worker who served each case.

The 1980-81 caseload was nearly double the previous year's total of 90 cases, with no increase in staff. There were four funded positions, all paraprofessionals; the administrative staff and social worker were tax-levy funded. Three factors made the increased caseload possible.

- --All of the caseworkers employed during 1979-80 returned for a second year. Thus, the field staff was experienced and required minimal preservice training.
- --Time spent in transportation between schools, homes, and service agencies was reduced by confirming appointments before beginning trips and by making appointments, whenever possible, for locations accessible to public transportation. This sometimes meant meeting parents at their workplaces or at service agencies rather than at their homes. Parents proved cooperative in this regard.
- --The number of schools participating in the program was expanded from eight to twelve, thus increasing the number of referrals.

In addition to the direct services, a total of 311 indirect-service contacts, or consultations, were provided between September 1980 and June 1981. Most of these consultations were conferences between a caseworker and a school staff member regarding special education children not receiving direct services. Other instances included informing parents about the availability of agency services, so that the parents could independently arrange for and keep an appointment for their children. The expansion of such indirect services

is an indication of the increasing willingness of parents to assume responsibility for their children's needs.

Seventy-nine parents participated in workshops held in the twelve program schools. A total of 18 workshops were conducted. Topics included:

--Your Child's Rights: PL 94-142 (5 Workshops);
--How the Outreach Program Can Help Your Child and You (3);
--Sex Education and Your Child (3);
--Understanding /the Education of Your Child (2);
--Summer Planning (2);
--How to Use Community Facilities (1);
--Travel Training (1); and
--Guardianship (1).

Record-keeping and evaluation procedures were improved, relative to the previous funding year, in preparation for a future application for state validation. Data forms for case records were revised in order to provide a more sensitive measure of the severity of needs, the level of parent involvement, and the degree to which the needs had been ameliorated. These forms were field-tested and revised to insure reliability.

## IV. FUTURE ACTIVITIES

During 1981-82, most activities will be identical to those of the program's two previous years. It is estimated that 80 percent of the cases which were open in June 1981 will be reactivated, while new intakes will be processed concurrently. This should further increase the number of families served.

The program's coordinator and social workerwill train personnel of the 12 program schools (including teachers, principles, special education supervisors, guidance counselors, Committees on the Handicapped and School-Based

Support Team personnel, and psychiatrists) in the following areas: services provided by Outreach; how to refer children and request service; situations appropriate for referral; how to utilize the family resources; and outreach techniques to organize parent workshops. This training should lead to more effective utilization of the Outreach services.

A directory of social service agencies, designed for the use of both parents and program staff, will be completed and published. Under the program coordinator's supervision, the paraprofessional workers will contact approximately 140 social agencies identified as potential service providers to confirm their appropriateness to the target population. The directory will contain accurate data including each agency's name, address, telephone number, contact person, and range of services.

### V. "EVALUATION

This section describes the procedures employed to assess the attainment of the program's three objectives and the results of the evaluation. The analysis of data from pre- and post-administrations of the locally-developed Outreach Needs Assessment Checklist was used to measure all three objectives. The scale was designed specifically to determine comprehensively the financial, health, social, and educational needs of handicapped students and their families, and to ascertain reduction in these needs in response to project intervention. The scale also measures the degree of parental involvement in needs resolution.

Based upon intake interviews with the child and family, a family worker and social worker completed the scale by assigning a score of from one to

four, reflecting the presence and severity of needs, to each of the 53 items (needs). A score of one indicated a high need for service for a particular item; a score of four indicated no need for service. For each need, the degree of parent involvement toward resolution was rated from one (no involvement) to four (primary responsibility). The score for each item was multiplied by empirically-derived weights to yield a weighted score for each item. These weights were assigned on the basis of the urgency (survival value) of each need. The weighted scores for each item were summed to obtain the child's and family's pretest severity-of-needs scores and a total parent-involvement score. To derive posttest values, the same procedures were followed in May 1981 or upon permination of service.

To determine whether the mean pre- to posttest change in the severity of student and family needs and the mean change in parent involvement scores were statistically significant at the .05 level,  $\underline{t}$  tests for correlated means were applied to the data (see Table 1). Data were reported for .169 students, and their families, who were served by the Outreach staff during 1980-81 school year. As indicated in able 1, all of the observed  $\underline{t}$  values were statistically significant: the mean decrease in the severity-of-student-needs score was 12:36 ( $\underline{t}$  = -15.07,  $\underline{df}$  = 168,  $\underline{p}$ <.01); the mean decrease in the severity-of-family-needs score was 2.09 ( $\underline{t}$  = -5.72,  $\underline{df}$  = 168,  $\underline{p}$ <.01); and the mean increases in the scores for parent involvement in the resolution of student needs and family needs were 10.23 ( $\underline{t}$  = 13.83,  $\underline{df}$  = 168,  $\underline{p}$ <.01) and 1.96 ( $\underline{t}$  = 5.41,  $\underline{df}$  = 168,  $\underline{p}$ <.01), respectively. Accordingly, the program's three objectives were attained. It is noteworthy that the severity of student needs was reduced to a greater extent than the severity of family needs; the

TABLE 1 -

SUMMARY OF t TESTS FOR CORRELATED MEANS APPLIED TO MEAN CHANGES IN SEVERITY OF STUDENT AND FAMILY NEEDS AND THE DEGREE OF PARENT INVOLVEMENT IN NEEDS RESOLUTION

| •                                      |           | •             | · · · · · · · · · · · · · · · · · · · |          |
|--|-----------|---------------|---------------------------------------|----------|
| ' <u>Variable</u>                      | <u></u>   | <u>'</u>      | TDF'                                  | t        |
| Severity of<br>Student Needs           | 12.36 ·   | 10.64         | 168                                   | -15.07** |
| Severity of .<br>Family Needs          | a - 2.09  | 4.74          | 168                                   | - 5.72** |
| Parent Involvement<br>In Student Needs | b * 10.23 | 9 <b>.</b> 59 | 168                                   | 13.83**  |
| Parent Involvement in Family Needs     | b<br>1.96 | 4.70/         | •168                                  | 5.41**   |

<sup>\*\*</sup>p < .01

a = Mean reduction in severity of needs scores between preand posttests.

b = Mean increase in parent involvement in the resolution
. of needs scores between pre- and posttests.

c = Standard deviations of the mean differences.

mean reductions were 12.36 and 2.09, respectively. The same pattern was observed in the scores for parent involvement in the reduction of needs; that is, parents increased their involvement more in the resolution of student needs than family needs.

# VI PROBLEMS

All of the problems encountered in the implementation of the program during its first year (1979-80) were resolved; there were no major problems during this second funding year. The problems cited in last year's evaluation report that were resolved during the current project year were: the Outreach Needs Assessment Scale was revised to reduce the ambiguity of some items and increase the precision of measurement; the use of mailed communications obviated the problem of contacting families who lacked telephones; the role of the program's family workers was clarified through improved communication between program staff and school administrators; and the program began promptly at the beginning of the school year.