DOCUMENT RESUME

ED 256 797   TM 850 284

AUTHOR   Ebert, Mary K.; And Others
TITLE   A Guide to Evaluating Programs for Handicapped
                Preschoolers.
INSTITUTION   Montgomery County Public Schools, Rockville, Md.
SPONS AGENCY   Maryland State Dept. of Education, Baltimore. Office
                of Special Education.
PUB DATE   83
NOTE   317p.
PUB TYPE   Guides - Non-Classroom Use (055) -- Tests/Evaluation
                Instruments (160)

EDRS PRICE   MF01/PC13 Plus Postage.
DESCRIPTORS   Attitude Measures; Classroom Observation Techniques;
                Data Analysis; *Disabilities; *Evaluation Methods;
                Handicap Identification; Interviews; Models;
                Preschool Education; Program Administration; *Program
                Effectiveness; *Program Evaluation; Questionnaires;
                Screening Tests; *Special Education; Student
                Placement; Student Records; *Young Children
IDENTIFIERS   Montgomery County Public Schools MD

ABSTRACT
                This manual was developed to provide a model for
evaluating programs for handicapped preschoolers that can be used by
all Maryland school districts regardless of size or resources. The
model has five components: (1) how children are identified as
handicapped; (2) what type of testing takes place before and after a
child is placed in a program; (3) procedures for determining a
child's program placement; (4) program effectiveness; and (5) program
management of communication and recordkeeping procedures. The manual
has four sections. The Overview familiarizes the reader with the
model and how it can be used. The Evaluation Model section details
the model's components and subcomponents, plus provides evaluation
questions, data collection instruments, and suggestions for adapting
and using the instruments. The third section, Managing Data, offers
suggestions for collecting data, preparing data for analysis,
analyzing the data, and writing up results. The Appendices contain a
glossary of terms, an annotated bibliography, descriptions of
different instrument types, information on instrument format, codes
and identification numbers, a sample checklist and letters,
information on how to calculate, establish and maintain
inter-observer reliability, and sample summary reports. The model is
presented as a menu from which users may pick and choose, depending
on their interests and experience. (BS)

A Guide to Evaluating Programs for Handicapped Preschoolers

PRESCHOOL EVALUATION PROJECT

A joint project of the
Office of Special and Alternative Education
and the
Department of Educational Accountability

Montgomery County Public Schools
Rockville, Maryland

Funded by the Maryland State Department of Education

A GUIDE TO EVALUATING PROGRAMS FOR HANDICAPPED PRESCHOOLERS

A joint project of the

Office of the Associate Superintendent for Special and Alternative Education

and the

Department of Educational Accountability

Montgomery County Public Schools

Rockville, Maryland

1983

Authors

Dr. Mary K. Ebert
Dr. Kathleen M. Hebbeler
Suzanne Raber

Project Director: Dr. Thomas J. O'Toole

Principal Investigator: Dr. Mary K. Ebert

Project Staff: Dr. Patricia A. Edmister
                Dr. Stephen M. Frankel
                Dr. Joy A. Frechtling
                Dr. Kathleen M. Hebbeler
                Ms. Suzanne Raber
                Ms. Elizabeth Jenny

TABLE OF CONTENTS

6

7

PREFACE

This manual is designed for individuals who are interested in evaluating services being provided to handicapped preschool children. These individuals may be

- o program directors,
- o school administrators,
- o classroom teachers,
- o external evaluators

or any other professional who wants information about programs for young children.

The types of questions that someone may want answered are as diverse as the following:

- o Is the program having a positive impact on the children's growth and development?
- o Are parents satisfied with the services children are receiving?
- o What kind of assessments are children receiving prior to being diagnosed as needing special services?
- o What kind of families are participating in child find screening clinics?
- o What topics are discussed at placement meetings?
- o What are the most effective means of communication among staff?

If you have a question to ask about programs for handicapped preschoolers, chances are there is something in this manual that can help you answer that question. You don't need a background in research and statistics nor access to a computer to collect useful information for program improvement. You also don't need to read the entire manual -- it's designed for people who have other things to do.

To insure that your evaluation efforts will not be wasted you do need

- o to want to answer a question;
- o to be able to devote some resources (you can determine how much) to finding out the answer; and
- o to be committed to using the information or suppying it to those who can use it.

If you're still interested, read on. We hope we can be of help.

ACKNOWLEDGEMENTS

INTRODUCTION

The purpose of this manual is to provide individuals who work with presch ol handicapped children a means to evaluate various aspects of the services they provide. What is contained in the manual is an "evaluation model." By "model," we mean everything necessary to conduct an evaluation including

- o   questions to ask,
- o   instruments (questionnaires, interviews, record review forms and observation systems) for collecting information,
- o   suggestions for when and how to use the various data collection instruments, and
- o   methods for analyzing and summarizing the information.

For many people, evaluating programs for preschool children probably means examining scores on some measure at the beginning and end of the program to see what kind of gains the children made. This type of an evaluation provides information about <u>program effectiveness.</u> It addresses the question, "Did participation in the program/services have an effect?"

While collecting informatioL about program effectiveness is certainly important, there are a number of other aspects of providing services to preschoolers that can also be examined. There is a rather lengthy process that must occur before service provision can even take place. Steps in this process include

- o   someone noticing that the child has a possible problem (parent, pediatrician, Child Find Screening Clinic),
- o   assessment by professionals in the suspected disability areas, and
- o   review of the diagnostic information by an interdisciplinary team for the purpose of deciding an appropriate placement and developing an Individualized Educational Plan.

If one of these steps in the process is not operating as it should, handicapped children may not be identified as early as possible, they may be inaccurately or incompletely diagnosed or they may be placed inappropriately. Evaluating and improving these aspects of the process can be just as essential to the well-being of handicapped children as examing pretest and posttest scores.

Once the child is placed in a program, services must be delivered on a regular basis by trained, qualified personnel. Information must be communicated among the service providers who work with a child, between the service provders and their administrators, and between the program and the parents. Comprehensive, usable files should be kept on every child receiving services. Additionally, there may be a need to look at how well the program is operating in addition to or instead of looking at how well the children are doing.

The evaluation model is divided into several components and, within components, into subcomponents. The components cover five general areas within the provision of services for young children:

o   how children are identified as handicapped,
o   what type of testing takes place before and after the child is placed in a program,
o   what happens during the process of determining a child's program placement,
o   how effective the program is in its provision of services, and
o   how efficiently and effectively a program manages communication and record keeping procedures.

Organization of the Manual

The manual is divided into four main sections. The first, the **Overview**, is designed to familiarize the reader with the model and how it can be used. The second section, the **Evaluation Model**, contains a detailed description of each of the components and subcomponents. For each component, the reader will find a set of evaluation questions, data collection instruments to answer those questions, recommendations for when to use the data collection instruments and suggestions for adapting and using the instruments. The third section, **Managing Data**, offers suggestions for collecting data, preparing data for analysis, analyzing the data and writing up the results. The final section, the Appendices, contains more detailed information for the user who has not had much previous experience conducting evaluations. This section includes: a glossary of terms, an annotated bibliography, a description of the different types of instruments, information on instrument format, codes and identification numbers, a sample checklist and letters, information on how to calculate, establish and maintain inter-observer reliability and sample summary reports.

Using the Manual

How you should use the manual depends on two things:

o   how much experience you have had with evaluation, and
o   how much evaluation you intend to do.

Your Experience

If you are an experienced evaluator, you will probably want to focus on the second section, the Evaluation Model. You may find some new ideas and the data collection instruments should prove helpful to you. You can skim the first section, the Overview, and more than likely you are already familiar with the information in the Managing Data section and parts of the Appendices.

If your experience with evaluation is somewhat limited, you should read the first section, the Overview; it will provide you with directions as to how to work through the evaluation model most efficiently. The Managing Data section was specifically written for individuals who have had very little experience with summarizing and analyzing data and the Appendices will

provide background information needed to give you a better understanding of the model contents and design.

Extent of the Evaluation

No program or school system would ever want to simultaneously examine all the components and subcomponents contained in the model. The model is actually a menu — pick and choose the items that are of the most interest to you and leave the rest for another customer or another visit. To take it all would surely do you in!

Some users will be interested in doing more than others. Factors which should be taken in to consideration include:

- o   How much information is needed to adequately address the your evaluation concerns?
- o   How much time can you devote to collecting and analyzing the information that is gathered?
- o   Is there additional staff available to help with clerical or analytical tasks?
- o   Do you have access to a computer or would the information have to be hand-tallied and calculated?
- ᴄ   How critical the information is to improve program services?

If you don't know how much you intend to do, we'll tell you enough about how to use the contents of the model so that you can decide for yourself. We'll also tell you what data collection activities are feasible if you don't have access to a computer.

OVERVIEW

What's an Evaluation Model?

We are using the term evaluation model to refer to a package of materials that can be used to conduct an evaluation of some aspect of service provision to handicapped preschoolers. As indicated previously, this package includes: questions to be answered, instruments for collecting information, suggestions for when and how to use the various instruments, and methods for analyzing and summarizing the information.

How is the Model Organized?

The model is organized into five main sections called Components. Each component addresses a general aspect of service provision to preschool handicapped children. The five Components are:

- o   Child Find Procedures,
- o   The Assessment Process,
- o   The Placement Process,
- o   Program Effectiveness, and
- o   Program Management.

Each Component is divided into Subcomponents which focus on a specific area within the Component. For exampl , Preplacement Assessment and Postplacement Assessment are two s components in the Assessment Process Component. See Table 1 for a desc tion of each component and its subcomponents.

What's in a Component?

Within a component is all the information that you will need to help design an evaluation and to collect the information needed to address your evaluative concerns. Each component is organized so that the following information is provided for each of its subcomponents:

- o   a description,
- o   a list of the evaluation questions which might be answered,
- o   a table with suggestions on when the data collection should occur,
- o   a chart of the data collection instruments developed or available in the model,
- o   the data collection instruments, and
- o   a list of special notes and additional considerations for using the data collection instruments.

TABLE 1

Description of Components

The Child Find Component addresses the operation and administration of a child find unit, procedures for alerting the community to child find activities/services, and the various steps employed in the screening process.

Subcomponents: Administration   The Screening Process
               Community Awareness

*****

The Assessment Process Component focuses on the various stages in testing a preschool child to determine if a handicapping condition exists, what that condition may be, and from what instructional programming the child could profit most.

Subcomponents: Preplacement Assessment   Postplacement Assessment

*****

The Placement Process Component examines the procedures by which a child is placed in a special education program. Topics covered include what information is needed before a child can be considered for placement, what is discussed during a placement meeting, whether or not appropriate placements are made, and how the overall process develops.

Subcomponents: Intake/Review Process   Appropriateness of Placement
               The Placement Meeting   Overview of the Placement
                                       Process

*****

The Program Effectiveness Component encompasses several areas: changes in the child's developmental skills and within the child's family following placement, the amount and quality of services delivered to the child and parents, and the background characteristics of students/families/staff.

Subcomponents: Changes in the Child   Services to Parents
               Changes in the Family   Staff/Student Descriptive
               Service Delivery   Information

*****

The Program Management Component examines two aspects of how a program is managed and operated: the communication procedures that occur among staff members and between staff and parents, and how student information (test scores, IEP's, assessment reports, etc.) is filed, updated and maintained.

Subcomponents: Communication   Record Keeping

What are Evaluation Questions?

Evaluation questions are the foundation on which an evaluation is built. They address the concerns and issues about which you, the evaluator, or your clients (people who ask to have an evaluation done) want information. These questions guide how the evaluation is carried out, i.e., what information is collected, from whom the information is collected, when the information is collected, how it is collected and how it is summarized. We'll talk more about evaluation questions later when we discuss how to get started using the evaluation model.

What are Data Collection Instruments?

Data collection instruments are the "tools" you can use to collect the information you will need to answer your evaluation questions. The model includes 35 "tools" or data collection instruments of four basic types:

- o 24 questionnaires,
- o 2 interviews,
- o 7 record reviews, and
- o 2 observation systems.

We developed the instrumentation so that collecting data would be as simple as possible. Additionally, most of the instruments are formatted so that the information collected can be easily hand-tallied or entered onto a computer.

All of the instruments were developed to answer three basic questions:

- o What is the current status of an activity?
- o What aspects of an activity work well or poorly?
- o How can an activity be improved?

Questionnaires make up the majority of the instrumentation. Because they are designed to be self-administered, they are perhaps the most time efficient tool that could be developed. Interviews were developed as data collection tools for circumstances when an instrument was needed that could adapt to unique situations where probing into a process and/or the reasons for a particular answer was important. Record reviews are included in those components of the model where information can be found in student files to answer evaluation questions or to clarify other information collected. Observation Systems were developed for those components where direct observation of certain activities was seen as the most appropriate way to collect information on those activities.

For more detailed descriptive information on the different types of instruments developed in the model, refer to Appendix C, Description of the Different Types of Instruments.

Getting Started

Generally one begins an evaluation with a question or set of questions. Sometimes one doesn't have a specific question in mind but does know a general area that should be examined, for example, "I think we need to look at our placement process, but what do we ask about it?" Sometimes one doesn't even have an area in mind because he/she is not sure what would be most helpful to examine.

If you have an area in mind and a set of questions to address, turn to the component that encompasses that area. If you don't have an area or a question, read the descriptions of the subcomponents provided on the pink pages in each component. Then turn to the Evaluation Study Questions on the blue pages in each of the components -- look over questions, see what you like, what interests you, what you need, etc.

If you're doing evaluation for a number of different people, e.g., teachers and administrators, be aware that their concerns may not always the same. You may have to include questions for both or decide whose questions must really be addressed. Before developing or selecting evaluation study questions, you might find it helpful to meet and talk with the people who will ultimately be affected by and/or use the evaluation results. They may be able to offer you some insight into the process you are trying to evaluate. They can also help you focus your evaluation efforts on the areas that are most important to them. If you incorporate this information into your evaluation, this can increase the likelihood that the results will be used.

Suppose you are interested in obtaining some type of information to show that the special education services are being delivered effectively. Start by going to the Program Effectiveness Component of the model and reading the description of the subcomponents (pink pages). Select the subcomponent most closely related to your interests and review its corresponding evaluation questions (blue pages). The Evaluation Study Questions chart will direct you to the data collection instruments that you can use to answer the question or questions in which you are interested.

Let's suppose that after reviewing the study questions you still have some concerns about what area you should examine. You decide to discuss your general focus, program effectiveness, with some of the teachers in the program. From this discussion you discover that the children's parents are very involved in the education of their children. The teachers suggest that parents may be a good source of information on the effectiveness of the educational program. If you want to include parents in your evaluation, you can then go back and review the evaluation questions and select the questions requiring parent input.

If you don't quite understand what a particular study question means, look at the data collection instruments and see what's on them. For example, in the Program Effectiveness Component, Changes in the Family Subcomponent, there is a question which asks,

> During the time that the child was provided with special education, was there a change in any of the following family characteristics:
> a. parent employment status,
> b. parent occupation,
> c. frequency of parent social activities,
> d. nature of the relationships between various family members and the handicapped child?

You might wonder what part d of this question means. To find out, look up the instrument(s) indicated on the Evaluation Study Questions chart next to the question. Two questionnaires are listed: the Family Characteristics, Parent Questionnaire, Forms I and II. After reviewing these instruments you find that question 6 on Form II addresses the above evaluation question.

Use the answer choices below to indicate how the relationships among your family members might have changed between 1) the beginning of this school year and 2) the present time.

Answer Choices:

1 = Much more positive
2 = Slightly more positive
3 = No change; relationship continues to be good
4 = No change; relationship could be better
5 = Slightly more negative
6 = Much more negative
7 = Not applicable

How would you describe any changes that may have occurred in the relationships between:

mother and program child? .... _____

father and program child? .... _____

parents and other children in the family? .... _____

program child and other children in the family? ... . _____

program child and neighborhood children? .... _____

The respondent is to indicate changes in the nature of various relationships by selecting one of seven possible answers. The question asks about the relationships between the handicapped child (program child) and the following family members: mother, father, and other children in the family.

Using the Instrumentation

Before using any of the data collection instruments, there are several decisions you will need to make:

- o   When and how frequently should the instruments be used?
- o   What is the best way to use the instruments?
- o   Can the instruments be used as is or will they need to be modified?
- o   What type of financial resources are available?

2-5   BEST COPY AVAILABLE

When to Use the Instruments

To help you decide when and how frequently to use the instruments that you chose, turn to the yellow pages in the component in which you are interested. We have included a chart on those pages that lists each of the instruments in one column and suggestions for when to use the instruments in the second column. This information is offered only as a guide; your own situation may require using the instruments at different times during the school year or more or less frequently than we suggest.

How to Use the Instruments

Each of the four different types of data collection instruments contained in the model involve different techniques for collecting information. Questionnaires are designed to be self-administered and are primarily made up of questions and a fixed set of answer choices from which the respondent must choose. Interviews require that someone read the questions to a respondent and probe for clarification of ambiguous responses. Interview questions tend to be more open-ended, i.e., the respondent must answer questions in his/her own words. Record reviews involve someone examining student files and recording certain information onto a data response form. The observation systems require someone directly observing classroom activities or placement meetings and coding the events that occur.

If you're new to evaluation or have limited experience, there are several sections in the manual that you should read:

- o   Special Notes on the Instruments (green pages in the component with which you are working)
- o   Managing Data
     - Data Collection
- o   Appendix

These sections will provide you with information about each data collection instrument that will help you use them, general recommendations for collecting information using each type of instrument, detailed descriptions of each type of instrument and their format, and references you can look up if you would like more information on the different types of instruments.

If you have experience using the type of instrumentation you selected from the model, you can skip or skim the Data Collection section in Managing Data and the Appendix B, the Annotated Bibliography, and Appendix C, Description of the Different Types of Instruments. You should, however, look over the green pages, Special Notes on the Instrumentation, in the component with which you are working.

Whether or not you are an experienced evaluator, you will want to read Appendix D, Format, Codes and Identification Numbers. This section will discuss the format of the instruments, the use of card column numbers for entering the information into a computer, and the use and assignment of identification numbers.

18

Modifying the Instruments

After you have selected the evaluation questions and decided what instruments are best for your evaluation, look over the data collection instruments you selected to decide if they will obtain all the information you need. You may find that you want to add a question or eliminate one. We encourage you to do so. However, these instruments have been extensively field-tested and/or reviewed by professionals to ensure that the intended respondents could easily complete them. You will lose these benefits if you radically change the instruments. Depending on your time, you can always use the format and style of the items on these instruments to develop and field-test your own, but the model was developed so you wouldn't have to.

Although the data collection instruments were designed to be simple for the respondents to answer, you may feel that a few of the parent questionnaires could not be completed accurately without supervision. In those instances, we would encourage you to use the questionnaire as an interview, take advantage of a parent group meeting or schedule one where you can be available to answer questions or give verbal directions. Be aware, however, that this will mean more of your (or the interviewer's) time. If information from parents is important to you, it is a necessary and wise investment of time.

Your Financial Resources

When selecting an instrument, you will need to keep in mind that some information costs more to collect than other information. For example, it costs less to mail out 50 questionnaires than to conduct 50 interviews mainly because of the number of staff hours required to conduct interviews.

You may also find that you need to refine or eliminate some of the instruments in a subcomponent because of the resources required to use them. For example, the Child and Classroom Activity, Classroom Observation System in the Service Delivery Subcomponent of Program Effectiveness is an extremely valuable technique for describing the types of activities which occur in a preschool special education program. Unfortunately, its use requires well-trained observers spending a great deal of time in classrooms. While it could be used on a limited basis (e.g., 10 or 15 times) to get a general sense of the types of activities in which handicapped preschoolers engage, to be able to relate what a child does to how much he/she learns requires extensive use of the system. The ideal way to use the system would be to collect a sufficient number of observations on each child (e.g., 25 to 30, distributed throughout the year, on different days of the week and different times of the day) to produce a good picture of how each child spends his or her time. This detailed, individualized picture for each child could be related to developmental gains over the course of the school year in order to answer such questions as, "Do children who spend the most time in language arts activities show the most gains on language tests?"

What's Next?

So far you've been shown how to use the evaluation model to:

- o   identify the area you wish to evaluate,
- o   identify your evaluation question(s),
- o   select data collection instruments, and
- o   decide how and when to use the instruments.

All of these decisions make up the design of your evaluation. Your next step is to implement your design. The section, Data Collection, in Managing Data offers some suggestions on how to go about implementing your design.

What To Do With the Information Collected?

If you are experienced with processing and analyzing data you probably do not need any help with answering this question. If you have not had any experience in this area, several segments in the Managing Data section were written for you. In this section you will find suggestions for processing, analyzing and summarizing the information you collected. Examples are included on how to analyze and summarize the data depending on the type of question, i.e. answers to multiple choice questions need to be handled differently than answers to rank-order questions. There are also examples of summary reports in Appendix H showing you the types of information that can be generated and summarized using some of the instruments.

CONCLUSION

In developing this evaluation model and preparing this manual we have tried to anticipate all of the information that you will need to conduct an evaluation of different aspects of service provision to handicapped children. We have given you the basics in this manual, as well as directions for finding additional information via Appendix B, the Annotated Bibliography.

We hope our work will be of use to you and that it will make some contribution to your efforts to improve services for preschool handicapped children.

20

COMPONENT: Child Find Procedures

       Description of Subcomponents
       Chart of Data Collection Instruments
       Evaluation Study Questions
       When to Use the Data Collection Instruments
       Data Collection Instruments
       Special Notes on the Instruments

21

COMPONENT: Child Find Procedures

Description of Subcomponents

The **Administration** subcomponent examines the administration and operation of preschool child find activities in a school district.

*****

The **Community Awareness** subcomponent provides instrumentation to evaluate community awareness of the preschool child find activities and services offered by a school district and the procedures by which the community is made aware of these activities and services.

*****

The **Screening Process** subcomponent focuses on how a preschool child find unit selects children to be screened and tests them. It also provides the tools necessary to summarize intake information and test results.

22

COMPONENT: Child Find

	Instruments		
	Subcomponents		
	Administration	Community Awareness	Screening Process
Special Education Director Questionnaire	X		
Preschool Child Find Director Questionnaire		X	X
Parent Questionnaire		X	X
Record Reviews			X

COMPONENT: Child Find Procedures
SUBCOMPONENT: Administration

Evaluation Study Questions

Question	Instrument
1. What department/staff are responsible for various preschool child find activities?	Child Find Administration, Special Education Director Questionnaire
2. Do school districts have written goals and objectives for their preschool child find activities?	Child Find Administration, Special Education Director Questionnaire
3. What procedures are used to identify handicapped preschoolers and which are more effective?	Child Find Administration, Special Education Director Questionnaire
4. What is the source of funding for preschool child find activities? How does it compare with the total special education budget and with the budget for child find activities for all age groups?	Child Find Administration, Special Education Director Questionnaire
5. What, if any, changes are planned for preschool child find activities in the next two years?	Child Find Administration, Special Education Director Questionnaire

---

24

COMPONENT: Child Find Procedures
SUBCOMPONENT: Community Awareness

Evaluation Study Questions

Question	Instrument
1. How do school districts advertise pre-school child find activities? How frequently, where and in what form are they advertised?	Child Find Community Awareness, Preschool Child Find Director Questionnaire
2. What information is obtained from individuals who inquire about preschool child find activities? How is this information used and how long is it maintained?	Child Find Community Awareness, Preschool Child Find Director Questionnaire
3. What criteria do school districts use to determine if their preschool child find activities were successful?	Child Find Community Awareness, Preschool Child Find Director Questionnaire
4. Does the school district follow-up on inquiries about preschool child find activities/services?	Child Find Community Awareness, Preschool Child Find Director Questionnaire
5. How aware are parents of preschool child find activities?	Child Find Community Awareness, Parent Questionnaire
6. How have parents found out about preschool child find activities?	Child Find Community Awareness, Parent Questionnaire
7. Are certain groups of parents more or less knowledgeable about preschool child find activities (groups based on number of parents living with child, employment status, ethnic or racial background, primary language in home, socioeconomic status, and educational level)?	Child Find Community Awareness, Parent Questionnaire

---

25

COMPONENT: Child Find Procedures
SUBCOMPONENT: Screening Process

Evaluation Study Questions

Question	Instrument
1. What is the percentage of preschool children in a school district who are screened for possible handicapping conditions?	Child Find Screening Process, Preschool Child Find Director Questionnaire, Part A
2. How many of the children who are screened are (a) identified as not requiring special education, (b) identified as needing special education, and (c) provided special education services?	Child Find Screening Process, Preschool Child Find Director Questionnaire, Part A
3. What screening procedures are used?	Child Find Screening Process, Preschool Child Find Director Questionnaire, Part A
4. With respect to screening clinics: (a) how frequently are they held and (b) how are they conducted?	Child Find Screening Process, Preschool Child Find Director Questionnaire, Part A
5. What and how many tests are used to screen a preschool child? How were these tests selected?	Child Find Screening Process, Preschool Child Find Director Questionnaire, Part B
6. What are the possible recommendations that can be made once a child is screened? What factors contribute to making these recommendations?	Child Find Screening Process, Preschool Child Find Director Questionnaire, Part C
7. Do staff follow-up to ensure that parents follow recommendations? What percentage of parents do not follow through on recommendations?	Child Find Screening Process, Preschool Child Find Director Questionnaire, Part C
8. What information is maintained on a child after screening? How is it used and how long is it maintained?	Child Find Screening Process, Preschool Child Find Director Questionnaire, Part D
9. When and how are screening results explained to parents?	Child Find Screening Process, Preschool Child Find Director Questionnaire, Part E

26

	Question	Instrument

10. Do certain groups of parents have their preschoolers screened (groups based on number of parents living with child, employment status, geographic location, ethnic or racial group, primary language in the home, socioeconomic status)?

Child Find Screening Process, Demographics/Satisfaction Rating, Parent Questionnaire

11. What were parent perceptions about the manner in which their child's screening was conducted?

Child Find Screening Process, Demographics/Satisfaction Rating, Parent Questionnaire

12. How satisfied are parents with the manner in which their child's screening was conducted?

Child Find Screening Process, Demographics/Satisfaction Rating, Parent Questionnaire

13. Are certain groups of parents more or less satisfied with the manner in which preschool child find activities are conducted (groups based on number of parents living with child, employment status, geographic location, ethnic or racial group, primary language in the home, socioeconomic status)?

Child Find Screening Process, Demographics/Satisfaction Rating, Parent Questionnaire

14. What are parent recommendations for improving the screening process?

Child Find Screening Process, Demographics/Satisfaction Rating, Parent Questionnaire

15. With respect to the intake interview or initial inquiry to the child find office, what are: (a) the age and sex of the children about whom concerns are expressed, (b) the reason for the inquiry, (c) the areas in which a delay or problem is suspected, (d) the number of children who have had previous evaluations or are presently enrolled in a program, (e) the birth order of the child, (f) the number of siblings with diagnosed learning problems, and (g) the frequency of various type of recommendations given to inquirers?

Child Find Screening Process, Summary of Intake Information, Record Review

16. With respect to the number of children who are screened: (a) what was the average age and age range; (b) which ability areas were screened; (c) what were the results of the screening; and (d) what recommendations were made?

Child Find Screening Process, Summary of Screening Results, Record Review

COMPONENT: Child Find

When to Use the Instruments

SUBCOMPONENT: Administration

Instrument	When to Use
Child Find Administration, Special Education Director Questionnaire	At any time during the school year.

*****

SUBCOMPONENT: Community Awareness

Instrument	When to Use
Child Find Community Awareness, Preschool Child Find Director Questionnaire	Toward the end of the school year.
Child Find Community Awareness, Parent Questionnaire	At any time during the school year.

*****

SUBCOMPONENT: Screening Process

Instrument	When to Use
Child Find Screening Process, Preschool Child Find Director Questionnaire	Toward the end of the school year.
Child Find Screening Process, Demographics/Satisfaction Rating, Parent Questionnaire	After a child is screened.
Child Find Screening Process, Summary Intake Information, Record Review	During initial telephone contact with child find unit or review unit's notes/forms at any time during the school year.
Child Find Screening Process, Summary of Screening Results, Record Review	After a screening session.

COMPONENT: Child Find

Data Collections Instruments

School District Name: _____

Respondent's Name: _____

Respondent's Title: _____

The purpose of this questionnaire is to obtain information regarding the administration and operation of preschool child find activities in your school district.

Directions: Several different types of questions are asked. In some you will need to respond by writing out your answer. In others you will be asked to select from among several answer choices by writing a number in a space to the right of the question.

If there are some questions which you cannot answer, please discuss them with any member of your staff who may be more familiar with the type of information requested.

Example

Indicate which child find procedures are used by your school district to identify preschool children who need special education.

Answer Choices:

1=This procedure is used.
2=This procedure is not used.

Child find screening clinic .... __1__

Notices in pediatrician's offices .... __2__

This respondent's answers indicate that child find screening clinics are used in his/her school district but that notices are not placed in pediatrician's offices.

Use the reverse side of this page to clarify any of your answer choices.

Thank you for your help.

CHILD FIND ADMINISTRATION
Special Education Director

1. In the spaces provided below, indicate which department and staff position, if any, within your school system is primarily responsible for the following activities: [If your school system does not conduct an activity, indicate this by writing NA after the activity.]

   a. Answering inquiries regarding services or testing for preschool children:

      Office Use

      Department: .... _____   8-9

      Position: .... _____   10-11

   b. Advertising screening clinics, testing, or services for preschool children:

      Department: .... _____   12-13

      Position: .... _____   14-15

   c. Scheduling testing for preschool children suspected of having a handicapping condition:

      Department: .... _____   16-17

      Position: .... _____   18-19

   d. Screening preschool children for possible handicaps:

      Department: .... _____   20-21

      Position: .... _____   22-23

   e. Following up on preschool children who were screened:

      Department: .... _____   24-25

      Position: .... _____   26-27

   f. Other child find activities (Specify: _____)

      Department: .... _____   28-29

      Position: .... _____   30-31

2. Within the administrative structure of your school district, where is (are) the department(s) which conduct(s) preschool child find activities located? Briefly describe on the lines provided below where the department(s) is (are) located. If possible, attach an administrative flow chart illustrating the relationship of these departments to the total administrative structure of your school district.

_____

_____

_____

_____

31

3. Is there a formal written statement that outlines the goals and objectives for your school district's preschool child find activities? Write the number of one of the answers in the space to the right . . . . _____   32

Answer Choices:

1=Yes
2=No

If your answer is "Yes," please attach a copy of these goals/objectives to the questionnaire when you return it.

4. Indicate which child find procedures are used by your school district to identify preschool children who need special education.

Answer Choices:

1=This procedure is used.
2=This procedure is not used.

Child find screening clinic . . . . _____   33

Notices in pediatrician's offices . . . . _____   34

Door to door canvasing . . . . _____   35

General information campaign (posters in stores, ads on radio, etc.) . . . . _____   36

Other (Specify: _____) _____   37

Other (Specify: _____) _____   38

5. Which of the following is most effective for locating preschool children in your school district? . . . . _____   39

Answer Choices:

1=Child find screening clinic
2=Notices in pediatrician's offices
3=Door to door canvasing
4=General information campaign (posters in stores, ads on radio, etc.)
5=Other (Specify: _____)

6. Which age groups are included in your preschool child find activities? Indicate the age range of children in these activities by recording the youngest and oldest ages in months in the spaces below:

Youngest: _____ months 40-42   Oldest: _____ months 43-45

32

7. What percentage of the funds available for preschool child find activities are provided by the following? Write your answer in the space to the right of each possible funding source. If you answer is 100%, write 99 in the space.

Federal .... _____ % 46-47

State funds .... _____ % 48-49

Local funds .... _____ % 50-51

Other (Specify: _____) _____ % 52-53

Other (Specify: _____) _____ % 54-55

Total=100%

8. What percentage of funds available for special education services are used for preschool child find activities? Please write your answer in the space to the right .... _____ % 56-57

9. What percentage of funds available for child find activities are used for preschool child find activities? Please write the percentage in the space to the right .... _____ % 58-59

10. Does your school district have plans for changing its preschool child find activities in the next two years? .... _____ 60

Answer Choices:

1=Yes
2=No

If your answer is "No," stop here; you have completed this questionnaire. Thank you.

If your answer is "Yes," go to question 11.

11. Please indicate in what way(s) the preschool child find activities in your school district may be changed.

Answer Choices:

1=This change is planned.
2=This change is not planned.

Reduction in staff .... _____	61
Increase in staff .... _____	62
Reduction in the number of screening clinics .... _____	63
Increase in the number of screening clinics .... _____	64
Restriction of the age range screened (Specify: _____) _____	65
Extension of the age range screened (Specify: _____) _____	88
Decrease in amount of funds available .... _____	67
Increase in amount of funds available .... _____	68
Change in test instruments used .... _____	69
Increase in number of tests used .... _____	70
Decrease in number of tests used .... _____	71
Revision of forms used .... _____	72
Other (Specify: _____) _____	73
Other (Specify: _____) _____	74

This concludes this questionnaire. Thank you.

School District Name: _____

Respondent's Name:_____

Respondent's Title:_____

This questionnaire focuses on your school district's efforts to make the community aware of preschool child find activities and how your staff handle inquiries made to your office regarding these activities.

Directions: Most questions ask you to indicate your answers by writing an answer choice number on a line provided to the right of each question.

Example:

How is the public informed about preschool child find activities?
Please attach copies of materials you distributed.

Answer Choices:

1=This method is used.
2=This method is not used.

Posters in public places .... __1__

Pamphlet/Brochures distributed in public places .... __2__

This respondent indicated that his/her preschool child find unit informs the public about their services by placing posters in public places and that pamphlets/brochures are not distributed in public places.

If there are some questions which you cannot answer, please discuss them with any member of your staff who may be more familiar with the type of information requested.

Use the reverse side of this page to clarify any of your answer choices.

Thank you for your help.

1. Does your school district conduct preschool child find campaigns, i.e., advertise in the community that educational assessments and special education services are offered by the school district for preschool children with special needs? . . . . _____   8

   Answer Choices:

   1=Yes—Go to Question 2
   2=No—Go to Question 6

2. How many times during the school year are preschool child find campaigns carried out? Please write the number of your answer in the spaces to the right. If your answer is 4, write 4 in the spaces . . . . _____   9-10

3. Where are individual preschool child find campaigns conducted? . . . . _____   11

   Answer Choices:

   1=Throughout the entire school district
   2=In a limited geographic area

4. Are all preschool child find campaigns conducted in the same manner (e.g., the same age group is addressed, the same information is distributed?) . . . . _____   12

   Answer Choices:

   1=Yes—Go to Question 6
   2=No—Go to Question 5

5. Indicate briefly in the space provided below the way in which the campaigns differ.

   _____

   _____

   _____

36

6. How is the public informed about preschool child find activities? **Please attach copies of materials you distribute.**

Answer Choices:

1=This method is used.
2=This method is not used.

Posters in public places .... _____	13
Pamphlets/Brochures distributed in public places .... _____	14
Radio advertisements .... _____	15
Television advertisements .... _____	16
Information sent to pediatricians .... _____	17
Information sent to children's hospitals .... _____	18
Professional advertising firm is used .... _____	19
Advertisements in newspapers .... _____	20
Advertisements in agency newsletter .... _____	21
Pamphlets/brochures distributed to nonpublic schools .... _____	22
Pamphlets/brochures distributed to government agencies .... _____	23
Pamphlets/brochures distributed to private day care centers .... _____	24
Other (Specify: _____) _____	25
Other (Specify: _____) _____	26

7. What information is given to the public about preschool child find activities?

Answer Choices:

1=This information is given.
2=This information is not given.

Warning signs of a handicap .... _____	27
What office to contact .... _____	28
Phone number(s) .... _____	29
How to arrange to have child screened .... _____	30
When screening can be done .... _____	31
Location where screening can be done .... _____	32
Types of services available .... _____	33
Availability of transportation .... _____	34
Which clinics are appropriate for which children .... _____	35
Other (Specify: _____) _____	36
Other (Specify: _____) _____	37

37

8. What information is obtained from individuals who make inquiries about preschool child find activities? **Please attach copies of the forms used to record this information.**

Answer Choices:

1=This information is obtained.
2=This information is not obtained.

Inquirer's area of concern	_____	38
Child's developmental landmarks	_____	39
Child's medical history	_____	40
Mother's conditions during pregnancy	_____	41
Current vision skills/behavior	_____	42
Current hearing skills/behavior	_____	43
Current speech and language skills	_____	44
Current motor skills	_____	45
Current self-help skills	_____	46
Current health status	_____	47
Other (Specify: _____)	_____	48
Other (Specify: _____)	_____	49

9. How is the information that you noted in Question 8 used?

Answer Choices:

1=Information is used in this manner.
2=Information is not used in this manner.

Testers review information prior to testing child	_____	50
Information is referred to during staffing after child is screened	_____	51
Information is compiled to obtain descriptive information on types of inquiries made	_____	52
Information is shared with other departments/staff within the school system upon request for information on a certain child	_____	53
Information used to refer family to an appropriate diagnostic agency	_____	54
Other (Specify: _____)	_____	55
Other (Specify: _____)	_____	56

10. How long is this information maintained? Select one of the answer choices below to indicate the amount of time that this information is kept on file .... _____   57

Answer Choices:

1=Less than 6 months
2=6 months to 1 year
3=Between 1 and 2 years
4=Information is maintained for an unlimited amount of time.

11. Who has access to this information other than child find staff?

Answer Choices:

1=Has access.
2=Does not have access.

Placement office personnel .... _____   58

Private psychologists .... _____   59

Health Department personnel .... _____   60

Personnel at child's future placement .... _____   61

Other school system personnel (Specify: _____) _____   62

Other (Specify: _____) _____   63

12. Do you use any of the following criteria to determine if your child find efforts were successful?

Answer Choices:

1=Criterion used.
2=Criterion not used.

Number of inquiries made after a campaign (Specify number set as criterion: _____) .. _____   64

Number of inquiries made during the school year (Specify number set as
criterion:_____) .... _____   65

Number of children scheduled for subsequent screening clinic (Specify number set as
criterion:_____) .... _____   66

Number of children and parents who actually show up for screening clinics (Specify
number:_____) .... _____   67

Other (Specify: _____) _____   68

13. Under what conditions is a follow-up conducted to determine whether an inquirer followed
the recommendations given to them .... _____ 69

Answer Choices:

1=Inquirers are routinely contacted shortly after their initial
call.
2=Inquirers are contacted if forms they were to complete
were not received or were incomplete.
3=Inquirers are contacted only if the individual whom the
inquirer was to contact informs the child find staff that the
contact was not made.
4=Generally inquirers are not contacted to see if they
followed recommendations.
5=Other (Specify: _____)

This concludes this questionnaire. Thank you.

BEST COPY AVAILABLE

40

School districts are responsible for identifying preschool children who may have special educational needs. One aspect of this responsibility is to make the community aware of the fact that the school district tests preschool children to determine if they have a handicap.

Directions: This questionnaire has two parts. Part I is designed to find out if parents or guardians of kindergarten-aged children are aware of the school district's activities to locate and serve preschool children with special needs. Part II of the questionnaire is designed to collect descriptive information on the families of kindergarten children to determine whether or not certain groups of parents/guardians are aware of these preschool child find activities.

Answer choices have been provided for most of the questions. Each answer choice has a number in front of it. To answer each question, write the number of the answer choice in the space to the right of each question or statement.

Do not write your name anywhere on this questionnaire.

Example:

How long have you lived in Montgomery County? In the space to the right write the number of one of the answer choices below . . . . __2__

Answer Choices:

1=The past 5 years or longer
2=The past 4 years
3=The past 3 years

An answer of "2" to this question means that the parent lived in Montgomery County for the past 4 years.

Thank you for your help.

41

CHILD FIND COMMUNITY AWARENESS
Parent Questionnaire

Part I—Child Find Community Awareness

1. What is the name of the school your child will attend in September?

_____

2. How long have you lived in Montgomery County? In the space to the right, write the number of one of the answer choices below .... _____   8

Answer Choices:

1=The past 5 years or longer
2=The past 4 years
3=The past 3 years
4=The past 2 years
5=The past year
6=Less than the past year

3. Were you aware that the public school system provides services to handicapped preschoolers? _____   9

Answer Choices:

1=Yes—Go to Question 4
2=No—Go to PART II

4. List below any activities or services that you know are offered by the school district for handicapped preschoolers.

_____

_____

_____

_____

5. How did you find out about the activities you listed in Question 4? **Check all that apply.**

Posters in public places .... _____	10
Pamphlets/brochures distributed in public places .... _____	11
Radio advertisements .... _____	12
TV advertisements .... _____	13
Pediatrician .... _____	14
Staff at a children's hospital .... _____	15
Newspaper .... _____	16
Staff at a private school .... _____	17
Friend .... _____	18
School district employee .... _____	19
Other (Specify: _____) _____	20

42

6. Did you ever contact an office in the school district to discuss concerns you might have had about your child who is about to enter Kindergarten? .... _____ 21

<div align="center">

Answer Choices:

1=Yes—Go to Question 7
2=No—Go to PART II

</div>

7. What was the name of this office? .... _____ 22-23

8. When you contacted this office about concerns you might have had regarding your child, what happened? Please read each answer choice very carefully before selecting the one that most accurately answers this question for you. In the space provided, write the number of one of the answer choices below .... _____ 24

Answer Choices:

1=I was given general information about the services offered by the school district.
2=I was told to call another office within the school district which was able to give me the information I needed.
3=I was told that my child did not need to be tested because my concerns did not suggest any serious problem.
4=Plans were made to have my child screened, but the screening was never done.
5=My child was tested, but after this testing I was told that my child did not need more testing or special education services.
6=My child was tested, and I was told that more testing was needed; but these tests showed that my child did not need to go a special education program.
7=My child was tested; more testing was needed and these tests showed that my child needed to go to a special education program.

<div align="center">

BEST COPY AVAILABLE

43

</div>

Part II—Family Information

To answer each question write one of the answer choice numbers in the space to the right.

1. Which parents/guardians live with the child entering kindergarten .... _____ 26

Answer Choices

1=Male parent/guardian
2=Female parent/guardian
3=Both male and female parents/guardians

2. Indicate parent(s)/guardian(s) employment:

        a. Male .... _____ 27

        b. Female .... _____ 28

Answer Choices

1=Employed
2=Unemployed
3=This parent/guardian is not living with child.

3. To what ethnic or racial group does the child belong? .... _____ 29

Answer Choices

1=American Indian or Alaskan native
2=Asian/Pacific Islander
3=Black (Not of Hispanic origin)
4=White (Not of Hispanic origin)
5=Hispanic
6=Other (Specify: _____)

4. Is English the primary language used in the home? .... _____ 30

Answer Choices

1=Yes
2=No

5. Indicate the family's annual income .... _____ 31

Answer Choices

1=Less than $10,000
2=$10,000 to $19,999
3=$20,000 to $29,999
4=$30,000 to $39,999
5=$40,000 to $49,999
6=$50,000 to $59,999
7=$60,000 or greater

6. Indicate the highest level of education obtained by parent(s)/guardian(s):

        a. Male .... _____ 32

        b. Female .... _____ 33

Answer Choices

1=Less than high school
2=Some high school; did not graduate
3=High school graduate
4=1—3 years of college
5=College graduate
6=Master's degree
7=Doctoral or advanced professional degree
8=This parent/guardian is not living with child.

44

School District Name: _____

Respondent's Name: _____

Respondent's Title: _____

The purpose of this questionnaire is to collect information regarding procedures used by your school district to conduct screening of preschool children. Screening is a procedure in which children are identified who may need further testing to determine if they require special educational services. Usually children are identified through the use of an assessment instrument that yields a global picture of the child's ability in several areas such as gross and fine motor, speech and language, cognition, emotional and self-help skills. If this testing suggests that the child may be deficit in some area, further testing is done to diagnose exactly what the child's needs are. The term screening as it is used in this questionnaire only refers to the testing which "flags" a child as possibly having a handicapping condition, not the testing that is done to diagnose the child's specific problem.

Directions: This questionnaire is divided into five sections. Section A asks questions about screening procedures; Section B focuses on screening assessment instruments. Section C requests information on recommendations made as a result of screening and Section D consists of specific questions on the type of child data that is collected as a result of screening. Finally, Section E asks for information on how screening results are explained to parents.

Several different types of questions are asked. In some you will need to respond by indicating the percentage of children that fall into certain categories. In others you will be asked to indicate as many answer choices that are applicable to your school district. Other questions will ask you to write out your response.

If there are some questions which you cannot answer, please discuss them with a member of your staff who may be more familiar with the type of information requested.

Use the reverse side of this page to clarify any of your answers.

Example:

During this school year (19__-19__), how many preschool children were screened
(i.e., tested in some manner) by school district personnel to determine if they might
have a handicapping condition .... __62__

This respondent indicated that 62 preschool children were screened for some type of handicapping condition during the 1983-1984 school year.

Thank you for your help.

45

CHILD FIND SCREENING PROCESS
Preschool Child Find Director Questionnaire

A. Screening Procedures

1. What is the estimated number of preschool children (ages __ to __) in your school district? Record your answer in the space to the right. .... _____   9-11

2. During this school year (19__-19__), how may preschool children were screened (i.e., tested in some manner) by school district personnel to determine if they might have a handicapping condition? .... _____   12-14

3. Of the preschool children who were screened, what percentage were: [If your answer is 100%, write 99 in the space next to your answer.]

   a. identified as not requiring special education services? .... _____ % 15-16

   b. identified as needing special education services? .... _____ % 17-18

   c. provided special education services? .... _____ % 19-20

4. What percentage of the preschool children indicated in Question 2 were screened in the following manner? Record your answers in the space to the right of each statement. [If your answer is 100%, write 99 in the space.]

   a. At an individual screening session with school district personnel .... _____ % 21-22

   b. During screening clinics conducted by school district personnel .... _____ % 23-24

   c. Other (Specify: _____
      _____) _____ % 25-26

> If your school district conducts screening clinics during which several preschoolers are tested, please continue to question 5.
>
> If your school district does not conduct screening clinics during which several preschoolers are tested, please go to section B.

5. How many times during the school year were screening clinics conducted? .... _____   27-28

6. How many of the screening clinics conducted this year were scheduled in the following way?

   a. Times for screening clinics were established prior to beginning of school year ...... _____   29-30

   b. Clinics were scheduled after a certain number of inquiries were made that required screening .... _____   31-32

   c. Times for clinics were established prior to the beginning of the school year; however, when more were needed due to unexpected requests, additional clinics were held .... _____   33-34

BEST COPY AVAILABLE

46

7. Where are screening clinics located? .... _____ 35

Answer Choices:

1=Clinics are held at a central location in the school district.
2=Clinics are dispersed throughout the school district.
3=Other (Specify: _____)

If your answer was "1," go to question 9.
If your answer was "2" or "3," go to question 8.

8. At how many different locations were screening clinics held? .... _____ 36-37

9. Is transportation provided or made available if needed for parent and child to attend
   screening clinics? .... _____ 38

Answer Choices:

1=Yes
2=No

10. What is the parent's role during the screening clinic?

Answer Choices:

1=Yes, this occurs.
2=No, this does not occur.

a. They provide background information on the child .... _____ 39

b. They are observed playing with the child .... _____ 40

c. They accompany the child throughout the testing session .... _____ 41

d. Other (Specify: _____
   _____) _____ % 42

11. On the average, how many individuals actually work at the preschool child find screening
    clinics? .... _____ 43-44

12. What percentage of the personnel who participate in screening clinics are: [Use 99 to indicate 100%.]

a. Child Find staff? .... _____ % 45-46

b. School district personnel from public programs serving handicapped preschoolers? . _____ % 47-48

c. School district personnel from supportive services (speech, vision, etc.)? .... _____ % 49-50

d. School psychologists? .... _____ % 51-52

e. Staff from public programs serving school-aged handicapped children? .... _____ % 53-54

f. Staff from private programs serving handicapped preschoolers? .... _____ % 55-56

g. Staff from private programs serving school-aged handicapped children? .... _____ % 57-58

h. Community volunteers? .... _____ % 59-60

i. Health Department personnel? .... _____ % 61-62

j. Other (Specify: _____
   _____) _____ % 63-64

13. What statement best describes the training provided to testers who work at the screening clinics? .... _____ 65

        Answer Choices:

        1=In-service training program is provided which all testers must attend.
        2=Testers are given manuals to review prior to screening clinics.
        3=Testers are given no additional training as to how to administer test; no training needed.
        4=Testers are given no additional training as to how to administer test, but training would be helpful.
        5=Other (Specify: _____

        _____)

B. Screening Assessment Instruments

1. Please complete the chart below by answering the following questions:

    a. In Column A, list the screening instruments used most frequently with preschool children in your school district. Space has been provided for a maximum of five tests.

    b. In Column B, indicate which tests are used during screening clinics by writing the number of one of the answer choices below next to each test listed.

        Answer Choices:

        1=Test is used during screening clinics
        2=Test is not used during screening clinics

    c. Indicate in Column C how each instrument was selected for use. Write the number of one of the following answer choices in Column C across from each test.

        Answer Choices:

        1=Instrument has always been used in school district; I do not know specific history.
        2=Child Find staff selected test.
        3=Instrument recommended by other department/staff within school district.
        4=Instrument recommended by consultant external to school district.
        5=Other (Specify in table.)

Duplicate columns 1-7

              2   8

A. Test Name	B. Used at Clinic(s)	C. Selection Method	
1. _____	_____	_____	9-10
2. _____	_____	_____	11-12
3. _____	_____	_____	13-14
4. _____	_____	_____	15-16
5. _____	_____	_____	17-18

2. For preschool screening, what percentage of the children tested were: [Use 99 to indicate 100%.]

   a. Given only one test? .... _____ % 19-20

   b. Given a battery of tests covering a variety of skill areas? .... _____ % 21-22

   c. Tested on specific skill areas using one or more tests? .... _____ % 23-24

3. Whether one test or a battery of tests is used, how is it determined which skill areas will be tested? Indicate the percentage of children this school year for whom this decision was made in each of the following ways: [Use 99 to indicate 100%.]

   a. Areas to be assessed were decided on the basis of initial intake information about the child .... _____ % 25-26

   b. All children were tested in the same skill areas .... _____ % 27-28

   c. Other (Specify: _____

   _____ _____ % 29-30

C. Recommendations from Screening

1. Please list the various recommendations that can be made for children who have undergone the child find screening process in your school district? If more space is needed, please write the remaining recommendations on another paper and attach to completed questionnaire.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

   f. _____

   g. _____

   h. _____

   i. _____

   j. _____

2. What factors (e.g., child's strengths/weaknesses, transportation, available program openings, etc.) are taken into consideration when recommendations for a preschool child are being formulated? Space is provided below for you to list a maximum of five factors. **Please list in order of importance.**

Office Use

a. _____ _____ 31-32

b. _____ _____ 33-34

c. _____ _____ 35-36

d. _____ _____ 37-38

e. _____ _____ 39-40

3. Are there written guidelines for making recommendations on the basis of screening results? .... _____ 41

       Answer Choices:

       1=Yes
       2=No

       If your answer was "Yes," please attach a copy of the guidelines to this questionnaire.

4. Under what condition is a follow-up conducted to determine whether parents followed the recommendations given to them after their child was screened. Indicate the percentage of parents who were later contacted in the following ways after their child was screened: [Use 99 to indicate 100%.]

   a. No contact made to see if they followed recommendations .... _____% 42-43

   b. Contacted only if the individual whom the parent was to contact informs the child find staff that the contact was not made .... _____% 44-45

   c. Contacted if forms parents were to complete were not received or were incomplete . _____% 46-47

   d. Routinely contacted shortly after screening .... _____% 48-49

5. In what ways does the child find staff assist parents in following through with recommendations resulting from the screening clinic? Indicate the percentage of parents (whose children were screened this year) who were helped in the following ways: [Use 99 to indicate 100%.]

   a. No assistance was given to parents to ensure follow through on recommendations .. _____% 50-51

   b. Staff made arrangements for the additional testing recommended .... _____% 52-53

   c. Staff contacted placement office for parents and scheduled needed meeting(s) ..... _____% 54-55

   d. Staff helped parents gather and complete necessary forms for "next steps." .... _____% 56-57

   e. Staff arranged for parents to visit programs .... _____% 58-59

   f. Other (Specify: _____

       _____) _____% 60-61

50

6. Please estimate the percentage of parents who do not follow through on child find screening recommendations .... _____ % 62-63

<u>3</u>   8

3 8

D. Child Data

  · 1. What information is maintained on a child after screening?

Answer Choices:

1=This information is maintained.
2=This information is not maintained.

a. Intake information .... _____   9

b. Test data .... _____   10

c. Recommendations of testers .... _____   11

d. Other (Specify: _____)
   _____ _____   12

2. How is this information used?

Answer Choices:

1=Yes, information is used in this manner.
2=No, information is not used in this manner.

a. Information is incorporated into student files for those children placed in a special
   education program or service .... _____   13

b. Information is maintained by child find office but it is accessible by teachers or other
   school staff when the child becomes school age .... _____   14

c. Information is incorporated into student files when child becomes school age .... _____   15

d. As a high risk registry to be checked as these children become school age .... _____   16

e. For evaluation of child find activities .... _____   17

f. Test data is maintained in one location but has not been used for any particular
   purpose .... _____   18

g. Other (Specify: _____)
   _____ _____   19

51

3. How long is this information maintained? .... _____

Answer Choices:

1=Less than 6 months
2=6 months to 1 year
3=Between 1 to 2 years
4=Information is maintained for an unlimited amount of time.

E. Explaining Test Results To Parents

1. When are screening results explained to parents? Indicate the percentage of parents whose children were screened this year who were told about the screening results at each of the following times: [Percentages should total approximately 100%; use 99 to indicate 100%.]

   a. Immediately after the screening .... _____ % 21-22

   b. Within 1 week after screening .... _____ % 23-24

   c. Within 2 weeks after screening .... _____ % 25-26

   d. Within 3 weeks after screening .... _____ % 27-28

   e. Within 4 weeks after screening .... _____ % 29-30

   f. Greater than 4 weeks after screening .... _____ % 31-32

   Total=100%

2. How are screening results explained to parents? Of the children screened this year, what percentage of their parents had screening results explained in each of the following ways: [Percentages need not add to 100%; use 99 to indicate 100%.]

   a. By mail .... _____ % 33-34

   b By phone .... _____ % 35-36

   c. Meeting with one representative of child find .... _____ % 37-38

   d. Meeting with all or most of the staff who tested the child .... _____ % 39-40

   c. Other (Specify: _____)

   _____ _____ % 41-42

52

Preschool Evaluation Project
Montgomery County Public Schools
Rockville, Maryland

CHILD FIND SCREENING PROCESS
DEMOGRAPHICS/SATISFACTION RATING
Parent Questionnaire

It is the school district's responsibility to identify children in need of special education regardless of their race, socio-economic status, location within the county, etc. By answering this questionnaire you will help us to determine if there is a particular group within the county that has not participated in the screening process. We also are interested in your suggestions on how the screening process could be improved.

Directions: This questionnaire is divided into two parts. PART I asks you to indicate some personal characteristics of your family. You may complete Part I as soon as your child's testing begins.

PART II of the questionnaire asks for your comments on how satisfied you were with the screening process. This information will help determine in what areas the screening process might be improved. Read through the questions in Part II to become familiar with them when your child first leaves to be tested. Do not complete Part II, however, until your child has completed the screening.

Most questions have a set of answer choices provided and each answer choice has a number in front of it. To answer each question, write the number of the answer choice you selected in the space to the right of each item.

Do not write your name anywhere on this questionnaire.

Example:

1. Which parents/guardians live with the child being screened? . . . . __1__

Answer Choices:

1=Male parent/guardian
2=Female parent/guardian
3=Both male and female parents/guardians

An answer of "1" to this question means that only the male parent/guardian is living with the child.

When you have completed the questionnaire, please seal it in the attached envelope and return it to someone at the registration desk.

Thank you for your help.

MCPS 125-9933C. revised 5/83

Part I: Family Information

To answer each question write one of the answer choice numbers in the space to the right.

1. Which parents/guardians live with the child being screened? .... _____   6

   Answer Choices:

   1=Male parent/guardian
   2=Female parents/guardians
   3=Both male and female parents/guardians

2. Indicate parent(s)/guardian(s) employment: a. Male .... _____   7

                                              b. Female .... _____   8

   Answer Choices:

   1=Employed
   2=Unemployed
   3=Not applicable

3. Enter zip code .... _____   9-13

4. To what ethnic or racial group does the child belong? .... _____   14

   Answer Choices:

   1=American Indian or Alaskan native
   2=Asian/Pacific Islander
   3=Black (Not of Hispanic origin)
   4=White (Not of Hispanic origin)
   5=Hispanic
   6=Other (Specify: _____)

5. Is English the primary language used in the home? .... _____   15

   Answer Choices:

   1=Yes
   2=No

6. Indicate the family's annual income .... _____   16

   Answer Choices:

   1=Less than $10,000
   2=$10,000 to $19,999
   3=$20,000 to $29,999
   4=$30,000 to $39,999
   5=$40,000 to $49,999
   6=$50,000 to $59,999
   7=$60,000 or greater

BEST COPY AVAILABLE

54

7. Indicate the highest level of education obtained by parent(s)/guardian(s):

a. Male .... _____ 17

b. Female .... _____ 1

Answer Choices:

1=Less than high school
2=Some high school; did not graduate
3=High school graduate
4=1—3 years of college
5=College graduate
6=Master's degree
7=Doctoral or advanced professional degree
8=Not applicable

BEST COPY AVAILABLE

55

Part II—Satisfaction with Screening Clinic

1. Did any of the following events occur during your child's screening? Write the number of one of the answer choices given below in the spaces to the right of each question.

Answer Choices:

1=Yes
2=No

a. Were you told what would happen during your child's screening? .... _____ 19

b. Were you given any written materials about child find activities? .... _____ 20

c. Were you encouraged to ask questions or discuss your concerns? .... _____ 21

d. Did the screening process appear rushed? .... _____ 22

e. Did the screening process appear disorganized? .... _____ 23

f. Did the staff work well with your child? .... _____ 24

g. Were you told how your child did on the screening tests .... _____ 25

2. All things considered, how satisfied were you with the manner in which the screening was conducted? Please write the number of one of the answer choices below in the space to the right .... _____ 26

Answer Choices:

1=Very satisfied
2=Satisfied
3=Neither satisfied, nor dissatisfied
4=Dissatisfied; needs some improvement
5=Very dissatisfied; needs much improvement

3. In what ways do you think the preschool child find screening process could be improved?

_____

_____

_____

_____

4. Other comments?

_____

_____

_____

_____

Preschool Evaluation Project
Montgomery County Public Schools
Rockville, Maryland

CHILD FIND SCREENING PROCESS
SUMMARY INTAKE INFORMATION
Record Review

Directions:

The purpose of this record review is to record information obtained by the Child Find Unit from individuals who make inquiries regarding concerns they may have about a child and the possible services that may be available. Record this information from Child Find forms and notes taken while interviewing individuals during their initial contact with the Child Find Unit. This form could also be used by Child Find staff in lieu of their intake forms.

Several ability areas are listed on the attached form. What follows are brief definitions of these areas.

Vision—refers to child's ability to clearly see and process visual stimuli.

Hearing—child's ability to hear and process auditory stimuli.

Cognitive—refers to skills related to the child's knowledge, ability to think, solve problems, follow directions, etc.

Expressive Language—refers to child's ability to speak, e.g., verbally make his/her needs known.

Receptive Language—refers to the child's ability to understand what is said to him/her.

Gross Motor—refers to skills involving use of large muscles where strength and coordination are involved such as in walking, jumping, throwing, catching, hopping, etc.

Fine Motor—refers to use of delicate muscles where precision is required, i.e., handwriting, copying figures, buttoning, block building, cutting.

Self-Help—refers to child's ability to do things for him/herself; includes such things as dressing skills, toileting skills, eating skills, etc.

Social/Emotional (Soc. Emo.)—refers to child's ability to function in an environment with or without a previously known individual, child's self-concept, ability to adjust to changes, and to interact effectively with others.

5'7

MCPS 125-9933a, revised 5/83

Form Code: 9 7 0   1-3   Date of Birth: ____ ____ ____   8-13

                                                           YR   MO   DA

Student ID: _____   Date of Inquiry: ____ ____ ____   14-19

                                                           YR   MO   DA

Sex: 1=Male .... ____   7
      2=Female   Age: ___._____ _____ _____ 23-24

1. Reason for inquiry: _____

_____

2. Areas of suspected delay or problem:

                              Answer Choices:

                              1=Yes
                              2=Borderline
                              3=No

Vision .... _____   25

Hearing .... _____   26

Expressive language .... _____   27

Receptive language .... _____   28

Gross motor .... _____   29

Fine motor .... _____   30

Self-help skills .... _____   31

Social/emotional behavior .... _____   32

Physical health .... _____   33

3. Any previous evaluation other than routine doctor visits? .... _____   34

                              Answer Choices:

                              1=Yes
                              2=No
                              3=Unknown

If "yes," indicate what type: _____

58

4. Presently enrolled in a program? .... _____ 35

Answer Choices:

1=Yes
2=No
3=Unknown

If answer is "yes," indicate where: _____

5. Number of siblings (record actual number): .... _____ 36-37

6. Birth order: .... _____ 38-39

7. Any sibling with diagnosed learning problems: .... _____ 40

Answer Choices:

1=Yes
2=No
3=Unknown
9=No Siblings

8. Referral/recommendations made to the inquirer?

_____

_____

_____

_____

Directions:

The purpose of this form is to collect information on the screening test results for preschool children assessed by the school district. The attached form can be completed by reviewing test protocols and/or test result summary forms developed by the Child Find Unit. To complete the form use the codes listed in the attached Code Booklet.

Several ability areas are listed on the attached form. What follows are brief definitions of these areas.

Vision—refers to child's ability to clearly see and process visual stimuli.

Hearing—child's ability to hear and process auditory stimuli.

Cognitive—refers to skills related to the child's knowledge, ability to think, solve problems, follow directions, etc.

Expressive Language (Ex. Lang.)—refers to child's ability to speak, e.g., verbally make his/her needs known.

Receptive Language (Rec. Lang.)—refers to the child's ability to understand what is said to him/her.

Gross Motor—refers to skills involving use of large muscles where strength and coordination are involved such as in walking, jumping, throwing, catching, hopping, etc.

Fine Motor—refers to use of delicate muscles where precision is required, i.e., handwriting, copying figures, buttoning, block building, cutting.

Self-Help—refers to child's ability to do things for him/herself; includes such things as dressing skills, toileting skills, eating skills, etc.

Social/Emotional (Soc. Emo.)—refers to child's ability to function in an environment with or without a previously known individual, child's self-concept, ability to adjust to changes, and to interact effectively with others.

CHILD FIND SCREENING PROCESS
SUMMARY OF SCREENING RESULTS
Record Review

Form Code: 971   1-3
Screening Data: _____ _____ _____

                                              YR   MO   DA   9-14
·   Birthdate: _____ _____ _____

                                              YR   MO   DA   15-20

1.	2.	3. Ability Areas												4.
ID	Age	Vision	Hear-ing	Cog-nitive	Ex Lang	Rec Lang	Gross motor	Fine motor	Self-Help	Soc Ems	Phys-ical	Other (specify)	Recommendations
		a b	a b	a b	a b	a b	a b	a b	a b	a b	a b	a b	
6-8	21-22	24 25	26 27	28 29	30 31	32 33	34 35	36 37	38 39	40 41	42 43	44 45	46-47 48-49 50-51

61

1. Identification Number (ID)

Assign each child who was screened a three-digit identification number.

2. Age

Calculate the child's age by subtracting his/her birthdate (YR MO DA) from the date of screening. Convert answer to months.

3. Ability Areas

a. Was area tested?
   1=Tested
   2=Not tested

b. Results
   1=Suspected problem
   2=Borderline problem
   3=No problem
   4=No determination possible

4. Recommendations

01=Comprehensive Evaluation
02=Educational/Diagnostic Testing
03=Observation/Consultative Call
04=Speech and Language Evaluation
05=OT Evaluation
06=PT Evaluation
07=Rescreening
08=Hearing Evaluation
09=Vision Evaluation
10=Admissions, Review and Dismissal Committee
11=Head Start
12=OK Letter to parents indicating child exhibits no delays or problems
13=Parent Education Course/Program
14=Regular Nursery School
15=Kindergarten Round-Up
16=Other (Specify on form)

COMPONENT: Child Find

_____

Special Notes on the Instruments

_____

SUBCOMPONENT: Administration

Child Find Administration, Special Education Director Questionnaire

Question 1. Card column numbers and a space to code responses have been provided in the right margin and are labeled for "Office Use." You will need to develop an identification number system for the various responses you obtain if you wish to enter this information into a computer. Chances are that the type of answers you will get will be rather unique to each respondent and you may find it easier to summarize the responses by hand the same as you would for an open-ended/free answer choice type question. Refer to Data Analysis and Summary in the Managing Data section.

Questions 6, 7, 8 and 9. If you are going to enter this information into a computer for analysis, be sure that you right justify the answers to this question. Refer to Data Processing in Managing Data.

Access to a computer is not needed to use this instrument.

*****

SUBCOMPONENT: Community Awareness

Child Find Community Awareness, Preschool Child Find Director Questionnaire

Question 2. If you use a computer, the answers to this question need to be right justified (refer Data Processing, in Managing Data).

Question 12. Since the responses for the criterion the respondents indicate will most likely be very different, it will probably be best to summarize these responses the same as you would for an open-ended/free answer choice type question. Refer to Data Analysis and Summary in the Managing Data section.

You do not need access to a computer to use this instrument.

Child Find Community Awareness, Parent Questionnaire

Before you use this questionnaire you will need to decide whom would be the most appropriate respondents for you to administered it to. When we piloted the questionnaire we attended special visiting days that different schools set aside for parents whose children would be attending kindergarten for the first time and asked those parents to complete the questionnaire. We felt that these parents would give us some sense of how aware parents of preschoolers might be about the activities and services available should their preschooler have a learning problem.

Please note that respondents are specifically requested not to write their name on this questionnaire. Should you need this information for whatever reason, you will need to add a place for the respondents to report this.

You do not need a computer to use this instrument.

*****

SUBCOMPONENT: Screening Process

Child Find Screening Process, Preschool Child Find Director Questionnaire

This questionnaire has been set up to have the data entered on computer cards. A card has 80 columns on which information can be coded. Since this questionnaire requires more information than one card can hold, card column numbers have been assigned that allows the information to be coded onto three cards. You will notice in two places on this questionnaire that the keypuncher is instructed to duplicate columns 1 through 7, the number coded into column 8 is the card or record number, so that you can tell the computer where to find the information you want, i.e., if it is on card 1, 2 or 3.

Questions A 1-6, 8, 11 and 12; B 2 and 3; C 4-6; E 1 and 2. Responses to these questions need to be right justified. Refer to Data Processing in Managing Data.

Part B, Question 1. Card columns are designated for responses to Parts b and c of this question. Answers to Part b can be entered into columns 9, 11, 13, 15 and 17; answers to Part c can be entered into columns 10, 12, 14, 16 and 18. Responses to Part a need to be hand-tallied or summarized as you would any open-ended question (refer Data Analysis and Summary, in Managing Data section.

Part C, Question 2. Card column numbers and a space to code responses have been provided in the right margin and are labeled for "Office Use." You will need to develop an identification number for the various responses you obtain if you wish to enter this information into a computer. Chances are that the type of answers you will get will be rather unique to each respondent and you may find it easier to summarize the responses by hand the same as you would for an open-ended/free answer choice type question. Refer to Data Analysis and Summary in the Managing Data section.

You do not need to use a computer to use this instrument.

Child Find Screening Process, Demographics/Satisfaction Rating, Parent Questionnaire

Note that the direction sheet instructs the respondent to return the completed questionnaire to the registration desk. You may want to change this instruction if it is not applicable to your use.

You do not need access to a computer to use this instrument.

Child Find Screening Process, Summary Intake Information, Record Reveiw

This questionnaire can be used by child find staff as their intake form or it can be used to review and summarize the intake information the child find staff obtains during an intake or initial contact with their office using their own forms.

Question 2. If the form is to be used as an intake form, you can use the dotted lines in this question to write specific comments on each ability area.

Questions 5 and 6. If you are using a computer, the answers to these questions need to be right justified (refer to Data Processing in Managing Data).

Access to a computer is not necessary to use this instrument.

Child Find Screening Process, Summary of Screening Results, Record Review

You do not need access to a computer to use this instrument.

COMPONENT: Assessment Process
             Description of Subcomponents
             Chart of Data Collection Instruments
             Evaluation Study Questions
             When to Use the Data Collection Instruments
             Data Collection Instruments
             Special Notes on the Instruments

COMPONENT: Assessment Process

Description of Subcomponents

The **Preplacement Assessment** subcomponent examines the testing of the child that occurs prior to a placement decision being made. This testing is generally done to determine if a child has a handicapping condition and, if one exists, what the extent of that condition may be.

*****

The **Postplacement Assessment** subcomponent focuses on the nature and type of testing given to a child once he/she has been placed in a special educational program.

COMPONENT: Assessment Process

	Instruments	
	Subcomponents	
	Preplacement Assessment	Postplacement Assessment
Program Director Questionnaire	X	
Staff Questionnaire	X	X
Parent Questionnaire	X	
Agency/Organization Questionnaire	X	
Record Review	X	X

COMPONENT: **Assessment Process**
SUBCOMPONENT: **Preplacement Assessment**

Evaluation Study Questions

Question	Instrument

Question   Instrument

1. Do programs generally receive pre-placement assessment information on their new enrollees?

  Preplacement Assessment, Program Director/Coordinator and Staff Questionnaires

2. When is preplacement assessment information typically received by programs?

  Preplacement Assessment, Program Director/Coordinator and Staff Questionnaires

3. From what type of agency/program/department do programs typically receive preplacement assessment information?

  Preplacement Assessment, Program Director/Coordinator and Parent Questionnaires

4. In what form do programs routinely receive preplacement assessment information?

  Preplacement Assessment, Program Director/Coordinator Questionnaire

5. Do program staff explain preplacement information to parents?

  Preplacement Assessment, Program Director/Coordinator Questionnaire

6. How useful are various types of preplacement assessment information to various program staff?

  Preplacement Assessment, Staff Questionnaire

7. What suggestions to program staff have that could make preplacement assessment information more useful?

  Preplacement Assessment, Staff Questionnaire

8. Which preplacement assessment agencies did parents like to deal with best/least?

  Preplacement Assessment, Parent Questionnaire

9. With respect to agencies that parents designated as best and least liked:
   a. how were test results explained,
   b. how were parents referred,
   c. how satisfied were parents with the manner in which they were treated?

  Preplacement Assessment, Parent Questionnaire

Question	Instrument
10. How much time passed between the various stages of the preplacement testing process?	Preplacement Assessment, Parent Questionnaire
11. With respect to the preplacement assessment reports: a. where are they located, b. when were they done, c. what agency did them, d. how was the child referred to the agency, e. what developmental areas were assessed, f. what tests were used, g. what was the child's primary diagnosis/disability, educational services needed, recommendations for placement in a program?	Preplacement Assessment, Record Review

70

3-2-8

COMPONENT: Assessment Process
SUBCOMPONENT: Postplacement Assessment

Evaluation Study Questions

Question	Instrument
1. How many new enrollees are assessed within one month of their enrollment by program staff?	Postplacement Assessment, Staff Questionnaire
2. What type of tests are typically used by program staff?	Postplacement Assessment, Staff Questionnaire and Record Review
3. What developmental areas are typically assessed by program staff?	Postplacement Assessment, Staff Questionnaire and Record Review
4. Are postplacement test results explained to parents? If so, in what manner are they explained?	Postplacement Assessment, Staff Questionnaire
5. Where are postplacement assessment reports filed?	Postplacement Assessment, Record Review
6. Which tests are used by program staff for postplacement assessments?	Postplacement Assessment, Record Review

---

71

COMPONENT: **Assessment Process**

When to Use the Instruments

SUBCOMPONENT: **Preplacement Assessment**

Instrument	When to Use
Preplacement Assessment, Director Questionnaire	Toward the end of the school year.
Preplacement Assessment, Staff Questionnaire	Toward the end of the school year.
Preplacement Assessment, Parent Questionnaire	At the child's entry to a program.
Preplacement Assessment, Agency/ Organization Questionnaire	Any time you feel appropriate.
Preplacement Assessment, Record Review	When the child first enters a program or at any time during the school year.

*****

SUBCOMPONENT: **Postplacement Assessment**

Instrument	When to Use
Postplacement Assessment, Staff Questionnaire	Toward the end of the school year.
Postplacement Assessment, Record Review	Mid-year or toward the end of the school year.

72

COMPONENT: Assessment Process

Data Collection Instruments

73

Preschool Evaluation Project Montgomery County Public Schools Rockville, Maryland	PREPLACEMENT ASSESSMENT Program Director/Coordinator Questionnaire

Name of Person Completing Form: _____

This questionnaire focuses on assessment information that accompanies preschool handicapped children to an educational program. This type of assessment information will be referred to as preplacement assessment information. Preplacement assessmer. takes place before a county placement meeting; it is generally done to determine if a child has a handicapping condition and, if one exists, what the extent of that condition may be. Reports of a child's educational, developmental, or medical history obtained prior to the placement decision are to be considered part of preplacement assessment. Assessments which are performed as part of a diagnostic placement are *not* to be considered part of preplacement assessment.

Directions: Some questions will ask you to indicate the approximate number of children that fall into given categories. In some instances, you will be asked to select an answer from a list of several choices by writing the number which corresponds to your selection in a space next to each question.

Example:

By what point in time had you received preplacement assessment information on approximately 75% of your new enrollees. Write the number of your answer choice in the space to the right .... __3__

Answer Choices:

1=Before the placement decision
2=After the placement decision and before child's entry into program
3=Sometime between entry and two weeks after entry
4=Between two to four weeks after entry
5=More than one month after entry
6=Never

The "3" written in the space to the right indicates that for at least (75%) of the new enrollees you have received preplacement assessment information by sometime between this entry and two weeks after their entry.

If there are some questions which you cannot answer, please discuss them with any member of your staff or give the questionnaire to that staff person to answer.

Use the reverse side of this page to clarify any of your answer choices.

Your responses will be coded to an identification number (ID). All responses will be kept strictly confidential. Only the evaluation staff will have access to the key which links names to IDs.

PREPLACEMENT ASSESSMENT
Program Director/Coordinator Questionnaire

Program Name: _____

Job Title of Person Completing Questionnaire: _____

1. During this school year how many children have been placed in your program as their first special educational placement? Count only those children for whom placement in your program was their first special educational placement even if they are not currently enrolled. (Record your answer as follows: If your answer is 12, write 12 in the space; if your answer is 9, write 9 in the space.) .... _____ 14-16

2. How many of the above children had preplacement assessment in mation:

   a. Completed by some agency external to your program? .... _____ 17-19

   b. Completed by your program? .... _____ 20-22

        IF YOU ANSWERED "0" TO QUESTION 2.a., STOP HERE; YOU HAVE COMPLETED THIS QUESTIONNAIRE. THANK YOU FOR YOUR TIME.

        ALL REMAINING QUESTIONS REFER ONLY TO THOSE CHILDREN FOR WHOM YOU HAVE RECEIVED PREPLACEMENT ASSESSMENT INFORMATION FROM ANOTHER SOURCE DURING THIS SCHOOL YEAR.

3. By what point in time had you received preplacement assessment information on approximately 75% of your new enrollees (refer to Question 2.a.)? Write the number of your answer choice in the space to the right .... _____ 23

        Answer Choices:

        1=Before the placement decision*
        2=After the placement decision and before child's entry into program*
        3=Sometime between entry and two weeks after entry
        4=Two to four weeks after entry
        5=More than one month after entry
        6=Never

4. For approximately how many new enrollees (refer to Question 2.a.) did you receive any information routinely, that is, without specifically requesting it? .... _____ 24-26

75

5. Did you receive preplacement information on most (75% or more) of your children from any of the following sources? Write a "1" (YES) next to all the sources from which you had received preplacement information on at least 75% of your children. Write a "2" (NO) next to all sources from which you received information on less than 75% of your children.

Parent .... _____ 27

Assessment Agency* .... _____ 28

Placement Office .... _____ 29

Private Physician/Pediatrician .... _____ 30

Private Diagnostician* .... _____ 31

Public School Program .... _____ 32

Other (Specify: _____) _____ 33

6. In what form did information for most (75% or more) of your new enrollees arrive at your program? .... _____ 34

Answer Choices:

1=In separate units from each different assessment agency
2=In one unit where all assessment results have been gathered, but without a summary of the information
3=In one unit where all assessment results have been gathered with a summary of the information included also
4=No one form applied to at least 75% of my children.
   (Please explain: _____ _____)

7. Which of the following usually occurred with the preplacement information for most (75% or more) of your new enrollees? .... _____ 35

Answer Choices:

1=Information was routinely circulated to the child's teacher and then filed.
2=Information was routinely circulated to the child's teacher and supporting staff and then filed.
3=Information was not routinely circulated.
4=Other (Specify: _____ _____)
5=No one procedure occurred for at least 75% of my children.
   (Please explain: _____ _____)

8. When you received preplacement assessment information on your new enrollees this year from a source other than your program, for how many of these students did you or anyone on your staff explain the results to parents? .... _____ 36-38

IF THE ANSWER TO QUESTION 8 IS "0," STOP HERE; YOU HAVE COMPLETED THE QUESTIONNAIRE. THANK YOU FOR YOUR HELP.

9. For most (75% or more) of the students in Question 8 the preplacement assessment results were explained to parents by which of the following people? .... _____ 39

Answer Choices:

1=Program director
2=Child's teacher
3=Staff member assigned to parent contact work
4=Social worker
5=Support staff such as PT, OT, speech pathologist
6=Psychologist
7=Other
  (Specify: _____)
8=No one person explained results to at least 75% of my children's parents.
  (Please explain: _____)

10. For most (75% or more) of the students in Question 8 when did this explanation occur? .... _____ 40

Answer Choices:

1=Prior to the child's entry into your program
2=Within 30 days of entry
3=Within 60 days of entry
4=Later than 60 days after entry
5=None of these applied to at least 75% of my children
  (Please explain: _____)

THIS IS THE END OF THE QUESTIONNAIRE. THANK YOU FOR YOUR TIME.

*Definitions:

Before placement decision—The time period before a placement decision by a county Admission, Review, and Dismissal (ARD) Committee.

After the placement decision and before child's entry to program—A child's entry to a program occurs when the child begins attending the program on a regular basis with the understanding of continued attendance. If the child had previous contact with the program for the purpose of diagnosing a problem, program entry occurs when the provision of educational services begins.

Assessment Agency—Any organization where assessments are performed; the agency may or may not have a program associated with it.

Private Diagnostician—An individual not associated with publicly supported services whose role is to assess a child for the purpose of determining a child's level of functioning. The report of a private diagnostician can be used to determine if a child has a handicapping condition and the extent of the handicap.

Name of Person Completing Form: _____

This questionnaire focuses on the preplacement assessment process for preschool handicapped children. This process refers to the testing that is done before a county placement meeting. Preplacement assessment is done to determine if a child has a handicapping condition and, if one exists, what the extent of that condition may be. Reports of a child's educational, developmental, and medical history obtained prior to the placement decision are to be considered part of preplacement assessment. Assessments which are performed as part of a diagnostic placement *are not* to be considered part of preplacement assessment.

Directions: The format of the questions varies. Some questions will give you a set of possible answers and ask you to write in a space to the right of the question the number of children for whom each answer is appropriate. Other questions will ask you to rank order several items by placing numbers in each space next to the items. All questions refer only to preschool children in your classroom or in your service with this program.

Example:

Indicate the number of new enrollees for whom you have found preplacement assessment information to be very useful, useful, etc. Count children in only one category.

Very useful; the information made a significant contribution to my programming for child .... __2__

Useful; the information was helpful, but I needed more or I could only use a small part of it .... __11__

Not useful; the information provided little that was helpful to me in my work with the child .... __3__

The numbers recorded in the boxes to the right of the answer choices indicate that preplacement information was "very useful" for 2 new enrollees, "useful" for 11 new enrollees and 'not useful" for 3 new enrollees.

Please use the reverse side of this page to clarify any of your answers.

Your responses will be coded to an identification number (ID). All responses will be kept strictly confidential. Only the evaluation staff will have access to the key which links names to IDs.

PREPLACEMENT ASSESSMENT
Staff Questionnaire

Program Name: _____

Job Title of Person Completing Questionnaire: _____

1. a. During this school year, how many children have been enrolled in your classroom or service as their first special education program? In the spaces to the right record your response in the following manner: if your answer is 10, write 10; if your answer is 8, write 8 .... _____ 14-15

   b. Of the children in Question 1.a., for how many have you received or had access to preplacement assessment information?* Record your answer similarly to Question 1.a . _____ 16-17

IF YOU DID NOT HAVE ACCESS TO PREPLACEMENT ASSESSMENT DATA FOR ANY OF YOUR CHILDREN, STOP HERE: YOU HAVE COMPLETED THIS QUESTIONNAIRE. THANK YOU.

ALL THE REMAINING QUESTIONS REFER ONLY TO THOSE CHILDREN FOR WHOM YOU HAVE HAD ACCESS TO PREPLACEMENT ASSESSMENTS (QUESTION 1.b.).

2. For how many of those children indicated in Question 1.b. did you review preplacement assessment data? .... _____ 18-19

3. Of the children in Question 2 indicate the number for whom you have found preplacement assessment information to be very useful, useful, etc. Responses should add to the number you gave in Question 2.

    Very useful; the information made a significant contribution to my programming for the child .... _____ 20-21

    Useful; the information was helpful, but I needed more or I could only use a small part of it .... _____ 22-23

    Not useful; the information provided little that was helpful to me in my work with the child .... _____ 24-25

4. By which point in time had you received preplacement information on most (75% or more) of your new enrollees this year? Write the number of your answer choice in the space to the right .... _____ 26

Answer Choices:

1=Before the placement decision
2=After the placement decision and before child's entry into program
3=Sometime between entry and two weeks after entry
4=Between two to four weeks after entry
5=More than one month after entry
6=Never

5. In what ways is preplacement assessment information most useful to you? Please rank order the instances below according to when it is most useful to have preplacement information. Put a "1" in the space next to the most useful time, a "2" in the next useful. DO NOT USE THE SAME NUMBER MORE THAN ONCE.

For developing an IEP .... _____ 27

For determining the child's level of functioning upon his/her entry to the program .... _____ 28

For determining appropriate initial strategies .... _____ 29

For determining a child's progress such as at a review meeting .... _____ 30

For understanding family needs .... _____ 31

6. Which of following types of information did you receive on most (75% or more) of your new enrollees this year? Write a "1" next to the type of information that you received for 75% or more of your new enrollees; write a "2" next to the type of information that you received on less than 75% of your new enrollees.

Standardized tests* .... _____ 32

Developmental checklists* .... _____ 33

Developmental history .... _____ 34

Diagnostician's write-ups of behavior* .... _____ 35

Family background information .... _____ 36

Parent's observation of child's ability and behavior .... _____ 37

Physician's medical reports .... _____ 38

7. What kind of preplacement assessment information do you find most useful? Please rank order the following kinds of preplacement assessment information according to how useful each is to you. Put a "1" in the space next to the kind of assessment you find most useful, a "2" for the next useful. DO NOT USE THE SAME NUMBER MORE THAN ONCE.

Standardized tests* .... _____ 39

Developmental checklists .... _____ 40

Developmental history .... _____ 41

Diagnostician's write-ups of behavior* .... _____ 42

Family background information .... _____ 43

Parent's observation of child's ability and behavior .... _____ 44

Physician's medical reports .... _____ 45

8. Other than what is listed in Question 7, what type of preplacement assessment information would you like to have on a child upon entry into your classroom or service?

_____

_____

_____

_____

9. How can preplacement assessment information be made more useful to you?

_____

_____

_____

_____

THIS CONCLUDES THIS QUESTIONNAIRE. THANK YOU.

*Definitions

Preplacement assessment information-Results of testing done prior to a school district placement meeting.

Before the placement decision-The time period before a placement decision is made by a county Admission, Review, and Dismissal (ARD) Committee.

After the placement decision and before child's entry into program-A child's entry to a program occurs when the child begins attending the program on a regular basis with the understanding of continued attendance. If the child had previous contact with the program for the purpose of diagnosing a problem, program entry occurs when the provision of educational services begins.

Standardized Tests-Instruments for assessing child's level of functioning as measured against the performance of a larger population of children; test administration is very controlled (i.e., specific directions need to be followed) and is conducted by trained personnel.

Developmental Checklists-An observational tool for determining the presence of developmentally appropriate behaviors in children; may be written by staff members or may be a form developed by an outside source.

Diagnostician's write-ups of behavior-A descriptive summary of a child's performance during an assessment.

Parent's Name: _____   _____

Before the school district could place your child in an education program your child needed to be tested. These tests often involved measuring your child's educational, developmental, or physical ability. Where and how this testing was done is different for each child. This questionnaire will ask you questions about the tests your child was given before the school district representatives at the Admissions, Review, and Dismissal (ARD) Committee meeting* decided if your child needed special education.

Directions: To answer some of the questions you will be asked to select your response from a set of answer choices. Some questions will ask you to write a checkmark (✓) in the boxes. For those questions in which lines are written, you are to write out your answer.

Example:

Answer Choices:

1=Department within the County School System
2=County Health Department
3=Hospital (Specify: __*Johns Hopkins*_____)
4=Private Assessment Agency/Education Program
  (Specify: _____)
5=Private Physician _____
6=Other (Specify: _____)
7=Other (Specify: _____)

What agencies tested (educationally or physically) your child before the Admissions Review and Dismissal meeting*? Write the number(s) of the agency(ies) that tested your child in the spaces below. Use as many spaces as you need.

Agency I	Agency II	Agency III	Agency IV	Agency V
2	3	_____	_____	_____

The answers written in the example indicate that the child was tested before his or her placement meeting. The numbers of the answer choices show that the child was tested at the County Health Department (2) and Johns Hopkins Hospital (3).

82

PRE-LACEMENT ASSESSMENT
Parent Questionnaire

Name of Your Child's Program: _____

· 1. Use the answer choices listed to answer Questions a, b, and c.

Answer Choices:

1=Department within the County School System
2=County Health Department
3=Hospital (Specify: _____)
4=Private Assessment Agency/Education Program
    (Specify: _____)
5=Private Physician _____
6=Other (Specify: _____)
7=Other (Specify: _____)

a. What agencies tested (educationr" physically) your child before the Admissions, Review and Dismissal (ARD) meeting* was held write the number(s) of the agency(ies) that tested your child in the spaces below. Use as many spaces as you need.

Agency I	Agency II	Agency III	Agency IV	Agency V
_____ 10-11	_____ 12-13	_____ 14-15	_____ 16-17	_____ 13-19

b. Which agency did you like to deal with best? .... _____ 20-21

c. Which agency did you like to deal with least? .... _____ 22-23

QUESTIONS 2 THROUGH 6 ASK ABOUT THE AGENCIES YOU LISTED AS THE ONES YOU LIKE BEST AND LEAST. IF YOUR CHILD WAS ONLY SEEN BY ONE AGENCY, RECORD YOUR ANSWERS UNDER THE "BEST LIKED" AGENCY COLUMN.

2. How did you find out about how your child did on his or her tests? CHECK AS MANY AS APPLY.

	Best Liked Agency	Least Liked Agency	
No one told me anything about my child's test results.	_____	_____	24-25
I met individually with each of the different testers.	_____	_____	26-27
I met with several different testers at one meeting.	_____	_____	28-29
I met with one tester at one meeting.	_____	_____	30-31
Someone talked to me over the phone.	_____	_____	32-33
I was given or sent a written report.	_____	_____	34-35

BEST COPY AVAILABLE

83

3. Using the answer choices below, indicate the total amount of time people from your best liked and least liked agency spent telling you about how your child did on his or her tests.

Answer Choices:

1=0 minutes
2=1-15 minutes
3=16-30 minutes
4=31-45 minutes
5=46-60 minutes
6=More than 60 minutes

Best liked agency .... _____ 36

Least liked agency .... _____ 37

_____ 38

4. Use the answer choices given to indicate who referred you to each agency.

Answer Choices

1=Child Find scre ning team
2=Department of Social Services
3=Private physician/pediatrician
4=Health Department
5=Preschool or day-care teacher
6=Friends/neighbors
7=Other (Specify: _____)

Best liked agency .... _____ 39

Least liked agency .... _____ 40

5. Using the answer choices given below, rate how well each agency did each of the things in the left column. Write the number that matches your answer in the columns under your best liked and least liked agency.

Answer Choices:

1=Very good
2=Good
3=Adequate
4=Needed scme improvement
5=Needed much improvement
6=Agency did not do this

	Best Liked Agency	Least Liked Agency	
Told me about the tests given to my child.			41-42
Told me how my child did on the tests.			43-44
Worked with my child.			45-46
Understood my feelings as a parent.			47-48
Made me feel comfortable.			49-50
Encouraged me to ask questions.			51-52

_____ 53

84

6. Indicate how much time passed between the following events by writing the number of one answer choice on the line to the right of each statement.

Answer Choices:

1=1 to 2 weeks
2=2 to 3 week.
3=3 to 4 weeks
4=4 to 6 weeks
5=6 to 8 weeks
6=8 to 10 weeks
7=More than 10 weeks

Your recognition that your child might need special help and your initial contact with the county .... _____ 54

Your recognition that your child might need special help and the beginning of testing .. _____ 55

The beginning of testing and the end of testing .... _____ 56

The end of testing and date of the ARD meeting .... _____ 57

7. Once testing of your child began, did anyone help you collect all of the information that was needed so that the ARD meeting could be held? Write the number of your answer choice on the line to the right .... _____ 58

Answer Choices:

1=Yes
2=No

IF YES:

For whom did this person work? _____ _____ 59

What was this person's job title? _____ _____ 60

THIS CONCLUDES THIS QUESTIONNAIRE. THANK YOU.

*The Admissions. Review and Dismissal meeting is conducted by representatives from different programs or groups serving preschool handicapped children within the school district. The purpose of this meeting is to recommend an appropriate placement in a special education program for a child.

Preschool Evaluation Project Montgomery County Public Schools Rockville, Maryland	PREPLACEMENT ASSESSMENT Agency/Organization Questionnaire

Agency/Organization Name: _____

Job Title of Person Completing Form: _____

Part of the process of providing appropriate services for handicapped children is determining whether a child has a problem and how extensive the problem is. We are interested in learning more about how agencies and organizations provide preplacement assessment services to our county's preschoolers.

Directions: This questionnaire is to be completed by the person who is most knowledgeable about the assessment activities carried out by your organization with preschoolers who are suspected of having a handicapping condition. All questions refer only to assessments performed by your organization on children birth to five years, 11 months of age, prior to their placement in a preschool program or special education service.

If there are some questions which you cannot answer, please discuss them with any member of your staff who might be able to answer them.

When completing the questionnaire, be certain that all spaces contain answer choice numbers.

Some of the questions will ask you to indicate the percentage of children that fall into certain categories or the percentage of cases that are handled in a certain manner.

Example:

Answer Choices:

0=None (0%)	4=51-75%
1=1-5%	5=76-95%
2=6-25%	6=96-100%
3=26-50%	

What percentage of children are referred for assessment to your agency by each of the following sources?

Child find screening team .... __4__

Public Department of Social Services .... __1__

The answer choice of "4" in the first box means that 51 to 75% of the children that your agency assesses are referred to you by a child find screening team. The answer choice of "1" in the second box means that 1 to 5% of the children that your agency assesses are referred to you by the Public Department of Social Services.

BEST COPY AVAILABLE

PREPLACEMENT ASSESSMENT
Agency/Organization Questionnaire

1. What is the composition of the assessment staff in your agency/organization? In the spaces next to each professional listed below, write the number of staff members who work full-time* or part-time* as diagnosticians of preschool children. Individuals who could be included in more than one category should be counted only once in the category that describes their primary area. Record your answers in the following manner: if your answer is 3 full-time audiologists, in the space under "full-time" and next to "audiologist," write "03;" if your answer is 12, write "12;" if your answer is 0 or none, write "00."

	Number of	
	Full-Time	**Part-Time**
Audiologist	_____ 9-10	_____ 45-46
Educational Diagnostician	_____ 11-12	_____ 47-48
Medical		
Medical Technologist	_____ 13-14	_____ 49-50
Neurologist	_____ 15-16	_____ 51-52
Nurse	_____ 17-18	_____ 53-54
Pediatrician/Neonatologist	_____ 19-20	_____ 55-56
Psychiatrist	_____ 21-22	_____ 57-58
Other Physician	_____ 23-24	_____ 59-60
X-Ray Technician	_____ 25-26	_____ 61-62
Other Medical Personnel	_____ 27-28	_____ 63-64
Occupational Therapist	_____ 29-30	_____ 65-66
Physical Therapist	_____ 31-32	_____ 67-68
Psychologist	_____ 33-34	_____ 69-70
Social Worker/Counselor	_____ 35-36	_____ 71-72
Speech Pathologist	_____ 37-38	_____ 73-74
Vision Specialist/Optometrist	_____ 39-40	_____ 75-76
Other (Specify: _____)	_____ 41-42	_____ 77-78
Other (Specify: _____)	_____ 43-44	_____ 79-80

BEST COPY AVAILABLE

2. Approximately how many children between the ages of birth and five years, 11 months, did your agency/organization assess in the past year (_____)? If your agency/organization provides a program for handicapped preschoolers, do not include children who attend this program for reasons other than preplacement assessment.* .... _____ 9-11

The remaining questions pertain only to those children indicated in question 2.

Use the following answer choices to answer questions 3 and 4A.

Answer Choices:

0=None (0%)	4=51-75%
1=1-5%	5=76-95%
2=6-25%	6=96-100%
3=26-50%	

3. Indicate approximately what percentage of the children assessed by your agency were referred by each source listed below. Count children in only one category.

Child Find screening team	_____	12
Public Department of Social Services	_____	13
Physician/Pediatrician	_____	14
Health Department	_____	15
Preschool or day-care teacher	_____	16
Friends/neighbors of child's parents	_____	17
Parent (self-referral)	_____	18
Other (Specify: _____)	_____	19

4. a. Indicate the percentage of preschool children assessed by your agency in each of the areas below. An assessment may include more than one area.

Chromosomal analysis .... _____ 20

Developmental History .... _____ 21

Electroencephalogram (EEG) .... _____ 22

Electrocardiogram (EKG) .... _____ 23

Fine Motor* .... _____ 24

Gross Motor* .... _____ 25

Hearing exam .... _____ 26

Intellectual/problem solving* .... _____ 27

Neurological exam .... _____ 28

Orthopedic exam .... _____ 29

Pre-academic or readiness skills* .... _____ 30

Routine physical exam .... _____ 31

Self-help skills* .... _____ 32

Social/emotional/behavioral functioning* .... _____ 33

Speech and language/oral motor* .... _____ 34

Vision exam .... _____ 35

Other (Specify: _____) _____ 36

Other (Specify: _____) _____ ᵤ7

b. If you contract with professionals outside your agency/organization to have any of the above assessments conducted, please list the types of assessments they conduct for you.

_____

_____

If your agency performs assessments in only one of the area⁻ in question 4, skip to question 7.

5. For 75% or more of the children your agency assesses, how is it decided in which areas a child should be tested? Answer by writing the number of one answer choice below in the space to the right .... _____ 38

Answer Choices:

1=Areas to be assessed are indicated as part of the referral.
2=Areas to be assessed are decided by one individual based on initial intake information about the child.
3=Areas to be assessed are decided by two or more individuals based on initial intake information.
4=Child is screened/assessed by one diagnostician who then refers the child for additional assessments as needed.
5=Decision not made on a case by case basis; all or most children receive the same set of assessments.
7=Other (Describe: _____ _)

6. Indicate which of the following procedures is used by your agency/organization to integrate test results for 75% or more of your cases. Answer by writing the number of one answer choice below in the space to the right .... _____ 39

Answer Choices:

1=Assessment reports from different areas are not integrated.
2=One individual writes a summary report based on individual reports.
3=A meeting is held to discuss each case and to develop a summary report.
4=Individual diagnosticians develop their own summaries and these are compiled in a summary report.
5=Other (Specify: _____)

7. List at least three instruments that your agency uses very frequently with preschool children. Place a check ( ) in the appropriate column to the right to indicate what areas are assessed by your agency with that instrument. Check as many columns as applicable.

Answer Key:

A=Audiology/Hearing
B=Fine Motor
C=Gross Motor
D=Intellectual/Problem Solving
E=Pre-academic or Readiness Skills
F=Self-help Skills
G=Social/Emotional/Behavioral Functioning
H=Speech and Language/Oral Motor

Instrument	Areas: See Answer Key above.								
	A	B	C	D	E	F	G	H	
1.									40-47
2.									48-55
3.									56-63
4.									64-71
5.									72-79

Office Use   7 0 1 _____ _____ 3 1-8

BEST COPY AVAILABLE

90

8. Indicate how testing instruments are selected for use by your agency staff by writing a "1" in the space next to the statement that describes how instruments are most frequently selected; write a "2" in the space next to the statement that describes the next most frequent way that instruments are selected, etc. Write a "0" in the space next to any statement that does not apply. **Each number with the exception of 0 should be used only once.**

   Individual diagnosticians select their own instruments .... _____ 9

   Agency policies and procedures determine instruments used .... _____ 10

   Diagnosticians from the same field (e.g., speech therapists) decide as a group what instruments to use .... _____ 11

   Individual diagnosticians select some instruments; agency determines others .... _____ 12

   Other (Specify: _____) _____ 13

9. Of all the preschool children assessed by your agency, (as specified in Question 2), what percentage was found to have a handicapping condition? .... _____ 14-15

10. In general, how specific are the recommendations that your agency makes for children with handicapping conditions? Indicate the percentage of cases for which your agency/ organization makes each type of recommendation listed below.

   No recommendations are given .... _____ 16-17

   Specific tasks* are recommended (e.g., John should be given toys with dials and knobs that he can turn to develop his fine motor skills.) .... _____ 18-19

   Specific services* are recommended (e.g., speech therapy) .... _____ 20-21

   General program* recommendations are made (e.g., Child would profit from placement in program for handicapped preschoolers.) .... _____ 22-23

   Program recommendation with program characteristics are specified. (e.g., Child needs a program with a small student teacher ratio and a heavy emphasis on language.) ...... _____ 24-25

   Amount of service needed is recommended. (e.g., 2 hours per week) .... _____ 26-27

   Specific person or program is recommended. (e.g., Joan Smith or Tiny Tots School) .. _____ 28-29

11. For what percentage of your cases (as specified in Question 2) are the results of the assessment communicated to the child's parents or legal guardian? .... _____ 30-31

If your agency/crganization communicates results to five percent or less of the parents, go to question 14.

Questions 12 and 13 apply to those cases where assessment results are shared with parents.

Use the following answer choices to answer questions 12 and 13.

12. How are assessment results shared with or communicated to parents? Indicate the percentage of cases to which each situation applies. More than one statement may apply to an individual case.

Each diagnostician explains the results of his or her assessments to the parents individually .... _____ 32

Assembled as a group, the diagnosticians involved in a case explain the results to the parents .... _____ 33

One diagnostician explains the results of all assessments .... _____ 34

Written summary(ies) of results is(are) explained to parents .... _____ 35

Written summary(ies) of results is(are) sent or given to parents .... _____ 36

Other (Describe: _____) _____ 37

13. How much total staff time per case is spent verbally explaining test results to parents? For each time period listed below, indicate the percentage of cases in which that much time was spent explaining test results to parents.

Less the 15 minutes .... _____ 38

15 minutes to 29 minutes .... _____ 39

30 minutes to an hour .... _____ 40

One hour to two hours .... _____ 41

Two to four hours .... _____ 42

More than four hours .... _____ 43

14. In general, how much time elapses between each of the following events? Use the answer choices below to indicate the approximate period of time between the two points.

Answer Choices:

1=Less than 7 days	5=More than 45 days
2=7-14 days	6=Don't know
3=15-28 days	7=Does not apply
4=29-45 days	

Initial contact to first day of testing .... _____ 44

First day of testing to last day of testing .... _____ 45

Last day of testing to completion of written report .... _____ 46

Last day of testing to communication of results to parents .... _____ 47

15. What factors cause time lags in the assessment process for your agency/organization? Use the answer choices below to indicate how frequently each factor contributes to delays in your agency's assessment process.

Answer Choices:

1=Very frequently
2=Often
3=Sometimes
4=Rarely
5=Never

Not enough professional staff .... _____   48

Not enough clerical/typing staff .... _____   49

Increased referrals after screenings (i.e., Child Find or school entry) .... _____   50

Internal scheduling problems .... _____   51

Difficulty scheduling appointments with parents .... _____   52

Parents not keeping appointments .... _____   53

Sickness of child .... _____   54

Other (Describe: _____) _____   55

Other (Describe: _____) _____   56

This concludes the questionnaire. Thank you.

Definitions

*Preplacement Assessment--Testing or other diagnostic services with children suspected of having a handicapping condition prior to any placement in a preschool program or in special education services

Full-Time Employee—Individual who provides diagnostic services solely to preschool handicapped children and their families for 30 or more hours a week.

Part-Time Employee—Individual who provides diagnostic services to preschool handicapped children and their families less than 30 hours a week. A person would be considered part-time if they spent 20 hours a week serving preschoolers and 20 hours a week serving school-aged children.

Fine Motor—Use of delicate muscle systems where precision is required, i.e., handwriting, copying figures, buttoning, block building, cutting. May also involve visual integration

Gross Motor—Skills involving use of large muscles where strength and coordination are involved in throwing, catching, jumping, hopping, standing still, and balancing.

Intellectual problem solving—Skills related to a child's knowledge, ability to think, solve problems, follow directions, etc.

Pre-Academic/Readiness Skills—These skills include letter recognition, knowledge of letter-sound correspondence, ability to count, color recognition, etc. General readiness for school experience exhibited in child's attitudes and work habits are also included.

Self-Help Skills—Child's ability to function effectively in his environment. Would include such things as: ability to make his wants known, dressing skills, toileting skills, eating skills.

Social/Emotional/Behavioral Functioning—Child's ability to function in an environment with or without previously known other individuals, child's degree of comfort about himself (self-concept), style of interaction with others. May include fears and fantasies, ability to adjust to changes.

Speech and Language/Oral Motor Functioning—Use of articulation, expressive/receptive language, use of nouns and verbs, ability to answer questions, follow single directions; ability of the oral motor structures to function properly in word formation.

Tasks—Specific work performed by a child at the request of a teacher.

Services—A form of help given to a child in a specific area of handicap. For example, speech therapy might be provided to a child during part of a day's schedule.

Program—An ongoing and regularly scheduled educational group or organization. A child enrolled in a program would become a member of a classroom-type group or may be served in a home-based capacity, and would participate in the program over an extended period of time (e.g., one year).

PREPLACEMENT ASSESSMENT
Record Review Form

Completed by: _____ Date Completed: _____

Child's Name: _____

Program Name: _____

The purpose of this recc 'd review is to collect information from the child's confidential/cumulative folder(s) on the types of assessments that were completed on the child prior to a placement decision being made.

Directions: Determine the date of the child's initial placement meeting. Then examine the student's folder for assessment reports completed prior to this placement meeting. An assessment report is a written summary of the child's performance on one or more tests; it may examine more than one skill area and may be based on the results of tests administered by more than one person within the same agency or program. Determine the number of assessment reports completed prior to the child's initial placement meeting and note this in the box in the upper right corner—on the record review form. Complete the record review form for the three assessment reports written closest and prior to the date of the child's first placement meeting. If you are unable to locate three preplacement assessment reports in the program files, only record the data for the report(s) you find.

To complete the record review, use the codes recorded in the Code Booklet. This booklet is organized to correspond to the items on the record review form.

PREPLACEMENT ASSESSMENT
Record Review Form

Program Name: _____

1. File Location: _____

2. Date report was completed: .... _____ _____ _____ 13-18

3. What agency prepared this preplacement assessment report? .... _____ 19-20

4. Who referred the child to this agency? .... _____ 21-22

5. What developmental areas
   'ere assessed? .... _____ 23 _____ 24 _____ 25 _____ 26 _____ 27

6. What tests were used? .... _____ 28-31 _____ 32-35 _____ 36-39

                                                _____ 40-43 _____ 44-47 _____ 48-51

7. Did the summary of the assessment report contain the following?

   a. A statement of the child's primary diagnosis/disability
      (Specify: _____) _____ 52-53

   b. Educational services needed .... _____ 54-55 _____ 56-57 _____ 58-59

   c. Recommendations for placement in a specific program
      [1=YES; 2=NO] .... _____ 60

      If "Yes" specify name of program: _____

95

1. **File location:**

   Indicate which office within the program has the child's confidential folder on file.

2. **Date report completed.**

   Record year, month, and day. Code 99 99 99 if date not given.

3. **Agency Codes:**

   01=Department within the County School System
   02=Health Department
   03=Hospital (Specify on review form.)
   04=Private Physician
   05=Private Assessment Agency (Specify on review form.)
   06=Other Private Assessment Agency (Specify on review form.)
   07=Other Hospital (Specify on review form.)
   08=Other (Specify on review form.)
   99=Information not available.

4. **Referral codes:**

   01=Child Find screening team
   02=Child's parent
   03=Family friend
   04=Health Department
   05=Physician
   06=Preschool or day care teacher.
   07=Another assessment agency
   08=Other (Specify on review form.)
   99=Information not available.

5. **Areas Assessed:**

   A single assessment report may focus on several developmental areas. Space is provided to record up to five areas for each report.
   1=Fine motor
   2=Gross motor
   3=Intellectual/problem solving
   4=Self-help skills
   5=Social/emotional/behavioral functioning
   6=Speech and language/oral motor functioning
   7=Other (Specify on review form.)
   9=Information not available.

6. **Test Codes:**

   0175=Assessment of Children's Language Comprehension
   0202=Bayley Scales of Infant Development
   0209=Birth—3 Developmental Scale (Bangs-Dodson)
   0215=Boehm Test of Basic Concepts
   0270=Brigance Diagnostic Inventory of Essential Skills
   0273=Brigance Inventory of Early Development
   0299=Bzoch-League Receptive-Expressive Emergent Language Scale (Infant)

96

6. **Test Codes (continued):**

0302=California Preschool Scale
0304=Callier-Azusa Scales
0306=Carolina Developmental Profile
0308=Carrow Elicited Language Inventory
0310=Comprehensive ID Process
0360=Coping Inventory
0416=Denver Developmental Screening Test
0418=Developmental Indicators for Assessing Learning (DIAL)
0420=Developmental Profile (Alpern Boll)
0422=Developmental Test of Visual-Motor Integration (VMI)
0502=Early Intervention Developmental Profile
0550=EMI Assessment Scale
0633=Fisher-Logemann Test of Articulation Competence
0645=Fluharty Preschool Speech and Language Screening Test
0670=Frostig Developmental Test of Visual Perception
0673=Functional Profile
0716=Gesell Behavior Tests
0758=Goldman-Fristoe Test of Articulation
0759=Goldman-Fristoe Woodcock Test of Auditory Discrimination
0858=Home Inventory
0933=Illinois Test of Psycholinguistic Abilities
1116=Kent Infant Development Scale
1133=KIDS Inventory of Development Scale
1216=Learning Accomplishment Profile-Diagnostic Assessment
1218=Leiter International Performance Scale
1220=Lexington Developmental Scale
1308=McCarthy Scales of Children's Abilities
1316=Memphis Comprehensive Development Scale
1333=Michigan Developmental Programming for Infants
1616=Peabody Picture Vocabulary Test
1658=Portage Guide to Early Education Checklist
1670=Preschool Attainment Record
1672=Preschool Language Scale
1674=Preschool Screening System
1802=Rapid Developmental Screening Checklist
1816=Receptive-Expressive Emergent Language Scale (REEL)
1975=Sequenced Inventory of Communication Development
2016=Test for Auditory Comprehension of Language (CARROW)
2154=Uniform Performance Assessment System
2170=Uzgiris-Hunt Scales of Psychological Development (Infant)
2216=Weschsler Preschool and Primary Scale of Intelligence
2233=Vineland Social Maturity Scale
2273=Vulpe Performance Analysis/Development Assessment
2316=Weschsler Preschool and Primary Scale of Intelligence
5555=Neurological exam
6666=Orthopedic exam
7777=General physical exam
8888=Other (Specify on review form.)
9999=No preplacement assessment information was found.

7a. Primary Diagnosis/Disability Codes

01=Mentally Retarded
02=Hard of Hearing
03=Deaf
04=Speech & Language Impairment
05=Visually Impaired
06=Emotionally Impaired
07=Orthopedically Impaired
08=Other Health Impairments
09=Specific Learning Disability
10=Multiple Handicapped
11=Child In Need Of Assessment
12=Deaf/Blind
77=Other (Specify on form.)
88=Child determined not handicapped
99=Diagnosis/Disability not specified.

7b. Educational Services

01=Audiological Evaluation
02=Audiological Services
03=Medical/Psychiatric Services
04=Occupational Therapy
05=Occupational Therapy Evaluation
06=Parent Counseling/Training
07=Physical Therapy
08=Physical Therapy Evaluation
09=Psychological/Educational Assessment
10=Regular Nursery School
11=Special Education Program
12=Speech & Language Evaluation
13=Speech Therapy
14=Transportation
66=More than two services needed (Specify on form.)
77=Other (Specify on form.)
88=None listed because child not identified as handicapped.
98=Educational services not specified although child is identified as handicapped.
99=Educational services not specified & diagnosis/disability not specified.

93

Name of Person Completing Form: _____

Postplacement assessment is any formal or informal testing done subsequent to the child's admission to a program. The following questions are about postplacement assessment for preschool handicapped children.

Directions: Most of the following questions ask you to indicate the number of children that fall into a given category. In some instances, you will be asked to select an answer from a list of several choices by writing a number in or checking a space next to each question or answer choice.

Example:

Which of the following testing methods did you use with most (75% or more) of the children you assessed within approximately one month after they were placed in your program? CHECK ALL THAT ARE APPLICABLE.

Standardized tests .... _____

Developmental checklists .... _____

Informal observations .... _____

Home visit/parent interview .... _____

There is no on'ɔ method used with 75% or more of the children.
(Please expla: .. _____

_____)_____

Check marks in the spaces next to standardized tests and informal observations mean that this responde.ɪt used these testing methods with at least 75% of the children he/she assessed within one month after placement in his/her classroom or service.

Please use the reverse side of this page to clarify any of your answers.

Your responses will be coded to an identification number (ID). All responses will be kept strictly confidential. Only the evaluation staff will have access to the key which links names to IDs.

POSTPLACEMENT ASSESSMENT
Staff Questionnaire

Program Name: _____

Job Title of Person Completing Questionnaire: _____

1. During this school year, how many children* have entered your classroom or service as their first special education program**? If your answer is "9," write 9 in the space; if your answer is "20," write 20 in the space .... _____ 12-13

2. Of the children indicated in Question 1, how many did you assess within approximately one month after they were placed in your program? .... _____ 14-15

   IF YOUR ANSWER TO QUESTION 2 IS "0," STOP HERE; YOU HAVE COMPLETED THIS QUESTIONNAIRE. THANK YOU.

   ALL REMAINING QUESTIONS REFER ONLY TO THOSE CHILDREN INDICATED IN QUESTION 2.

3. Which of the following testing methods did you use with most (75% or more) of the children indicated in Question 2? CHECK ALL APPLICABLE.

   Standardized tests** .... _____ 16

   Developmental checklists** .... _____ 17

   Informal observations** .... _____ 18

   Home visit/parent interview .... _____ 19

   Other (Specify: _____) _____ 20

4. When testing new enrollees, which of the following areas did you assess most frequently? CHECK ALL APPLICABLE.

   Fine motor** .... _____ 21

   Gross motor** .... _____ 22

   Hearing .... _____ 23

   Intellectual/problem solving** .... _____ 24

   Neurological .... _____ 25

   Orthopedic .... _____ 26

   Pre-academic or readiness skills** .... _____ 27

   Self-help skills** .... _____ 28

   Social/emotional/behavioral functioning** .... _____ 29

   Speech and language/oral motor functioning** .... _____ 30

   Vision .... _____ 31

   Other (Specify: _____) _____ 32

100

5. What was your most frequent reason for testing new enrollees? . . . . _____ 34

Answer Choices:

1=Because it was program policy.
2=To provide more relevant data for program planning than preplacement assessment** provided.
3=To verify preplacement assessment information.
4=Because preplacement assessment information was out of date.
5=To become familiar with the child's current ability levels.
6=Because there was insufficient assessment information available in my area of expertise.
7=Other (Specify: _____)

6. For how many of the new enrollees that you tested did you explain the test results to parents? . . . . _____ 35-36

IF YOUR ANSWER IS "0," STOP HERE. YOU HAVE COMPLETED THIS QUESTIONNAIRE. THANK YOU.

7. In what manner did you communicate these results to parents for most (75% or more) of the children for whom you explained tests results? . . . . _____ 37

Answer Choices:

1=A personal conference with parent
2=A written summary of assessment results
3=Other (Specify: _____)

THIS COMPLETES THIS QUESTIONNAIRE. THANK YOU.

*Attention Special services personnel (speech pathologist, physical therapist, etc.): include in this count children who were formally enrolled in a program/service, who may or may not be on your case load, but who you were asked to observe and/or test in some capacity.

**Definitions

Program—An ongoing and regularly scheduled educational group or organization. A child enrolled in a program would become a member of a classroom-type group or receive home-based instruction over an extended period of time.

Standardized Tests—Instruments for assessing a child's level of functioning as measured against the performance of a large population of children; test administration is controlled for uniformity and is conducted by trained personnel.

Developmental Checklists—An observational tool for determining the presence of developmentally appropriate behaviors in children; may be written by staff members or may be a form developed by an outside source.

Informal Observations—Anecdotal notes which describe a child's behavior during an observation period.

Fine Motor—Use of delicate muscle systems where precision is required, i.e., handwriting, copying figures, buttoning, block building, cutting. May also involve visual integration.

Gross Motor—Skills involving use of large muscles where strength and coordination are involved in throwing, catching, jumping, hopping, standing still, and balancing.

Intellectual/Problem Solving—Skills related to a child's knowledge, ability to think, solve problems, following directions, etc.

Pre-Academic/Readiness Skills—These skills include letter recognition, knowledge of letter-sound correspondence, ability to count, color recognition, etc. General readiness for school experience exhibited in child's attitudes and work habits are also included.

Self-Help Skills—Child's ability to function effectively in his environment. Includes such things as: ability to make his wants known, dressing skills, toileting skills, eating skills.

Social/Emotional/Behavioral Functioning—Child's ability to function in an environment with or without previously known individuals, child's self-concept, style of interaction with others. May include fears and fantasies, ability to adjust to changes.

Speech and Language/Oral Motor Functioning—Use of articulation, expressive/receptive language, use of nouns and verbs, ability to answer questions, follow single directions and the ability of the oral motor structures to function properly in word formation and eating.

Preplacement Assessment—Testing that is done prior to a school district placement meeting.

Completed by: _____ Date Completed: _____

Child's Name: _____ . _____

Program Name: _____

The purpose of this record review is to collect information from the child's confidential/cumulative folder(s) on the types of assessments that were completed on the child during the first month that the child was enrolled in the program. This information is to be recorded from assessment reports or summary comments made by program personnel that have been filed in the child's confidential/cumulative folder(s).

Directions: This record review will summarize records of assessments done during the first month of the child's placement in his/her present program. First check the date of the child's enrollment in the present program to determine which assessment reports to include in this review. An assessment report is a written summary of the child's performance (1) in one skill area using more than one test by the same administrator or (2) in several skill areas using one or more tests administered by the same person. Determine the number of assessment reports completed one month subsequent to the child's placement and note this in the box in the upper right corner on the record review form. Complete the record review form for all assessments reports or summaries completed within one month after the child's placement. Use the codes recorded in the Code Booklet to complete the record review form. This booklet is organized to correspond to the items on the record review form.

POSTPLACEMENT ASSESSMENT
Record Review

1. File Location: _____

2. Date report was completed .... _____ _____ _____ 13-18
                                                              MO   DA   YR

3. What developmental areas were
    assessed? .... _____ 19 _____ 20 _____ 21 _____ 22 _____ 23

4. What forms of assessment were
    used? .... _____ 24 _____ 25 _____ 26 _____ 27 _____ 28

5. What tests were used? .... _____ 29-32 _____ 33-36 _____ 37-40

                                                                      _____ 41-44 _____ 45-48 _____ 49-52

1. File Location:

   Indicate which office within the program has the child's confidential folder on file

2. **Date report completed:**

   Code 99 99 99 if date is not available.

3. **Developmental Areas Assessed:**

   1=Fine motor
   2=Gross motor
   3=Intellectual/Problem-Solving
   4=Self-help skills
   5=Social/emotional/behavioral functioning
   6=Speech and language/oral motor functioning
   7=Other (Specify on review form)
   9=Information not available

4. **Form of Assessment:**

   1=Standardized tests were used
   2=Informal developmental checklist
   3=Anecdotal notes
   4=Medical exam
   5=Other (Specify on review form)
   9=Information not available

5. **Test Codes:**

   0175=Assessment of Children's Language Comprehension
   0202=Bayley Scales of Infant Development
   0209=Birth-3 Developmental Scale (Bangs-Dodson)
   0215=Boehm Test of Basic Concepts
   0270=Brigance Diagnostic Inventory of Essential Skills
   0273=Brigance Inventory of Early Development
   0299=Bzoch-League Receptive-Expressive Emergent Language Scale (Infant)
   0302=California Preschool Scale
   0304=Callier-Azusa Scales
   0306=Carolina Developmental Profile
   0308=Carrow Elicited Language Inventory
   0310=Comprehensive ID Process
   0360=Coping Inventory
   0416=Denver Developmental Screening Test
   0418=Developmental Indicators for Assessing Learning (DIAL)
   0420=Developmental Profile (Alpern Boll)
   0422=Developmental Test of Visual-Motor Integration (VMI)
   0502=Early Intervention Developmental Profile
   0550=EMI Assessment Scale
   0633=Fisher-Logemann Test of Articulation Competence
   0645=Fluharty Preschool Speech and Language Screening Test
   0670=Frostig Developmental Test of Visual Perception
   0673=Functional Profile
   0716=Gesell Behavior Tests

104

5. **Test Codes:** (continued)

0758=Goldman-Fristoe Test of Articulation
0759=Goldman-Fristoe Woodcock Test of Auditory Discrimination
0858=Home Inventory
0933=Illinois Test of Psycholinguistic Abilities
1116=Kent Infant Development Scale
1133=KIDS Inventory of Development Scale
1216=Learning Accomplishment Profile—Diagnostic Assessment
1218=Leiter International Performance Scale
1220=Lexington Development Scale
1308=McCarthy Scales of Childrens Abilities
1316=Memphis Comprehensive Development Scale
1333=Michigan Development Programming for Infants
1616=Peabody Picture Vocabulary Test
1658=Portage Guide to Early Education Checklist
1670=Preschool Attainment Record
1672=Preschool Language Scale
1674=Preschool Screening System
1802=Rapid Developmental Screening Checklist
1816=Receptive-Expressive Emergent Language Scale (REEL)
1975=Sequenced Inventory of Communication Development
2016=Test for Auditory Comprehension of Language (CARROW)
2154=Uniform Performance Assessment System
2170=Uzgiris-Hunt Scales of Psychological Development (Infant)
2233=Vineland Social Maturity Scale
2273=Vulpe Performance Analysis/Development Assessment _
2316=Weschsler Preschool and Primary Scale of Intelligence
5555=Neurological exam
6666=Orthopedic exam
7777=General physical exam
8888=Other (Specify on review form)
9999=No postplacement assessment information was found.

COMPONENT: **Assessment Process**

Special Notes on the Instruments

SUBCOMPONENT: **Preplacement Assessment**

Preplacement Assessment, Director Questionnaire

Directions. You can modify the definition of assessment report if it is not appropriate for your use.

Questions 1, 2, 4, and 8.   If you use a computer, the answers to these questions need to be right justified (refer to Data Processing in Managing Data.

Access to a computer is not necessary to use this instrument.

Preplacement Assessment, Staff Questionnaire

Questions 5 and 7.   Refer to Data Analysis and Summary in the Managing Data section for how to summarize ranking type questions.

Questions 1, 2, and 3.   If you use a computer, the answers to these questions need to be right justified (refer tc Data Processing in Managing Data.

Access to a computer is not necessary to use this instrument.

Preplacement Assessment, Parent Questionnaire

Question 1a.   The responses to this question can be summarized in two different ways: (1) the number or percentage of times each answer choice was selected, i.e. how many respondents indicated that their child was tested by a department within the county school system, the county Health Department, etc.; and (2) the number of respondents who indicated that their child was tested by one agency, two agencies, three agencies, etc.

Questions 2-5. When comparing responses for best versus least liked agencies, you should only use those cases in which (1) the respondent's child had been tested by at least two agencies and (2) the respondent indicted both a best and least liked agency.   Parents tended not to want to indicate a least liked agency during our piloting of this questionnaire; a few of the parents who did, wrote additional notes as to why they did so and emphasized that their least liked agency wasn't really so bad.   If you should run into the same situation, the recommendations made above to delete certain data must be followed for the information to be meaningful.

3-2-61

106

Questions 1, 2, and 5. If you use a computer, the answers to these questions need to be right justified (refer to Data Processing in Managing Data.

Access to a computer is not necessary to use this instrument.

Preplacement Assessment, Agency Questionnaire

Questions 1, 2, 9 and 10. If you use a computer, the answers to these questions need to be right justified (refer to Data Processing in Managing Data.

Access to a computer is not necessary to use this instrument.

Preplacement Assessment, Record Review

Directions. The directions for this questionnaire indicate that the record review form should be completed on the three assessment reports written closest and prior to the date of the child's first placement meeting. These instructions were given because it was felt that this would adequately sample the type of assessments children received. You can decide to increase or decrease the number of assessment reports on which the form should be completed.

You can change the definition of an assessment report if it is not appropriate for your intended use.

Question 6, Test Codes. The user can assign a four-digit code to a test that is found in the student's files but which was not included in the Test Codes.

Question 7c. No card column number is provided here for two reasons: (1) the number of programs available within a school district is probably very small and could be easily summarized by hand; and (2) programs vary from district to district. If you want to have this information coded into the computer for analysis, you can devise a coding system and use any of the remaining card column numbers (61 to 80) to record the information.

You do not need access to a computer to use this instrument.

*****

SUBCOMPONENT: Postplacement Assessment

Postplacement Assessment, Staff Questionnaire

Directions. You can modify the definition of an assessment report to meet your needs if it is not appropriate.

Questions 1, 2, and 6. If you use a computer, the answers to these questions need to be right justified (refer to Data Processing in Managing Data.

3-2-62 107

Access to a computer is not necessary to use this instrument.

Postplacement Assessment, Record Review

<u>Directions</u>.   The   record reviewer is instructed to collect information for
this form from the child's confidential/cumulative folders.   If you find
that this information is recorded in a different type of folder, you should
change the directions for the reviewer.

The reviewer is directed to use the record review form for the assessments
that were done on the child one month after the child's enrollment in a
program. You can change this time period if you wish.

You can modify the definition of an assessment report if it is not
appropriate for your intended use.

Access to a computer is not necessary to use this instrument.

BEST COPY AVAILABLE

COMPONENT: The Placement Process

Description of Subcomponents
Chart of Data Collection Instruments
Evaluation Study Questions
When To Use the Data Collection Instruments
Data Collection Instruments
Special Notes on the Instruments

109

COMPONENT: The Placement Process

Description of Subcomponents

The __Intake/Review Process__ subcomponent focuses on the type of information that a placement unit requires for preschool children before considering them for placement in a special education program. It also inquires about the number of children considered for placement and actually placed in programs.

*****

The __Placement Meeting__ subcomponent examines the manner in which the preschoolers' placement meetings are conducted and what topics are discussed at these meetings.

*****

The __Appropriateness of Placement__ subcomponent provides a means to examine the question of whether or not placements for preschool handicapped children are made appropriately, i.e., are children placed in a program with children of similar needs and is there a good match between a child's need and the services offered by a program.

*****

The __Overview of the Placement Process__ subcomponent contains an outline developing a case study of the total process by which a preschooler is considered for placement in a special education program. It incorporates some of the information collected in the other Placement Process subcomponents.

110

COMPONENT: Placement Process

	Instruments			
			Subcomponents	
	Intake Review Process	Placement Meeting	Appropriateness of Placement	Overview of Placement
Director, Placement Office Interview	X		X	
Program Director Questionnaire			X	
Parent Questionnaire		X		
Observation System		X		
Case Study				X

COMPONENT: Placement Process
SUBCOMPONENT: Intake/Review Process

Evaluation Study Questions

Question	Instrument

1. How many preschool children have been considered for initial and "renewed" placement in a special education program during a given period of time?

   Intake Review Process, Placement Office Interview

2. Does the Placement Office require that certain information beavailableon preschool children who are being considered for placement? How is incomplete information handled?

   Intake Review Process, PlacementOffice Interview

3. Are parents assisted by Placement Office personnel to collect this information?

   Intake Review Process, Placement Office Interview

4. Of the children considered for initial placement how many: (a) were found to need special education services; (b) did the ARD committee request additional testing; (c) did the assessment reports contain recommendations for programming; (d) did the ARD committee agree on assessment results and recommendations?

   Intake Review Process, Placement Office Interview

5. Are assessment reports from different agencies evaluated differently?

   Intake Review Process, Placement Office Interview

6. For how many children has the Placement Office received assessment reports indicating that the child was in need of services, but the parents failed to follow through on and request services?

   Intake Review Process, Placement Office Interview

7. Does the Placement Office send preplacement results to the child's program placement? When? Is different information sent to different programs?

   Intake/Review Process, Placement Office Interview

COMPONENT: Placement Process
SUBCOMPONENT: Placement Meeting

Evaluation Study Question

Question	Instrument
1. Who attends preschool Admissions, Review and Dismissal meetings?	Placement Meeting, Observation System and Parent Questionnaire
2. What introductory procedures occur at the placement meetings (e.g., participants introduced by name, title; purpose of meeting stated; process reviewed)?	Placement Meeting, Observation System
3. Are the following topics discussed before and/or after the placement decision is made: student background, assessments done, child's ability placement consideration, parent concerns?	Placement Meeting, Observation System
4. With respect to discussion of a child's disability code, level of service, related services and program placement: (a) were differences of opinions expressed by the participants; (b) what decisions were made; and (c) were these decisions explained to parents?	Placement Meeting, Observation System
5. How did the placement committee reach its decision?	Placement Meeting, Observation System
6. Were follow-up responsibilities assigned/ discussed (e.g., additional testing/re- evaluation, parent visits to program(s), short-term monitoring, etc.)?	Placement Meeting, Observation System
7. Are the next steps in the placement process explained to parents (e.g., due process)?	Placement Meeting, Observation System
8. To what extent were parents involved in developing and/or approving their child's IEP?	Placement Meeting, Observation System and Parent Questionnaire
9. How satisfied were parents with the var- ious aspects of the placement process?	Placement Meeting, Parent Questionnaire

	Question	Instrument
10.	Was the manner in which the placement meeting was conducted or the outcome of the meeting different from parent expectations?	Placement Meeting, Parent Questionnaire
11.	What changes would parents like to see in the placement process?	Placement Meeting, Parent Questionnaire

114

COMPONENT: Placement Process
SUBCOMPONENT: Appropriateness of Placement

Evaluation Study Questions

Question	Instrument
1. What is the role of Placement Office staff in the sixty-day review process?	Appropriateness of Placement, Placement Office Interview
2. How is it determined if a child's placement is inappropriate?	Appropriateness of Placement, Placement Office Interview
3. How many and what types of changes are made as a result of a sixty-day review?	Appropriateness of Placement, Placement Office Interview
4. How well is the sixty-day review process working?	Appropriateness of Placement, Placement Office Interview
5. How can the sixty-day review process be improved?	Appropriateness of Placement, Placement Office Interview and Program Director Questionaire
6. What are the perceptions of program directors as to how many children were inappropriately placed in their programs?	Appropriateness of Placement, Program Director Questionnaire
7. What are the characteristics of children who program directors felt were inappropriately placed in their programs?	Appropriateness of Placement, Program Director Questionnaire
8. How satisfied are program directors with the ability of the placement committee to appropriately place children in their programs?	Appropriateness of Placement, Program Director Questionnaire
9. What suggestions do program directors have that would help the placement committee in appropriately placing preschoolers in their programs?	Appropriateness of Placement, Program Director Questionnaire

115

COMPONENT: Placement Process
SUBCOMPONENT: Overview of Placement Process

Evaluation Study Questions

Question	Instrument
1. What are the characteristics of the preschool children and their families who are considered for placement in special education programs?	Overview of Placement Process, Case Study Outline
2. What are the reasons that parents/ guardians contact the placement office to have their child considered for special education placements?	Overview of Placement Process, Case Study Outline
3. How does the placement process flow? For example: when and what problems were first noted by parents, when was testing done and what tests were used; what was the nature of the contacts between parents and the placement office and how frequent were they; when were the child's placement meeting and sixty-day review?	Overview of Placement Process, Case Study Outline
4. What is the child's previous educational experience and background?	Overview of Placement Process, Case Study Outline
5. In what areas were the child tested and when?	Overview of Placement Process, Case Study Outline
6. What happens at the child's placement meeting?	Overview of Placement Process, Case Study Outline
7. What are parents' perspectives on the placement process?	Overview of Placement Process, Case Study Outline

116

COMPONENT: **Placement Process**

_____

When to Use the Instruments

_____

SUBCOMPONENT: Intake Review Process

Instrument	When to Use
Intake/Review Process, Placement Office Interview	At the end of the school year.

*****

SUBCOMPONENT: Placement Meeting

Instrument	When to Use
Placement Meeting, Parent Questionnaire	Shortly after child's placement meeting.
Placement Meeting, Observation System	At any time during the school year at initial placement meetings.

*****

SUBCOMPONENT: Appropriateness of Placement

Instrument	When to Use
Appropriateness of Placement, Placement Office Interview	Toward the end of the school year.
Appropriateness of Placement, Program Director Questionnaire	Toward the end of the school year.

*****

SUBCOMPONENT: Overview of Placement Process

Instrument	When to Use
Overview of Placement Process, Outline for Case Study	At any time during the school year.

_____

117

COMPONENT: Placement Process

Data Collection Instruments

Office Use

Form Code: 545	1-3
County Code: _____	4-5
	6-8 Blank
Position Code: _____	9-10
Interviewer ID: _____	11-12
	13 Blank

Job Title of Person Being Interviewed: _____

Interviewer: _____

Directions [To Be Read]: I would like to ask you some questions about the preplacement assessments that your office reviews when a child is being considered for placement in a special education program. Preplacement assessment is done prior to a placement decision and for the purpose of determining 1) whether a child has a handicapping condition, or 2) the extent of a suspected problem in an area of development. We are interested in learning how those individuals who determine the placement of handicapped preschoolers collect, evaluate and utilize assessment information. All questions refer only to children birth to five years, 11 months of age.

1. a. In the past school year how many preschool children has your office considered for placement? .... _____ 14-16

   b. How many of these children were being considered for an initial placement? .... _____ 17-19

2. Approximately how many of the children considered for initial placement were eventually found to need services? .... _____ 20-22

3. What type of assessment information do you require for all children before they can be scheduled for an Admission, Review and Dismissal Committee (ARD) meeting? For example, do you require medical information, a developmental history, etc.?

   _____

   _____

   _____

   _____

4. What do you do when a child's folder is incomplete?

   _____

   _____

   _____

5. What information does the Placement Office look for in a child's preplacement assessment report, for example, information on medical status, test results, diagnosis of handicapping condition, etc.?

_____

_____

_____

_____

6. What do you do when you determine that a report is incomplete?

_____

_____

_____

_____

7. Does the Placement Office help parents collect all of the information needed before the
ARD meeting? [1=Yes; 2=No] .... _____ 23

IF YES, explain how.

_____

_____

_____

_____

8. During this past school year, for how many children has the Placement Office received
assessment reports stating that the child was in need of services, but the parents failed to
follow through and request services? .... _____ 24-26

9. Of the [READ THE NUMBER GIVEN TO QUESTION 1.b.] preschool children your office
considered for initial placement, for approximately how many have the ARD Committee
requested additional assessment information after the first assessment report was
received? .... _____ 27-29

10. In approximately how many cases did the ARD Committee agree with the conclusions of the assessment reports that indicated either the presence or absence of a handicapping condition? . . . . _____ 30-32

11. What does the ARD Committee look for when reviewing assessment data to determine if a child has a handicapping condition?

_____

_____

_____

_____

12. Of the [READ THE NUMBER GIVEN TO QUESTION 1.b.] preschoolers considered for initial placement this school year, in approximately how many cases did the assessment reports contain specific recommendations for services (e.g., "child needs speech therapy," "child needs a behavior modification program")? . . . . _____ 34-36

13. Of these cases with specific service recommendations, in approximately how many did the ARD Committee agree with the recommendation? . . . . _____ 37-39

14. Do you evaluate preplacement assessment reports from different agencies differently; for example, do you feel one agency consistently underestimates a child's capabilities? Do not name specific agencies, but answer in general terms.

_____

_____

_____

_____

15. Are there ways in which assessment reports could be improved to make placement decisions easier? What changes would you like to see?

_____

_____

_____

_____

121

16. Of the cases your office has considered for initial placement in the past school year, in approximately how many did you or someone on your staff explain the assessment results to the child's parents? .... _____ 40-42

IF ANSWER IS "0," GO TO QUESTION 18.

17. Under what circumstances would the Placement Office explain preplacement assessment results to parents?

_____

_____

_____

_____

18. Under what circumstances is preplacement assessment information that was received by the Placement Office sent to programs?

_____

_____

_____

_____

19. a. In approximately how many of the preschool cases with initial placements in public programs was the preplacement assessment information routinely sent to the child's program by the Placement Office (that is without any requests from the program to do so)? .... _____ 43-45

    b. In approximately how many of the preschool cases with initial placements in private programs was the preplacement assessment information routinely sent to the child's program by the Placement Office (that is without any requests from the program to do so)? .... _____ 46-48

20. a. Are all programs routinely sent the same information?
       [1=Yes; 2=No] .... _____   49

    b. IF NO, please explain what the differences are.

       _____

       _____

       _____

       _____

    c. Why are there differences?

       _____

       _____

       _____

       _____

THANK YOU VERY MUCH FOR YOUR COOPERATION.

123

Name of parent completing form: _____

The purpose of this questionnaire is to find out from parents/guardians (1) what happened at the meeting in which a decision was made regarding their child's needs for a special education and (2) how satisfied they were with the manner in which this decision was made.

Directions: The term *placement meeting* is used in this questionnaire to refer to the meeting with Placement Office personnel in which your child's needs for special education were discussed and a decision was made as to whether or not your child needed to receive services in a special education program.

To answer most of the questions you will be asked to write the number of your answer choice in a space to the right of each question.

Example:

1. Use the answer choices below to indicate whether or not each person listed went to your child's placement meeting.

Answer Choices:

1=Yes
2=No

a. Child's mother/female guardian .. ___1___

b. Child's father/male guardian ..... ___2___

An answer choice of "1" next to "child's mother/female guardian" means that she attended the placement meeting. An answer choice of "2" next to "child's father/male guardian" means that he did *not* attend the placement meeting.

Your answers will be coded to an identification number and all information will be kept strictly confidential.

MCPS 131-0623. revised 7/83

PLACEMENT PROCESS
Parent Questionnaire

1. Use the answer choices below to indicate whether or not each person listed went to your child's placement meeting.

Answer Choices:

1=Yes
2=No

a. Child's mother/female guardian .... _____   10

b. Child's father/male guardian .... _____   11

c. Your child .... _____   12

d. Other relative, friend, or neighbor .... _____   13

e. Legal counsel (lawyer) brought by you .... _____   14

f. Special education advocate brought by you .... _____   15

g. Someone else brought by you (Specify: _____) _____   16

2. For each of the 12 topics listed below use the answer choices to indicate which ones were discussed at the meeting between you and school personnel regarding the placement of your child in a special education program.

Answer Choices:

1=This was discussed at the meeting.
2=This was not discussed at the meeting.
3=I don't remember.

a. Your child's special education needs or problems .... _____   17

b. Your child's test results .... _____   18

c. The educational goals or objectives for your child this year .... _____   19

d. More than one special education program .... _____   20

e. Length of the school day in the special education program to which your child was assigned .... _____   21

f. The type of services which would be provided to your child (for example, speech therapy, physical therapy) .... _____   22

g. The amount of services which would be provided to your child (for example, the number of days in a week, the number of hours in a day) .... _____   23

h. The opportunity for your child to interact with nonhandicapped children .... _____   24

i. Transportation to the special education program .... _____   25

j. The availability of services to parents provided by the program to which your child was assigned .... _____   26

k. Your feelings about the placement decision .... _____   27

l. What you could do if you did not agree with the placement decision made for your child .... _____   28

125

3. Have you been involved in developing and/or approving your child's Individualized Education Plan (IEP) in any of the following ways?

Answer Choices:

1=Yes
2=No
3=I Don't Remember

a. Placement Office personnel asked your opinion about the content of your child's IEP .. _____ 29

b. Placement Office personnel explained your child's IEP to you .... _____ 30

c. Placement Office personnel asked you to sign your child's IEP .... _____ 31

4. Did you receive a copy of your child's IEP? .... _____ 32

Answer Choices:

1=Yes
2=No

5. Use the answer choices below to indicate how satisfied you were with the following:

Answer Choices:

1=Very satisfied
2=Somewhat satisfied
3=Neither satisfied nor dissatisfied
4=Somewhat dissatisfied
5=Very dissatisfied
6=Not applicable

a. How you were treated by Placement Office personnel during your first contact with them .... _____ 33

b. The help and information you received before the placement meeting .... _____ 34

c. How you were treated by Placement Office personnel during the placement meeting .. _____ 35

d. The amount of time scheduled for the placement meeting .... _____ 36

e. The encouragement you received from the Placement Office personnel to ask questions .... _____ 37

f. The willingness of the Placement Office personnel to discuss your concerns and questions .... _____ 38

g. The explanation you received from Placement Office personnel regarding the type of disability they believe your child has .... _____ 39

h. The explanation you received from Placement Office personnel regarding the level of services your child will receive .... _____ 40

i. The description given to you by Placement Office personnel about the program your child will be attending .... _____ 41

j. The placement decision made for your child .... _____ 42

k. The overall placement process .... _____ 43

BEST COPY AVAILABLE

126

6. Use the answer choices below to answer questions a and b.

Answer Choices:

1=Yes
2=No

a. Was the placement meeting conducted in the manner you expected? .... _____   44

b. Were the results of the placement meeting what you expected? .... _____   45

c. If your answer to either 6.a. or 6.b. was no, please explain briefly how what happened at the meeting was different from what you expected.

_____

_____

_____

_____

7. What changes would you like to see in the placement process?

_____

_____

_____

_____

8. Other comments:

_____

_____

_____

_____

Thank you for completing this questionnaire.

127

The purpose of this observation system is to obtain descriptive information about preschool special education placement meetings. Specifically, this system will describe the participants attending a placement meeting, the procedures followed, the issues discussed, the placement recommendation or decision made, and any follow-up responsibilities, parent closure or paperwork discussed at the meeting. The descriptive information obtained with this observation system could be used in an evaluation of the placement process or as a component of case studies of children placed in preschool special education programs.

Most of the information can be recorded as it happens during the placement meeting by noting whether or not the events listed on the observation form occur. The system was designed to be used by nonparticipant observers familiar with preschool special education placement procedures.

The observation system includes the following:

1. an observation form listing specific events to note or questions to answer,

2. detailed observation and coding directions, and

3. an observation code booklet (note that Agency/Program codes need to be defined for each school district or locality studied).

. 128

Preschool Evaluation Project
Montgomery County Public Schools
Rockville, Maryland

PLACEMENT MEETING
Observation Form

Form Code: 950   1-3   Age (months): _____ 13-14

Child ID: _____ .   4-6   Time meeting starts: _____

Date: _____ _____ _____   7-12   Time meeting ends: _____
            YR   MO   DA

Birthdate: _____ _____ _____   Length of meeting (minutes): _____ 15-16
            YR   MO   DA

129

I. **Descriptive Information on Participants (Refer to Code Booklet)**

A. Participants	B. Position (SEE CODES)	C. Agency/ Program (SEE CODES)	D. Provided Input 1=YES 2=NO	
1.				18-22
2.				23-27
3.				28-32
4.				33-37
5.				38-42
6.				43-47
7.				48-52
8.				53-57
9.				58-62
10.				63-67
11.				68-72
12.				73-77

E. Additional participants (1=YES, 2=NO) .... _____ 78

WHO? _____

_____

_____

_____

F. Twins (1=YES, 2=NO) .... _____ 79

80="1"

Dup 1-12

II. **Procedures** (1=YES, 2=NO, 8=NOT APPLICABLE IF PARENT(S)/GUARDIAN(S) NOT PRESENT)

A. Participants introduced: 1. by name .... _____ 13

2. by title/position/agency .... _____ 14

B. Participant name tags/cards or written list of attendees .... _____ 15

C. Purpose of the meeting stated .... _____ 16

D. Meeting process reviewed .... _____ 17

E. Chairperson (ENTER POSITION CODE) .... _____ 18-19

130

III. **Discussion Before and After the Placement Decision**

	Before	After	

A. **Student Background Information** (1=YES, 2=NO)

1. Child's age/birthdate .... _____ _____   20-21
2. Presenting problem .... _____ _____   22-23
3. Family/sibling information .... _____ _____   24-25
4. Developmental history .... _____ _____   26-27
5. Previous educational experience(s) .... _____ _____   28-29

B. **Assessment** (1=YES, 2=NO)

1. Testing agency(ies)/tester's title .... _____ _____   30-31
2. Date of testing .... _____ _____   32-33
3. Test results .... _____ _____   34-35
4. Testing agency recommendations .... _____ _____   36-37
5. Parental disagreement with results/recommendations .... _____ _____   38-39

C. **Functioning of Child** (1=YES, 2=NO)

1. Physical/medical/neurological .... _____ _____   40-41
2. Social/emotional/behavioral .... _____ _____   42-43
3. Cognitive .... _____ _____   44-45
4. Speech and Language .... _____ _____   46-47
5. Gross/fine motor .... _____ _____   48-49
6. Hearing .... _____ _____   50-51
7. Vision .... _____ _____   52-53
8. Self-help .... _____ _____   54-55
9. Readiness for program .... _____ _____   56-57

D. **Placement Considerations** (1=YES, 2=NO)

1. Child's general programming goals/needs .... _____ _____   58-59
2. Availability (slots) .... _____ _____   60-61
3. Cost/funding .... _____ _____   62-63
4. Programming alternatives/options .... _____ _____   64-65
5. Program pros and cons .... _____ _____   66-67
6. Interactions with nonhandicapped peers .... _____ _____   68-69

E. **Additional Considerations** (1=YES, 2=NO)

1. Proximity and transportation .... _____ _____   70-71
2. Family/child attitude toward potential placement .... _____ _____   72-73
3. Impact on family .... _____ _____   74-75
4. General parent concerns/questions expressed .... _____ _____   76-77
5. General parent concerns/questions responded to .... _____ _____   78-79

80="2"

Dup 1-12

IV. Discussion Specific to the Placement Decision/Recommendation

(1=YES, 2=NO, 8=NOT APPLICABLE—"C" ONLY)

	A. Differences of Opinion 1=YES, 2=NO	B. Decision/ Recommendation (SEE CODE BOOKLET)	C. Explained to Parents 1=YES, 2=NO, 8=NA	
1. Disability Code				13-16
2. Level of Service				17-19
3. Related Services				20-27
4. Program				28-31

D. Additional Information about Placement Decision/Recommendation

   1. Secondary disability code (1=YES, 2=NO) (Specify: _____) _____   34

   2. More than three related services specified (1=YES, 2=NO) (Specify: _____) _____   35

   3. Related services not specified in vote/consensus (1=YES, 2=NO) (Specify: _____) _____   36

   4. Programs being considered:_____

E. Regarding the placement decision/recommendation, what options were considered? ... _____   37

    Answer Choices:

    1=New options were created or recommended.
    2=Existing options/classes were supplemented/altered.
    3=Additional classes within existing options were opened.
    4=Only existing placement(s) within the district were considered.
    9=No options were considered; child determined not handicapped.

F. How did the Placement Team reach a decision/recommendation for placement? .... _____   38

    Answer Choices:

    1=By group consensus
    2=By formal vote of *all* present
    3=By formal vote of *some* present
    4=Other (Specify: _____)

G. Is the child currently being served by any special education service provider or agency?
   (1=YES, 2=NO) .... _____   39

H. The child is currently being served by: .... _____   40

    Answer Choices:

    1=The same service provider/agency as the one decided
     upon/recommended by the Placement Team.
    2=A different service provider/agency than the one decided
     upon/recommended by the Placement Team.
    3=The child is not currently being served.

I. Specifically concerning the appropriateness of the placement decision/recommendation:

   (1=YES, 2=NO, 8=NOT APPLICABLE—PARENT(S)/GUARDIAN(S) NOT PRESENT)

   1. Were parent concerns/questions expressed? .... _____   41

   2. Were parent concerns/questions responded to? .... _____

J. Did the parents arrive after the decision/recommendation was made?

   (1=YES, 2=NO, 8=NOT APPLICABLE—PARENT(S)/GUARDIAN(S) NOT PRESENT) .. _____   43

132

V. **Follow-up Responsibilities** (1=YES, 2=NO)

    A. Additional testing or reevaluation . . . . _____ 45

    B. Parent visits to program(s) . . . . _____ 46

    C. Short term monitoring . . . . : . . . . _____ 47

    D. Other programming/services desirable for child (outside of placement/related services) . _____ 48

    E. Parenting/home education suggestions . . . . _____ 49

    F. Contacting parent (CODE 8=NOT APPLICABLE IF PARENT(S)/GUARDIAN(S) PRESENT) . . . . _____ 50

VI. **Parent Closure** (IF PARENT(S)/GUARDIAN(S) NOT PRESENT, CODE 8=NOT APPLICABLE)

    A. Next steps in process explained to parents (1=YES, 2=NO) . . . . _____ 52

    B. Due process rights/appeal process . . . . _____ 53

Answer Choices:

1=Mentioned
2=Explained
3=Written materials provided
4=Mentioned and written materials provided
5=Explained and written materials provided
6=Not addressed

VII. **Forms/Paperwork** (1=YES, 2=NO)

    A. Is the school district IEP reviewed with parents? (CODE 8=NOT APPLICABLE IF PARENT(S)/GUARDIAN(S) NOT PRESENT) . . . . _____ 55

    B. Is program IEP follow-up assigned? . . . . _____ 56

VIII. **Other Notes of Interest**

_____

_____

_____

_____

80="3"

BEST COPY AVAILABLE

133

DIRECTIONS FOR PLACEMENT MEETING OBSERVATION SYSTEM

PREPARATION

Before the placement meetings begin, the observer should find an unobtrusive seat from which to observe the proceedings. As participants are introduced, the observer should identify himself/herself as an "observer of the placement process" rather than as a participant.

CODING INSTRUCTIONS

The Placement Team will usually convene to discuss several cases. Before each case is discussed, complete the child ID, the date of the meeting, the child's birthdate and the time that the meeting begins at the top of the form:

Child ID

A decision rule should be made prior to conducting the observation as to how identification numbers (IDs) will be assigned to children. Space is provided on the coding sheet to record a three-digit ID.

Date and Birthdate

Record the date of the meeting and the child's birthdate as follows: year, month, day—e.g. 821016 for October 16, 1982. The birthdate should be available prior to the meeting. "Age" in months can then be calculated by subtracting the birthdate from the date of the placement meeting. Round 15 or more days to one month.

Time

At the introduction of each case or when the participants are introduced, note the "time meeting starts." Note the "time meeting ends" when the parents have departed, or if the parents were not present, when the discussion of a given case has been completed. "Length of meeting" in minutes can then be calculated.

I. **Descriptive Information on Participants**

A. **Participants**

List each participant as he/she is introduced by noting sufficient information to code his/her position and agency/program affiliation. If participants are not introduced, determine after the meeting who they are, their position and their agency/program affiliation. List everyone who attends the meeting. Include participants who arrive after the discussion has begun or who leave before the discussion has ended. See item E below regarding which participants to list if more-than 12 are present.

B. **Position (See Attached Codes)**

Position is the role of the participant most relevant to the placement process. However, note that:

1. Whenever possible, members of the Placement Team should be coded according to their role outside the team (e.g., a representative of the Health Department should be coded as a "Nurse" or "Physician").

2. Other participants should be coded according to their specific title if it can be determined (e.g., as "Psychologist" or "Speech Therapist").

3. Different codes have been provided for parent(s)/guardian(s) and for the other people who may be representing the parents at the meeting (e.g., parent surrogate/substitute, parent advocate). If the parent(s)/guardian(s) are not present, consider the parent/guardian representative as the "parent" for the following "parent" items: Section II, items A-D; Section III, items B.5, E.4 and E.5; Section IV, items C.1-4, I.1, I.2 and J; Section VI; and Section VII, item A. This covers all "parent" items except Section V, item F which specifically refers to the child's biological/adoptive parent(s) or .legal guardian(s).

4. Code "99" if information is not available.

C. **Agency/Program (See Attached Codes)**

Agency/Program is the agency or program affiliation of the participant. Before the observation is conducted agencies/programs/departments that serve the school district's preschoolers need to be assigned identification codes. Codes can range from 01 to 99. Some general agencies/programs have been listed in the code booklet, but these can be changed depending on the situation in your school district. Note that the child and his/her family members are "not representing an agency/program" (code 77).

D. **Provided Input** (1=Yes, 2=No)

As the discussion proceeds, code whether or not each participant contributed to the discussion (i.e., provided any information relevant to the placement meeting such as questions or comments regarding the child's functioning or behavior, programming needs, program alternatives, etc.).

E. **Additional Participants**

If 12 or less participants attend the placement meeting, *Code 2=No.* If more than 12 people attend the meeting, *Code 1=Yes* and specify the position and agency/program affiliation of additional participants. In this event, list most important participants (e.g., Placement Team members, parents, parent representatives, child, program representatives) on lines 1-12 and specify less important participants (e.g., other family members, observers) below the chart.

F. **Twins**

Code 1=Yes if the child being discussed is the twin sibling of another child also to be discussed; *Code 2=No* if not.

THE INFORMATION TO BE CODED IN SECTIONS II-VII SHOULD BE OBTAINED DURING THE COURSE OF THE MEETING.

II. **Procedures**

Use the following codes for items A-D:

1=**Yes**, it occurred.
2=**No**, it did not occur.
8=**Not Applicable** (i.e., if the parent(s)/guardian(s) are not present)

A. **Participants Introduced:**

1. **by name** —Are the participants introduced by name?

2. **by title/position/agency** —Does the participant indicate his/her title, position, or agency affiliation?

B. **Participant name tags/cards or written list of attendees**—Do the participants have name tags or cards, or has a written list of attendees been distributed to the parents?

C. **Purpose of the meeting stated**—Is the meeting's goal or the meeting's expected outcome explicitly stated (e.g., is it made clear to the parents that the outcome of the meeting will be a placement recommendation)?

D. **Meeting process reviewed**—Is a description of what will occur during the meeting reviewed or outlined?

E. **Chairperson (See Attached Position Codes)**—What is the position of the person who directs the meeting?

III. **Discussion Before and After the Placement Decision**

Use the following codes for Items A through E:

1=**Yes**, it is mentioned
2=**No**, it is not mentioned.

Code each topic in terms of whether it is/is not mentioned:

    a. **before** the placement decision is made (left hand column), and
    b. **after** the placement decision is made (right hand column).

A. **Student Background Information**

1. **Child's age/birthdate**

2. **Presenting problem** (specify)—the delay, deficit or condition which suggests consideration for placement in a preschool special education program (e.g., expressive language delay, hard of hearing, Down's Syndrome). Note that this item refers to a discussion of the child's problem only as a rationale for possible special education placement. 135

3. **Family/sibling Information**—any discussion of the family or siblings (e.g., number of siblings, handicapping conditions of family members, family relationships, family interaction patterns, background information on parents).

4. **Developmental history**—any information regarding pregnancy and delivery, a history of medical problems or developmental milestones in previous years.

5. **Previous educational experience(s)**—any discussion of whether or not the child is or has ever been enrolled in a program or worked with a therapist. Note that "Yes" indicates that the subject was mentioned, but not necessarily that the child has had a previous educational experience.

B. **Assessment** refers to testing done prior to the placement meeting.

1. **Testing agency(ies)/tester's title**—includes any mention of at least one testing agency or tester (by title—name is not sufficient).

2. **Date of testing**—must mention at least month and year to code "yes."

3. **Test results**—includes test scores, developmental ages/quotients, medical diagnoses.

4. **Testing agency recommendation**—does the testing agency suggest a specific service or program that the child needs?

5. **Parental disagreement with results/recommendations**—code "yes": (a) if the parent(s) express any reservations regarding the accuracy of any of the test results or the testing agency's recommendations, or (b) if the parent(s)/guardian(s) are not present and someone reports the parents' disagreement with any of the test results or the testing agency's recommendations.

C. **Functioning of the Child**

1. **Physical/medical/neurological**—includes the child's physical limitations/strengths, neurological status, medication needs or medical condition (where gross/fine motor, hearing or vision are not specifically mentioned).

2. **Social/emotional/behavioral**—includes the child's ability to function in an environment with or without previously known individuals; the child's self-concept, behavior, style of interaction or play skills with others; or any emotional or behavioral problems/strengths (e.g., hyperactivity, fears, fantasies, ability to adjust to change).

3. **Cognitive**—includes skills related to the child's comprehension, intellectual functioning, memory; knowledge of facts, concepts; ability to imitate, learn, solve problems, think, etc.

4. **Speech and Language**—includes oral motor functioning, articulation, intelligibility, receptive and expressive language (e.g., ability to answer questions and follow directions, use of nouns and verbs).

5. **Gross/fine motor**—any aspect of the child's gross motor functioning, i.e., skills involving use of large muscles where strength and coordination are involved (e.g., throwing, catching, jumping, hopping, standing still, crawling, walking, balancing); or any aspect of the child's fine motor functioning, i.e., use of delicate motor systems where precision is required and where visual, perceptual or sensory integration may be involved (e.g., handwriting, copying figures, buttoning, block building, cutting).

6. **Hearing**—any discussion related to hearing functioning (e.g., hearing test results, hearing aid function).

7. **Vision**—includes any mention of vision functioning other than visual-motor integration (e.g., visual acuity, need for glasses).

8. **Self-help**—includes any aspect of child's ability to function effectively in his environment, e.g., self-care areas such as feeding/eating, toileting, dressing; ability to make his wants known.

9. **Readiness for program**—skills/deficits regarding the child's readiness to benefit from a preschool program such as stimulatibility, attention span, work habits, attitudes, ability to adapt to a new situation.

D. **Placement Considerations**

1. **Child's general programming goals/needs**—any specific discussion of what the child needs in terms of programming (type or intensity of program, related services, etc.) or what the child's program/IEP goals should be.

2. **Availability (slots)**—any mention of whether certain types of programs are available in the school district or whether positions are open in a specific program.

3. **Cost/funding**—any discussion of what any aspect of the program/service will cost, who will pay for it, alternative sources of funding, etc.

4. **Programming alternatives/options**—any mention of alternative programs or adjustment of existing program(s) which could meet the child's needs.

5. **Program pros and cons**—any discussion of the advantages/disadvantages of one or more programs in terms of staffing, services provided, location, frequency and duration, types of children served, etc.

6. **Interaction with nonhandicapped peers**—any mention of opportunities (or lack of) for mainstreaming/ interaction with nonhandicapped peers.

E. **Additional Considerations**

1. **Proximity and transportation**—any discussion of location of the program/services or how the child will get there.

2. **Family/child attitude toward potential placement**—any mention of how the family/child feels or might feel about a placement being discussed.

3. **Impact on family**—any discussion of any psychological, social, or emotional effect(s) that the child's placement might have on the family.

4. **General parent concerns/questions expressed**—did the parents ask any questions or voice concerns during the meeting regarding their child, any programs/placements being discussed, the meeting itself, etc.? Note that parent concerns/questions can be reported by others if the parent(s)/guardian(s) are not present. Also note that concerns/questions specific to the appropriateness of the placement decision/recommendation are to be coded in Section IV, item I.

5. **General parent concerns/questions responded to**—did someone at the meeting respond in any way or at least acknowledge these concerns/answer these questions?

IV. **Discussion Specific to the Placement Decision/Recommendation**

As the placement decision/recommendation is being determined, complete the decision grid according to the specifications and definitions below.

Answer questions A and C below as to whether or not they occurred, i.e., **Code:**

1=**Yes**, it occurred.
2=**No**, it did not occur.
8=**Not Applicable** (for item C only—see specifications below)

Note that question B is to be handled differently—see below.

A. **Differences of Opinion**—Were different points of view expressed regarding items 1-4 below? Discussion must go beyond merely mentioning different alternatives to actually offering different opinions on the decision/recommendation to be made regarding these items:

1. **Disability code/handicapping condition**—Was there any discussion of different possible disability codes to assign to the child? (e.g., "hard of hearing" vs. "deaf," "multiple handicapped" vs. "mentally retarded," "speech and language impairment" vs. "child in need of assessment" or "child determined not handicapped").

2. **Level of service**—This refers only to a discussion of different levels of service for the child's program placement and not to alternative levels of service for any ancillary related services being discussed. Levels of service may be discussed specifically in terms of levels 1-7 or in terms of program characteristics which determine level of service. These characteristics are:

   a. setting of service (i.e., general education program, special program, self-contained classroom, special center, residential program, home, hospital),

   b. nature of service (i.e., consultative vs. direct, itinerant vs. within program),

   c. amount/frequency of service (i.e., hours per day, days per week) and

   d. minimum staffing ratio (i.e., maximum caseload or class size per teacher).

3. **Related services**—In general, this refers to discussions of the child's related service needs rather than to what related services a particular program can provide. Specifically, code "yes" if there are different points of view regarding:

   a. whether the child should or should not receive a particular related service or

   b. what level of related service the child should receive—e.g., level 1 (monitoring or assessment of) vs. level 2 (itinerant therapy in) speech.

4. **Program**—Was there any discussion of different possible program placements for the child? (e.g., different service providers or different programs by the same service provider.)

B. **Decision/Recommendation**—Code the final decision or recommendation made at the placement meeting, using the codes listed in the attached "Code Booklet for Placement Meeting Observation System" regarding:

1. **Disability code/handicapping condition**—If child is assigned more than one disability code, code primary handicapping condition in grid and note secondary disability code(s) below grid, item D.1.

2. **Level of service**—If the child is to receive more than one service, code the highest level of service to be received.

3. **Related services**—Code up to three; note additional related services below grid, item D.2. Code only those related services included in the group consensus or voted on as part of the Placement Team's recommendation or decision. Note below the grid, item D.3, any related services recommended/decided upon but not specified in the vote/consensus.

4. **Program**—Code the program in which the child is recommended to be placed; if a nonpublic recommendation is made but only one program is being considered, code that program; use code 88="program undetermined" if more than one program is being considered or if a specific program is not recommended/decided upon. Specify below the grid, item D.4, the programs being considered. Also use Code 88="program not specified" if child is determined not handicapped.

C. **Explained to Parents**—Was the decision made regarding the following items explained *directly* to the parents in lay language?

1. Was the **disability code** number translated into words?

2. Was the **level of service** number defined in words or explained in terms of the characteristics listed under item A.2 above?

3. Were the **related services** described (e.g. what OT/occupational therapy entails)?

4. Was the **program** described in any fashion (e.g., type of children served, staffing, philosophy, physical plant, location, frequency, duration)?

   Note: *Code 8=Not Applicable* for C.1-C.4 if the parent(s)/guardian(s) are not present. *Code 8=Not Applicable* for C.3 and/or C.4 if the parent(s)/guardian(s) apparently require no explanation of the decisions/recommendations made regarding related services or program because their child has previously received that related service or program. *Code 8=Not Applicable* for C.3 if no related services are discussed. *Code 8=Not Applicable* for C.1-C.4 if child is determined not handicapped.

D. **Additional Information about Placement Decision/Recommendation**

1. **Secondary disability code** —If a secondary disability code is assigned in B.1 above, *Code 1=Yes* and specify on 'orm; if not, *Code 2=No*.

2. **More than three related services specified**—If more than three related services were included in the group consensus or voted on in B.3 above, *Code 1=Yes* and specify on form; if not, *Code 2=No*.

3. **Related services not specified in vote/consensus**—If additional related services are specified after the vote/consensus in B.3 above, *Code 1=Yes* and specify on form; if not, *Code 2=No*.

4. **Programs being considered**—If a specific program is not recommended/decided upon and more than one program is being considered in B.4 above, specify the programs being considered on the form.

133

ONCE THE PLACEMENT DECISION/RECOMMENDATION HAS BEEN MADE, ANSWER QUESTIONS E, F AND H ACCORDING TO CHOICES ON OBSERVATION FORM, AND QUESTIONS G, I AND J: 1=YES, 2=NO.

E. **Regarding the placement decision/recommendation, what options were considered?**—Code the answer choice below which describes the program option(s)/alternative(s) that were considered or discussed prior to making a placement decision/recommendation. If more than one *type* of option was considered, code the *lowest numbered* option discussed.

> **Answer Choices:**
>
> 1=New options were created or recommended.
> 2=Existing options/classes were supplemented/altered.
> 3=Additional classes within existing options were opened.
> 4=Only existing placement(s) within the district were considered.
> 9=No options were considered; child was determined not handicapped.

F. **How did the Placement Team reach a decision/recommendation for placement?**—Code the answer choice below which best describes the decision-making mechanism employed by the Placement Team to reach a final placement decision:

> **Answer Choices:**
>
> 1=By group consensus (i.e., there was no formal vote but participants appeared to be in general agreement with the decision.)
> 2=By formal vote of all present (i.e., all meeting participants vote by voice, hand, or ballot on the final placement decision.)
> 3=By formal vote of some present (i.e., only some of the meeting participants, e.g., the Placement Team members, vote by voice, hand or ballot on the final placement decision.)
> 4=Other (Specify on form.)

G. **Is the child currently being served by any special education service provider or agency?**—Include working with a therapist or enrollment in a special education program.   (1=YES, 2=NO)

H. **The child is currently being served by:**

> **Answer Choices:**
>
> 1=The same service provider/agency as the one decided upon/ recommended by the Placement Team.
> 2=A different service provider/agency than the one decided upon/ recommended by the Placement Team.
> 3=The child is not currently being served.

I. **Specifically concerning the appropriateness of the decision/recommendation:**

(1=YES, 2=NO, 8=NOT APPLICABLE—PARENTS(S)/GUARDIAN(S) NOT PRESENT)

1. **Were parent concerns/questions expressed?**

2. **Were parent concerns/questions responded to?**

Note that this item refers only to concerns/questions expressed/responded to *specifically* regarding the appropriateness of the placement decision/recommendation. See Section III, items E.4 and E.5 to code more general parent concerns.

J. **Did the parents arrive after the decision/recommendation was made?**—*Code 1=Yes, 2=No* in response to the question if the parent(s)/guardian(s) are present during any part of the meeting. If yes, code the content of the meeting both before and after the parents' arrival. *Code 8=Not Applicable If Parent(s) Guardian(s) Not Present.*

139

V. Follow-up Responsibilities

THIS SECTION REFERS GENERALLY TO THE DISCUSSION OF ACTIVITIES TO BE PERFORMED **AFTER** THE PLACEMENT MEETING.

Code: 1=Yes, 2=No to indicate whether topics A-F were mentioned at any time during the placement meeting.

A. **Additional testing or reevaluation** —any assessment to be done after the placement meeting, either before or during program placement. Include follow-up screenings; do not include additional testing, assessment or evaluation specified as a related service.

B. **Parent visits to program(s)**—any visits by the parent(s)/guardian(s) to any program(s) *before* the child starts attending a program. Include any mention of program visits by parents that have already occurred.

C. **Short-term monitoring**—any monitoring by school district personnel of the child's performance within 60 days after entering a program.

D. **Other programming/services desirable for child**—any programming/services outside of the placement and/or related services recommended for child—(e.g., regular preschool or group play experience, private therapy, summer programs). Code additional testing under item A above.

E. **Parenting/home education suggestions**—specific suggestions of activities or methods the parents can try with their child outside of the program.

F. **Contacting parent**—any discussion of how and by whom the parent will be contacted regarding the outcome of the placement meeting IF PARENT(S) GUARDIAN(S) NOT PRESENT. CODE 8=NOT APPLICABLE IF PARENT(S) GUARDIAN(S) PRESENT. Note that this "parent" item refers only to the child's biological/adoptive parent(s) or legal guardian(s).

VI. Parent Closure (CODE 8=NOT APPLICABLE IF PARENT(S)/GUARDIAN(S) NOT PRESENT)

A. **Next steps in process**—*Code 1=Yes, 2=No* to indicate whether the next steps in the process are explained to the parents.

B. **Due process rights/appeal process** —Code one of the answer choices below to indicate whether or not this topic is addressed and in what manner:

Answer Choices:

1=Mentioned—Are due process rights/the appeal process merely mentioned to the parents?

2=Explained—Are due process rights/the appeal process explained to the parents?

3=Written materials provided—Are the parents given written materials which discuss due process rights/the appeal process?

4=Mentioned and written materials provided—Do both items 1 and 3 above occur?

5=Explained and written materials provided—Do both items 2 and 3 above occur?

6=Not addressed—Are due process rights/the appeal process not even mentioned during the placement meeting?

VII. Forms/Paperwork

Code: 1=Yes, 2=No to answer the following questions:

A. Is the school district IEP reviewed with parents? (CODE 8=NOT APPLICABLE IF PARENT(S)/GUARDIAN(S) NOT PRESENT)

B. Is program IEP follow-up assigned? (i.e., is there any discussion of who will see that an IEP is developed by the child's program?)

VIII. Other Notes of Interest

In this section indicate anything that occurred in the meeting that was not specifically coded that will help interpret the data that was coded.

140

CODE BOOKLET FOR PLACEMENT MEETING OBSERVATION SYSTEM

SECTION   **CODES**

I.B.&II.E.   **Position**

01=Audiologist/Hearing Impaired Specialist
02=Child being considered for placement
03=Educational Diagnostician
04=Father/Male Guardian
05=Mother/Female Guardian
06=Nurse
07=Occupational Therapist
08=Parent Advocate
09=Parent Attorney
10=Parent Surrogate/Substitute (Specify relationship to child on form.)
11=Physical Therapist
12=Physician
13=Placement Specialist
14=Program Director/Representative
15=Psychiatrist
16=Psychologist
17=School District Special Education Administrative Personnel
18=School District Elementary Education Administrative Personnel
19=School District Pupil Services Personnel
20=School District Transportation Personnel
21=School Principal
22=Social Worker/Protective Services Worker
23=Speech Therapist
2.'=Teacher, Regular
25=Teacher, Special Ed
26=Vision/Visually Handicapped Specialist
77=Other family member (Specify on form.)
88=Other (Specify on form.)
99=Position not specified/Information not available

I.C.&IV. B.4.   **Agency/Program**

01=Child Find
02=Easter Seal Treatment Center
03=Head Start
04=Health Department
.=_____
.=_____
.=_____
.=_____
20=Other private program
21=Hospital/University
22=Private Diagnostician
23=Private Physician
24=Other assessment agency
66=Other (Specify on form.)
77=Not representing agency/program
88=Program undetermined/not specified (for IV.B.4)
99=Agency/Program not specified/not available (for I.C.)

141

SECTION	CODES
IV.B.1.	**Disability Code/Handicapping Condition**

01=Mentally Retarded
02=Hard of Hearing
03=Deaf
04=Speech/Language Impaired
05=Visually Handicapped
06=Seriously Emotionally Disturbed
07=Orthopedically Impaired
08=Other Health Impaired
09=Specific Learning Disability
10=Multiply Handicapped
11=Child in Need of Assessment
12=Deaf/Blind
88=Child determined not handicapped
99=Disability Code not specified

IV.B.2.   **Level of Service**

1=Level I: The child is served in the general education program. Consultant services are provided to general education instructional staff.
2=Level II: The child is in a special program up to one hour per day. Services include specialized instruction, speech, physical, occupational therapy, etc.
3=Level III: The child is served in a program up to three hours a day. Services include those listed above.
4=Level IV: The child is served full-time in a special class which is housed in a general education building. Special Education programming is conducted in a self-contained classroom; therapies are provided as needed.
5=Level V: The child is served in a special center which serves only handicapped children. The program includes a range of services provided in a specially designed facility.
6=Level VI: The child is served in a residential program. This is a 24-hour program for severely handicapped students with a need for multiple services.
7=Level VII: The child is served at home or in a hospital. Itinerant instructional services are provided to children with physical disabilities or medical conditions which restrict them from attending a school-based program. The itinerant teacher serves as a resource to the parent in suggesting activities which would enhance the child's development.

9=   No level of service specified; child determined not handicapped.

IV.B.3.   **Related Services** —Definitions have been provided for those services where clarification may be necessary.

01=Audiological Evaluation (and services as needed)
02=Audiological Services/Interpretation for the Hearing Impaired
03=Medical Services for Diagnosis and Evaluation - services provided by a physician specifically to determine a child's medically related handicapping condition.
04=Occupational Therapy
05=Occupational Therapy Evaluation (and services as needed)
06=Parent Counseling/Training - parent counseling or training specifically regarding the child's special needs or information about child development.
07=Other Counseling Services - counseling services provided to the child (and his/her family) by social workers, psychologists, guidance counselors or other qualified personnel.
08=Physical Therapy
09=Physical Therapy Evaluation (and services as needed)
10=Psychiatric Consultation - services provided by psychiatrists directly to students or to teachers of those students.

SECTION   CODES

11=Psychological/Educational Assessment - administering and interpreting psychological and educational tests and other assessment procedures (e.g., interviews, behavioral evaluations); consulting with teachers in planning programs to meet the child's special needs as indicated by these assessments.

12=Speech & Language Evaluation (and services as needed)

13=Speech Therapy

14=Transportation

15=Vision Assessment/Evaluation

16=Other Vision Services

77=Other (Specify on form.)

88=Related service(s) to be determined

99=No related service specified

Office Use

Form Code: 555	1-3
County Code: _____	4-5
Position Code: _____	6-7
Interviewer ID: _____	8-9
Record No.: 1	10

Job Title of Person Being Interviewed: _____

Interviewer: _____

Directions [To Be Read]: The Maryland State Department of Education states that the Admissions, Review, and Dismissal Committee shall provide for the review of each child's progress within 60 days after initial placement. The questions that follow ask about the role of Placement Office personnel in the sixty-day review process for preschool handicapped children.

1. How many sixty-day reviews for preschool handicapped children have Placement Office personnel participated in this school year? . . . . _____ 11-13

    IF THE ANSWER TO QUESTION 1 IS "ZERO," STOP THE INTERVIEW HERE.

2. Under what circumstances did the Placement Office participate in sixty-day reviews?

    _____

    _____

    _____

    _____

3. How many Placement Office staff participated in sixty-day reviews for preschool handicapped children this school year? . . . . _____ 14-15

4. For what percentage of the sixty-day reviews in which Placement Office personnel participated this school year, did more than one Placement Office member work on the same review? [FOR 100%, CODE 99.] . . . . _____ 16-17

5. For what percentage of the sixty-day reviews in which the Placement Office participated this school year were each of the following professionals involved? [FOR 100%, CODE 99.]

Audiologist . . . . _____ 18-19

Child's parent or legal guardian . . . . _____ 20-21

Classroom Teacher . . . . _____ 22-23

Educational Diagnostician . . . . _____ 24-25

Nurse . . . . _____ 26-27

Occupational Therapist . . . . _____ 28-29

Parent Educator/Coordinator . . . . _____ 30-31

Physical Therapist . . . . _____ 32-33

Physician . . , ... _____ 34-35

Program Director . . . . _____ 36-37

Psychiatrist . . . . _____ 38-39

Psychologist . . . . _____ 40-41

Social Worker . . . . _____ 42-43

Speech Therapist . . . . _____ 44-45

Vision Specialist . . . . _____ 46-47

Other (Specify: _____ _____) _____ 48-49

Other (Specify: _____) _____ 50-51

6. For what percentage of the sixty-day reviews in which the Placement Office participated this school year, did its personnel perform the following activities? [FOR 100%, CODE 99.]

Observing child before the review . . . . _____ 53-54

Reviewing reports of child's progress . . . . _____ 55-56

Scheduling sixty-day reviews with program or county staff . . . . _____ 57-58

Notifying parents when a sixty-day review was to be held . . . . _____ 59-60

Conducting sixty-day review meetings with program or county staff . . . . _____ 61-62

Monitoring (visiting or calling a program about child's progress/adjustment to new placements) . . . . _____ 63-64

Documenting the results of the sixty-day review meeting . . . . _____ 65-66

Sending the results of a sixty-day review to parents who did not attend the meetings . _____ 67-68

Other (Specify: _____) _____ 69-70

Other (Specify: _____) _____ 71-72

Office Use   5 0 4 _____ 2   1-10

145

7. a. Of the sixty-day reviews in which Placement Office personnel participated this school
      year, for what percentage were formal meetings held? [FOR 100%, CODE 99.] . . . . _____ 11-12

   b. What percentage of these meetings were attended by parents . . . . _____ 13-14

8. In what percent of the sixty-day reviews in which Placement Office personnel participated this school
   year, were the following items considered? [FOR 100%, CODE 99.]

   Appropriateness of placement . . . . _____ . 15-16

   Type of related services needed . . . . _____ 17-18

   Amount of services needed . . . . _____ 19-20

   Appropriateness of IEP long-term goals . . . . _____ 21-22

   Appropriateness of IEP short-term objectives . . . . _____ 23-24

   Child's strengths and weaknesses . . . . _____ 25-26

   Child's test performance . . . . _____ 27-28

   Family problems/needs . . . . _____ 29-30

   Other (Specify: _____) _____ 31-32

9. List some of the things that indicate to you that a child's placement may be inappropriate.

   _____

   _____

   _____

   _____

146

10. Is there a uniform set of written guidelines for determining if a child's placement is inappropriate? [1=YES, 2=NO] .... _____ 33

IF YES, OBTAIN COPY OF GUIDELINES AND SKIP TO QUESTION 12.

IF NO, CONTINUE TO QUESTION 11.

11. If there are no written guidelines, how are decisions made regarding the appropriateness of the child's placement?

_____

_____

_____

_____

12. a. Of the sixty-day reviews in which the Placement Office personnel participated this school year (refer to Question 1), how many resulted in a recommendation that the child's placement be changed? [RIGHT JUSTIFY RESPONSE; CODE 999 FOR DON'T KNOW.] .... _____ 34-36

    b. In how many of these cases was the recommendation carried out? .... _____ 37-39

13. a. Of the sixty-day reviews in which the Placement Office participated during the past school year, excluding those whose placements were changed, how many resulted in a recommendation for a change in the child's IEP? [RIGHT JUSTIFY RESPONSE; CODE 999 FOR DON'T KNOW.] .... _____ 40-42

    b. In how many of these cases was the recommendation carried out? .... _____ 43-45

14. In addition to a change in placement or IEP, what other kinds of decisions or recommendations were made as a result of a sixty-day review?

_____

_____

_____

_____

15. Do you think sixty-day reviews serve a useful purpose? .... _____ 46
    IF YES, WHY?

    _____

    _____

    _____

    _____

    IF NO, WHY NOT?

    _____

    _____

    _____

    _____

16. What aspects of the sixty-day review process work well?

    _____

    _____

    _____

    _____

17. What recommendations do you have for other school districts or your own that could improve the sixty-day review process?

    _____

    _____

    _____

    _____

148

Name of Respondent: _____   _____

Job Title of Respondent: _____

Program Name: _____

The purpose of this questionnaire is to obtain your views regarding the appropriateness of the placement recommendations for children referred to your program by the Admission, Review and Dismissal Committee. The phrase "appropriateness of placement" as it is used here refers to a good match between the child's age and ability with that of the other children in your program and between the services the child needs and the services your program offers.

Most of the questions are open-ended, i.e., you must write your answer to the questions in your own words. Some of the questions ask you to indicate the number of children who fall into certain categories and one question asks you to respond by choosing an answer from a list of possible choices.

Your candid reply to this questionnaire is needed to provide the Placement Office with information that will help them to improve their placement process. Your responses will be kept confidential.

Thank you for your time and cooperation.

APPROPRIATENESS OF PLACEMENT
Program Director Questionnaire

Office Use

Form Code:	1-3
Program Code:	4-5

1. a. How many children were placed in your program for the first time this school year by the
       Admission, Review and Dismissal Committee? .... _____ 6-8

    b. Of these children, approximately how many would you say were "appropriately" placed in
       your program? .... _____ 9-11

2. Please give a brief description (ability level, age, primary handicapping condition, educational needs, etc.)
    of the type(s) of children that you believe were *inappropriately* placed in your program?

    _____

    _____

    _____

    _____

3. Please explain why you believe these children were *inappropriately* placed in your program?

    _____

    _____

    _____

    _____

4. How satisfied are you with the ability of the placement committee to appropriately place chil-
    dren in your program? .... _____ 12

    Answer Choices:

    1=Very satisfied
    2=Somewhat satisfied
    3=Neither satisfied; nor dissatisfied
    4=Somewhat dissatisfied
    5=Very dissatisfied

5. What suggestions do you have that would increase the ability of the Placement committee to appropriately
    place children in your program?

    _____

    _____

    _____

    _____

BEST COPY AVAILABLE

150

The purpose of this outline is to provide the evaluator with an organizational framework to integrate and summarize the various phases of the placement process into a complete picture for a given child. The information needed to compile a case study following this outline can be found by reviewing the student records and summarizing the data obtained from several of the questionnaires provided in the other subcomponents of the Placement Process Component. The source of information for the various categories on the outline are suggested parenthetically on the form.

151

Case Study Outline

I. Child and Family Background (Source: student records)

   A. Date of birth
   B. S_;
   C. Race
   D. Number of siblings
   E. Birth order
   F. Description of parents (education, occupation, etc.)

II. Reason for Referral to Placement Office (Source: student records)

III. Chronology of Placement (Source: student records)

   A. When and what problems were first noted by parents.
   B. Dates and types of testing.
   C. Contacts with placement office.
   D. Date of placement meeting.
   E. Date of sixty-day review.

IV. Previous Educational Experience and Background (Source: student records)

Date Began	Name of School	Type of School	Months in Attendance

V. Assessment History by Ability Area (Source: student records)

VI. Summary of Placement Meeting (Source: Placement Meeting Observation System, minutes of placement meeting)

   A. Date
   B. Participants
   C. Major concerns discussed
   D. IEF Goals
   E. Placement decision (handicapping condition/program/services/level)

VII. Parent Perspective of Placement Process (Source: Placement Meeting Parent Questionnaire)

152

COMPONENT: Placement Process

_____

Special Notes on the Instruments

_____

SUBCOMPONENT: Intake Review Process

Intake Review Process, Placement Office Interview

Before you use this instrument be sure to read Description of the Different
Types of Instruments in the Appendices. This will point out some of the
characteristics of interviews you will need to know in order to use this
instrument effectively. You should also scan the Annotated Bibliography for
additional references.

Questions 1, 2, 8 - 10, 12, 13, 16, and 19. If you use a computer, the
answers to these questions need to be right justified (refer to Data
Processing in Managing Data).

You do not need access to a computer to use this instrument.

*****

SUBCOMPONENT: Placement Meeting

Placement Meeting, Parent Questionnaire

You need to give special thought to when you should ask parents to complete
this questionnaire. In the table (yellow pages), When to Use the
Instruments, we suggest that this be given to parents shortly after the
child placement meeting. The longer you wait, the more parents may forget
what exactly was discussed at the meeting. You might want to consider
giving the questionnaire to the parent immediately after the meeting and
asking them to return it within one week.

Access to a computer is not necessary to use this instrument.

Placement Meeting, Observation System

Be sure to read the directions for using this instrument very carefully.
You can decide to eliminate or change some of the directions; the important
thing is to be consistent with using the decisions you make.

Descriptive Information on Participants. The list of possible positions
represented at the placement meeting is intended to be comprehensive; other
positions/titles who frequently attend placement meetings may be added to or
substituted in the list given.

The meetings observed in the field testing of this instrument seldom
involved more than 12 participants. If larger meetings regularly occur in
the meetings you observe, additional space to code the position,

3-3-61
153

agency/program affiliation, and input of these additional participants may be added to the observation form.

Procedures. Items A-D of this section usually occur only if the parents are present at the placement meeting. If there is interest in these items regardless of parent presence at the meeting, the 8 = not applicable code should not be used.

Discussion Before and After the Placement Decision. The before/after distinction is included to document the issues which are mentioned before the placement decision is made; the implication is that these issues entered into the decision. If the point during the meeting at which the decision is made is not clear (e.g. when the placement decision is reached by informal consensus), the before/after distinction could be eliminated and the observer would only code whether or not these issues were mentioned at any time during the placement meeting.

Functioning of the Child. It would be desirable to code these items not only as to whether or not they were mentioned , but also as to whether they were considered a deficit or strength of the child. However, field testing indicated that in a fast-paced placement discussion, this required the observer to make too many decisions during the course of the discussion. Information about areas of strength and weakness may be more easily obtained through record reviews.

General Parent Concerns/Questions Expressed. The discussion of general parent concerns/questions may not influence the placement decision, but field-testing revealed that such discussion frequently occurs during the placement meeting. Consequently, we believed that whether such concerns are raised and addressed during the meeting is important in accurately describing the content of the meeting and so we included it in the observation system.

Specific to the Placement Decision/Recommendation. Field testing revealed a number of variations regarding how related services are handled. In some cases, related services are not specified as separate from the program placement because they are considered part of the program; in such cases they are not coded separately. In other cases, the related services are not specified in the final placement vote/consensus but are mentioned afterwards to be specified on the child's IEP. This circumstance is covered by item D.3., "related services not specified in vote/consensus."

Finally, when insufficient assessment information is available, some school districts will specify evaluation in a particular area and services as needed. This possibility has been included as a separate related service code for each relevant area of service or therapy. The related service items could be modified according to how a particular district handles these issues.

Is the child currently being served by (the same) special education service provider/agency as the one decided upon/recommended by the Placement Team? Despite the observation system's primary application to initial placement meetings, this item was included because we observed that some children are placed in preschool special education programs on a diagnostic basis prior to the initial placement meeting. If this never occurs in your school

district, this item could be eliminated.

Forms/Paperwork. An IEP may be partially completed during the placement meeting or it may be left to be completed at a later meeting between the parents and program staff. Regardless of when the IEP is completed, any work on the IEP during the placement meeting could be recorded as part of the observation system. Field testing indicated, however, that it is extremely awkward and obtrusive to observe the completion of a child's IEP during or at the end of the placement meeting. This probably can be done more efficiently by reviewing the IEP as part of the child's records after the placement meeting. Consequently, an assessment of the IEP's completion during the placement meeting has not been included as part of this observation system.

Access to a computer would greatly facilitate summarizing the data collected using this instrument. However, it is not essential to its use, particularly if you will only be using it to observe a small sample of meetings or if you are interested in using it in conjunction with the case study outlined in the Overview of Placement Process subcomponent.

*****

SUBCOMPONENT: Appropriateness of Placement

Appropriateness of Placement, Placement Office Interview

Before you use this instrument be sure to read Description of the Different Types of Instruments in Appendix C. This will point out some of the characteristics of interviews that you should know in order to use this instrument effectively. You should also scan Appendix B, Annotated Bibliography for additional references.

Questions 1, 3 - 8, 12, and 13. If you use a computer, the answers to these questions need to be right justified (refer to Data Processing in Managing Data).

Access to a computer is not necessary to use this instrument.

Appropriateness of Placement, Program Director Questionnaire

You do not need a computer to summarize the results of this questionnaire.

*****

SUBCOMPONENT: Overview of Placement Process, Case Study Outline

The use of this outline requires the review of student files and the use of some of the instruments developed in the other Placement Process subcomponents (Placement Meeting, Parent Questionnaire and Placement Meeting, Observation System).

An example of a case study is included in Appendix H, Sample Summary Reports.

155

COMPONENT: Program Effectiveness

Description of Subcomponents
Chart of Data Collection Instruments
Evaluation Study Questions
When To Use the Data Collection Instruments
Data Collection Instruments
Special Notes on the Instruments

156

COMPONENT: Program Effectiveness

Description of Subcomponents

The **Changes in the Child** subcomponent offers suggestions as to how an assessment instrument for preschool handicapped should be selected. Concerns with testing this population and issues in interpreting test results will be discussed.

*****

The **Changes in Family** subcomponent examines family characteristics, interrelationships and activities that might possibly be affected when a handicapped child is provided with special educational services.

*****

The **Service Delivery** subcomponent focuses on two aspects of the services delivered to children: how much time is scheduled for the child to receive various educational services and how satisfied are parents with the services their child receives.

*****

The **Services to Parents** subcomponent contains instrumentation to evaluate the amount, quality, and type of services a program makes available to the parents of the children it serves.

*****

The **Staff/Student Descriptive Information** subcomponent provides instrumentation that allows the collection of background information on staff and students.

157

3-4-3

COMPONENT: Program Effectiveness

	Instruments				
	Subcomponents				
	Changes in the Child*	Changes in the Family	Service Delivery	Services to Parents	Descriptive Information
Staff Questionnaire					X
Teacher Questionnaire	X		X		
Parent Educator/ Coordinator Questionnaire		X		X	
Parent Questionnaire	X	X	X	X	
Child Assessment	X				
Record Review					X
Observation System			X		

* Instruments are not provided for this subcomponent; instead guidelines for selection of assessment instruments are discussed in the Data Collection Instruments section.

COMPONENT: Program Effectiveness
SUBCOMPONENT: Changes in the Child

Evaluation Study Questions

Question	Instrument

1. During the course of the program year did the child show gains in the following areas:
  a. speech and language/oral motor
  b. gross and fine motor,
  c. pre-academic/readiness skills
  d. cognitive ability/problem-solving skills,
  e. self-help skills,
  f. social/emotional/behavioral functioning?
	Assessment Instrument(s)

2. To what extent were the following related to the gains the child made while in the program: a. child characteristics (age, sex, race, socioeconomic status, amount of prior educational experience, age when intervention began, number of siblings, etc.);	Assessment Instrument(s) Student/Family Descriptive Information, Record Review
b. program characteristics (e.g., number and type of services received, amount of time child actually attended program, staff characteristics, etc.);	Service Delivery, Teacher Questionnaire Personnel Descriptive Information, Staff Questionnaire
c. amount of parent participation (attendanc. at program activities);	Services to Parents, Parent Educator Questionnaire
d. program activities?	Child and Classroom Activity, Classroom Observation System

159

3-4-7

COMPONENT: **Program Effectiveness**
SUBCOMPONENT: **Changes in the Family**

Evaluation Study Questions

Question	Instrument

1. During the time that the child was provided with special education, was there a change in any of the following family characteristics:
  a. parent employment status,
  b. parent occupation,
  c. frequency of parent social activities,
  d. nature of the relationships between various family members and handicapped child?
	Family Characteristics, Parent Questionnaire, Form I and Form II

2. What is the perception of program staff of the changes that occurred in the following parent attitudes and behaviors:
  a. confidence in parental role,
  b. perception of self as causal agent in child's life,
  c. acceptance of the child,
  d. parent involvement in the the program,
  e. the type of interactions between the parent and child, and
  f. the stability of the family?
	Family Characteristics, Parent Educator/Coordinator Questionnaire

---

160

COMPONENT: Program Effectiveness
SUBCOMPONENT: Service Delivery

Evaluation Study Questions

Question	Instrument
1. Are parents aware of the amount of the various services their child receives?	Service Delivery, Parent Questionnaire
2. Are parents satisfied with the amount and quality of the services their child receives?	Service Delivery, Parent Questionnaire
3. What suggestions do parents have for improving services for their child?	Service Delivery, Parent Questionnaire
4. How much time is scheduled for the child to receive each of the following services: a. speech therapy, b. physical therapy, c. occupational therapy, d. behavior management/cou eling, e. total educational program, and f. home visits?	Service Delivery, Teacher Questionnaire
5. In what activities do preschoolers engage in their special education program? a. How frequently do they participate in language, math, arts/crafts, dramatic play, active/outdoor play, etc.? b. What is the nature of the child's participation in this activities (unoccupied/off task, passively participating, actively participating or disruptive)? c. Does the child engage in these activities by him/herself or with other children? d. How frequently do adults interact with the child?	Child and Classroom Activity, Classroom Observation System

---

161

3-4-11

COMPONENT: Program Effectiveness
SUBCOMPONENT: Services to Parents

Evaluation Study Questions

Question	Instrument
1. What services do programs serving preschool handicapped children offer to parents?	Services to Parents, Parent Educator/Coordinator Questionnaire
2. Are parents aware of the services their child's program offers to parents?	Services to Parents, Parent Questionnaire
3. How satisfied are parents with the services offer to them?	Services to Parents, Parent Questionnaire
4. Which services do parents like best/least?	Services to Parents, Parent Questionnaire
5. What suggestions do parents have to improve services offered to them?	Services to Parents, Parent Questionnaire
6. What percentage of parents in the program actually use these services?	Services to Parents, Parent Educator/Coordinator Questionnaire

162

3-4-13

COMPONENT: Program Effectiveness
SUBCOMPONENT: Staff/Student Description Information

Evaluation Study Questions

Question	Instrument

1. What are the characteristics of the staff who provide services to preschool handicapped children with regard to their:
  a. role in the program,
  b. educational background,
  c. areas of certification, and
  d. years of experience?
	Personnel Descriptive Information, Staff Questionnaire

2. What are the following characteristics of the children/families who are being served in preschool programs for the handicapped:
  a. child's age, sex, race,
  b. child's previous and current disability status,
  c. child's area of indicated need,
  d. dates of child's placement meeting, program entry, 60 day and annual reviews,
  e. family living arrangements,
  f. family socioeconomic status,
  g. parent education and age,
  h. number of siblings,
  i. primary language of child and home,
  j. child's developmental and medical status, and
  k. child's prior education enrollments?
	Student/Family Descriptive Information, Record Review

163

COMPONENT: Program Effectiveness

_____

When to Use the Instruments

_____

SUBCOMPONENT: Changes in the Child

Instrument	When to Use
Assessment Instrument(s)	Beginning of each school year or at entry to program and the end of each school year.

*****

SUBCOMPONENT: Changes in the Family

Instrument	When to Use
Family Characteristics, Parent Educator/Coordinator Questionnaire	Beginning and end of each school year or at entry to program and the end of each school year.
Family Characteristics, Parent Questionnaire, Form I	At child's entry to program.
Family Characteristics, Parent Questionnaire, Form II	At the end of the school year.

*****

SUBCOMPONENT: Service Delivery

Instrument	When to Use
Service Delivery, Teacher Questionnaire	At the beginning of the school year and whenever scheduling changes occur or at the beginning of the school year and weekly/monthly.
Service Delivery, Parent Questionnaire	Toward the end of the school year (e.g., April or May) or after a child is in a program for a certain period of time (e.g., after six months).
Child and Classroom Activity Classroom Observation	Refer to Data Collection in the Managing Data section.

continued

COMPONENT: Program Effectiveness

When to Use the Instruments (continued)

SUBCOMPONENT: Services to Parents

    Instrument   When to Use

Services to Parents, Parent   Toward the end of the school year.
   Educator/Coordinator
   Questionnaire

Services to Parents, Parent   Toward the end of the school year.
   Questionnaire

<div align="center">*****</div>

SUBCOMPONENT: Staff/Student Descriptive Information

    Instrument   When to Use

Personnel Descriptive Infor-   Any time during the school year.
   mation, Staff Questionnaire

Student/Family Descriptive   Any time during the school year.
   Information, Record Review

165

COMPONENT: Program Effectiveness

Data Collection Instruments

166

Examining CHANGES IN THE CHILD can be one of the most
important aspects of determining program effectiveness.
Measuring changes in the child can also be one of the
most difficult areas of evaluation to undertake because
of some methodological problems associated with testing
handicapped preschoolers. This special section has been
prepared to alert the potential evaluator to some of the
considerations involved in undertaking an evaluation of
changes in the child.

*****

CHANGES IN THE CHILD

A question of great interest in evaluations of programs for handicapped
preschoolers is

o   During the course of the project year, did the child show gains?

In the best of all possible worlds, one would have the following available
to answer that question:

o   a group of handicapped preschoolers who have been properly
     diagnosed and have been randomly selected to begin receiving
     services for the first time,

o   a group of handicapped preschoolers who have been randomly
     selected not to receive services,

o   an assessment instrument which

          oo   measures several different developmental areas,
          oo   covers an age range from birth to at least age six and
               preferably even higher (so thàt all children can be
               assessed with the same test and so that the same test
               can be used before and after the children receive
               services),
          oo   has been carefully developed and standardized in its
               format so that questions are consistently administered
               and consistently scored,
          oo   is not biased against any particular handicapped group
               in its items and includes adaptations for the
               handicapped where necessary,
          oo   is not biased against racial or ethnic groups,
          oo   does not contain items which imply girls should behave
               in one way and boys should behave in another way, and is
               not biased by sex,
          oo   includes a sufficient number of items in each of the
               areas measured and at each of the age levels to provide
               an accurate picture of the child's functioning and to be

                                              167

an accurate picture of the child's functioning and to be sensitive to even small changes over time,

oo   does not require highly trained (and expensive) personnel to administer,

oo   does not require an inordinate amount of time to administer,

oo   includes information on the performance of large numbers of children of different ages on the test (or, in more technical terms, the tests should include adequate normative data),

oo   gives scores which can be converted to age-equivalents (for example, a score of 2 years, 1 month in gross motor),

o   information on the type, quantity and quality of the service each child received.

Once you have assembled the necessary ingredients, you are ready to conduct the perfect evaluation. Assess both groups of children before the program group begins to receive services (pretest scores). Assess them again with the same test at the end of the program year (posttest scores). Compare the pre- and posttest scores for the two groups. To obtain even more information, relate the scores to the type and amount of services each of the children received. By analyzing gains with respect to services, you can answer questions such as whether or not the children who received the most speech therapy made the greatest gains in this area.

Selecting a Test

Selection of a test (or tests) to be used to record child growth over the course of the program year is an extremely important decision. While there are numerous tests available for preschool children, no one test is likely to be perfect for your purposes. Given you can't find a test which meets all the criteria listed above, decisions will need to be made as to which criteria are the most essential and which can be traded off with the least damage to your evaluation. We are not recommending any particular instrument because we feel this choice is most appropriately made by the evaluator who will know the population to be tested and the resources available for testing.

To help in making that decision, we will briefly relay some of our experiences in collecting data on "changes in the child" as part of this project. The four instruments used by the project during the pilot work were:

o Minnesota Child Development Inventory
o Developmental Profile II
o System Fore
o Manual for the Assessment of a Deaf-Blind Multiply Handicapped Child

The Minnesota Child Development Inventory was included because it is a parent-completed instrument which measures a child's functioning in several different areas. The Developmental Profile II also measures several areas of development. It covers an age range from birth to beyond the preschool

years and can be completed in a short amount of time. For our pilot
evaluation, we asked the teachers to complete Developmental Profiles on the
children. The System Fore, a speech assessment, was included because such a
high percentage of the children had speech and language problems and because
we felt the need for more detailed information about their functioning in
this area. This assessment was administered by staff of the evaluation
project to each child individually. Lastly, the Manual for the Assessment
of a Deaf-Blind Multiply-Handicapped was completed by the teachers of the
lowest functioning children. This assessment was included because we felt
the other instruments did not have enough items to capture the progress of
these children.

<u>Criterion-referenced</u> or <u>Norm-referenced</u> Test? The former two tests are
norm-referenced instruments which means that a child's perfurmance can be
scored and compared to how the "average" child of that age did on the test.
The latter two tests are criterion-referenced tests. The testing provides
information about what the child can and cannot do but the results can only
be reported as a number or percent of items correct. This number has no
real meaning apart from the test. Saying a four-year-old performed like a
two-year-old communicates information about the severity of the child's
problem. Saying a child was able to do 25% of the items doesn't say much of
anything unless you are familiar with exactly what is on the test.

Criterion-referenced tests do present some advantages when looking for a
test to use with handicapped children because the administration of the test
can generally be a little more flexible. They are also well-suited to
developing goals for an IEP. If you do choose to use a criterion-
referenced test as part of your evaluation, you will need a way to summarize
the results. A meaningful way to do this is by selecting several critical
items and reporting the percentage of children who passed these items at the
pre- and the posttest.

For example,

Item	Percentage who passed item	
	September	May
Uses cup with little spilling	25	45
Can follow one-part _ _rctions	10	20
Uses two-word expressi...s	0	5

The selection of the type of test is again a decision best made by the
evaluator. Some criterion-referenced tests may already be used by the
program staff on a regular basis since many developmental checklist are of
this type. Using already existing data eliminates the need for additional
testing. Our recommendation, based on our experiences in trying to summarize
th. information from criterion-referenced tests and in trying to communicate
it in some succinct fashion, would be that, whenever possible, try to select
a test which is norm-referenced and gives an age-equivalent score.

<u>How</u> <u>Many</u> <u>Tests.</u> We selected four instruments because they each served
a unique purpose within the design of the evaluation (to get information

from parents, to get more information about speech and language, etc.)
There are no rules as to what is the correct number of tests to administer
for an evaluation. If one test will accomplish everything you want to
accomplish or if one test is all you have the money or time to administer,
so be it.

One approach sometimes used in selecting a test is to "pair" tests so that
one test covers one end of the age range and another test covers the other.
For example, the McCarthey Scales of Children's Abilities which is for
children from two-and-a-half to eight-and-a-half is sometimes paired with
the Bayley Scales of Infant Development. Using this approach, every child
in the program would be tested with one or the other test to provide an
indicator of general intellectual functioning. There are several problems
with this. We don't really know how comparable scores on different test are
even if the tests claim to be measuring the same things. Furthermore, when
children progress "out of" one test and "into" another during the program
year, it is very difficult to draw any conclusions about how much growth the
child has shown.

Clearly, the solution to this problem is to use a test which covers the age
range (and developmental range) of the children to be evaluated. This is
easier said than done. For instance, we were unsuccessful in our efforts to
locate an adequate speech and language test which spanned from infancy
through age seven. New tests, however, are being published all the time.
Also, if the children who are to be in your evaluation are somewhat close in
age and/or abilities, then your search will be easier because you can select
a test with a more restricted age range.

How to Evaluate a Test. Some possible criteria to be used in selecting a
test were presented in the introduction to this discussion on measuring
changes in the child. Our experience with the Minnesota Child Development
Inventory was that it is a useful instrument for many children and that
parents could and would complete it. It also presents scores in a nice
chart form showing developmental age and actual age which makes
communicating and interpreting results easy. Three serious problems with
the test are that (1) it does not extend down to infancy, (2) it does not
have sufficient items in some of the developmental areas after age 48 months
to give a reliable assessment, and (3) it contains some items which are
inappropriate for certain handicaps. (One mother called to note that it was
absurd to ask her to complete an item about her blind child's color
recognition.)

The Developmental Profile II which we asked teachers to complete has
numerous strengths. It gives an age-equivalent score in a number of
different developmental areas. It covers a broad age range and it doesn't
take much time to complete. It doesn't take much time because it has very
few items at each of the age breakdowns -- which is its weakness. The
prospects of documenting change with this test for children who show only
small increments of progress are not good.

The purpose of these mini-reviews was not to recommend or discourage use of
any particular test. Rather it was to point out the kinds of considerations
that need to be part of the decision-making. There may not be one ideal
test to be used in conducting an evaluation. The evaluator must weigh the
strengths and weaknesses of what's available and go with what's best. There

3-4-24 170

are several references on assessment instruments in the annotated bibliography in the appendix which may help with your search.

The Effect of Age versus the Effect of Being in a Program

If the preceding discussion hasn't already convinced you that doing a perfect evaluation of changes in the child will be difficult, the following discussion should do the trick. Unfortunately (or fortunately, for preschool handicapped children in Maryland), the perfect evaluation will never be. It is immoral as well as illegal to withhold services from any handicapped child. It is impossible, therefore, to do an evaluation which includes an appropriate comparison group of children who are not receiving services. Without such a group, statements about the effect of the program on the child's developmental level must always be made with caution.

The comparison group in a program evaluation functions as a yardstick against which one can measure program effects. For the great majority of preschool children, any two assessments performed nine months apart will show higher scores on the second assessment. ...en children have been randomly assigned to groups and only one group gets a program, differences found later between the groups can be unequivocally attributed to participation in the program. While the scores for both groups will be higher than they were at the pretest, the program group's scores should exceed the other group's scores at the posttest.

Without a comparison group, there are several alternative courses of action one can follow to try to determine if the gains shown by the children receiving services exceed the natural gains they would have made without such services:

o   Compare pre- and posttest scores with the expected scores based on the children's ages

o   Project posttest scores based on pretest scores

o   Use multiple regression

The first approach involves comparing the pre- and posttest scores for the children in the program with the expected scores for children their age. This comparisons is particularly easy if the test gives an age-equivalent score. For example, a raw score of 48 might convert to an age-equivalent of 3 years, 4 months which means that an "average" child of 3 years, 4 months would be expected to score roughly 48. With age-equivalents, one can ask whether the handicapped children made gains over the course of the year at the same rate of growth as non-handicapped children. For example, did the children make nine months growth in nine months time?

Such a comparison is illustrated in the graph on the following page. These data were collected as part of the pilot data for this project. When working with age-equivalents, it is better to compute average scores using the raw score or a scaled score and then convert to the age equivalent to present the data in a table or graph.

POSTTEST AGE	———
PRETEST AGE	.....
POSTTEST SCORE	- - - -
PRETEST SCORE	———
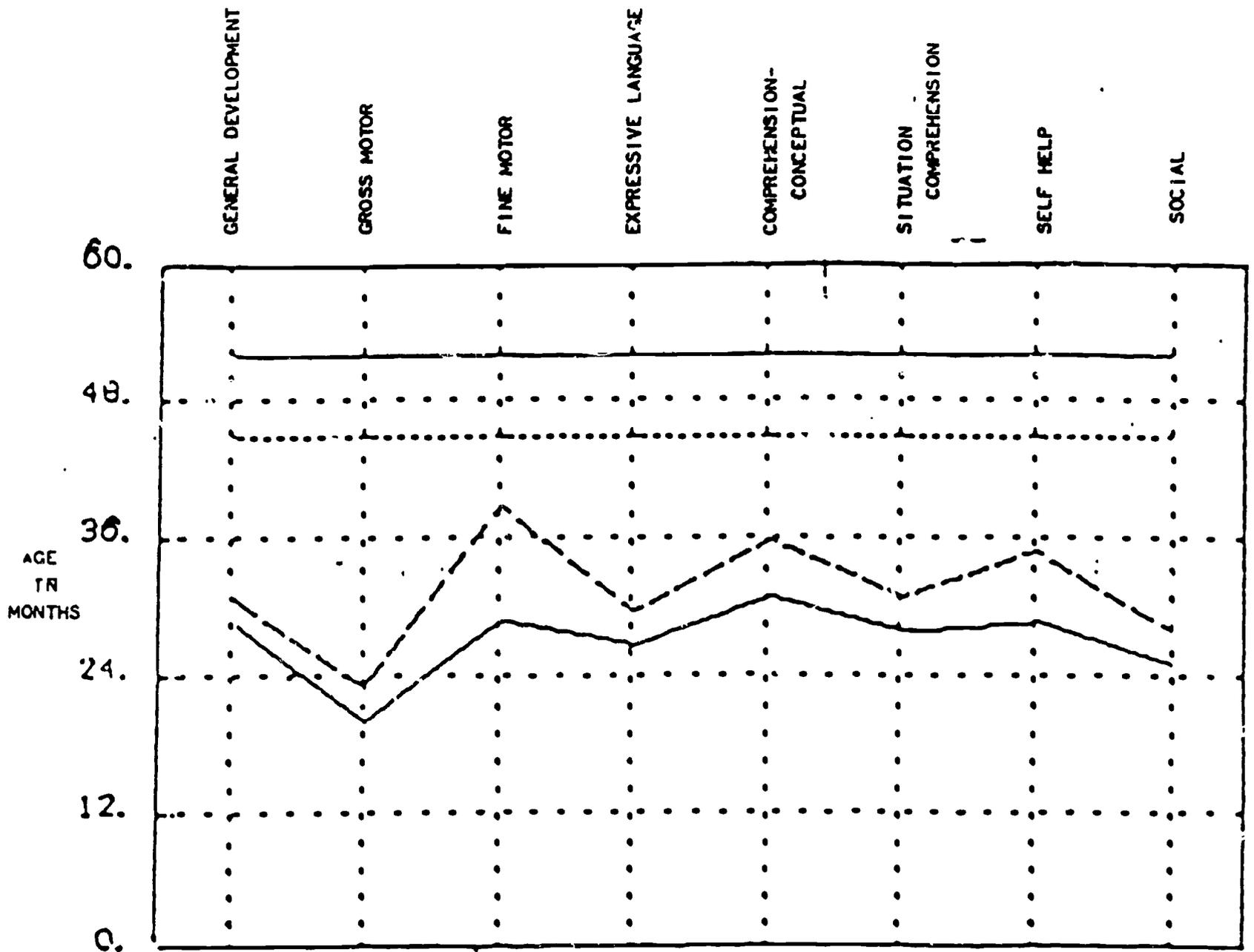
BEST COPY AVAILABLE

172

3-4-26

One problem with this approach is that while nine months growth in nine months time for a handicapped child would probably be perceived by most people as success, what does one say about six months of growth or even three months of growth over nine months? Does three months of growth mean the program is not effective? Three months of growth for a severely handicapped child might be beyond anyone's wildest dreams. The fact that there are no widely accepted expectations for different groups of handicapped children makes recognizing an "effective program" difficult.

A second problem is that the validity of statements about X amount of growth in X amount of time for non-handicapped children is highly dependent on the quality and quantity of the "norm" data available with the test. Test developers derive their information about how a given raw score converts to an age-equivalent score by administering the test to a sample of children. If the data used to develop the norms represent only a small number of children or the children are not like the children in your area, then you won't really know how much growth any child should be expected to show on that test over a given period of time.   •

A **second approach** to determining how much growth is enough growth is **to project the posttest score based on the pretest score.** This projection is done by reasoning that a rate of growth is equal to what the child has achieved divided by the amount of time it took to achieve it. This rate multiplied by another time segment should tell you how much the child will achieve during that time.

For example, if a 48-month old child scored 27 months on a test of receptive language, one could project that 8 months later when the child will be 54 months, the child will score 32.

This projection is calculated in the following way:

1) Rate of growth = $\dfrac{\text{Child's score}}{\text{Child's age}}$

2) Expected growth = Rate of growth x Amount of time between pre- and posttest

3) Expected score = Pretest score + Expected growth between pre- and
   at posttest   posttest

or

1) Rate of growth = $\dfrac{27}{48}$

2) Expected growth = $\dfrac{27}{48} \times 8 = 4.5$

3) Expected score = 27 + 4.5 = 31.5 (round to 32)

If the child's score at the posttest exceeds the expected score, then it can be argued that the program positively altered the child's rate of growth

3-4-27   173

because the child changed more in the time period than he or she would have been expected to change.

This validity of this approach to the problem of no comparison group is also highly dependent on the adequacy of the test being used. Furthermore, it assumes that growth proceeds at the same, steady pace throughout the preschool years. In fact, we know this is not the case. Some children seem to change in a pattern that more closely resembles a landscape of steep hills with plateaus rather than a steadily inclining slope.

A **third approach** to determining the expected posttest score is through the use of a statistical technique called **multiple regression.** By constructing a regression equation, the evaluator can als_ incorporate information about family background variables and the amount of service to ask questions about which children show the'most gain in various types of programs. Explaining multiple regression is beyond the scope of this document, but the interested reader is referred to the annotated bibliography for more information. Any kind of regression analysis will require access to a computer.

Selecting an approach. While the lack of a comparison group does present some problems, this should not discourage anyone from collecting beginning- and end-of-year assessment data on children in programs. Even though interpretations must be made cautiously, assessment data on children's status and progress is far better evidence for documenting program effectiveness than no data at all. Select one of the three approaches to analyzing and interpreting the data described above based on what makes the most sense to you and what you have the resources to do. There are also other useful approaches or you may develop a new one. At a minimum, you can always present average pre- and posttest scores which will at least show you how much better your children are doing. In sum, we would encourage those who are undertaking an examination of changes in the child to be aware of the problems but to move confidently beyond the problems to collecting the information that is so desperately needed to show the effect of all the good work being done with young handicapped children.

174

Program Name: _____

Name of Person Completing Form: _____

The purpose of this questionnaire is to determine if any changes have taken place in parent attitudes/behavior or family characteristics during this past school year. This questionnaire asks you to rate changes in some characteristics of the parents and families of the children in your program.

Directions: To respond to this questionnaire, you need to complete the attached chart according to the directions given below.

A. **ID.** Listed in Column A are the ID numbers of the children who are being served in several classrooms in your program. A master list is attached which links each child's name with an ID number in Column A. Use this list to complete the chart. Destroy the list after you have supplied all the information. Column A has been divided into two parts so that questions can be answered for both the mother and father of the child being served in your program. Identify a child's mother or father according to the following guidelines:

   (1) If a child is living with both of his or her biological, adoptive, or foster parents, consider them as the mother and father and record answers for both parents.
   (2) If a child is living with only one of his or her biological, adoptive, or foster parents, but the "absent" parent is actively involved in parenting the child, record answers for both parents.
   (3) If a child is living with only one of his or her biological, adoptive, or foster parents, and the "absent" parent is not actively involved in parenting the child, record "7," meaning "Not applicable," for the absent parent. However, if the absent parent's role has been assumed by a new male or female head-of-household with whom the child is presently living, record answers for this adult.

TO ANSWER ITEMS B THROUGH G, PLEASE USE THE FOLLOWING ANSWER CHOICES.

Answer Choices:

1=Demonstration of this quality/behavior much better.
2=Demonstration of this quality/behavior slightly better.
3=No change; demonstration of this quality/behavior continues to be good.
4=No change; demonstration of this quality/behavior could be better.
5=Demonstration of this quality/behavior slightly less.
6=Demonstration of this quality/behavior is considerably less.
7=Not applicable; parent absent from the family.
8=Do not know parent well enough to respond to question.

B. **Confidence.** In Column B write the number of the answer choice which best describes the type of change you have observed in each parent in terms of the confidence he or she exhibits in his/her role as a parent. Confidence refers to the parent's belief that he/she is capable of meeting his/her child's needs.

C. **Causation.** In Column C write the number of the answer choice which best describes the type of change you have observed in each parent in terms of his or her perception that he or she can influence their child's behavior. Causation refers to the parents belief that he/she can have an impact on his/her child's behavior and feelings.

D. **Acceptance.** In Column D write the number of the answer choice which best describes the type of change you have observed in each parent with respect to his or her acceptance of the child. Acceptance involves parental recognition of the child's problems and subsequent acceptance of the child's behavior, feelings, limitations, etc.

E. **Degree of Parent Involvement.** In Column E write the number of the answer choice which best describes the type of change you have observed in each parent with respect to his or her participation in various aspects of your program. Consider parental involvement in program activities, meetings, program functions and general communication with program staff.

175   BEST COPY AVAILABLE

F. **Parent's Interactions with Handicapped Child.** In Column F write the number of the answer choice which best describes the type of change you have observed in each parent with respect to the way he/she interacts in a positive manner with his/her child.

G. **Family Stability.** In Column G write the number of the answer choice which best describes the type of change you have observed in the child's family with respect to its stability. Stability refers to an acceptance of one's life situation such as coping with the demands of having a handicapped child and dealing with stress. It also refers to a family with a strong marital relationship.

H. **Stability Rating.** Using the scale of 1 to 7 below, rate the stability of the family. Rate as low a family that has had a great deal of upset in their day-to-day schedule or whose members are having difficulty accepting their life situation. A family's stability would be low if a family member has difficulty in coping with the demands of having a handicapped child, is unable to deal with stress, is abusive toward the child, or is experiencing marital problems. Rate as high a family whose members are able to cope with the demands of having a handicapped child, are able to deal with stress, and who appear to have a strong marital relationship.

Scale

Low						High
1	2	3	4	5	6	7
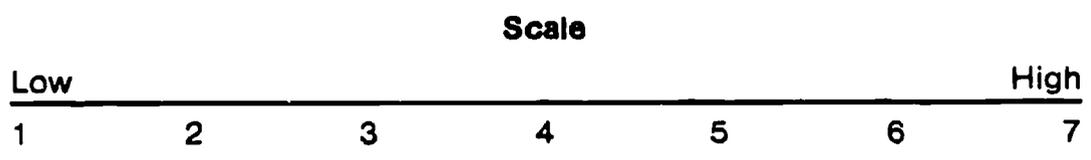
MASTER LIST
Parent Educator/Coordinator Questionnaire

ID	Child's Name
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14	
15	
16.	
17.	
18.	

176

FAMILY CHARACTERISTICS
Parent Educator/Coordinator Questionnaire

A		B	C	D	E	F	G	H
ID		Confidence	Causation	Acceptance	Parent Involvement	Parent Interaction	Family Stability	Stability Rating
6 7 8	9-13						20	21
	Mother							
	14-18							
1. / /	Father							
	Mother							
2. / /	Father							
	Mother							
3. / /	Father							
	Mother							
4. / /	Father							
	Mother							
5. / /	Father							
	Mother							
6. / /	Father							
	Mother							
7. / /	Father							
	Mother							
8. / /	Father							
	Mother							
9. / /	Father							
	Mother							
10. / /	Father							
	Mother							
11. / /	Father							
	Mother							
12. / /	Father							
	Mother							
13. / /	Father							
	Mother							
14 / /	Father							
	Mother							
15. / /	Father							
	Mother							
16. / /	Father							
	Mother							
17. / /	Father							
	Mother							
18. / /	Father							

177

Preschool Evaluation Project
Montgomery County Public Schools
Rockville, Maryland

FAMILY CHARACTERISTICS
Parent Questionnaire—Form I

Name of Parent Completing Form: _____

Program Name: _____

Sometimes placing a child with special needs in a program to receive educational services not only has an effect on the child, but it may also have an effect on the child's family. This effect may be seen in many different ways; for example, the type of activities in which family members engage may change, or the child's mother may take a job outside of the home. This questionnaire will ask about different family activities to try to determine if and how your family may have been affected by enrolling your child with special needs into an education program.

Directions: To answer most of the questions you will be asked to write a number in a space next to each question. In this questionnaire, your child, _____, will be referred to as the "program child" in order to distinguish him or her from other children you may have.

Example:

THE FOLLOWING QUESTIONS REFER TO YOUR PRESENT FAMILY SITUATION.

1. a. Is the female head-of-household (HOH) currently   __2__

   Answer Choices:

   1=Not employed?
   2=Employed part-time?
   3=Employed full-time?
   4=There is no female HOH.

   b. If working, what is her occupation? __NURSE__

An answer choice of "2" to question 1.a. means that at the present time the female head-of-household is working part-time and the response to question 1.b. means that she is working as a nurse.

Your answers will be coded to an identification number (ID). All answers will be kept strictly confidential.

Thank you very much for your help. At the end of the school year we will be sending you another questionnaire like this to answer.

BEST COPY AVAILABLE

MCPS 078-9933C. revised 4/83   178

THE FOLLOWING QUESTIONS REFER TO YOUR PRESENT FAMILY SITUATION.
Write the number of your answer choices in the space to the right.

1. a. Is the female head-of-household (HOH) currently .... _____   10

Answer Choices:

1=Not employed?
2=Employed part-time?
3=Employed full-time?
4.=There is no female HOH.

b. If working, what is her occupation? _____   _____

2. a. Is the male head-of-household (HOH) currently .... _____   12

Answer ~~es~~

1=Not employed?
2=Employed part-time?
3=Employed full-time?
4=There is no male HOH.

b. If working, what is his occupation? _____

3.   Use the answer choices below to answer the following questions.

Answer Choices:

1=Several times a week
2=Once a week
3=Once every two weeks
4=Once a month
5=Less than once a month
6=Never
7=Not applicable

About how frequently:

do adults in your household go out together socially? .... _____   14

do adults in your household spend time together with other adult friends? .... _____   15

does your family go out together socially (for lunch, dinner, movie, visit friends, etc.)? . _____   16

4.   What are the birthdate and sex of your other children? Do not include information on the "program child?" If you have no other children write 9's in the spaces in the chart. Also, if you do not have as many children as there are spaces provided, write 9's in the blank spaces. If you have more than 5 other children, please write the information for these additional children on the back of the questionnaire's cover sheet.

Other Children	Birthdate	Sex [1=Male 2=Female]	
Child 1	_____	_____	17-20
Child 2	_____	_____	21-24
Child 3	_____	_____	25-28
Child 4	_____	_____	29-32
Child 5	_____	_____	33-36

179   BEST COPY AVAILABLE

5. Use the answer choices below to answer the following questions for each of your other children. If you have more than 5 children, please write the information for these additional children below the chart or on the back of the questionnaire's cover sheet.

Answer Choices:

1=Several times a day
2=Once a day
3=Several times a week
4=Once a week
5=Less than once a week
6=Not applicable
9=No other children in family

About how frequently:

	Child 1	Child 2	Child 3	Child 4	Child 5	
does this child bring his/her friends home?						37-41
does this child play with the program child?						42-46
does this child take care of the program child?						47-51

180

BEST COPY AVAILABLE

Name of Parent Completing Form: _____

Program Name: _____

Sometimes placing a child with special needs in a program to receive educational services not only has an effect on the child, but it may also have an effect on the child's family. This effect may be seen in many different ways; for example, the type of activities in which family members engage may change, or the child's mother may take a job outside of the home. This questionnaire will ask about different family activities to try to determine if and how your family may have been affected by enrolling your child with special needs into an education program.

Directions: To answer most of the questions you will be asked to write a number in a space next to each question. In this questionnaire, your child, _____ _____, will be referred to as the "program child" in order to distinguish him or her from other children you may have.

Example:

THE FOLLOWING QUESTIONS REFER TO YOUR PRESENT FAMILY SITUATION.

1. a. Is the female head-of-household (HOH) currently   __2__

   Answer Choices:

   1=Not employed?
   2=Employed part-time?
   3=Employed full-time?
   4=There is no female HOH.

   b. If working, what is her occupation? __NURSE__

An answer choice of "2" to question 1.a. means that at the present time the female head-of-household is working part-time and the response to question 1.b. means that she is working as a nurse.

Your answers will be coded to an identification number (ID). All answers will be kept strictly confidential.

Thank you very much for your help.

THE FOLLOWING QUESTIONS REFER TO YOUR PRESENT FAMILY SITUATION.
Write the number of your answer choices in the space to the right.

1. a. Is the female head-of-household (HOH) currently . . . . _____   10

   Answer Choices:

   1=Not employed?
   2=Employed part-time?
   3=Employed full-time?
   4=There is no female HOH.

   b. If working, what is her occupation? _____ _____

2. a. Is the male head-of-household (HOH) currently . . . . : . . . . _____   12

   Answer Choices:

   1=Not employed?
   2=Employed part-time?
   3=Employed full-time?
   4=There is no male HOH.

   b. If working, what is his occupation? _____ _____

3. Use the answer choices below to answer the following questions.

    Answer Choices:

    1=Several times a week
    2=Once a week
    3=Once every two weeks
    4=Once a month
    5=Less than once a month
    6=Never
    7=Not applicable

About how frequently:

Do adults in your household go out together socially? . . . . _____   14

Do adults in your household spend time together with other adult friends? . . . . _____   15

Does your family go out together socially (for lunch, or dinner, movie, visit friends,
etc.)? . . . . _____   16

4. The chart below has been completed using information on your othr   iildren that you provided at an
    earlier time. Please check the information and change any incorrect in   .nation or add new information.

Other Children	Birthdate	Sex [1=Male, 2=Female]	
Child 1	_____	_____	17-20
Child 2	_____	_____	21-24
Child 3	_____	_____	25-28
Child 4	_____	_____	29-32
Child 5	_____	_____	33-36

5. Please use the answer choices below to answer the following questions for each of your other children in the order they are listed in Question 4.

Answer Choices:

1=Several times a day
2=Once a day
3=Several times a week
4=Once a week
5=Less than once a week
6=Not applicable
9=No other children in family

About how frequently:

	Child 1	Child 2	Child 3	Child 4	Child 5	
Does this child bring his/her friends home?	_____	_____	_____	_____	_____	37-41
Does this child play with the program child?	_____	_____	_____	_____	_____	42-46
Does this child take care of the program child?	_____	_____	_____	_____	_____	47-51

6. Use the answer choices below to indicate how the relationships among your family members might have changed between 1) the beginning of this school year and 2) the present time.

Answer Choices:

1=Much more positive
2=Slightly more positive
3=No change; relationship continues to be good
4=No changes; relationship could be better
5=Slightly more negative
6=Much more negative
7=Not applicable

How would you describe any changes that may have occurred in the relationships between:

mother and program child? . . . . _____ 52

father and program child? . . . . _____ 53

parents and other children in the family? . . . . _____ 54

program child and other children in the family? . . . . _____ 55

program child and neighborhood children? . . . . _____ 56

7. a. Has your financial situation changed either positively or negatively as a direct or indirect result of placing your child in a special education program? . . . . _____ 57

Answer Choices:

1=Yes, in a positive way.
2=Yes, in a negative way.
3=No change as a result of placing child.

b. If your answer was 1 or 2, please explain how your family's financial situation has changed.

_____

_____

_____

_____

183

8. Please comment on if and in what way(s) placing your child in a special education program has had an affect on your family life (e.g., how family members get along, how often family members do things together, how family members feel about the "program child," etc.)

_____

_____

_____

_____

9. When did your child first begin to receive services from a special education program? In the space below, please record the month and year when your child was enrolled in his or her first special educational program. (Record your answers as follows: for January write "01" in the space labeled "Month," write "02" for February, "03" for March, etc. If your child began in a program in 1980, write "80" in the space labeled "Year.")

Month _____ 59-60

Year _____ 61-62

Name of Person Completing Form: _____

Directions: The chart to be completed on the following page is designed to collect information on the amount of time services are scheduled for children in your classroom. We are interested in the opportunity for services that your program offers a child. When calculating the amount of time do not consider the number of days a child is absent. The fact that a child has poor attendance does not alter the number of days the program is prepared to serve the child.

On the basis of our records, we have completed several items on the following chart: program name and children's names. If a child whom the school district is funding was omitted from the list, please write his or her name on the chart. We will provide ID numbers when the chart is returned to us.

Under each column heading on the chart, record in minutes the amount of time services are available to each child on a daily basis. For example:

1. If a child receives 2 hours of speech therapy on a given day, 120 should be written in the column labeled speech therapy next to the day or days the child is scheduled to receive that service.

2. If a child is not receiving a particular service, enter a "0" in the appropriate column.

If you do not know how much time a child receives certain services, please ask the person who provides these services to answer the questions pertaining to his or her service delivery.

Classroom Program: In this column enter the amount of time in minutes for each day that the child is scheduled to be in your program for each day of the week. For example:

The child who is enrolled in a 3 hours per day, 5 days per week program is scheduled to receive 15 hours per week of a classroom program. Convert hours to minutes by multiplying by 60. Fifteen hours is equal to 900 minutes. Enter 900 in this column.

Be sure to take into account the child's regular arrival and departure times. For example:

Even though the program operates from 9 a.m. to 12 noon, if a child always arrives at 9:30 a.m., then the amount of time that should be calculated per day is 150 minutes.

Speech Therapy: Enter the amount of time in minutes for each day that each child is scheduled to spend with a certified speech therapist. Services can be delivered to a single child or group of children.

Occupational Therapy: Enter the amount of time in minutes for each day that each child is scheduled to spend with a certified occupational therapist. Services can be delivered to a single child or group of children.

Physical Therapy: Enter the amount of time in minutes for each day that each child is scheduled to spend with a certified physical therapist. Services can be delivered to a single child or group of children.

Behavior Management/Counseling or Psychological Services: Enter the amount of time in minutes for each day that a certified or specially trained behavior therapist, counselor, or psychologist works with each child. Services can be delivered to a single child or a group of children.

Home Visits: Two types of information need to be recorded under this heading. In the first column marked "#," enter the number of visits during the school year that someone in your program is scheduled to visit each child's home.

In the next column labeled "Min.," enter the amount of time in minutes per visit that someone from your program is scheduled to spend in each child's home.

SERVICE DELIVERY
Teacher Questionnaire

Program Name: _____

Date Completed: _____

Child's Name	ID	Day of the Week	Classroom Program	Speech Therapy	Occupational Therapy	Physical Therapy	Behavior Management/ Counseling or Psychological Services	Home Visits #	Min.
1.		1							
		2							
		3							
		4							
		5							
2.		1							
		2							
		3							
		4							
		5							
3.		1							
		2							
		3							
		4							
		5							
4.		1							
		2							
		3							
		4							
		5							
5.		1							
		2							
		3							
		4							
		5							

*1=Monday; 2=Tuesday; 3=Wednesday; 4=Thursday; 5=Friday

186

Child's Name	ID	Day of the Week	Classroom Program	Speech Therapy	Occupational Therapy	Physical Therapy	Behavior Management/ Counseling or Psychological Services	Home Visits #	Min.
6.		1							
		2							
		3							
		4							
		5							
7.		1							
		2							
		3							
		4							
		5							
8.		1							
		2							
		3							
		4							
		5							
9.		1							
		2							
		.3							
		4							
		5							
10.		1							
		2							
		3							
		4							
		5							

*1=Monday; 2=Tuesday; 3=Wednesday; 4=Thursday; 5=Friday

Parent's Name: _____

Often the educational services given to a child are seen differently by the many adults who work with that child. For example, the child's teacher may have a very different view of the speech therapy given to a child than the child's parents may have. The purpose of this questionnaire is to better understand parents' feelings and attitudes toward the service their child is receiving.

Directions: To answer most questions, you will be asked to select an answer from a list of choices. Some questions will ask you to write out your answer.

> **Example:**
>
> How satisfied are you with the amount of the services your child receives? Indicate how satisfied you are with the amount of each service given to your child by writing the number of one of the answer choices in the space next to each service.
>
> **Answer Choices:**
>
> 1=My child does not receive this service.
> 2=Very satisfied.
> 3=Satisfied.
> 4=Neither satisfied nor dissatisfied.
> 5=Dissatisfied.
> 6=Very dissatisfied.
>
> Overall Program .... __3__
>
> Physical Therapy (help in use of gross motor, sit, crawl, walk .. __1__
>
> An answer of "3" next to "Overall Program" means that you are satisfied with all parts of your child's program. An answer of "1" next to "Physical Therapy" means that you cannot rate physical therapy services because your child does not receive them.

Your answers will be coded to an identification number (ID). All answers will be kept strictly confidential.

Please use the reverse side of this page to clarify any of your answers.

BEST COPY AVAILABLE

Program Name: _____

1. How satisfied are you with the amount of services your child receives? Indicate how satisfied you are with the amount of each service given to your child by writing the number of one of the answer choices in the space next to each service.

Answer Choices:

1 = My child does not receive this service.
2 = Very satisfied.
3 = Satisfied.
4 = Neither satisfied, nor dissatisfied.
5 = Dissatisfied.
6 = Very dissatisfied.

Overall Program	_____	9
Speech Therapy (help in speech, saying sounds and words, eating without choking)	_____	10
Occupational Therapy (help in use of fine motor, fingers, hands)	_____	11
Physical Therapy (help in use of gross motor, sit, crawl, walk)	_____	12
Behavior Management/Counseling (help with behavioral or emotional problems)	_____	13
Home Visits	_____	14

2. a. Approximately how many times during this school year has someone from your child's program visited and/or is scheduled to visit your home? Write your answer on the line to the right. If your answer is 2, write 02 on the line .... _____ 15-16

b. On the average when staff have visited your home, how long did they stay? Write your answer in hours and minutes in the space to the right. If your answer is 1 hour, write 1 on the line labeled "Hours" and 00 on the line labeled "Minutes."

Minutes _____ 17-18

Hours _____ 19-20

3. How satisfied are you with the quality of the services your child receives? Indicate how satisfied you are with the quality of each service given to your child by writing the number of one of the answer choices in the space next to each service.

Answer Choices:

1 = My child does not receive this service.
2 = Very satisfied.
3 = Satisfied.
4 = Neither satisfied, nor dissatisfied.
5 = Dissatisfied.
6 = Very dissatisfied.

Overall program	_____	22
Speech Therapy (help in speech, saying sounds and words, eating without choking)	_____	23
Occupational Therapy (help in use of fine motor, fingers, hands)	_____	24
Physical Therapy (help in use of gross motor, sit, crawl, walk)	_____	25
Behavior Management/Counseling (help with behavioral or emotional problems)	_____	26
Home Visits	_____	27

189

4. What do you like best about the services your child receives and why?

_____

_____

_____

_____

5. What do you like least about the services your child receives and why?

_____

_____

_____

_____

6. What recommendations do you have that you believe would improve the services your child receives?

_____

_____

_____

_____

This concludes this questionnaire. Thank you.

190

The purpose of this observation system is to obtain descriptive information about the child's experiences in preschool special education classrooms. Specifically, the observation system was designed to record several aspects of child behavior in the classroom. These aspects include: (1) the activity in which the child is engaged, and with respect to that activity, the child's (2) degree of involvement, (3) form of communication and (4) the group size. In addition, the system records the number and type of adults involved with the target child during that activity.

The data obtained with this observation system could be used in an evaluation of preschool programs serving handicapped children to describe the programs, to document service delivery or to explain changes in the child over the program year. The particular application of the observation data would determine the number and frequency of observations necessary.

The observation system is designed such that a different child's classroom behavior is sampled every 30 seconds and recorded by specific codes in each of five categories. The nonparticipant observers should be knowledgeable about the types of children and instructional settings that they will be observing.

The observation system includes the following:

1. an observation form,
2. detailed observation directions,
3. definitions of observation codes and
4. a summary of observation codes.

191

Preschool Evaluation Project
Montgomery County Public Schools
Rockville, Maryland

CHILD AND CLASSROOM ACTIVITY
Classroom Observation Form

Form Code: 910   1-3   Observer: _____   21

Program ID _____   4-5   Date of Observation: _____ _____ _____   22-27
                                                                                           YR   MO   DA

Program: _____   Time Observation Begins: _____   28-31

Teacher: _____

192

Activity Area
01 Language Arts/Story
02 Reading/Writing
03 Math
04 Manipulative Toys/Games
05 Arts/Crafts
06 Music
07 Dramatic Play
08 Cooking/Housekeeping
09 Active/Outdoor Play
10 Sensory Stimulation
11 Toileting/Diapering/Dressing/ Hygiene
12 Eating/Feeding
13 Resting
14 Transition
15 Time Out
16 Other/Unknown
44 Out of Room (Miscellaneous)
55 Special Education Services
66 Mainstreaming
77 Absent
99 Missing Data

Adult Type
1 Classroom Teacher
2 Classroom Assistant
3 Speech Pathologist
4 Physical Therapist
5 Occupational Therapist
6 Parent
7 Supervisor/Administrator
8 Unknown/Other Adult
9 No adult involved

Group Type
1 Self
2 One Child
3 Group

Communication
1 Vocalizing to other(s)
2 Vocalizing to self/crying
3 Non-verbal
4 Listening
5 Not communicating

Child Behavior
1 Unoccupied/Off task
2 Passively Participating
3 Actively Participating
4 Disrupting/Crying

Activity _____ .   Page # _____ 19-20

Adults _____

BEST COPY AVAILABLE

Child's Name/Descriptor	ID 6-8	Communication 9	Activity Area 10-11	Child Behavior 12	Group Type 13	Adult Type 14	Adult Type 15	Adult Type 16	Adult Type 17	More than four adults 18	Notes
1.											
2.											
3.											
4.											
5.											
6.											
7.											
8.											
9.											
10.											

193

194

Directions

When you enter the school report to the main office to announce who you are and that you are doing classroom observations. The office personnel can direct you to the appropriate classroom. If possible, ask the program director to identify the children you are to observe and the titles of the adults in the room. In the spaces provided next to the children's names and IDs, write in some key descriptors such as hair color, clothing, etc. to identify each of the children. The classroom teacher, an aide or a member of the support service staff may also be able to help you determine children's names and adult titles. Be sure to get this information before leaving the classroom.

When you enter the classroom find an unobtrusive area in which to sit. If you should need to move your location during the observation, do this slowly and quietly.

Arrive in the classroom at least five to fifteen minutes earlier than the time for which the observation will be conducted. Use this time to informally observe the classroom routine. This will also allow the children to adjust to your presence. Do not actively respond to children's approaches to you.

In the spaces provided on the cover sheet of the observation form, indicate your name (observer) as well as the program name and teacher. Note also the date of the observation and the time the observation will begin.

Before you begin your formal observation, check to see that you have listed all children from the classroom roster (for whom you have permission to obser) on your observation sheet; include those children who may be absent that day or temporarily out of the roo.., and code them accordingly (see **Activity Area** codes 44-77). Briefly describe the ongoing classroom activity (e.g., language circle, free play) and list the adults present by position in the spaces provided. Note only the *changes* in classroom activity or adults present as they occur on subsequent pages.

Once you begin your observation, you will be coding the behavior of each child at every 30-second interval. In general, you will have 10-30 seconds to observe the child, but you must record the appropriate observation codes based on *the child's behavior and activity area at the 30-second mark*. A five-minute cycle is planned to observe each of the children once. If you have fewer than ten children to observe, you will complete your observations befor. the five minutes is completed. In this case, wait until the next five-minute cycle before observing the children again. If you have more than ten children, you will have to expand the five-minute cycle to accommodate them.

The observation form is designed so that each five-minute cycle is recorded on one observation page. Number the observation pages consecutively. At the end of one hour you will have recorded twelve observation pages and twelve observations per child.

As soon as possible after completing an observation session (or between five-minute observation cycles), review the observation codes recorded for each child. Fill in or change those codes which have become clear or which you have been able to erify (e.g., hard to identify **Activity Areas**, unknown **Adult Types**). Use your comments in the "Notes" column to determine inaccurate or inconsistent codes.

What follows are definitions of the observation codes for each of five categories: communication, activity area, child behavior, group type and adult type. Observers should become familiar with these definitions and code numbers before collecting any data with this observation system. The observation codes are summarized at the end of this document and also appear on the observation form.

Definitions of Observation Codes

COMMUNICATION: Describes the means for communicating ideas during the child's activity.

1. **Vocalizing to other(s):** child vocalizes ideas to other child, children or adults; this includes recitation or singing as a group. Use cues such as eye contact, head/body orientation or accompanying gestures to distinguish between "vocalizing to *other(s)*" and "vocalizing to *self*."

2. **Vocalizing to self:** child vocalizes ideas to him/herself with no intention to communicate to others. Include noises the child makes to accompany play (e.g., motor noises while playing with a car). Code *crying* here. Note that singing or laughing can be coded as "vocalizing to self" or "vocalizing to other(s)," depending on whether or not the child is singing to or laughing with others, or by him/herself.

3. **Nonverbal:** child gestures to or uses some other nonverbal means of communication with other children or adults; no vocalization accompanies nonverbal expressions. Includes signing, pointing to or touching people or objects, gesturing with objects, smiling (without vocalizing) and such aggressive gestures as pushing or pulling another person.

4. **Listening:** child attends to vocalizations (includes listening to music or singing) whether or not they are directed to the child, as indicated by eye contact with/or body orientation toward the vocalization, or other action which suggests the child is listening to the vocalization (e.g., following directions, stopping activity when interrupted by a vocalization); also includes attending to sign language, but otherwise there must be audible vocalization.

5. **Not communicating:** child does not use any verbal or nonverbal communications; may be silently playing, day-dreaming or withdrawn. When deciding between "listening" and "not communicating," such cues as *not* following vocalized directions or blank stares are indications that the child is *not* listening.

ACTIVITY AREA: General curriculum area and materials associated with child's behavior. Consider both the child's activity and the materials being used when choosing a code. When the child's activity seems best characterized by more than one code, choose the one code that best describes the *primary* nature of the child's *overall* activity *at that moment in time*. If the child is not actively involved in an activity, code the child with regard to the group's **Activity Area** or the **Activity Area** expected by the supervising adult.

01. **Language Arts/Story:** listening to a story being told or looking through a storybook; speaking and listening activities such as show and tell, group discussions or memory games; reciting poems or finger plays; playing with language toys that speak to child. Activities which involve matching, sorting or classifying based on word concepts (e.g., color, animals) may also be considered language activities. Note that language arts activities accompanied by music (see code 06) should be coded here (e.g., singing a song). If the child is involved in a conversation outside the context of a language arts activity, code the child's activity as the activity in which he/she is engaged. If the child is listening to directions for an activity other than "Language Arts/Story," code the child's activity as that for which he/she is receiving directions.

02. **Reading/Writing:** language activity which specifically relates to identifying letters, words, letter/word sounds or writing letters. Note that if the child is forming designs which may/may not resemble letters, code as "Arts/Crafts" (05) unless forms have been identified by the child or adult as letters. Also note that looking through a storybook should be coded as "Language Arts/Story" (01) unless the child is reading aloud.

03. **Math:** activity involving such things as counting, naming shapes, comparing sizes or weights, telling time, etc.

04. **Manipulative Toys/Games:** using puzzles, peg boards, blocks or other fine motor manipulative materials. Includes scissoring if this is main focus of activity; otherwise code as "Arts/Crafts" (05). Also includes indoor or outdoor sand and water play, and finger exercises without accompanying words. Note that manipulative materials may involve number, size or shape concepts; if such math concepts are the focus of the activity, code as "Math" (03). Also note that play with musical toys should be coded here (e.g., note board toys). Free play situations are not coded here unless play materials are specifically manipulative in nature.

05. **Arts/Crafts:** manipulating arts or crafts materials; creating pictures or forms with art media such as paint, clay, crayons, paper. If child is writing name on own drawing, consider this as writing activity (02).

06. **Music:** listening to or performing music; playing musical instruments. Note that when music or singing accompanies a language activity, or an active play activity, code as "Language Arts/Story" (01) or "Active/Outdoor Play" (09). Also note that playing with musical toys should be coded as "Manipulative Toys/Games" (04).

07. **Dramatic Play:** playing make-believe, house, dressing-up; using puppets, dolls, props; or acting out a story. This may also include making believe during the use of manipulative materials (e.g., moving cars around a block road way).

08. **Cooking/Housekeeping:** includes activity to prepare food for actual consumption (vs. make-believe cooking) and housekeeping-type chores such as straightening the room, wiping tables or watering plants. Also includes putting away another activity (e.g., returning toys to shelf).

09. **Active/Outdoor Play:** active gross motor play outdoors or indoors involving the child in such activity as climbing, running, bike riding, etc. Free play situations or unstructured movement around the room are not coded here unless defined by an adult or by the equipment used as gross motor or active play activities. Note that gross motor activities which involve a language component (i.e., following directions) or a music component (accompanied by music) should be coded as "Active Play/Outdoor Play" (09).

10. **Sensory Stimulation:** behavior brought about by stimulation of a child's use of vision, hearing, touch or smell. Includes kinesthetic and vestibular stimulation such as placement on a waterbed or gentle rocking/swinging in a chair/hammock, etc. Also includes physical therapy which is essentially non-active intervention intended to develop or maintain gross mobility (e.g., positioning, massaging, stretching). Use this code for those behaviors which are primarily sensory in nature but which might include other **Activity Area** components (e.g., stimulation of the mouth muscles should be coded as sensory stimulation even though it has a feeding ("Eating/Feeding") or a speech ("Language Arts/Story") function.

11. **Toileting/Diapering/Dressing/Hygiene:** activity associated with child using the bathroom facilities (i.e., toileting, hand washing) or other personal hygiene activity (e.g., blowing nose). Also includes dressing and undressing activities, as long as learning how to dress and undress rather than language practice is the primary focus of the activity.

12. **Eating/Feeding:** activity during periods involving food consumption such as snack or lunch.

13. **Resting:** periods when a child is sleeping or resting quietly. Note that positioning should be coded as "Sensory Stimulation" (10).

14. **Transition:** periods when a child is "in-between" activities and is waiting for a group activity to begin, or moving/walking to another activity in the room. Initial activity should have ceased, yet new activity should not have begun. Once materials are put away, activity area is cleaned up, etc., a "transition" has begun; once materials are gotten out, or new activity has started, "transition" has ended. Includes waiting during pauses in an ongoing activity. Note that lining up at the door and standing in line should be coded here. Also note that child cannot be "passively participating" (see **Child Behavior Codes**) in a transition.

15. **Time Out:** child is being disciplined in a "time out" area which removes child from regular activity of the classroom. Note that if a time out situation occurs with no behavioral expectations for the child, you may have to omit a **Child Behavior** code and explain under "Notes."

16. **Other/Unknown:** unclear area of activity or activity not defined above. Describe the area of activity in the space provided under "Notes." When **Activity Area** is temporarily unclear, code as 16 and change to appropriate activity code as it becomes clear (e.g., nature of activity difficult to determine).

44. **Out of room (miscellaneous):** child is temporarily out of the room (e.g., on an errand, visiting the nurse). Do not use this code when codes 55-77 apply. If uncertain why the child is out of the room, use code 44 and ask the teacher after the observation session; then change the code to 55-77 or to the appropriate Activity Area code (i.e., "Toileting," "Resting," "Active/Outdoor Play," "Time Out"—only these **Activity Areas** and codes 44-77 can be used without other observational categories).

55. **Special Education Services:** child is out of the room receiving special education services (e.g. therapy, testing, individual program, etc.).

66. **Mainstreaming:** child is out of the room receiving regular education services (i.e., mainstreamed) for part of the program day (e.g., for art, gym, music, Head Start), or child is absent and receiving regular education services in another program for entire program day (i.e., child is only part-time student in special education program).

77. **Absent:** child is not in program due to illness, tardiness or early dismissal. Code the child as "absent" throughout the observational session, until the child arrives or after the child has left for the day.

99. **Missing Data:** child is present in program but unable to be coded for **Activity Area** (or any other observation category) because observer was interrupted or lost track of child temporarily.

Note: If the child is out of the room and cannot be seen during an observation, only **Activity Area** can be coded for that child. Codes 44-77 may apply or the child may be involved in "Active/Outdoor Play" (09), "Toileting/Diapering/Dressing/Hygiene" (11), "Resting" (13), or "Time Out" (15). Only codes for the four "out of the room" situations (codes 44-77) and these four activities (09, 11, 13 and 15) should appear without other observational codes for **Communication, Child Behavior, Group Type** and **Adult Type.**

CHILD BEHAVIOR: Child's degree of involvement in the activity. Consider the nature of child's **Activity Area** in choosing the most appropriate **Child Behavior** code.

1. **Unoccupied/Off task:** child sitting, standing or wandering about with no evident interest or participation in ongoing activity. Includes listening to conversation *unrelated* to the child's activity or *not* listening to adult presentation or instructions or another child's recitation. Also includes observing other children without directly participating in the activity (e.g., observing another child play with toys, watching other children sing).

2. **Passively Participating:** includes passive forms of participation in activity such as listening to an adult's instructions or lesson for the group, or observing an adult's demonstration of the activity. Also includes waiting one's turn in a group activity or waiting after turn for other children to finish if the focal child is listening to other recitations or observing other children taking turns.

3. **Actively Participating:** child is actively involved in the activity as evidenced by such behaviors as movement or language. Only includes the child actually doing an activity. If an activity requires multiple behaviors (e.g., singing and making motions to a song) the child only needs to be doing one behavior to be "*actively participating.*"

4. **Disrupting/Crying:** actively participating in an activity in such a way as to potentially distract others or draw attention to him or herself (e.g., poking another child, excessive movement when children are to be still). Includes resisting an activity. Note that crying is always coded here.

GROUP TYPE: Identifies the type of group structure that is generally identified by child's activity. However, note that a child should be coded as with another child (2) or as part of a group (3) when *language interaction* is probable or present (i.e., when *physical proximity* and *body orientation* permit language interaction), even if the **Activity Area** is different.

1. **Self:** child is alone.
2. **One child:** child is with one other child.
3. **Group:** two or more other children are joined in similar activity.

ADULT TYPE: Identifies the adults *involved* with the target child. Code as many as four adults who are involved with the focal child at the 30-second mark (the order does not matter).

Involvement is defined as follows: Adult is actively or passively involved with the target child. Active involvement includes directly working with the child or the child's group (e.g., playing along with the child, giving the child instructions or demonstrating an activity to the child being observed), or managing the child (e.g., correcting or praising the child, redirecting behavior). Passive involvement includes listening to or watching the focal child, provided that the adult is within close physical proximity to the child (e.g., in the same group, at the same table, in the same activity area of the room).

If more than four adults are involved with the child, place a check in the column marked "More than four adults." In this event, you should choose to code **Adult Type** for those adults who are: 1) attended to by the target child, 2) physically closest to the target child, or 3) most significant in the classroom (i.e., **Adult Types** 1 through 8 in that order).

If less than four adults are involved with the target child, use code 9 ("No adult involved") for the remaining **Adult Type** columns.

1. **Classroom Teacher:** teacher who is primarily responsible for group of children.

2. **Classroom Assistant:** assistant or aide to teacher, volunteer or student intern.

3. **Speech Pathologist:** includes speech pathology interns.

4. **Physical Therapist:** includes physical therapy interns.

5. **Occupational Therapist:** includes occupational therapy interns.

6. **Parent:** parent or guardian of a child enrolled in the classroom; note if he/she is another child's parent in the "Notes" column.

7. **Administrator/Supervisor:** person who is responsible for administering the program or supervising the staff.

8. **Unknown/Other Adult:** person whose role is not clearly defined as one of the above. Following observation try to identify who this adult is. If the adult can be represented by one of the above codes, change your observation code. If not, use code 8 and describe the adult's role in the "Notes" column.

9. **No adult involved:** no adult is involved with the target child during that particular observation. Adult may not be present in the room or may not be involved with the target child. For example, adult may be observing or working with other children, involved in personal activity or only casually monitoring the child from across the room.

MORE THAN FOUR ADULTS: If more than four adults are involved with the child, place a check in the column marked "More than four adults" and note who they are by **Adult Type** code in the "Notes" column.

199

CLASSROOM OBSERVATION—SUMMARY OF CODES

Communication

Describes the means for expressing ideas during the child's activity.

Code	Descriptor
1	Vocalizing to other(s)
2	Vocalizing to self/crying
3	Nonverbal
4	Listening
5	Not communicating

Activity Area

Identifies general curriculum area and materials associated with child's behavior.

Code	Descriptor
01	Language Arts/Story
02	Reading/Writing
03	Math
04	Manipulative Toys/Games
05	Arts/Crafts
06	Music
07	Dramatic Play
08	Cooking/Housekeeping
09	Active/Outdoor Play
10	Sensory Stimulation
11	Toileting/Diapering/Dressing/Hygiene
12	Eating/Feeding
13	Resting
14	Transition
15	Time Cut
16	Other/Unknown
44	Out of Room (miscellaneous)
55	Special Education Services
66	Mainstreaming
77	Absent
99	Missing Data

Child Behavior

Describes child's degree of involvement in the activity.

Code	Descriptor
1	Unoccupied/Off task
2	Passively Participating
3	Actively Participating
4	Disrupting/Crying

Group Type

Identifies the type of group :ucture that is defined by child's activity, languac ꞏction, or body orientation and physical ꞏ,.

Code	Descriptor
1	Self
2	One Child
3	Group

Adult Type

Identifies the adults involved with the child. If more than four adults are involved, place a check in the column marked "more than four adults."

Code	Descriptor
1	Classroom Teacher
2	Classroom Assistant
3	Speech Pathologist
4	Physical Therapist
5	Occupational Therapist
6	Parent
7	Supervisor/Administrator
8	Unknown/Other Adult
9	No adult involved

Preschool Evaluation Project **Montgomery County Public Schools** **Rockville, Maryland**	**SERVICES TO PARENTS** **Parent Educator/Coordinator Questionnaire**

Program Name: _____

Name of Person Completing Form: _____

The education of preschool handicapped children generally involves the provision of some type of services to parents. This questionnaire asks you to indicate the types of services your program offers parents and to elaborate on certain aspects of these services.

Directions: The first set of questions asks you to fill out information in a chart which appears on Page 3. Specific directions and definitions for each category on the chart are given on the reverse side of this page. Use the blank space on the questionnaire to clarify any of your answer choices.

Your responses will be coded to an identification number. All responses will be kept strictly confidential.

When answering these questions consider only those parents whose names are listed on the attached sheet. The following are directions for completing the Parent Services Chart. Each letter below corresponds to the appropriate column on the chart.

A. **Parent Services**
Several types of services which program's might offer parents have been listed and defined in this column. If after responding to questions about these categories you find that some of the services your program offers parents are not listed, please list these services in the "other" category at the bottom of the chart.

B. **Frequency of Services**
Please write the number of one answer choice given below to indicate how frequently each service was provided during the past school year. PLEASE RECORD ONLY ONE NUMBER IN THIS COLUMN.

Answer Choices:

1=This service is not provided.
2=At least every 2 weeks
3=Once a month
4=Once every 3 months

5=Once during the regular program year or less
6=On an as-needed basis
7=Other (Specify on chart.)

C. **Service Provider**
Please write the number of one answer choice given below next to each service to indicate who primarily scheduled or organized each service during the past school year. PLEASE RECORD ONLY ONE NUMBER IN THIS COLUMN.

Answer Choices:

1=This service is not provided.
2=Program director/coordinator
3=Parent educator/coordinator/advocate
4=Outside consultant
5=One teacher/staff member has assumed this as an additional responsibility.

6=Each teacher provides service for his/her students' parents.
7=Parents
8=Staff team
9=Other (Specify on chart.)

D. **Parent Participation**
Column D is divided into two parts in which two different types of information need to be recorded. In the first column (labeled "#") write the total number of families with preschool children to whom each service is made available. In the second column (labeled "%") enter the percentage of the families indicated in column # who actually participated in or used each service this school year. If all parents participated, write 99 in the box. If a service is not provided, write an "X" in both the # and % columns across from the appropriate service.

E. **Major Problems**
Please write the number of one answer choice given below to indicate what major problem you encountered with each service provided by your program. PLEASE RECORD ONLY ONE NUMBER IN THIS COLUMN ON THE CHART.

Answer Choices:

1=This service is not provided.
2=Do not have enough staff.
3=Staff not available at times convenient to parents.
4=Inadequate funding
5=Parental apathy

6=Parents have transportation problems.
7=Parents have babysitting problems.
8=We have never encountered any problems with offering this service.
9=Other (Specify on chart.)

F. **Reason Service Not Offered**
Please indicate why certain services are not offered by your program. Write the number of one answer choice below in the column next to each service listed. PLEASE RECORD ONLY ONE NUMBER IN THIS COLUMN ON THE CHART.

Answer Choices:

1=This service is provided.
2=Parents have not indicated a need or desire for this service.
3=Parents have babysitting problems.
4=Parents receive this service elsewhere.

5=Not seen as applicable to program population.
6=Do not have enough staff.
7=Inadequate funding
8=Parents have transportation problems.
9=Other (Specify on chart.)

2¬2   **BEST COPY AVAILABLE**

1. Please complete the following chart using the directions specified on page 2.

A. Parental Services	B. Frequency	C. Service Provider	D. Parent Participation # %		E. Major Problem	F. Reason Service Not Offered	
ASSIST PARENTS AS ADVOCATE—Program staff assume an active role to help parents obtain rights and ensure that the child receives the most appropriate education possible (e.g., staff intercede with community agencies, help parents fill out forms and collect information, etc.).							14-21
BABYSITTING—Someone in a program watches siblings and/or handicapped children so that parents can participate in program activities or meetings.							22-29
CONDUCT MEETING(S) ON LEGAL RIGHTS—One or several formal meetings in which parents are informed of their rights under P.L. 94-142 and Maryland Bylaw 13.04.01 (e.g., due process procedures, the purpose of an IEP, that they must be notified of changes in their child's program, etc.)							30-37
CONDUCT MEETING(S) ON MEDICAL PROBLEMS—One or several formal meetings where someone presents medical information such as diet for hyperactive children, how to use certain orthopedic devices, physiological correlates to autism, etc.							38-45
CONDUCT MEETINGS ON OTHER TOPICS OF INTEREST TO PARENTS—Meetings for parents to hear and/or talk with someone on such topics as language development, discipline methods, motor development, etc.							46-53
CONDUCT ORIENTATION MEETINGS—A meeting with one or several parents to explain the program, to have them meet other parents and to show them the program's facilities.							54-61
GROUP COUNSELING—The provision, on a regular basis (e.g., every 2 weeks, once a month), of a counseling session with several parents (mothers and/or fathers). Topics include concerns about handicapped child as well as family problems or rearing siblings.							62-69

A.	B.	.C.	D. Parent Participation		E.	F. Reason
Parental Services	Frequency	Service Provider	#	%	Major Problem	Service Not Offered
INDIVIDUAL COUNSELING—The provision, on a regular basis (e.g., every 2 weeks, once a month) of a counseling session with either one or both parents of a child in your program. Topics include concerns about handicapped child as well as family problems or rearing siblings.						70-77
NEWSLETTER FOR PARENTS—Letters, pamphlets, papers and/or brochures informing parents of the special activities being conducted in your program, about new developments in the field, or current political policies that might affect the field.						14-21
PARENT SUPPORT NETWORK—A formally established system of communication between parents. For example a parent whose child has newly enrolled in the program is given several phone numbers of parents who can be contacted for information and/or emotional support.						22-29
REFERRAL OF PARENTS TO ANCILLARY SERVICES—Program staff inform parents about and help them apply for other services they may need (e.g., food stamps, welfare, medical care, child care, etc).						30-37
SOCIAL FUNCTIONS—Refers to having parties or picnics so that parents can get to know one another in an informal manner.						38-45
TEACHING PARENTS METHODS/TECHNIQUES TO WORK WITH THEIR CHILD—A program has, as an integral part of its routine, time scheduled to formally instruct parents via lecture or demonstration with their child as to how the parents can work to help their child's development.						46-53
TRANSPORTATION TO PARENT MEETINGS— Program provides parents transportation to meetings the program staff have scheduled.						54-61
OTHER (Specify)						62-69

2 3 4

Use the answer choices in the box below to answer questions 2 and 3.

Answer Choices:

01=Assist parents as advocate
02=Babysitting
03=Conduct meetings on legal rights
04=Conduct meetings on medical problems
05=Conduct meetings on other topics
06=Conduct orientation meetings
07=Group counseling
08=Individual counseling

09=Newsletter for parents
10=Parent support network
11=Referral of parents to ancillary services
12=Social functions
13=Teaching methods/techniques to work with children
14=Transportation to parent meetings
15=Other (Specify under question.)

2. Considering all the services your program offers parents, indicate which one works best by writing in the space to the right the number of one answer choice given above . . . . _____ 70-71

If your answer is "15," specify here: _____

3. Considering all the services your program offers parents, indicate which one needs the most improvement by writing in the space to the right the number of one answer choice given above . . . . _____ 72-73

If your answer is "15," specify here: _____

4. What factors or aspects of the service indicated in Question 2 have contributed to its success for your program?

_____

_____

_____

_____

5. What recommendations for improvement do you have for the service you specified in Question 3?

_____

_____

_____

_____

6. Please specify any general recommendations for improving service to parents that you think other programs might find useful.

_____

_____

_____

_____

BEST COPY AVAILABLE This concludes this questionnaire. Thank you.

205

Parent's Name: _____

Sometimes programs that serve children with special needs also offer services to parents. This questionnaire asks about the services your child's program may or may not offer to you personally. Your frank responses and comments will be very helpful to find out what services are being offered and to understand your needs as parents.

Directions: To answer most of the questions on the following pages, you will be given a set of numbered answer choices from which you will be asked to write one of the numbers in a space to the right of each question. Some questions will ask you to write out your answers.

On the back of this page a variety of services to parents are listed and defined. However, *not all of these services may be offered in your child's program.* Please read carefully the definitions of each service before answering any questions.

Example:

1. What was the major reason you or your spouse did not participate in one or more of the services your child's program offers to parents? Using the answer choices below, write the number of your answer in the space to the right. .... __2__

Answer Choices:

1=Did not have time.
2=No transportation
3=No babysitting
4=Did not think the activities would be any good.
5=Di not feel I/we needed a particular service.
6=Other family/work commitments
7=Not aware of services available.
8=Other (Specify: _____ _____)
9=I/We used all the services offered.

An answer of "2" to the above question indicates that you or your spouse did not participate in one or more of the services your child's program offers to parents because you were not able to arrange for transportation.

Please use the reverse side of this page to clarify any of your answers.

Your responses will be coded to an identification number. All responses will be kept strictly confidential.

BEST COPY AVAILABLE

Definitions of Parent Services:

Assist parents as advocate—Program staff take an active role to help parents obtain rights and be sure that the child is given the most appropriate education possible (e.g., program staff attend placement meetings with parents, help parents fill out forms and collect information, etc.).

Babysitting—Outside of school time hours someone in the program watches siblings and/or handicapped children so that parents can participate in program activities or meetings.

Conduct meetings on legal rights—Formal meetings in which parents are told about their rights under P.L. 94-142 and Maryland Bylaw 13.04.01 (e.g., due process procedures, the purpose of an Individualized Education Program, that they must be notified of changes in their child's program, etc.).

Conduct meetings on medical problems—Formal meetings where someone presents medical information such as diet for hyperactive children, how to use certain orthopedic devices, brain damage, etc.

Conduct meetings on other topics—Formal meetings for parents to hear and/or talk with someone on such topics as language development, discipline methods, motor development, etc.

Conduct orientation meetings—Meeting with parents to explain the program and to show them the program's facilities.

Group counseling—The provision, on a regular basis (e.g., every 2 weeks, once a month), of a counseling session with several parents (mothers and/or fathers). Topics include concerns about handicapped child as well as other family problems.

Individual counseling—The provision, on a regular basis (e.g., every 2 weeks, once a month), of a counseling session with either one or both parents. Topics include concerns about handicapped child as well as other family problems.

Newsletter for parents—Letters, pamphlets, or brochures informing parents of the special activities being conducted in the program, about new developments in the field, or current political policies that might affect the field.

Parent support network—Formally established system of communication between parents. For example, a parent whose child has newly enrolled in the program is given several phone numbers of parents who he/she can contact for information and/or support.

Referral of parents to outside services—Program staff inform parents about and help them apply for other services they may need (e.g., food stamps, welfare, medical care, child care, etc.).

Social functions—Program conducts parties or picnics so that parents can get to know one another in an informal manner.

Teaching parents methods/techniques to work with their child—A program has, as an important part of its routine, time scheduled to formally teach parents using lectures or demonstrations how to work with their child.

Transportation to parent meetings—Program provides parents transportation to meetings the program staff have scheduled.

Program Name: _____

1. Show how satisfied you are with each service that is offered by your child's program by writing one of the answer choice numbers given below in the space next to each type of program service. Be sure that each space contains one of the answer choices.

Answer Choices:

1 = Program does not offer this service.
2 = Program offers this service, but I/we did not participate.
3 = Very satisfied
4 = Satisfied
5 = Neither satisfied, nor dissatisfied
6 = Dissatisfied
7 = Very dissatisfied

Assist parent as advocate .... _____ 10

Babysitting .... _____ 11

Conduct meetings on legal rights .... _____ 12

Conduct meetings on medical problems .... _____ 13

Conduct meetings on other topics .... _____ 14

Conduct orientation meetings .... _____ 15

Group counseling .... _____ 16

Individual counseling .... _____ 17

Newsletter for parents .... _____ 18

Parent support network .... _____ 19

Referral of parents to outside services .... _____ 20

Social functions .... _____ 21

Teaching parents to work with children .... _____ 22

Transportation to parent meetings .... _____ 23

Other (Specify: _____) _____ 24

Use the answer choices below to answer questions 2 and 3 which ask about the most helpful and least helpful parent services *offered by your child's program.*

Answer Choices:

1=Assist parents as advocate
2=Babysitting
3=Conduct meetings on legal rights
4=Conduct meetings on medical problems
5=Conduct meetings on other topics
6=Conduct orientation meetings
7=Group counseling
8=Individual counseling
9=Newsletter for parents

· 10=Parent support network
11=Referral of parents to outside services
12=Social functions
13=Teaching methods/techniques to work
14=Transportation to parent meetings
15=Other (Specify next to question.)

2. a. Of all the services in which you or your spouse participated, which one did you find most helpful? Answer by writing the number of one answer choice above in the space to the right.   _____ 25-26

   b. What was it about the service you chose in Question 2a. that made it helpful to you?

   _____

   _____

3. a. Of all the services in which you or your spouse participated, which one did you find least helpful? Answer by writing the number of one of the answer choices listed above in the space to the right.   _____ 27-28

   b. How do you think the service you chose in Question 3a. could be improved?

   _____

   _____

4.   What was the major reason why you or your spouse did not participate in one or more of the services your child's program offers to parents? Using the answer choices below, write the number of your answer in the space to the right.   _____ 29

Answer Choices:

1=Did not have time.
2=No transportation
3=No babysitting
4=Did not think the activities would be any good.
5=Did not feel I/we needed a particular service.
6=Other family/work commitments
· 7=Not aware of services available.
8=Other (Specify: _____)
9=I/We used all the services offered.

5.   Is there anything that the program could do that would increase your or your spouse's participation in the services it offers?

   _____

   _____

6.   What general recommendations would you make to your child's program that would improve the services it offers to parents?

   _____

   _____

THIS CONCLUDES THIS QUESTIONNAIRE. THANK YOU.

209

Name of Person Completing Form: _____

The purpose of this questionnaire is to obtain information about services provided for preschool handicapped children. One area of interest is the background of the staff who provide these services. You can assist us in learning more about this area by completing the attached questionnaire.

Directions: Most of the questions on the following pages ask you to select an answer choice and write its corresponding number in a space next to each question.

Example:

What is/are your area/s of certification? To answer, write in the spaces below the number or numbers corresponding to the answer choices given. Spaces have been provided for you to indicate five areas of certification.

__2__	__4__	_____	_____	_____
Area I	Area II	Area III	Area IV	Area V

Answer Choices:

1=Administrative, Elementary
2=Administrative, Secondary
3=Audiology
4=Early Childhood Education
5=Elementary Education

In this example the answers recorded in the spaces show that the respondent has certification in two areas; the "2" written in the space labeled Area I indicates that the person has certification in secondary administration and the "4" written in the space labeled Area II indicates certification in early childhood education.

Use the reverse side of this page to clarify any of your answer choices.

Your responses will be coded to an identification number (ID). All responses will be kept strictly confidential.

BEST COPY AVAILABLE

PERSONNEL DESCRIPTIVE INFORMATION
Staff Questionnaire

Program Name: _____

1. What is your job title: _____ ___ _____ 11-12

                                                                    (Leave space blank.)

2. What *three* activities do you perform most often in the preschool program? Code a "1" next to the activity you do more than any other, a "2" next to the activity you do second most, and a "3" next to the activity you perform third most. EACH NUMBER SHOULD BE USED ONLY ONCE.

Activity		
Assist in classroom teaching	_____	13
Assist in preparation of instructional materials	_____	14
Classroom consultation	_____	15
Classroom teaching	_____	16
Educational assessment	_____	17
Feeding therapy	_____	18
Fine motor assessment	_____	19
Gross motor assessment	_____	20
Hearing testing	_____	21
Home visits	_____	22
Manage/supervise nonacademic activities (feeding, transportation, recess, etc.)	_____	23
Observation	_____	24
Occupational therapy	_____	25
Paperwork	_____	26
Parent counseling	_____	27
Physical therapy	_____	28
Psychological assessment	_____	29
Sensory stimulation	_____	30
Speech and language assessment	_____	31
Speech therapy	_____	32
Supervise school personnel	_____	33
Teaching parents	_____	34
Vision testing	_____	35
Other (Specify: _____) _____		36

3. If you have any of the degrees listed, indicate when you completed that degree by writing the year in the appropriate spaces below. If you do not have one of the degrees listed, write "99" in the spaces.

	Year Completed
Associate Degree	_____ 37-38
College Degree	_____ 39-40
Master's Degree	_____ 41-42
Doctoral Degree	_____ 43-44

4. What is/are your area/s of certification? To answer, write in the spaces below the number or numbers corresponding to the answer choices given. Spaces have been provided for you to indicate five areas of certification.

_____ 45-46	_____ 47-48	_____ 49-50	_____ 51-52	_____ 53-54
Area I	Area II	Area III	Area IV	Area V

Answer Choices:

1=Administrative, Elementary
2=Administrative, Secondary
3=Audiology
4=Early Childhood Education
5=Elementary Education
6=Guidance
7=Occupational Therapy
8=Physical Therapy
9=Pupil Personnel Worker
10=Reading Specialist

11=School Psychology
12=Secondary Education
13=Special Education (K-12)
14=Speech Pathologist
15=Supervision, Elementary
16=Supervision, Secondary
17=Other
   (Specify: _____)
18=Other
   (Specify: _____)

Directions for Questions 5-8: Indicate in the spaces below how many years you have worked full-time and/or part-time. After calculating your total amount of work experience in years and months, convert months to years in the following manner: 5 or more months, round up and count as 1 year; less than 5 months, round down and do not count in your final answer. For example: if you have worked full-time for 10 years and 5 months, record "11" in the spaces labeled "full-time years." If you have worked full-time for 6 years and 4 months, record "6" in the appropriate spaces.

	Full-time*	Part-time*
5. How many years have you worked with handicapped children or adults?	_____ 55-56 years	_____ 57-58 years
6. How many years have you worked with preschool children (birth to 5 years 11 months)?	_____ 59-60 years	_____ 61-62 years
7. How many years have you worked with preschool handicapped children?	_____ 63-64 years	_____ 65-66 years
8. How many years have you worked for this program?	_____ 67-68 years	_____ 69-70 years

THIS CONCLUDES THE QUESTIONNAIRE. THANK YOU.

*Definitions:

Full-time work refers to performing one's job in a program during all the hours that the program is in operation.

Part-time work refers to working for a program for any time less than all the hours that a program is in operation.

Completed by: _____   Date Completed: _____

Child's Name: _____

Program Name: _____

Directions: Start this record review using the confidential and/or cumulative folders available at the child's program in the main office. The teacher's folder is the next place to search. If some of the information is missing or not available in these records, try to ask someone at the program (e.g., the child's teacher or program director) where the information might be located. The Placement Office file should be the next place you look for missing information.

The goal of this record review is to try to collect all necessary information on a child regardless of whether or not the information is actually in a specific folder. When you have tried each of the above sources, however, and the information is not available use the code 9 given in the attached Code Booklet to record that the data were not available.

To complete the record review, use the codes in the Code Booklet. This booklet is organized to correspond to the items on the record review form.

213

STUDENT/FAMILY DESCRIPTIVE INFORMATION
Record Review

Child Demographics

Birthdate: _____ _____ _____   Sex: _____   Race: _____
      YR   MO   DA
      10-15   · 16   17

Areas of Handicap: Current-IEP Disability Code .... _____ 21-22

                Initial-IEP Disability Code .... _____ 23-25

Areas of Indicated Need: _____ 26-27   _____ 28-29   _____ 30-31   _____ 32-33

                     Other: _____ _____ 34

	YR	MO	DA	
Date of Child's Initial ARD Meeting:	_____	_____	_____	35-40
Date of Child's Entry to Current Program:	_____	_____	_____	41-46
Date of 60-Day Review:	_____	_____	_____	47-52
Date of Annual Review:	_____	_____	_____	53-58

Family Demographics   Office Use   930 _____ 2 1-9

Living Arrangement .... _____ 10

Parent Information: Female   Male

			Female		Male	
Occupational Status	....		_____	11	_____	12
Employment Status	....		_____	·13	_____	14
Education	....		_____	15	_____	16
Year of Birth	....		_____	17-18	_____	19-20

Siblings:

Birth order this child .... _____ 23-24 Number of Siblings .... _____ 25-26
Developmental Status .... _____ 27

Primary Language:

Child .... _____ 28 Home............................... _____ 29

214

Developmental History

Pregnancy and Delivery

    Mother's health this pregnancy: _____ _____ 30

    Labor/Delivery Complication: _____ _____ 31

    Child's condition first few days: _____ _____ 32

Early Developmental Landmarks

    Motor skills: _____ _____ 33

    Language: _____ _____ 34

    Social-emotional: _____ _____ 35

    Self-help: _____ _____ 36

Medical History

    Prior health status: _____ _____ 37

    Present health status: _____ _____ 38

    Present medications/restrictions: _____ _____ 39

Prior Educational Enrollments

    Name of Program: _____ _____ 40-41

    From: _____ to: _____ Total Months: _____ 42-43

    Frequency (hours/week) .... _____ 44-45

    Type of service(s) received .... _____ 46-47 _____ 48-49 _____ 50-51

    Frequency of each service (hours/week) .... _____ 52-53 _____ 54-55 _____ 56-57

    Name of Program: _____ _____ 58-59

    From: _____ to: _____ Total Months: _____ 60-61

    Frequency/week (hours/week) .... _____ 62-63

    Type of service(s) received .... _____ 64-65 _____ 66-67 _____ 68-69

    Frequency of each service (hours/week) .... _____ 70-71 _____ 72-73 _____ 74-75

Child Demographics

Birthdate: Record child's date of birth in the following order: Year, Month, Day. If date not available code 9's in these spaces.

Sex:

    1=Male
    2=Female

Race:

    1=American Indian or Alaskan Native
    2=Asian/Pacific Islander
    3=Black (Not of Hispanic Origin)
    4=White (Not of Hispanic Origin)
    5=Hispanic
    9=Information not available

IEP Disability Code (Federal Census Code):

    01=Mentally Retarded
    02=Hard-of-hearing
    03=Deaf
    04=Speech and Language Impaired
    05=Visually Handicapped
    06=Emotionally Impaired
    07=Orthopedically Impaired
    08=Other Health Impaired
    09=Specific Learning Disabilities
    10=Multi-handicapped
    11=Child in Need of Assessment
    12=Deaf/Blind
    99=Information not available

Areas of Indicated Need:

    01=audiological
    02=fine motor
    03=gross motor
    04=intellectual/problem solving
    06=social/emotional/behavioral functioning
    07=speech and language/oral motor functioning
    08=visual
    09=medical
    10=Other

Dates: Record year, month and day. If date not available record 99 in the appropriate columns.

Family Demographics

Living Arrangement:

1=With both natural parents
2=With one natural parent/one step-parent
3=With one natural parent/other adult(s)
4=With one natural parent
5=With relative(s) other than parent
6=With foster parent(s)
7=With adoptive parent(s)
8=Other (Specify on form.)
9=Unknown

Occupational Status (Head of Household):

1=Semi-skilled and unskilled
2=Clerical and skilled
3=Professional, managers
9=Unknown

Education:

1=Less than 12 years
2=12 years
3=13-16 years
4=Over 16 years
9=Unknown

Siblings Birth Order and Number: Enter right justified numbers for both entries. For example, if the child has 2 siblings, code "02." Use code 99 if information not available.

Sibling's Developmental Status:

1=Developmental delays for one sibling.
2=Developmental delays for two siblings, etc.
8=No developmental delays indicated for any sibling.
9=No information available.

Primary Language:

1=English
2=Spanish
3=French
4=German
5=Other (Specify on form.)
9=Information not available.

Developmental History (codes for all categories):

1=No difficulties/complications.
2=Difficulties/complications (Specify on form.)
9=Information not available.

Medical History

Health Status:

1=No evidence of medical problems.
2=Evidence of medical problem.
9=Information not available.

Present medications/restrictions:

1=No, medications received and/or restrictions given.
2=Yes, medications received and/or restrictions given.
9=Information not available.

Prior Educational Experiences:

Program Name/Code: Use same identification numbers here as developed to indicate programs on other forms.

Frequency of program service:

01, 02, 03...04 hours per week
80=One time service only
90=Recheck periodically
99=Information not available.

Type of service:

20=Speech pathology/audiology
21=Psychological services
22=Occupation therapy
23=Physical therapy
24=Recreation
25=Early identification/assessment
26=Counseling services
27=Vision
28=Auditory
29=Regular early childhood program
99=Information not available.

Special Notes on the Instruments

SUBCOMPONENT: Changes in the Family

Family Characteristics, Parent Questionnaire, Forms I and II

Questions 1b and 2b. Summarizing parent occupations can be simplified if responses are categorized into larger descriptive groups. For example, occupations listed could be classified into three broad areas: professional/managerial, skilled and unskilled. These categories can then be assigned codes of 1, 2, 3, respectively, and coded on the response sheet to simplify computer entry or hand-tallying of the data.

Note also that no line is printed next to these questions where this code could be written; nor is there a card column number listed. It was felt that including these items could be confusing to the respondent. However, space has been provided on the form to write in a code and a card column number has been skipped so that a one-digit code could be entered onto the computer (card column 11 for question 1b and 13 for question 2b).

Question 4, Forms I and II. Space is provided for the respondent to enter the birthdates of his/her children. For the purpose of summarizing the responses, you should calculate the children's ages in months. To enter this date into the computer, card columns reserved for this are set up so that the child's age can be recorded in the first three columns and the child's sex coded in the last column. For example, the card columns 17 through 20 are reserved to enter Child 1's age and sex. If the child is 22 months old, the numbers 022 should be coded next to the Birthdate column and can be entered in the computer in columns 17, 18 and 19. The number written by the respondent to indicate the child's sex can be entered in column 20.

Calculating and writing the sibling's ages next to the Birthdate column on the questionnaire also serves to organize the data in a form which facilitates hand-tallying.

Form II, Question 9. If you use a computer, the answers to this question need to be right justified (refer to Data Processing in Managing Data).

Access to a computer is not necessary to use this instrument.

Family Characteristics, Parent Educator/Coordinator

You should be cautious in using and interpreting the information obtained in this questionnaire. This concern is based on the fact that the information requested of the respondent is very subjective. It might be interesting to have more than one staff person complete this questionnaire on the same set of parents.

Master List. To complete this questionnaire the respondent is given a master list of parent names and ID's. The questionnaire was set up this way because of concerns that respondents would be hesitant to complete this information on a form with parent names. While including a master lists from which numbers need to be transcribed increases the possibility that an error could be made, errors can be minimized if the user maintains a copy of the master list and compares ID's when the completed questionnaires are returned.

Also, if the respondent is sent a master list, for purposes of confidentiality, you should not give the respondent the actual ID's that you are using to identify parents or to analyze the data.

A computer is not required to summarize the information obtained from this instrument.

*****

SUBCOMPONENT: Service Delivery

Service Delivery, Teacher Questionnaire

This form can be used as frequently as needed. The more it is used the more reliable the scheduling information will be. The reason for this is that the respondent will have to remember children's schedules for shorter periods of time. The first time the form is used, it needs to be completely filled out; each subsequent time it is used the respondent can be asked to note only the changes that occur in the child's schedule.

You need to assign the Date Code on this form. You can be use it to identify the week of the study, the week of the school year, etc.

No card column numbers have been assigned or written on the response sheet in order to simplify the appearance of the form for the respondent. An example of how the data recorded on this form could be assigned card column numbers is included in the Appendix D, Format, Codes and Identification Numbers.

This form can be revised easily so that the information is requested for a period of a week rather than for each day. At this time there really are no guidelines for how precise this data should be should you want to relate it to student gains. If you plan to do any higher level analyses using this data other than to describe how much of these services a child is scheduled to receive, you should err in the direction of more detailed collection.

To calculate the amount of time a child was scheduled to receive each service might be done more efficiently if done by hand. It is, however, a timely process, particularly if the information is collected for each day of the week. The advantage of this though is that the information will be more precise. Using a computer will certainly help these calculations; but will require numerous records of data on each child. If you have the computer space and time, do it.

If you also collect information on attendance, you can estimate the amount of services the child actually received.

Service Delivery, Parent Questionnaire

Question 2.   Is you use a computer, the answers to this question need to be right justified (refer to Data Processing in Managing Data.

You do not need to have access to a computer to use this instrument.

Child and Classroom Activity, Classroom Observation System

This observation system provides a "snap-shot" sampling of activities which will produce an representative picture of the child's typical classroom activity and behavior.

The activity area codes were developed to encompass the range of activities that occur in preschool special education classrooms, regardless of the children's handicapping condition.   However, should you encounter an activity that does not fit into one of the defined activity areas, you can use the "other/unknown" code. Frequent use of this category is discouraged.

It is the nature of preschool special education curricula that some classroom activities seem best characterized by more than one activity area code.   The coding directions specify that the observer choose the one code that best describes the primary nature of the child's overall activity.

A multi-focus activity may be coded with a different activity area code at different times during the activity.   For example, a nature walk would generally be coded as "active/outdoor play," but would shift to "language arts/story" if the teacher stopped to teach a new word, like "butterfly."

The child's activity area can change quickly.   For example, during snack time, the activity area could quickly shift from "eating/feeding" while the child is chewing to "language arts/story" if the teacher begins a discussion about the color of the food the children are eating.

Some classroom activities may require explanation by the teacher before they can be coded.   These explanations should be obtained after an observation period.

Additionally, situations in which children are "out of the room" may require explanation before an activity area code can be appropriately chosen. These out of the room codes could be collapsed into one activity area code if you are not interested in knowing why the child was out of the room. If this is the case, you must realize that you may lose important information by doing so; it may be that the child never receives speech therapy in the classroom. However, if you are concerned with activities only as they occur in the classroom, you would be justified in collapsing these categories.

If several children leave the room simultaneously the observer should stay with the largest number of children being observed and code the other children in one of the "out of the room" categories.

In the Communication category, it is often difficult to distinguish between "listening" and "not communicating." To facilitate making this decision, behavioral cues and examples have been included in the definitions of these categories in the directions for the observation system.

Access to a computer would greatly facilitate summarizing the data collected with this instrument, particularly if you conduct a large number of observations.

*****

SUBCOMPONENT: Services to Parents

Services to Parents, Parent Questionnaire

The list of services about which parents are to comment may occasionally be misinterpreted by parents as being services which their child's program actually offers. The directions on the questionnaire's cover sheet emphasize that not all of the services may be offered by the child's program; however, you may want to mention this also in a cover letter that would accompany the questionnaire.

Questions 2 and 3.   If you use a computer, the answers to these question need to be right justified (refer to Data Processing in Managing Data).

A computer is not needed to summarize the data collected with this instrument.

Services to Parents, Parent Educator/Coordinator Questionnaire

This questionnaire can be completed by program staff who are in frequent contact with parents.   A program does not have to have a parent educator in order to use this questionnaire.

Because computer cards contain 80 columns in which data can be recorded and this questionnaire requires more space than that, the questionnaire has be set up to have responses coded on two cards.   Card column numbers in the right margin go from 1 to 77 and then the user/keypuncher is instructed to duplicate columns 1 to 12 for the second card and to enter a 2 to designate the record number. Card column numbers then go up to 73.

Access to a computer would certainly make summarizing the information collected with this questionnaire much easier, however, it is not absolutely essential in order to use the instrument.

*****

SUBCOMPONENT: Staff/Student Descriptive Information

Personnel Descriptive Information, Staff Questionnaire

Questions 5 to 8.   Is you use a computer, the answers to these question need to be right justified (refer to Data Processing in Managing Data).

Access to a computer is not necessary to use this instrument.
222

3-4-88

Student/Family Descriptive Information

Because this questionnaire requires more space than can be recorded on one computer card, it was necessary to set it up to have responses coded on two cards. Card column numbers in the right margin go from 1 to 58; a space is then designated for office use in which the form code is printed, space is left for the user to enter a program's and a child's ID's and the column for the record number is label as 2.

Use of a computer would facilitate the analysis of the data collected using this instrument, however, it is not essential to its use.

3-4-89

COMPONENT: Program Management

                Description of Subcomponents
                Chart of Data Collection Instruments
                Evaluation Study Questions
                When To Use the Data Collection Instruments
                Data Collection Instruments
                Special Notes on the Instruments

224

COMPONENT: Program Management

Description of Subcomponents

The Communication subcomponent focuses on how information is conveyed among staff and between staff and parents. Staff and parent satisfaction with and recommendations to improve a program's communication procedures are examined.

*****

The Record Keeping subcomponent examines staff views on and responsibilities in their program's record keeping procedures. It also provides a means to evaluate various aspects of how well the contents of student folders are maintained.

225

COMPONENT: Program Management

	Instruments	
	Subcomponents	
	Communication	Record Keeping
Program Director Questionnaire		X
Staff Questionnaire	X	X
Parent Questionnaire	X	
Record Review Rating Form		X

COMPONENT: Program Management
SUBCOMPONENT: Communication

Evaluation Study Questions

Question	Instrument

1. How satisfied are program staff with various aspects of the communication:
  a. between staff and administrators,
  b. among staff, and
  c. between staff and parents?
	Communication, Staff Questionnaire

2. What is the most effective manner of communication and the most frequent problems staff have found when communicating with administrators, other staff and parents?	Communication, Staff Questionnaire
3. What recommendations do staff have for improving communication with administrators, other staff, and parents?	Communication, Staff Questionnaire
4. With whom, how frequently and in what way do parents communicate with program staff?	Communication, Parent Questionnaire
5. How satisfied are parents with various aspects of the communication that exists between them and program staff?	Communication, Parent Questionnaire
6. What recommendations do parents have for improving communication between themselves and program staff?	Communication, Parent Questionnaire

---

227

COMPONENT: Program Management
SUBCOMPONENT: Record Keeping

Evaluation Study Questions

Question	Instrument
1. What are a program's record keeping procedures?	Record Keeping, Program Director/Coordinator Questionnaire
2. How much time do program directors and staff spend maintaining student records?	Record Keeping, Program Director/Coordinator and Staff Questionnaires
3. How satisfied are program directors and staff with various aspects of their program's record keeping procedures?	Record Keeping, Program Director/Coordinator and Staff Questionnaires
4. What recommendations do program directors and staff have for other programs who are interested in improving their record keeping procedures?	Record Keeping, Program Director/Coordinator and Staff Questionnaires

5. How well organized is information maintained in student folders?
  a. Is a listing of the forms in the folder available?
  b. Is all the information requested on the forms completed?
  c. Is there a large amount of duplication of information?
  d. Are the forms clearly identified by title?
  e. Are the dates the forms were completed marked on the forms?
	Record Keeping, Record Review Form

228

3-5-9

COMPONENT: Program Management

When to Use the Instruments

SUBCOMPONENT: Communication

Instrument	When to Use
Communication, Staff Questionnaire	Mid-year or at the end of the school year.
Communication, Parent Questionnaire	Mid-year or at the end of the school year.

*****

SUBCOMPONENT: Record Keeping

Instrument	When to Use
Record Keeping, Program Director Questionnaire	At any time during the school year.
Record Keeping, Staff Question-Questionnaire	At any time during the school year.
Record Keeping, Record Review Form	At any time during the school year.

229

COMPONENT: Program Management

Data Collection Instruments

230

Name of Person Completing Form:_____

An important aspect of a program's effectiveness is how information is transferred among program administrators and staff, as well as between these individuals and parents. This questionnaire focuses on the types and status of the communication procedures that currently exist in your program. As a staff member you are intimately involved in your program's communication network and your knowledge is valuable to the understanding and improvement of this network.

Directions: To answer most of the questions on the following pages you will be asked to write a number corresponding to a given set of answer choices in a space to the right of the question. Some questions will ask you to write out your answer.

> **Example:**
>
> The statements listed in this question characterize various aspects of the relationships among individuals working with preschool handicapped children. Use the answer choices to indicate your opinion of each statement with respect to the program for which you work.
>
> ### Answer Choices:
>
> 1=Very satisfactory
> 2=Satisfactory
> 3=Adequate
> 4=Needs some improvement
> 5=Needs much improvement
> 6=Not applicable

Communication Between Supervisors and Staff

> Quality of information given staff on management decisions . . . . ___4___
>
> Amount of feedback given staff on their work · . . . . ___2___

An answer choice of "4" in the first space means that the quality of information given staff on management decisions needs some improvement. An answer choice of "2" in the second space means that staff received a satisfactory amount of feedback on their work.

Please use the reverse side of this page to clarify any of your answers.

Your responses will be coded to an identification number (ID). All responses will be kept strictly confidential. Only the evaluation staff will have access to the key which links names to IDs.

BEST COPY AVAILABLE

231

COMMUNICATIONS PROCEDURES
Staff Questionnaire

Program Name: _____

Job Title of Person Completing Form: _____ _____ 11-12

1. The statements listed in this question characterize various aspects of the relationship among individuals working with preschool handicapped children. Use the answer choices to indicate your opinion of each statement with respect to the program for which you work.

Answer Choices:

1=Very satisfactory
2=Satisfactory
3=Adequate
4=Needs some improvement
5=Needs much improvement
6=Not applicable

Communication Between Supervisors and Staff

Quality of information given staff on management decisions which affect them . . . . _____ 13

Amount of feedback given staff on their work . . . . _____ 14

Quality of feedback given staff on their work . . . . _____ 15

Opportunity given staff to express opinions to supervisors . . . . _____ 16

Encouragement of staff to express opinions to supervisors . . . . _____ 17

Respect shown by supervisors for opinions of staff . . . . _____ 18

Opportunity for staff to express opinions regarding program policies . . . . _____ 19

Communication Among Staff

Respect shown by staff for other staff's opinion . . . . _____ 21

Exchange of information among staff working with the same child . . . . _____ 22

Cooperative spirit among staff . . . . _____ 23

Frequency of interactions among staff . . . . _____ 24

Quality of interactions among staff . . . . _____ 25

Communication with Parents

Frequency of communication with parents . . . . _____ 27

Quality of communication from parents . . . . _____ 28

Amount of parent participation in parent programs/meetings . . . . _____ 29

Parent responsiveness to staff phone calls or requests . . . . _____ 30

232

2. This question consists of three parts. To answer each part, you must record your answer choices in the chart below.

   a. In Column A, indicate the most effective means you have found to communicate with each person listed in the chart. Write the number of one of the answer choices below in the chart next to each staff position.

   Answer Choices:

   1=In writing (letter, memo, notes, daily log)
   2=Direct personal communication (informal/formal meetings)
   3=Through another person who works in a liaison position
   4=Telephone
   5=I never have any contact with this person
   6=Not applicable; this position does not exist in my program.
   7=Other (Specify: _____)

   b. In Column B, indicate the most frequent problem you have encountered when communicating with each person. Write the number of one of the answer choices below in the chart next to each staff position.

   Answer Choices:

   1=Individual is generally not available due to scheduling problems or work load.
   2=Individual is not responsive to my opinions or suggestions; there is generally no follow through on my recommendations.
   3=Individual does not really understand issues; has limited knowledge of program/children.
   4=Individual does not take the initiative to communicate with me.
   5=Must go through time consuming and often ineffective "proper channels" to convey information.
   6=Frequent misunderstandings; educational philosophies different.
   7=Individual's behavior is inconsistent.
   8=Not applicable.
   9=Other (Specify: _____)

   c. In Column C, write any recommendations you have which could improve your communication with each individual or group.

	A	B	C	
Program Director (if he or she is not your supervisor)				31-32
Immediate Supervisor				33-34
Support Staff (PT, OT, Speech Therapist, etc.)				35-36
Classroom staff (teacher or aide)				37-38
Parents				39-40
Physicians				41-42

BEST COPY AVAILABLE

233

Parent's Name:_____

An important part of providing educational services is how easily information is exchanged among program staff and the parents. This questionnaire is designed to find out what communication procedures exist between you and the staff at your child's program.

Directions: To answer most of the questions on the following pages you will be asked to write a number in a space to the right of the question. You will be given a set of numbered answer choices to use.

Example:

In Column A, show how frequently during the past school year you talked with each person. Write next to each staff position one of the answer choices given below.

Answer Choices

1=Never, whether or not the program has one with whom to talk.
2=Once during the school year.
3=Twice during the school year.
4=Monthly
5=Every 2 weeks
6=Once a week
7=Daily
8=Other (Specify this on the chart.)

Program Staff	(A) Frequency
Program director/coordinator	2
Classroom Teacher	6

An answer choice of "2" in the above chart means that you spoke to the director of your child's program once during this school year. An answer choice of "6" in the chart means that you spoke to your child's classroom teacher approximately once a week during this school year.

Please clarify any of your responses on the reverse side of this page.

Your responses will be coded to an identification number (ID). All responses will be kept strictly confidential. Only the evaluation staff will have access to the key which links names to IDs.

BEST COPY AVAILABLE

Program Name: _____

1. This question has two parts which are to be answered by completing the chart below. The chart lists the different types of staff who may be in your child's program and you need to show (a) how frequently you talk with the staff at your child's program and (b) in what form you communicate with them.

   A. In Column A, show how frequently during the past school year you talked with each person. Write next to each person one of the answer choices given below.

   Answer Choices

   1=Never, whether or not the program has one with whom to talk
   2=Once during the school year
   3=Twice during the school year
   4=Monthly
   5=Every 2 weeks
   6=Once a week
   7=Daily
   8=Other (Specify this on the chart.)

   B. In Column B, show the form in which you generally communicated with each person by writing one of the answer choices given below in the appropriate space.

   Answer Choices

   1=Never communicated with this person.
   2=Wrote letter(s) or memo(s).
   3=Made phone call(s).
   4=Talked with at a parents' meeting.
   5=Talked with informally.
   6=Talked with at a conference about my child.
   7=Other (Specify this on the chart.)

RECORD ANSWERS TO QUESTION 1 IN THIS CHART

Program Staff	(A) Frequency	(B) Form	
Program director/coordinator			10-11
Classroom teacher			12-13
Physical therapist			14-15
Occupational therapist			16-17
Speech therapist			18-19
Parent educator/coordinator			20-21

BEST COPY AVAILABLE

235

2. The statements listed below characterize different aspects of the relationships among parents and program staff. Indicate how you would rate your child's program on each item by writing the number of one of the answer choices in the space to the right of each statement.

Answer Choices:

1=Excellent
2=Very Good
3=Adequate
4=Needs Some Improvement
5=Needs Much Improvement

Frequency of communication with parents .... _____ 22

Quality of communication with parents .... _____ 23

Sensitivity of staff to parents' needs .... _____ 24

Enccuragement of parents to express their opinions about program practices .... _____ 25

Staff responsiveness to parent phone calls or requests .... _____ 26

Quantity of information given parents on management decisions which affect them ... _____ 27

Opportunity for parents to participate in establishing program policies .... _____ 28

3. All things considered, how satisfied are you with the communication you have had with the staff in your child's program? Select an answer from the answer choices below and write the corresponding number in the space to the right .... _____ 29

Answer Choices:

1=Very satisfied
2=Satisfied
3=Neither satisfied, nor dissatisfied
4=Dissatisfied
5=Very dissatisfied

4. What suggestions or recommendations do you have for your child's program that would improve its communication with parents?

_____

_____

_____

_____

THIS CONCLUDES THIS QUESTIONNAIRE. THANK YOU.

236

In every educational program certain information about the children being served is needed. Procedures for collecting and maintaining this information vary from one program to another. The purpose of this questionnaire is two-fold: (1) to find out what procedures are currently being used in your program and (2) to ask your opinions and recommendations concerning record keeping practices.

Directions: To answer most of the questions on the following pages you will be asked to write a number in a space to the right of the question. These numbers will correspond to a set of answer choices for each question. Some questions will ask you to write out your answer.

       Example:

           Using the answer choices provided, please rate your degree of satisfaction with each of the items listed below by writing the number of your answer choice on the lines to the right.

                             Answer Choices:

                             1=Very satisfied
                             2=Satisfied
                             3=Neither satisfied nor dissatisfied
                             4=Dissatisfied
                             5=Very dissatisfied

         Current record keeping practices   1

         Number of forms to be completed   3

         An answer choice of "1" next to "current record keeping practices" means that you are very satisfied with the current record keeping practices used in your program. An answer choice of "3" next to "number of forms to be completed" means that you are neither satisfied nor dissatisfied with the number of forms that you need to complete.

Your responses will be coded to an identification number (ID). All responses will be kept strictly confidential. Only the evaluation staff will have access to the key which links names to IDs.

237

BEST COPY AVAILABLE

Program Name: _____

1. This question asks about several aspects of the record keeping process in your program. Please record your answers in the chart by following the directions given below.

    A. Under Column A on the chart, record the number of one of the answer choices below to indicate in which type of folder each information is filed.

    Answer Choices:

    1=Confidential folder*
    2=Cumulative folder*
    3=Classroom folder
    4=Folder kept by support staff (PT, OT, etc.)
    5=Medical or health folder
    6=General office folder
    7=Other
       (Specify: _____)
    8=Combination of 1 through 7
       (Specify combination: _____)

    B. Under Column B on the chart, record the number of one of the answer choices below to indicate where each type of information is maintained.

    Answer Choices:

    1=Program Main Office
    2=Classroom
    3=County Placement Office
    4=Nurse/Health Office
    5=Other
       (Specify: _____)
    6=Combination of 1 through 5
       (Specify combination: _____)

    C. Under Column C, record the number of one of the answer choices below to indicate on which form each type of information is recorded.

    Answer Choices:

    1=On a county form
    2=On a state form
    3=On a form developed by program staff
    4=Combination of 1 through 3
       (Specify combination: _____)

	A. Folder Title	B. Location	C. Type of Form	
Psychologicals				12-14
Prior educational history				15-17
County IEP				18-20
Program IEP (detailed form)				21-23
Letters to parents				24-26
Minutes of meetings about child				27-29

238·

2. What is your best estimate of how much total time in hours and minutes during *an average month* that you personally spend filling out student information forms? Please consider both peak and low periods during the school year when certain forms must be completed and estimate the average amount of time you spend completing forms on a *monthly basis*. Record your answer in the spaces to the right. If your answer is 8 hours, record "8" in the space labeled "Hours," and "0" in the space labeled "Minutes."

Minutes _____ 31-32

Hours _____ 33-34

3. Using the answer choices provided, please rate your degree of satisfaction with each of the items listed below by writing the number of your answer choice in the spaces to the right.

Answer Choices:

1=Very satisfied
2=Satisfied
3=Neither satisfied nor dissatisfied
4=Dissatisfied
5=Very dissatisfied

Current record keeping practices .... _____	35
Number of forms to be completed .... _____	36
Completeness of information filed .... _____	37
Ability to locate information when needed .... _____	38
Usefulness of information on forms .... _____	39
Notification that new information was added to a child's folder .... _____	40

4. What features of your record keeping procedures have worked particularly well and could be recommended to other program staff who wish to improve their procedures?

_____

_____

_____

_____

5. If your program has developed and uses forms other than those developed by the county or state, please indicate why you developed your own program forms.

_____

_____

_____

THIS CONCLUDES THIS QUESTIONNAIRE. THANK YOU.

*Definitions

Confidential folder—Contents include: referral for special services or to County Health Department; reports from public and private agencies; verified reports of serious or recurrent patterns of behavior; teacher and counselor ratings or observation; psychological evaluations.

Cumulative folder—Contents include: background information on child, test records, and copies of reports to parents and correspondence to and from parents.

Name of Person Completing Form: _____

Job Title: _____

In every educational program certain information about the children being served is needed. Procedures for collecting and maintaining this information vary from one program to another. The purpose of this questionnaire is two-fold: (1) to find out what procedures are currently being used in programs for handicapped preschoolers and (2) to ask your opinions and recommendations concerning record keeping practices.

Directions: To answer most of the questions on the following pages you will be asked to write a number in the space to the right of the question. These numbers will correspond to a set of answer choices provided for each question. Some questions will ask you to write out your response.

Example:

Write the number of one of the answer choices below to indicate which information you are responsible to record or collect.

Answer Choices:

1=I record this information.
2=I do not record this information.

Attendance information .... ___1___

An answer of "1" to this question means that you are personally responsible to record attendance information.

Please use the reverse side of this page to clarify any of your answers.

Your responses will be coded to an identification number. All responses will be kept strictly confidential.

240

RECORD KEEPING
Staff Questionnaire

Program Name: _____

1. Write the number of one of the answer choices below to indicate which information you are personally responsible to record or collect. Be sure to write a number on each line.

Answer Choices:

1 = I record this information.
2 = I do not record this information.

Attendance information	_____	13
Test Scores	_____	14
Test protocols	_____	15
Psychologicals	_____	16
Developmental history	_____	17
Prior educational history	_____	18
Vision test results	_____	19
Auditory test results	_____	20
Medical history	_____	21
Current medical status	_____	22
Anecdotal notes	_____	23
County IEP	_____	24
Program IEP	_____	25
Daily/Weekly schedule of services	_____	26
Family background	_____	27
Letters to parents	_____	28
Record of phone calls to parents	_____	29
Parent permission slips	_____	30
Minutes of meetings about child	_____	31
Other (Specify: _____)	_____	32

211

2. What is your best estimate of how much total time in hours and minutes *over an average month* you personally spend filling out student information forms*? Please consider both peak and low periods during the school year when certain forms must be completed and estimate the average amount of time you spend completing forms on a *monthly* basis. Record your answer on the lines to the right. If your answer is 8 hours, record "8" on the line labeled "Hours" and "0" on the line labeled "Minutes."   .

Minutes _____ 33-34

Hours _____ 35-36

3. Using the answer choices provided please rate your degree of satisfaction with each of the items listed below by writing the number of your answer choice on the lines to the right.

Answer Choices:

1=Very satisfied
2=Satisfied
3=Neither satisfied nor dissatisfied
4=Dissatisfied
5=Very dissatisfied

Current record keeping practices .... _____   37

Number of forms to be completed .... _____   38

Completeness of information filed .... _____   39

Ability to locate information when needed .... _____   40

Usefulness of information .... _____   41

Notification that new information was added to a child's folder .... _____   42

4. What features of your record keeping procedures have worked particularly well and could be recommended to other program staff who wish to improve their procedures?

_____

_____

_____

5. In addition to county, state, or program forms which need to be completed and filed, are you also using forms you personally developed? Using the following answer choices below, please write the number of your answer on the line to the right. .... _____   43

Answer Choices:

1=Yes
2=No

IF YOUR ANSWER IS "NO," STOP HERE; YOU HAVE COMPLETED THIS QUESTIONNAIRE.

212

6. What type(s) of information do you collect using the forms you developed?

_____

_____

_____

7. Why did you develop your own forms?

_____

_____

_____

THIS CONCLUDES THIS QUESTIONNAIRE. THANK YOU.

*Forms—Any document completed and maintained by a program on which information about a student or his/her family is recorded.

243

Preschool Evaluation Project
Montgomery County Public Schools
Rockville, Maryland

RECORD KEEPING
Record Review Form

Completed by: _____   Date Completed: _____

Child's Name:_____

Program Name:_____

Directions: This record review examines the effectiveness of record keeping procedures in student files maintained by programs for preschool handicapped children. This review can be used with students' confidential or cumulative files.

It is very important for the reviewer to become completely familiar with the items indicated on the record review form before reviewing the information in the student's file. Most items on the form can be answered by selecting the appropriate response from a given list of possible answer choices.

RECORD KEEPING
Record Review Form

General Information

1. Name of the file being reviewed: _____

2. Is there a form or some document that lists the contents of what is in the student's file? .. _____   10

          Answer Choices:

          1=Yes
          2=No

3. Use the following set of answer choices for the following questions:

          Answer Choices:

          1=Not applicable
          2=Never (0% of the time)
          3=Seldom (30% or less of the time)
          4=Sometimes (31%-59%)
          5=Most of the time (60%-99% or more)
          6=Always (100%)

Information requested on the records is complete (e.g., all necessary information is filled in) .... _____   11

Record forms are clearly dated so you know when they were completed .... _____   12

Information is filed systematically (e.g., according to such criteria as date, type of information, etc.) .... _____   13

Information is written legibly .... _____   14

Duplication of information is found within the file .... _____   15

Forms have titles or are clearly identified by some system such as color or number .. _____   16

Specific Information on IEP

1. Is the child's IEP for the current school year in the folder being reviewed? .... _____   20

          Answer Choices:

          1=The IEP is available.
          2=Only part of the IEP is available.
            (Specify which parts: _____)
          3=The IEP is not available.

BEST COPY AVAILABLE

245

2. Write the number of one of the answer choices below to show if the following information is recorded on the child's current IEP.

Answer Choices:

1=Information is recorded
2=Information is not recorded.

Persons attending the IEP meeting .... _____ 21

Child's disability code .... _____ 22

Statement of child's present level of performance .... _____ 23

Statement of annual goals .... _____ 24

Statement of short term objectives .... _____ 25

Criteria for determining if short term objectives are being achieved .... _____ 26

Statement of services needed .... _____ 27

Date when services will begin .... _____ ₹

Duration of service .... _____ 29

Extent to which child will participate in regular educational program .... _____ 30

Individual responsible for implementing IEP .... _____ 31

Parent signature .... _____ 32

3. List services which child is scheduled to receive.

a. _____

b. _____

c. _____

d. _____

e. _____

4. List annual goals specified for the child.

a. _____

b. _____

c. _____

d. _____

e. _____

COMPONENT: Program Management

Special Notes on the Instruments

SUBCOMPONENT: Communication

Communication Procedures, Staff Questionnaire

Question 2. The answers recorded for parts a and b can easily be entered into the computer using the card column numbers specified in the right margin. The answer to question 2a can be recorded in columns 31, 33, 35, 37, 39 and 41; answers to question 2b can be recorded in columns 32, 34 36, 38, 40 and 42. To summarize the responses to question 2c, refer to Data Analysis and Summary in the Managing Data section.

Access to a computer is not necessary to use this instrument.

Communication Procedures, Parent Questionnaire

Question 1. The answers recorded for parts a and b can be entered into a computer using the card column numbers listed to the right of the response lines. Answers to question a are to be recorded in columns 10, 12, 14, 16, 18 and 20; answers to question b are to be recorded in columns 11, 13, 15, 17, 19 and 21.

Question 4. Refer to Data Analysis and Summary in the Managing Data section.

Access to a computer is not necessary to use this instrument.

*****

SUBCOMPONENT: Record Keeping

Record Keeping, Program Director/Coordinator Questionnaire

Question 1. The answer choices listed for parts a, b and c of this question can be entered into a computer using the card column numbers listed in the right margin. Answers to question a can be recorded in columns 12, 15, 18, 21, 24 and 27; answers to question b can be recorded in columns 13, 16, 19, 22, 25 and 28; question c in columns 14, 17, 20, 23, 26 and 29.

Question 2. If you use a computer, the answers to this question need to be right justified (refer to Data Processing in Managing Data).

You do not need access to a computer to use this questionnaire.

247

Record Keeping, Staff Questionnaire

Question 2.   If you use a computer, the answers to this question need to be right justified (refer to Data Processing in Managing Data).

You do not need access to a computer to use this questionnaire.

Record Keeping, Record Review Form

The General Information section of this form can be used to review any type of folder in which student records are maintained.

The second part of this form, Specific Information of IEP, can only be used with the folder in which the child's Individualized Education Program is filed. It can be omitted and only the General Information section used.

Access to a computer is not necessary to use this form.

2 18

MANAGING DATA

Now that you've selected your evaluation study questions and the instruments you want to use, we'd like to give you some pointers on implementing your design and on managing the data that you're about to collect. This section will give you some suggestions for

- o   obtaining the cooperation of your respondents,
- o   distributing and using the instruments you selected,
- o   preparing the data for computer entry (data processing), and
- o   analyzing and summarizing the data.

Obtaining the Cooperation of Your Respondents

No matter how you look at it, conducting an evaluation means some amount of extra work for those involved. So telling teachers or parents that you have a questionnaire for them to complete but that it really won't take much of their time, probably won't get you too far. We found that explaining the value of the evaluation and the importance of their opinions is a better approach. The idea is to convey to the respondents that you value their opinion, need their help, and greatly appreciate their time.

Depending on your relationship with the respondents, you can ask for their cooperation in person, by telephone or through written correspondence. We think you'll find that the more personal you can make your contacts, the greater the cooperation you will receive. Regardless of the contact method used, the purpose and importance of the study, how the study can help the respondents, and the extent of involvement required should be discussed with respondents when soliciting their cooperation.

Your attitude and approach to conducting an evaluation will also play an important role in how much cooperation you obtain. We think you will find the following suggestions of some help.

- o   Give credit to program staff for knowing their field; provide a mechanism for them to offer suggestions and/or recommendations regarding the area you're evaluating.
- o   Obtain information from program staff during the design of the evaluation by meeting with program representatives.
- o   Emphasize program improvement rather than program comparison.
- o   Emphasize that staff from different programs/classrooms may have something to offer other programs/classrooms to help increase efficiency and effectiveness in various aspects of service provision. Try to access the information from and share it with program staff involved in the evaluation.
- o   Share information developed during the course of the evaluation with program staff. Likewise, listen to the concerns of program staff and send them relevant materials.

Distributing and Using the Instruments

How you use the instruments in this model depends on what type of instrument you've selected, e.g, questionnaires are distributed and used differently than interviews. Because of this, the following section is organized to discuss suggestions for distributing and using each of the four types of instruments (questionnaires, interviews, record reviews and observation systems) separately.

Questionnaires

Questionnaires can be distributed in a variety of ways such as at a parent meeting, teacher inservice, or on an individual basis. One of the simplest ways to distribute questionnaires, especially to a large number of respondents, is to mail them. A major problem with this process, however, is that your return of completed questionnaires is frequently low and your costs can run high, depending on how many 20 cent stamps you need for initial mailing, return envelopes and second mailings. However, since mailings is the most frequently used method of questionnaire distribution, we will outline some procedures that will not only help you keep track of the questionnaires you mail out but also increase your response rate.

Preparing Mailing

1. Obtain lists of respondents from school district(s) or programs involved.
2. Assign an identification number (ID) to each respondent. (See Appendix D, Forms, Codes and Identification Numbers.)
3. Make a checklist to record when questionnaires were sent and returned. (See Appendix E, Sample Checklists.)
4. If you need to keep track of which respondents completed which questionnaire, record the respondents' IDs on the questionnaires before mailing. Be sure that each respondent receives the questionnaire with the correct ID number.
5. Enclose a cover letter (See Appendix F, Sample Letters) indicating:
   a. the purpose of questionnaire,
   b. why it is important for respondents to complete questionnaire,
   c. the date by which questionnaire should be completed (suggestion: 2 weeks after mailing date),
   d. the name and telephone number of the individual to call if respondents have any questions, and
   e. where and when they can obtain a copy of the results (if appropriate).

Follow-up Procedures

1. About one week after the deadline given in first letter, send out a second letter to respondents who did not return the questionnaire. The letter (see Appendix F, Sample Letters) should indicate:
   a. that their questionnaire has not been received;
   b. the concern that they may not have received the questionnaire in the first place (ask them to call if this is the case); and
   c. a reminder of how important their responses are.

250

d. notification that if a questionnaire from them has not been received by a certain date (suggestion: one week), that your office will make a follow-up phone call to see if there were specific problems with the questionnaire.
2. Record on the checklist the date that the second letter was sent.
3. Two to three days after the deadline specified in the second letter, call individuals who still have not returned a completed questionnaire.
4. Record on the checklist the date the phone call was made and the individual's response.

Processing Returned Questionnaires

1. Record the date each questionnaire is received on the checklist (refer to Appendix E, Sample Checklists). (Suggestion: Record the date received in a different color than the date sent; this makes scanning the page easier).
2. Review the responses to questions to be sure that the questions were answered correctly.
3. Detach the cover sheets and file separately from the response sheets. This maintains the confidentiality of the respondents' answers from anyone processing or analyzing the data.

Interviews

Conducting an interview can be a very time-consuming process. Having a structured set of questions can help to minimize the time you spend interviewing and will ensure that all respondents are asked the same questions. An important part of interviewing is establishing a rapport with the individual to be interviewed. The interviewer should not act in a judgmental manner nor make the respondents feel uncomfortable in any way. What follows are some suggestions that you might find helpful when scheduling and conducting the interviews included in the model.

Scheduling the Interview

o   During your initial contact with your prospective respondent be sure to explain the purpose of the interview, the amount of time it will require, and the types of questions to be asked.
o   Schedule a time to conduct the interview which is convenient for the respondent. Offer to send a copy of the interview in advance so that the respondent can gather any information necessary and will be familiar with the content of the questions.

Conducting the Interview

o   Interviewers should be familiar with preschool special education and have experience conducting interviews if possible.
o   Research has shown (Bradburn and Sudman, 1979) that the interviewer's use of conversational speech, probing questions and feedback promotes greater rapport with the respondent and makes the interview flow more smoothly. The following interviewing tips should be kept in mind:

251

- Maintain a conversational tone.
- Ask follow-up questions to clarify any information that is unclear.
- When asking a question for which relevant information has been previously volunteered, do not assume the answer; acknowledge the information already given and then ask the question to ensure that you understand respondent's answer.

o   Make specific arrangements to obtain any information not available during the interview.

Record Reviews

Student records can be extremely valuable source of information. The usefulness of a record review may depend on whether or not what you want to know is consistently maintained in student records. One of the strengths of using record reviews is that they can be conducted with minimal amount of interference to staff or program activities. In this section we've summarized some suggestions for scheduling and conducting the record reviews contained in the model.

Scheduling Record Reviews

o   Determine the location of the records or the desired information to be reviewed.

o   Explain the following to those individuals who maintain the files you will be reviewing: the purpose of the record review, the type of records to be reviewed, the importance of the information to be collected, the time required, and the space needed. If your purpose does not include auditing the completeness of the records, make it clear that you are only interested in obtaining the information contained in the records.

Conducting Record Reviews

o   Persons selected to do the record reviews should be:
- familiar with preschool education,
- familiar with the school district's special education forms, and
- attentive to detail.

o   Reviewers should be told whether they are to look only on certain forms or at anything in the child's file to obtain the required information. For example, if you want to find out if certain information is recorded on a certain form, then the reviewer should look at that form only. However, if you are interested in knowing certain information such as the child's developmental history, the reviewer may have to pull together bits and pieces of it from several forms.

Observation Systems

The following paragraphs contain some suggestions for scheduling observations, and selecting and training observers to use the observation systems developed in the model. These supplement the information written in

252

the Special Notes on the Instrumentation in the Program Effectiveness and the Placement Process Components and the directions that accompany the observation instruments.

Scheduling Observations

o   Explain to those involved in the observations (e.g. program directors, teachers, placement committee members) the purpose of the observation, the number of observations to be done, and the period of time over which the observations will be collected.

o   Be sure to schedule your classroom observations so that you do not always observe the same day of the week, the same hour of the day or the same time of the year. Restricting how often and when you observe a classroom correspondingly restricts what statements you can make from the information you collected.

o   The observation of placement meetings must be scheduled when they occur but you can avoid wasting time by determining beforehand when the cases of interest have been scheduled and how closely the schedule will be followed. Depending on the pace at which these meetings are conducted, observers may find it difficult to observe a series of meetings back-to-back and may prefer to record only every other meeting.

o   Observers should notify the placement office as to when they would like to observe a placement meeting. Prior notification often helps to maintain rapport with the program/office personnel. When using the Child and Classroom Activity Observation System you may have concerns that that notifying a teacher or program director of when you would like to observe a classroom might change what the teacher or director does. To avoid this, you can give them some general guidelines as, "We would like to observe in each classroom four times in the next two weeks."

Selecting Observers

The following characteristics are desirable for observers:

o   Observers should be familiar will preschool special education.

o   Observers should be knowledgeable about the types of students, instructional settings and/or procedures they will be observing. This will facilitate their understanding of the events they observe and increase the reliability of the description they obtain.

o   It would be best if observers were not affiliated with the programs in which they observe; their perceptions may be biased.

o   If you have the resources to hire observers to conduct the observation for you, good sources are: graduate students in special and/or early education, and certified, experienced special education teachers not currently employed full-time.

Training Observers

o   Both observation systems in this model are designed to be used by nonparticipant observers. In other words, the observers should try to be as unobtrusive as possible and not interact with any individual during the observation period.

4-5

253

o   Observers should be encouraged to be nonjudgme.:tal; they should
    try to not give the people being observed the feeling that they
    are making value judgments about their behavior.
o   If you have more than one observer, is very important that each
    observer code the same activity in the same way. If this occurs a
    frequent number of times, it is said that the observers have high
    inter-rater reliability. Several guidelines are presented in
    Appendix G to help you calculate, establish, and maintain inter-
    rater reliability.

Data Processing

The term data processing refers to the preparation of data (i.e., responses
to a question, test scores, etc.) for analysis. Whether the data will be
analyzed by computer or by hand, information obtained using the instruments
in the model should be reviewed to make sure that the information is
complete and recorded properly.

There are "processing pointers" that we would like to bring to your
attention. Depending on the type of instrument you select and whether or not
you will be using a computer to analyze the data, different "pointers" will
be more or less useful.

If You are Processing Questionnaire Data

Of all the instruments in the model, questionnaires probably require the
most careful review. Questionnaires have the highest probability of error
because, more than likely, you will not have had direct, personal contact
with the respondents.

Review responses to questions to be sure that the procedures for filling out
the questionnaires were followed accurately. For example, look at the
question below which was taken from the Assessment Process Component,
Preplacement Assessment, Staff Questionnaire.

In what ways is preplacement assessment information most useful to you? Please rank order the instances
below according to when it is most useful to have preplacement information. Put a "1" in the space next to
the most useful time, a "2" in the next useful. DO NOT USE THE SAME NUMBER MORE THAN ONCE.

For developing an IEP .... _____

For determining the child's level of functioning upon his/her entry to the program .... _____

For determining appropriate initial strategies .... _____

For determining a child's progress such as at a review meeting .... _____

For understanding family needs .... _____

Despite the large, boldface print, you will probably find some respondents
writing the same number after more than one statement. When this occurs,
the respondent's answers must be omitted from the analyses if the results
are to be meaningful.

BEST COPY AVAILABLE   25.4

When necessary, you may have to recode some of the answers. To illustrate this, look at the following question that was taken from the Program Effectiveness Component, Services to Parents, Parent Questionnaire.

What was the major reason why you or your spouse did not participate in one or more of the services your child's program offers to parents? Using the answer choices below, write the number of your answer in the space to the right. _____

Answer Choices:

1=Did not have time.
2=No transportation
3=No babysitting
4=Did not think the activities would be any good.
5=Did not feel I/we needed a particular service.
6=Other family/work commitments
7=Not aware of services available.
8=Other (Specify: _____)
9=I/We used all the services offered.

It's possible for a respondent to choose the "other" response (code 8) and then specify an answer that is included in a different answer choice. For example, a parent might select the "other" response and then write in that he/she has no car. For purposes of summarizing all of the responses, the more appropriate answer would be answer choice "2," "no transportation." In this instance, you should recode the response from "8" to "2."

If You are Processing Interview, Record Review or Observation System Data

If you have other people collect data for you, you should meet on a regular basis and on an as-needed basis to discuss any questions or problems that arise during their data collection activities. You may want to review periodically the forms they complete, particularly at the beginning of data collection so that you might detect problems which they may not recognize.

If You are Entering the Data into a Computer

If your are new at this sort of thing, you need to know about right justifying answers. This is easily explained if we examine the question below which was taken from the Program Management Component, Record Keeping, Program Director/Coordinator Questionnaire.

What is your best estimate of how much total time in hours and minutes during an *average* month that you personally spend filling out student information forms? Please consider both peak and low periods during the school year when certain forms must be completed and estimate the average amount of time you spend completing forms on a *monthly* basis. Record your answer in the spaces to the right. If your answer is 8 hours, record "8" in the space labeled "Hours," and "0" in the space labeled "Minutes."

Minutes _____

Hours _____

The directions tell the respondent that if he/she spends eight hours per month completing student forms, an "8" needs to be written in the hour answer space and a "0" in the minutes answer space. You will notice on the form that two card column numbers (see Appendix D, Format, Codes and

255

Identification Numbers) are reserved for each of these answers. This was done in case the respondent might have a two-digit response (e.g., 10, 14, etc.).

Regardless of whether the answer is one or two digits, if you are entering it into a computer, you must record a number in all the columns designated. For the above question, to enter an answer of 8 hours into the computer you must enter a "0" in columns 31 and 32 for the minutes and a "0" in column 33 and an "8" in column 34 for the hours. If "8" was recorded in column 33, then the computer would read the answer as "80" instead of "8." Recording answers in this fashion is referred to as right justifying responses and it is a procedure that is applicable to all of the instruments contained in the model.

If You Are Hand-Tallying Responses

The key to efficient and accurate hand-tabulation of data is organization. Set up a filing system to keep track of incoming data and don't deviate from that system when you are arranging the data for analysis.

Most of the instruments are set up so that responses are recorded on the right side of the response sheets. This will help you locate and tally responses as you page through the instruments. When reviewing the instruments before hand-tallying responses, check to be sure the respondents' answers are clearly indicated in the appropriate spaces on the instruments.

Data Analysis and Summary

This section of the manual will tell you how to summarize the data once you've collected it. It is intended for those who have little or no experience in summarizing data. Those of you who have experience may want to just skim this section.

In this section we'll

- o · introduce several statistical procedures that you'll need to know,
- o tell you how to summarize responses if you don't have access to a computer, and
- o provide you with examples of how to summarize data from each of the different types of questions contained in the instruments.

What Basic Statistical Procedures are Needed to Analyze Data from the Instruments?

The type of statistical procedures we will outline for you focus on describing what the results of a data collection instrument are. We will be primarily concerned with answering the question, "How many times did the respondents select or give a particular answer." We will also point out some basic ways to summarize numerical data. To illustrate the use of the procedures we present, we will provide you with several examples of how to analyze the various types of questions which make up the instruments.

Regardless of the type of responses you are analyzing, when analyzing data your goal is to organize the responses in a way that will help you make some general statements about the information obtained with of the data collection instrument you used. This can be done in several ways:

- o construct a distribution table,
- o calculate measures of central tendency,
- o calculate measures of variability, or
- o develop a crosstabulation table.

The type of information you can obtain by using the instruments contained in the model can, for the most part, be summarized using distribution or crosstabulation tables. Numerical data, such as test scores or children's ages, may be more appropriately summarized by using measures of central tendency and variability.

Distribution Tables

There are two type of distribution tables of which you should be aware:

- o a frequency distribution, and
- o a relative frequency distribution.

A frequency distribution is simply a w · of illustrating the number of respondents who selected each of the different answers to a question or the number of children who attained various scores on a test. It can contain a listing of the various answer choices to a question and the number of respondents who selected each answer choice or it can contain a listing of the scores obtained on a test and the number of children who attained each of the various scores. Using a frequency distribution will allow you to easily examine the information you obtained from the instrument and quickly summarize the results.

To illustrate what a frequency distribution might look like, we've selected a question from one of the instruments in the model and constructed a frequency distribution based on our field-testing results. The question is taken from the Program Effectiveness Component, Service Delivery, Parent Questionnaire and the frequency distribution summarizes parents' degree of satisfaction with the amount of physical therapy their child receives.

QUESTION:

How satisfied are you with the amount of services your child receives? Indicate how satisfied you are with the amount of each service given to your child by writing the number of one of the answer choices in the space next to each service.

Answer Choices:

1 = My child does not receive this service.
2 = Very satisfied.
3 = Satisfied.
4 = Neither satisfied, nor dissatisfied.
5 = Dissatisfied.
6 = Very dissatisfied.

BEST COPY AVAILABLE

Overall Program .... _____

Speech Therapy (help in speech, saying sounds and words, eating without choking) . _____

Occupational Therapy (help in use of fine motor, fingers, hands) ... . _____

Physical Therapy (help in use of gross motor, sit, crawl, walk) .. . . _____

Behavior Management/Counseling (help with behavioral or emotional problems) .... _____

Home Visits .... _____

4-9
257

FREQUENCY DISTRIBUTION:

Parents' Level of Satisfaction
With the Amount of Physical Therapy Their Child Receives
(N = 69)*

Answer Choices	Number of Respondents
Very Satisfied	37
Satisfied	14
Neither Satisfied Nor Dissatisfied	4
Dissatisfied	10
Very Dissatisfied	4

*This indicates that there were a total of 69 respondents.

A quick scan of this frequency distribution tells you that approximately half of the respondents were very satisfied with the amount of physical therapy that their child received; an equal number of respondents were satisfied or dissatisfied with the amount of this service (14 and 10 respectively); and relatively few parents had ambivalent feelings about (neither satisfied nor dissatisfied) or were very dissatisfied with the amount the physical therapy.

A relative frequency distribution is a way of illustrating the percentage of respondents who selected each of the different answers to a question or the percentage of children who attained various test scores. We've used the same question and results given above to summarize the data in a relative frequency distribution below.

RELATIVE FREQUENCY DISTRIBUTION:

Parents' Level of Satisfaction
With the Amount of Physical Therapy Their Child Receives
(N = 69)

Answer Choices	Percentage of Respondents
Very Satisfied	54%
Satisfied	20%
Neither Satisfied Nor Dissatisfied	6%
Dissatisfied	15%
Very Dissatisfied	6%

The relative frequency distribution gives you an idea of how many respondents answered a question in a certain way "relative" to the other respondents. You can now make more definitive statements; e.g., 54% of the respondents who answered this question indicated that they were very satisfied with the amount of physical therapy their child received.

Measures of Central Tendency

Measures of central tendency are important in describing what the data look like "on the average." These measures will give you an idea of a typical response to a question or the typical score on a test.

There are three different measures of central tendency:

o   the mean,
o   the median, and
o   the mode.

We'll define each of these measures for you. However, since you can find instructions on how to calculate these measures in any basic statistics text, we will not go into the specifics here. Two particularly good references are How to Calculate Statistics by Fitz-Gibbons and Morris (1978) and Fundamental Statistics for Psychology by McCall (1970).

The mean of a set of numbers is simply the arithmetic average. The median is basically the midpoint of a distribution of numbers; i.e., it is the point at which half of the numbers are above and half below. The mode is the most frequently occurring number in a set cf numbers.

Measures of Variability

Variability refers to the degree to which a set of numbers, such as test scores or ages, differ from each other. There are several different measures of variability:

o   the range,
o   standard deviation, and
o   variance.

The range is simply the highest and lowest scores in a set of scores and is easily determined by examining the distribution of scores. The standard deviation and the variance are much more complicated to explain and calculate and so we will refer you to the references in the Annotated Bibliography for this information. However, you should be aware that these two measures will basically tell you whether most of the scores cluster closely around the mean of their distribution or if they are spread out along the range of the distribution.

259

4-11

Crosstabulations

There are times when you might be interested in comparing responses or test scores for different groups of respondents. To do this you can use a procedure called crosstabulation. This simply involves calculating a frequency distribution or a measure of central tendency for the different groups in which you are interested and then organizing the results in a table so that you can compare responses.

For example, you might want to look at average subtest scores with respect to children's primary handicapping condition. This would involve calculating the average score on each subtest for each of the handicapping categories of the children you tested. Doing this would tell you if children with different handicaps performed differently on the subtests of the test you were using.

The following table illustrates some of the results you might find if you were to do this with groups of physically handicapped children and developmentally delayed children. To simplify the illustration, assume that you have 10 children in each group, they are all of the same age, a score of 50 is age appropriate and the lowest and highest attainable scores are 20 and 80, respectively.

Average Subtest Scores on a Sample of Physically Handicapped Preschoolers
and Developmentally Delayed Preschoolers
(N = 50)

Subtest	Physically Handicapped	Developmentally Delayed
Gross Motor	30	46
Fine Motor	41	42
Speech and Language	75	38
Self-Help	38	37

You can easily see from this table that the physically handicapped children scored below their age appropriate score in gross motor, fine motor and self-help. This obviously would be expected since each of these areas are a reflection of the child's physical skills. The one score that stands out for them is their speech and language score which is above age level. Because of the way the scores are tabled, it is clear that the pattern of scores for the physically handicapped are different from that of the developmentally delayed children who tend to be slightly below age level in all areas.

There are, of course, higher level statistics that can be performed on the data collected from the model's instruments. If you are interested in doing

more, we have provided you with several references in Appendix B, Annotated
Bibliography that will explain additional statistical analyses you can
perform.

The types of additional statistical analyses you might want to investigate
include:

- o   Measures of Variability (What is the range of a set of
      scores or how "spread out" are they?)
- o   Hypothesis Testing (E.g., Is one group of children's test
      scores significantly different than another group?)
- o   Correlations (What is the relationship between a child's age
      and their scores on a particular test?)
- o   Multiple Regression (To what extent do certain factors
      explain changes in test performance?)

How to Handle Missing Data

When collecting any type of information, there are instances when some of it
may not be available. For example, when conducting a record review all of
the information needed may not be in a student's files or a respondent to a
questionnaire may not answer a question because he/she overlooked it or
chose not to answer it. When this occurs you need to decide how you will
handle this "missing data" in your analysis and summary.

There are really only two options available to you. First, you can include
the missing data in your analysis and report it as such. That is, you can
report the number of missing cases as a separate "answer choice" within the
distribution table. To illustrate this, let's look at the example we used
to show how you would calculate a relative frequency distribution. Let's
assume that instead of the total number of respondents being 69 that you
really received 75 completed questions; however, 6 of the respondents did
not answer this question for physical therapy. If you decided to include
this missing data, you relative frequency distribution would now look like
the table below.

Relative Frequency Distribution of Parents' Level of Satisfaction
With the Amount of Physical Therapy Their Child Receives
(N = 75)

Answer Choices	Percentage of Respondents
Very Satisfied	49%
Satisfied	19%
Neither Satisfied Nor Dissatisfied	5%
Dissatisfied	13%
Very Dissatisfied	5%
Missing Data	8%

Your second option is to delete the missing data in your analysis. This can be done in two ways. For each question or item on a data collection instrument you can summarize the responses you received and report the number of respondents who answered the question. This means that in a given questionnaire you may have a different number of respondents for each question and you will have to indicate this in your report. An alternative to your second option involves summarizing the results only from questionnaires on which the respondents answered all questions. This choice may considerably reduce your number of respondents and so we would recommend that if you wish to delete missing data that you use the first alternative presented.

What to do if You do not have Access to a Computer?

You can easily hand-tally the data that you obtain from most of the instruments in the model. As with data processing, the key here also is organization (and a good pencil sharpener)! A hand-calculator with the basic mathematical functions will help your accuracy.

Hand-tallying data simply involves recording how many respondents gave the same type of answers. When tallying the responses, you may want to tally them separately for different types of respondents, e.g., teacher versus therapists.

The following steps illustrate how to hand-tally responses:

1. Decide if you want to tally responses for different types of respondents.
2. Sort the response sheets (the pages on which the respondent recorded his/her answers or on which data had been coded) by these groups.
3. Set up a tally sheet (see example below) for each question with all of the answer choices listed. Be sure to allow enough space to record tallies (hash-marks, check-marks, X's) in each category. (This can be done on a blank copy of the instrument if space permits.)
4. Record each respondent's answer by making a tally mark (/) in the appropriate space on the tally sheet.
5. Count the number of tallies for each answer choice to get the frequency distribution for that item.

EXAMPLE. The following is an example of how you would tally responses to a checklist question. The question is taken from the Assessment Component, Postplacement Assessment, Staff Questionnaire.

The table below illustrates how you might hand-tally responses from this question separately for two groups of respondents, teachers and therapists.

| Answer Choices | Number of Responses | |
	Teachers (N=10)	Therapists (N=10)
Standardized Tests	/////	///// //
Developmental Checklists	///// ///	///
Informal Observations	///// /////	///// /////
Home visit/ Parent Interview	///	//

Hand-tallying the data in this manner allows you to easily see: (1) which type of assessment method teachers use when the children are initially placed in their classrooms; (2) which type of methods therapists use; and (3) which type of methods are used by staff in a program (assuming teachers and therapists make up the entire staff); and the differences between the methods used by teachers and therapists. After hand-tallying the data in this fashion you can then construct distribution tables and/or crosstabulation tables as described earlier.

Data Analysis and Summary Examples

In this section we address the topic of data analysis by outlining how to summarize responses based upon the type of question that solicited the response.

The instruments contain six types of questions:

    o   multiple choice,
    o   rating,
    o   rank order,
    o   checklist,
    o   open-ended, and
    o   numerical.

We are defining a multiple choice question as one in which the respondent is asked to select an answer from a set of separate and distinct choices. The following questions taken from several of the instruments are examples of multiple choice questions.

Which parents/guardians live with the child being screened? _____

Answer Choices:

1 = Male parent/guardian
2 = Female parents/guardians
3 = Both male and female parents/guardians

Is the female head-of-household (HOH) currently .... ____

Answer Choices:

1=Not employed?
2=Employed part-time?
3=Employed full-time?
4=There is no female HOH.

A rating question is a form of a multiple choice question in that the respondent is given a set of answer choices from which to choose. Its distinctive feature is that the set of answer choices have an hierarchical order from high to low, best to worst or very satisfied to very dissatisfied. Several examples from the instruments are given below.

The statements listed in this question characterize various aspects of the relationship among individuals working with preschool handicapped children. Use the answer choices to indicate your opinion of each statement with respect to the program for which you work.

Answer Choices:

1=Very satisfactory
2=Satisfactory
3=Adequate
4=Needs some improvement
5=Needs much improvement
6=Not applicable

Communication Between Supervisors and Staff

Quality of information given staff on management decisions which affect them .... ____

Amount of feedback given staff on their work .... ____

Quality of feedback given staff on their work .... ____

Opportunity given staff to express opinions to supervisors .... ____

Encouragement of staff to express opinions to supervisors .... ____

Respect shown by supervisors for opinions of staff .... ____

Opportunity for staff to express opinions regarding program policies .... ____

Communication Among Staff

Respect shown by staff for other staff's opinion .... ____

Exchange of information among staff working with the same child . . . . ____

Cooperative spirit among staff ...,.. ____

Frequency of interactions among staff .... ____

Quality of interactions among staff .... ____

Communication with Parents

Frequency of communication with parents ... . ____

Quality of communication from parents .... ____

Amount of parent participation in parent programs/meetings .... ____

Parent responsiveness to staff phone calls or requests .. . . ____

Stability Rating. Using the scale of 1 to 7 below. rate the stability of the family Rate as low a family that has had a great deal of upset in their day-to-day schedule or whose members are having difficulty accepting their life situation. A family's stability would be low if a family member has difficulty in coping with the demands of having a handicapped child, is unable to deal with stress. is abusive toward the child, or is experiencing marital problems. Rate as high a family whose members are able to cope with the demands of having a handicapped child. are able to deal with stress. and who appear to have a strong marital relationship.

Scale

Low						High
1	2	3	4	5	6	7

294
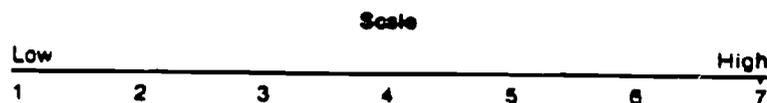
In a rank order question the respondent is asked to categorize a set of items/statements in some type of order, e.g., order of importance, order of highest frequency, etc. Some examples of this type of question follow.

What *three* activities do you perform most often in the preschool program? Code a "1" next to the activity you do more than any other, a "2" next to the activity you do second most, and a "3" next to the activity you perform third most. EACH NUMBER SHOULD BE USED ONLY ONCE.

Assist in classroom teaching .... _____

Assist in preparation of instructional materials . ... _____

Classroom consultation .... _____

Classroom teaching .... _____

Educational assessment .... _____

Feeding therapy .... _____

Fine motor assessment .... _____

Gross motor assessment .... _____

Hearing testing .... _____

Home visits .... _____

Manage/supervise nonacademic activities (feeding, transportation, recess, etc.) ..... _____

Observation .... _____

Occupational therapy .... _____

Paperwork .... _____

Parent counseling .... _____

Physical therapy .... _____

Psychological assessment .... _____

Sensory stimulation .... _____

Speech and language assessment .... _____

Speech therapy .... _____

Supervise school personnel .... _____

Teaching parents .... _____

Vision testing. .... _____

Other (Specify: _____) _____

What kind of preplacement assessment information do you find most useful? Please rank order the following kinds of preplacement assessment information according to how useful each is to you. Put a "1" in the space next to the kind of assessmen, and most useful, a "2" for the next useful. DO NOT USE THE SAME NUMBER MORE THAN ONCE

Standardized tests* . ... _____

Developmental checklists .... _____

Developmental history .... _____

Diagnostician s write-ups of behavior* . ... _____

Family background information .... _____

Parent's observation of child s ability and behavior .... _____

Physician s medical reports .... _____

BEST COPY AVAILABLE

2 6 5

4-17

In a checklist question the respondent is given a set of answers and is asked to write a check mark next to how many answers are applicable. In some instances the respondent is instructed to write some code number next to all answers. For example, a "1" may indicate "yes" and a "2" may indicate "no." The following questions are examples of this type of question that you will find in the instruments.

When testing new enrollees, which of the following areas did you assess most frequently? CHECK ALL APPLICABLE.

Fine motor** .... _____

Gross motor** .... _____

Hearing .... _____

Intellectual/problem solving** .... _____

Neurological .... _____

Orthopedic .... _____

Pre-academic or readiness skills** .... _____

Self-help skills** .... _____

Social/emotional/behavioral functioning** .... _____

Speech and language/oral motor functioning** .... _____

Vision .... _____

Other (Specify: _____) _____

Please indicate in what way(s) the preschool child find activities in your school district may be changed

Answer Choices:

1 = This change is planned.
2 = This change is not planned.

Reduction in staff .... _____

Increase in staff .... _____

Reduction in the number of screening clinics .... _____

Increase in the number of screening clinics .... _____

Restriction of the age range screened (Specify: _____) _____

Extension of the age range screened (Specify: _____) _____

Decrease in amount of funds available .... _____

Increase in amount of funds available .... _____

Change in test instruments used .... _____

Increase in number of tests used .... _____

Decrease in number of tests used .... _____

Revision of forms used .... _____

Other (Specify: _____) _____

Other (Specify: _____) _____

266

Open-ended questions are those in which the respondent must answer in his/her own words. No choices or possible answers are offered as part of the question. Several questions from the instruments are presented below to illustrate this type of question.

Please give a brief description (ability level, age, primary handicapping condition, educational needs, etc.) of the type(s) of children that you believe were *inappropriately* placed in your program?

_____   _____

_____

_____

_____

What features of your record keeping procedures have worked particularly well and could be recommended to other program staff who wish to improve their procedures?

_____

_____

_____

What suggestions or recommendations do you have for your child's program that would improve its communication with parents?

_____

_____

_____

_____

BEST COPY AVAILABLE

A numerical question is one which requires a number for an answer. These questions generally ask "how many." Most of the suggestions we give you on analyzing this type of response are also useful with summarizing test scores and children's ages. Several examples of this type of question taken from various instruments are given below.

	Full-time*	Part-time*
How many ers have you worked with handicapped children or adults?	_____ years	_____ years

a. In the pas: _chool year how many preschool children has your office considered for placement? .... _____

b. How many of these children were being considered for an initial placement? .... _____

Now that you know what type of questions you will encounter on the questionnaires, review the next few pages to see how you might want to summarize the responses obtained from these different type of questions.

BEST COPY AVAILABLE

265

Example Analysis/Summary of a Multiple Choice Question

Data Analysis/Summary Steps

1. Count the number of respondents who selected each response.
2. Calculate the percentage of respondents who selected each response.
3. Examine the distribution; note where the majority of responses fall.

Example. The table below summarizes possible answers to a multiple choice question on services provided to parents. Examples of a frequency and relative frequency distributions, as discussed earlier, are provided.

Question: Of all the services in which you or your spouse participated or used, which one did you find the most helpful?

Source: Program Effectiveness Component
Services to Parents, Parent Questionnaire

Answer Choices	Frequency Distribution	Relative Frequency Distribution
	(N)	(%)
Babysitting	3	6
Group Counseling	5	10
Individual Counseling	20	40
Newsletter	12	24
Social Functions	10	20
	50 .	100

Sample Summary Statements:

o   Twenty (20) of the parents responded that they found group counseling to be the most helpful service in which they participated. This represents 40% of the parents who answered this question.

o   Relatively few parents (6%) indicated the babysitting services provide by their child's program as the most helpful service that they used.

Example Data Analysis/Summary of Rating Question

Data Analysis/Summary Steps

1. Count the number of respondents who selected each response.
2. Calculate the percentage of respondents who selected each response.
3. Construct a distribution table.
4. Examine the distribution, noting where the majority of responses fall.

Example. The table below summarizes possible responses to a rating question on record keeping practices. Examples of a frequency and relative frequency distribution are illustrated.

Question: Rate your degree of satisfaction with current record keeping practices.

Source: Program Management Component
Record Keeping, Staff Questionnaire

Answer Choices	Frequency Distribution	Relative Frequency Distribution
	(N)	(%)
Very Satisfied	5	10
Satisfied	25	50
Neither satisfied nor dissatisfied	10	20
Dissatisfied	8	16
Very dissatisfied	2	4
	50	100

Sample Summary Statements

o   Twenty-five (25) of the 50 respondents or 50 % of the sample reported that they were "satisfied" with current record keeping procedures.

o   Twenty percent of the respondents expressed some degree of dissatisfaction with the current record keeping practices in their program.

279

Data Analysis/Summary Steps

1.   Count the number of respondents who gave each item each rank (N).
2.   Calculate the average rank for each item.
    a.   Multiply each rank by the number of respondents who assigned the rank to the item (Rank 1 times N for Rank 1, Rank 2 times N for Rank 2, etc.)
    b.   Add together the products of these multiplications.
    c.   Divide this sum by the total number of respondents who rank the item.
3.   Determine which item received the highest rank, next to highest, lowest, etc.

Example. The table below summarizes a possible frequency distribution of ranks in response to a question about the types of preplacement assessment information found most useful by staff.

Question: Rank order the following kinds of preplacement assessment information according to how useful each is to you. Put a "1"in the space next to the kind of assessment you find most useful, a "2" for the next most useful, etc. DO NOT USE THE SAME NUMBER MORE THAN ONCE.

Source: Assessment Component
            Preplacement Assessment - Staff Questionnaire

Assessment Type	Number of Respondents Who Gave a Rank of:				Average Rank
	1	2	3	4	
Standardized test	6	24	14	6	2.40
Developmental checklist	30	11	3	6	1.70
Developmental history	6	11	22	11	2.76
Physician's medical report	8	4	11	27	3.14

Total number of respondents = 50

Sample Summary Statements

o   Of the various type of assessment information the respondents were to rank according to importance, physician's medical reportは were rated as the least useful.

o   Developmental checklists are the most useful kind of preplacement information received by staff. This type of assessment information received the rank of #1 most frequently and the lowest average rank (1.70).

Example of Data Analysis/Summary of Checklist Questions

Data Analysis/Summary Steps

1. Count the number of times each answer choice was checked.
2. Calculate the percentage of times each item was checked. This is the relative frequency distribution based on the total number of checks: $\% = (\text{\# of checks for item} / \text{total \# of checks}) \times 100$.
3. If the respondent was asked to check as many as apply, calculate the relative frequency distribution based on the total number of respondents for that question:

    $\% = (\text{\# of checks for item} / \text{total \# of respondents}) \times 100$
4. Report the item with highest/lowest number of checks.
5. If the respondents were asked to check as many as apply, you may also want to report the percentage of respondents who checked each item. (The sum of these percenages will not equal 100%.)

Example. The table below presents a frequency distribution of responses to a checklist of how parents found out about services for handicapped preschoolers.

Question: How did you find out about activities or services offered by the school district for handicapped preschoolers? CHECK ALL THAT APPLY.

Source: Child Find Component
Child Find Community Awareness, Parent Questionnaire

	Step 1 # Checks	Step 2 % Checks	Step 3 % Respondents*
Radio Advertisements	20	20	40
TV Advertisements	40	40	80
Pediatrician	10	10	20
Newspaper	18	18	36
Friend	12	12	24
	100		

*Number of respondents = 50

Sample Summary Statements

o   TV advertisements are the most frequent way that parents receive information about services for handicapped preschoolers.

o   Ten percent of the parents indicated that they found out about services for handicapped preschoolers from their pediatrician.

Data Analysis/Summary Steps

1. Review the responses and try to classify them according to some set of categories.
2. Once the responses are classified, count the number of responses that were assigned to each category.
3. Calculate the percentage of responses in each category.
4. Identify categories with the most frequent responses.

Example. This example illustrates how you could summarize the responses of parents to an open-ended question about what a program could do to increase parent participation.

Question: Is there anything that the program could do that would increase you or your spouse's participation in the services it offers?

Source: Program Effectiveness Component
Services to Parents - Parent Questionnaire

Responses:
1. Tell the parents what services are offered.
2. Offer child care at the school during such programs.
3. Make available a brochure listing services offered.
4. Schedule the parent meetings at night so the husbands can attend.
5. Give notice of what is offered and when.
6. Move the program up-county.
7. Provide sitting service for children when evening events occur.
8. Offer babysitting for younger siblings during day time meetings.
9. Make the meetings shorter so parents have time to attend.
10. Provide babysitters for program child.

Categories:	Response #	N	% of responses
A. Publicize services offered	1,3,5	3	30
B. Offer child care	2,7,8,10	4	40
C. Offer evening meetings	4	1	10
D. Hold activities in different location	6	1	10
E. Make the meetings briefer	9	1	10
		10	100

Number of respondents = 5

Sample Summary Statements

o · Of the ten responses given by parents, four suggested that programs provide child care in order to increase parent participation in program services.

o   Relatively few parents indicated that providing evening meetings, changing the location of meetings, or making the meetings shorter would increase their participation in parent services.

27_j

Data Analysis/Summary Steps

1. Construct the frequency distribution of the different numerical responses.
2. Examine the distribution to determine the appropriate measures of central tendency and variability. Determine if the evaluation questions you want answered require higher level of statistics. If so, use the references in Appendix B, the Annotated Bibliography to calculate those measures.

Example. This example illustrates how to summarize the data on a set of children's ages and is based on the record reviews of 50 preschool children. Below is a frequency distribution table of their ages in months.

Question: What is the child's age?

Source: Child Find Component, Screening Process, Summary Intake Information, Record Review Form

Age in months	Number of children	Age in months	Number of children
6	2	26	2
8	1	28	9
9	1	30	1
10	1	32	5
12	2	36	4
15	1	37	4
22	3	48	5
24	4	55	5

Measure of central tendency. For purposes of illustration, we have calculated all three measures of central tendency.

Mean: The mean is found by summing the ages of the 50 children and dividing by the number of children.

$$\text{Mean} = (6 + 8 + \ldots 48 + 55) / 50 = 1541 / 50 = 30.82$$

Median: The median or middle age in the distribution is the sum of the two middle ages (the 25th and 26th ages in the distribution) divided by 2. This is 28 months.

$$\text{Median} = (28 + 28) / 2 = 28$$

Mode: If you examine the first distribution above, you will see that the most frequently occurring or modal age is 28 months.

Measures of Variability. The variability in this data could be appropriately summarized by the range or the standard deviation. The fact that the children ranged in age from 6 to 55 months is probably more meaningful and of more interest to your audience than a standard

deviation. If you wish to calculate the standard deviation, refer to
Appendix B, Annotated Bibliography, for help.

Sample Summary Statements

o   The average age of this sample of 50 preschool children is 30.8
     months.

o   The 50 children range in age from 6 to 55 months.

276

Writing Summary Reports

Once you've collected and analyzed your data, you'll ... it to write a summary report to communicate what you learned from the evaluation. In this section we'll give you some suggestions for approaching the task of report writing. We've also provided several examples of summary reports in Appendix H.

Before you begin your report there are several questions you should ask yourself:

o   Who is your audience?
o   What does your audience need to know about the evaluation?
o   How can you best present this information so that the audience reads and understands it?

Audience

The audience for whom your report should be written is generally the persons, groups, agencies or programs whose information needs and interests guided the evaluation. However, your audience may also include people who participated in the evaluation by providing data (e.g., program staff and parents). Because of this, you may find it necessary to write different summary reports for different audiences, gearing the content of each report to the interests and concerns of that audience.

The following suggestions are made to help you guide the report for your various audiences.

o   Only include the issues and concerns of interest to that particular audience. Irrelevant material will not only distract them from what they want to know but also may make the report harder to understand.

o   Tailor the level of technical information, the amount of detail, and the vocabulary to your audience.

Content

The question of what should be in the summary report is intimately linked to the goals of the evaluation as well as who the audience is. If the purpose of the evaluation is to describe the status of an activity, then you can stick to a straight summary of your data. On the other hand, if your purpose is to provide information which will be considered in policy making, then any implications or subjective interpretation of your data might be appropriately included.

Regardless of your purpose, your report should include:

o   a clear statement of the purpose of the evaluation;
o   a description of who participated in the evaluation, i.e., the respondents to your questionnaires or interviews, or the sample of children tested, observed, or whose records you reviewed;
o   a discussion of how the evaluation was conducted;
o   a summary of relevant results; and
o   a discussion of conclusions that can be drawn from the results.

Some general suggestions for the content of the report include:

o   Use direct, simple, jargon-free language.
o   Keep the report focused on its purpose; don't give your audience more information than it needs.
o   Don't provide any findings that might infringe upon or violate the rights of others; do not breach the confidentiality of the sources of your information.
o   List and explain alternative interpretations of your data.
o   Where relevant, include quotations from responses to open-ended questions. These can provide valuable information to your audience.

Organization and Presentation

How you organize and present the summary of your data may very well determine whether or not your audience reads it. The following suggestions are made to help increase the likelihood that your report will be read and understood by your audience.

o   Highlight important points by listing them in item form with bullets (as we've done here), or by using underlining, numbering, indentation, capital letters, or changes in typestyle.
o   Summary reports, longer than a few pages, should begin with an overview, or introductory summary which tells the reader what's coming.
o   Use descriptive section headings to direct your reader to the information of interest.
o   Summarize the data by evaluation question. That is, begin a section with a question and then summarize the data which addresses that question.
o   Include tables or graphs wherever possible to summarize r data. They will give the reader a visual picture of the data. In some instances, data will be easier to understand in this form than in long narrative summaries. Refer to the following references listed in Appendix B, the Annotated Bibliography, for a discussion of how to graph and table data:

    How to Calculate Statistics, Fitz-Gibbon and Morris, 1978
    How to Present an Evaluation Report, Morris and Fitz-Gibbon, 1978
    Program Evaluation, Brinkerhoff, et al., 1983

APPENDIX A
GLOSSARY

Assessment Process: the various stages in testing a preschool child to determine if a handicapping condition exists, what that condition may be, and from what instructional programming the child could benefit most.

Audience: the persons, groups, agencies, or programs whose information needs and interests guide the evaluation.

Checklist Question: a type of question which gives the respondent a set of answers to check (√) or code according to instructions.

Child Find Procedures: the operation and administration of a child find unit, procedures for alerting the community to child find activities/services, and various steps in the screening process employed by the child find unit.

Components: the main sections of the evaluatⁱⁱ model, each dealing with a different aspect of service delivery to handicapped preschoolers, e.g., the Program Effectiveness Component.

Crosstabulations: a statistical procedure which involves calculating a frequency distribution or measure of central tendency for different groups of respondents, and then organizing the results in a table so that responses can be compared.

Data Collection Instruments: the "tools" or methods used to collect the information needed to answer evaluation questions, e.g., questionnaires, interviews, record reviews, observation systems.

Data Processing: the preparation of data for analysis.

Distribution Table: a table which shows the number and percentage of responses in each of several given categories.

Evaluation Model: a package of materials that can be used to conduct an evaluation of some aspect of service provision to handicapped preschoolers.

Evaluation Questions: questions which address the concerns and issues about which information is to be gathered.

Frequency Distribution: a way of illustrating how often a response is given, e.g., the number of times different answers are given to the same question or the number of children who attained various scores on a test.

Hand-Tallying: the procedure of recording data on summary sheets using fence tallies (////) in order to facilitate counting the number of responses that fit in each of several given categories.

Identification Numbers: numbers assigned to each subject (e.g., children being tested, respondents to questionnaire) in order to assist in data organization and to protect the confidentiality of the subjects.

Interview: a data collection tool consisting of a series of questions which are asked of the respondent in person or by phone, thus allowing the answers to be probed if clarification is necessary.

Mean: the measure of central tendency commonly understood as the mathematical average, i.e., the number found by dividing the sum of all the values by the number of values.

Measures of Central Tendency: measures which describe what the data look like "on the average," i.e., measures that give you an idea of a typical response to a question or a typical score on a test. The three measures of central tendency are the mean, median and mode.

Median: the measure of central tendency which indicates the midpoint of a distribution, i.e., the point above and below which one-half of the scores fall.

Mode: the measure of central tendency which indicates the most frequently occurring value of the data, e.g., the most frequently selected answer choice or the most frequently occurring age of the sample.

Multiple Choice Question: a type of question which asks the respondent to select an answer(s) from a set of separate and distinct choices.

Numerical Question: a type of question which requires a simple numerical response.

Observation System: a data collection instrument which involves the direct observation of certain activities in order to obtain information about those activities.

Open-ended Question: a type of question which asks the respondent to answer in his/her own words; i.e., no choices or possible answers are offered to the respondent.

Placement Process: the procedures by which a child is placed in a special education program.

Program Effectiveness: the impact of the program as measured by changes in the child's developmental skills, changes within the child's family following the child's placement in a special education program, and the amount and quality of the services delivered to the child and family.

Program Management: how a program is managed and operated, e.g., the procedures for communication among staff members and between staff and parents, and the filing, maintaining and updating of student information.

Questionnaire: a type of data collection instrument which is self-administered and consists of a series of questions.

Rank Order Question: a type of question which requires the respondent to categorize a set of items/statements in some type of order, e.g., order of importance, order of highest frequency.

Rating Question: a form of the multiple choice question in which answer choices have a hierarchial order from high to low, better to worse, or very satisfied to very dissatisfied.

Record Review: a type of data collection instrument which involves reviewing student files to obtain or clarify information.

Relative Frequency Distribution: a way of illustrating how often a response is given relative to the number of respondents; e.g., the percentage of different answers given to the same question or the percentage of children who attained various test scores.

Right Justifying Answers: the procedure of recording numerical responses in a fashion such that if more answer spaces are provided than are needed for a particular answer, the answer is written as far to the right as possible; e.g., if the answer to a question is "5", but two answer spaces have been provided, then the answer should be recorded as "05." This procedure is necessary if the data is to be analyzed by computer.

Subcomponents: the subsections within each Component in this evaluation model which focus on a specific area within the Component, e.g., the Preplacement Assessment Subcomponent within the Assessment Component.

Summary Report: a document written to communicate what has been learned from the evaluation.

281

APPENDIX B
ANNOTATED BIBLIOGRAPHY

Some References on Evaluation

Best, J. Research in Education. Englewood Cliffs, NJ: Prentice-Hall, Inc., 1981.

Although this book is essentially an overview of the entire research process, from selecting a problem and preparing a research proposal to writing a research report, several of its chapters may be of interest to users of this evaluation model. Chapter 3 discusses experimental research and includes several principles which are applicable to evaluation research. Chapter 6 covers the methods and tools of research, including several which are used in this model—observation, interviews and questionnaires. Also included are some tips on organizing data. Descriptive data analysis is covered in Chapter 7, including frequency distributions, measures of central tendency and variability, standard scores and correlation. Chapter 8 explains the underlying theory of inferential data analysis and how to test for the difference between two groups.

Bradburn, N. and Sudman, S. Improving Interview Method and Questionnaire Design. San Francisco, CA: Jossey-Bass Publishers, 1980.

As the title suggests, this book would be helpful if you will be using any of the interviews in this model or if you choose to design your own questionnaires. The book's primary focus, however, is the possible response effects of threatening questions in survey research. Much of the text is devoted to the problem of eliciting from respondents threatening information such as drug use, alcohol consumption, sexual behavior and criminal arrests. Obviously, these are not the type of questions you will be asking respondents when using this model. Regardless, the suggestions on question construction, method of administration and interview behavior were useful in developing this model, and may be helpful to the reader who wants to learn more about these topics.

Brinkerhoff, R., Brethower, D., Hluchyj, T. and Nowakowski, J. Program Evaluation: A Practitioner's Guide for Trainers and Educators. Boston, MA: Kluwer-Nijhoff Publishing, 1983.

As the title suggests, this book is a "how-to" guide for program evaluation. The book was developed as part of a project to improve the evaluation capabilities of projects and programs engaged in preparing personnel to work in special and regular education. Consequently, the examples refer primarily to staff training programs. Nevertheless, the sourcebook contains chapters on guidelines, resources and references for seven key evaluation functions, including: designing the evaluation; collecting, analyzing and reporting data; and managing an evaluation.

282

Cronbach, L., Ambron, S., Dornbusch, S., Hess, R., Hornik, R., Phillips, D., Walker, D. and Weiner, S. <u>Toward</u> <u>Reform</u> <u>of</u> <u>Program</u> <u>Evaluation</u>. San Francisco, CA: Jossey-Bass Publishers, 1980.

This book is a relatively recent treatment of the theory and thinking behind program evaluation. Until recently, program evaluation was widely regarded as a service to decision-makers who needed accurate measurements of the impact of particular programs. This book suggests that today the aim of evaluation should be to help everyone, not just policy-makers, understand what programs accomplish and why they fall short of their objectives. In keeping with that perspective, this book takes a new look at the purposes, methods and uses of evaluation.

Guba, E. and Lincoln, Y. <u>Effective</u> <u>Evaluation</u>. San Francisco, CA: Jossey-Bass Publishers, 1981.

This book describes a relatively new approach to evaluation, with the goal of making evaluation findings useful to their audiences. This approach combines "responsive evaluation" (where assessments are keyed directly to concerns of the evaluation's audience) and "naturalistic methodologies" (which grow out of the situation at hand, rather than follow a predetermined research design). The authors explain the theory and concepts of this <u>naturalistic</u> <u>response</u> <u>evaluation</u> and set out step-by-step guidelines for its implementation--from starting an evaluation to identifying key audiences and eliciting their concerns, gathering relevant information, reporting results, and making persuasive recommendations. In the process, they cover interviewing, observation and record reviews as data collection techniques.

Hanson, G. (Ed.). "Evaluating Program Effectiveness," in <u>New</u> <u>Directions</u> <u>for</u> <u>Student</u> <u>Services</u>. San Francisco, CA: Jossey-Bass Inc., Publishers, 1978.

This book is part of a quarterly series of sourcebooks on college student services. This inaugural issue covers the elements of evaluation theory, identifies the critical ideas and techniques that underpin good evaluations, and offers practical advice about conducting evaluation. Although most of the articles are related to the evaluation of college student services, three articles offer general treatments of evaluation. "Approaches to Evaluation: Models and Perspectives" discusses several key theoretical models of evaluation. "Method, Design and Implementation in Evaluation" identifies three major sources of error that contribute to the failure of most evaluation studies and presents a cookbook for a good evaluation plan. "How Evaluation Can Make a Difference" identifies key factors which contribute to useful evaluations and assist in the preparation of effective evaluation reports.

283

Kerlinger, F. <u>Foundations of Behavioral Research</u>. New York, NY: Holt, Rinehart and Winston, Inc., 1973.

This is a classic textbook on scientific behavioral research, especially as it applies to education and psychology. The book's purpose is to help the reader understand the fundamental nature of the scientific approach to problem solution. The explanations are relatively lengthy and many examples are included. Chapters of possible interest to users of this model are those on the analysis and interpretation of data (9), crossbreaks (10), basic descriptive statistics (11), and statistics to test differences between groups and relationships between variables (12). Also recommended are the sections on research designs, types of research, measurement, and methods of observation and data collection, particularly the chapters on ex post facto research (22), survey research (24), foundations of measurement (25), reliability (26), interviews (28), objective tests and scales (29), and observations of behavior (31). Finally, the book also covers more sophisticated statistical procedures such as analysis of variance, multiple regression and factor analysis.

Loveland, E. (Ed.). "Measuring the Hard-to-Measure," in <u>New Directions for Program Evaluation</u>. San Francisco, CA: Jossey-Bass Inc., Publishers, 1980.

This book is part of a quarterly sourcebook on program evaluation. It addresses difficulties in measuring hard-to-measure aspects of programs, reviews methods of measuring selected hard-to-measure variables, and relates measurement problems to issues of purpose and methodology in evaluation. Although the book's treatment of evaluation is at a fairly advanced level, the article entitled "Evaluating the Effectiveness of Teaching" may be of interest to users of this model. The last article, "Program Devaluation: Can the Experiment Reform?," suggests that the program evaluator should reduce the size of outcomes measured. This suggestion may be useful to the reader in selecting measures of program effectiveness.

Morris, L. (Ed.). <u>Program Evaluation Kit</u>. Beverly Hills, CA: Sage Publications, 1978.

This kit is a set of books intended to assist people who are conducting evaluations of educational programs. Each book covers a different aspect of the evaluation process, indicated by its title, so you can consult only those that seem appropriate. Because the kit comprises a set of step-by-step procedural guides, it can assist a person conducting elaborate evaluations or it can help people as they gather, analyze and interpret information for almost any purpose—whether it be surveying people's attitudes, observing a program in action, or measuring student achievement. Each of the books is annotated below.

Morris, L. and Fitz-Gibbon, C. <u>Evaluator's</u> <u>Handbook</u>. Beverly Hills,
    CA: Sage Publications, 1978.

    This book is meant to help you get started and to serve as an organizer
    for the evaluation. It is also a directory to the rest of the Kit.
    Chapter 1 covers critical issues surrounding program evaluation.
    Chapter 2 presents some useful information for an evaluator who wants
    to assist program staff. Chapters 3, 4 and 5 contain step-by-step
    guides for organizing and accomplishing three types of evaluation:
    1) formative evaluations to assist in program development, 2) summative
    evaluations to measure program impact, and 3) small experiments for
    pilot-testing or evaluating a program with a few measurable objectives.

Morris, L. and Fitz-Gibbon, C. <u>How</u> <u>to</u> <u>Deal</u> <u>with</u> <u>Goals</u> <u>and</u> <u>Objectives</u>.
    Beverly Hills, CA: Sage Publications, 1978.

    This book provides advice about using goals and objectives as guides
    for gathering opinions about what a program should accomplish. The
    book then describes how to organize the evaluation around the goals and
    objectives. It suggests ways to identify and write goals and
    objectives, reconcile objectives with standardized tests, and assign
    priorities to objectives.

Fitz-Gibbon, C. and Morris, L. <u>How</u> <u>to</u> <u>Design</u> <u>a</u> <u>Program</u> <u>Evaluation</u>. Beverly
    Hills, CA: Sage Publications, 1978.

    This book discusses the logic underlying the use of research designs in
    conducting evaluations. A design is a plan which dictates when and
    from whom data will be gathered during the course of an evaluation
    (e.g., the pretest-posttest design). The book covers step-by-step
    procedures for setting up six different designs to underpin the
    collection of evaluation data, including experimental, quasi-
    experimental and time series designs. It also includes instructions
    about how to construct random samples.

Morris, L. and Fitz-Gibbon, C. <u>How</u> <u>to</u> <u>Measure</u> <u>Program</u> <u>Implementation</u>.
    Beverly Hills, CA: Sage Publications, 1978.

    This book presents step-by-step methods for designing and using
    measurement instruments (e.g., record reviews, observations, and self-
    reports) to accurately describe how a program operates. The authors
    emphasize that you cannot evaluate something without describing it
    first and suggest several perspectives from which to measure
    implementation. This book would be most useful to someone unfamiliar
    with the programs he/she is evaluating.

2 ⊙ ⋅

Henerson, M., Morris, L. and Fitz-Gibbon, C. <u>How to Measure Attitudes</u>. Beverly Hills, CA: Sage Publications, 1978.

This book is intended to help the evaluator select or design credible instruments for attitude measurement. It discusses problems involved in measuring attitudes. The book includes sources of available attitude instruments and gives step-by-step instructions for developing questionnaires, interviews, attitude rating scales, sociometric instruments and observation schedules. This could be useful if you want to supplement the instrumentation provided in this model. Also potentially helpful is the chapter on how to analyze and report results from attitude measures.

Morris, L. and Fitz-Gibbon, C. <u>How to Measure Achievement</u>. Beverly Hills, CA: Sage Publications, 1978.

This book is designed to help you determine how well the program you are evaluating has met its achievement objectives. It will be most useful if you are planning to select or develop assessment instruments to measure child developmental skill gains as part of the program effectiveness component. To help you find a published test to fit your evaluation, the book lists anthologies and critiques of existing norm- and criterion-referenced tests. If you want to construct your own achievement test, the book presents an annotated guide to the vast literature on test construction. Chapter 4 lists test item banks and test development and scoring services. The final chapter describes how to analyze and present achievement data to answer commonly-asked evaluation questions.

Fitz-Gibbon, C., and Morris, L. <u>How to Calculate Statistics</u>. Beverly Hills, CA: Sage Publications, 1978.

This book is divided into three sections, each dealing with an important statistical function in relation to evaluation: summarizing data through measures of central tendency and variability, testing for the significance of differences found among groups, and testing relationships through correlations. Detailed worksheets, ordinary language explanations and practical examples accompany each step-by-step statistical procedure.

Morris, L. and Fitz-Gibbon, C. <u>How to Present an Evaluation Report</u>. Beverly Hills, CA: Sage Publications, 1978.

This book is designed to help you convey to various audiences the information that has been collected during the course of the evaluation. It contains an outline of a standard evaluation report; directions and hints for formal and informal, written and oral reporting; and model tables and graphs for displaying and explaining data.

Some References on Statistics

Best, J. <u>Research</u> <u>in</u> <u>Education</u>. Englewood Cliffs, NJ: Prentice-Hall, Inc., 1981.

   See **Some References on Evaluation** for a description of this book, which includes material on statistics.

Brinkerhoff, R., Brethower, D., Hluchyj, T. and Nowakowski, J. <u>Program</u> <u>Evaluation</u>: <u>A</u> <u>Practitioner's</u> <u>Guide</u> <u>for</u> <u>Trainers</u> <u>and</u> <u>Educators</u>. Boston, MA: Kluwer-Nijhoff Publishing, 1983.

   See **Some References on Evaluation** for a description of this book, which includes material on statistics.

Fitz-Gibbon, C., and Morris, L. <u>How</u> <u>to</u> <u>Calculate</u> <u>Statistics</u>. Beverly Hills, CA: Sage Publications, 1978.

   See **Some References on Evaluation** for a description of this book, which includes material on statistics.

Kerlinger, F. <u>Foundations</u> <u>of</u> <u>Behavioral</u> <u>Research</u>. New York: Holt, Rinehart and Winston, Inc., 1973.

   See **Some References on Evaluation** for a description of this book, which includes material on statistics.

McCall, R. <u>Fundamental</u> <u>Statistics</u> <u>for</u> <u>Psychology</u>. New York, NY: Harcourt, Brace and World, Inc. 1970.

   This is an introductory undergraduate testbook on basic descriptive and inferential statistics with examples taken mostly from psychology and education. Topics of particular interest to users of this evaluation model are frequency distributions, measures of central tendency and variability, correlation and hypothesis testing (statistics for determining group differences). The reader with more background in statistics may also be interested in the chapters on regression, analysis of variance, and nonparametric techniques.

Norusis, M. <u>SPSS Introductory</u> Guide: <u>Basic Statistics</u> <u>and</u> <u>Operations</u>. New York, NY: McGraw-Hill Book Company, 1982.

   If you have access to a computer, which is set up to use the SPSS Batch System (Statistical Package for the Social Sciences), then this guide should prove very useful. The SPSS Batch System is a widely used tool for data analysis. It allows you to accomplish a broad range of statistical analyses and data modification tasks with only a minimal understanding of computers. This book is intended for novice users of the system and focuses on only the simple, most commonly used features and procedures, including: frequency distributions, descriptive statistics, crosstabulation, tests for group differences, and correlations. Also included are two more sophisticated statistical procedures—analysis of variance and multiple regression.

Some References on Preschool Special Education

In this section of the bibliography, we have chosen to annotate a selection of books published in the last three years. We have selected books according to this recency criterion because we feel that most users of this evaluation model will be relatively familiar with the literature in this field and would primarily be interested in the newest references.

Algozzine, R., Schmid, R. and Mercer, C. <u>Childhood Behavior Disorders:</u> <u>Applied Research and Educational Practice</u>. Rockville, MD: Aspen Systems Corporation, 1981.

This textbook for practitioners in the field is a compilation of the vast literature directly and indirectly related to emotional disturbance, behavior disorders and emotional handicaps. It covers the theories and practices that have evolved to help us understand these disorders. Since emotional handicaps are seldom identified in the preschool child, the bulk of this book deals with school-age children. Much of the content, however, is relevant to preschool populations, and one chapter in particular deals with preschool children: "Identification and Treatment of the Young Child."

Gallagher, J. (Ed.). <u>New Directions for Exceptional Children</u>. San Francisco, CA: Jossey-bass Inc., Publishers.

This quarterly sourcebook on exceptional children covers current major trends in a variety of disciplines and problem areas. Topics of potential interest in the first four issues include the ecology of the handicapped child, techniques of parenting, and language development. For example, the issue entitled "Ecology of Exceptional Children" contains articles on preschool classrooms for the handicapped, the impact of preschool mainstreaming on parents, and parent involvement in preschool special education programs.

Michaelis, C. <u>Home and School Partnerships in Exceptional Education</u>. Rockville, MD: Aspen Systems Corporation, 1980.

This book offers pragmatic guidelines to program staff for avoiding the major communication/organizational pitfalls of home-school relationships that are so important in the education of young handicapped children. The authors offer insights into the most commonly noted reactions of parents of the handicapped, which range from overprotective parents to "disinterested personal preoccupation." The book includes discussions of effective parental participation in the education, care and management of their handicapped child, as well as suggestions for working with siblings in the school. Throughout the book are recommendations for helping parents and professionals work with handicapped children effectively.

Mori, A. and Olive, J. Handbook of Preschool Special Education. Rockville, MD: Aspen Systems Corporation, 1980.

This text attempts to fill certain gaps in the available literature on preschool special education. It combines materials on general developmental theory and assessment with pragmatic methods of preparing practitioners and parents to become effective teachers of young handicapped children. Part I presents suggestions for the development and implementation of intervention programs, including a chapter on assessing child performance. A major portion of this section is devoted to techniques of teaching preschool handicapped children. Part II is a compilation of lesson plan activities that are based on major developmental goals in five areas of growth: reflex/gross motor, perceptual/fine motor, sensory/cognitive, language, and personal/social/self-help. Designed with the busy practitioner in mind, this book uses a simple and concise "look-and-do" approach to present pragmatic material, and numerically coordinates the assessment checklist and developmental goals with the appropriate lesson plans.

Shrybman, J. Due Process in Special Education. Rockville, MD: Aspen Systems Corporation, 1982.

This book covers all the legal issues involved in educating handicapped children. It reviews the relevant laws, P.L. 94-142 and Section 504, and explains the interrelationship of federal, state and local laws. Included are chapters on the legal aspects of the special education process--identification, assessment, programming, the IEP and placement. There are also chapters on special requirements for specific handicaps and how to determine whether a placement is appropriate. Another section of the book covers the roles, rights and responsibilities of students, parents, schools/programs, professionals, hearing officers, and surrogate parents. The final sections of the book deal with the due process hearing, and cover procedures, effective presentations and decisions in such hearings.

Strain, P. (Ed.). Social Development of Exceptional Children. Rockville, MD: Aspen Systems Corporation, 1982.

This volume is a collection of articles on the social development of exceptional children from three special education journals, Exceptional Education Quarterly, Topics in Learning and Learning Disabilities, and Topics in Early Childhood Special Education. Since the assessment of social development is not addressed in this evaluation model, this book may be of interest to anyone evaluating the implementation of a program's social development goals. Although many of the articles in this volume deal with school-age handicapped children, the information also applies to preschool handicapped populations. Articles specifically dealing with preschool-age handicapped children include: "Programmatic Factors Affecting Child-to-Child Social Interactions in Mainstreamed Preschool Programs," "Play and Development," and "The Young Handicapped Child: A Family Perspective."

Topics in Early Childhood Special Education. Rockville, MD: Aspen Systems
    Corporation.

    This quarterly journal, which began in March 1981, covers a different
    preschool special education topic in each issue. Of particular
    interest to the users of this evaluation model are issues on "Assessing
    the Handicapped Preschooler," "Families of Handicapped Children,"
    "Determining Impact: Making Evaluation Work for You," and "Young
    Handicapped Children: Research Findings." Other issues of possible
    interest include: "Managing the Preschool Environment," "Play and
    Development," and "Curricula in Early Childhood Special Education."

                    Some References on Assessment

In addition to the references above which deal with preschool special
education, we have annotated a few recent references specifically on the
assessment of handicapped children. Note that most of the general
references on preschool special education include chapters on assessment.

Compton, C. A Guide to 65 Tests for Special Education. Belmont, CA:
    Fearon Education, 1980.

    The purpose of this book is to make testing a useable tool for
    teachers. Although the book is intended for educators working with
    students in the primary and intermediate grades, a special section
    discusses tests for preschool children. In addition there is an
    introductory section on general issues in assessment, which covers the
    purposes of testing, abuses and misuses of tests, types of tests, the
    diagnostic battery, and test selection .

Doucette, J. and Free, R. Progress Tests for the Developmentally Disabled:
    An Evaluation. Cambridge, MA: Abt Books, 1980.

    This is a professional sourcebook that evaluates tests which measure
    the developmental progress of developmentally disabled persons of all
    ages, including preschool children. The tests and disabled
    populations covered are diverse. The book provides the background
    information necessary to make informed decisions concerning the use of
    assessment tools. Two major kinds of tests are reviewed by the
    authors: 1) client assessment instruments that measure various aspects
    of adaptive function (e.g. self-care, socialization), and 2)
    environmental assessment instruments that weigh characteristics of the
    school and home that may affect personal development. Personality and
    intelligence tests are specifically excluded. Forty-seven tests are
    reviewed in terms of content, administration procedures, interpretation
    methods, utility for certain populations and settings, test research
    and development, and reliability and validity.

                            290

Murray, J. (Ed.) <u>Developing</u> <u>Assessment</u> <u>Programs</u> <u>for</u> <u>the</u> <u>Multi-handicapped</u> <u>Child</u>. Springfield, IL: Charles C. Thomas, Publisher, 1980.

This book offers practitioners a comprehensive guide to instrumentation, strategies, and techniques for developing assessment programs that will yield the data required to plan effective educational programs for the severely and/or multiply handicapped child. The book describes traditional as well as newer instrumentation available for use with children who have various handicaps: deaf or hearing impaired, language impaired, blind or visually impaired, physically handicapped, and multiply handicapped. In addition, there are chapters on the legal mandates, organizational issues, and problems involved in assessing the multiply handicapped child, and the use of assessment data in developing IEPs.

Neisworth, J. (Ed.). <u>Assessment</u> <u>in</u> <u>Special</u> <u>Education</u>. Rockville, MD: Aspen Systems Corporation, 1982.

This volume focuses primarily on assessment in special education as it relates to instruction, rather than to evaluation. The articles in this volume identify and highlight trends and problems in special education assessment, present alternative models and approaches to assessment, and suggest some ways to assess specific groups of individuals. Consequently, it may be of interest to those using the Assessment Compo ent of this evaluation model or to those assessing child developmental skill gains. Of particular interest are the articles on "Multidisciplinary Team Approaches in the Assessment of Handicapped Preschool Children," "Administrative Issues in Evaluation of Exceptionality," "Discontinuity and Instability in Early Development: Implications for Assessment," "Measurement References in the Assessment of Preschool Handicapped Children," and "Assessment of Severely Impaired Young Children: Problems and Recommendations."

Southworth, L., Burr, R. and Cox, A. <u>Screening</u> <u>and</u> <u>Evaluating</u> <u>the</u> <u>Young</u> <u>Child</u>: <u>A</u> <u>Handbook</u> <u>of</u> <u>Instruments</u> <u>to</u> <u>Use</u> <u>from</u> <u>Infancy</u> <u>to</u> <u>Six</u> <u>Years</u>. Springfield, IL: Charles C. Thomas, Publisher, 1980.

This book reviews assessment instruments in a way that will simplify test selection for teachers of preschool children. It includes only tests that can be administered by teachers, parents or paraprofessionals, which yield information that is useful to the teacher. The authors describe both group and individually administered tests that assess the following skills: cognitive, language, speech, motor, academic readiness, socio-emotional, hearing, vision, visual motor, visual perceptual, and general development. Also included are eight suggested guidelines for selecting instruments to use with preschool children.

291

Questionnaires

Each questionnaire consists of two parts: the cover sheet and the response sheet(s). The cover sheet contains a brief statement of the purpose of the questionnaire, directions for completing it and a sample question. The title of the questionnaire is indicated in the upper right hand corner of the cover sheet. There is also a place on the cover sheet for the respondent to write his/her name and, when applicable, the respondent's job title. To help maintain confidentiality when the questionnaires are returned by the respondent, these cover sheets should be detached and filed separately from the response sheets.

The response sheet contains the questions which the respondent will be directed to answer. The name of the questionnaire is printed at the top of each page. In most instances, card column numbers are listed in the right margin next to each answer choice line.

The questionnaires contain two basic types of questions: closed or objective questions and open-ended or free-answer questions. Each of these two types of questions can be further subdivided into different forms. In the closed/objective question the respondent is asked a question and is given a set of answer choices from which he/she must choose an answer (or use in some way to indicate a response). Four different forms of this type of question are used in the model's instruments: multiple choice, rating, ranking and checklist. Most questions in the instruments are closed or objective because this gives the user some control over the possible responses, makes it relatively easy for the respondent to answer, and facilitates data summary.

The open-ended/free-answer type questions require the respondent to answer a question in his/her own words; no alternative answer choices are provided. This type of question is useful when it is desirable to have the respondents clarify a previous answer, offer suggestions or express their feelings. Its use has been limited in this model since this type of question can be time-consuming for the respondent to answer and for the evaluator to summarize.

There are several general points of interest about questionnaires of which the user should be aware. Questionnaires

- o   are time efficient for respondents and evaluators because they can be self-administered or given to many persons simultaneously.
- o   are relatively inexpensive to use.
- o   simplify data processing and analysis since most questions give the respondent a fixed set of answer choices from which to choose.
- o   may restrict the range of responses since there generally are a fixed set of choices from which to select an answer.
- o   may not be appropriate for non-English speaking, illiterate, or blind individuals; when necessary questionnaires can be administered as an interview.
- o   often have poor return rates unless good follow-up procedures are used.

Interviews

The evaluation model contains two interviews, both of which were developed as part of the Placement Process Component. An interview format was adopted for the subcomponents in this area because an instrument was needed that could adapt to exceptional situations where probing into a process and/or reasons for an answer was important. Although this data collection technique is more time-consuming, it was felt that the complexity of the placement process warranted more time for adequate characterization.

The format and structure of the interviews are similar to the questionnaires with regard to the assignment of identification numbers and the location of card column numbers used for data processing. Since only the title of the respondent's job position and the interviewer's name needs to be written on the interview form, the interview has no separate cover sheet that should be detached from the response sheet. The response sheet contains open-ended questions that require either short-answer or essay type responses.

Characteristics of interviews which you should keep in mind include:

   o   Interviews enable probing to clarify a response.
   o   Interviews are flexible and adaptable and questions may be restated if misunderstood.
   o   Respondents do not have to be literate.
   o   Interviews are time-consuming to administer and summarize.
   o   Respondents may pick up non-verbal cues from interviewers which may influence their answers.
   o   Interviewers need to be well-trained.

Record Reviews

Record reviews are included in those model components where information to answer evaluation questions or to clarify other data collected can be found in student files. Most record reviews have three parts:

   o   a cover sheet which contains directions and a space to record the name of the person conducting the record review, the date the form was completed, and the child's name and the program's name where appropriate,
   o   a data sheet on which the information from a student's file is recorded,
   o   a code booklet which lists the codes to be used when recording the information.

The data sheet is set up similarly to the questionnaire response sheet, i.e., there is a space for recording several identification numbers and card column numbers are printed to the right of the response lines.

293

There are three points about record reviews of which you should be aware:

o   Record reviews can be expensive in that they can take a great deal
     of time to conduct.
o   The individual who does the record reviews should be thoroughly
     familiar with the forms that are in files.
o   Information can be collected via record reviews with a minimum
     amount of disturbance to a program's staff or its operation.

Observation Systems

Two observation systems were developed for the evaluation model. They are
contained in two components where direct observation of processes was seen
as critical to evaluate the process confidently. The Child and Classroom
Activity Observation System, contained in the Program Effectiveness
Component, provides a means to summarize a child's classroom activities.
The Placement Meeting Observation System, contained in the Placement Process
Component, provides a systematic method for recording what is discussed at a
child's placement meeting.

Of all the instruments, the observation systems are the most sophisticated
and require more expertise to use. Each observation system is composed of
very detailed directions, a code booklet and an observation form. You
should keep in mind some of the following general characteristics of
observation systems when deciding whether or not to use this type of
instrument.

o   Observations can provide detailed description of classroom
     activities.
o   Observations provide objective information on what actually occurs
     in a classroom.
o   Observations of educational events, e.g., classroom activities,
     are very expensive to conduct.
o   Observers need to be well-tra_ned.
o   High inter-rater reliability need to be established before
     observations can be conducted.
o   It is often difficult to determine how many observations are
     needed to adequately represent the processes being observed.

294

Format

There are several features that were built in to each of the data collection instruments to aid in data management. Most of the instrumentation was written so that the data could be easily hand-tallied or entered into a computer. The respondent must record his/her answer choices on lines provided in the right margin of the instrument. Card column numbers are listed to the right of the answer choice lines. These numbers refer to the column in which the answer choice indicator is to be entered into the computer. In a few instances, the form in which the data is to be recorded prevented the printing of card column numbers. If you decide to use one of these instruments and to enter the data into a computer, use one of the other instruments as an example and assign your own card column numbers.

Codes and Identification Numbers

On each instrument, there is a space, generally located in the upper right hand corner, designated for "Office Use." This space is for recording identification numbers which help identify the instrument, the educational program, the respondent and/or the respondent's job position, depending on the intent of the instrument.

The number that identifies the instrument is the Form Code. This is a three digit number whose first digit indicates the respondent or the type of instrument, if a respondent is not applicable. The following table is the key to the first digit in the Form Code: as they are presently printed on the instruments.

First Digit in Form Code	Respondent or Type of Instrument
1	Directors/Administrators
2	Staff
3	Teachers
4	Parent Educators/Coordinators
5	Placement Personnel
6	Parents
7	Outside Agencies
8	Record Reviews
9	Observation Systems

The second two digits identify the subcomponent to which the instrument belongs:

Second Two Digits in Form Code	Subcomponent
60	Administration
65	Community Awareness
70	The Screening Process

35	Preplacement Assessment
40	Postplacement Assess ent
45	Intake/Review Pro
50	The Placement Meeting
55	Appropriateness of Placement
None	Overview of the Placement Precess
05	Changes in the Family
10	Service Delivery
15	Services to Parents
30	Staff/Student Descriptive Information
25	Communication
20	Record Keeping

You may use these numbers or assign others. Form Codes are useful in data analysis since they will enable you to easily sort information whether you use a computer or hand-tally.

Assigning Identification Numbers

Other identification numbers in this space are to be assigned by the user. The procedure for assigning identification numbers is completely up to your discretion; numbers can be randomly assigned or some order or meaning can be imposed on them. For example, you might assign parent identification numbers by alphabetizing parent names and then assigning numbers in ascending order beginning with one. Another example is all of the children in the same classroom could be given a three digit ID that begins with the same number; thus, all the children in one class would have ID's in the 100's, another classroom would have children with ID's in the 200's, etc.

For the purpose of entering ID's into the computer, 2 spaces have been designated to identify a program, 3 spaces for parents/children, 2 spaces for job position and 2 spaces for staff. This format will allow you to have as many as 99 programs, 999 parents/children, 99 different job positions and 99 staff involved in one evaluation. If you wish, you can modify the card column numbers in another fashion.

There is an infinite number of ways to assign ID's. Before doing so, you need to consider what type, if any, information you would like incorporated into the numbers. You must also consider whether or not you actually need to assign identification numbers. For example, if you have no need to keep track of which parents answered what questions or you are not interested in relating information from one questionnaire to information on another questionnaire, you will not need to assign ID numbers. Additionally, if you do not need to identify programs, respondents, etc., these spaces can be left blank or eliminated
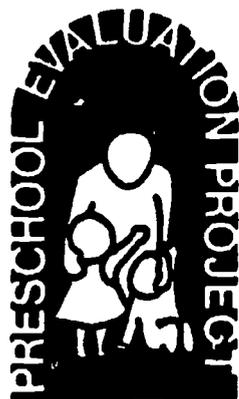
299

APPENDIX E
SAMPLE CHECKLIST

Record of Questionnaire Mailing

Questionnaire Name:

Identification Number	Respondent Name	Dates: 1st letter sent	2nd letter sent	phone call	questionnaire returned

PRESCHOOL EVALUATION PROJECT   November 12, 1981

Montgomery County Public Schools
Room 110
850 Hungerford Drive
Rockville, Maryland 20850

Dear parents,

Enclosed is the first set of questionnaires that parents are being asked to complete as part of the Preschool Evaluation Project. The three questionnaires that make up this set are described briefly below.

1. <u>Minnesota Child Development Inventory</u>. This instrument is designed to use a parent's observations to measure the development of the child. This was included because we believe parents can contribute important information about their child's growth.

2. <u>Parent Survey</u>. This questionnaire asks parents about their attitudes on raising children. It was included because sometimes parents' attitudes may be affected by having their children in educational programs.

3. <u>Family Characteristics</u>. This questionnnaire asks parents about family members' activities in the home, at work and in social organizations. This questionnaire was included because sometimes having a child in a special education program affects the family situation more than it affects a child's performance.

Each questionnaire has its own directions. Please read them carefully before completing any of the items.

When you have completed the three questionnaires, please return the Minnesota Child Development Inventory test booklet <u>and</u> answer sheet along with the Parent Survey and the Family Characteristics Questionnaire in the enclosed, stamped, self-addressed envelope. Please return all of the questionnaires by November 20.

Please remember that all information supplied by parents will remain <u>confidential</u>. All information will be coded to an identification number. Individual's names will be removed from the questionnaires when they are filed in the project office.

We realize that we are asking you to supply a great deal of information to us. However, we believe that it is the parents who hold the key to improving services to preschool handicapped children. We hope you will take the time to complete the questionnaires and if you have any questions, please call us at 424-2758 or 279-3596.

You will be contacted again in the Spring for additional information. Thank you very much for your time and cooperation.

Sincerely,

298

This project is jointly administered by the Preschool Office, Office of Continuum Education and Department of Educational Accountability.

6607A   .   5-6-1

PRESCHOOL EVALUATION PROJECT
Montgomery County Public Schools
Room 110
850 Hungerford Drive
Rockville, Maryland 20850

December 4, 1981

Dear Parents,

Several weeks ago you were sent a set of questionnaires to respond to as part of the Preschool Evaluation Project. This set included three questionnaires: The Minnesota Child Development Inventory, The Parent Survey, and The Family Characteristics Questionnaires.

At this time we still have not received your responses to these questionnaires. We would greatly appreciate it, if you haven't already completed and returned these questionnaires to us, that you do so by December 9. If we have not heard from you by then, we will follow up with a phone call to be sure that you received the set of questionnaires and/or to address any problems you may have encountered when answering them.

We believe that you, as parents, possess important information that can help document the effectiveness of programs serving preschool handicapped children and that you also have information that can help improve these services. Because of this we hope you will take the time to complete the questionnaires.

If you have any questions, please call us at 424-2758 or 279-3596. Thank you for your time.

Sincerely,

MKE:sbi

6969A

299

5-6-2

APPENDIX G
CALCULATING, ESTABLISHING AND MAINTAINING INTER-OBSERVER RELIABILITY

Inter-observer reliability is the percentage of times two observers exactly agree on the simultaneous and independent coding of an event. Reliability can be calculated using the following formula:

$$\text{Reliability} = \frac{\text{number of agreements}}{\text{number of agreements} + \text{number of disagreements}} \times 100$$

This percent of agreement should be calculated for each item as well as for all items on an observational instrument. For example, in establishing the reliability of the Child and Classroom Activity Observation System, the percentage of agreement should be calculated for the item "activity area," as well as for all items coded during an observation session.

You should be aware that when a particular behavior or event occurs very infrequently, this formula generally yields a highly inflated estimate of reliability. In such cases, the formula should be altered to include only those occasions in which at least one observer codes the behavior. For example, if in using the Placement Meeting Observation System during 20 meetings, one observer codes "yes" for the item of "interactions with nonhandicapped peers" during meetings 1 and 19 and the other observer codes "yes" only during meeting 19, then the percent of agreement should be calculated for that item using only those cases in which at least one observer coded "yes," (i.e., the 1st and 19th meetings). The reliability for this item should be calculated as follows:

$$\text{Percent Agreement} = \frac{1 \text{ agreement}}{1 \text{ agreement} + 1 \text{ disagreement}} \times 100 = 50\%$$

If the general formula had been used, the percent agreement would have been calculated in this manner:

$$\text{Percent Agreement} = \frac{19 \text{ agreements}}{19 \text{ agreements} + 1 \text{ disagreement}} \times 100 = 95\%$$

You can see that the results are quite different.

Before any data is actually collected for the evaluation, a high level of reliability should be established between each of the observers and a criterion observer (a person who is well experienced in using the observation system and who will serve as a standard throughout the observation period). Sulzer-Azaroff and Mayer (1977) suggest that the percent agreement between two observers should be at least 80 percent. If observers do not reach this level of agreement, frequent discussions should be held to identify problem areas and clarify decisions rules.

Reliability should be checked frequently (during at least 20% of the observation sessions) throughout the data collection period to ensure that observers continue to record events in a similar fashion. This can be done by having the cr terion observer code behaviors simultaneously with each observer at various times. · If their percent agreement falls below the 80% criterion suggested, disagreements should be studied to determine if one

observer was misinterpreting a code or if the coding categories need to be better defined. (Reliability coefficients of .87 and .89 were achieved for the Child and Classroom Activity and Placement Meeting Observation Systems, respectively.)

Reliability should be established under conditions similar to those expected during data collection. A good training technique is the use of videotaped samples of the behavior or event to be observed which allows the repeated presentation of the same material until all observers agree how that material should be coded. This technique, however, may be too expensive or not practical depending upon your resources.

3 1

APPENDIX H
SAMPLE SUMMARY REPORTS

Summary of Results from the
Service Delivery - Primary Caregiver Questionnaire

The Service Delivery - Primary Caregiver Questionnaire was designed to obtain information from parents and guardians of children attending a preschool special education program. This questionnaire asks individuals to rate their satisfaction with the amount and quality of the services their child receives. Open-ended questions request information on which services are most and least preferred and recommendations for improving services.

The questionnaire was sent to 26 primary caregivers and 17 (65%) returned completed questionnaires. This number of respondents only represents 18% of the number of individuals served in the   during the 1981-82 school year. Thus, the data and comments presented in this report should be interpreted with caution. What follows is a brief summary of these results.

Percentage of Children Receiving Services

Respondents indicated whether their child receives speech, occupational and physical therapies, behavior management/counseling and home visits. The following data reflect the respondents' perceptions of whether or not their child receives these services by either a certified therapist on an individual basis or by the classroom teacher as part of the regular classroom routine.

Of the 17 respondents, 88% indicated that their child receives speech therapy, 76% behavior management/counseling, and 100% occupational and physical therapies and home visits. Those parents who had home visits had, on the average, two visits during the school year which lasted approximately one hour.

Satisfaction with Amount of Services

Table 1 summarizes the respondents' level of satisfaction with the amount of services their child receives. This table lists the frequency (percentage) that each satisfaction level was indicated for each service area by respondents whose children received those services. The last column indicates the number of respondents for whom the percentages were calculated; this figure varies because some respondents did not answer all items and/or they indicated that their child did not receive one or more services.

Table 1
Response Frequency (%) of Primary Caregivers' Satisfaction with the Amount of Service Delivery

	Very Satisfied	Satisfied	Neither satisfied nor dissatisfied	Dissatisfied	Very Dissatisfied	Number of Respondents
Overall program	38%	38%	6%	13%	6%	16
Speech Therapy	33%	40%	7%	20%		15
Occupational Therapy	18%	41%	18%	24%		17
Physical Therapy	24%	18%	12%	35%	12%	17
Behavior Management	31%	39%	23%	7%		13
Home Visits	20%	40%	27%	7%	7%	15

The data in this table illustrate that with the exception of physical therapy, more than half of the respondents indicated that they were "very satisfied" or "satisfied" with the amount of the overall program and related services offered. Though satisfaction levels appear high, a few respondents did indicate their dissatisfaction with overall program and all the related services. In the case of physical therapy, approximately 47% indicated some degree of dissatisfaction with the amount of this service.

Satisfaction with Quality of Services

Table 2 summarizes the respondents' level of satisfaction with the <u>quality</u> of the services that their child receives. The frequency (percentage) that each satisfaction level was indicated for each service area is listed for those respondents whose children received each service. The last column indicates the number of respondents for whom the percentages were calculated; this figure varies because some respondents did not answer all items and/or they indicated that their child did not receive one and/or more services.

Table 2
Response Frequency of Primary Caregivers' Satisfaction with the Quality of Service Delivery

	Very Satisfied	Satisfied	Neither satisfied nor dissatisfied	Dissatisfied	Very Dissatisfied	Number of Respondents
Overall program	41%	47%		12%		17
Speech Therapy	40%	47%	13%			15
Occupational Therapy	29%	24%	29%	18%		17
Physical Therapy	29%	24%	18%	18%	12%	17
Behavior Management	42%	33%	17%	8%		12
Home Visits	47%	20%	20%	13%		15

This table illustrates that in all service areas more than half of the respondents were either "very satisfied" or "satisfied" with the quality of service delivery. Dissatisfaction was expressed by a few respondents with regard to the quality of the overall program, occupational and physical therapies, behavior management/counseling and home visits.

5-8-2   303

Services Most Liked

Respondents were asked to indicate what they liked best about the services their child receives and to explain their answers. An overwhelming number of responses indicated that the overall educational experience given the child was what was liked best about the services offered. Another prevalent theme focused on the helpfulness, kindness and concern of the teachers for both the child and parents. Other characteristics listed as the "best liked" included: the amount and quality of services, small class size, and home visits. Actual responses to this question are listed in Appendix A.

Services Least Liked

Respondents were asked to indicate what they liked least about the services their child receives and to explain why. Practically all responses to this question expressed dissatisfaction with the amount of time physical and occupational therapy was offered; some respondents mentioned speech therapy in this context also. Additional discontent was expressed with regard to the amount of feedback given to parents by the therapists providing these related services. Other areas with which dissatisfaction was expressed include: no program conducted when opening of school is delayed, inadequate facilities and equipment, and not enough time for the whole program. Respondents' answers to this question are listed in Appendix A.

Respondent Recommendations

Respondents were asked to offer some recommendations that they believed would improve their child's services. Many respondents recommended that more occupational and physical therapy be offered. One respondent suggested that some sort of communication be established between parents and the supervisors of these services to insure that the child receives the services specified on the IEP. Several recommendations suggested that the program hours should be increased; one parent suggested that classes should be in the morning only. Other recommendations include: more parent-teacher contact, less time on the bus, a school newsletter, more placement options, placements based on need versus on existing programs, more respect for parent input, lower age cutoffs for certain services, and better facilities. Responses are listed in Appendix A.

Summary Comments

While the majority of respondents indicated that they were either very satisfied or satisfied with the amount and quality of most services, several respondents expressed some level of dissatisfaction with these services. A greater percentage was more dissatisfied with the amount of services than with the quality of services.

The data suggest that the respondents are satisfied with the core of the program, i.e., the overall educational experiences provided and the personal and professional attributes of the teachers. However, they are dissatisfied with the amount of time the core and the related services are provided; this theme is rather pervasive in all responses. If an increase in parent satisfaction is desired, the following changes should be considered: increase the amount of program time (preferably in the morning hours), increase the amount of physical and occupational therapies, increase contact between parents and therapists, and document that the related services are being provided as stipulated on the child's IEP. The extent to which these changes are feasible needs to be examined by program administrators.

3 5

Appendix A

Summary of Parents Responses* to Open-Ended Questions
on the Service Delivery-Primary Caregiver Questionnaire

What do you like best about the services your child receives and why?

o   Because the class meets 5 dayi a week there is more reinforcement of what
     is to be learned. Enthusiasm of staff. My child enjoys school.
o   Small amount of children, teacher and aide give more attention to them.
o   Teacher very supportive and helpful. Teacher provided much feedback
     through calls and notes.
o   I like the overall program. The class is excellent.
o   My child's teacher is loving and kind and my child seems well adjusted to
     the school routine.
o   Number of children in class at present. The teacher is able to give more
     individual attention. How the teacher plans her activities and how the
     subject is carried out during the class.
o   I like the whole program because my child has benefited from it.   It has
     helped me to cope with things too.
o   Speech therapist and teacher are excellent both in working with my child
     and making suggestions to parents.
o   Overall program design--individualization of program, also, the
     personnel. I like the very personal attention my child receives by most
     of the staff. My child's unique needs are clearly understood, focused
     upon & remediated.   I like that these needs are looked a. from a
     developmental framework, so that I know what skills my child has, how age
     appropriate they are, and what comes next.
o   Emphasis on overall development, willingness of teachers to teach the
     parents.
o   Quality of service.
o   The caring they feel for each child and the fact that the staff tried
     their best.
o   I like the instructors who are teaching my child in the different fields
     of speech and occupational therapy.
o   Teachers and therapists are conscientious and qualified and care about
     helping my child. They work well with my child.
o   I am very impressed with the dedication and kindness of all the persons
     involved with my child's program, and am grateful for the support.
o   In classroom work.
o   Home visits so that the staff could see what was in the home and make
     suggestions.

What do you like least about the services your child receives and why?

o   No program offering because of delayed openings.
o   Not enough teacher contact and little parent involvement.
o   Quantity of PT/OT services. Lack of coordination of therapists with
     student's other medical service providers. Lack of OT/PT feedback.
o   Do not know how much speech, occupational, physical therapy my child
     receives, or if there is anything I could do at home to help.
o   Speech is the primary problem.   I do not always agree with the methods
     used to obtain more speech.

*Some of these responses have been edited to make them more concise, to omit
children's names and to only use masculine pronouns.

306

o   Would like to see more physical therapy. My child needs more work in this area and is going elsewhere now for therapy. Not enough time is spent working with the children who need it.

o   Occupational Therapy - Physical Therapy - I think they could do more in these area's. My child does need them, but is not getting enough, especially P.T.

o   Physical therapy is nil. No therapy is given.

o   Services not received. Some personnel are not scheduling regular times to work with the children, i.e. PT, OT.

o   Occupational and Physical therapy are only received when the therapist are prodded. Only with aggressive behavior is any amount of therapy received.

o   Not enough. Facilities and equipment were inadequate. Therapists aren't there everyday and there are no therapy rooms.

o   The thing that I am dissatisfied with is the amount of time with speech therapy, motor development, etc. Not enough contact with the parents.

o   Not enough time for the whole program and the time of day is not appropriate (only 4 days a week in PM).

o   My child really needs more PT or OT.

o   The program could have been more frequent; it was only weekly.

o   Not enough time spent in class for individualization because of so many children in the class.

What recommendations do you have that you believe would improve the services your child receives?

o   The program needs more staff to accommodate individual and group service needs.

o   More classroom time, closer school, less time on bus, more parent-teacher contact, school newsletter; program in Rockville-Gaithersburg area.

o   Larger variety of placement options. Placement based on need versus placement based on existing programs. More OT/PT services available without need to "fight" for services.

o   Maybe a note from the therapy teacher once in awhile to let us know how they are doing or if they need help at home.

o   Perhaps more importance should be given to the parents input on young children. A mother or father knows the problems best (out of instinct and not formal training). A degree is not always necessary for spotting problem areas in special children.

o   Having a bus service that would not require the parents to come to class. Observing the class maybe every three weeks or four. I feel the children do better when the parents are not there. The cut off seems too early, a child has to be three by November 30th for some of the services.

o   I think the physical therpist could work with my child a little more or help me to find out how I can get more Physical Thearpy to help with my child's respiratory problems.

o   An additional PT would be a big improvement.

o   Supervisors should insure that child is receiving services as specified on IEP, i.e. supervisor of PT have some contact with parents so that supervisor is aware of deficiencies of staff.

-   Full time O.T. & P.T. by therapist trained to work with toddlers.

o   Have program everyday of week.

o   Adequate facilities in the least restrictive environment and communication and interaction between staff and families.

o   More hours/week and in the morning. More PT or OT on a 1-1 basis.

o   More frequent; program was only weekly.

0862g

Summary Report
Preschool Child Find — Demographics/Satisfaction Rating
Parent/Guardian Questionnaire

This report summarizes information obtained from 79 parents who completed
the Preschool Child Find — Demographics/Satisfaction Rating Questionnaire
while their children were being screened by the Child Find Unit in
. The screening clinics were held on
October 1, 7, 22, and 29 and November 5, 12, and 19. [1]

- Ninety percent of the children screened live in two parent families;
  10% in one parent families.

- The primary language in the home of 96% of the children screened is
  English.

- The table below summarizes the racial composition of the children
  screened.

308
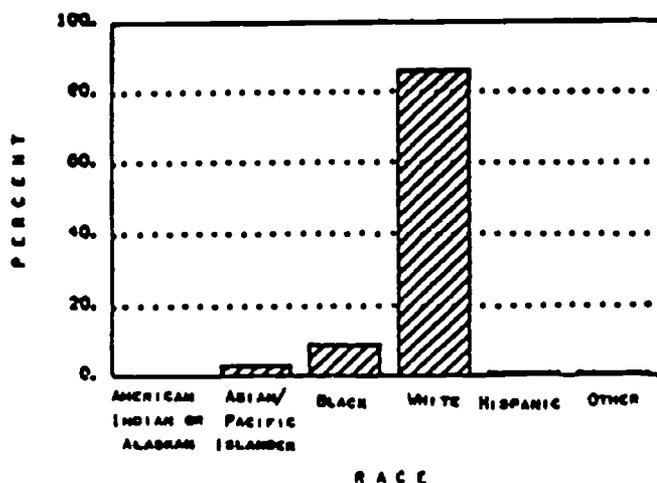
- The following table lists the number of children from various areas within _____ County who were screened.

LOCATION	NUMBER OF CHILDREN
B	1
W	2
C	1
O	2
Br	1
P	1
B	1
R	18
Po	3
As	1
S	1
D	2
Ge	1
Ga	24
Ke	2
Si	18
	79

- The following tables summarize the employment status of the parents who children were screened.
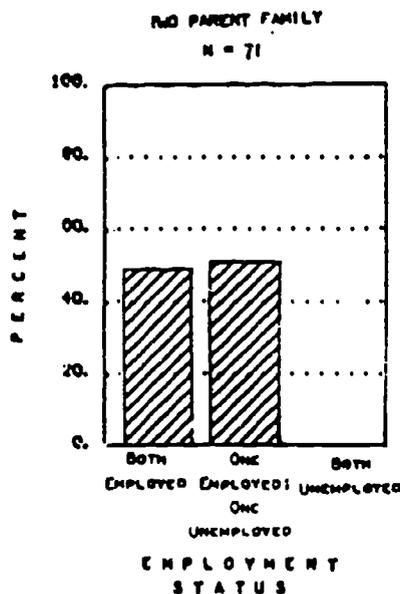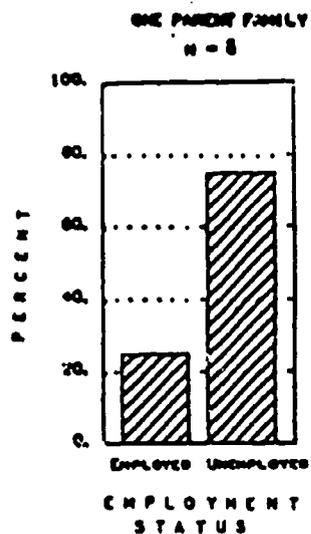
- The following table summarizes the annual income of the families whose children were screened.
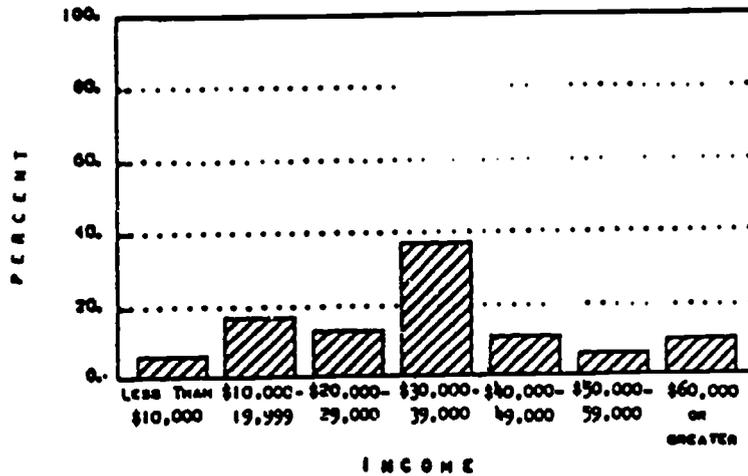
- The two tables below summarize the highest level of education obtained by parents whose children were screened.

5-8-9

310
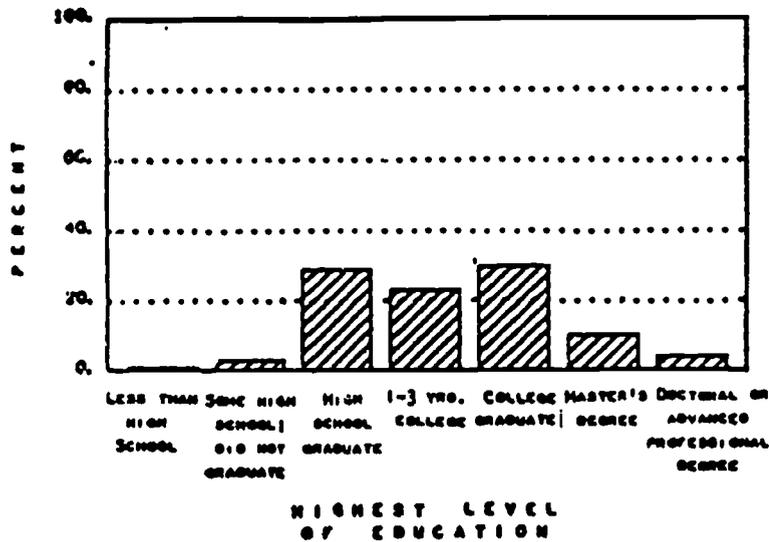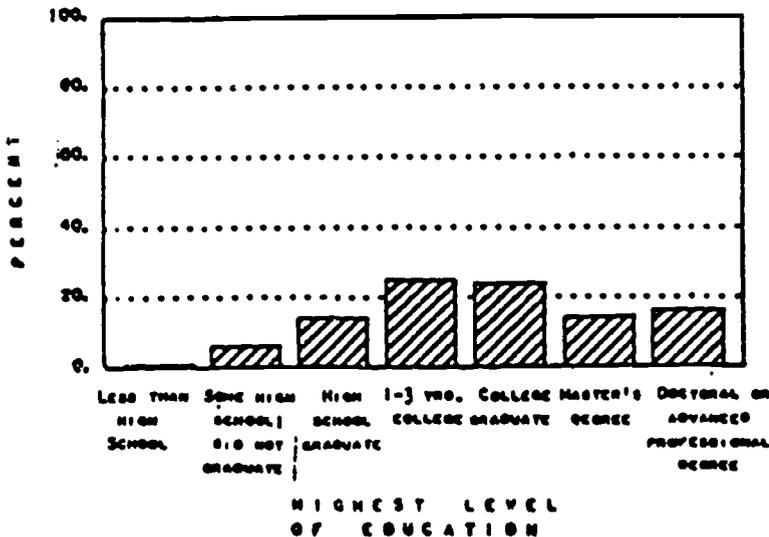
— The following table indicates parental responses as to whether or not certain events took place during the screening of their child.

Question	Response		N
	Yes	No	
Were you told what would happen during your child's screening?	94%	7%	78
Were you given any written materials about child find activities?	66%	34%	77
Were you encouraged to ask questions or discuss your concerns?	84%	16%	69
Did the screening process appear rushed?	19%	81%	78
Did the screening process appear disorganized?	13%	88%	39
Did the staff work well with your child?	100%	0%	76
Were you told how your child did on the screening tests?	91%	9%	75

— The table below summarizes parents' level of satisfaction with the manner in which the screening was conducted.
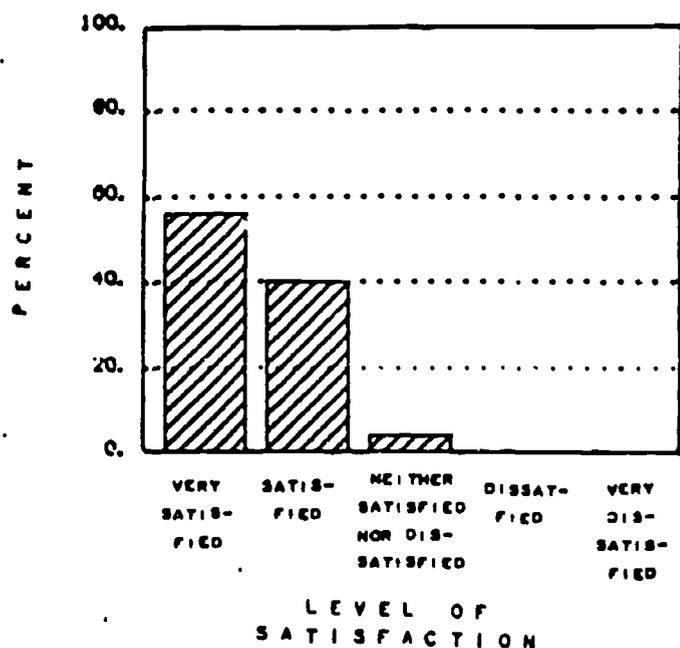
BEST COPY AVAILABLE

- The participants from each clinic were very similar on the following demographic variables: race, primary language, family, income, and parents' education. [2] However, the participants in the November 7th clinic differed slightly from the other clinic participants with respect to the percentage of one parent families. Thirty-three percent of the November 7th respondents were one parent families while the rest of the clinics consisted of approximately 10% one parent families.

- Respondents at the November 7th clinic differed from the respondents at the other clinics in their responses to two questions about the clinic process. First, when asked if they were encouraged to ask questions or discuss their concerns, 57% of the November 7th respondents replied "yes," while 80-100% of the other clinic respondents answered positively. Sixty-four percent of the November 7th respondents indicated that they were told how their child did on the screening tests, while 80-100% of the other clinic respondents answered affirmatively [2].

- Mother's education was positively and significantly (p<.05) related to father's education (r=.71, N=71) and family income (r=.46, N=71); father's education was positively and significantly (p<.05) related to family income (r=.62, N=71).

- Level of satisfaction with the manner in which the screening was conducted was not related to any demographic variables or any specific event that did or did not occur during the clinic.

- Parents were asked how they thought the screening process could have been improved and to comment about the screening process. Their answers are summarized in the attached Appendix.

BEST COPY AVAILABLE

.2. Participants from the November 19th clinic were not included in this comparision because the number of participants was so small (N=3).

PLACEMENT PROCESS COMPONENT

I. Child and Family Background

John was born on 8 December 1979, the product of his mother's third pregnancy. His parents were separated during the first trimester of this pregnancy and the mother reportedly did "heavy" work until the 7th month of the pregnancy. He currently lives with his mother, an older brother and his maternal grandparents and uncle. John's uncle is described as mentally retarded and is employed in a sheltered workshop.

Although his mother indicated that John's birth and development were, for the most part, uneventful, John was noted to have suffered from pneumonia at one month of age and chicken pox at 3 months. Though he has suffered "frequent" ear infections, he does not have a history of frequent or high temperatures, excessive wax or drainage.

John is reported to have sat alone at 10 months of age and walked at 20 months. At 32 months of age he had a 25 word vocabulary. He is characterized as a quiet child who likes to play by himself.

II. Reason for Referral to Placement Office

Mother believed that John's language was delayed and that this was affecting other areas of his development.

III. Previous Educational Experience and Background

Prior to John's referral to the Placement Office he received individual language therapy on an outpatient basis from the _____ from 21 July 1982 to approximately 15 October 1982. John was initially referred to the _____ for a speech and language evaluation by his pediatrician. Although one of the assessment reports completed by the _____ noted that the John was referred to _____ by the _____, it was not clearly documented that John actually attended a _____ program. Another assessment report indicated that John was recommended to the _____ _____, but did not attend; the details of this recommendation were not available in the records.

IV. Assessment History

John's first documented assessment was a hearing, language and speech evaluation conducted by the _____ when he was 11 months old. From the time John was 31 to 37 months of age, he had a speech, language and hearing evaluation done by the _____ _____, a pediatric and educational diagnostic evaluation done by Developmental Evaluation Services for Children, two outpatient progress reports, a mid-year summary report and an occupational therapy evaluation by _____. What follows is a brief summary of the assessment results of major ability areas evaluated. Specific information from these evaluations is summarized in Table 1.

Language Skills. All evaluations done on John indicated this area as the one of his greatest need. At age 31 months he was diagnosed as functioning 18-22 months expressively and approximately 19 months receptively. Evaluations conducted over the following six months demonstrated some gains in John's expressive and receptive language abilities. For example, his intelligibility in context was 10-20% at 31 months and 65% without context at 37 months. At 34 months John responded to one-step directives inconsistently (50% of the time); at 35 months he responded 80% of the time and by 37 months he was consistently responding to one-step directives and inconsistently to two-step directives.

Motor Skills. There was some inconsistency among the evaluations of John's motor ability. Although a speech, language and hearing evaluation done at 31 months indicated that John's gross and fine motor skills were within normal limits, a pediatric and educational diagnosis done at 33 and 34 months indicated motor immaturity, particularly in gross motor activities. An occupational therapist's evaluation of John at 37 months also noted gross motor skills as below age level with fine motor skills age appropriate.

Social-Emotional Skills. All assessment reports characterized John as a quiet child who prefers solitary play in lieu of peer or adult interaction. At 31 months of age John is noted to be below age level in symbolic play by one tester and at 34 months of age another tester indicated that he had good symbolic play. John's responsiveness to his therapist was limited at 34 months; at approximately 35-36 months John is noted to withdraw from the therapist and has become reluctant to respond verbally at home. At 37 months a tester noted that parallel play was emerging.

Hearing. At 11 months of age, a hearing, language and speech evaluation indicated that John might have some conductive hearing loss and abnormal middle ear mobility. During this assessment, however, John was noted to be congested with running eyes and nose. An assessment of John at 31 months of age suggested that his auditory acuity should be monitored and more completely documented. Subsequent evaluations at 35 months indicated that his response to speech and pure tone was within normal limits.

V. Summary of the Placement Meeting

John's placement meeting was held on 22 October 1982. The meeting was chaired by a teacher specialist from the Placement Unit. Professionals attending the conference included: _____

_____

_____

_____ John accompanied his mother to the meeting.

Notes from the placement meeting indicate that two preschool programs were considered for John: _____
_____. Some concerns were expressed that ____ could not meet John's speech therapy needs and thus, placement was recommended for a _____
_____. John was identified as speech and language impaired (disability code 04). Speech therapy and a motor assessment were recorded on his Individualized Education Plan (IEP) as related services.

5-8-14

John's IEP indicated that he had delays in all ability areas, especially speech and language. Strengths identified were play skills, responsiveness; needs identified were: a preschool program, speech and language support and motor support. Educational goals were to improve language, cognitive, functional life and social/emotional skills.

VI. Parent Perspective of the Placement Process

John's mother was asked to complete a questionnaire that asked about various aspects of the placement process. She indicated that Placement Office personnel explained his IEP to her and that she was asked to sign it. She also indicated that she was very satisfied with the following aspects of the placement process: how she was treated by Placement Office personnel, the information she received before the meeting, the amount of time scheduled for the meeting, the explanation she received on John's disability code, level of services and program assignment and the placement decision made for John.

1200g

Date of Evaluation/ Report	Child's Age (months)	Assessment Agency/ Program	RESULTS										Recommendations
			Expressive Language	Receptive Language	Gross Motor	Fine Motor	Cognitive	Self-Help	Social Emotional	Vision	Hearing	Physical	
10/30/80	11	MCHD Hearing, Language and Speech Evaluation									Borderline normal to mild conductive hearing loss bilaterally abnormal middle ear mobility.	Child was congested with running eyes and nose.	Medical consultation and audiological reevaluation.
6/29/82	31	ESTC Speech, Language & Hearing Evaluation	18-22 months in vocabulary, utterance content and complexity, communicative intent; intelligibility 10-20% in context.	One year delay for basic skills and comprehension of questions and directives.	Within normal limits.	Within normal limits.	Requires continual structuring to demonstrate task-related performance.		Limited interactive skills; exploratory and symbolic play below age level.		Acuity should be monitored and more completely documented.	Oral structures & functions appear adequate for intelligible speech.	Preschool language program with supportive speech language therapy; emphasis structured, meaningful cognitive & language experiences & appropriate peer interactions.
8/24/82	33	DESC Pediatric	Severe language delay.		Motor immaturity							Bony abnormality of rib cage.	
9/14/82	34	DESC Educational Diagnostic	Most significant needs in speech and language; poor articulation.		Awkward and clumsy; immaturities observed with tasks that require motor organization & sequencing.	Perceptual motor normal but poor.	Understanding of basic concepts is delayed.		Apprehensive & fearful; cautious approaching most tasks; responds well to praise & encouragement; good symbolic play.	Perceptual skills appear a strength.			Special prekindergarten program with primary emphasis on speech, language and motor development. PT evaluation.
9/17/82	34	ESTC Outpatient Progress Report (7/31/82-8/23/82)	18-22 months in terms of length, content, complexity and use.	18-20 months; Responds to situational questions & one-step directives inconsistently (50%).					Responsiveness to therapist limited; separates easily from mother.				Preschool language program.
11/82	35	ESTC Outpatient Progress Report (9/1/82-10/15/82)	Increased use of 1 and 2 word utterances; majority of verbalizations unintelligible; 18-24 months.	Responds to one-step directives 80% of the time; 18-24 months					Withdrawn from therapist; reluctant to respond verbally at home.		Responds to speech and pure tone within normal limits.		Preschool language program.
1/83	37	Treatment Center (TC) Preschool Report	18-22 months; Moderate delays in terms of content, length, syntax & pragmatics; 65% intelligibility without context.	6-10 months delay (PPVT-no basal or ceiling achieved); follows one-step directions correctly and two-step directives inconsistently.	Scattered at 2-3 yr. level.	Within normal limits. Scattered.		Not quite age appropriate.	Quiet child; solitary play & very few verbalizations; parallel play emerging.		Auditory processing 30 month level for following directions and comprehension of questions.		
1/83	37	TC OT Evaluation			Below age level; low muscle tone and limited dissociation of body parts.	Age appropriate; prehension skills emerging age appropriately for pencil tasks.							Gross motor concerns monitored weekly; OT consultation with teachers.

1200g