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ABSTRACT

This document presents one module in a set of training resources for trainers to use with parents and/or professionals serving children with disabilities; focus is on parental involvement. The modules stress content and activities that build skills and offer resources to promote parent-professional collaboration. Each module takes about 2 hours to deliver. The module guide has eight sections: a publicity flyer, topic narrative, overview, trainer agenda, activities, summary, bibliography, and evaluation. Introductory information explains how to use the modules including conducting a needs assessment, planning the training, selecting the training module, implementation, evaluation, and followup. Objectives of this module are: (1) describe the history of parental involvement as it relates to children with disabilities, (2) identify and understand the many roles of parental involvement, (3) develop a knowledge of the various stages of individualized programs or plans and identify ways parents can be involved in each stage, (4) analyze the role and responsibility of a case manager, (5) evaluate skills that are necessary for the many roles of parental involvement, and (6) develop a goal that leads to skill building in order to be more effectively involved. A bibliography identifies 17 books, magazines, or other resources. (DB)

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California State Department of Education Bill Honig, Superintendent of Public Instruction Sacramento, CA, 1988

PARENTAL

INVOLVEMENT

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Patricia Wright

California State Department of Education Special Education Division Program, Curriculum and Training Unit

Presents A Module on:

Parental Involvement

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1988

This module, as well as thirteen others, were produced under the direction of Karl E. Murray and Susan Westaby of the Program, Curriculum and Training Unit, Special Education Division, CA State Department of Education. The modules are being field-tested throughout 1988. During this field-test stage, they are available by sending \$ 5.00 for each module (includes tax and mailing) to: Parent Training Modules, CA State Department of Education, P.O. Box 944272 - Room 621B, Sacramento, CA, 94244-2720. Make checks payable to Parent Training Modules.



INTRODUCTION

The Parent/Professional Training Modules have been developed to serve as a core set of training resources for trainers to use primarily with groups of parents. Some of the trainings were designed specifically for combined groups of parents and professionals, and all the trainings can be adapted for use with parents or professionals as separate or combined audiences. The training modules in the series focus on content and activities that build skills and offer resources to promote parent-professional collaboration to ensure quality education for all students with disabilities. There are fourteen training modules in this series:

Parental Involvement
Stress and Support in the Family
Coping with Loss and Change
Parent Support Groups
An Effective Community Advisory Committee
Community Advisory Committee Leadership Training
Communication Skills
The Individualized Education Program: Rights and Responsibilities
Placement in the Least Restrictive Environment
Training for Professionals Working with Families
Parent Professional Collaboration in Planning for Employment
Transition Planning
Interagency Collaboration: The Parents' Role

Each training module has eight sections:

Flyer
Topic Narrative
Overview
Trainer Agenda
Activities
Summary
Bibliography
Evaluation

Within each of these sections there are these materials:

Figer - The Flyer highlights what participants can expect to learn by attending the training. It can be personalized for each training by adding date, time, and location in the appropriate spaces.

Topic Narrative -- The Topic Narrative contains content information specifically for the trainer. Trainers use the information to enhance their knowledge and understanding of the subject matter of the training module.



Overview -- The Overview contains the goals and objectives for the module; and the content and presentation strategy for each activity contained within the module.

Trainer Agenda -- The Trainer Agenda contains details of trainer and participant activities, materials and media. It is a suggested agenda that trainers can personalize to fit their style and the specific needs of the participants. A few modules that deal with sensitive or difficult content have Trainer Tips included in the Agenda section.

Summary -- The Summary contains highlights of all the content information presented in activities within the training. The Summary was designed to provide information to prospective participants and to workshop planners.

Bibliography -- The Bibliography contains the names of books, magazines and other resources that were used as references in developing the training modules and may serve as a list of suggested reading materials for trainers as well as participants.

Evaluation -- The Evaluation contains questions that directly assess the objectives of the module as well as some general questions to evaluate the usefulness of materials and trainer affectiveness.

The Parent/Professional Training Modules have been designed to be a flexible and expandable resource for trainers of parents and professionals. It can be housed in binders or in file folders and rearranged as needed. Trainers are urged to add articles, resources and other materials that will make each training reflect their individual style and meet the needs of the participants.



HOW TO USE THESE TRAINING MODULES

Conduct a Need Assessment:

Gather as much information as you can about the groups that you will be working with. The following types of questions may help:

Does the group meet regularly or is it assembled specifically for the purpose of this training?

What does the group want to accomplish? Does it have a stated goal? Are there a set of outcomes that the group wants to achieve?

Who is involved in the group (agencies and organizations)?

If the group is an ongoing group, how is the group organized? (officers, executive committee, standing committees, task groups, etc.)

What has the group already done? What training has the group already received?

What is the group working on now?

How does the group get things done?

Has the group conducted a needs assessment to determine the group's need for training and the training topics of interest?

Plan the Training

Typically, this is a dialogue between the trainer and the client. Often, the client will have a specific topic or activity in mind. Sometimes additional topics will be suggested during the needs assessment process when the trainer probes to get more information. The trainer can share a list of module topics and/or several module summaries to aid the client in selection of a topic(s) from the series.

Select the Training Module

The Parent/Professional Training Modules offer a wide selection of topics and activities. The trainer can select the module that deals with the topic chosen by the client.

Review the Training Module

The module provides the core activities and a suggested trainer agenda. The trainer can adjust both to reflect their individual style and the needs of the client.



Identify Additional Resource Materials

The trainer can add articles, resources, and other materials to the core training module. Often a trainer will introduce local resources or pertinent sample materials.

Deliver the Training

The Parent/Professional Training Modules are best delivered by a training team of a parent and a professional. Collaboration is modeled by the team as each member of the team displays unique perspectives, abilities and kr owledge as they enhance each others presentation styles.

Evaluate the Training

Evaluation is an essential element of any training. Each module includes an evaluation that assesses the specific objectives of the module and the usefulness of materials. These evaluations can assist the trainer in refining the module content and modifying presentation style, if needed.

"Follow-Up" the Training

It is a good practice to follow up any training with a personal visit, letter, or a phone call. The trainer may wish to keep a list of names, addresses, and phone numbers of participants to facilitate follow up. The follow up usually consists fo discussion about how the training may have impacted the client's personal or professional life. Clients may express the desire for further training and/or materials and resources.



Parental Involvement (For All Interested and Involved Parents)

You, as a participant, will learn about:

- the history of involving parents of children with disabilities
- the many roles parents play
- the development of an individualized orogram or plan
- the role and responsibility of a case manager
- the skills you need for effective parental involvement

Day and Date:
Time:
Location:
For More Information, Call:

Please Come



Parental Involvement Topic Narrative Trainer Information Page 1

Parental Involvement

Topic Narrative

Parents are their child's first and most influential teachers. It is extremely important that all parents learn skills that will assist their child develop to the fullest potential: intellectually, socially, emotionally and physically. Research indicates that when parents are invoived in the participation of their child's educational program, their child is likely to achieve at a higher level. Direct involvement of parents seems to be of significant benefit to student achievement. Public Law 94-142 (Education of All Handicapped Children Act) established the role of parents as educational decision makers - that law recognized that parents have a most important role in their child's development. Other service systems - social, health and development - also have laws that mandate parental participation.

However, parents of children with disabilities have not always been viewed as being capable of providing a positive environment for their child. In the first part of this century families were encouraged to place their child in an institution and let professionals provide the entire intervention program. After World War II, some parents began to network and vocalize the need to have their child live in the home and community. They networked with established agencies such as United Cerebral Palsy and the Association for Retarded Citizens to advocate for children with disabilities. The years from 1960-1980 produced a strong wave of parental involvement: parents were seen as teachers of their children, decision makers in the development of individualized plans and programs, and influencers in changing public policy for individuals with exceptional needs. Parents now have many choices in how they wish to be involved.

Most parents want to learn about their child's needs and development and will assist in learning activities at home if instructed and provided with resources and the "how to". Volunteering at a school is a role some parents enjoy. A few parents serve on policy boards and advisory committees and some are involved in training and supporting other parents. Each role demands a new set of skills. A parent must determine what level of parental involvement is best for him/her at any given time. It could be that a choice of little or no involvement is the best role for some families.

However, the law mandates that all families have the chance to be involved in the development of individualized plans and programs. The many plans that a child with disabilities can have are:

- 1. Individualized Education Program
- 2. Medical Therapy Unit Treatment Plan (California Children Services/Health)
- 3. Individualized Written Rehabilitation Plan
- 4. Individualized Care Plan (Medicaid)
- 5. Individualized Service Plan (Supplemental Security Income)
- 6. Individualized Family Service Plan (infants)
- 7. Individualized Transition Plan (school to work)
- 8. Individualized Program Plan (Regional Centers)

All plans or programs are divided into seven stages or steps:

- 1. Pre-Referral, Identification, Consultation
- 2. Referral
- 3. Assessment
- 4. Goals and Objectives



Parental Involvement Topic Narrative Trainer Information Page 2

- 5. Placement/Services (Determining Least Restrictive Environment)
- 6. Implementation
- 7. Evaluation/Monitoring

Ideally, families should be involved at each stage. A most sophisticated level of parental involvement is being a manager for their child and coordinator of the many services that are provided to their child with disabilities from different agencies.

There are a variety of skills that are required so a parent can become an effective advocate for their child: communication, problem solving, time management, rights and responsibilities, keeping records, knowing community resources, etc. Evaluating those skills and deciding what skills are most important to learn are first steps in becoming an involved parent.

Parents vary in the role they assume during the different stages of a child's life and need to be encouraged and trained for the role they have chosen. Parental involvement is an ongoing learning process.



Overview

The goal of this module is to identify the evolving roles of parental involvement, to understand the importance of these roles, and to develop skills that meet the responsibility of parental involvement.

Objectives

- 1. Describe the history of parental involvement as it relates to children with disabilities.
- 2. Identify and understand the many roles of parental involvement.
- 3. Develop a knowledge of the various stages of individualized programs or plans and identify ways parents can be involved in each stage.
- 4. Analyze the role and responsibility of a case manager.
- 5. Evaluate skills that are necessary for the many roles of parental involvement.6. Develop a goal that leads to skill building in order to be more effectively involved.

Objective Number	Suggested Minutes	Content	Presentation Strategy
	10	Introductions Objectives and Agenda Review	
1	15	History of Involving Parents	Lecture and Discussion
2	15	Examples of Parental Involvement	Individual Activity and Large Group Discussion
3	45	Individualized Plans and Programs and the Family Role	Lecturette, Small and Large Group Discussion
	10	Break	
4	15	Serving As Case Manager	Large Group Brainstorm
5	15	Developing Skills	Self Assessment
6	15	Increasing Parental Involvement	Individual Activity and Report Back
	10	Conclusion and Evaluation	
	150		



Suggested Trainer Agenda

WORKSHOP			DATE:	PAGE: 1
TITLE:	Parer	ntal Involvement	PRESENTERS: _	
CLIENT:				
GOAL:	To ide	entify the evolving roles of parental involvement, to understand the importance		
	of the	se roles, and to develop skills that meet the responsibility of parental involvement.		
OBJECTIVES:	1.	Describe the history of parental involvement as it relates to children with disabilities		
	2.	Identify and understand the many roles of parental involvement.		
	3.	Develop a knowledge of the various stages of individualized programs or plans and can be involved in each stage.	identify ways parents	
	4.	Analyze the role and responsibility of a case manager.		
	5 .	Evaluate skills that are necessary for the many roles of parental involvement.		

6. Develop a goal that leads to skill building in order to be more effectively involved.

TIME	WHO	TRAINER ACTIVITIES/CONTENT	PARTICIPANT ACTIVITIES	HANDOUTS MEDIA
10 minutes		Welcome Introductions Objectives and Agenda Review Display Objectives and Agenda on Chart Paper	Listen	Chart Paper Pens, Tape Chart of Agenda and
15 minutes		History of Involving Parents Activity/Handout/Overhead 1 Lecture and Discussion Distribute Handout 1 Display Overhead 1	Listen	Objectives Handout 1 Overhead 1 Overhead projector
13		Explain stages of historical involvement. Ask the following question for each of the time periods listed: What effect did this trend or event have for families who had children with disabilities?	Participate in large group discussion. Answer Questions.	Screen

TIME	WHO	TRAINER ACTIVITIES/CONTENT	PARTICIPANT ACTIVITIES	HANDOUTS MEDIA
		History of Involving Parents		
		Many trends and events in our society have affected families who have children with disabilities. (Most of the following statements relate to the mentally retarded and severely involved child.)		
		1900 - 1940		
		Parents were encouraged to place children in institutions. Sterilization laws on mentally retarded individuals were passed. Professionals were to advocate for the child.		
		1940 - 1950		
		After World War II attitudes and values about minority groups began to change and social responsibility increased. Parents began to meet and form groups locally and these groups linked with state and national parent groups. Parents felt their children had a right to live in the home and the community.		
		1960 - 1970		
		Research established that all children can learn and that new teaching techniques, taught to parents and professionals, can enhance a child's progress. Parents were being recognized as the child's primary teacher, particularly in infant and pre-school programs. Parents were trained to become more involved.		
		1970 - 1980 (Education of all Handicapped Children)		
15		Public Law 94-142 was passed and guaranteed a free appropriate education for all handicapped children. The law provided specific guidelines to include parents in decisions about their children's education. Professionals and parents were to be equal decision makers.		16

TIME	WHO	TRAINER ACTIVITIES/CONTENT	PARTICIPANT ACTIVITIES	HANDOUTS MEDIA
		1980s		
		Parents and professionals are to collaborate and develop good working relations for children with disabilities. The different roles and perspectives of parents and professionals need to be identified and the skills of collaboration need to be developed.		
5 minutes		Examples of Parent Involvement	Using Handout 2	Handout 2
		Activity/Handout 2 Individual Activity and Large Group Discussion. Distribute Handout 2	check areas in which you were involved.	
		Briefly review examples of parental involvement. Have participants check those areas in which they have been involved.		
		No or little involvement.		
		Actively learning about child's needs and development.		
		Attending Individualized Education Program (IEP) meetings.		
		Teaching child at home (implementing goals and objectives.)		
		Assisting on field trips and special occasions.		
		Voluntcering in child's room.		
!		Volunteering at school (newsletter, guest speaker, library, etc.).		
ļ		Attending parent education and support meetings.		
		Helping other parents with children who have disabilities.		
<u>.</u>		Serving on policy boards and community advisory committees.		
1		Being a leader in organizations that help individuals with disabilities.		
رومو ا الله الله الله الله الله الله الله ال		Working as a parent specialist or parent facilitator (paid position).		S

TIME	WHO	TRAINER ACTIVITIES/CONTENT	PARTICIPANT ACTIVITIES	HANDOUTS MEDIA
		Lead large group discussion around following questions:	Participate in large group discussion.	
		How involved are you at this time in the following areas:	Answer questions.	
		1. With your child?		
		2. With your child's school?		
		3. With public policy or advisory groups?4. Training others?		
		Where would you like to be in five years?		
15 minutes		Individualized Plans and Programs and the Family Role	Listen	
		Activity/Handout/Overhead 3		
		Lecturette, Small and Large Group Discussion.		/ Handout 3
		This is a two part activity.		Page 1
		PART I:		
		Individualized Plans and Programs and the Family Role		
		Display Overhead 3A and highlight the various types of individual plans and programs. Lecturette		Overhead 3
		Talk about various types of Individualized Plans.		
		1. Individualized Education Program		
		Medical Therapy Unit Treatment Plan (California Children Services/Health)		
		3. Individualized Written Rehabilitation Plan		
		4. Individualized Care Plan (Medicaid)		
29		Individualized Service Plan (Supplemental Security Income)		20
		6. Individualized Family Service Plan (Infants)		~0
		7. Individualized Transition Plan (School to Work)		
		8. Individualized Program Plan (Regional Centers)		
9		9. Others??		
ĬC I				

TIME	WHO	TRAINER ACTIVITIES/CONTENT	PARTICIPANT ACTIVITIES	HANDOUTS MEDIA
		Small group discussion: Divide the participants into small groups (3-4) Have each group appoint a recorder to tally the following information on a large chart. What kinds of plan(s) have been developed for your child with disabilities? (Remain in these groups for the next part of the activity)	Civide into groups of 4 Appoint a recorder to tally information	Chart paper
		PART II: Development and Stages of an Individualized Plan or Program.		Handout 3 Page 2
		Display Overhead 3B. Explain the seven stages of an individualized plan or program. Lecturette	Listen	Overhead 3E
		Listed below are seven stages of an individualized plan or program:		
		 Pre-Referral, Identification, Consultation What's wrong? What's happening? Referral Formal request Assessment 		
		- Determines eligibility and strengths and needs. 4. Goals and Objectives - Based on student and family needs. 5. Placement/Services		
		 - Where? How much? When? By whom? etc. 6. Implementation - Ongoing communication regarding progress and intervention 7. Evaluation/Monitoring - Yearly review noting progress and appropriatenes of placement. 		
21		Back to Stage 1.		22



Parental Involvement

TIME	WHO	TRAINER ACTIVITIES/CONTENT	PARTICIPANT ACTIVITIES	HANDOUTS MEDIA
		Small group discussion: Appoint a recorder to tally the following information on Handout 3, page 3. Have each recorder report out to the large group. Questions to Ponder/Discuss: 1. What has been your role/responsibility in each of the seven stages? 2. What would you like your role/responsibility to be in each of these seven stages? (identification, referral, assessment, goals and objective, placement/services, implementation, monitoring/evaluation)	Recorder use Handout 3, page 3 to tally responses of small group. Share with the large group.	Handout 3 Page 3
		Break		
		Serving as a Case Manager		
	 	Activity/Handout 4 Large group brainstorm. Distribute Handout 4 Read the following case study to the participants.	Participate in brainstorm.	Chart Paper Tape Pens
		Mr. and Mrs. Garcia have an eight year old son, Juan, who was born with Down's syndrome. They have been taking a course at Regional Center in order to become the case manager for their child. They want to be responsible for monitoring and coordinating all services Juan receives in the home, at school and in the community.		Handout 4
		To be certain that needed services are provided, Mr. and Mrs. Garcia must monitor Juan's progress and determine what additional services are needed and what services need to be deleted. The Garcias know that accurate record keeping is a must.		
23		The Garcias also have three other children - ages 4, 6 and 10.		
v		Lead group in brainstorm. Brainstorm answers to the following questions. Record responses of the group. What are some pros and cons that the Garcias face in serving as case manager for their child? What skills must they learn?		24
ERIC		Have two pieces of chart paper on one list "pros, cons", on the other "skills".		

Developing Skills Cativity/Handout 5 Se.f-Assessment Distribute Handout 5 Now we're going to to at skills that would serve to make you an effective advocate for your child. Complete the Self Assessment. Go back and star two items in which you would like to develop your skills and share this information with the person sitting next to you.	Complete Self Assessment. Go back and star two items in which you	Handout 5
Se.*-Assessment Distribute Handout 5 Now we're going to keep at skills that would serve to make you an effective advocate for your child. Complete the Self Assessment. Go back and star two items in which you would like to develop your	Assessment. Go back and star two items in which you	Handout 5
effective advocate for your child. Complete the Self Assessment. Go back and star two items in which you would like to develop your	Assessment. Go back and star two items in which you	
	tended like to develop	
Increasing Parerital Involvement Activity/Handout/Overhead 6	would like to develop your skills. Share this information with the person sitting next to you.	
Individual Activity and Report Back (whip) Distribute Handout 6 Display Overhead 6		Handout 6
State the importance of developing goals and specific objectives for children as well adults. Ask each person to think of a goal to increase family support or parental involvement. Show Overhead 6. The goal can be for themselves, for their child with disabilities, their family, etc. Ask participants to write and complete the following statement:	Listen, Writc Goal by	Overhead 6
By (date) , I will		
Have each person share goal – fast paced like on whip.	Share goal with	
Conclusion:	class. Complete Evaluation.	Handout 7
Restate Objectives. Thank participants. Complete Evaluation/Handout 7.		20
-	Individual Activity and Report Back (whip) Distribute Handout 6 Display Overhead 6 State the importance of developing goals and specific objectives for children as well adults. Ask each person to think of a goal to increase family support or parental involvement. Show Overhead 6. The goal can be for themselves, for their child with disabilities, their family, etc. Ask participants to write and complete the following statement: By (date) I will Have each person share goal – fast paced like on whip. Conclusion: Restate Objectives. Thank participants.	Individual Activity and Report Back (whip) Distribute Handout 6 Display Overhead 6 State the importance of developing goals and specific objectives for children as well adults. Ask each person to think of a goal to increase family support or parental involvement. Show Overhead 6. The goal can be for themselves, for their child with disabilities, their family, etc. Ask participants to write and complete the following statement: By (date) I will Share goal with class. Conclusion: Restate Objectives. Thank participants.



Parental Involvement Activity/Handout 1 Lecture and Discussion 15 minutes

History of Involving Parents

Many trends and events in our society have affected families who have children with disabilities. (Most of the following statements relate to the mentally retarded and severely involved child.)

1900 - 1940

Parents were encouraged to place children in institutions. Sterilization laws on mentally retarded individuals were passed. Professionals were to advocate for the child.

1940 - 1950

After World War II attitudes and values about minority groups began to change and social responsibility increased. Parents began to meet and form groups locally and these groups linked with state and national parent groups. Parents felt their children had a right to live in the home and the community.

1960-1970

Research established that all children can learn and that new teaching techniques, taught to parents and professionals, can enhance a child's progress. Parents were being recognized as the child's primary teacher, particularly in infant and pre-school programs. Parents were trained to become more involved.

1970 - 1980 (Education of all Handicapped Children)

Public Law 94-142 was passed and guaranteed a free appropriate public education for all handcapped children. The law provided specific guidelines to include parents in decisions about their children's education. Frofessionals and parents were to be equal decision makers.

1980s

Parents and professionals are to collaborate and develop good working relations for children with disabilities. The different roles and perspectives of parents and professionals need to be identified and the skills of collaboration need to be developed.

Question to Ponder:

What effect did this trend or event have for families who had children with disabilities?

From P-PACT Training Manual (a federal project). San Diego, CA: San Diego State University, Department of Special Education, 1987.



History of Involving Parents

Little or No Involvement (1900 - 1940)

Parent Groups (1940 - 1950)

Parents As Teachers (1960 - 1970)

Parents As Equals (1970 - 1980)

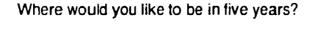
Parent/Professional Collaboration (1980s)



Parental Involvement Activity/Handout 2 Individual Activity and Large Group Discussion 15 minutes

Examples of Parental Involvement

Check () those areas in which you have been involved: No or little involvement Actively learning about child's needs and development Attending Individualized Education Program (IEP) meetings Teaching child at home (implementing goals and objectives) Assisting on field trips and special occasions Volunteering in child's room Volunteering at school (newsletter, guest speaker, library, etc.) Attending parent education and support meetings Helping other parents with children who have disabilities Serving on policy boards and community advisory committees Being a leader in organizations that help individuals with disabilities Working as a parent specialist or parent facilitator (paid position) Questions to Ponder: How involved are you at this time in the following areas: (1) with your child? (2) with your child's school? (3) with public policy or advisory groups?



(4) training others?



Parental Involvement Activity/Handout 3, Page 1 Lecturette, Small and Large Group Discussion 45 minutes

Part I:

Individualized Plans and Programs and the Family Role

- 1. Individualized Education Program
- 2. Medical Therapy Unit Treatment Plan (California Children Services/Health)
- 3. Individualized Written Rehabilitation Plan
- 4. Individualized Care Plan (Medicaid)
- 5. Individualized Service Plan (Supplemental Security Income)
- 6. Individualized Family Service Plan (Infants)
- 7. Individualized Transition Plan (School to Work)
- 8. Individualized Program Plan (Regional Centers)
- 9. Others??



Part II

Development and Stages of an Individualized Plan or Program

Listed below are seven stages of an individualized plan or program:

- 1. Pre-Referral, Identification, Consultation
 - What's wrong? What's happening?
- 2. Referral
 - Formal request
- 3. Assessment
 - Determines eligibility and strengths and needs.
- 4. Goals and Objectives
 - Based on student and family needs.
- 5. Placement/Services
 - Where? How much? When? By whom? etc.
- 6. Implementation
 - Ongoing communication regarding progress and intervention.
- 7. Evaluation/Monitoring
 - Yearly review noting progress and appropriateness of placement. Back to Stage 1.

Questions to Ponder:

- 1. What has been your role/responsibility in each of the seven stages?
- 2. What would you like your role/responsibility to be in each of these seven stages?



	Actual Role	Preferred Role
Pre-Referral, Identification, Consultation		
Referral		
According		
Assessment		
Goals and Objectives		
Placement/Services		
Implementation		
Evaluation/Monitoring		



Individualized Plans and Programs

Individualized Education Program

Medical Therapy Unit Treatment Plan

Individualized Written Rehabilitation Plan

Individualized Care Plan

Individualized Service Plan

Individualized Family Service Plan

Individualized Transition Plan

Individualized Program Plan

Others??

From: P-PACT Training Manual (a federal project). San Diego, CA: San Diego State University, Department of Special Education, 1987.



Stages of a Plan or Program

Pre-Referral, Identification, Consultation

Referral

Assessment

Coals and Objectives

Placement/Services

Implementation

Evaluation/Monitoring

From: P-PACT Training Manual (a federal project). San Diego, CA: San Diego State University, Department of Special Education, 1987.



Parental Involvement Activity/Handout 4 Large Group Brainstorm 15 minutes

Serving as Case Manager

Mr. & Mrs. Garcia have an eight year old son, Juan, who was born with Down's syndrome. They have been taking a course at Regional Center in order to become the case manager for their child. They want to be responsible for monitoring and coordinating all services Juan receives in the home, at school and in the community.

To be certain that needed services are provided, Mr. & Mrs. Garcia must monitor Juan's progress and determine what additional services are needed and what services need to be deleted. The Garcias know that accurate record keeping is a must.

The Garcias also have three other children - ages 4, 6 and 10.

Questions to Ponder:

What are some pros and cons that the Garcias face in serving as case manager for their child?

What skills must they learn?



Parental Involvement Activity/Handout 5, Page 1 Self-Assessment 15 minutes

Developing Skills

Developing skills to become an effective advocate is an ongoing process. How would you currently rate your skills in the following areas?

		Need to Learn	Needs Improving	Adequate	Super
ome:					,
1.	Managing children's behavior	1	2	3	4
2.	Using effective communication skills - listening	1	2	3	4
	- assertiveness	1	2 2	3 3	4
3.	Increasing self esteem of -self	1	2 2	3 3	4
	-children	1	2	3	4
4.	Developing independence in children (chores, responsibility, etc.)	1	2	3	4
5 .	Addressing the needs of all family members	1	2	3	4
choo	l:				
6.	Becoming an equal partner in the individualized education program process.	1	2	3	4
7.	Maintaining an overview of child's progress.	1	2	3	4
8.	Maintaining open communication between home and school.	1	2	3	4



		Need to Learn	Needs Improving	Adequate	Super
Schoo	l (continued)				
9.	Knowing your rights and responsibilities.	1	2	3	4
10.	Investigating the best educational placement for your child.	1	2	3	4
Comm	unity:				
11.	Searching out all available resources for child and family.	1	2	3	4
12.	Keeping an overall record- keeping system for your child.	1	2	3	4
13.	Taking care of legal and financial needs (conservatorship, wills, etc.).	1	2	3	4
14.	Learning collaboration skills to work with professionals.	1	2	3	4
15.	Being a confident advocate for your child.	1	2	3	4
Self:					
16.	Getting enough rest and relaxation.	1	2	3	4
17.	Developing adult relation- ships.	1	2	3	4
18.	Maintaining a support system (someone to talk to, etc.).	1	2	3	4

Parental Involvement Activity/Handout 5 Page 3

	Need to Learn	Needs Improving	Adequate	Super
Self (Continued)				
 Developing or maintaining hobbies and interests. 	1	2	3	4
20. Having a portion of your life that is not child oriented.	1	2	3	4

Adapted from: Mendoza, Jeanne. Connections: Developing skills for the family of the young special child (0 - 5). San Diego, CA: San Diego Unified School District, 1982.



Parental Involvement Activity /Handout 6 Individual Activity and Report Back 15 minutes

Increasing Parental Involvement

It is vitally important to develop goals and specific objectives for children as well as adults. Think of a goal to increase parental involvement. The goal can be for yourself, for your child with disabilities, your family, etc. Complete the following statement:

Ву	, I will
(date)	
Examples of goals	are:
	, I will take a course on behavior
(date) management and a	apply those skills at home.
	, I will get all my children's records - health,
education, interest	s, etc - organized into individual notebooks.



Goals

Self

Child with Disabilities

Family

Professional Partn€ 3hips

Individualized Programs/ Plans

Others



Parental Involvement

Summary 1

Many trands and events in our society have affected families who have children with disabilities.

1900 - 1940	 Little or No Involvement or Support
1940 - 1950	Parent Groups
1960 - 1970	Parents as Teachers
1970 - 1980	 Parents as Equals
1980s	 Parent/Professional Collaboration

There are many ways for parents to be involved with their child who has a disability and with the professional service providers.

As a	:
teacher at home	learner
volunteer	worker
tutor	policy maker
leader	supporter



One example of parental involvement is the parents' possible roles in the development of individualized plans and programs.

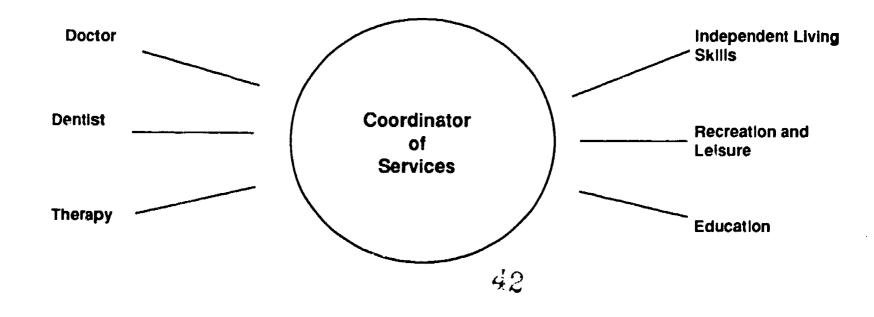
Plans and Programs

Individualized Education Program
Medical Therapy Unit Treatment Plan
Individualized Written Rehabilitation Plan
Individualized Care Plan
Individualized Service Plan
Individualized Family Service Plan
Individualized Transition Plan
Individualized Program Plan

Stages of a Plan or Program

Pre-Referral, Identification, Consultation
Referral
Assessment
Goals and Objectives
Placement/Services
Implementation
Evaluation/Monitoring

Another example of parental involvement is having the parent serve as case manager/coordinator for their child's services.





There are a variety of skills that will serve to make you, the parent, an effective advocate for your child.

Communication
Behavior Management
Increasing Self Esteem
Rights and Responsibility
Knowing Communiity Resources
Keeping Records
Working with Professionals
Participating in Plans and Programs
Taking Care of Yourself: Physically and Emotionally
And Others



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Evaluation

Your responses to the questions/statements below will assist us in improving this module. Please respond to all items. Your participation in this evaluation is completely anonymous. DO NOT place your name anywhere on this evaluation.

Based on a scale of 1 through 10, how much of the information presented was new to you?

-	1 is not much new; 10 all new.					
		Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
1.	After this session, I am aware of the history of involving parents of children with disabilities.	1	2	3	4	5
2.	This session helped me identify the many roles parents play.	1	2	3	4	5
3.	Because of this session, I understand the development of an individualized program or plan.	1	2	3	4	5
4.	This session helped me identify the role and responsibility of a case manager.	1	2	3	4	5
5.	After this session, I have gained knowledge about the skills you need for effective parental involvement.	1	2	3	4	5
6.	The material presented was sensitive to all cultural groups.	1	2	3	4	5
7.	The material covered information which was appropriate to all handicapping conditions.	1	2	3	4	5
8.	The material presented matched my needs.	1	2	3	4	5
9.	I will use some of the information/ resources that were introduced.	1	2	3	4	5
0.	The instructors did a good job.	1	2	3	4	5
1.	Specific suggestions to improve this	module:				

