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ABSTRACT

A survey was sent to 1,153 Indiana special education teachers, special education directors, principals, and parents, and 447 usable responses were received. The purpose of the survey was to describe and assess current service delivery systems within Indiana for children with severe handicaps. Part One of the survey gathered data on: the types of handicaps that students placed in classes for the severely handicapped might have, the setting in which the program is located, the scope of Individualized Education Programs, the number of years of teacher experience, the number of students each teacher serves, the number of students with severe handicaps in classes with nonhandicapped students, and whether the setting is rural or urban. Part Two analyzed specific "best educational practice" information regarding age-appropriate placement with nonhandicapped peers, social integration, curriculum and instruction, home-school partnership, transition planning, related services, and program evaluation. Results of the survey are presented in both text and table formats. Appendices contain a sample of the survey form and a list of survey items organized according to the best educational practice each represents. (JDD)

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RESULTS OF THE SURVEY:
"OPTIMAL PRACTICE INVENTORY
FOR THE SEVERELY HANDICAPPED
INCLUDING DEAF/BLIND"

Conducted in 1987
by

Indiana's Federal Statewide Systems Change Project
Blumberg Center for Interdisciplinary Studies in Special Education

Indiana State University
Terre Haute, Indiana

William Littlejohn, Ed.D.
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Robert George, Ph.D.
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Credits

The research and preparation of this report was completed by Blumberg Center for Interdisciplinary Studies in Special Education, William Littlejohn, Director. The primary staff of the Indiana Federal Statewide Systems Change Grant (Project number G90-86-C-3013) who participated in the study included: an original staff of Gary Collings, project coordinator, Pamela Terry-Godt, project director, Wayne Wheatley, project evaluator, and Rosemarie Kleber, project facilitator and a current staff of William Littlejohn, project director, Joseph Wade, project facilitator, Rosie Kleber, project facilitator, and Robert George, project evaluator.

THIS REPORT AS DISSEMINATED IN SEPTEMBER, 1989 WAS PREPARED BY THE STAFF OF THE BLUMBERG CENTER FOR INTERDISCIPLINARY STUDIES IN SPECIAL EDUCATION, INDIANA STATE UNIVERSITY (TERRE HAUTE) WITH SUPPORT FROM BOTH THE U.S. DEPARTMENT OF EDUCATION, OFFICE OF SPECIAL EDUCATION AND REHABILITATION SERVICES, OFFICE OF SPECIAL EDUCATION PROGRAMS, PROJECT NUMBER G00-86-C-3013. THE VIEWS EXPRESSED IN THIS REPORT DOES NOT NECESSARILY REFLECT THE OPINIONS OF EITHER THE U.S. DEPARTMENT OF EDUCATION OR INDIANA DEPARTMENT OF EDUCATION AND NO OFFICIAL ENDORSEMENT SHOULD BE INFERRED.

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Tables of Percentages of YES responses for "best educational practices" according to teacher groups

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12B.	Social integration	16
12C.	Transition planning	16
12D.	Curriculum and instruction	16
12E.	Data based instruction	17
12F.	Community based instruction	17
12G.	Parent/professional partnership	17
12F.	Related services	17
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BACKGROUND

The Blumberg Center for Interdisciplinary Studies in Special Education at Indiana State University was awarded a three year Statewide Systems Change Grant (October, 1986 - September, 1989). The purpose of the grant was to 1) describe and assess current service delivery systems to children (0-21 years) with severe handicaps (including deaf-blind) within the state of Indiana using a set of optimal educational quality indicators; 2) develop and implement improved educational practices at three pilot sites within the state, and 3) evaluate system change at pilot sites and disseminate recommended practices for improving delivery of special education and related services to these children.

Early project activities focused on the development of indicators for an optimal practices inventory from an analysis of current practices. Professional literature and state plans of key agencies were reviewed for issues, trends, goals, and objectives. Draft revisions of the survey format and content had input from select faculty members as well as a university computer consultant. The survey draft was pilot tested by participant samples at the state Council for Exceptional Children conference, a weekend workshop for parents and professionals and a topical university conference on preschool programs.

The optimal practices survey draft was reviewed by members of the advisory committee at their March 5, 1987 meeting. After several drafts and the above noted field tests the final survey instruments were mailed in various stages from April to July 1987 as follows:

80	directors of special education
169	local school building principals
297	teachers of programs for the moderately mentally handicapped
212	teachers of programs for the severely mentally handicapped
100	teachers of programs for the multiply handicapped
62	preschool/adult private agency providers/teachers
295	parents selected from various association lists

A university analyst was consulted on analysis design and descriptive statistics were chosen to describe existing services for learners with severe handicaps. The results from the surveys were compiled and converted to frequency distributions and bar graphs depicting percentages of yes responses to questions from the survey. The reader is provided the results of the public school survey in this report.

The results of the survey that was sent to agencies throughout the state can be found in another document. That document, "Results of the survey of agencies providing services for persons with severe disabilities," can be obtained from the Blumberg Center for Interdisciplinary Studies in Special Education, Indiana State University, Terre Haute, IN 47809.

INCIDENCE

According to the public school handicapped child count report provided by the Division of Special Education, Indiana Department of Education, the number of students with severe handicaps (including multiply handicapped, moderately and severely/profoundly mentally handicapped) totaled 5155 for the '86-'87 school year, 5277 for the '87-'88 school year, and 5284 for the '88-'89 school year. The incidence figure for the group for the three years is approximately .55% (multiply handicapped - .08%; moderately mentally handicapped - .35%; and severely/profoundly mentally handicapped - .12%)

The number of students with severe handicaps placed in regular campus for the '87-'88 school year was 3495 (66%) as compared to those placed in separate campus at 1782 (34%). For the '88-'89 school year the number of students with severe handicaps placed in regular campus was 3757 (71%) as compared to those placed in a separate campus at 1527 (29%). The percentage of change for regular campus was a 7% increase and a 14% decrease for separate campus.

OVERVIEW

The purpose of the survey, "Optimal Practice Inventory for the Severely Handicapped including Deaf/Blind," was to describe and assess current service delivery systems within the state of Indiana for children with severe handicaps. The content of the inventory is based on the "best educational practices" for individuals with severe handicaps as developed at the University of Vermont (Fox, Thousand, Williams, Fox, Towne, Reid, Conn-Powers & Calcagni, 1986). A sample of the survey can be found in Appendix A.

The survey was developed in two parts. Part One provides:

1. an indication of the types of "handicaps" those students placed in classes for the severely handicapped might have;
2. the setting in which the program is located;
3. the scope of the IEPs;
4. the number of years the teacher has taught students with severe handicaps;
5. the total number of students the teacher currently serves;
6. the number of students with severe handicaps in classes with non-handicapped students; and
7. whether the setting is rural or urban.

Part Two provides specific "best educational practice" information regarding:

1. AGE-APPROPRIATE PLACEMENT WITH NON-HANDICAPPED PEERS
2. SOCIAL INTEGRATION
3. CURRICULUM AND INSTRUCTION
 - a) functional curriculum
 - b) data-based instruction
 - c) community-based instruction
4. HOME-SCHOOL PARTNERSHIP
5. TRANSITION PLANNING
6. RELATED SERVICES
7. PROGRAM EVALUATION

The Optimal Practice Inventory was sent to 1153 individuals throughout the state of Indiana. They included teachers of programs for learners with severe/profound handicaps, multiple handicaps, and moderate mental handicaps, all special education directors in the state, principals who have the aforementioned classes in their buildings, and parents of children with severe handicaps.

RESULTS

Of the 1153 surveys sent, 44% (502) were returned and 39% (447) of the total sent were usable. Table 1 lists the number of forms sent, number returned and number of usable forms from each group.

Part One

The results of Part One are listed according to particular descriptors in the following section.

TYPES OF HANDICAPS

In responding to the types of handicaps of the severely handicapped students for whom they have responsibility (see item #1 of Optimal Practice Inventory on page 25), teachers checked, on an average, six different handicaps. Table 2 provides a frequency distribution, mean and mode for the number of handicaps checked by the teachers.

Table 1
Optimal Practice Inventory Forms
Sent and Returned

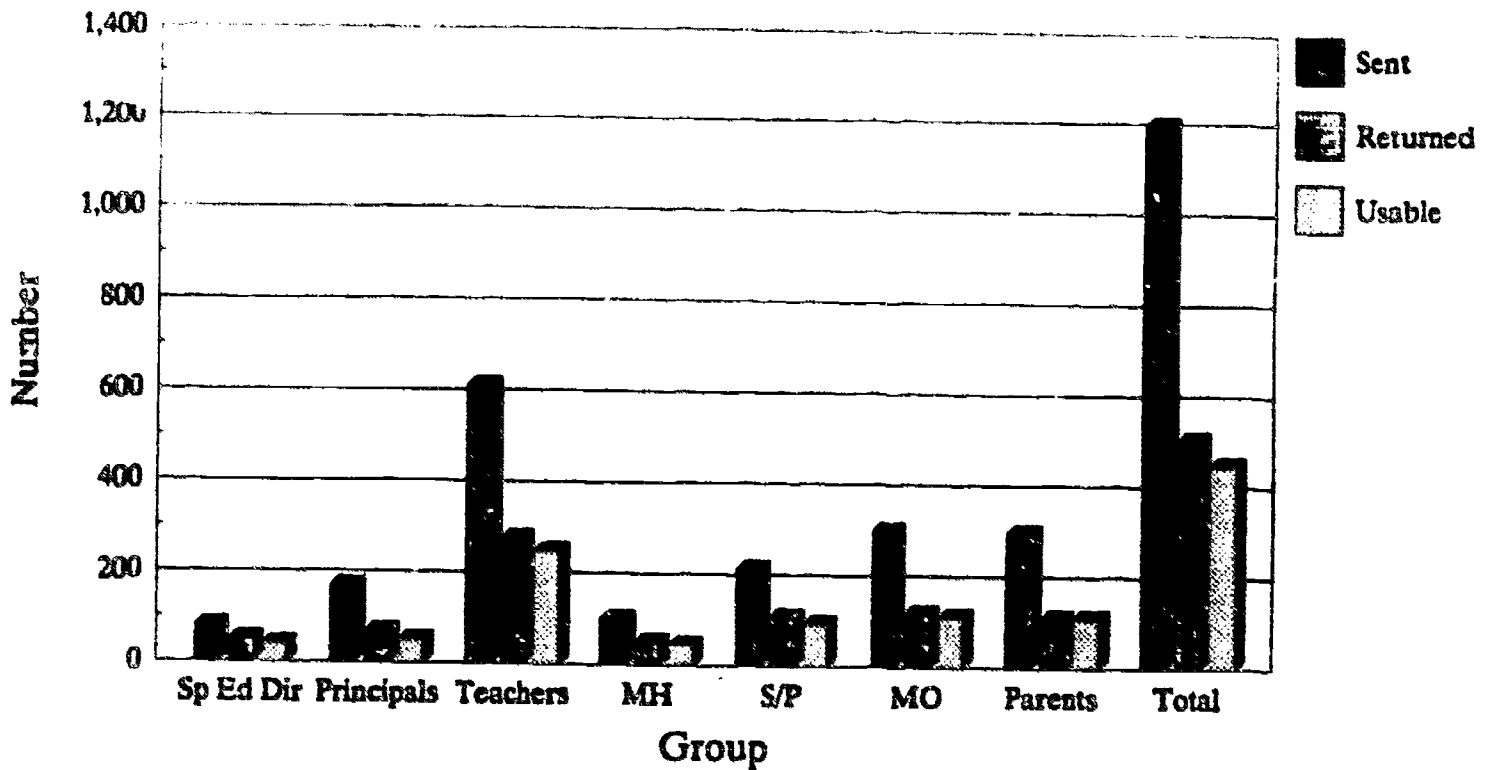


TABLE 2. Frequency Distribution and Average Number of Handicaps Checked as Reported by Teacher Groups

TEACHERS OF:

Number of Handicaps Marked	Multiple Handicaps	Moderate Mental Retardation	Severe/ Profound
1	2	3	2
2	1	2	1
3	1	2	0
4	1	8	2
5	2	1	4
6	4	4	2
7	1	2	3
8	6	3	5
9	0	0	5
10	1	0	0
11	3	0	0
12	1	0	0
13	0	0	0
14	0	0	0
15	0	0	0
16	0	0	0
MEAN	6.6	4.5	6
MODE	8	4	8.5

In reviewing the responses of each of the teacher groups, it was found that teachers checked most frequently that handicap for which they were designated as having responsibility: teachers of programs for the severe/profound most frequently checked severe mental retardation followed by profound retardation, teachers of programs for the multiply handicapped most frequently checked multiple handicaps and teachers of programs for the moderately mentally handicapped most frequently checked moderate mental retardation.

The most consistent and frequently checked responses among the three groups, eliminating the handicap for which the teachers were designated as having responsibility, were: cerebral palsy, speech and language, orthopedic impairment, autism and severe brain damage. Other handicaps likely found in the severely handicapped populations, according to the responses of the teachers, are: blind and other health impairment

The percentages (according to specific teacher groups) of teachers checking particular handicaps from the list of 15 handicaps on the survey are found in Table 3. The percentages of the teachers as a group are found in Table 4.

AGE GROUP OF LEARNERS FOR WHOM RESPONSIBLE AND SETTING IN WHICH PROGRAM LOCATED

The teachers were to check the age-range of the students for whom they were responsible and the setting in which the program was located (see item #2 of the Optimal Practice Inventory on page 25). The greatest number of students with severe handicaps, regardless of age, were being served in elementary buildings. A large number were being served in separate facilities as well. Specific results are in Table 5.

IEP GOALS

The teachers were to check those areas in which IEP goals were written (see item #3 of the Optimal Practice Inventory on page 23). Areas checked by more than 80% of the teachers were: self-help, social development, and communication. Areas checked by 60% - 80% of the teachers were: fine-motor, gross motor, community living, home living, vocational skills and recreation/leisure. Approximately 55% of the teachers checked academics, and approximately 48% of the teachers checked sensory. The results for this item are in Table 6.

Table 3
 Percentage of Teachers Checking YES to
 Particular Handicaps by Specific Teacher Group

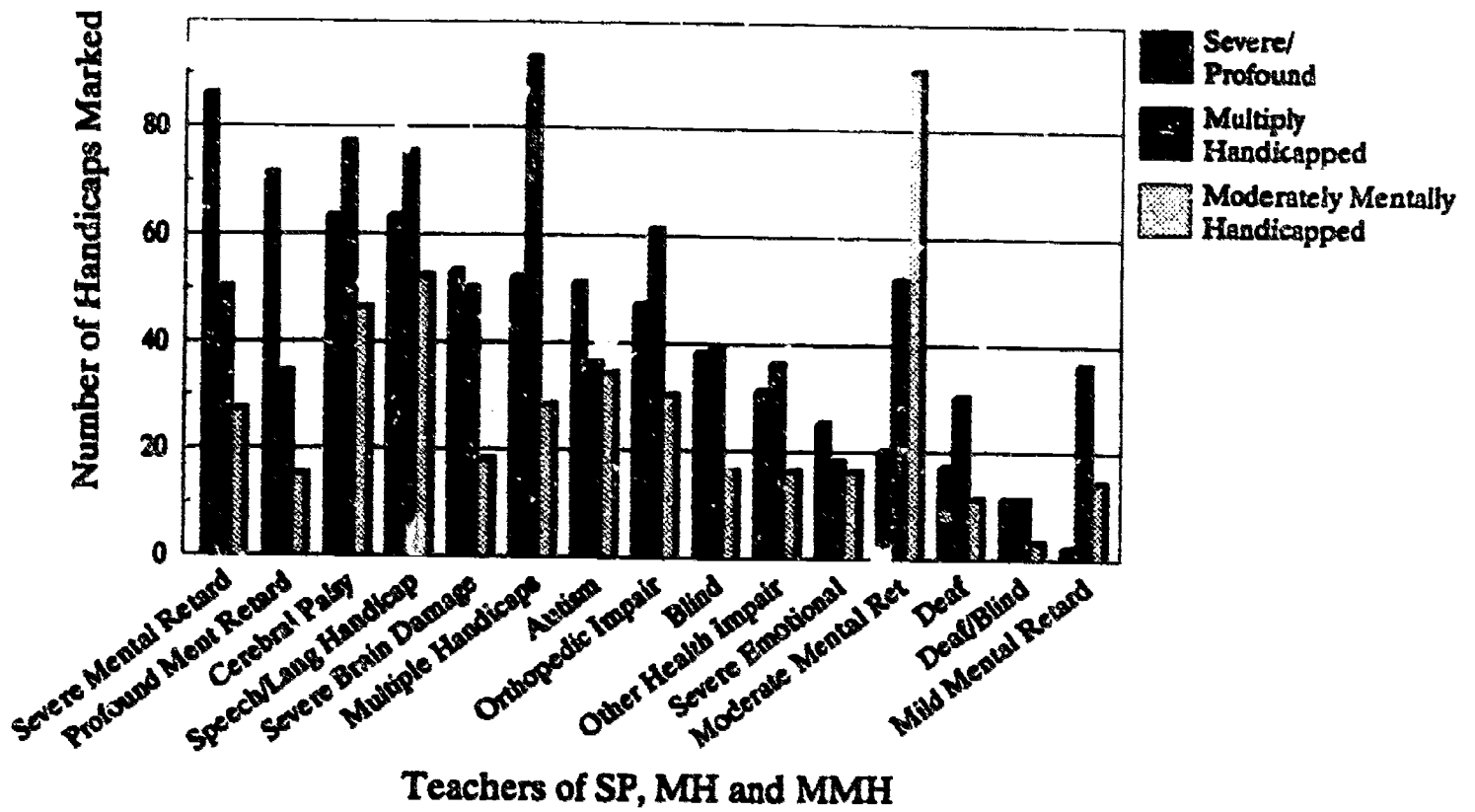


Table 4
 Percentage of Teachers Checking YES to
 Specific Handicaps

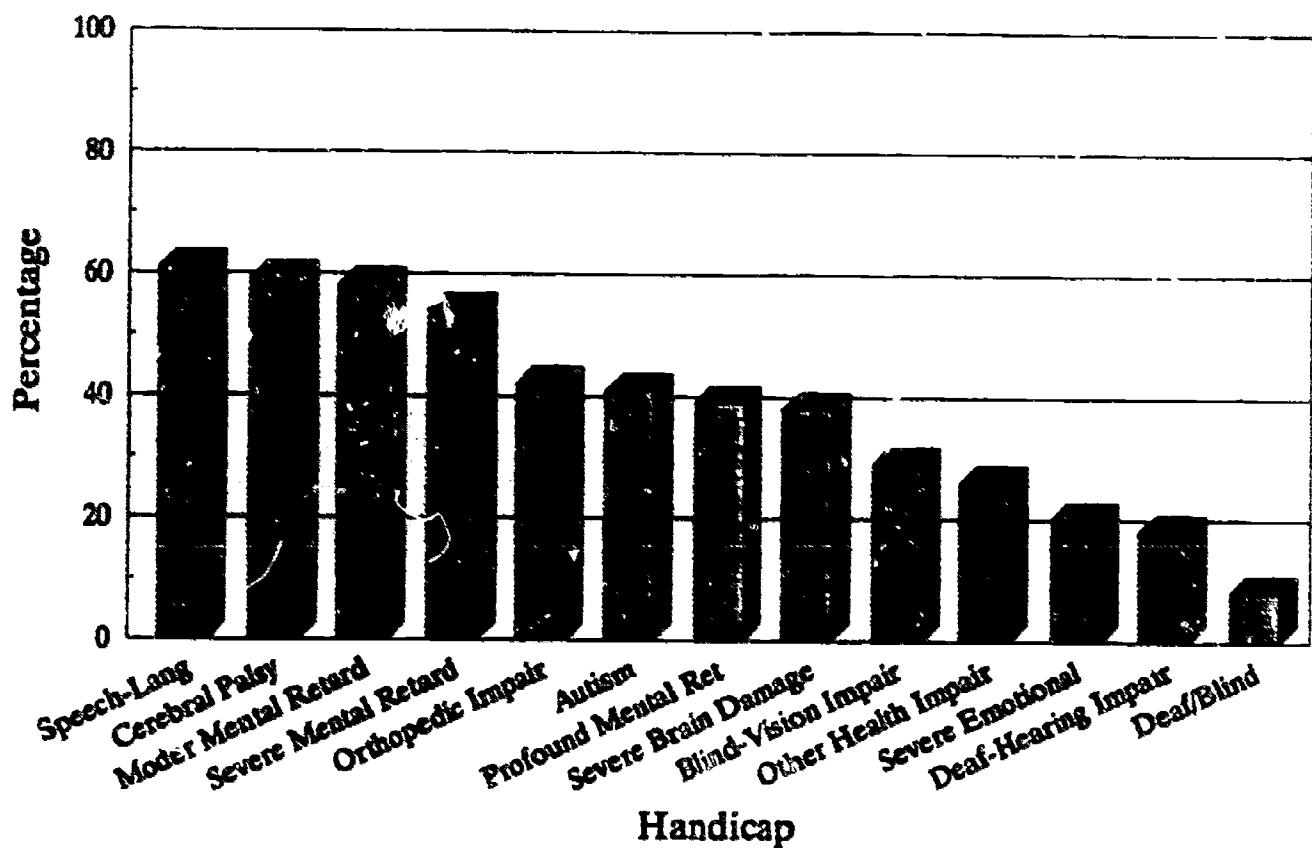


Table 5
Setting of Programs for Learners with Severe Handicaps According to Age Groups

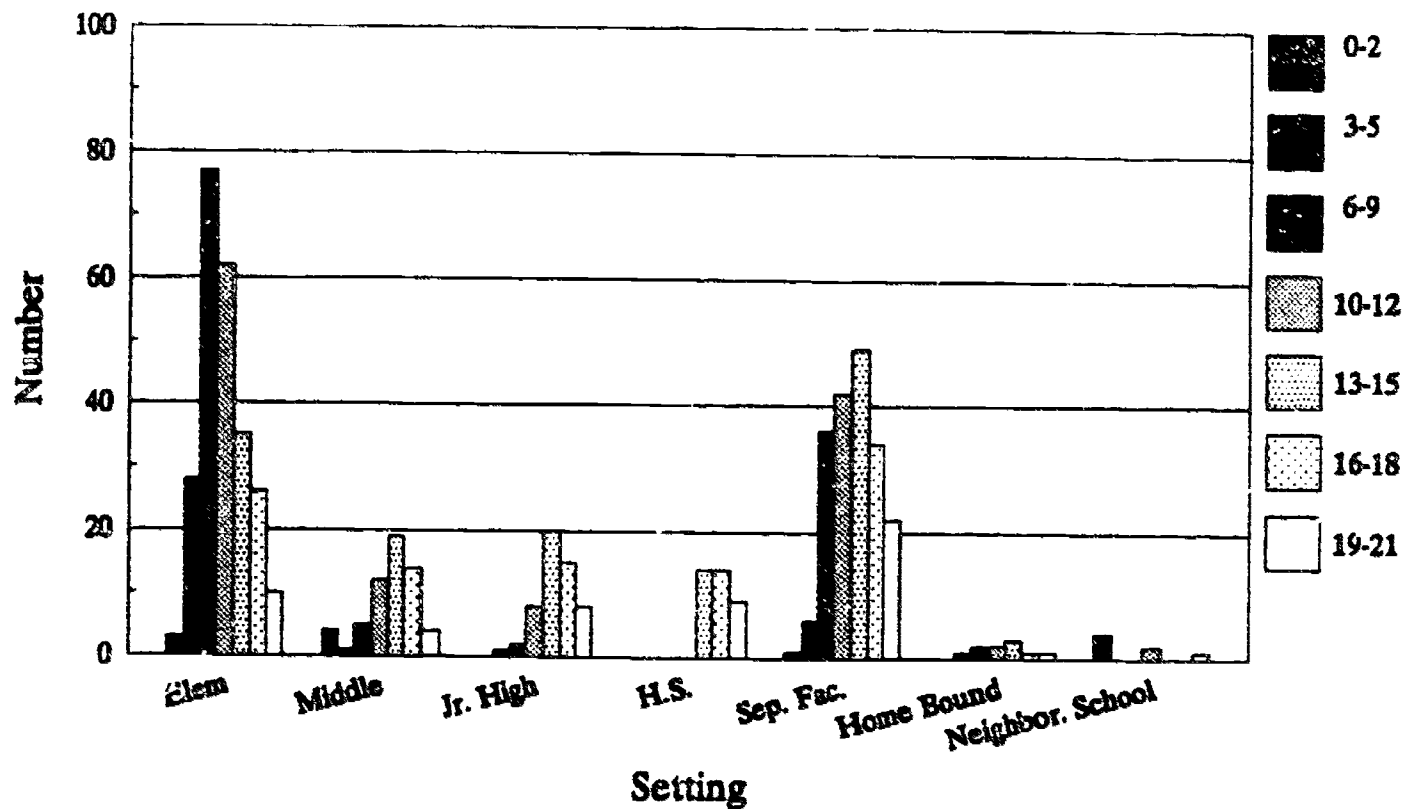
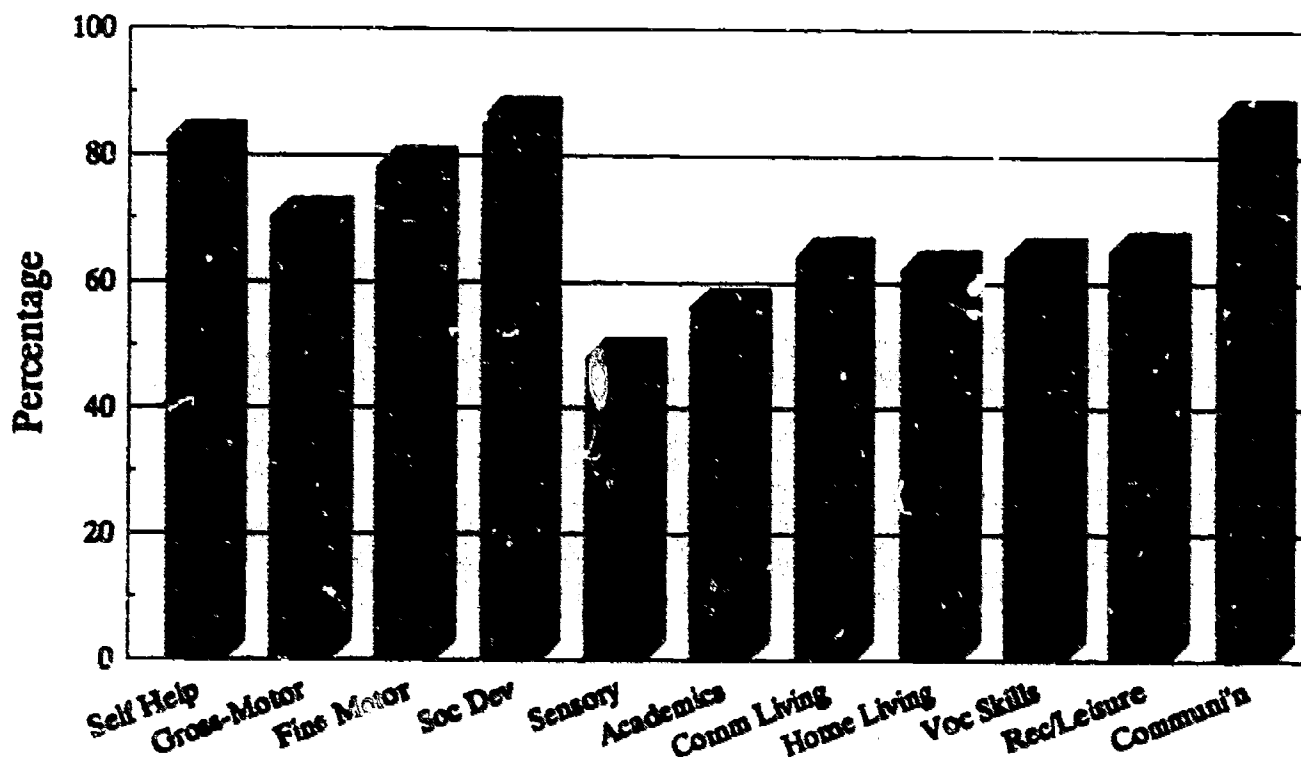


Table 6
Percentage of Teachers Checking Specific Areas of IEP Goals



YEARS SERVING SEVERELY HANDICAPPED

The teachers were to check the number of years they have served populations with severe handicaps (see item #4 of the Optimal Practice Inventory on page 25). A majority (61%) of the teachers surveyed have more than six years experience serving severely handicapped populations. The results are in Table 7.

TOTAL NUMBER OF LEARNERS

The teachers were to check the total number of learners with severe handicaps they serve (see item #5 of the Optimal Practice Inventory on page 25). As a group, the teachers indicated that the average number of students with severe handicaps they serve is 11. The results vary slightly with the different groups. The results are in Table 8.

NUMBER OF LEARNERS WITH SEVERE HANDICAPS IN CLASSES WITH NON-HANDICAPPED LEARNERS

The teachers were to check the number of learners with severe handicaps in classes with non-handicapped learners (see item #6 of the Optimal Practice Inventory on page 25). The teachers responded that the majority of learners are not integrated, some are integrated for less than one hour, and very few are integrated for more than one hour. The results are in Table 9.

SCHOOL SETTING

The teachers were to check whether their school setting was rural, small town, suburban or urban (see item #7 of the Optimal Practice Inventory on page 25). The settings were evenly distributed between rural/small town and suburban/urban. The results are in Table 10.

Table 7
Number of Years Experience of Teachers
Serving Persons with Severe Handicaps

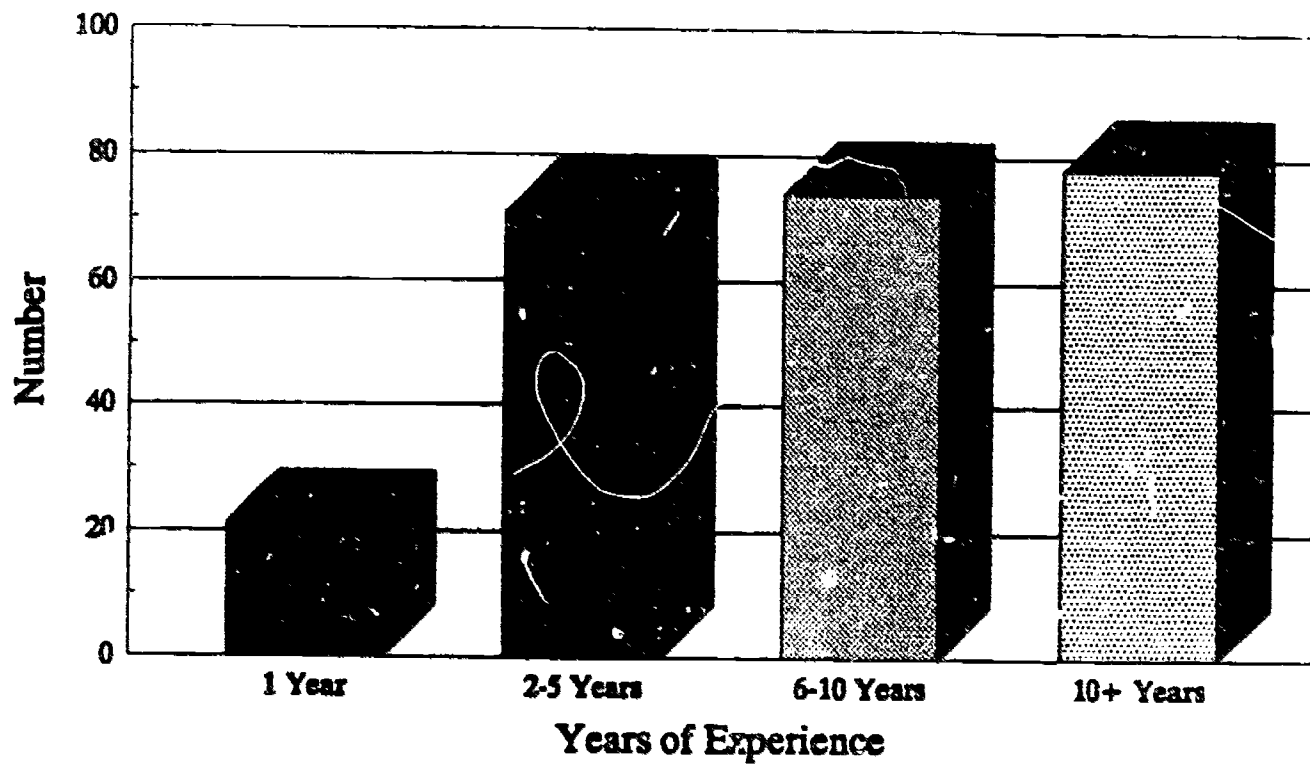


Table 8
Average Number of Learners with Severe Handicaps
Taught According to Teachers

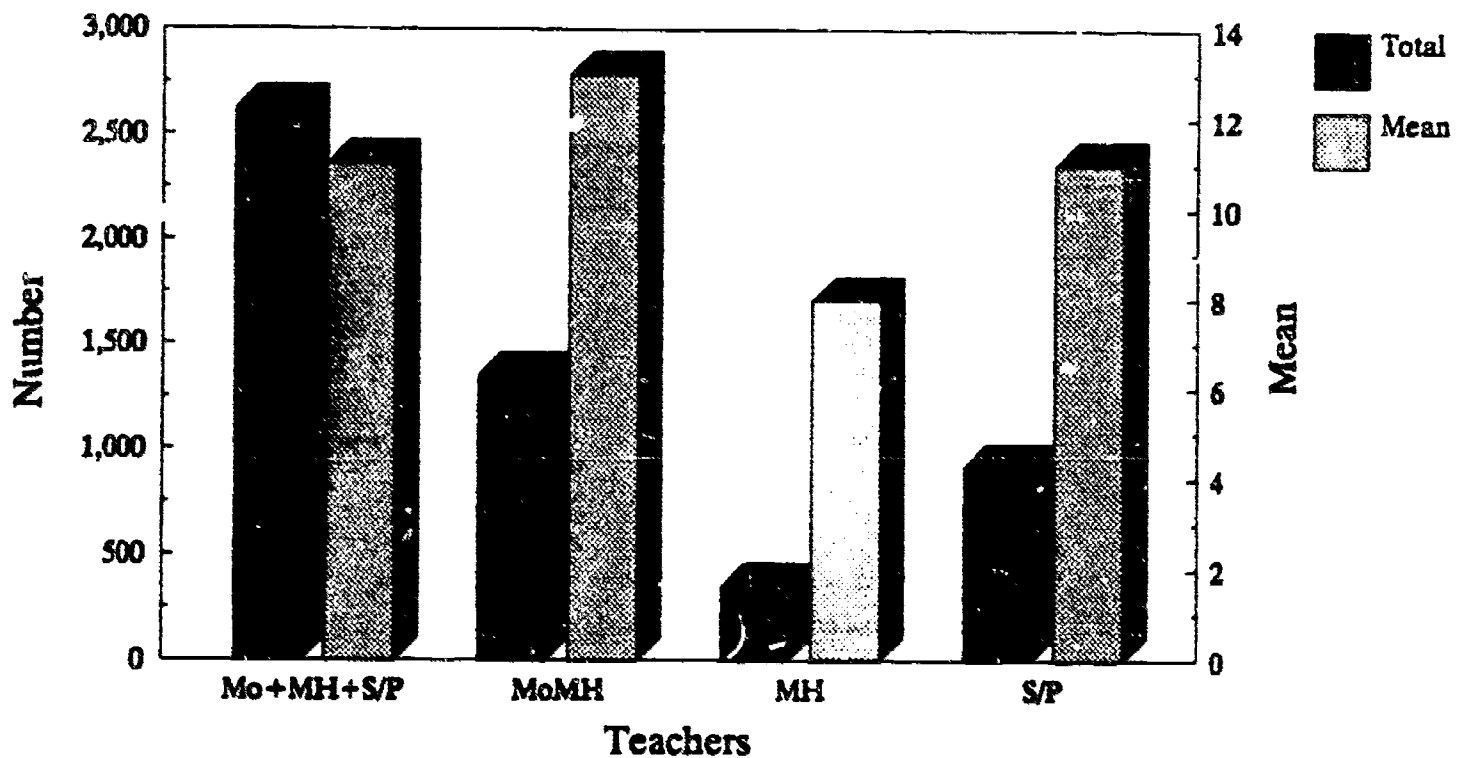


Table 9
 Number of Learners with Severe Handicaps in
 Classes with Non-Handicapped Learners

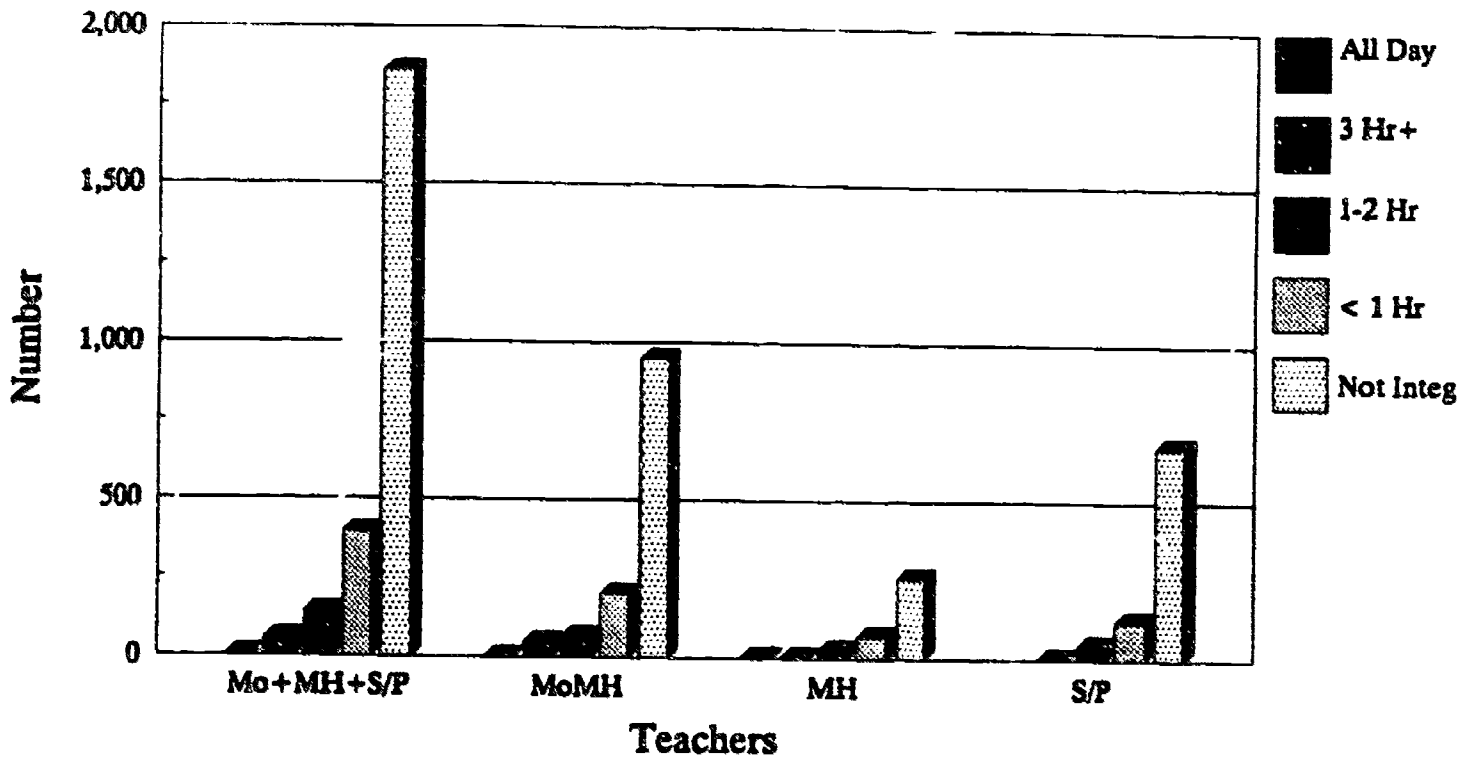
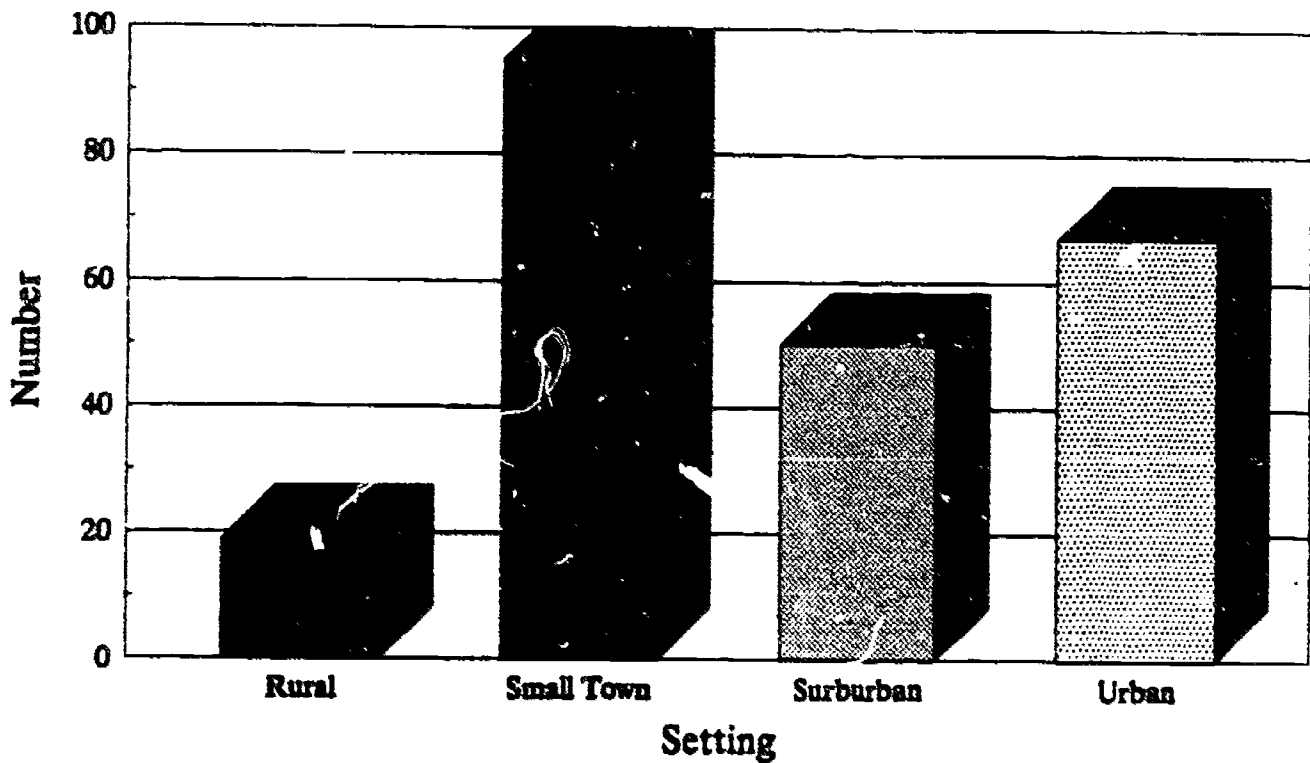


Table 10
 School Setting According to Teachers



Part Two

Specific responses for each of the items are clustered into seven categories. Percentages of "yes" responses for each of the items for each group are listed in Tables 11A - 11I. Teachers' responses are further broken down according to groups in Tables 12A - 12I. The corresponding items from the survey are found in Appendix B. The items in Appendix B are the same items as in the Optimal Practice Inventory, but have been arranged according to best practice indicators.

For review purposes, a yes response at 70% and above was chosen as an indication of a frequently occurring educational practice. A yes response at 50% and below by at least two groups was chosen as an indication of a seldomly occurring educational practice.

Principals answered yes more frequently than any group. They responded yes at a 70% level to more items (31) than the Directors (27) and teachers (25), and the percentage responding yes to specific items tended to be higher than the other groups on 39/50 items.

In reviewing the age appropriate placement with non-handicapped peers indicators (see items A1 - 3 in Appendix E), it appears that learners with severe handicap are frequently going to a school with students without handicaps who are the same age; however, they are seldom in classes with other students without handicaps who are the same age. Teachers are frequently addressing the reasons which keep learners from attending the regular classes on their IEP's. The results are in Tables 11A and 12A.

In reviewing the social integration indicators (see items B1 - 10 in Appendix B) it appears that learners with severe handicaps seldom go to art, music or gym with other students who are not handicapped, ride the same bus as other children in their neighborhood, go to regular public schools in their own neighborhood or go to other community programs with peers who are not handicapped.

However, the special education program frequently provides opportunities to participate in community activities; and teachers frequently adapt activities to suit the learners' needs (parents disagree), urge other students who are not handicapped to interact/participate with learners with severe handicaps (parents disagree), and encourage other teachers in the school to be involved with the learners with severe handicaps. According to administrators, learners frequently go to lunch with other students who are not handicapped (teachers disagree). The results are in Tables 11B and 12B.

In reviewing the transition planning indicators (see items C1 - 4 in Appendix B) it appears that teachers frequently write goals, objectives, and activities in the IEP to prepare the learner when moving from one level to another (parents disagree); however, written plans for preparing students for placement in a less restrictive education setting are seldom written nor are objectives addressing transition with a timetable for implementation, review and follow-up (principals disagree). The results are in Tables 11C and 12C.

In reviewing the curriculum and instruction indicators (see items D1 - 3 in Appendix B) it appears that almost all students with severe handicaps are taught functional skills (parents frequently answered yes, but not at as high a rate as the other groups); the curriculum frequently lists skills ranging from no skills to the level of adult functioning; and the learners frequently use the same type of materials in class that will be used in daily life (parents again responded yes at a lower rate). The results are in Tables 11D and 12D.

In reviewing the data based instruction indicators (see items E1 - 4 in Appendix B) it appears that there is seldom a written sequence for accomplishing skills; however, apparently teachers frequently prepare specific directions for others who work with the learner to follow when practicing tasks (parents disagree), the instructional plan frequently includes materials, methods, expected behavior, reinforcement, correction procedure and evaluation data, and the teacher frequently provides feedback and training on a regular basis to others. The results are in Tables 11E and 12E.

In reviewing the community based instruction indicators (see items F1 - 2 in Appendix B), it appears that teachers frequently make sure that the learner can perform skills that he learned at school in home and community settings (parents disagree), but seldom does the learner's instruction occur in the same community where the learner would be living, shopping, or attend recreational activities in daily life. The results are in Tables 11F and 12F.

In reviewing the parent/professional partnership indicators (see items G1 - 7 in Appendix B), all groups responded yes frequently to all items except two: teachers meeting with parents to discuss the learner's needs before the IEP is developed or reviewed (principals answered yes frequently, other groups disagree), and school assisting parents in locating the agencies in the community to help meet their child's needs (school personnel answered yes frequently, parents disagree). The results are in Tables 11G and 12G.

In reviewing the related services indicators (see items H1 - 2 in Appendix B), principals and directors responded yes frequently to related services specialists training teachers, etc., to use techniques by integrating therapy into daily activities; teachers and parents responded yes less frequently.

Percentages of YES Responses for "Best Educational Practices"

Table 11A

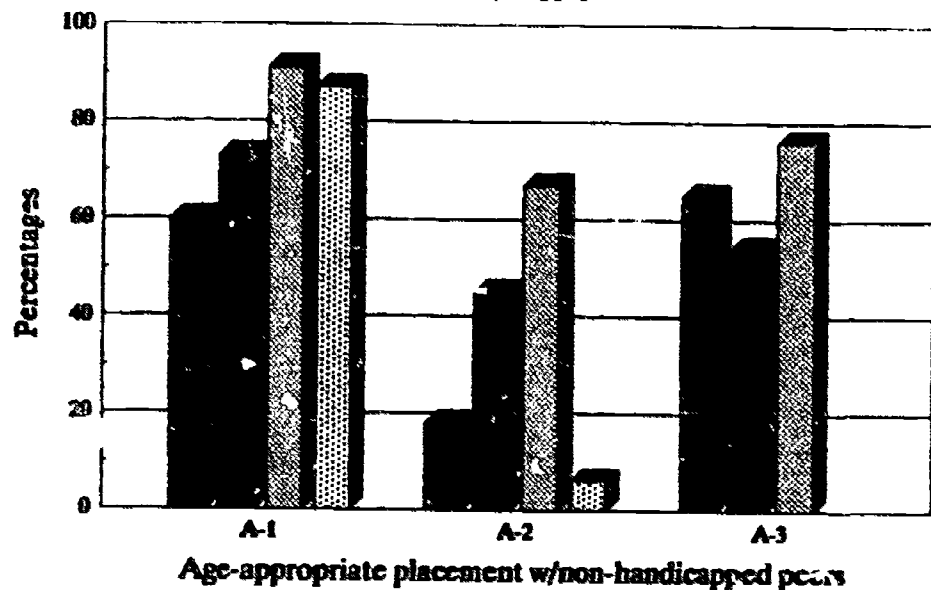


Table 11B

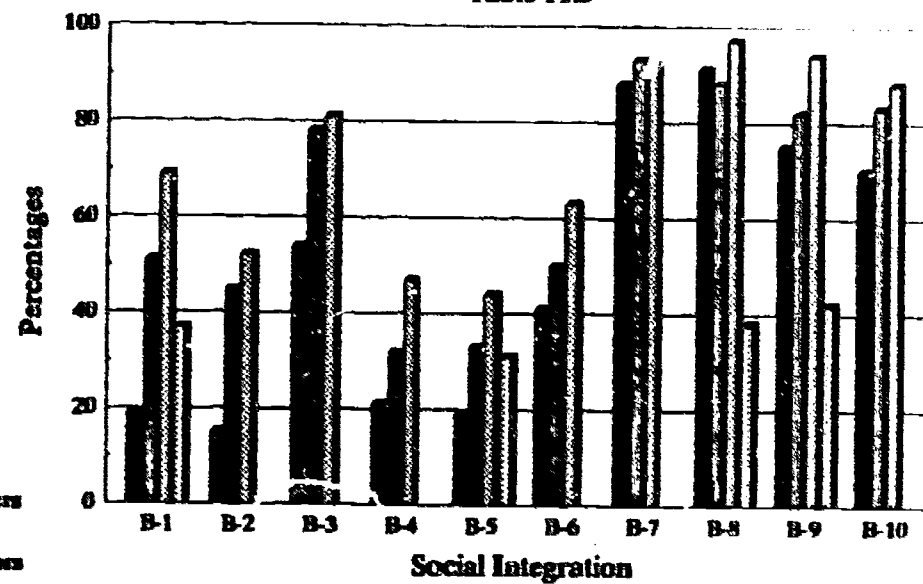


Table 11C

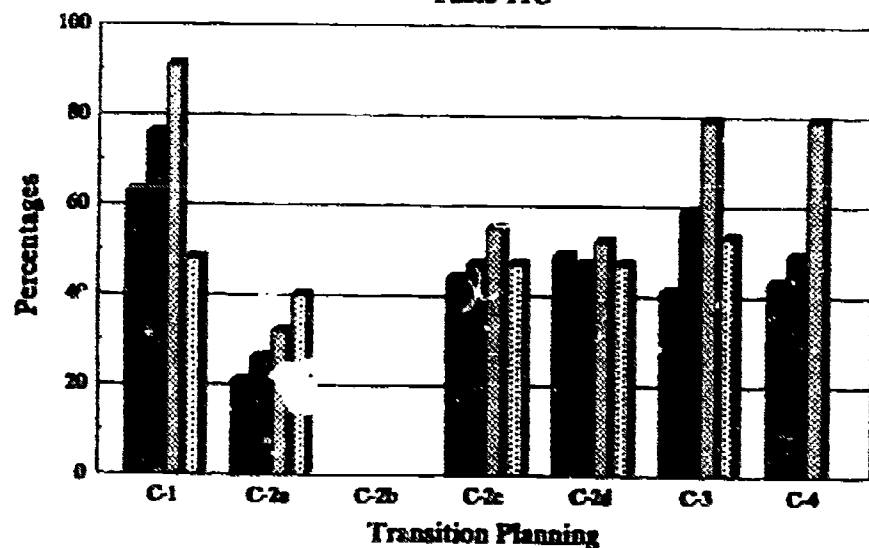
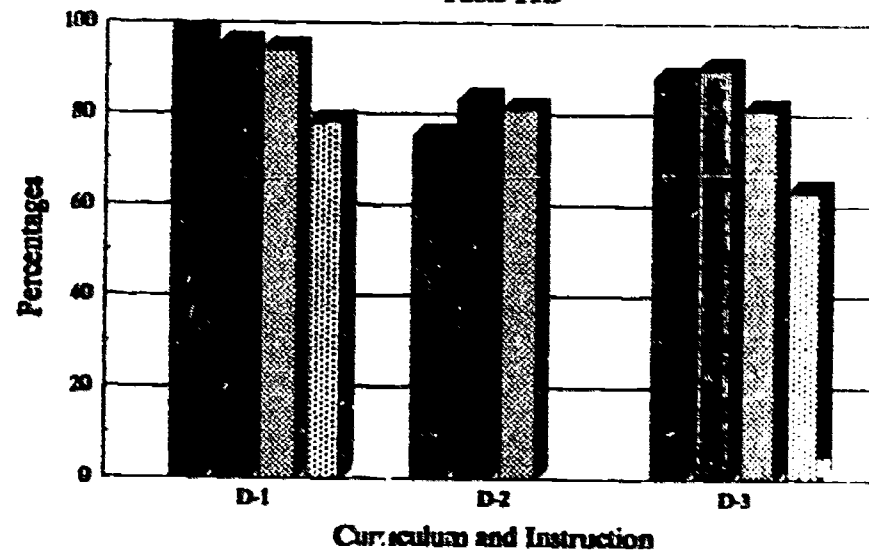


Table 11D



Teachers
 Directors
 Principals
 Parents

Percentages of YES Responses for "Best Educational Practices"

Table 11E

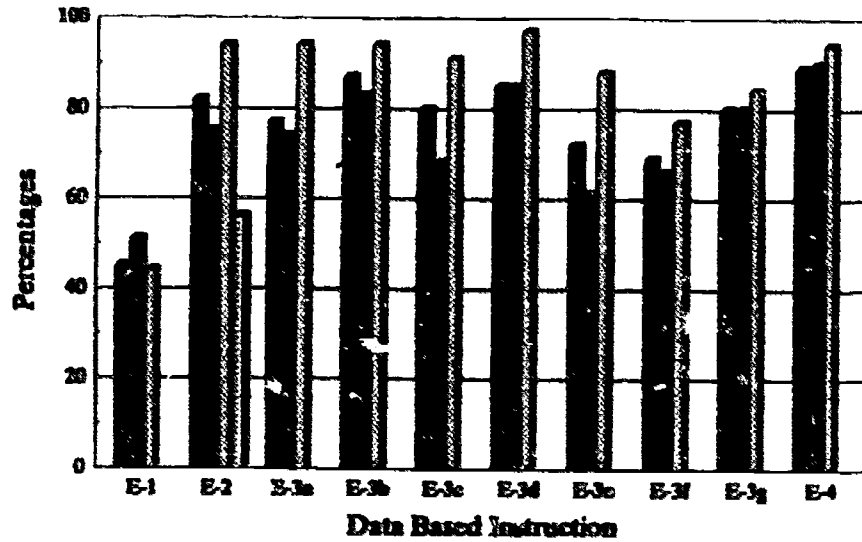


Table 11F

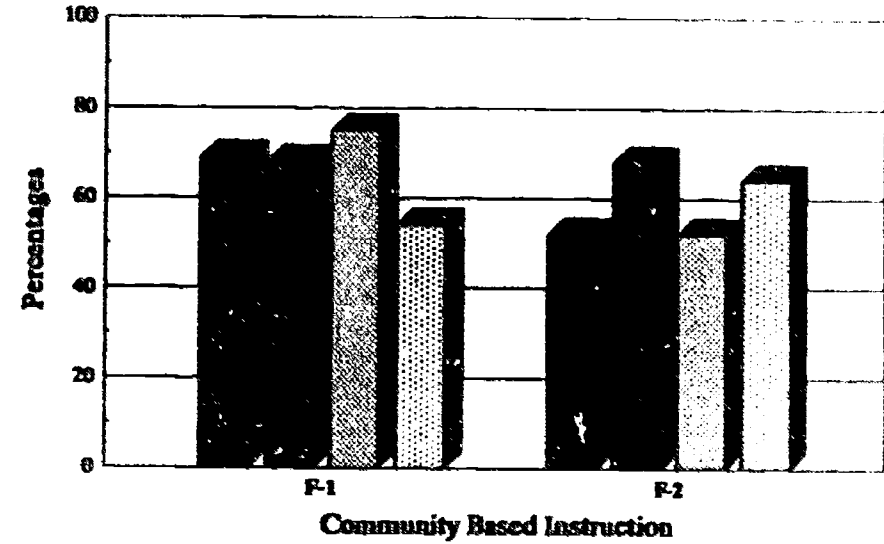


Table 11G

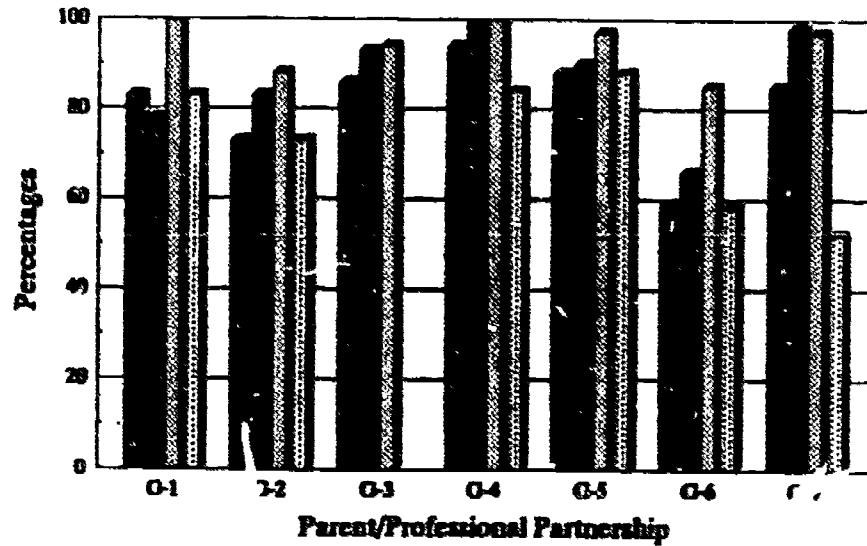
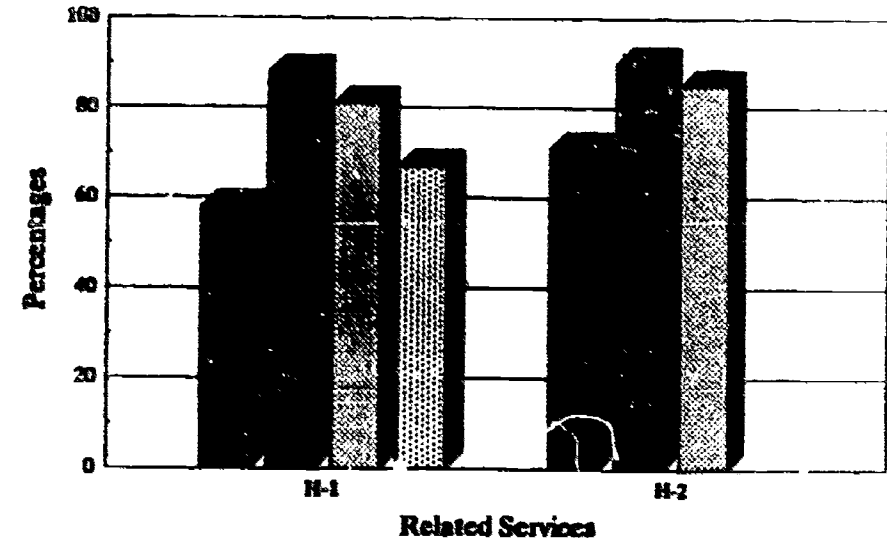


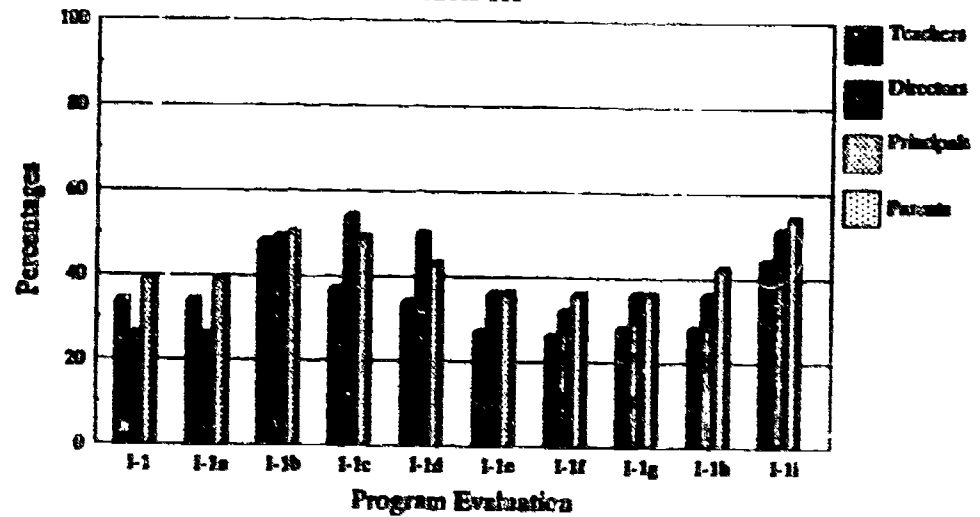
Table 11H



Teachers
Directors
Principals
Parents

Percentages of YES Responses for "Best Educational Practices"

Table 111



Percentages of YES Responses for "Best Educational Practices"

Table 12A

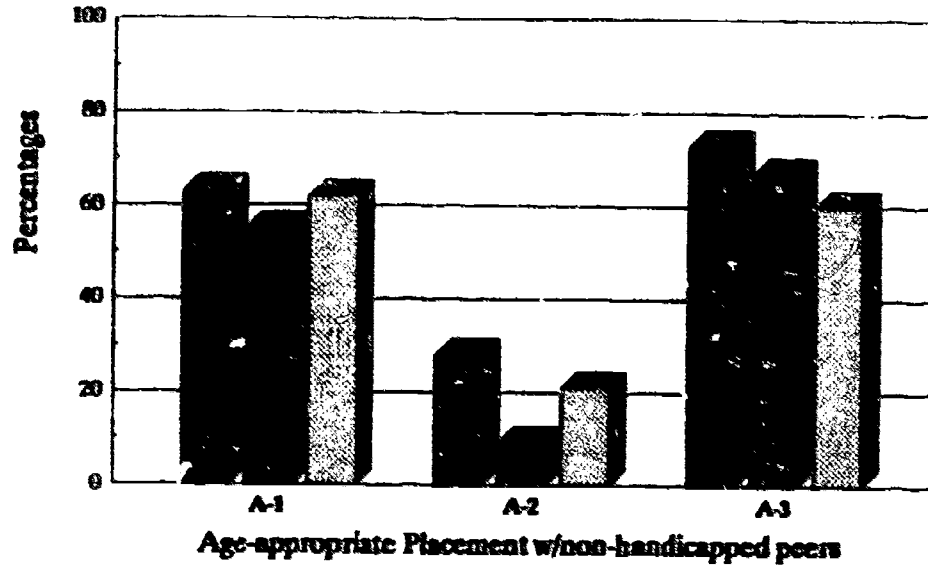


Table 12B

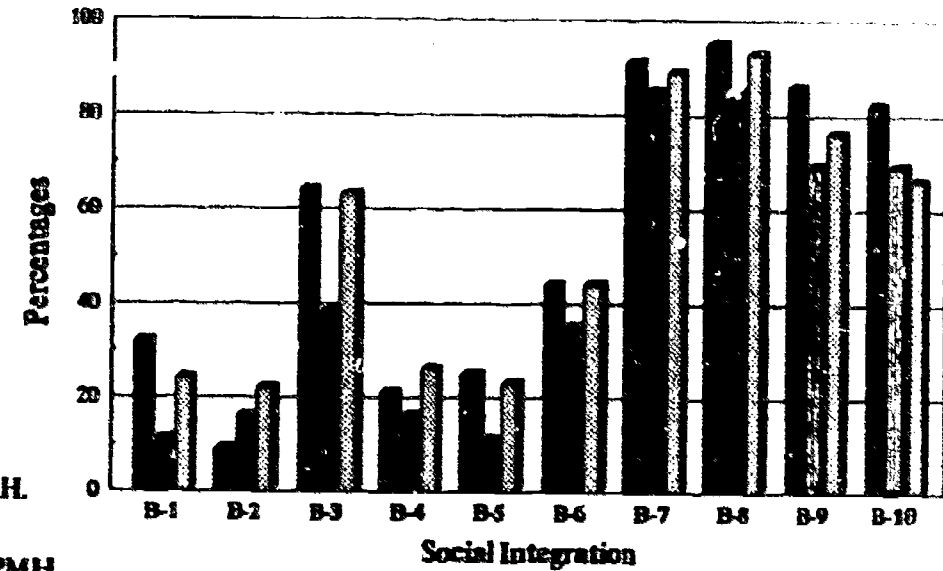


Table 12C

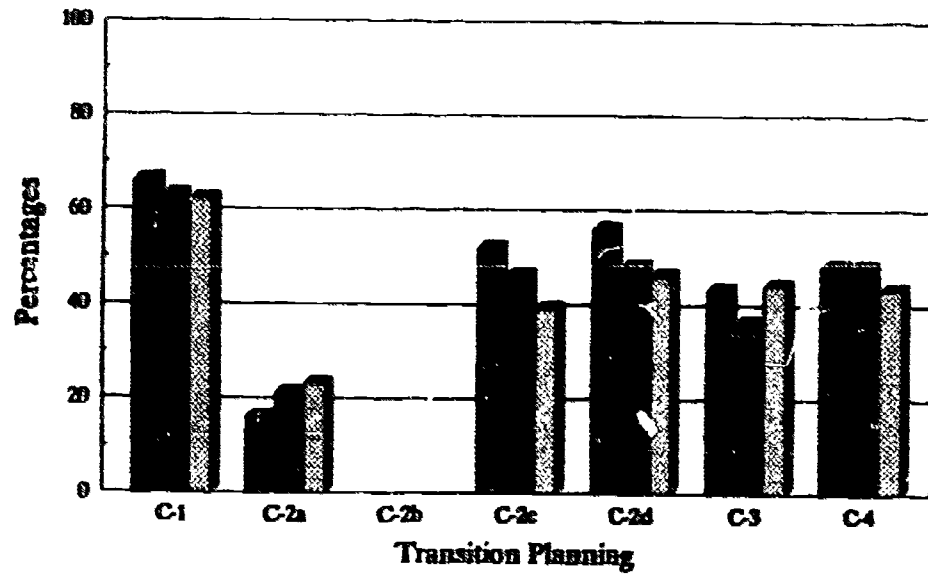
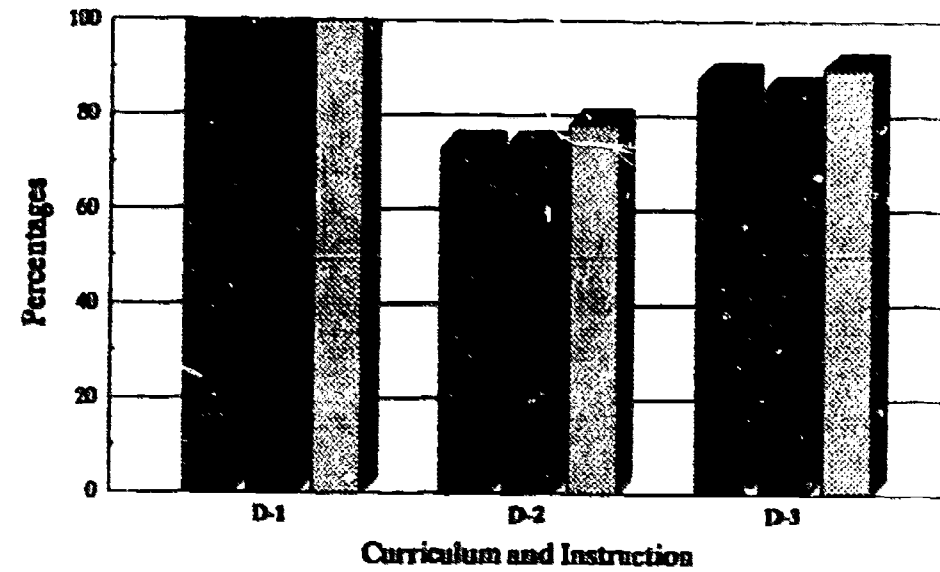


Table 12D



M.H.
 S/PMH
 MoMH

Percentages of YES Responses for "Best Educational Practices"

Table 12E

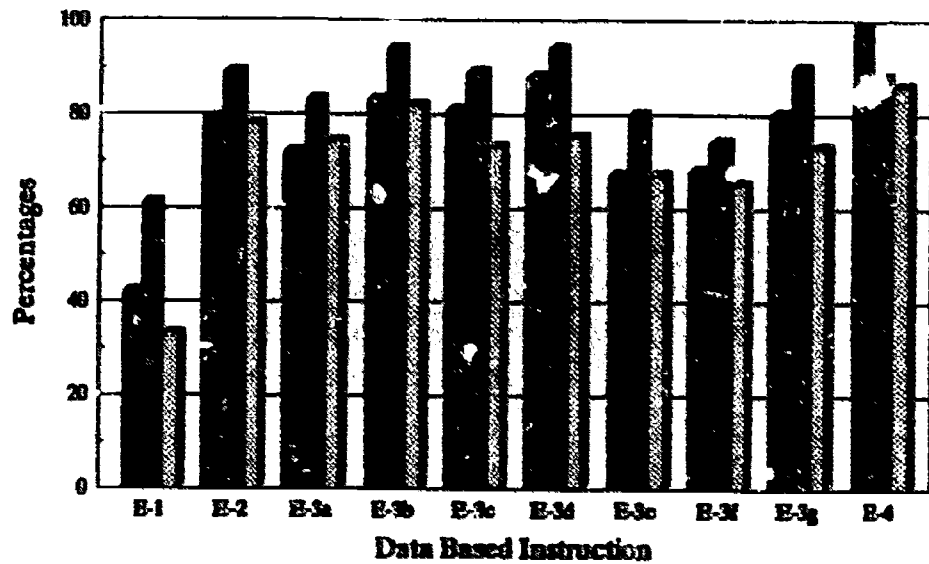


Table 12F

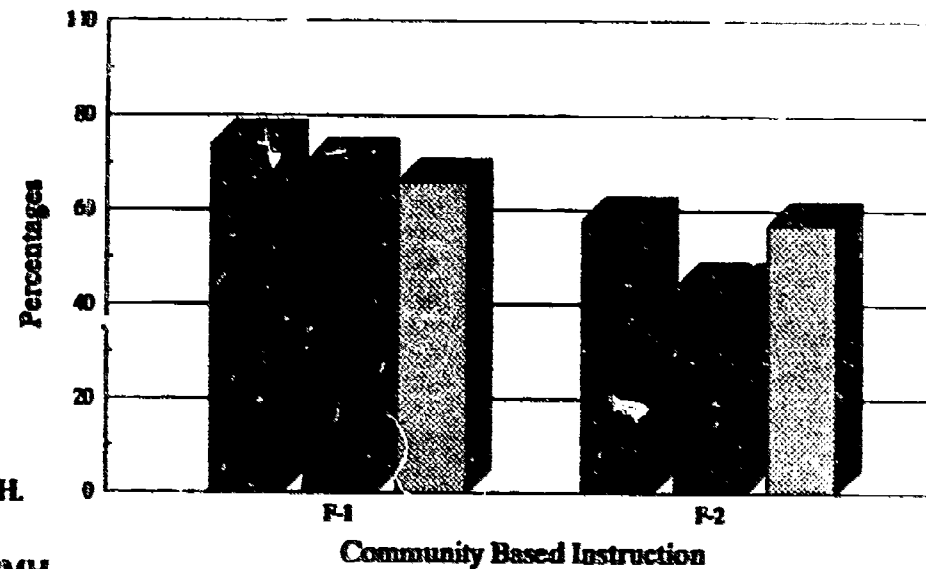


Table 12G

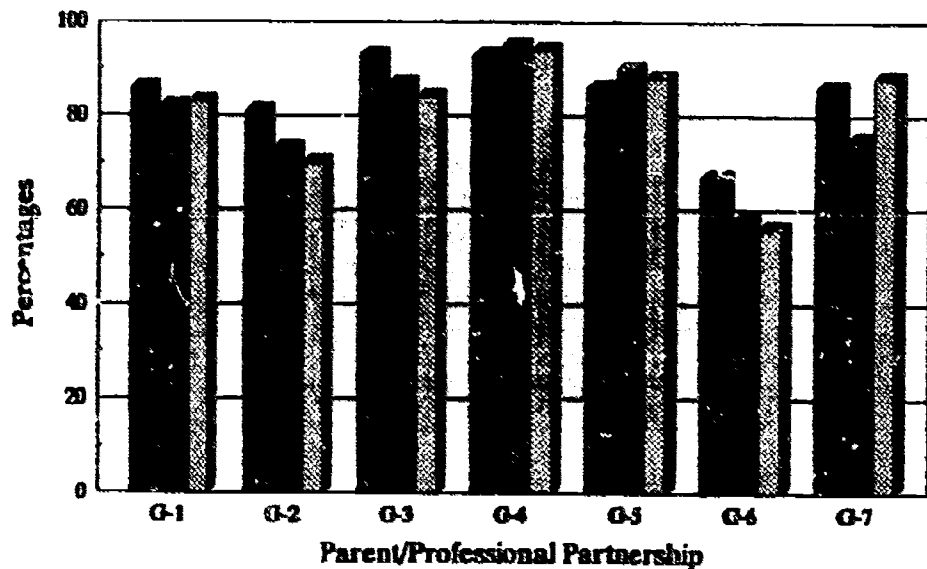
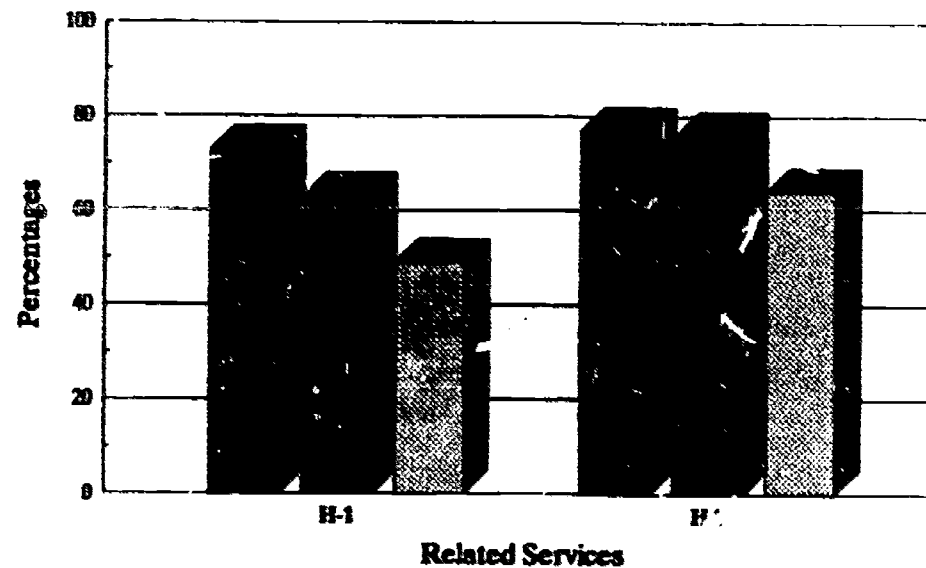


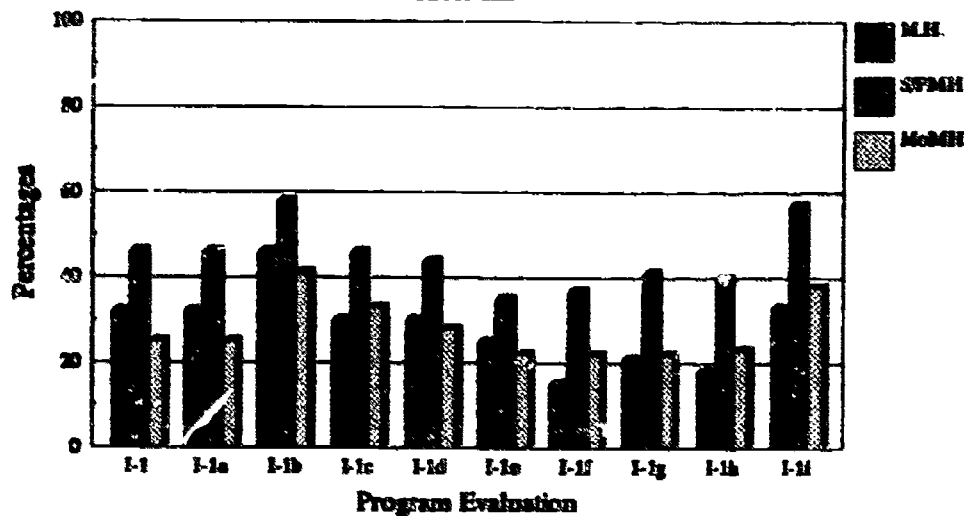
Table 12H



M.H.
 S/PMH
 MoMH

Percentages of YES Responses for "Best Educational Practices"

Table 12I



Apparently, therapy goals are frequently included in everyday classroom, home and community activities. The results are in Tables 11H and 12H.

In reviewing the program evaluation indicators (see items I1 - I11 in Appendix B), apparently, the entire staff is seldom involved in any aspect of program evaluation. The results are in Tables 11I and 12I.

DISCUSSION

This survey was conducted to describe and assess current services for students with severe handicaps in the state of Indiana. The response from the survey sent to individuals involved with students with severe handicaps throughout the state was at a 40% level and appeared to be representative of the population desired.

Based on the variety of handicaps checked by the respondents, it appears that the term "severely handicapped" is somewhat ambiguous. When referring to students with severe handicaps teachers might be thinking of individuals with severe retardation and/or cerebral palsy and/or orthopedic impairment and/or severe brain damage and/or speech and language impairment, etc. Thus, specific descriptors become extremely important when describing individuals with severe handicaps.

Students with severe handicaps are too frequently served in elementary school buildings, regardless of age, and separate facilities. Influencing factors are obviously low incidence of the population and rural/small town settings. However, age-appropriate placement is a key "best educational practice," and options to age-appropriate placements should be pursued.

A majority of the teachers teaching students with severe handicaps have six or more years experience. The advantage of teaching experience is obvious; however, unless those teachers are remaining current with the literature, attending conferences, taking classes, etc., state of the art knowledge in the field will be lacking, regardless of experience.

The number of students with severe handicaps being integrated with non-handicapped students is extremely low. This notion of integration is unique when viewing education for the severely handicapped from a historical perspective. However, professionals in the field reinforce the importance of intervening the educational program of the severely handicapped with "normal" peers whenever possible. They continue to study and be very optimistic with the effects of this integration.

Best educational practices can be clustered into seven categories. The most positive response of implementation of these practices is from the perspective of the principal, followed by the directors of special education, and then the teachers and parents. The highly positive response on the part of the principals and directors of special education is not surprising as they were likely viewing the survey according to what is supposed to be happening according to the law. The viewpoint of the teachers is likely more accurate as a majority of the indicators directly involve the teachers.

Parents were in disagreement on numerous items with the educators' responses. The reason for the parents' disagreement and implied dissatisfaction with what is occurring educationally for their children cannot be determined from this survey. However, school districts should be sensitive to the disparity and attempt to involve parents with open and honest channels of communication. The peculiarity of this observation is that the best educational practice dealing with the parent/professional partnership was rated as the most frequently occurring practice.

As previously stated, the category dealing with parent/professional partnership appears to be implemented most efficiently. While the placement/IEP process requires this relationship, the responses to specific indicators suggest that schools are going that one step further.

In the instructional area, teachers see themselves teaching "functional" curriculum and being data-based in approach. However, the concept of functional curriculum and data-based teaching has been refined over the past few years. Teachers are likely in need of updating of information and skills in these areas. A noted weakness in the instructional area is in community based instruction. The field has refined its approach in this area and the need for in-service exists in this area as well.

While related service goals are common in the IEP's of students with severe handicaps, the actual integration of the techniques of these specialists into the total program appears to be deficient. If the goals identified by these specialists are integral parts of educational programs of the students, the severity of the handicap warrants the techniques to be integrated into the total program or generalization simply will not occur.

Social integration of students with severe handicaps with non-handicapped students is seldom implemented. Districts must deal with this issue at an administrative level as the concept of students with severe handicaps being integrated with non-handicapped peers remains a unique idea for many educators. It is necessary for districts to determine general educational goals for the severely handicapped and the impact of social integration on the accomplishment of those goals.

Transition planning is relatively weak. Historically, students with severe handicaps were placed into self-contained classes and transition "out" simply did not occur. Districts must address the various aspects of transition and work closely with teachers and parents in the transition process.

The involvement of teachers in the process of program evaluation appears to be lacking. The extent to which school districts formally evaluate their special education programs is uncertain. Nonetheless, based on the differing views of various groups on this survey, it would appear that if an accurate reflection of educational programming is desired, input from teachers would be advantageous for a district.

Based on the perceptions of those responding to this survey, the state of the art of educational practices for students with severe handicaps appears relatively good. However, when considering recent developments in the field, it would appear that some caution in interpreting these positive results is necessary. It is likely that a greater gap exists than practicing educators are willing to admit. Time and resources in the areas of policy development, staff in-service, community goal setting, etc., are going to be necessary on the part of school districts to ensure implementation of "best educational practices".

APPENDIX A

**OPTIMAL PRACTICE INVENTORY
FOR THE
SEVERELY HANDICAPPED INCLUDING DEAF/BLIND**

**3. PRACTICE INVENTORY
FOR THE
SEVERELY HANDICAPPED INCLUDING DEAF/BLIND**

This survey has been sent to you to gather information about state of the art practices in Indiana's services to the severely handicapped.

1. Handicaps of severely handicapped students for whom I have responsibility:
(Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Deaf/Blind
<input type="checkbox"/> Blind
<input type="checkbox"/> Deaf
<input type="checkbox"/> Cerebral Palsy
<input type="checkbox"/> Autism
<input type="checkbox"/> Severe Brain Damage
<input type="checkbox"/> Orthopedic Impairment
<input type="checkbox"/> Other Health Impairment | <input type="checkbox"/> Moderate Mental Retardation
<input type="checkbox"/> Multiple Handicaps
<input type="checkbox"/> Severe Mental Retardation
<input type="checkbox"/> Profound Mental Retardation
<input type="checkbox"/> Mild Mental Retardation
<input type="checkbox"/> Severe Emotional Handicap
<input type="checkbox"/> Speech/Language Handicap
<input type="checkbox"/> Other _____ |
|--|--|

2. For each AGE GROUP of learners for whom you are responsible, check the SETTING column where the program is located.

AGE GROUP	SETTING						
	ELEM. BLDG.	MID.SCH BLDG.	JR. HI BLDG.	H.S. BLDG.	SEP'ATE FACIL.	SCH. in LRNR'S NEIGHBORH'D	HOME BOUND
0-2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3-5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6-9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10-12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13-15	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16-18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19-21	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Most IEPs for our students include goals in the following areas:

- | | |
|--|--|
| <input type="checkbox"/> Self-help (eating, dressing, toilet training)
<input type="checkbox"/> Fine motor (use of fingers, hands)
<input type="checkbox"/> Improving use eyes, ears, touch
<input type="checkbox"/> Skills for living in the community
<input type="checkbox"/> Work skills
<input type="checkbox"/> Communication | <input type="checkbox"/> Gross motor (rolling, walking, hopping)
<input type="checkbox"/> Social Development (relating to others)
<input type="checkbox"/> Learning academics (3 Rs)
<input type="checkbox"/> Skills for living at home
<input type="checkbox"/> Recreation/leisure activities
<input type="checkbox"/> Other _____ |
|--|--|

4. Years serving severely handicapped populations:

- a) 1 year b) 2-5 years c) 6-10 years d) More than 10 years

5. Total number of learners with severe handicaps I serve: _____

6. Fill in number of learners with severe handicaps in classes with non-handicapped students:

- a) all day b) 3 hours or more c) 1-2 hours d) 1 hour or less e) not integrated
- School Setting: a) Rural b) Small town c) Suburban d) Urban

DIRECTIONS: Please answer the following by circling yes or no or NA (not applicable) regarding learners with severe handicaps.

A. SOCIAL INTEGRATION

- yes no NA 1. Learners with severe handicaps go to a school with other students without handicaps who are the same age.
- yes no NA 2. Learners are in classes with other students without handicaps who are the same age.
- yes no NA 3. The goals in IEPs of learners who are not in regular classes all day address the reasons which keep the learner from attending regular classes with children without handicaps.
- yes no NA 4. Learners go to art and/or music with other students who are not handicapped.
- yes no NA 5. Learners go to gym with other students who are not handicapped.
- yes no NA 6. Learners go to lunch with other students who are not handicapped.
- yes no NA 7. Learners ride the same bus as the other children in their neighborhood.
- yes no NA 8. Learners go to regular public schools in their own neighborhood for other students who are not handicapped.
- yes no NA 9. Learners go to other community programs with peers who are not handicapped, such as boy/girl scouts, 4-H, Sunday School. Please specify: _____
- yes no NA 10. The special education program provides opportunities to participate in community activities (bowling, eating in a restaurant, field trips).
- yes no NA 11. If a learner cannot perform an activity in the school or community, the teacher adapts the activity to suit the learner's needs and overcome any barriers to participation.
- yes no NA 12. The teacher urges other students who are not handicapped to interact/participate with learners with severe handicaps.
- yes no NA 13. The teacher encourages other teachers in the school to be involved with the learners with severe handicaps.

B. TRANSITION PLANNING

- yes no NA 1. When learners move from one level to another (such as pre-school-to-elementary or elementary-to-middle school) goals, objectives, and activities are written into the IEP to prepare the learner for the changes.
- yes no NA 2. This takes place:
2a. 1 week to 1 month prior to move.
yes no NA 2b. 6 months to one year prior to move.
yes no NA 2c. from entry into current program through movement to next level.
- yes no NA 3. Learners placed outside regular classroom settings have written plans for preparing the learner for placement in a less restrictive educational setting.
- yes no NA 4. In preparation for transitional placement change, objectives in each learner's IEP address transition, with a timetable for implementation, review, and follow-up by parents, current teacher, representative of next environment, appropriate related service personnel, and a district administrator.

C. CURRICULUM AND INSTRUCTION

- yes no NA 1. Learners are taught functional skills they will need in order to live as independently in the community as possible.
- yes no NA 2. The curriculum lists skills ranging from the point where a learner has no skills to the level of adult functioning.
- yes no NA 3. Learners use the same type of materials in class that will be used in daily life.
- yes no NA 4. For each IEP objective, there is a written sequence for accomplishing the skill beginning at the learner's level through actually using the skill in adult life.
- yes no NA 5. The teacher prepares specific directions for others who work with the learner (such as parents, instructional aides, other teachers, employers) to follow when practicing the tasks.
- yes no NA 6. The instructional plan above includes:
- yes no NA 6a. setting
 - yes no NA 6b. materials
 - yes no NA 6c. method to be used to signal learner to respond
 - yes no NA 6d. expected behavior
 - yes no NA 6e. reinforcement
 - yes no NA 6f. correction procedure
 - yes no NA 6g. evaluation data recording procedures (charting, anecdotal records, etc.)
- yes no NA 7. The teacher provides feedback and training on a regular basis to others, such as aides, volunteers, other teachers, who instruct the learner.
- yes no NA 8. Teachers make sure that the learner can perform skills that he learned at school in home and community settings.
- yes no NA 9. Much of the learner's instruction occur in the same community where the learner would be living, shopping, or attending recreational activities in daily life.

D. HOME-SCHOOL PARTNERSHIP

- yes no NA 1. The school has involved parents in the selection and training of skills that the learner will need for living in their home and community.
- yes no NA 2. The school frequently invites family members to visit the classroom.
- yes no NA 3. The school encourages family members to visit school any time.
- yes no NA 4. Parents are encouraged to work with their child to reinforce skills taught in the school program.
- yes no NA 5. Teachers involve parents in the learner's education (for example, log books or phone calls) about the learner's program. Please specify: _____
- yes no NA 6. Teachers meet with parents to discuss the learner's needs before the IEP is developed or reviewed.
- yes no NA 7. The school assists parents to locate the agencies in the community to help meet their child's needs.

E. RELATED SERVICES

- yes no NA 1. Related services specialists train teachers, paraprofessionals, parents, siblings, etc. to use the techniques by integrating therapy into daily activities.
- yes no NA 2. In the IEP, therapy goals are included in everyday classroom, home, and community activities.

F. PROGRAM EVALUATION

1. Each year, the entire staff of the local school district evaluates how effectively they are serving the needs of learners, families, and the community by reviewing the following:

- | | | | |
|-----|----|----|--|
| yes | no | NA | 1a. policies |
| yes | no | NA | 1b. goal achievement |
| yes | no | NA | 1c. staffing and staff development |
| yes | no | NA | 1d. parent involvement |
| yes | no | NA | 1e. community relations |
| yes | no | NA | 1f. interagency and advocacy group interaction |
| yes | no | NA | 1g. fiscal resources |
| yes | no | NA | 1h. physical plant requirements |
| yes | no | NA | 1i. instructional resources |

Comments:

If you would like a copy of the survey results, please provide the following information:

Name _____

Address _____

City _____

State _____ Zip _____

PLEASE RETURN YOUR RESPONSE BY APRIL 27 TO:

Rosemarie Kleber, Program Facilitator
School of Education, Room 502
Blumberg Center for Interdisciplinary
Studies in Special Education
Indiana State University
Terre Haute Indiana 47809

APPENDIX B

**ITEMS FROM THE SURVEY
ACCORDING TO BEST PRACTICES**

Age-appropriate placement with non-handicapped peers

1. LEARNERS WITH SEVERE HANDICAPS GO TO A SCHOOL WITH OTHER STUDENTS WITHOUT HANDICAPS WHO ARE THE SAME AGE.
2. LEARNERS ARE IN CLASSES WITH OTHER STUDENTS WITHOUT HANDICAPS WHO ARE THE SAME AGE.
3. THE GOALS IN IEP'S OF LEARNERS WHO ARE NOT IN REGULAR CLASSES ALL DAY ADDRESS THE REASONS WHICH KEEP THE LEARNER FROM ATTENDING REGULAR CLASSES WITH CHILDREN WITHOUT HANDICAPS.

B. Social Integration

1. LEARNERS GO TO ART AND/OR MUSIC WITH OTHER STUDENTS WHO ARE NOT HANDICAPPED.
2. LEARNERS GO TO GYM WITH OTHER STUDENTS WHO ARE NOT HANDICAPPED.
3. LEARNERS GO TO LUNCH WITH OTHER STUDENTS WHO ARE NOT HANDICAPPED.
4. LEARNERS RIDE THE SAME BUS AS OTHER CHILDREN IN THEIR NEIGHBORHOOD.
5. LEARNERS GO TO REGULAR PUBLIC SCHOOLS IN THEIR OWN NEIGHBORHOOD FOR OTHER STUDENTS WHO ARE NOT HANDICAPPED.
6. LEARNERS GO TO OTHER COMMUNITY PROGRAMS WITH PEERS WHO NOT HANDICAPPED, SUCH AS BOY/GIRL SCOUTS, 4-H, SUNDAY SCHOOL.
7. THE SPECIAL EDUCATION PROGRAM PROVIDES OPPORTUNITIES TO PARTICIPATE IN COMMUNITY ACTIVITIES (BOWLING, EATING IN A RESTAURANT, FIELD TRIPS).
8. IF A LEARNER CANNOT PERFORM AN ACTIVITY IN THE SCHOOL OR COMMUNITY, THE TEACHER ADAPTS THE ACTIVITY TO SUIT THE LEARNER'S NEEDS AND OVERCOME ANY BARRIERS TO PARTICIPATION.
9. THE TEACHER URGES OTHER STUDENTS WHO ARE NOT HANDICAPPED TO INTERACT/PARTICIPATE WITH LEARNERS WITH SEVERE HANDICAPS.
10. THE TEACHER ENCOURAGES OTHER TEACHERS IN THE SCHOOL TO BE INVOLVED WITH THE LEARNERS WITH SEVERE HANDICAPS.

C. Transition Planning

1. WHEN LEARNERS MOVE FROM ONE LEVEL TO ANOTHER (SUCH AS PRE-SCHOOL TO ELEMENTARY OR ELEMENTARY TO MIDDLE SCHOOL) GOALS, OBJECTIVES, AND ACTIVITIES ARE WRITTEN INTO THE IEP TO PREPARE THE LEARNER FOR THE CHANGES.
2. THIS TAKES PLACE:
 - 2a. 1 WEEK TO 1 MONTH PRIOR TO MOVE.
 - 2b. 2-5 MONTHS PRIOR TO MOVE
 - 2c. 6 MONTHS TO ONE YEAR PRIOR TO MOVE
 - 2d. FROM ENTRY INTO CURRENT PROGRAM THROUGH MOVEMENT TO NEXT LEVEL.
3. LEARNERS PLACED OUTSIDE REGULAR CLASSROOM SETTINGS HAVE WRITTEN PLANS FOR PREPARING THE LEARNER FOR PLACEMENT IN A LESS RESTRICTIVE EDUCATION SETTING.
4. IN PREPARATION FOR TRANSITIONAL PLACEMENT CHANGE, OBJECTIVES IN EACH LEARNER'S IEP ADDRESS TRANSITION, WITH A TIMETABLE FOR IMPLEMENTATION, REVIEW, AND FOLLOW-UP BY PARENTS, CURRENT TEACHER, REPRESENTATIVE OF NEXT ENVIRONMENT, APPROPRIATE RELATED SERVICE PERSONNEL, AND A DISTRICT ADMINISTRATOR.

D. Curriculum and Instruction

1. LEARNERS ARE TAUGHT FUNCTIONAL SKILLS THEY WILL NEED IN ORDER TO LIVE AS INDEPENDENTLY IN THE COMMUNITY AS POSSIBLE.
2. THE CURRICULUM LISTS SKILLS RANGING FROM THE POINT WHERE A LEARNER HAS NO SKILLS TO THE LEVEL ADULT FUNCTIONING.
3. LEARNERS USE THE SAME TYPE OF MATERIALS IN CLASS THAT WILL BE USED IN DAILY LIFE.

E. Data Based Instruction

1. FOR EACH IEP OBJECTIVE, THERE IS A WRITTEN SEQUENCE FOR ACCOMPLISHING THE SKILL BEGINNING AT THE LEARNER'S LEVEL THROUGH ACTUALLY USING THE SKILL IN ADULT LIFE.
2. THE TEACHER PREPARES SPECIFIC DIRECTIONS FOR OTHERS WHO WORK WITH THE LEARNER (SUCH AS PARENTS, INSTRUCTIONAL AIDES, OTHER TEACHERS, EMPLOYERS) TO FOLLOW WHEN PRACTICING THE TASKS.

7. THE SCHOOL ASSISTS PARENTS TO LOCATE THE AGENCIES IN THE COMMUNITY TO HELP MEET THEIR CHILD'S NEEDS.

H. Related Services

1. RELATED SERVICES SPECIALISTS TRAIN TEACHERS, PARAPROFESSIONALS, PARENTS SIBLINGS, ETC. TO USE THE TECHNIQUES BY INTEGRATING THERAPY INTO DAILY ACTIVITIES.
2. IN THE IEP, THERAPY GOALS ARE INCLUDED IN EVERYDAY CLASSROOM, HOME, AND COMMUNITY ACTIVITIES.

I. Program Evaluation

1. EACH YEAR, THE ENTIRE STAFF OF THE LOCAL SCHOOL DISTRICT EVALUATES HOW EFFECTIVELY THEY ARE SERVING THE NEEDS OF LEARNERS, FAMILIES, AND THE COMMUNITY BY REVIEWING THE FOLLOWING:
 - 1a. POLICIES
 - 1b. GOAL ACHIEVEMENT
 - 1c. STAFFING AND DEVELOPMENT
 - 1d. PARENT INVOLVEMENT
 - 1e. COMMUNITY RELATIONS
 - 1f. INTERAGENCY AND ADVOCACY GROUP INTERACTION
 - 1g. FISCAL RESOURCES
 - 1i. INSTRUCTION RESOURCES

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