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AUTHOR Cloninger, Chigee J.; Edelman, Susan W.
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ABSTRACT

This final report describes activities and accomplishments of the Vermont State Project for Children and Youth with Deaf-Blindness, a 3-year federally supported project to provide statewide services, training, and technical assistance to Vermont children (birth to age 21) with deaf-blindness, their families, and service providers. Throughout the project there were 35 to 38 children with deaf-blindness receiving services in a variety of settings. The project included five components: (1) on-going coordination with educational and other agencies responsible for providing services to this population in order to build local capacity and share skills and resources; (2) provision of on-site technical assistance, special education, and related services for family support and involvement, curriculum development and adaptations, diagnosis and educational evaluation, and a coordinated plan of services; (3) provision of on-site technical assistance consultation to families, professionals, paraprofessionals, and related services personnel concerning family support and development, curriculum development and adaptations, collaboration of related services, replication of exemplary practices, and inclusionary education; (4) provision of procedures to evaluate service effectiveness; and (5) maintenance of the state census for students with deaf-blindness. Individual sections of this report provide information on the project's purpose, goals, and objectives; conceptual framework and project description; major tasks and timelines; accomplishments/outcomes; challenges and resolutions; evaluation findings; and impact. Appendices provide details on project milestones, training activities, and products. (DB)

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FINAL REPORT

Vermont State Project for Children and Youth with Deaf-Blindness

CFDA 84.025A

October 1, 1992 - September 30, 1995

Submitted by:

**Chigee J. Cloninger, Project Director
Susan W. Edelman, Project Coordinator**

**Vermont State Project for Children & Youth with Deaf-Blindness
The University Affiliated Program of Vermont
University of Vermont
499C Waterman Building
Burlington, VT 05405-0160
(802) 656-4081
FAX 802-656-1357
email ccloninger@moose.uvm.edu**

0304533

II. ABSTRACT

The Vermont State Project to serve children and youth who are deaf-blind, was funded under Services for Children with Deaf-Blindness (CFDA 84.025A, Part C - 307.11) of the Individuals with Disabilities Education Act (IDEA), from the U.S. Department of Education, Office of Special Education Programs, for a three-year period (10/92-9/95).

The overall goal of the Vermont State Project was to provide statewide services, training, and technical assistance to all Vermont children and youth with deaf-blindness, birth through 21 years, their families, and service providers, according to mandated priorities. These priorities were: to support special education and related services to children (birth through 3 years) with deaf-blindness whom Vermont is not obligated to serve under Part B of IDEA and whom are not provided those services under some other authority such as Part H; and to provide technical assistance to agencies, institutions, and organizations providing educational and related services to children and youth with deaf-blindness whom they are obligated to serve under Parts B and H of IDEA, or some other authority. Throughout the three years the range of students on the State Census of Children and Youth with Deaf-Blindness was 35 - 38. These children were scattered throughout Vermont's 251 school districts receiving services in a variety of educational environments such as local public schools, general education classrooms, resource rooms, regional special education classrooms, day care, and out-of-state residential programs.

The plan for this project included five components which addressed the mandated initiatives specific to the identified needs of the State of Vermont: 1) Engage in on-going coordination with the State Department of Education, the co-lead agencies under Part H of the IDEA (State Departments of Health and Education), and other State agencies (e.g., Vocational Rehabilitation, the University Affiliated Program of Vermont, Vermont Association for the Blind and Visually Impaired, Vermont I-Team) responsible for providing services to children with deaf-blindness in order to build local capacity, and share skills and resources. The interagency Advisory Council for Students with Deaf-Blindness with statewide representation from family, education, vocational training, services for persons with hearing impairments, services for persons with vision impairments, educational administration, advocates, consumers, and other potential constituencies was vital to this goal. 2) Support the provision of services, by competent personnel, to unserved children (birth through 3 years) through on-site technical assistance, training, and special education and related services for: family support and involvement; curriculum development and adaptations; diagnosis and educational evaluation; and a coordinated plan of services. 3) Provide on-site technical assistance/consultation and training, by competent personnel, to families, professionals, paraprofessionals, and related services personnel serving students with deaf-blindness for family support and involvement; curriculum development and adaptations; coordination and collaboration of related services; replication of exemplary practices; and inclusionary education. 4) Provide procedures to evaluate the effectiveness of services supported through this project; and 5) Maintain the State Census for Students with Deaf-Blindness.

As a result of the project, service providers with family members of all Vermont children and youth with deaf-blindness more effectively provided special education and related services which incorporated exemplary practices for collaborative delivery of services, age-appropriateness, and maximum inclusion in the least restrictive environment.

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IV. PURPOSE, GOALS & OBJECTIVES

A. Purpose

The purpose of Vermont's state project for children and youth with deaf-blindness was to assure the provision of educational and related services to unserved young children with deaf-blindness and their families, to provide on-site technical assistance to improve the educational and related services provided to children and youth with deaf-blindness, and to improve the support provided to their families. This project assisted local service providers to implement exemplary practices to improve the abilities of and opportunities for students with deaf-blindness to live, go to school, play, work, and have friends in their own schools and communities.

The Vermont project addressed the implementation of exemplary practices within individual educational programs (IEPs) and individual family service plans (IFSPs). Exemplary practices of focus were: a) age-appropriate placement within public schools, b) social integration in school and community settings, c) family support, d) functional curricular decisions within the domains of alternative communication strategies, vocation, recreation and independent living; e) community-based training; and, f) transition planning. The project was designed to support an increasing number of children and youth with deaf-blindness being educated in their local schools.

Services and technical assistance provided were based upon needs assessments and priorities established by the local education agencies (LEAs), the State Comprehensive System of Personnel Development (CSPD), the State Plan for Part B of the IDEA, the Interagency Coordinating Council for Part H Planning, the Supported Employment Program of the Division of Vocational Rehabilitation, the Transition Systems Change Project, the Vermont State I-Team, and the State Advisory Council for Students with Deaf-Blindness.

B. Project Goals and Objectives

The goals of the Vermont project were to serve children and youth who are deaf-blind, their families, and service providers through: special education and related services, technical assistance and training, and interagency coordination. The objectives were:

1. To work with, and expand as necessary, an existing interagency advisory council which includes representatives from education, mental health, health, and social services agencies, families of students with deaf-blindness, and persons with deaf-blindness.
2. To coordinate the maintenance of the State Census of students with deaf-blindness, through identification of infants, toddlers, and school-aged students, and dissemination of state guidelines, resources and services.
3. To identify the needs of specific families and service providers, related to the overall state needs and in coordination with the Regional Part H teams, for children from birth through three.

4. To provide technical assistance and training to special education and related services providers for children birth through three regarding services such as diagnosis and evaluation of students at risk of deaf-blindness, family supports, and preparation of a coordinated plan of service through an IFSP.
5. To identify the needs, related to the overall state needs, of specific families and service providers of school-aged children and youth with deaf-blindness for on-site technical assistance and training.
6. To meet the specified needs of families and service providers of all children and youth with deaf-blindness (birth through 22 years), through the support of on-site technical assistance and training action plans which exemplify promising practices for family support and involvement, curriculum development and adaptations, transition planning, collaborative delivery of services, age-appropriate placement, and maximum inclusion.
7. To identify the needs, related to the overall state needs, of families and service providers for regional and statewide training.
8. To meet the specified needs of families and service providers through the support of training action plans which exemplify promising practices for family support and involvement, curriculum development and adaptations, collaborative delivery of services, age-appropriate placement, and maximum and appropriate integration.

V. Conceptual Framework & Description of the Project

A. Conceptual Framework

Vermont's project is built on theories, principles, and exemplary practices that promote education as an avenue to increase the students' quality of life, family and school involvement, and building local capacity. There are basically six foundations from which we operated the project (Giangreco, Cloninger, Iverson, 1993).

First, "Pursuing Valued Life Outcomes is an Important Aspect of Education." These valued life outcomes are: safe, stable homes; variety of places; meaningful activities; meaningful relationships; choice and control, and safety and health. The design and implementation of an educational program should be connected to these valued life outcomes.

Second, "The Family is the Cornerstone of Relevant and Longitudinal Educational Planning." A partnership with families is essential in planning and implementing students' programs. Families must be assisted to be better consumers of education and partners with service providers.

Third, "Collaborative Teamwork is Essential to Quality Education." All persons involved with a student's educational program must work together as a team to achieve success for each child. To be effective, these teams must abide by the tenets of "good" teaming, such as: face-to-face interactions, shared

goals, use of problem solving to plan and reach decisions, share and allocate resources, and perform evaluation.

Fourth, "Coordinated Planning is Dependent upon Shared, Discipline-Free Goals." Each student's program is based on student-centered priorities as identified by the family and the student and valued life outcomes. Goals and planning are not selected based on what is valued by professionals from various disciplines. The program belongs to the child, not to the professionals.

Fifth, "Using Problem-Solving Methods Improves the Effectiveness of Educational Planning." A process that is known by everyone is necessary to make important decisions about a student's individualized program and the services that support such a program.

Sixth, "Special Education is a Service, Not a Place." Special education means specially designed instruction whose delivery is not dependent upon placement.

B. Description of the Project

The design of the project included four major approaches to completion of the tasks and activities, including: (a) the Advisory Council, (b) technical assistance, (c) training, and (d) family support. During the first year services were provided directly to children birth to three years of age as directed by the federal priority (services to "unserved children"). During the following years services to children of this age were through technical assistance, training, and family support because Vermont was implementing its Part H plan which provided direct services to these children.

Services provided through the Vermont project were available to any young child or student on the Vermont Census of Students with Deaf-Blindness. Families, and educational and related service providers were made aware of the services each year through dissemination of project objectives and activities in a variety of media: state newsletters (e.g., *I-Team News*, ACP, CARC), brochures, public service announcements, announcements at meetings (e.g., SDE, Advisory Council, DD Council, VABVI, Parent-to-Parent, Part H Regional Teams, Children with Special Health Needs Advisory Council), and letters to parents.

Services were acquired through project staff via three access options: a) State I-Team, b) SDE Special Education Unit, and c) Section 307.11, Vermont State Project. An initial contact with any of the access points brought about entry into the referral mechanism of the project. Once contacted, an Educational Consultant, and any other pertinent individuals, met with the family and educational and related services providers to determine specific needs for technical assistance and training.

An Action Plan was developed to record activities, personnel, format, and timelines for meeting the identified needs. The Action Plan was then implemented by providing, arranging, and/or supporting the services identified on the Action Plan.

The project's support to the provision of special education and related services promoted local capacity for the delivery of services that exemplify "Best Practice Guidelines" set forth in the State Plan. Activities of the project followed the State's Plan for services under Part H and were coordinated with

services provided locally. These activities were conducted through Project staff, Vermont State I-Team, and appropriate local team members.

The design of the project lent itself to a major goal of the project, that is, working in a meaningful way with educational and related service providers and families to develop and implement an effective educational program for students with deaf-blindness. The key was mutual adaptation of professionals and parents in order to, as a team, reassemble their skills to produce an individualized, comprehensive educational program training. In cooperation with the I-Team, the Statewide Systems Change Project and the Transition Systems Change Project at the University Affiliated Program of Vermont, Regional Part H Teams, and the Vermont State Department of Education, the Vermont project sought to expand and clarify exemplary practices.

Project goals and objectives were implemented through specific tasks and activities completed by project staff, the I-Team, and child-specific teams. The Project Milestones chart shows these activities in a task-person-timeline format. **(See Appendix A).**

These activities were conducted by and through the State of Vermont I-Team which provides intensive special education supports. The I-Team is a statewide collaborative consultation, training and technical assistance team which is supported by the Vermont Department of Education. Each of five regions in Vermont is serviced by a regional team consisting of a Regional Educational Consultant, who is also the regional team coordinator and a Family Resources Consultant. These regional teams are supported by a Statewide team of individuals with expertise in a variety of areas, in addition to special education, such as deaf-blindness, physical therapy, occupational therapy, communication and behavior, and clinical psychology. Project staff are members of the Statewide I-Team. The Regional Educational Consultant, as the point of entry, receives referral requests for support from any member (including families) of a local team and builds an action plan based on team identified priorities.

The I-Team does not supplant local service providers, but provides a level of expertise that most local resources cannot maintain for only one or a few students with intensive special educational needs, including those with deaf-blindness. The project activities were conducted through this established statewide resource and built local capacity through technical assistance and training for the provision of exemplary services to children with deaf-blindness.

Budget. The budget of the Vermont project reflected a careful analysis of the personnel and operating expenses to carry out the objectives of the project. The budgeted amounts were reasonable and cost-efficient, given the number of persons who directly benefited from the project (i.e., approximately 1,500 people including children and youth with deaf-blindness, their parents and families, their educators and related services providers, other human service providers, and other involved community members).

The budget was used to support: (a) project director (part-time), (b) project coordinator (part-time), (c) consultants (part-time), (d) travel for project personnel, families, educational team members, and advisory council members, (e) materials, equipment, and other resources for the lending library and for technical assistance and training, (f) registration for training activities for

families and educational team members, and (g) operating expenses, such as phone, copying, and mail.

In-kind support was provided for: (a) office space and equipment, (b) salary and travel for project personnel, (c) salary and travel for I-Team personnel, (d) dissemination activities, and (e) product development.

VI. Project Accomplishments/Outcomes & Contribution to Addressing Needs of Children who are Deaf-Blind

A. Accomplishments of the Vermont Project

All tasks as indicated in the objectives and timelines were accomplished. Accomplishments are reported here referenced to each of the eight objectives.

OBJECTIVE 1: To work with, and expand as necessary, an existing interagency advisory council which includes representatives from education, mental health, health, and social services agencies, and the families of students with deaf-blindness.

An interagency Advisory Council of persons interested in services to students with deaf-blindness was first established in response to Vermont's "single state" status. Constituency representation on the Council has evolved over the years to include parents, educational service providers and administrators, related service providers, vocational training service providers, advocates, and consumers.

The Advisory Council's responsibilities were to: review, recommend, and evaluate project activities; to provide various viewpoints; to recommend future directions; and to assist in statewide dissemination of information and resources.

Accomplishments

Our Advisory Council met at least twice each year. One year due to continuing snowstorms, we met once. These meeting dates were: December 14, 1992, November 15, 1993, February 2, 1994, November 3, 1994, May 8, 1995, and November 10, 1995. Agendas for these meetings included such items as: review of project activities, suggestions for activities, discussion of surveys, sharing of resources, actions for dissemination of Census and project information, new Council members, and discussion of activities in conjunction with Transition Project, TRACES, Helen Keller Technical Assistance Center, Perkins School for the Blind, and the Project Directors' Meeting. Advisory Council members regularly received information on resources and activities, and were invited to all training activities. Drafts of materials also were shared with members for their feedback and suggestions, and they were invited to assist in the preparation of workshops and meetings. A follow-up questionnaire was completed by

attending Council members regarding each meeting. The information from these questionnaires was used to plan and improve future meetings.

OBJECTIVE 2: To coordinate the maintenance of the State Census of students with deaf-blindness, through identification of infants, toddlers, and school-aged students, and dissemination of state guidelines, resources and services.

Accomplishments

Each year letters, forms, and brochures were updated, revised, and sent to appropriate persons in order to gather information to update the Vermont Census. Follow-up phone calls to collect missing data were done. Students were added, deleted, and data updated on the Census. Dissemination of information regarding the Census and the project was sent to a wide audience, including: early education programs, neonatal programs, school personnel, health department and mental health personnel, parent support organizations, hospitals across the Vermont border who provide services to Vermont families, the State Transition Project, and Regional Part H Teams. Although the coverage was increased, the number of students on the Census remained about the same each year: Year 1 = 34, Year 2 = 37, and Year 3 = 35.

As new referrals were made, these were followed up and a determination was made as to eligibility and needs.

OBJECTIVE 3: To identify the needs of specific families and service providers, related to the overall state needs and in coordination with the Regional Part H Teams, for children in the unserved population (children from birth through three).

Accomplishments

All of the families of an infant or toddler on the Census had at least one contact annually by phone call or visit to share information on the project and obtain information on needs using a family interests and needs instrument. These initial contacts were followed up with additional phone calls, visits, or mailings to respond to the identified families' needs and desires. Approximately 77% of these surveys were completed.

Service providers' needs were identified through referrals to the project (i.e., I-Team) for training and technical assistance, through workshop evaluations, and other contacts, such as phone calls. Project staff met regularly with the I-Team to share

information, identify needs, and initiate planning for coordinated services to infants and toddlers with deaf-blindness.

All service providers also received information on project services and activities. Additional mailings were made in Years 2 and 3 to actively solicit referrals from service providers and families for technical assistance, training, and family support. All of the case managers for these infants and toddlers received such information.

OBJECTIVE 4: To provide special education and related services to unserved children through support of services such as diagnosis and evaluation of students at risk of deaf-blindness, family supports, and preparation of a coordinated plan of service.

Accomplishments

Each year, 100% of the families and service providers received at least one contact, at least three mailings of current information and newsletters, and at least three mailings of training activities. Through the referral process individualized technical assistance was provided to the student, family, and team.

Services provided were technical assistance, training, direct service and support related to: team coordination and planning, program planning, functional vision assessment, positioning, supervision of paraprofessionals, family support, family advocacy, transportation, materials and equipment, integrated related services, and dissemination of books, articles, and videotapes.

Because Part H services were in place for these children beginning October, 1993, the Project ceased providing direct services to this population. We continued to offer and to provide through referral request technical assistance, training and family support related to these children.

OBJECTIVE 5: To identify the needs, related to the overall state needs, of specific families and service providers of school-aged children and youth with deaf-blindness for on-site technical assistance and training.

Accomplishments

The needs related to families of school-aged children and youth with deaf-blindness were identified in the same way as needs of families and service providers of children birth through three. Families were served through the referral process, by personal contact, and through training and supports identified through surveys. (Also, see Accomplishments for Objective 3.)

Vermont has an active Special Education Training Council which advises and assists in developing the Comprehensive System of Personnel Development (CSPD). The Vermont Department of Education's CSPD requires the setting of statewide priorities for training. Each year, the Special Education Training Council sets statewide training priorities to be included within Vermont's EHA-B and H State Plan based upon the input of the council members who represent a broad spectrum of stakeholder groups; and the outcomes of an annual survey of training needs which the Department conducts as part of its CSPD State Plan activities. Training provided through the project was responsive to needs identified through these surveys. The content of training did carry forth the values explicit in the Best Practice Guidelines of the State Plan.

Service providers were identified through the referral process and services were based on specific technical assistance and training needs they identified.

OBJECTIVE 6: To meet the specified needs of families and service providers of all children and youth with deaf-blindness (birth through 22 years), through the support of on-site technical assistance and training action plans which exemplify promising practices for family support and involvement, curriculum development and adaptations, transition planning, collaborative delivery of services, age-appropriate placement, and maximum appropriate inclusion.

Accomplishments

Throughout the project, all students on the Census, their families, and service providers had the availability of technical assistance and training. Families had the availability of support through the use of the referral process. Based upon individual needs, services were designed and provided.

Each year, 100% of the families and service providers received approximately three mailings, three newsletters, and were contacted by phone or visit at least once. Each year educational teams made referrals for individualized technical assistance. The number of these referrals made each year for individualized technical assistance were: Year 1 = 16, Year 2 = 21, and Year 3 = 20.

Services provided related to: team coordination and planning, IEP development, lesson planning, functional vision assessment, functional hearing assessment, positioning, supervision of paraprofessionals, family support, family advocacy, integrated related services, equipment and communication devices, and transition. Staff from this project and the Statewide Transition Project met to initiate coordinated planning for young adults with deaf-blindness. Staff also met with Parent-to-Parent of

Vermont and Part H Regional Parents to initiate coordinated planning for infants and toddlers.

OBJECTIVE 7: To identify the needs, related to the overall state needs, of families and service providers for regional and statewide training.

Accomplishments

The needs related to training were identified in the same way as other needs of families and service providers. In addition, needs assessment data compiled through the state's CSPD plan was utilized in determining regional and statewide training needs. **See Accomplishments for Objective 3.**

OBJECTIVE 8: To meet the specified needs of families and service providers through the support of regional and statewide training action plans which exemplify promising practices for family support and involvement, curriculum development and adaptations, collaborative delivery of services, age-appropriate placement, and maximum integration.

Accomplishments

Training Activities: The number of training activities for each year were: Year 1 = 41; Year 2 = 18; Year 3 = 35. The content of these personnel development activities focused on topics such as: communication, discipline strategies, vision assessment, creative problem-solving, assistive technology, literacy, crisis prevention and management, family support, and effective teaming.

Major statewide workshops/institutes were co-planned and co-sponsored with other projects and state agencies. For all training activities, the registration fee and transportation of family members was supported by the Vermont project. See Appendix B for a listing of all training activities.

Collaboration with other Projects/Programs. To facilitate the effective and efficient use of resources, collaboration and coordination with other projects and programs at The University Affiliated Program of Vermont and other agencies and programs was necessary. Projects and activities funded from other sources and administered through and coordinated with the project activities make more expertise available to school districts. Collaboration and coordination occurred with:

1. The Vermont State I-Team. The purpose of this team is to provide technical assistance and professional development to

educational personnel and families of children with deaf-blindness (vision and hearing disabilities), ages birth - 22 years; and to other students with significant disabilities. Through the I-Team referral process students on the Census received services.

2. **TRACES**. (Teaching Research Assistance to Children and Youth Experiencing Sensory Impairments - Oregon). The purpose of this nationwide federal project is to provide technical assistance nationally to service providers to improve the quality of life and services for persons with deaf-blindness and their families. Based on identified state needs, the I-Team and the State Deaf-Blind Project worked with national consultants to arrange and deliver technical assistance, training, and dissemination activities in Vermont.
3. **Family, Infant, Toddler Project Early Intervention Program for Infants and Toddlers with Handicaps - Part H**. The I-Team was involved with Part H through participation on the Interagency Coordination Council by Ruth Dennis, an I-Team member, through technical assistance to infants and toddlers, and through involvement in the development of regional plans.
4. **Project L.I.F.E.** (Lifelong Innovations For Education), 1991-94, (USDOE 84.025F). The purpose of this three-year project was to develop and test an innovative, educational best practice-based approach for improving the quality of life. Vermont was one of five states participating in this national project administered by The University Affiliated Program of Vermont, The University of Vermont.
5. **Crisis Prevention and Management Training (CPM)**. The purpose of Crisis Prevention and Management Training is to increase the capacity of every school community to humanely and effectively prevent and respond to school crisis. CPM training focuses primarily on preventing and supporting individuals through behavioral crisis. It also provides general information and awareness on responding to medical/health emergencies, death/suicide and natural disasters.
6. **BEST** (Building Effective Supports for Teaching Children with Behavioral Challenges) is a collaborative effort of the Department of Education and University Affiliated Program. Its purpose is to build local school and regional capacity for meeting the needs of students who exhibit challenging behaviors by providing technical assistance and training in the planning and implementation of school-based programs that focus on four broad areas: Educational Opportunities and Options, School Culture and Environment, Family/School/Community Collaboration, and Organization and Resources. Through this systems approach it is intended that "school communities" (in the broadest definition of this term) will be better able to prevent and respond to challenging student behavior.

7. Advisory Councils, Task Forces, Committees:

- ◆ AAC Project Advisory Council
- ◆ Infant-Toddler Project
- ◆ Addison County Collaboration Project
- ◆ Parents Supported Group of Addison County for Children with Autism
- ◆ Lamoille Family Center
- ◆ OT-PT Task Force
- ◆ CSHN Advisory Council
- ◆ CSHN Program for Communication and Hearing Advisory Council
- ◆ MS Society of Vermont and Family Support Group
- ◆ State Interagency Team
- ◆ VT State Early Childhood Work Group
- ◆ Franklin County Early Childhood Advisory Board
- ◆ Swanton CARES
- ◆ New England Regional Early Intervention Faculty Training Institute
- ◆ Literacy Coalition for People with Developmental Disabilities
- ◆ Facilitated Communication Network
- ◆ ACP Board
- ◆ AT Project
- ◆ VCDR Steering Committee
- ◆ CARC Board
- ◆ Paraeducator Project Advisory Council
- ◆ Early Intervention Advisory Board

VII. Challenges and Resolutions

There were no significant problems or deviations from the original project proposal - just a few minor ones. One deviation from the initial proposal was related to the pilot project proposal. The objective and activities related to interaction and involvement with the Pilot Project were deleted because that proposal was not funded. Another problem was the amount of time it took to make individual contacts with each family on the Census. This did delay (but not beyond the identified due date) total compilation and reporting of the survey information, but did not impact on the provision of services around individual students.

Due to the change in status of Part H programs in the state, after Year 1 we were no longer permitted to provide direct services to children birth through 3 years through this project. This necessitated a change in budget categories which was approved for those allocated funds.

VIII. Evaluation Findings

A. General Findings

- a. To accomplish all this, with the resources, we needed more time in each day!
- b. We needed to allow more time for individual family contacts and for people to return surveys and feedback.
- c. A combination of formal and informal methods of inquiry were needed in family needs assessments to allow for different preferences of responding modes.
- d. Interagency coordination and collaboration was a challenge in that Part H Programs were engaged in the beginning stages of developing their services and networks.
- e. Given the scope of the project and the funding amount, we could not have accomplished what we did without collaboration and coordination with other projects and agencies.
- f. Working (and playing) with a team of very competent people is absolutely necessary.

B. Specific Findings (Specific findings also are noted in Section VI. Accomplishments.)

- a. All families of children on the Census were contacted at least twice per year by a person associated with the Vermont project.
- b. All service coordinators/case managers of children on the Census were contacted at least once per year about the project activities.
- c. All families and service providers received at least three mailings each year about new resources, project activities, and activities outside Vermont.
- d. All Advisory Council members received at least five mailings each year about project activities, proposals for feedback, and requests for ideas, assistance, and so forth.

IX. Project Impact

A. Products

1. Brochure on Project and Census
2. Census Forms
3. Family Needs and Interests Instrument
4. Article Review Form
5. Resources Listing
6. Videos of all training activities

B. Dissemination Activities. A lending library was maintained for the use of families, school personnel, medical personnel, and others.

1. Acquired new resources throughout the three years of the project.
2. Updated Resources List monthly and maintained up-to-date Resources List.
3. Listed new resources in each I-Team News.
4. Sent project brochures to: Vermont special education administrators, superintendents, Parent-to-Parent, Vermont Parent Information Center, State Department of Education, Vermont Association for the Blind and Visually Impaired, Vocational Rehabilitation for the Blind, Vocational Rehabilitation for the Deaf, State consultants for the deaf and hard of hearing, families and educational teams of children with deaf-blindness.
5. Checked out 225 library resources (140 videos, 85 written materials).
6. Sent I-Team News to: Vermont special education administrators, superintendents, Parent-to-Parent, Vermont Parent Information Center, State Department of Education, Vermont Association for the Blind and Visually Impaired, Vocational Rehabilitation for the Blind, Vocational Rehabilitation for the Deaf, State consultants for the deaf and hard of hearing, families and educational teams of children with deaf-blindness, and others.

C. Publications

1. Vermont I-Team News. This newsletter was published three times each school year. Articles related to deaf-blindness, the Vermont Project, and resources were included in every newsletter.
2. Project staff and associates published articles in referred and unreferred journals, and published one book. (See Appendix C for publications.)

D. Implications of Findings on the Field

The Vermont project through its statewide and nationwide connections impacted students with deaf-blindness, their families, and service providers in and outside of Vermont. Through its collaboration and coordination with other projects and agencies, impact was extended to other students with significant disabilities, their families, and service providers.

The connection with the University Affiliated Program of Vermont (University of Vermont) provided a conduit for sharing expertise, resources, and state-of-the-art practices from national and state perspectives. The Vermont project was able to assimilate and implement researched practices to assist in bringing about necessary changes in our schools and communities, while at the same time learning from and using the expertise of school personnel and families.

The structure of the Vermont project provided parity for all children with deaf-blindness in Vermont. Where a student lived and attended school did not determine involvement with the state

project. Creativity, connectedness, flexibility, and spontaneity were essential attributes to the viability of the project. The connection to the Vermont I-Team as an established statewide technical support assistance and training service delivery model enabled project service recipients to have a wealth of experienced personnel available drawing upon the fields of education and related services broadly while building expertise and knowledge related to deaf-blindness.

Through publications, presentations, technical assistance consultations, and action research, the Vermont project added to the ever-changing and ever-growing array of practices for increasing the quality of life for students with deaf-blindness.

X. Where Further Information Can be Found

Additional information on the Vermont Project can be found through ERIC, in the publications listed in section IX, and by contacting Chigee J. Cloninger, project director and Susan W. Edelman, project coordinator.

XI. Assurance Statement: Report Sent to ERIC

The Final Report of the Vermont Project for Children and Youth with Deaf-Blindness, 1992 - 1995 has been sent to ERIC.

APPENDIX A
PROJECT MILESTONES

Appendix A
PROJECT MILESTONES
 (Numbers in parentheses refer to objectives)

PRE-GRANT

Task	Date Initiated	Date Completed	Person(s) Responsible
Inform members of Advisory Council of funding (1)	Notification of funding received	9/92	Director, Coordinator

YEAR 1
(October 1, 1992 - September 30, 1993)

Task	Date Initiated	Date Completed	Person(s) Responsible
Arrange, conduct Advisory Council meeting: Project orientation (1)	10/92	11/92	Director, Coordinator
Refine materials, procedures, and Plan of Action (3,4,6,7,8,9)	10/92	12/92	Director, Coordinator, I-Team members
Maintain Census (2)	10/92	9/93	Director, Coordinator, SDE Representative
Contact parents, LEAs, Health Dept., Part H teams	10/92	9/93	Coordinator
Update or complete Census Form	10/92	9/93	Coordinator
Disseminate information statewide (2)	10/92	2/93	Director, Coordinator, I-Team members
Assess needs of infants, toddlers and their families (3, 4, 7)	10/92	9/93	Director, Coordinator, I-Team members
Provide services for infants, toddlers not served by LEAs (4)	11/92	9/93	Director, Coordinator, I-Team members
On-site Training and TA (3, 6, 7, 8, 9)	11/92	9/93	Director, Coordinator, I-Team members
Assess Training and TA needs (3, 6, 8)	11/92	9/93	Director, Coordinator, I-Team members
Prioritize areas of need (3, 6, 8, 9)	11/92	9/93	Director, Coordinator, I-Team members
Develop Plan of Action (4, 7, 9)	11/92	9/93	Coordinator, I-Team members
Implement Plan of Action (4, 7, 9)	11/92	9/93	Coordinator, I-Team members
Evaluate Plan of Action and make necessary revisions	1/93	9/93	Coordinator, I-Team members
Regional and Statewide Training (8)	2/93	6/93	Director, Coordinator
Plan based on assessed needs	2/93	4/93	Director, Coordinator
Conduct training sessions	2/93	6/93	Director, Coordinator, I-Team members
Arrange and Conduct Advisory Council meeting: Review project progress (1)	3/93	4/93	Director, Coordinator
Evaluate Implementation and impact of project	1/93	9/93	Director, Coordinator

**YEAR 2
(October 1, 1993 - September 30, 1994)**

Task	Date Initiated	Date Completed	Person(s) Responsible
Arrange, conduct Advisory Council meeting: Project orientation (1)	10/93	11/93	Director, Coordinator
Refine materials, procedures, and Plan of Action (3, 4, 5, 6, 7, 8)	10/93	12/93	Director, Coordinator, I-Team members
Maintain Census (2)	10/93	9/94	Director, Coordinator, SDE Representative
Contact parents, LEAs, Health Dept., Part H Teams	10/93	9/94	Coordinator
Update or complete Census Form	10/93	9/94	Coordinator
Disseminate information statewide (2)	10/93	2/94	Director, Coordinator, I-Team members
Assess needs of infants, toddlers and their families (3, 4, 6)	10/93	9/94	Director, Coordinator, I-Team members
Provide services for infants and toddlers not served by LEAs (4)	11/93	9/94	Director, Coordinator, Staff, I-Team members
On-site Training and TA (3, 5, 6, 7, 8)	11/93	9/94	Director, Coordinator, I-Team members
Assess training and TA needs (3, 5, 7)	11/93	9/94	Director, Coordinator, I-Team members
Prioritize areas of need (3, 5, 7, 8)	11/93	9/94	Director, Coordinator, I-Team members
Develop Plan of Action (4, 6, 8)	11/93	9/94	Coordinator, I-Team members
Implement Plan of Action (4, 6, 8)	11/93	9/94	Coordinator, I-Team members
Evaluate Plan of Action and make necessary revisions	1/94	9/94	Coordinator, I-Team members
Regional and Statewide Training (7)	2/94	6/94	Director, Coordinator
Plan based on assessed needs	2/94	4/94	Director, Coordinator
Conduct Training Sessions	2/94	6/94	Director, Coordinator, I-Team members
Arrange and Conduct Advisory Council meeting: Review project progress (1)	3/94	4/94	Director, Coordinator
Evaluate implementation and impact of project	1/94	9/94	Director, Coordinator

**YEAR 3
(October 1, 1994 - September 30, 1995)**

Task	Date Initiated	Date Completed	Person(s) Responsible
Arrange, conduct Advisory Council meeting: Project Orientation (1)	10/94	11/94	Director, Coordinator
Refine materials, procedures, and Plan of Action (3, 4, 5, 6, 7, 8)	10/94	12/94	Director, Coordinator, I-Team members
Maintain Census (2)	10/94	9/95	Director, Coordinator, SDE Representative
Contact parents, LEAs, Health Dept., Part H Teams	10/94	9/95	Coordinator
Update or complete Census Form	10/94	9/95	Coordinator
Disseminate information statewide (2)	10/94	2/95	Director, Coordinator, I-Team members
Assess needs of infants, toddlers and their families (3, 4, 6)	10/94	9/95	Director, Coordinator, I-Team members
Provide services for infants, toddlers not served by LEAs (4)	11/94	9/95	Director, Coordinator, I-Team members
On-site Training and TA (3, 5, 6, 7, 8)	11/94	9/95	Director, Coordinator, I-Team members
Assess training and TA needs (3, 5, 7, 8)	11/94	9/95	Director, Coordinator, I-Team members
Prioritize areas of need (3, 5, 7, 8)	11/94	9/95	Director, Coordinator, I-Team members
Develop Plan of Action (4, 6, 8)	11/94	9/95	Coordinator, I-Team members
Implement Plan of Action (4, 6, 8)	11/94	9/95	Coordinator, I-Team members
Evaluate Plan of Action and make necessary revisions	1/95	9/95	Coordinator, I-Team members
Regional and Statewide Training (7)	2/95	6/95	Director, Coordinator
Plan based on assessed needs	2/95	4/95	Director, Coordinator
Conduct Training Sessions	2/95	6/95	Director, Coordinator, I-Team members
Arrange and Conduct Advisory Council meeting: Review project progress (1)	3/95	4/95	Director, Coordinator
Evaluate Implementation and impact of project	1/95	9/95	Director, Coordinator
Disseminate Project description information statewide at parent/professional conferences and through various media	10/94	9/95	Director, Coordinator
Disseminate project information regionally at parent/professional conferences and through various media	10/94	9/95	Director, Coordinator
Arrange/conduct Advisory Council meeting: Review project results, products, etc. (1)	4/95	6/95	Director, Coordinator
Review and summarize evaluation data and impact of project. Write final report.	7/95	9/95	Director, Coordinator

APPENDIX B
PROJECT TRAINING ACTIVITIES

YEAR 1

Training Activity	Location	Date	Participants
CPS, Strategies for Inclusion	Washington, DC	3/28/93	3
C.O.A.C.H.	Newark, DE	8/10 & 11/92	20
Project LIFE	Johnson, KS	3/15/93	40
CPS	Johnson, KS	3/16/93	16
Project LIFE, Project Directors' Meeting	Tyson Corners, VA		
Project LIFE/TASH NE	Providence, RI	4/30/93	11
C.O.A.C.H.	Hampton County, MA	5/7 & 18/93	26
C.O.A.C.H.	MN	11/16 & 17/92	60
APTA-Pediatrics Section, C.O.A.C.H.	NE Region	9/11 & 12/93	96
Inclusive Education & Related Services	UVM	10/5 & 12/92	15
EDSP 5-Vision & Hearing Disabilities	UVM	10/6/92	21
DSI State Project and Transition	Burlington	1/4 & 2/8/93	2
EDSP 5-Family Perspectives	UVM	2/2 & 3/11/93	27
EDSP 301-Parents as Partners	UVM	3/8/93	
Local Part H Model Development	Burlington	3/3/93	1
Seating & Positioning/Collaborative Consultation	UVM	3/4/93	41
Teamwork/CS & D Class (Interactive TV)	Burlington	3/4/93	42
TRACES Site Visit	Milton	3/10/93	1
DSI & I-Team/Parent to Parent	Middlebury	3/20/93	8
I-Team Services/Augmentative Communication	Montpelier	3/23/93	9
EDSP 295-4-Student's with Significant Disabilities	UVM	1/13, 20, 27 & 2/10/93	27
EDSP 295-5 -Accommodating	UVM	3/31/93 4/7, & 14/93	26
Integrated Services	Burlington, Essex, Middlebury, Montpelier	10/12 & 13/93	10
EDSP 295-Serving Students with Multiple Disabilities in Inclusive Settings	Windham, NE Westminster	9/24/92 10/8, & 16/92	5
EDSP 295-CS & D, Augmentative Communication/Serving Students with DSI	UVM	11/16/92	6
CPS	Southwest VT	11/24/92	18
CPS	Enosburg	12/10/92	25
CPS Family-Centered Institute	Stowe	1/7/93	17
CPS for Vermont Hearing Consultants	Randolph	5/13/93	7
CPS Family-Centered Institute	Burlington	6/10/93	21
Collaborative Teaming	Burlington	10/30/92	37
Importance of Families-Instructional Assistant Course	Pittsford	2/25/93 3/4/93	27
Importance of Families-Instructional Assistant Course	Milton	3/3/93	26
Importance of Families -Instructional Assistant Course	Winooski	3/8/93	26
EDSP 302-Physical & Developmental Characteristics	UVM	1/93 - 5/93	14
I.S.A.V.E.	UVM	11/13/92	15
Auditory Integration Training	Burlington	5/3/93	30
LIFE/C.O.A.C.H. Focus Forum	UVM	6/2/93	10
I-Team Winter Institute - Creating Courageous Children	Bolton Valley	3/11/93	150
Living a Good Life Despite Blindness	Burlington		50
I-Team Winter Institute - A Study of Communication: Broadening the Scope	Bolton Valley	3/11, 12 & 13/93	150

YEAR 2

Training Activity	Location	Date	Participants
Instructional Assistants Training (9 Sessions)	Montpelier	1/94-4/94	32
O & M Workshops (2 sessions)	Colchester Burlington	5/13/94 5/20/94	51
Literacy & Communication Institute	Burlington	3/13/94 3/14/94	225
Severe Disabilities Course	Burlington	1/94 - 5/94	8
Physical Development	Burlington	3/8/94	60
Sensory Disabilities	Burlington	10/19/93 3/15/94	115
Early Childhood	Swanton	5/7/94	160
Early Intervention	Burlington	5/16/94	14
Evaluation/Research on Related Services	Randolph	6/2/94	20
Intervention Planning	Colchester	4/25/94	6
Intervention Planning	Milton	11/19/93	10
Sensitivity Scotopic Syndrome	Burlington	5/2/94	19
New Approaches to Family Support	Waterbury	11/3/94	3
Part H Training	Burlington	9/3/93	6
Transdisciplinary Training	Burlington	9/13/93	18
Creative Problem Solving	Burlington	11/10/93	10
Students With Dual Sensory Impairments	Burlington	11/29/93	7

YEAR 3

Training Activity	Location	Date(s)	No. of Participants
Literacy Forum	Barre	2/3/95	40
EDSP 302	UVM/CVC	Spring 95	16
D-B State Project & I-Team	Health Dept., Burl.	3/17/95	15
Curriculum Overlapping	Indiana	4/8/95	40
COACH	Des Moines, IA	5/10 - 5/12/95	32
COACH	Topsail, NC	6/26 - 6/28/95	50
EDSP 5 Paraprofessional Training.	St. Albans, VT	3/14/95	23
Northwest VT Literacy Conference	Sheldon Elem.	5/6/96	250
Governor's Prevention Conf.	Burlington, VT	5/9/95	1000
School Based Services, PT Class	UVM	10/7/94	50
Sign Language for Families	Rutland CCV	10/27, 11/3, 11/10, 11/17/95	6
EDSP 295-5	St. Albans Elem.	3/13/95	24
EDSP 5	UVM	2/28/95	60
CS & D - CP & Seating	UVM	3/8/95	28
Behavior As Communication	Wells River, VT	3/20/95	30
Inclusion	Barnet, VT	11/11/95	20
IA Training Program	Danville, VT	10/26 - 4/5/95	23
Assistive Technology	UVM	12/5 - 12/6/94	13
Reflections of Culture: Issues That Impact Family Interview & Program Development Strategy	Atlanta, GA TASH	12/8/94	40
Choosing Options & Accommodations for Children (COACH): Quantitative & Qualitative Data on Its Use and Impact	Atlanta, GA TASH	12/9/94	100
COACH	Lacey, WA	8/8 - 8/12/94	18
COACH/Teaming for Deaf-Blind	MD	7/12 - 7/15/94	21
COACH	Lafayette, LA	9/29/94	100
Students with DSI (CS & D 295)	UVM	10/5/94	
DSI (EDSP 5)	UVM	10/20/94	60
Teaming & COACH Follow-Up	College Park, MD	11/4/94	27
Adaptations for Inclusion	Wye Ctr., MD	7/11-7/14/95	
Inclusion of Students with Deaf-Blindness	Sand's Point, NY	7/16-7/20/95	
Introduction to COACH	Burlington, VT	11/8/94	40
COACH	St. Paul, MN	1/30-1/31/94	50
Family Perspective	St. Johnsbury & Burlington	8/30/94 & 9/27/94	40
Family Perspective & Teaming	Hartford	11/3/94	20
Technology for Children with Disabilities	UVM	12/5-12/6/94	20
Family Support	Barre	Winter 94	10
How To Make Your Team Behave and Still Have Fun	Atlanta, GA TASH	12/10/94	62

APPENDIX C

PRODUCTS
BY VT DEAF-BLIND PROJECT,
I-TEAM MEMBERS AND ASSOCIATES

APPENDIX C

PRODUCTS

by Vermont Deaf-Blind Project, I-Team Members and Associates

- Giangreco, M. F. (in press). Effects of a consensus-building process on team decision-making: Preliminary data. Physical Disabilities: Education and Related Services.
- Giangreco, M. F., Cloninger, C. J., Dennis, R. E., & Edelman, S. W. (in press): National expert validation of COACH: Congruence with exemplary practice and suggestions for improvement. *Journal of the Association for Persons with Severe Handicaps*.
- Dennis, R. E., & Giangreco, M. (in press). Creating Conversations: Reflections on Cultural Sensitivity in Family Interviewing. Exceptional Children.
- Cloninger, C. J., & Giangreco, M. F. (1995). Including Students with Deaf-Blindness in General Education Classes, Journal of Visual Impairment & Blindness, 89 (3), pp. 262-266.
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- Giangreco, M. F., Dennis, R., Cloninger, C., Edelman, S., & Schattman, R. (1993). "I've counted Jon:" Transformational experiences of teachers educating students with disabilities. Exceptional Children, 59 (4), pp. 359-372.
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- Edelman, S., Giangreco, M. Cloninger, C., & Dennis, R. (1992). COACH Part 1: *Family Prioritization Interview* (videotape and companion forms). Burlington, VT: University of Vermont, Center for Developmental Disabilities.
- Giangreco, M. Cloninger, C., Edelman, S., & Dennis, R. (1992). *Evaluation of impact process*. Burlington, VT: University of Vermont, Center for Developmental Disabilities.
- Deaf-Blind Posters for Project Directors' Meetings in Washington, D.C.