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ABSTRACT

This report discusses the outcomes of a study that investigated the operation of the Committee on Preschool Special Education (CPSE) in response to the implementation of the least restrictive environment (LRE) mandate for preschool children with disabilities within two selected counties in New York State during the 1994-95, 1995-96, and 1996-97 school years. A total of 45 CPSE school district chairpersons, special education preschool program directors, and CPSE county representatives were interviewed for the study. The study was designed to contribute to the current debate about shifting the burden of costs of preschool special education from counties to local school districts. The report begins by discussing the federal and state legislative background of early intervention services, the development of the CPSE, and CPSE practices. Results of the study are then discussed. Findings indicate that three broadly interconnected factors influenced the implementation of LRE: cost, organization of the delivery system, and state/local context. While cost was discussed more frequently by those interviewed, it was not found to override the importance of the other factors. Appendices contain interview questions, county descriptions selected for the study, major codes identified through interviews, and 1995-96 enrollment data. (Contains 42 references.) (CR)

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# Local Variations in Least Restrictive Environment Placements for Preschool Children with Disabilities: Results of a Pilot Study

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Completed as part of my dissertation study at the State University of New York at Albany in the Department of Educational Administration and Policy Studies

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## INTRODUCTION

The purpose of this study is to investigate the operation of the Committee on Preschool Special Education (CPSE) in response to the implementation of the least restrictive environment mandate for preschool children with disabilities within two selected counties in New York State during the 1994-95, 1995-96, and 1996-97 school years. This study was designed to contribute to the current debate of shifting the burden of costs of preschool special education from counties to local school districts.

### Legislative Background: Federal Level

Disability policy, like policy for other oppressed groups, has both guided and reflected changes in attitudes over time. Over the last century disability policy has evolved from an emphasis on charitable care to an emphasis on medical treatment and rehabilitation to its current emphasis in individual empowerment and civil rights (National Council on Disability, July 26, 1996). Over the past decade, considerable attention has been devoted to the development of federal and state policies that provide universal access to early intervention special education programs in the United States.

With the passage of federal legislation, Public Law (P.L.) 99-457, now the Individuals with Disabilities Education Act (IDEA, Part B), this task was largely completed for children with disabilities between the ages of 3 and 5. IDEA, formerly known as the Education for all Handicapped Children (P.L. 94-142), required states to provide, by 1991,

free, appropriate special education services (FAPE) to all 3- to 5-year olds with disabilities. Any state failing to comply would lose all federal special education funds for preschool children. The impact of prior legislation (P.L. 94-142) on children below school age was limited; Congress stopped short of requiring FAPE for all 3-to 5-year-olds with disabilities (Hebbeler, Smith, & Black, 1991). It appears that the more recent federal legislation was influential in terms of its changing impact on state policy. Whereas only 20 states and territories had preschool special education entitlements in 1986, 51 had such entitlements by 1992 (Smith, 1992). Nationally, the number of preschool children with disabilities, aged three to five, receiving services doubled from 261,000 in 1986 to 528,000 in 1995 (National Council on Disability, 1996).

The framers of P.L. 94-142 carefully included two major provisions supporting their intent to provide for the protection of the civil rights of individuals with disabilities (Stainback & Stainback, 1996). The first provision mandated access to a free and appropriate public education (FAPE) for children with disabilities. (Stainback & Stainback, 1996). The second provision, least restrictive environment (LRE), specified that:

to the maximum extent appropriate, children with disabilities...are educated with children who are not disabled, and that special classes, separate schooling, or other removal of children occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily. (20 U.S.C. Section 1412 (5B)) [emphasis added]

Federal regulations implementing IDEA incorporated this requirement in the definition of least restrictive

environment (34 C.F.R. 300.550). Consistent with federal provisions, the Regulations of the Commissioner of Education in the State of New York defined least restrictive environment to mean that:

the placement of students with disabilities in special classes, separate schools or other removal from the regular educational environment occurs only when the nature and severity of the disability is such that even with the use of supplementary aids and services, education cannot be satisfactorily achieved. (8 NYCRR 200.1x) [emphasis added]

Use of the word when in the federal and state laws above clearly demonstrates that both the U.S. Congress and the State of New York recognize that there will be children whose disabilities preclude a general education placement.

The LRE mandate is a primary consideration when courts are asked to settle disputes between school districts and parents over a proposed special education program. An analysis of all federal and state judicial decisions interpreting IDEA identified the least restrictive environment mandate as the second most contentious issue in special education litigation, accounting for 9.4% of all court cases; New York State was also ranked first, having the highest frequency of judicial decisions in this area (Maloney & Shinker, 1995).

The U.S. Department of Education's 18th Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act (IDEA), released in December 1996, stressed the importance of providing a full continuum of services for children with disabilities. "There is not a single special education setting that benefits all students.

A range of options, tailored to meet the individual needs of all students, continues to be the most effective approach" (Office of Special Education Programs, 1996, p. 8). A full continuum of services can range from more restrictive options such as self-contained centerbased programs, to resource rooms, to less restrictive options such as therapy delivered in a regular classroom.

Public laws are enacted to carry out national policy for the benefit of individual citizens, their communities, and the nation. It has been a long path for society to recognize that early educational experiences can markedly compensate for the impact of developmental delays and disabilities on the functioning and ultimate potential of young children. Services in early childhood special education for children with disabilities have expanded and improved substantially in the past 25 years. The federal government, through legislation, regulation, and a variety of incentives, has played an integral role in this progress. The reauthorization of IDEA on January 7, 1997 by the 105th Congress continued this role and included similar language as in 1990 regarding the least restrictive environment provision (IDEA, 1997).

#### **Legislative Background: State Level**

In order to continue receiving federal monies, New York State was required to have in place, by 1991, a guaranteed free appropriate public education for each preschool student with disability. Chapter 243 of the Laws on 1989, which created Section 4410 of the Education Law relating to

preschool special education, transferred responsibility for the provision of special education services to eligible children with disabilities, ages three and four, from the Family Court to school districts (New York State School Boards Association, Inc., 1996). N. Y. Education Law 4410 is the primary state statute governing the education of New York's children with disabilities resulting in this state's compliance with the IDEA, for children with disabilities ages three to twenty-one. Consistent with the new State legislation, the Board of Regents promulgated amendments to the Regulations of the Commissioner of Education, Part 200, to establish statewide implementation standards for preschool programs and services. It should be noted that from July 1, 1989 through June 30, 1991, services were provided to all eligible preschool children with disabilities in New York State only to the extent that programs were available (The New York State Education Department, 1995).

In the 1989 Federal Monitoring Report, based on the review of special education in New York State by the United States Department of Education, the New York State Education Department was cited for failure to ensure that students with disabilities were afforded educational opportunities that included interaction with their nondisabled peers (VESID, 1994). This report also found that "a continuum of services was not available in many local school districts and regions of the state and that the federal provisions regarding least restrictive environment were not being implemented consistently across the state" (VESID, 1994, p. 4). Following the 1989 findings, the New York State Board of

Regents developed a statewide action plan, referred to as the Least Restrictive Environment Implementation Policy Paper, that more clearly defined its position on the concept of implementation of educational services in such a setting, as well as summarizing the personnel and parent development, technical assistance, and other supports needed to implement the LRE requirement (VESID, 1994).

### Research on Least Restrictive Environment

Professional, parents, and researchers have become increasingly aware of the difficulties of translating policy initiatives defined in P.L. 94-142 and P.L. 99-457 into actual practice (Ballard-Campbell & Semmel, 1981; Winton, 1990). Despite the LRE provisions in these laws, large numbers of children with disabilities continue to be served in predominantly segregated settings more than 25 years after the passage of influential special education legislation (Danielson & Bellamy, 1989; Terman, 1996; The New York State Education Department, 1995). The research on integrated programs has produced relatively clear evidence that integrated programs can benefit children with disabilities, while doing no harm to children without disabilities (Bailey & McWilliam, 1990; Guralnick, 1990, 1997; Lamorey & Bricker, 1993; Odom & McEvoy, 1988; Peck & Cooke, 1983; Strain, 1990). Other research efforts have resulted in a substantial number of empirically validated intervention practices that help in achieving positive outcomes in integrated programs (Guralnick, 1990; Peck, Killen, & Baumgart, 1989; Strain & Odom, 1986). Although the



efficacy and effectiveness of early intervention is supported in research (Peck, Furman, & Helmstetter, 1993) and policy (Division for Early Childhood, 1993), there is limited implementation of early intervention services to support education of young children with and without disabilities in the same classroom. Why has the awareness of potential positive outcomes, nor knowledge of relevant processes for achieving these outcomes, been sufficient to promote widespread and systematic changes in actual practice?

Peck et al., (1993) hypothesize that the relative lack of systematic study of the actual implementation of integrated early childhood programs may reflect the assumption that programs that produce desirable outcomes for children will be implemented and maintained on their pedagogical merits. However, Peck et al., (1993) conclude that this assumption is problematic. Some model programs were successful at the level of child behavior change but not successfully maintained (Peck, Richarz, Peterson, Hayden, Mineur, & Wandschneider, 1989, Barber, Barber & Clark, 1983). More direct study of the problems of implementation is clearly needed.

Results of a mandated state study of the Evaluation and Placement of Children with Disabilities in New York State revealed that "most preschool children with disabilities--nearly three-quarters statewide--were placed in classroom settings (Magi Educational Services, 1997, p. iv). Moreover, 80% of these preschool special classroom placements were in segregated classrooms, that is, classrooms serving only children with disabilities (Magi Educational Services, 1997).

In other words, fewer than one in five special education students were educated in classrooms with their nondisabled peers.

Returning to the focus of this study, a local picture of policy implementation, the pendulum has currently shifted in New York State from a concern about improving services to a greater interest in the costs associated with special education (Petri, 1997; Reed, 1996). At a state level, a 1994 audit by the New York State Office of the Comptroller presents findings of the Education Department's management and oversight of the Preschool Handicapped Education Program (McCall, 1994). Program costs totaled \$298 million for the 26,950 children enrolled statewide in the program during the 1990-91 fiscal year. This represented a cost increase of about \$121 million or 68% from the prior year, attributed mostly to the 55% increase in the number preschool children with disabilities enrolled. This audit found a large proportion of preschool children placed in higher cost, center-based programs. Specifically, 24,816 children were enrolled in center-based programs, at a cost of \$294,044,323. In contrast, only 134 children received itinerant services outside of center-based programs, at a cost of \$3,474,784.

Although the audit purported to be comprehensive, it was criticized for missing information, inaccuracies and methodology concerns (McCall, 1994--Appendix, A; The New York State Alliance for Children, 1994). There has not been a more recent audit in New York by the Comptroller or other state or local agencies of preschool special education programs. Bearing these concerns in mind, with

counties and states each responsible for costs of the program expenses, 40.5% and 59.5% respectively, and the potential exists for a shift of preschool special education costs to local school districts (Reed, 1996), this audit provided an initial analysis of how preschool children are being served in New York State.

In 1995, the New York State Education Department submitted a report to the Board of Regents, Preschool Special Education in New York State, to provide information on the state's preschool special education system. In comparison of the types of programs and services provided to preschool students with disabilities for the 1992-93 and 1993-94 school year, the following trends are noted (The New York State Education Department, 1995). In 1992-93, 84% of services were provided in special classes, the most restrictive option, whereas, in 1993-94, 78% of services were provided in such placements. Comparing 1992-93 to 1993-94, the overall percentage of students receiving related services, the least restrictive option, slightly increased from 12% to 17%.

More recently, the 1996-97 New York State executive budget included several proposals that would substantially change the mandated preschool program for children with disabilities. Of the five related areas of budget facing potential changes--fiscal responsibility, rate setting, speech eligibility standards, summer eligibility, and changing the composition of the CPSE--shifting 20% of the preschool special education costs from municipalities to local school districts received considerable attention (Reed, 1996; Petri, 1997). While the governor of New York proposed

the shift in preschool tuition costs, the State Education Department (SED) called for a gradual but total phase out of the counties' fiscal responsibility over the next three years. Both sides agreed that the oversight of educational services for preschool children with disabilities rests more appropriately with local school districts and SED (Reed, 1996). At this time, the two proposals regarding the shifting of costs remain as reform proposals unless they gain sufficient momentum to return on the 1997-98 agenda.

In summary, this review of the related literature reveals that study of smaller, local studies of preschool special education policy implementation is limited. Therefore, it is important to obtain a clear picture of local implementation of early childhood special education in relation to state and federal mandates.

#### Purpose of the Study

With the legal guarantee of free appropriate services a reality, it seems reasonable to focus greater attention on the actual operations of educational policy at the local level. It is a truism that all policies do not have their intended effects. There are many possible reasons for this; one of the most important for education is the organization of educational governance. Early intervention policy is transmitted from federal to state and state to local levels in a system in which authority and power are dispersed and there are strong traditions of state and local autonomy (Cohen, 1982). Accurate transmission of policy intentions among these levels is at best problematic.

In New York State, local school districts are the "local educational agency" (LEA) which legally governs and has administrative control or direction of special education services for eligible children, aged 3-5 through the Committee on Preschool Special Education (CPSE) (20 U.S.C Section 1401 (a)8). The CPSE, established by the school board, includes: (a) an appropriate professional employed by the school district who serves as committee chairperson; (b) a parent of a preschool or elementary child with a disability who resides in the school district; (c) a professional who participated in the evaluation of the child for whom services are sought; (d) child's teacher, if applicable; and (e) county representative appointed by the chief executive officer of the municipality of the preschool child's residence (Article 89, NYS, Section 4410 (3a)). Local school districts, including the CPSE, are influenced to varying degrees by the mandates, financial incentives, and other policy instruments available to state and federal governments (McDonnell & Elmore, 1987). In pursuing their own goals, some school districts may seek only pro forma implementation of federal and state policies to avoid real change while meeting the letter of the law (Timar, 1989). Even when seeking to comply fully, districts and the CPSE have substantial discretion to implement federal and state policies, often in ways that reflect their own interpretation of laws and regulations as they accommodate local political and fiscal conditions.

How much and in what ways CPSE practices vary from the intentions of federal and state policy can be determined only

by gathering data on local implementation. The collection of data on local practices is a critical issue for local and state education agencies. Moreover, many important aspects of educational practice are difficult to specify and observe, and state education agencies generally lack the staff, time, and money to monitor compliance with state policies regarding even those aspects of education that are relatively easily assessed (Cohen, 1982, Timar, 1989). For example, in New York State, in the case of implementation of the least restrictive mandates, state monitoring is even more difficult because counties, not school districts, are also responsible for the control of special education for children 3-to 5. At this time, school districts do not directly contribute to the costs of preschool special education program; counties contribute 40.5% and State Education Departments contribute 59.5%. Although school districts do not contribute to these costs directly, district residents are affected financially by the preschool special education program through their tax dollars. Therefore, it is important to obtain a clear picture of local implementation of early childhood special education in relation to state and federal mandates.

This study compares local response to the implementation of the least restrictive environment provision for preschool children with disabilities within two selected counties in New York State during the 1994-95, 1995-96, and 1996-97 school years. More specifically, the study answers the following questions:

RQ 1: What is the profile of local implementation of early childhood special education in two selected counties within New York State?

1A: To what extent, if any, are there variations in local progress toward implementation of the least restrictive policy for preschool children with disabilities?

RQ 2: What factors contribute to the understanding of how school districts within the selected counties implement the least restrictive provision for preschool children with disabilities?

2A: What factors are perceived to facilitate the implementation of the least restrictive provision?

2B: What factors are perceived to impede the implementation of the least restrictive provision?

The results of this study are relevant from several perspectives. From a policy perspective, this study contributes to a better understanding of local implementation of the state's Least Restrictive Environment mandate which is of considerable interest (Petri, 1997; Reed, 1996). The field of early intervention has clearly accomplished the task of demonstrating the value and feasibility of integrating preschool children with disabilities into programs with their nondisabled peers (Guralnick, 1982, 1990; Strain, 1990). These have been important research goals, and considerable progress has been made in addressing them in the context of research and model development and demonstration efforts. However, there have been relatively few questions raised about how communities may move from model demonstrations to more widespread implementation of programs that integrate preschool children with and without disabilities (Peck, Richarz, et al., 1989; Salisbury, 1991). This study

contributes to this growing area of research by profiling the local implementation efforts of two counties.

This type of analysis should also be useful to policy makers at the local and state level by identifying factors that key stakeholders perceive as either facilitating or constraining placements according to the least restrictive environment mandates. This study thus identifies important factors that could be duplicated by other counties in the state or addressed by policy makers to ensure further implementation of the least restrictive mandates. Together with similar information from other counties within New York State, the results presented here could be used to evaluate current progress toward important state policy goals.

#### DESIGN OF THE STUDY

The research design of this study is a descriptive, exploratory policy analysis which relies on three data sources. The first set of data is drawn from an adapted interview protocol developed by Hasazi, Johnston, Liggett, & Schattman (1994) approved for use in this study (see Appendix A for interview protocol). The interview instrument collects information specific to what policies constrain or promote placement of preschool children with disabilities in least restrictive environments, identify variations in local progress toward implementation, and discuss implications for educational policy makers. The second set is drawn from placement statistics of preschool children with disabilities from the New York State Education Department's System to Track and Account for Children (STAC) Unit. The third set of data is drawn from business plans of the state approved



preschool special education programs mandated by the State Education Department for the first time. These plans require programs to identify how they will decrease costs and reduce the number of centerbased students by 25%, thus increasing the number of preschool children receiving services in less restrictive settings.

### Interviewee Selection

Four counties were selected using Eberts (1994) typology of New York State Counties and the New York State of Learning: Statistical Profiles of Public School Districts (February 1997). The following criteria was used to select counties for study: population size, percentage rural, number of school districts, and inclusion of two or three more small (other) city school districts (see Appendix B for descriptions of each county). Of the four counties identified, two bordered each other. These two were selected for inclusion in the study and a third was selected for inclusion in the pilot study. The fourth county was not included due to traveling constraints during the interview phase.

For each county selected interviews will be conducted with the following groups:

1. CPSE school district chairpersons;
2. Special Education Preschool program directors;
3. CPSE County representatives.

These three groups are currently involved with preschool special education either in determining eligibility for services or actually providing such services. The total

number of individuals to be interviewed in the two counties is 45.

#### Data Gathering: A Pilot Study

At the time of this writing, the pilot study has been completed and preparations are underway to interview the three groups identified in each of the two neighboring counties. This pilot study was conducted to establish the validity and reliability of the interview protocol. Three CPSE Chairpersons and three special education preschool directors were randomly selected for the pilot study. The CPSE county representative was also included. All seven individuals participated in the pilot study. Five of the interviews were done face-to-face and written consent was obtained for the use of a tape recorder. The remaining two interviews were done by phone and written consent was obtained for the use of a tape recorder. The average length of time for the interviews was 30-minutes, with the shortest being 15-minutes and the longest being 75-minutes.

#### Data Analysis

All interviews were conducted by myself, a doctoral candidate, and the questions were designed to explore factors that contribute to the shaping of a county's approach to the implementation of LRE (Hasazi et al., 1994). All interview tapes were transcribed resulting in 50 pages of transcriptions. All coded interviews were entered into QSR Nudist, a software program used for managing and sorting qualitative data (Weitzman & Miles, 1995). The coded

transcripts were sorted by major codes and potential themes emerged (see Appendix C for list of major codes). To ensure a degree of consistency in the coding process, a goal of 85% agreement was set as a criterion for determining reliability. Another doctoral student experienced in the field of education and a licensed psychologist of a local special education preschool not involved in the pilot study were assigned 10% of the interview transcripts to code independently.

Once the 85% criterion had been met, review of the STAC Unit placement data for the county involved in the pilot study was reviewed with the CPSE county representative. Although the 1996-97 data was not available at the time of the pilot study, the county provided me placement data for the 1995-96 school year. The county informed me that placement data for the years prior was not collected through the use of a computer program and considered unreliable. Comparison of placement data by the county and STAC Unit was consistent for numbers of preschool children with disabilities identified and how they were placed (see Appendix D). Review of business plans submitted to the State Education Department (SED) by preschool special education preschool providers will be conducted in the actual study of the two neighboring counties. At the time of my pilot study, the three preschool programs had submitted business plans to SED for review but no decision was finalized.

## Results

The first question asked of every interviewee was to provide a definition of LRE, as well as explain if their definition differed for preschool children with disabilities. All of the seven interviewees held a similar defined perspective that portrayed LRE as a continuum of service options ranging from more restrictive (e.g. self-contained placements, residential) to less restrictive (e.g. related services and other supports to a child in a regular nursery school setting). Most viewed their definition of LRE in terms of school-age or preschool children with disabilities. Others saw their definition of LRE for preschool children different since there was not Universal Pre-K in New York State and the only option for some children was centerbased programming since the family could not afford nursery school or may not be eligible for Head Start services. For these children, integrated centerbased options were available allowing for education with children without disabilities. All interviewees expressed that the continuum options has to be readily available because "for some children, the self-contained classroom is considered the least restrictive."

Moving beyond the definition of LRE, three factors were identified by the interviewees as being influential in the implementation of LRE. These factors were cost, delivery system, and state/local context.

### Cost

"The money issue is the unspoken agenda at a CPSE meeting."

"Cost is driving this train." "Everywhere you turn the money

issue is brought up and is the driving force of this system." These statements were made by all three groups included in the pilot study. All interviewees identified the cost factor as important to determining how LRE was being implemented.

One main issue discussed was the overall funding of preschool special education. Everyone was becoming aware of the increasing costs associated with special education and the need to control "a beast out of control" remarked one interviewee. One of the requirements of the business plans was explaining how costs would be lowered. While lower costs were supported since everyone interviewed was a tax-paying citizen, there was agreement that the state funding structures did not support less restrictive options. For example, integrated centerbased programs have increased in this county in the last couple of years but the preschool providers interviewed felt that the rates set by SED did not adequately cover the costs of these programs. "The state needs to provide adequate resources so that integrated programs can be successful."

#### Delivery System

In this county, the interviewees felt that there was collaboration between the key decision makers at the CPSE meeting. "Although we all have our own agenda at the table, we do keep the focus on the needs of the child." "Even though the county representative carries the purse strings, the needs of the child are at the forefront." The structure of the CPSE is unique in that there are voting members from different organizations as described earlier.

The interviewees have never been at a CPSE meeting where a formal vote was taken and described a spirit of consensus building and brainstorming to reach a decision. One chairperson commented that several years ago there were not as many options offered by preschool programs and many offered only self-contained programs. In 1995, one of the largest preschool programs began offering integrated 1/2 day programs and many of the preschool children with disabilities attended this program. "The evaluator also wore the hat of the provider so their recommendations typically mirrored their own program options, which often did not include integrated programs." Gradually, other preschool programs applied to SED for approval of integrated classes opening up the less restrictive options for families. One interviewee observed that many of the programs in 1997 now offer a continuum of service options, making the self-serving issue mute. Ironically, the largest preschool program which influenced the increase in integrated programs closed in 1996.

#### State and Local Context

"The message is quite clear now; the mandates from above have trickled down with a thud." During the pilot study, the IDEA reauthorization was not finalized and many of the interviewees looked to this federal legislation as being influential in guiding states in implementing LRE to a greater extent. In 1996, the New York State legislature passed legislation strengthening their commitment to serve preschool children in less restrictive settings. The SED

responded by updating their Least Restrictive Environment Implementation Policy Paper (VESID, 1997). Many of the interviewees viewed state policies on LRE forcing implementation at the local level. The impact of the LRE state policy in this county was varied. Although all interviewees say a marked change in delivery of services in the last couple of years, one of the CPSE chairpersons observed that without Universal Pre-K the majority of children are receiving their services in isolated settings away from the mainstream. Another chairperson noted that unless school districts get in the business of providing preschool special education services the majority of identified preschool children receive services away from their neighborhood school environment.

#### Discussion and Conclusions

The purpose of the pilot study was to determine the appropriateness of the interview protocol and to gain an increased understanding about the factors that contribute to the implementation of LRE policy in one county. Several questions of the interview protocol were reworded to provide further clarification for the interviewee without detracting from the original intent. One question was deleted since it was similar to another question dealing with due process issues. One question was added to provide descriptive information on how the three groups of interviewees described the services identified preschool children were receiving in their area. All interviewees reported to be comfortable

having the interview tape recorded and did not indicate that this method affected the outcome of their responses.

In organizing the findings, three factors were identified in the pilot study that seemed to influence the implementation of LRE: cost, organization of the delivery system, and state/local context. Each factor, however, was broadly connected to each other and often, when an interviewee was responding to a question, the other factors weaved into the discussion. Cost was discussed more frequently by the interviewees. This did not override the importance of the other factors and may be attributed to the fact that the pilot study was conducted during the time when business plans were sent to SED for approval, as well as during the IDEA reauthorization phase and new state legislation which brought preschool special education to the forefront.

The preschool program directors interviewed were concerned with the results of the 1997 Magi Survey since only a few programs in the county were selected for inclusion. Lost in the aggregated data were efforts on the part of preschool programs, district and county personnel to affect change at the local level. There is a need for this data to be collected to show the local variations of policy implementation.



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**APPENDIX A**

## INTERVIEW QUESTIONS:

1. What is your understanding of the definition of Least Restrictive Environment(LRE)? Would your definition of LRE also apply for preschool children with disabilities?
2. How are preschool children with disabilities served in your area?
3. How does state and federal policy influence the implementation of LRE at the local district level?
4. Are there any state or local educational reform efforts going on that are influencing the implementation of LRE?
5. Does the organization of the educational delivery system between county, school district, and provider influence the implementation of LRE? How? Can you give me an example?
6. How does the cost factor influence the implementation of LRE?
7. What influence has advocacy had related to the policy and practice of LRE?
8. What influence has due process had on policy and practice related to LRE?
9. What influence has higher education had on the implementation of LRE?  
\*\*influence of teacher/administration preparation programs?  
\*\*influence of professional organizations?  
\*\*influence of certification requirements?
10. Do values and beliefs influence the implementation of LRE? How? Can you give me an example?
11. How do teachers, administrators, school boards, community members, and/or parents influence the implementation of LRE?
12. Who are the individuals strongly identified with the implementation of LRE at the state/local level? What has been their contribution?
13. Are there other factors we have not mentioned that you see as having been influential in shaping LRE policy and practice in your area?

**APPENDIX B**

County (Municipality) Descriptions Selected for Study

Metropolitan--Upstate Area--Partly Rural

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County A

population size: 259,462

percentage rural: 43.5

number of school districts: 13

number of small (other) city school districts: 2

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County B

population size: 307,647

percentage rural: 41.1

number of school districts: 17

number of small (other) city school districts: 3

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County C (Pilot Study)

population size: 292,594

percentage rural: 14.5

number of school districts: 13

number of small (other) city school districts: 3

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County D (Excluded due to travel constraints)

population size: 250,836

percentage rural: 35.0

number of school districts: 15

number of small (other) city school districts: 3

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**APPENDIX C**

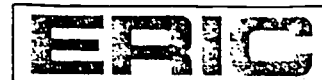
### Major Codes Identified Through Interviews

1. Least Restrictive Environment definition
2. Examples of local LRE models
3. Equal access to services
4. Cost factor
5. Due process
6. Parent advocacy
7. values
8. organization of delivery system
9. federal control
10. state control
11. district control
12. county control
13. community
14. parents
15. regular and special education teachers

**APPENDIX D**

1995-96 Enrollment Data: Pilot Study County

	Related Service	SEIT	Center Based	Self-Contained	Integrated
Program 1	4	0	12	12/100%	0/0%
Program 2	19	38	50	20/40%	30/60%
Program 3	4	2	12	11/92%	1/8%
Program 4	0	0	5	5/100%	0/0%
Program 5	33	11	56	39/70%	17/30%
Program 6	12	6	84	46/55%	38/45%
Program 7	18	1	49	46/94%	3/6%
Program 8	3	1	11	9/82%	2/18%
Program 9	6	2	23	11/48%	12/52%
Program 10	0	2	10	10/100%	0/0%
Program 11	0	0	5	5/100%	0/0%
Program 12	0	0	23	23/100%	0/0%
Program 13	1	0	35	29/83%	6/17%
Program 14	2	0	11	7/64%	4/36%
Program 15	0	0	8	8/100%	0/0%
Program 16	148	1	0	0	0
<b>Total # served: 707</b>	<b>250/35%</b>	<b>63/9%</b>	<b>394/56%</b>	<b>281/40%</b>	<b>113/16%</b>



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