Grading Rubric for Comprehensive Examination in Early Childhood Special Education

1. Program Efficacy Literature

	Unacceptable	Acceptable	Target
CEC 1: Foundations	Description is vague and provides information from limited perspectives	• Description is clearly presented • Information is provided from a variety of perspectives	• Description of is clearly presented and detailed • Impact on families, service delivery, schools, and the community are included. • Information is provided from a variety of perspectives • Description supported by legislation and research supporting evidence-based practice

2. Factors in Child Development

	Unacceptable	Acceptable	Target
CEC 2: Child Development CEC 3: Individual Differences	Description is vague and provides information from limited perspectives	• Comprehensive list of factors is partially described • Both biological and ecological factors are partially included	• Factors are thoroughly described (both biological and ecological) • Many examples are provided that address the importance of both child risk and resiliency

3. Assessment

	Unacceptable	Acceptable	Target
CEC 2: Child Development CEC 3: Individual Differences CEC 7: Instructional Planning CEC 8: Assessment	Description is vague and provides information from limited perspectives	• Description is vague • Description presents most key principles of effective educational programs	• Instruction is based on individual needs/strengths, guided by student progress, and involves the family in the process • Incorporates social skill development • Families are involved and considered equal partners in decisions

4. Family-Centeredness

	Unacceptable	Acceptable	Target
CEC 4: Instructional Strategies CEC 5: Environment/Social Interaction CEC 7: Instructional Planning CEC 8: Assessment	Description is vague and provides information from limited perspectives	• Description of concepts is clearly presented • Evidence of student's ability to translate concepts into practice	• Student discloses thorough understanding of family-centeredness concepts with illustrations • Student presents alternative ideas for translating concepts into options and opportunities for families

5. Organizing/Implementing Programs

	Unacceptable	Acceptable	Target
CEC 4: Instructional Strategies CEC 5: Environment/Social Interaction CEC 7: Instructional Planning CEC 8: Assessment	Description is vague and provides information from limited perspectives	• Definition of inclusion is included. Rationale is included but may lack depth or strategies are superficial without detailed strategies.	• Inclusion is defined for students consistent with current professional practice and policy • A rationale/philosophy for including students with disabilities in regular education settings is described fully with respect to many perspectives (peers, legislation, culture, policy, personal right) • A rationale for using the general curriculum as a basis for education is described fully • Practical strategies are described with examples that demonstrate reasonable, functional, and useful ways to implement inclusion. • Detailed analysis of personal effectiveness in implementing inclusion is provided with clear strategies for "next steps"

Teacher Candidate Name: _Amy Crookes_   Date: _12/4/2010_   Scored By: _[signature]_   Score: _Target (Exceeds)_

Amy Crookes

PASS

Comprehensive Examination Early Childhood Special Education Rhode Island College December 4, 2010

Question One:

Contemporary practice in early childhood special education suggests that the assessment process should include multiple and varied sources of information gathered both from children and their families. A valid and meaningful assessment process includes both quantitative and qualitative information gathered from varied sources and evaluated by a team that includes the family in all decision making processes. It is imperative to provide children with a comprehensive assessment that considers a global view of the child including information about and from the systems that surround the child including family and community. Leveled screenings should be provided to all children in order to evaluate the child's risk and full comprehensive evaluations provided to those children identified through the screening process as most at-risk.

Quantitative assessment tools (typically used to determine eligibility under federal or state law) typically includes standardized assessment tools both norm-referenced and criterion referenced. Norm-referenced assessment tools are used to measure a child's development as compared to other children (the "norm" group) of the same age. Norm referenced assessment tools yield a T-Score and are the validity of norm-referenced assessment tools is highly dependent on the administrator of the tool following a strict scripted administration. Examples of some norm-referenced assessment tools used in early childhood educational assessment are The Mullen Scales of Early Learning, The Bayley, and The Preschool Language Scale. Criterion-referenced assessment tools compare a child's development to a set of developmental milestones and yield a developmental age range. Criterion-referenced assessment tools typically consist of checklists and are administered by observing the child and sometimes parent reports. Examples of some criterion-referenced assessment tools typically used in early childhood educational assessments are Hawaii Early Learning Profile and The Carolina. Both of these types of standardized assessment tools can be used to evaluate child development across developmental domains including cognitive, social/emotional, language, and motor development.

Qualitative assessment (typically used to develop service plans and appropriate interventions) typically contributes to more of a global view of a child's development and takes into consideration the systems surrounding the child including family and community. Qualitative assessment tools are used to evaluate biological, developmental and environmental factors impacting development. Biological factors that should be included in a comprehensive assessment include presence of diagnosed medical conditions, prenatal/perinatal/ post-natal information (birth-weight, APGAR scores, and drug/alcohol exposure during pregnancy), current health information (weight/ failure to thrive information included), and vision or hearing concerns/screenings. Developmental information that should be included in a comprehensive assessment process in addition to standardized assessment tools is a play-based observation (that is completed in the child's natural environment), primary-care physician reports of developmental milestones met or failure to meet, and concerns and observations from parents and

other primary caregivers (grandparent, daycare providers, babysitters). Environmental factors that must be considered in a comprehensive assessment include the presence of risk factors (teen mothers, mother's educational level, abject poverty, and social isolation), current social status, presence of consistent care giving, and abusive/neglectful behaviors demonstrated by parents. Qualitative information can be gathered through varied sources including birth records, physician reports, family interviews, observational notes, care giver reports, and professional observations/reports (educators, psychologists, occupational therapists, physical therapists, and social workers).

In conclusion, contemporary best practice in early childhood special education requires that assessment included information gathered in multiple ways and from varied sources. The process of early childhood assessment is complex and requires all team members to work together to evaluate the information gathered during the assessment process. Families and professionals must work together so that a global view of the child is represented and the assessment process yields valid, meaningful and useful information. The information gathered during a comprehensive assessment can then be used to appropriately determine service eligibility and program planning.

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Question Two:

The concept of family-centeredness represents o continuum of values, beliefs, and practices that influence how early childhood programs are designed and implemented. On this continuum there are four distinct points that represent different views and illustrate how the position effects decision making and engagement of families in the process of early childhood education. The four points are Family-Centered Approach, Family Focused Approach, Family Involved Approached, and Professional Centered Approach. Each of these points will be outlined individually and the values represented by each position highlighted.

Family-Centered Approach: This point on the continuum represents a view that a child's development must be considered along with the systems that surround the child including family and community. It is a total system's approach. The family is in the driver's seat and ultimately makes all decision regarding service. Professionals and families each bring their own strengths and talents to the table and form a working partnership in order to support the child. In this approach intervention begins with the first contact and continues throughout service with the families' strengths, needs, and concerns acknowledged and evaluated frequently. Families have flexibility in services and the goal of intervention is to empower the family in supporting the child. Professionals are viewed as "helpers" and each encounter with the family is seen as an opportunity to "help" the family. Families are supported in accessing community resources and encouraged to become independent in utilizing these resources.

Family-Focused Approach: This point on the continuum represents a view that the child's development is influenced by the systems surrounding the child. It is a whole systems approach. Professionals are seen as the experts and acknowledge that families have important information to contribute. In this approach services begin once intake, evaluation, and eligibility has been determined. Professionals have little contact with families outside of formal meetings and the purpose of intervention is progress. Families are given the opportunity to choose from existing services and family support is provided through information about community resources. Family strengths and abilities are addressed during the assessment process.

Family-Involved Approach: This point on the continuum represents a view that acknowledges child development is influenced by families but the family and community are not addresses in intervention. The professionals take the lead role in this approach and the family is consulted one decisions have been made. Service begins once intake, assessment and eligibility have been completed and the purpose of intervention is to correct deficiencies. Professionals' complete evaluations and the families are given the opportunity to agree or disagree with the findings. Children are then "placed" into existing services with parental permission. Parents are allowed to watch intervention or visit classroom but are not an actively involved. Professionals have little contact with families outside of formal meetings and support is given to families globally through parent meetings.

Professional-Centered Approach: This point on the continuum represents a view that professionals are the experts on children and development and see are "in charge". Parents/families are often viewed as responsible for or contributing to the child's problem and family systems are not addressed. The focus of intervention is treatment and services begin once diagnosis and treatment plans have been completed. The family does not have a role in assessment or choosing service options. Professionals decide what the child needs and how best to meet those needs. Families are responsible ONLY to bring their child to prescribed services. There is typically little to no contact between families and professionals and family needs are not addressed.

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Question Three:

Organizing and implementing a preschool classroom for children with and without disabilities is a multidimensional challenge with no one particular design to follow. There are many elements that are critical to include in creating a responsive program for young children and their families. The following is one idea of how these critical elements can be organized and implemented into a responsive program.

Assessment Components: In order to organize and implement a responsive program for young children and their families a well designed assessment process must be included in the planning process. Initially all students being considered for the program should go through a leveled screening process that is used to determine those children at risk for developmental delay or school failure and those child who are eligible for special education services. In addition, children who have been determined to be at risk and those who qualify for special education services should receive a full and comprehensive assessment to evaluate their strengths, needs, and appropriate intervention services. Families should be included in all assessment processes and evaluation teams should consider the child as well as the child's surrounding systems (family and community) when determining eligibility and services. Assessments should include both quantitative and qualitative information and information should be gathered from multiple and varied sources. In addition, assessment should reflect information gathered in all developmental domains as well as biological and environmental factors.

Formulation of IEP's: The process of developing an IEP for young children should include families and professionals working together to develop short- and long-term goals that acknowledge the child's strengths and address the child's needs. Family strengths, needs, and concerns should also be clearly addressed on the IEP. The IEP should reflect all areas of development and learning objectives should be based on current Early Learning Standards. Parents should ultimately have the final say on what is and is not included on the IEP and goals should be written as a team with all team members present, including parents. The IEP should also clearly identify all program modifications and adaptive equipment necessary to implement individual education plan. IEP's should contain how and when progress will be evaluated. Finally, IEP's developed should include a plan for addressing ongoing concerns and re-evaluation of needs as necessary.

[margin note: and IFSP, not IEP]

Organization of the Classroom Environment: The classroom environment in a responsive program for young children and families should reflect the values of the program. First, the classroom should include highly-qualified professionals working collaboratively with colleagues and families. Families should be welcome in the classroom and be encouraged to participate in classroom activities. The classroom space should be organized to include all students with enough space for adaptive equipment and materials that reflect student interest and backgrounds. Learning centers should allow for exploration and encourage language development, social skill building, and independence. The classroom should also include varied modalities for communication including, but not limited to, pictures, print, spoken language, and signing. Curriculum should be individualized and address common goals for all students

[margin note: Children?]

[margin note: Good Examples]

as well as specific goals for individual students. Current technology should be available and accessible in the classroom.

Integration of Therapists: In planning for a responsive program for young children and their families it is important to include therapists in the classroom and respect their contributions to the program as a whole. As often as possible therapies should take place within the classroom and therapists included as part of the classroom staff. Therapists should be included in curriculum planning, parent communication, and development of daily routines. Therapist should also be provided with the opportunity to incorporate common planning and assessment time.

Options and Opportunities for Families: Families should be presented with flexibility and options in program services. In addition to scheduling (part-time/full time) and service options(home-visiting, individual therapy sessions), families should be provided with opportunities to be involved in parent support groups, classroom field trips, parent nights (social events), and parent education workshops. Parents should also be provided with opportunities to be supported in the community with community field trips, resource guidance/information, and links to social services.

Child Progress Monitoring Strategies: Children's progress in a responsive preschool program should be monitored with ongoing assessment. Child portfolios containing observational notes, developmental checklists, samples of children's work, anecdotal notes, and team reports should be maintained throughout the child's time in the program. In addition, parents/families should have regular opportunities to contribute information regarding children's strengths, needs, and any concerns to ongoing progress monitoring.

Planning for Transitions: Transitions can be stressful for families ~~Absolutely~~ and young children. The transition into as well as out of a responsive preschool classroom must be well planned and thoughtful. Families should be included in every step of the transition process and a clearly defined procedure should be in place. A timeline, including all transition activities should be developed and the person responsible for each task should be determined. All evaluations and assessments should be completed. Paperwork should be complete, on-time, and in place before transition takes place. Also, any adaptive equipment or program modifications should be ready when the family arrives at the new placement. Families and children should have the opportunity to visit proposed placements and revisit new placement once decisions have been made. It is important to prepare the child for transition by incorporating a social story, countdown, or schedule for transition. The child should also have the opportunity to meet his/her new teacher and become familiar with the new environment. Finally, all of parents' questions and concerns should be addressed before the transition takes place.

In conclusion, organizing and implementing a preschool classroom for children with and without disabilities is a complex challenge. The important thing to remember when deciding which elements to include and how best to attend to these elements is, that the early educational experiences of children and families are important. The experience should be inclusive, welcoming and positive for all families.