Guidelines to Support the Early Intervention Process:

Inclusion

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INCLUSION

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ABOUT THE GUIDELINES

This guide for Early Intervention is designed to give the reader information quickly and succinctly and includes multiple resources to secure further information and material. The guidelines include or refer the reader to legal requirements, suggest quality practices, and clarify activities related to inclusion.

HOW TO USE THE GUIDELINES

These guidelines are to be used in conjunction with Pennsylvania's Approach to the Delivery of Early Intervention Services as well as the following regulatory documents which can be accessed through the Pennsylvania Training and Technical Assistance Network (PaTTAN) web site at www.pattan.net:

Federal Law	
Individuals With Disabilities Education Improvement Act of 2004	
State Law	
Pennslvania Act 212 of 1990 Early Intervention Services System Act	
Pennsylvania Regulations	
0-3	3 to Age of Beginners
Pennsylvania Early Intervention Services, Chapter 4226	Special Education Services and Programs, State Board of Education Regulations, Chapter 14

Other useful documents related to inclusion include:
- Division of Early Childhood (DEC) of the Council for Exceptional Children (CEC) Policy Statement on Inclusion available at www.dec-sped.org
- National Association of the Education of Young Children (NAEYC) Policy Statement on Inclusion available at www.naeyc.org

Because the intent of the Guidelines is to provide the reader with an overview of the early intervention process, the margins may include references to supporting sources of information such as regulatory citations and definitions. These are identified throughout the Guidelines with the following icons:
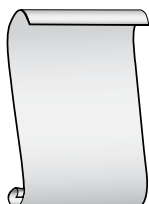
IDEA 2004   ACT 212   Chapter 4226   Definition

Early Intervention Services

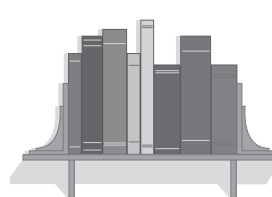The reader should make every attempt to stay current with practices for young children. Recommended resources include:

- Circle of Inclusion
  http://www.circleofinclusion.org
- Departments of Education and Public Welfare, Office of Child Development and Early Learning (OCDEL)
  www.pde.state.pa.us/early_childhood/
- Pennsylvania KEYS (includes PA Key, Regional Keys, Community Engagement Groups, Keystone STARS, and links to PDE/DPW Child Development and Early Learning
  www.pakeys.org
- Family-Guided Approaches to Early Intervention Training and Services (FACETS)
  www.parsons.lsi.ku.edu/facets
- National Early Childhood Technical Assistance Center - Keys to Natural Environments and Inclusion
  http://www.nectas.unc.edu/inclusion
- Frank Porter Graham Center
  www.fpg.unc.edu
- Pennsylvania Training and Technical Assistance Network/Early Intervention Technical Assistance
  www.pattan.net

* This document is part of a series of guidelines. All guidelines have been approved by the Pennsylvania Departments of Public Welfare and Education, Office of Child Development and Early Learning.

INTRODUCTION TO THE INCLUSION GUIDELINES

The purpose of these inclusion guidelines is to provide written guidance to assist Pennsylvania's Early Intervention Programs to continue to show progress and increase the number of children supported in natural environments and typical early childhood education settings. This document is supported by requirements in federal law; The Individuals with Disabilities Education Act, state law, guidance from the Pennsylvania Departments of Education and Public Welfare and grounded in the advice from the Pennsylvania State Interagency Coordinating Council.

Belonging is a basic need of every person. In order for children to belong, they need to be able to participate in every day activities with their peers. They need to have access to the same social and learning opportunities that they would have if they did not have a disability. Successful implementation requires appropriate supports and services to be in place. Many individuals, agencies and fiscal entities must collaborate to ensure that successful inclusive opportunities are available. A true commitment from all entities is vital. All children are our children.

IDEA 2004

300.II4 Least Restrictive Environment (LRE)

The Pennsylvania Departments of Education and Public Welfare's Office of Child Development and Early Learning has as its highest value for young children with special needs to receive their services and supports in settings where children would be if they did not have a disability. The creation of the Office of Child Development and Early Learning, a combined office within the Departments of Education and Public Welfare is a testament to this belief. Although much work needs to be done with training and supporting early childhood staff, the creation of this office is a giant step forward towards achieving the goal of supporting all children with disabilities in settings where they would be if they didn't have a disability.

Here is what our youngest children think about inclusion! Patrick from Abington Heights School District won second place in the elementary schools division of the National Inclusive Schools Essay Contest with the following poem.

I nclude everyone
N ever, ever left out
C hoose to include
L eaving someone out is wrong
U nfair for others to be left out
S omething for everyone
I nvite everyone
O utrageously fun when no one is left out
N o one is ever left out

Inclusion is not just a school issue. It's about preparing our children to become adults who are actively participating members of their communities. It is about participation of individuals with disabilities as equal and accepted members of society. Research and anecdotal evidence shows that when we embrace children at a young age, so that they experience acceptance early on, it sets affirming expectations for their families. But if families have negative experiences early on they learn to expect failure for their child as they reach school age.
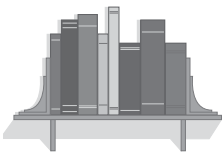
As Chief Justice Earl Warren stated in Brown v. Board of Education in 1954, "Separateness in education can generate a feeling of inferiority as to children's status in the community that may affect their hearts and minds in a way unlikely ever to be undone. This sense of inferiority… affects the motivation of a child to learn… and has a tendency to delay (retard)… educational and mental development." While Chief Justice Warren wrote about racial separateness in 1954, the principles of that court decision have supported a shift through the years in our perceptions about the rights of ALL individuals to participate in the community and in community educational experiences. Inclusion goes beyond placement in a regular classroom or providing services in natural environments. It is about being included in life and participating using one's abilities in day-to-day activities as members of the community. It is being a part of what everyone else is and being welcomed and embraced as members who belong. As one parent of a young child stated, "inclusion can occur in schools, churches, playgrounds, work and in recreation." In Pennsylvania our vision is that ALL young children will participate and succeed in the same activities and environments as their same-aged peers.

The federal law, Individuals with Disabilities Act (IDEA), requires states to provide services for pre-school children with disabilities in the least restrictive environment (LRE) and to insure that services for infants/toddlers with disabilities occur in natural environments (NE). Language in IDEA Part B requires for preschool-aged children that "to the maximum extent appropriate, children with disabilities, including children in public or private institutions or other care facilities, are educated with children that are nondisabled; and that special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only if the nature or severity is such that education in regular classes with the use of supplementary aids and services, cannot be achieved satisfactorily."

Additionally, the language in IDEA Part C requires for infants/toddlers with disabilities that "(A) to the maximum extent appropriate, early intervention services are provided in natural environments; and (B) the provision of early intervention services for any infant or toddler with a disability occurs in a setting other than a natural environment that is most appropriate, as determined by the parent and the individualized family service plan team, only when early intervention cannot be achieved satisfactorily for the infant or toddler in a natural environment." In Pennsylvania IDEA is the framework from which we build a system to support young children's learning and growth in their homes and within the community.

Inclusion is not something that has to be "earned" by the child and family. It is a "civil" right. The Americans with Disabilities Act of 1990 (ADA) provides for equal access to public accommodations for children with disabilities. This law requires that public early care and education programs develop admission policies that don't discriminate against children with disabilities; make reasonable modifications to policies, practices and procedure to include children with disabilities; provide resources for effective communication between practitioners and children with disabilities; and comply with physical access requirements.

KEY COMPONENTS THAT SUPPORT INCLUSION

Inclusion involves more than just physical placement in home and community environments. It is about being included in life and participating, using one's abilities, in day to day activities as members of the community. All young children need a planned, individualized program for inclusion to be successful.

PROGRAM PHILOSOPHY

Research has shown that programs and staff whose philosophy embraces all children are better equipped to serve children of varying abilities (An Administrator's Guide to Preschool Inclusion, page 39). Professionals' beliefs and attitudes affect what they do and how they do it. A philosophy of believing that inclusion benefits children with and without disabilities is an important requirement for success (Young Children with Disabilities in Natural Environments, page 15). In Pennsylvania there is no state requirement for universal preschool so inclusion can be challenging to implement at times. Inclusion is dependent on available early childhood settings unlike school age where there is a public school program for all children.

FAMILY PARTNERSHIPS

Partnerships between families and professionals are essential to achieving effective, quality early intervention services that support learning in inclusive environments. The characteristics of these collaborative relationships will differ with each family, depending on a variety of factors, including the family's beliefs about how children learn, their ideas and experiences related to disability and inclusion, and their perceptions and past experiences regarding relationships with professionals. Strong, vital partnerships with families require that professionals be sensitive to families' wishes and concerns and work with families in ways that are comfortable and satisfying to them (Cavallero & Haney, 1999). Partnerships with families work when professionals use the same skills that support all collaborative relationships – respect, trust and effective communication. Families of children with disabilities have so many wonderful insights, perspectives, resources and experiences to share not only with each other, but with those who provide early education and care to their children. Forums and opportunities need to be available for this sharing.

The following strategies are the foundations for building solid partnerships with families:
- Cultivate individual relationships with families
- Develop and use curricula and materials that reflect child, family and community diversity
- Provide ongoing linkages for families to information and resources that will support their needs and priorities
- Develop an accessible, effective communication system with families
- Learn about each family's frame of reference
- Respect family preferences, values and culture

COMMUNITY PARTNERSHIPS
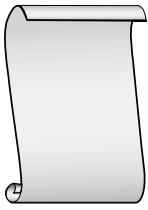
ACT 212
LICC

Systems-level collaboration allows early intervention, education and care programs to achieve goals that they could not achieve alone (One of Us, 2005). It expands program options by synthesizing resources into new forms and mirrors the collaboration required at the direct service level to make inclusive learning experiences work for children and their families. At the local level in Pennsylvania, there are groups already established that can facilitate the enhancement of inclusive opportunities through community partnership:

Local Interagency Coordinating Councils (LICCs)

Councils that meet regularly and include diverse stakeholders interested in early intervention, provide a format for relationship building, issue identification and problem-solving around inclusion. Some of the activities that LICCs have used to address inclusion issues include (1) hosting community focus groups, such as the 2005-2006 Inclusion Forums (see Appendix II), (2) offering training to local professionals and parents on inclusion and (3) formalizing plans for enhancing inclusive learning opportunities through documentation on Local Interagency Agreements.

Community Engagement for Early Care and Education Groups (CEG)

These groups, working in all of Pennsylvania's counties, include a wide array of early education and care stakeholders, as well as community and business partners. The broad charge of the CEGs is to engage the public in helping to see the need and provide support for quality learning experiences for all young children.

Community partnership is an important component in enhancing local, inclusive learning opportunities for young children. The relationships that are an outgrowth of such a partnership can serve as the foundation for fostering the trust and mutual respect necessary to ensure that such barriers as attitudes, lack of knowledge about disability, and perceptions related to "qualifications" necessary to support young children with special needs will not limit the potential in all communities to meet the vision of inclusion for young children (Wolery & Odom, 2002). Inherent in any partnership is a system of communicating that encompasses the "art" of establishing a collaborative relationship. All partners can share their program's goals and culture to promote shared collaboration for the benefit of the children and families. For instance, an Early Intervention personnel providing service in a Head Start program is really a partner in the Head Start environment. However, in that situation, the Early Intervention personnel must be respectful of the culture of the partner programs and the limitations of the staff time and resources.

The Pennsylvania Early Learning Keys to Quality, sponsored by the Department of Public Welfare's Office of Child Development, is a quality improvement program in which all early learning programs and practitioners are encouraged and supported to improve child outcomes. Keystone STARS is an initiative of the Office of Child Development and Early Learning to improve, support, and recognize the continuous quality improvement efforts of early learning programs in Pennsylvania. STARS stands for Standards, Training/Professional Development, Assistance, Resources, and Support.

The Keystone STARS Performance Standards provide the foundation for the program. The Performance Standards are grouped into five levels: Start with STARS, STAR 1, STAR 2, STAR 3, and STAR 4. Programs attaining accreditation through NAEYC are automatically a STAR 4 level. Each level

builds on the previous level and utilizes research-based best practices to promote quality early learning environments and positive outcomes for all children. The standards address staff qualifications and professional development, the early learning program, partnerships with family and community, and leadership and management. Keystones STARS promotes successful inclusion for children by increasing the quality of early childhood education programs. Keystone STARS is managed through a partnership of the Office of Child Development and Early Learning and the Pennsylvania and Regional Keys. Pennsylvania Keys to Professional Development is a comprehensive, statewide system for practitioners serving children and families in early childhood and school age programs including:

- Child Care
- Early Head Start and Head Start
- Early Intervention
- Public School
- Private Academic School

It is a seamless system designed to enhance and promote quality programming that improves outcomes for all children in Pennsylvania. The components of the PA Keys to Professional Development system include:

- Core Body of Knowledge
- Professional Development Record
- Career Lattice
- Early Learning Standards
- Credential Programs
- PA Quality Assurance System
- Voucher Program
- Keystone Stars

EMBEDDED LEARNING OPPORTUNITIES

Early intervention personnel may provide supports and services in an ever-changing variety of settings. Early intervention supports and services which are embedded in typical routines and activities, within the family, community and/or early care and education settings provide frequent, meaningful practice and skill building opportunities.

COLLABORATIVE CONSULTATION

When children are served in inclusive environments, including the child's home, many service providers find themselves in the role of consultant. Consultation is essentially a method of working effectively with other adults to achieve desired outcomes for children by educating caregivers, and making changes to the environment. Consultation in Early Childhood Settings, 2005, page 185. Collaborative consultation is a method to provide Early Intervention services in inclusive environments. It requires a different set of skills than what has traditionally been used by direct service providers.

Collaborative consultation has been proven successful by MAWAs and counties. Early Intervention programs should implement the guiding principles of collaborative consultation. The guiding principles developed for Pennsylvania to implement the collaborative consultation model are outlined in the Pennsylvania Model of Early Intervention, October 2006. (See Appendix C)

Definitions

MAWA-
Mutually Agreed
Upon Written
Arrangement (provides services to 3 – 5 year old children with developmental delays)

7

The following is an example of collaborative consultation at work in Pennsylvania from the perspective of all the people involved in making it happen.

Elizabeth's Mom

"Elizabeth is a one of a kind good kid. Like all four-year olds, Elizabeth is always on the go. When she hits the bed at night, she just falls into bed. She just learned how to ride her Dora bike without training wheels. What an accomplishment for her. She learned on her brother's bike first. Following in her brother's footsteps is nothing new to four-year-old Elizabeth. She is also attending the same preschool where her older brother attended. She even has the same teacher."

The Early Interventionist

"Elizabeth began receiving early intervention services when she was three years old. Her family's initial concern was a delay in her speech development. They did not want her to fall behind and didn't want other kids to tease her because of how she spoke. And they knew if they needed to pay for a therapist, the cost was prohibitive. They turned to the intermediate unit for early intervention services. They later learned their daughter had a minimal hearing loss.

Kim, a speech/language pathologist with the preschool program, sees Elizabeth at her preschool. She observes what Elizabeth is doing and gives the teacher ideas about how to get her pronunciation better and to slow down."

The Speech and Language Pathologist

"When I visit, I try to blend into the classroom and be as unobtrusive as possible. During designated play times, I interact with the children individually or in small groups, trying to incorporate speech/language IEP goals within the context of the classroom experiences. I see my role as a consultant to the teaching staff, as just as important. My role involves not only direct support to Elizabeth, but one of support and a resource to the teachers. I try to be as available as possible to meet with teachers when they have the time to talk, such as during naptimes. I feel it is important to respect their busy schedules and responsibilities. After all, those teachers have more opportunities to support Elizabeth than I do."

The Early Childhood Teacher

"We discuss Elizabeth's many strengths and strategize ways to address her needs. We look at what worked/what didn't and why."

The Preschool Early Intervention Director

"Collaborating with early childhood programs is not new to this preschool early intervention program. Our early childhood program has been offering inclusive programming to preschoolers for well over 11 years. The staff at this IU started out small and now is collaborating in well over 93 child care programs, preschools, Head Start programs and 16 school districts. We know that flexibility is the key and some centers have different strengths. We have been privileged to watch as typical preschool programs have grown professionally. Several are now NAEYC (National Association for the Education of Young Children) certified and many more are involved in Keystone STARS. In my observations, the regular preschool programs know when our staff will be coming and they often will include them to work with small groups of children with IEPs and without."

And the last word from her Mom.

> "Because my other sons attended this center, we already knew it was an excellent center. Having early intervention support has helped guide us in the right direction so that Elizabeth learned through her play."

INDIVIDUALIZING

Goals and outcomes for children with disabilities and their families should be embedded into ongoing routines and activities. They should be based on ecological assessments from all environments a child encounters. Curriculum and materials are modified as needed so children with disabilities can participate as independently as possible in all environments. Adaptations and accommodations known to help children access activities are defined. Children with disabilities participate in the same activities, routines, and transitions as other children. Children need adequate time throughout the day to practice and learn individualized goals and outcomes through their participation within the daily routine (An Administrator's Guide to Preschool Inclusion, pages 51 & 52). Children also benefit from carefully planned explicit instruction. Ongoing progress monitoring is essential in providing appropriate support to children with disabilities and their families in inclusive settings. All caregivers, including families, need to observe children frequently to assess individual needs. These observations should take place within typical routines and activities. This information can be used to support the child and family effectively within all inclusive settings.

If you are providing early intervention in an individual setting there should be efforts to include children in group settings to help them get ready for school environments.

PROFESSIONAL DEVELOPMENT AND SUPPORT

Early intervention staff and early childhood educators must be knowledgeable about child development, instructional strategies and effective adaptations and accommodations. Early intervention personnel need to recognize the importance of working effectively with families and early care and education providers. Adequate meeting and conversation times are needed for staff and families to collaborate and plan for meeting the needs of all children. The support of the administration is crucial for staff to continue to refine their skills in working with children of all ability levels (An Administrator's Guide to Preschool Inclusion, pages 51 & 52).

UNIVERSAL DESIGN FOR LEARNING

In recent years, educators have recognized that by applying the concept of universal design to the learning environment from the beginning (e.g., through building construction, curriculum design, expanded educational materials and assessment) educators spend less time modifying or adapting later. A wider diversity of learners benefit, including those with differing abilities, such as children with disabilities. Universally designed learning environments consider how children of varying disabilities, linguistic diversities and varied learning styles can access the educational environment, participate meaningfully and benefit through flexibility and creativity. Simply put, Universal Design for Learning not only provides consideration for the widest diversity of learners possible but also benefits ALL children! (EI Newsletter, Winter 2006, Volume 18, Number 1)

NATURAL ENVIRONMENT/LEAST RESTRICTIVE ENVIRONMENT

Over the course of time, thinking has evolved to more clearly define Least Restrictive Environment (LRE) as the "place where children would be had they not had a disability."

The intent of early intervention is to provide supports and services for children in the same environments they would be in if they did not have a disability. The process for determining where supports and services will be delivered has similarities and differences between Part C for infants and toddlers and Part B for preschoolers under Federal law.

NATURAL ENVIRONMENTS (birth to age three)

For children from birth to age three "to the maximum extent appropriate to meet the needs of the infant or toddler with a disability…early intervention services shall be provided in the infant or toddler's natural environment." Natural environment refers to the "settings that are natural or normal for a child's age peers who have no disabilities, including the home and community settings in which children without disabilities participate."

IDEA 2004 NE
632(I)(4)(G)

Natural environments are unique to each family, depending upon their lifestyles, routines and preferences. For instance, while one family may choose to be at home with their child during the weekdays, another family may decide to enroll their child in a local child care program. All families participate in community activities and visit community establishments in one way or another.

All of these natural environments offer rich possibilities for enhancing the growth and development of young children. Early intervention supports and services should be embedded within the learning opportunities that exist within the family's typical routines, community activities and/or early care and learning settings.

The IFSP team is responsible for determining the natural environments in which early intervention services will be provided. Use the following process for determining appropriate natural environments.

STEP ONE:
Use the Family Assessment and Multidisciplinary Evaluation processes to determine:
- the everyday activities at home and in the community in which the family and child participate.
- the assistance needed by the child and family to accomplish those identified activities and routines.
- the family's concerns and priorities about the child's needs and the activities that they find difficult or need assistance with as they relate to the child's development and care.

STEP TWO:
Use the IFSP process to determine:
- the outcomes (activity/behavior/skill) that the family would like to see happen.
- The outcomes identified should enhance child competence and family capacity and should be measurable.

STEP THREE:
Use the IFSP process to determine:
- the family's unique routines and community activities that may provide learning opportunities related to identified outcomes.
- If a child is already in an early care/education program then decisions should be made about how to provide early intervention supports in that settings.

STEP FOUR:
Use the IFSP process to determine:
- the routines and community activities that are identified by the family as being good times for teaching and learning.

Information about natural environments is documented on the Intervention Plan page of the IFSP. If an early intervention service or support is not being provided in the family's natural environment, the team must show sufficient documentation that supports the team's decision. The IFSP must also describe the services needed to support the child's future ability to function within the natural environment. Documentation is needed to describe the plan that will allow the child's and family's outcomes to be satisfactorily achieved in their natural environment, including timelines and supports needed. These steps are outlined in the "Natural Environments Announcement: ELS/EI-06 #04." See Appendix F.

LEAST RESTRICTIVE ENVIRONMENT (age 3 to 5)

IDEA 2004
LRE 300.114

In determining the educational placement of a preschool child with a disability, the law states that the placement decision must be made by a "group of persons, including the parents, and other persons knowledgeable about the child, the meaning of the evaluation data, and the placement options; and be made in conformity with the LRE provisions of the subpart, including Secs. 300.320 – 300.321." It further states that "unless the IEP of a child with a disability requires some other arrangement, the child is educated in the school that he or she would attend if nondisabled." (34CFR 300.1162 (c))

In the law it states: "(b) Each public agency shall insure – 1. that to the maximum extent appropriate, children with disabilities, including children in public or private institutions or other care facilities, are educated with children who are nondisabled: and 2. that special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only if 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." (34 CFR LRE §300.114 General LRE Requirements)

STEP ONE:
Use the IEP process to determine:
- where the child currently spends their time and the child's educational needs within that environment
- the skills necessary to succeed in appropriate preschool activities

STEP TWO:
Use the IEP process to determine:
- the goals and outcomes for the child and/or family
- the services and supports needed to allow the child to continue in the same environment they would be in had they not had a disability

STEP THREE
Use the IEP process to determine:
- the supplementary aids and services which means aids, service, and other supports that are provided in regular education classes, other education-related settings, and in extracurricular and nonacademic settings, to enable children with disabilities to be educated with nondisabled children to the maximum extent appropriate in accordance with 300.114 – 300.116 (34 CFR 300.42).

STEP FOUR:

Use the IEP process to determine:

- the placement for the child (i.e., if the parent's desire is for the child to be in a child care setting of their choice, then services and supports should be provided in that setting
- the justification for that placement on the Notice of Recommended Early Intervention Program (NOREP)

If a child is already in an early learning program then decisions should be made about how to provide early intervention supports in that setting. Preschool agencies (MAWAs) need to be creative in establishing interagency agreements or other methods of insuring that services and supports are in place for children regardless of where they reside. Likewise, if the parent's desire is for the child to be in a child care setting of their choice, then services and supports should be provided in that setting. In Pennsylvania, Keystone STARS and the Regional Key Consultants are available to assist local child care settings in designing programs that welcome all children. Both the Keystone STARS and the Regional Keys are supported through the Office of Child Development and Early Learning to improve the quality of early learning programs in Pennsylvania. For children eligible for the Department of Health Bureau of Family Services, a nurse for children with special health care needs can provide on-site consultation.

Another resource is the Local Interagency Coordinating Council that is required to address inclusion in their interagency agreements. In addition to the support provided by these organizations, administrators can also contact the Bureau of Early Learning in the Office of Child Development and Early Learning for assistance in promoting inclusion at the local level.

The following is an example of team members working to effectively support a child in a nursery school:

Jacob's Story

Jacob is a four-year-old boy with special needs. Jacob attends a nursery school two mornings a week!

When Jacob's mother talks about what makes his experience in a typical early learning program a success, she doesn't hesitate to explain that it is his "team"! The team, which includes the nursery school teachers, Amanda, his Speech Therapist, and his parents, all meet and talk about Jacob's program on a regular basis. The team develops goals which address the overall family priorities of: following/complying with various adult directives, and improving socialization skills.

Much planning occurred before Jacob entered the nursery school for the first time. The summer before he began, Jacob attended a program entitled Stepping Stones which met one time per week to allow children the opportunity to experience group situations away from home for a short period of time.

In addition, Jacob's therapeutic staff support and his Speech Therapist are great resources for helping the nursery school staff adapt and modify the curriculum, activities and materials to accommodate Jacob. This year Mom reports that there are no special accommodations needed for Jacob!

In conclusion, a willingness to "learn," a dedication to providing quality services to ALL children, and a team that works together are what makes Jacob's inclusive experience a success!

CONCLUSION

In closing, Jennifer shares her thoughts on inclusion through her 1st place winning essay in the National Inclusive Schools Essay Contest.

I have been in special education since fifth grade. Before that time I had trouble in many ways and was frustrated. I could not read or spell well. I had different work than other students and it was embarrassing.

Today I can read and spell better. I was afraid to read aloud in class because I had trouble with simple words. Now I know how to sound out words and take my time. This has helped me improve and have confidence to read in front of others.

Our school has inclusion that helps us feel more a part of the whole school because we have a mix of students. We have the same work and assignments as everyone else. When my friends are talking about an assignment or project, I feel good that I can talk about it with them. It is not only people like me. We have a boy in a wheelchair who uses a box to talk for him in some of our classes. He laughs and I know he feels good being around us. I am glad our school works hard to help all of us.

SHARED VALUES FROM THE OFFICE OF CHILD DEVELOPMENT AND EARLY LEARNING

1. Infants, toddlers and preschool age children with developmental delays or disabilities should be supported in the same environments as their siblings, their neighbor's children and other children without disabilities.

2. If a child is already in an early learning program when they are identified as eligible for early intervention their supports should be provided in those settings.

3. All early intervention programs should engage in ongoing self-assessment of their levels of inclusion and set rigorous and measurable targets to increase inclusive opportunities in early education and community settings for infants, toddlers, and preschool age children.

4. Inclusion is not defined as a location where services are provided; it is active participation with supports.

5. Inclusion and high quality individualized supports are important values for families and need not compete with one another.

6. There are multiple professional development resources available to local programs that can be used cross agency to support inclusion.

7. There is no "type" of child who cannot be successfully included, there is just more that we need to learn.

8. The structure of the Office of Child Development and Early Learning supports better coordination of early education programs and can assist in local problem solving when inclusion meets road blocks.

9. Everyone benefits from inclusion.

10. Status quo is not acceptable; we can do better for our children and families.

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APPENDIX A
RESOURCES FOR EFFECTIVE INCLUSION

Input on this document was provided by Camille Catlett, Frank Porter Graham Child Development Institute, University of North Carolina, Chapel Hill, North Carolina.

Web Resource:

> http://www.fpg.unc.edu/~scpp/~resourceguide/
> Resource Guide: Selected Early Childhood/Early Intervention Training Materials
> a fully-searchable online database of resources, including many on inclusion

QuickNotes Volumes V & VI: What Is Early Childhood Inclusion? & Including Children with Special Needs
by Pat Wesley, Brenda Dennis, and Sabrina Tyndall

> Filled with quick reference information, these notebooks provide easy-to-understand resources to educators, caregivers, and parents. Information sheets are in English on one side with accurate Spanish translations on the other. Each volume is organized in a 3-ring binder that also provides a list of print materials and related web sites. NOTE: Volumes V & VI are only sold as a set.

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Preschool Inclusion
by Claire C. Cavallaro and Michele Haney

> This handbook provides field-tested, research-based guidelines and strategies for including young children with disabilities in early childhood programs. Content on involving families, collaboration and teaming, assessment strategies and positive behavioral supports is included, featuring useful applications and illustrative vignettes. Four cases are provided for teaching or staff development.

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The Inclusive Early Childhood Classroom: Easy Ways to Adapt Learning Centers for All Children
by Patti Gould and Joyce Sullivan

> Each chapter of this book describes practical ways to adjust centers and routines to serve children with special needs. Suggestions are intended to support the successful participation of learners with diverse disabilities (from developmental delays and autism to attention deficit/ hyperactivity disorder/ADHD) in developmentally appropriate routines and activities.

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A Community for All Children: A Guide to Inclusion for Out-of-School Time
by Kimberly D. Miller and Stuart J. Schleien

> Within this FREE publication you'll find many ideas and illustrations for promoting inclusion of children of all ages in diverse community settings, including schools. The examples are relevant, the information is useful and the strategies are doable.

Exceptional Children's Assistance Center
PO Box 16
Davidson, NC 28036-0016
(704) 892-1321
Email: information@ecac-parentcenter.org
Web: http://www.ecac-parentcenter.org
Cost: FREE

Child Care and the ADA: A Handbook for Inclusive Programs
by Victoria Youcha Rab and Karren Ikeda Wood

> Designed for educators and administrators in child care settings, this how-to guide offers a straightforward discussion of the Americans with Disabilities Act (ADA), and including children with disabilities in community programs. Strategies for understanding regulations, making changes to comply with the ADA, preparing staff and more, are clearly illustrated.

1995
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Welcoming All Children: Creating Inclusive Child Care

by Tamyra Freeman, Lois Hutter-Pishgahi, and Elizabeth Traub

This set of materials (28-minute videotape and 35-page booklet) is designed to support child care providers in making their programs responsive to children of diverse abilities. There is a clear, concise section describing Americans with Disabilities Act (ADA) requirements and a nice segment on team involvement, including examples of integrated service delivery. These are excellent materials for teaching, training, staff development or self-instruction.

2000
Indiana Institute on Disability and Community
Indiana University
Attn: Publications Department
2853 East Tenth Street
Bloomington, IN 47408-2696
(812) 855-6508
FAX: (812) 855-9630
Email: fushaj@indiana.edu
Web: http://www.iidc.indiana.edu
Cost: $25.00 (video); $10.00 (booklet)

Best Practices in Integration (BPI) Inservice Training Model

by Susan M. Klein and Susan Kontos

Here are some great materials (guide + instructional modules) with which to train persons serving infants, toddlers, and preschool children with special needs within inclusive community-based settings. The strong emphasis on communication, collaboration and consultation make this a very useful resource.

1993
Susan M. Klein
Indiana University, School of Education
201 N. Rose Avenue, Room 3258
Bloomington, IN 47405
(812) 856-8167
FAX (410) 337-8539
Cost: $20.00

APPENDIX B
KEYS TO SUCCESSFUL EARLY CHILDHOOD INCLUSION

Parents and professionals across the commonwealth met in local forums to discuss ways to increase inclusive opportunities for our youngest children and create communities where all belong. They identified these Keys to Successful Inclusive Practices:

1. Communication
   - Find time and ways to communicate across agencies and collaborate to support children.
   - Create different ways to ensure that communication with families matches individual families' own styles and preferences (email, phone calls, notes).
   - Value and use joint planning time across agencies.
   - Use communication tools (email, notebooks, websites, logs) not just with families but with all involved in children's lives.

2. Training
   - Provide joint training across roles (early intervention staff, early care and education providers, parents). It's cost efficient and will promote collaboration around inclusion.
   - Plan for onsite follow-up/carryover after training to demonstrate how to include children successfully.
   - Allow time for transition planning for children, families, and professionals.
   - Include trainings or town meetings for the general community.

3. Commitment/Attitudes
   - Gain support from leadership. This is critical.
   - Focus on the positive strengths of programs and children.
   - Have realistic expectations and be flexible. Start small – one child or one program at a time.
   - Model an "I Can" optimistic point of view.
   - Examine your own attitude. Inclusion is about acceptance.
   - Focus on skills in relationship building.

4. Resources
   - Do an inventory. Do you have appropriate resources? If you do, don't forget to share.
   - Be aware of available funds (including grants).
   - Utilize grant money to pay for substitutes, planning time, and transportation.
   - Use resources like Keystone Stars to increase financial resources for staff.
   - Know and use all available expertise (local and state).

5. Higher Education
   - Contact your local colleges and offer student-teaching placements.
   - Encourage your local colleges to always place student teachers in inclusive settings.
   - Partner with colleges for in-service trainings.
   - Link training to college credits.

6. Policies
   - Create a common understanding of the different program regulations. Knowledge of systems and laws helps programs appreciate each other's strengths and constraints.
   - Plan carefully for transitions across systems. Don't forget to involve school districts.
   - Avoid unnecessary transitions. If a child is already in a neighborhood child care program, support him or her there.
   - Put practices in writing through interagency agreements.
7. Parent Involvement
   - Work with parents to create sharable and transportable child portfolios - especially for transition.
   - Build and use parent-professional teams. Everyone has a role in supporting children in inclusive settings.
   - Promote confidence-building in families so they can meet the needs of their children and help them develop.
   - Model inclusion by including parents in your planning, implementation, and evaluation of inclusion.
8. Program Measurement/Evaluation
   - Continually evaluate if the children are learning and making friends. Inclusion alone is not enough.
   - Use interagency child evaluation methods to avoid over-evaluation when children are in multiple programs.
   - Use the expertise from both child care and early intervention to build the best program for all children.

APPENDIX C
PENNSYLVANIA'S APPROACH TO THE DELIVERY OF EARLY INTERVENTION SERVICES

There are many effective, research based approaches to the delivery of early intervention services; all with different names and definitions. Regardless of the names, these approaches have common core principles that are the foundation of Pennsylvania's model for early intervention services. These core principles include the following:

Early intervention provides supports and services to infants/toddlers and young children with disabilities and their caregivers so that they may help the child grow and develop.

What it looks like:
- Early intervention personnel design supports and services so that family members and other early care and education providers are actively engaged in promoting the child's learning and development. Starting with the first contact, early intervention personnel use strategies to engage and involve all caregivers.
- Whether working with family members or other early education programs, early intervention personnel use methods that build on principles of effective adult learning. Early intervention personnel demonstrate techniques, observe the caregiver's practice and provide constructive feedback. To increase caregiver's competence and facilitate learning, early intervention personnel provide information, problem solve, and teach new strategies. They rely on family members and other caregivers to provide relevant information regarding the family's culture, as well as the child's developmental strengths and learning style.
- Early intervention personnel build families' and early education providers' competence by identifying what they are already doing to promote the child's learning; by identifying learning opportunities in the child's every day life; by creating additional learning opportunities for the child; and by helping them use effective intervention strategies in those learning opportunities.

Early Intervention provides individualized supports and services to infants/toddlers and young children with disabilities and their families.

What it looks like:
- Information is gathered from persons most familiar with the child such as parents, caregivers and health care providers. When additional information is needed further assessment is completed.
- This information is used by IFSP/IEP teams to develop individualized goals and outcomes for the child and family.
- Supports and services are identified and linked to the goals and outcomes.
- Specially designed instruction, methodologies, and program modifications are used in tandem with early intervention supports and services. They are linked to the outcomes or goals and are described specifically so that anyone implementing the plan can understand what to do to support the child. Specific types of methodologies that are commercial or require specialized certification may be appropriate for an individual child, but they are not listed by name on the plan; rather the strategies used are described. Because approaches can vary based on the strengths and needs of the child and family, and because no one methodology can meet all the needs of an individual child, it is better to describe the characteristics of the intervention than list it by a name. This allows the Early Intervention team to customize strategies to meet the needs of the child and not be locked into a prescribed program.

- Progress is monitored on the IFSP/IEP goals and outcomes to determine the effectiveness of the services and supports, to make any necessary modifications or changes, and to assess further needs on an ongoing basis.

Early intervention supports and services are embedded within learning opportunities that exist in the child's typical routines, within the home and community activities and/or early education programs.

What it looks like:
- Routines and community activities may vary with the age of the child, the interests of the family, and with the changing availability of community and family resources. The typical routines and activities of early education programs also vary with the age of the child and the curriculum used in the program. Early intervention personnel provide supports and services in an ever-changing variety of settings.
- Early intervention personnel should have conversations with the family and/or early education providers to identify typical routines and activities. The routines and activities may include child-initiated play activities, daily care routines, other family routines, community activities, or early education activities so that services and supports can be delivered within the context of the routines. The conversations should include discussions that identify the typical sequence of the activity/routine and the materials used. The conversations should also help family members and early education personnel identify which routines are working as well as other routines that may become priorities for early intervention services and supports.
- The materials and sequence of actions relevant to the routine need to be identified – particularly the items and events that are readily available within the child's natural environments and/or early education settings. In this way, carefully planned, explicit instruction can occur within the context of the routine or activity.
- Using readily available materials, the natural sequence of the routine, and embedding supports or strategies into the child's preferred activities, will provide frequent opportunities for functional and meaningful practice using natural reinforcers that are motivating and likely to occur repeatedly.
- Early intervention supports and services focus on problem solving in respectful ways with the family and/or early education programs to identify strategies to enhance the learning opportunities within identified routines. Strategies may include modification or adaptation of the materials used, the sequence of a routine, or providing the early education provider with teaching strategies that can enhance the child's participation within natural and least restrictive environments.

Early intervention supports and services build on the existing family, community and early education resources.

What it looks like:
- Early intervention personnel have conversations with the family and/or early education provider about both the formal and informal resources that exist within their family, neighborhood, and greater community. Conversations can include discussion about resources that the family is currently using and those that the family needs. Conversations regarding cultural considerations important to the family are essential when reviewing and identifying resources. The information about formal and informal resources should be updated frequently and used to guide services and supports.

- The IFSP/IEP can include documentation of both the formal and informal resources that exist or are needed by the family. The IFSP/IEP can also describe how these resources will be used as part of the coordinated services and supports that are needed to ensure that the child's and family's needs are met.

Early intervention personnel work collaboratively with the family and each other to provide coordinated, flexible, early intervention supports and services.

What it looks like:
- Once goals and outcomes are determined, IFSP/IEP teams make decisions about the skills and abilities that are needed to meet them. These discussions lead to the identification of the appropriate supports and services either in the natural environment or the least restrictive environment. These decisions are not made by matching the child's areas of deficit with a particular early intervention discipline. Rather, supports and strategies are individualized and build on the strengths and skills the child demonstrates in all areas of development.
- Early Intervention teams are groups of personnel who have complimentary skills and abilities. Early Intervention teams work together in a variety of ways to achieve the goals and outcomes of the child and family. Early Intervention teams should have planned opportunities for interactions so they can share discipline-specific information, provide cross-discipline training opportunities and/or brainstorm new intervention strategies. Family members are always a part of the Early Intervention team.
- Joint scheduling of early intervention services is one strategy to ensure purposeful opportunities for teams to collaborate on achieving child and family outcomes. Other strategies include planned team meetings, shared communication logs and/or sharing progress monitoring results.
- Early intervention personnel should be part of the Early Intervention team. This enables all members to elicit and share IFSP/IEP information, which in turn assists early education staff in the implementation of the IEP/IFSP. In addition, both the EI and early education staff benefit from each other's experiences and knowledge that transfers to all children. If personnel from the early education program are unable to be members of the IEP/IFSP team, parent consent may be needed to share information.

Early intervention supports and services focus on the family and child's transition between and among early education programs.
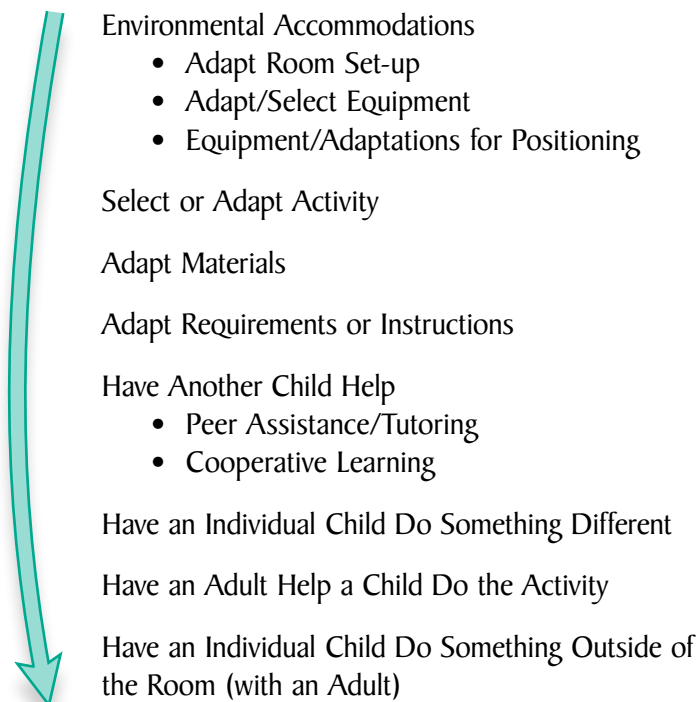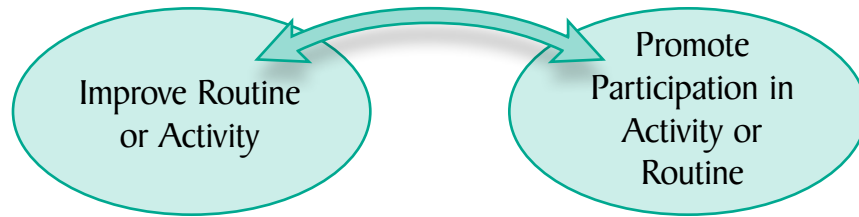
What it looks like:
- Early intervention supports are fleeting in the larger context of the family's life and therefore should focus on ensuring that the few years in early intervention build competence across the family and child's lifespan. Reliance on other family and community resources builds the competence of families to be effective in helping their child grow and develop after early intervention services are no longer available or appropriate. Transition supports described in the IFSP/IEP should build on family, neighborhood, and community resources. Communication between and among all personnel who serve or may serve the child and family is essential to ensure smooth transitions throughout the early years.
- Transitions can often be difficult without planning and support. Early intervention personnel should plan and support the many transitions that occur in a family's life, including entering a new child care program, entering or returning home from the hospital, moving to a new

county or state or exiting the early intervention program because they no longer need early intervention, exiting at age three to continue on with a preschool special education program or exiting the preschool to school age programs.

- Good communication and timely planning is critical during the early intervention process as the child approaches age three. Planning for transition frequently requires multiple conversations with the family and sending team members before the actual transition meetings so that each member of the team understands the parameters of the process. All concerns about transition should be discussed, including: the steps in the process; a child's strengths, needs, and progress; concerns of the family; and possible transition outcomes. This information should be shared with the receiving agency. If it is anticipated that the child will transition to preschool early intervention, it is important that the family understand the evaluation and IEP procedures. Concerns should be addressed openly to promote future successful transitions for all children and their families. If the concerns are not resolved, the team should seek additional guidance from supervisory staff and, if needed, state early intervention personnel.

- Feedback should be provided to sending agencies if procedures they are using or services that they are recommending regarding outcomes cause difficulty during the transition process. Any concerns at transition that result in mediation or due process should be immediately shared with the sending agency and preventative strategies should be developed.

- Eligibility criteria should be discussed when planning for preschool transition. The sending and the receiving agency should understand why the child has been determined eligible for early intervention. Teams may initially identify infants as eligible for early intervention through the use of clinical opinion when no test(s) are sensitive enough to determine a developmental delay, despite the presence of developmental issues. However, as the child grows, the use of clinical opinion should be supported by test and progress documentation. A child cannot be eligible for preschool early intervention services based only on clinical opinion, so this topic must be addressed prior to any transition activities. If a child has been eligible in the infant/toddler early intervention program and there is a question about the child's continued eligibility in the preschool early intervention program, the county must contact the preschool early intervention program to share evaluation materials in order to determine if additional evaluation is needed to determine eligibility.

- If a sending IFSP team is serving a family with a child who is approaching age appropriate development, the IFSP team should make every effort to determine if the child is still eligible for early intervention before transition occurs. This will prevent the unnecessary evaluation of a child. This may not be possible because of timing, family concerns, or other issues. In those cases, clear and active communication among all parties is paramount.

- Families should be given information about the sending and receiving agencies that support a smooth transition and respect the expertise and commitment of both agencies. Families should understand that both the sending and receiving agencies are working together in their best interest and that of their child.

- Local Interagency Agreements should address transition and describe the process to be used to resolve any conflicts.

- Early intervention personnel should celebrate transitions with families, not focus on what has been lost. The transition of a child out of early intervention because he or she has developed many new skills and accomplished many outcomes should be a time for celebration.

Improve Routine or Activity

Promote Participation in Activity or Routine

Environmental Accommodations
- Adapt Room Set-up
- Adapt/Select Equipment
- Equipment/Adaptations for Positioning

Select or Adapt Activity

Adapt Materials

Adapt Requirements or Instructions

Have Another Child Help
- Peer Assistance/Tutoring
- Cooperative Learning

Have an Individual Child Do Something Different

Have an Adult Help a Child Do the Activity

Have an Individual Child Do Something Outside of the Room (with an Adult)

The following are examples of program options that are available to children in Pennsylvania.

Child Care
Child care centers, group day care homes and family day care homes provide programs for children below school age, in over 9,000 facilities across Pennsylvania.

Keystone STARS/Keys to Quality
A voluntary quality improvement program for child care programs that benefits more than 176,000 children.

Pennsylvania PreK Counts
This initiative provides funding for more than 11,000 of Pennsylvania's three- and four-year olds to attend quality half- and full-day pre-kindergarten in schools, Head Start programs, child care centers and nursery schools.

Head Start
Head Start is a comprehensive preschool program for low-income three-, four-, and five-year olds. It provides children with a developmentally appropriate early childhood education. The program ensures that young children get health checkups and treatment, and that they are fed a nutritious hot meal every day. It is operated by local agencies in every county in Pennsylvania. Children with disabilities are welcome in Head Start. Programs reserve a minimum of 10 percent of their openings for children with disabilities.

Head Start Supplemental Assistance Program
This program allows Head Start grantees to enroll additional pre-kindergarten children or to extend the Head Start day for children currently enrolled.

District Operated K-4 and K-5 Programs
Some school districts offer state supported full- or half-day kindergarten programs for four- and five-year-old children within their districts.

Title I
Federal Title I supported preschool programs allow school districts to support programming for three- to five-year olds.

APPENDIX F

ANNOUNCEMENT: ELS/EI-06 #04
CHILD DEVELOPMENT OFFICE
BUREAU OF EARLY LEARNING SERVICES
DIVISION OF EARLY INTERVENTION

ISSUE DATE: 7/24/2006
EFFECTIVE DATE: 7/24/2006

SUBJECT: Natural Environments
TO: County MH/MR Administrators/County Mental Retardation Coordinators/County Early Intervention Coordinators/Early Intervention Providers
FROM: Harriet Dichter   **Deputy Secretary, Office of Child Development**

PURPOSE:

The purpose of this announcement is to reaffirm procedures for providing Early Intervention services in natural environments. Previous procedures were established by the Office of Mental Retardation. These procedures meet statutory requirements established in Public Law 108-446, the Individuals with Disabilities Education Act (IDEA), enacted on December 3, 2004.

BACKGROUND:

The Pennsylvania Early Intervention system is implemented in compliance with the Individuals with Disabilities Education Act (IDEA) as amended by Public Law 108-446, 'Early Intervention Program for Infants and Toddlers with Disabilities' Part C and the Pennsylvania Early Intervention Services System Act, Pennsylvania Act 212-1990.

Over the past 15 years, statutory amendments have been made to the IDEA on the requirements for natural environments. In October 1991, Part C of the IDEA was reauthorized as P.L. 102-119 and stated 'that to the maximum extent appropriate to the needs of the child, Early Intervention services must be provided in natural environments, including the home and community settings in which children without disabilities participate,' and that, 'natural environments' means settings that 'are natural or normal for the child's age peers who have no disabilities.' Statutory amendments of 1997, under P.L. 105-17, added two requirements related to the provision of Early Intervention services in natural environments. First, it required that states develop policies and procedures to ensure that, to the maximum extent appropriate, Early Intervention services are to be provided in natural environments and occur elsewhere only if Early Intervention cannot be achieved satisfactorily in a natural environment.

Second, it required that each Individualized Family Service Plan (IFSP) identify the natural environments in which services are to be provided and a justification of the extent, if any, to which a service will not be provided in a natural environment and location in which it will be provided.

Under current IDEA Amendments, P.L. 108-446, additional language was added under the requirement related to states policies and procedures. The new language states, "The provision of Early Intervention services occurs in a setting other than a natural environment that is most appropriate, *as determined by the parent and the individualized family service plan team only when Early Intervention cannot be achieved satisfactorily for the infant or toddler in natural environment*".

DISCUSSION:

To the maximum extent appropriate, supports and services shall be provided in natural environments. Services shall be provided in communities or locations where the child lives, learns, and plays on a daily basis in order to enhance the child's participation in family routines and in the activities and routines that occur in a variety of community settings where children and families spend time. Each IFSP identifies the natural environments in which services are to be provided and a justification of the extent, if any, to which a service will not be provided in a natural environment and location in which it will be provided. Only when the child's and family's outcomes cannot be achieved satisfactorily for the child in the natural environment can the provision of Early Intervention services be considered in a location other than the child's natural environment. These determinations are made by the parent and the IFSP team through an individualized assessment.

The IFSP is developed to determine the supports and services to be provided to children from birth to age three and their families. The plan is based on the concerns, priorities and resources of the family and, determined by a family directed assessment of what the family believes is important to enable their child's participation in activities or routines that take place within the family's naturally occurring settings. Planning is based on outcomes that the families and IFSP team members agree will be functionally suitable to promote the child's increased competence, participation and learning and the family's capacity to support the child. When developing the IFSP, the following shall be addressed:

3
Developing the IFSP

(a) Assessment should include:

    (1) The family's identification of their priorities, concerns and resources
    (2) The identification of the child and family's daily routines and interests

(b) Establish outcomes specific to the child and family that:

    (1) Enhance child competence
    (2) Enhance family capacity
    (3) Increase the number of settings for child/family activities
    (4) Are measurable

(c) Environments and activities based on:

    (1) Part of child's and family's routines
    (2) Typical of same age peers
    (3) Respect for religious, ethnic and cultural practices

(d) When determining services and supports for the child and family the IFSP team must consider implementation of the IFSP in as many activity settings, as appropriate, that will allow learning opportunities for a child in a natural environment (home, community activity settings). Appropriate services and supports should be focused on:

    (1) Placing an emphasis on functional competence
    (2) Increasing the child's participation in natural environments

(e) The IFSP team will determine what supplemental supports will be provided in order for the child to achieve the outcomes listed in his/her initial IFSP. To the extent appropriate, the IFSP must include:

    (1) Medical and other services that the child needs but are not required under Part C
    (2) The funding sources to be used in paying for those services or the steps that will be taken to secure those services through public or private sources.

Justification for Services Not Provided in a Natural Environment

(a) If the IFSP team members agree to the provision of supports and services in locations other than in a child's natural environment(s) the team must show sufficient documentation, during the initial writing of the IFSP, that supports the teams decision that the child's and family's outcomes cannot be met by providing supports and services in the natural environment (s) of the child and family. As part of the initial IFSP and at the six-month review or at the request of the family, the IFSP and justification are considered, documented on the IFSP, and include:

    (1) How services provided in locations other than a natural environment will be generalized enough to support the child's future ability to function in his/her natural environment; including:
    (2) A plan with timelines and the supports necessary to allow the child's and family's outcomes to be satisfactorily achieved in his/her natural environments (as an addendum to the initial IFSP).

(b) A review of the IFSP must be continued during the period that a child and family are receiving Early Intervention supports and services. This method should be repeated until the child and family can receive supports and services that are naturally provided in their everyday lives (home and community activities).