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• INFORMATION FOR FAMILIES AND PROFESSIONALS

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Assessments and Young Children

By Marianne Barton, Ph.D., Associate
Clinical Professor, Dept. of Psychology,
University of Connecticut, Storrs



*This article is translated into Spanish
on page 2. Ver la versión española de
este artículo en la página 2.*

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Although assessment is just a process of comparing a child to established norms to determine if development is progressing as expected, referring a young child for assessment may raise concerns for parents. What will the evaluation be like? What if my child does not measure up to the evaluator's demands? Will I be able to be a part of the assessment? What if the assessors do not understand my child? These are valid questions that address concerns shared by parents and professionals.

Young children present unique challenges to any assessment process. They change rapidly and they learn at different rates and in different ways. Children are strongly affected by their surroundings. They may be comfortable in one setting and much less so in another. Their behavior may vary with their own physical and emotional state or their interaction with the evaluator. Family routines and cultural experiences also affect children's responses to the assessment process. For all of these reasons, assessment of young children must include a variety of assessment tools and the participation of several professionals with different expertise. Assessment must include seeing the child in natural, comfortable settings with familiar people. It must include the opinions of those who know the child best and are the true experts on that child. And adults must remain aware that even the most careful of assessments can capture only a limited picture of a child's abilities at one moment in time. Assessment allows us to

take a careful look at a child's current strengths and challenges. It does not allow us to predict development over time and it should never be used to label children.

Assessment is designed, in part, to identify those children who may be struggling to accomplish developmental tasks at the expected time. That goal requires assessment tools that can be used in the same way with different children, and that allows us to compare one child's performance with other children of the same age, gender, race and cultural background. These tools, which are called norm-referenced tests, must be carefully developed to insure that they produce reliable results over time, that they measure what they are intended to measure, and that they are appropriate to use with children from different backgrounds. These tests are designed to be interesting to young children and they can often be administered in flexible ways, for example, seated on the floor or in a play based setting. Nonetheless, tests are intended to be administered in essentially the same way to most children, in order to permit evaluators to compare one child's performance with a larger group. Data from these tests are often used to determine eligibility for intervention services.

But norm-referenced testing is only one part of the assessment process. Other tools are designed to look closely at specific tasks to determine what skills a child has mastered, and what skills they are ready to learn.

These assessment procedures are designed to be used in a flexible fashion and often include direct observation of children in their real life or play settings. This process, often called criterion-based assessment, allows evaluators to build on a child's strengths, and to design interventions that link existing skills to new tasks. Criterion based assessment is especially helpful in defining specific goals that can be used to evaluate a child's progress and response to intervention.

Meaningful assessment of a young child must include both norm-referenced and criterion based tools. Evaluators look at a child's skills in many areas, including problem solving skills, language, motor development, social interaction, behavior, and the tasks of everyday life, such as eating, dressing and play. Assessment should occur in multiple settings, including settings providing the opportunity for the child to interact with parents and with peers in play. Children must be observed when they are truly comfortable and engaged with the people they most enjoy being with.

Parents are a critical part of every assessment. Parents know their child best and can provide information about the child's likes and dislikes, development over time, and behavior in settings we cannot observe. In infancy, parents are typically present throughout an assessment process. Preschool children may be evaluated in a school setting but parents are invited to contribute their opinions through interviews or participation with their child in some parts of the assessment. Equally important, parents help identify their goals for a child and help professionals insure that intervention goals are consistent with each family's customs and culture. And parents can inform professionals when a child is not behaving in their usual manner, when information collected in the assessment process is simply not a good picture of who this child is and how s/he usually behaves.

The assessment of young children is a complex process that serves many goals. These begin with the identification of children at risk and the devel-

opment of plans for intervention services, but they do not end there. Assessment can serve as an opportunity for parents and professionals to develop a shared understanding of a child and to become partners in a team that works together to set goals and monitor progress. At its best, assessment allows parents and professionals to (1) understand a child a little better (2) develop a richer view of a child's strengths (3) more carefully describe needs so that together they may plan for a child's future.



Las evaluaciones y los niños menores

Por Marianne Barton, PhD,
Associate Clinical Professor

Department of Psychology,
University of Connecticut, Storrs

Aunque la evaluación no es más que el proceso de comparar manifestaciones de un niño con ciertas normas establecidas para determinar si su desarrollo progresa de conformidad con las mismas, enviar un niño a evaluación puede provocar inquietudes en los padres. ¿Cómo será la evaluación? ¿Qué si mi niño no satisface las expectativas del evaluador? ¿Qué participación tendré

yo en la evaluación? ¿Qué si los evaluadores no comprenden a mi niño? Son preguntas válidas que reflejan inquietudes en padres y profesionales.

Los niños menores presentan retos singulares en cualquier proceso de evaluación. Cambian con rapidez y progresan a ritmos diferentes y en formas diferentes. Los niños son muy susceptibles a los cambios de ambiente, pueden sentirse cómodos en un entorno y mucho menos en otro. Su comportamiento puede variar según su estado físico o emocional o su interacción con el evaluador. Sus rutinas familiares y experiencias culturales también influyen en sus reacciones durante el

proceso de evaluación. Por todas estas razones la evaluación de los niños menores debe utilizar una variedad de instrumentos de evaluación y contar con la participación de varios profesionales de diferentes especialidades. La evaluación debe incluir ver al niño en un ambiente natural, cómodo, con personas que le sean familiares. Debe incluir las opiniones de quienes mejor conocen al niño y son los verdaderos expertos en cuanto al mismo. Y los adultos deben mantenerse conscientes de que aun

la más cuidadosa de las evaluaciones puede captar solamente un retrato limitado de las aptitudes del niño en determinado momento. La evaluación nos permite dar un vistazo cuidadoso a sus fortalezas y retos actuales; no nos permite predecir su desarrollo con el tiempo y nunca debe usarse para caracterizar al niño.

La evaluación esta diseñada, en parte, para identificar a niños que a duras penas batallan por desarrollarse conforme a la cronología reputada como normal. Esa meta requiere instrumentos de evaluación que puedan utilizarse de la misma manera con diferentes niños, y que nos permitan comparar el aprovechamiento de un niño con el de otros de la misma edad, sexo, raza y trasfondo cultural. Estos instrumentos, conocidos como pruebas referentes a normas, deben desarrollarse cuidadosamente para asegurar que producen resultados confiables con el tiempo, que pueden medir lo que se pretende medir, y que son apropiados para niños de diferentes trasfondos. Estas pruebas están diseñadas para resultar interesantes a los niños pequeños y deben poder administrarse con flexibilidad, por ejemplo lo mismo sentados en el piso que en un lugar de juego. Sin embargo, las pruebas deben poder aplicarse esencialmente de la misma forma a la mayoría de los niños, para permitir a los evaluadores comparar el desempeño de un niño con el de un grupo mayor. Los datos resultantes de estas pruebas suelen utilizarse para determinar la elegibilidad para servicios de intervención.

Pero las pruebas referentes a normas son solo parte del proceso de evaluación. Hay otros instrumentos diseñados para observar de cerca funciones específicas con el propósito de determinar qué aptitudes ha dominado el niño, y qué aptitudes está listo para adquirir. Estos pro-

cedimientos de evaluación están diseñados para usarse con flexibilidad y a menudo incluyen la observación directa de los niños en ambientes de la vida real o de juego.

Este proceso, a menudo llamado evaluación basada en criterio, permite a los evaluadores utilizar como base los puntos fuertes del niño y diseñar intervenciones que conecten las aptitudes existentes con nuevas tareas. Las evaluaciones basadas en criterios son particularmente útiles para definir metas específicas utilizables para medir el progreso del niño y su reacción a la intervención.

El proceso de evaluación realmente útil de un niño menor debe incluir tanto los instrumentos basados en normas como los basados en criterios. Los evaluadores observan las aptitudes del niño en muchas áreas incluyendo resolución de problemas, lenguaje, desarrollo motor, interacción social, conducta y funciones de la vida cotidiana como comer, vestirse y jugar. La evaluación debe ocurrir en ambientes múltiples incluyendo algunos que brinden la oportunidad para que el niño tenga interacción con sus padres y compañeros de juego. Debe observarse a los niños cuando se sienten cómodos y conectados con quienes más les gusta estar.

Los padres son parte crítica de toda evaluación. Los padres conocen a su hijo mejor que nadie y pueden proporcionar información de lo que le gusta o disgusta, su desarrollo a través del tiempo y su comportamiento en situaciones que no podemos observar. En la infancia, los padres están típicamente pre-

sentes a lo largo del proceso de evaluación. Los niños preescolares pueden evaluarse en un ambiente escolar pero los padres deben estar

invitados a contribuir opiniones mediante entrevistas o participación con su niño en algunas partes de la evaluación.

Igualmente importante, los padres ayudan a identificar metas para el niño y ayudar a los profesionales a cerciorarse de que las metas de intervención son consistentes con la cultura y costumbres de la familia. Y los padres pueden informar a los profesionales cuando un niño no se comporta de manera usual, cuando la información recogida en la evaluación simplemente no refleja lo que el niño es y como se comporta usualmente.

La evaluación de los niños menores es un proceso complejo que sirve muchos propósitos. Comienza con la identificación de los niños en riesgo y el desarrollo de planes de servicios de intervención, pero no termina allí. La evaluación puede servir como una oportunidad para los padres y profesionales de desarrollar una comprensión compartida del niño y funcionar como socios en un equipo que trabaja de consuno para establecer metas y controlar el progreso. En el mejor de los casos, la evaluación permite a los padres y profesionales (1) comprender al niño un poco mejor, (2) desarrollar una visión más rica de las fortalezas del niño, y (3) describir más cuidadosamente las necesidades para que juntos puedan planificar el futuro del niño.

We need your help!

Please send your ideas or suggestions for future newsletter topics to Cathy.malley@uconn.edu or call 203-207-3267.

Thank you so much for your input.



Providers' Perspective

By Connecticut early childhood specialists

For a parent, assessment is one of those words that inspires a variety of reactions – mostly anxious ones. The thought of someone assessing our children brings all of our loving, protective, and defensive instincts into play. We want the assessor to see the unique and wonderful aspects of our beautiful child and at the same time, we need an expert to hear our concerns, observe the behaviors we are worried about and give us the information we need to help our little one develop to his/her potential.

Ongoing functional assessment looks at the whole child and provides us with the information we need to plan effective next steps. The following are some tips for conducting functional assessments in natural settings:

1. Visit a child's preschool classroom or daycare center. As you observe the child you can assess:
 - adaptive skills (how s/he is able to participate with getting shoes and coat on)
 - problem solving skills (how s/he gets organized with other peers around)
 - spatial awareness (e.g. how s/he decides where to sit in relation to peers to get their shoes on)
 - language development (how s/he requests help when needed, how s/he follows verbal directions, or if s/he looks for visual cues from peers)
 - fine motor skills (how s/he manipulates zippers/Velcro straps/the coat hook)
 - receptive language skills (how s/he follows the teacher's verbal cues and visual cues from peers)
 - social interaction (how s/he interacts with peers and adult providers, how the other children respond to this child)
2. Observe a child outside, at the park or on the playground. You can assess:
 - how s/he plays in a bigger space
 - how his/her motor skills are developing
 - how his/her adaptive skills are emerging
 - his/her protective responses and awareness of danger
 - how s/he reacts to various surfaces—grass, in a sandbox, on a stone surface, and on pavement



Update: Early Childhood Special Education

Maria Synodi, Coordinator
Early Childhood Special Education

“Getting to Know You ... Getting to Know all About You ...” Does that old show tune from the 1951 Rodgers and Hammerstein musical, *The King and I*, sound familiar? Well, whether it does ring a bell for some of us or not – it is the best way to describe the reason that an assessment is conducted. In special education, when a school district wants to ‘get to know you’ – in other words, get to know your child - an assessment is conducted to provide information. That assessment information can tell parents and professionals about an individual child's strengths, the child's needs, what the child knows and can do and what

the child has yet to learn and do. It can also tell us how individual children best learn and use new skills. The better the staff in a school district know your child, the better the school district staff can develop an appropriate educational program with just the right amount of supports and services.

While most of us sometimes think an assessment is just a test or a series of tests, it is often more than that. It is about the professionals involved, the information provided by parents and the child. It is a team approach. And it includes more than just tests. It can include parent interviews and information provided by parents about their child. It can include formal and informal observations of the child in various settings to see how a child demonstrates what they know and can do. It can include more than one professional from more than one specialty area. Ultimately, the infor-

mation contributed by everyone who may be looking through a variety of different lens, helps us to get to know the child.

There are many reasons for conducting an assessment. Before conducting an assessment, it is important to know what questions need to be answered. The questions can include: What do we, as professionals, need to know? What questions do we need answered? And what is the best way to obtain rich information that contributes to developing an educational plan that is based upon an individual child? Times when assessments are used can be at the time when a decision needs to be made about whether a child is or is not eligible for special education. It can be when a teacher wants to learn about a child so that he/she can plan a teaching and learning opportunity based upon what a child or group of children need to learn. Assess-

ment, can also help the professionals involved, identify whether their teaching has had an impact on the child – In other words, has the child learned and can do something new because of the special education and related services that have been provided to the child.

This year's annual Together We Will (TWW) Conference will focus on the topic of assessment. The theme

of the conference is "Assessment: It's More than a Tool". Birth to three providers, school district personnel and families are encouraged to attend and join a day with experts in the field to focus on the topic of assessment. I hope to see you all there and I hope we get to spend some time "getting to know you, getting to know all about you".



Birth to Three Update

By Linda Goodman, Director, Birth to Three System

Thanks to everyone who submitted and helped collect our annual family survey data last spring. We are now using a combination of the family survey data and child progress data to select local Birth to Three programs for monitoring. If a program's scores on both factors are lower than other programs of the same size, we will visit them to find out why and to help them improve their outcomes. All of the information that ranks the programs and all monitoring reports will be posted on the website as they are completed.

Speaking of our website, you will soon be seeing a new improved design. We hope to make it easier for both families and providers to find information. For starters, there will be a section labeled "For Families" and one labeled "For Providers." Although anyone can look at either section, we will try to group the items that will be of most interest to each audience so that anyone using the website is more likely to find the information they want.

Beginning January 1, 2010, Connecticut health insurance plans will be required to pay for autism

services. For Birth to Three, that means that we will be able to collect reimbursement from health insurance plans (with parent consent) for Occupational Therapy, Physical Therapy, Speech Therapy, and Behavioral Therapy. The requirements include:

- An annual diagnosis of autism spectrum disorder by a physician, clinical social worker, or clinical psychologist
- Prior authorization of the treatment plan (in our case, the IFSP)
- Assuring that behavioral therapy is delivered by a Board Certified Behavior Analyst or clinical psychologist or is supervised by one of those people using a ratio of one hour of face-to-face supervision for every 10 hours of service delivered
- The autism service provider agency must either be in-network with the plan or, if not, will only be able to bill plans that have out-of-network benefits.

Health insurance plans are required to pay for as many OT, PT, or Speech visits as listed in the authorized treatment plan and must pay up to \$50,000 a year for behavioral therapy services for young children (the amount decreases with age and stops at age 15).



Calendar

Please visit www.ctserc.org for more information or to register for any of the following workshops.

February 19, 2010

9:00 am to 3:30 pm

Everyday Strategies for Teaching Social-Emotional Skills

Presenter: Elsa Jones, Child Development Specialist Consultant & Anne Marie Davidson, SERC Consultant

Location: SERC Classroom, Middletown

Audience: PreK, General and Special Education Early Childhood Teachers and Support Personnel

Fee: \$45

February 24, 2010

9:00 am to 3:30 pm

Influencing Behavioral Growth in Preschoolers: The "Big" Picture

Presenter: Michael Weiss PhD, Giant Steps School Connecticut

Location: SERC Library Community Room, Middletown

Audience: PreK, 3-5, General and Special Education Preschool Teachers, Assistants, Administrators, Support Services Professionals and Family Members

Fee: \$40

March 13, 2010

9:00 am to 2:00 pm

Literacy in Action

Presenter: Ida Washington, Educational Consultant, Windsor & Paquita Sims, SERC Consultant

Location: SERC Classroom, Middletown

Audience: Birth-5, Toddler, Preschool, Kindergarten, and Early Childhood General and Special Educators and Child Care Providers

Fee: \$45

March 16, 2010

9:00 am to 3:30 pm

Using Play to Enhance Communication with Young Children

Presenter: SERC Consultants

Location: SERC Classroom, Middletown

Audience: Birth-3, Teams of 4-5

Early Intervention Teachers and Related Services Professionals

Fee: \$30

March 18, 2010

9:00 am to 3:30 pm

Improving Early Identification of Autism Spectrum Disorders in Infants and Toddlers

Presenter: Amy Wetherby PhD,

Professor of Clinical Sciences, Florida State University
Location: Four Points Sheraton, Meriden

Audience: Birth-3, Birth to Three Providers and Family Members

Fee: \$50

March 19, 2010

9:00 am to 3:30 pm

Enhancing Social Communication for Young Children with Autism Spectrum Disorders

Presenter: Amy Wetherby PhD, Professor of Clinical Sciences, Florida State University

Location: Four Points Sheraton, Meriden

Audience: Birth to Five, Birth to

Three Providers, Preschool Special Education Teachers, Assistants, Administrators, Support Services Professionals, and Family Members

Fee: \$50

April 6, 2010

9:00 am to 3:30 pm

Evaluation Report Writing Research

Presenter: Anne F. Farrell PhD, Assistant Professor, Human Development & Family Studies, University of Connecticut, Stamford

Location: Crowne Plaza, Cromwell

Audience: Birth-3, Birth to Three Teachers, and Related Service Professionals

Fee: \$40



Resources

Books:

Assessing Infants and Preschoolers with Special Needs, M. McLean, M. Wolery, & D.B. Bailey (2004), Upper Saddle River, NJ: Pearson Education. Covers issues from basic information about assessment to particulars regarding assessing young children with special needs.

LINKing Assessment and Early Intervention: An Authentic Curriculum-Based Approach, S.J. Bagnato, J.T. Neisworth, & S. M. Munson (1997), Baltimore: Paul H. Brookes. Identifies critical markers for judging quality in assessments and providing snapshots of the "best" curriculum-embedded and curriculum-compatible assessment and intervention systems.

Skilled Dialogue: Strategies for Responding to Cultural Diversity in Early Childhood, J. Barrera, R.M. Corso, & D. Macpherson (2003), Baltimore: Paul H. Brookes. Helps practitioners understand the challenges of collaboration with family members whose values, beliefs, and backgrounds may differ from their own.

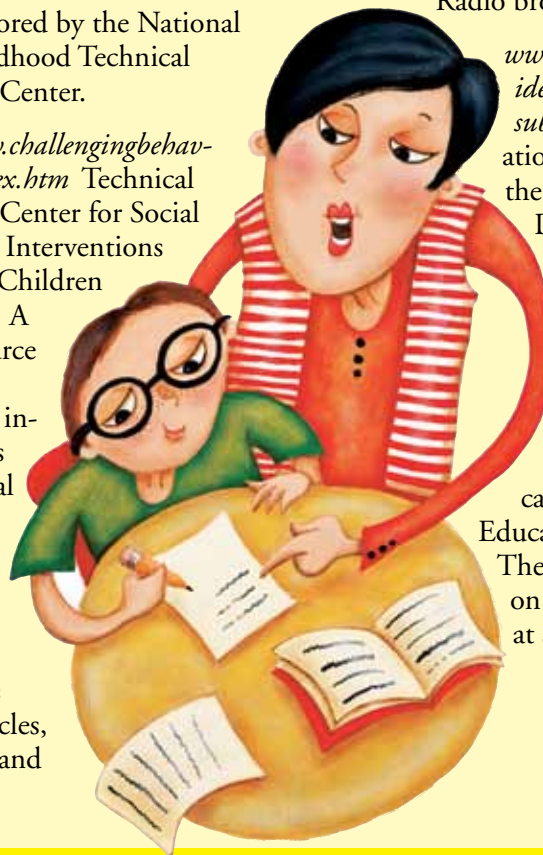
Websites:

<http://www.nectac.org/~ppts/calls/RecAssessSlides/sld001.htm> A PowerPoint slide presentation of Recommended Practices for Assessment in Early Childhood Settings by Dr. John Neisworth and Dr. Stephen Bagnato from 2001 Conference Call sponsored by the National Early Childhood Technical Assistance Center.

<http://www.challengingbehavior.org/index.htm> Technical Assistance Center for Social Emotional Interventions for Young Children (TACSEI). A good resource on assessments and interventions in the social emotional areas of development. Resources section has several articles, handouts, and brochures.

<http://www.naeyc.org/positionstatements/cape> The National Association for the Education of Young Children, Position Statement on Curriculum, Assessment, and Program Evaluation. Access to the archived digital issues of Young Children magazine and archived NSEYC Radio broadcasts.

www.wrightslaw.com/idea/law/idea.regs.subpartd.pdf Evaluation requirements in the Individuals with Disabilities Education Act, Part B (Special Education 3-21). Subpart D concerns Evaluations, Eligibility Determinations, Individualized Education Programs, and Educational Placements. The regulatory section on evaluations begins at section 300.301.



BIRTH through 5 news

Information for Families and Professionals

is published periodically by the University of Connecticut Cooperative Extension System in collaboration with the Connecticut Birth to Three System, the Connecticut State Department of Education and the Newsletter Advisory Board. We welcome readers' comments and contributions related to the special needs of infants, toddlers, preschoolers and their families. Please mail correspondence to the editor at 67 Stony Hill Road, Bethel, CT 06801.

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Parents' Perspective

By Sally Hulk

My daughter, Lauren was 17 months old when I called the Child Development Infoline to request an evaluation through the Birth to Three System. For several months, my husband and I had sensed that our daughter was different than other children. She struggled to acquire skills like crawling, walking, and talking that seemed to come easily and naturally to other children her age. We wanted to know the extent of Lauren's delays, and to get her help.

I felt both relieved and anxious when the Birth to Three team arrived at our door to assess Lauren. On the one hand, I was reassured that someone would be addressing our concerns about Lauren's delays. Yet, I also worried about why she was struggling. During the evaluation, the Birth to Three staff was so patient and engaging with Lauren. They asked my husband and me questions about Lauren, and explained the evaluation process to us.

Lauren initially qualified for physical therapy services through the Birth to Three System to help her with her gross and fine motor skills. By the time she turned three years old, Lauren was also receiving speech and occupational therapies.

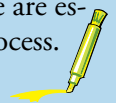
The second stage of assessment occurred during the transition process from the Birth to Three System to our school district's preschool special education program. The school team requested and received updated assessment reports from the Birth to Three team, and then held a PPT meeting where my husband and I and the Birth to Three staff all shared information about Lauren. Then, the preschool teacher observed Lauren at her day care center. Lauren qualified for special

education services, and started the preschool program after her third birthday. About three months after Lauren started preschool, the PPT team – including my husband and myself – decided we needed further information about Lauren. We all felt there was something that we could not put our finger on that was impacting her development.

Further testing revealed that Lauren had an intellectual disability, which explained why she was slow to learn skills in all areas of development. Again, I felt relieved to have an answer as to why Lauren struggled. But it also took time for me to come to terms with the reality that Lauren would not outgrow her delays.

How did my husband and I prepare for Lauren's assessments, and to feel part of the process? We found it helpful to research what skills children should acquire by what age, and then to prepare a list of concerns we had about Lauren to share with the evaluator. We also learned the importance of discussing Lauren's strengths, successes, and interests, and to not focus only on the things with which Lauren needed help. The Connecticut Parent Advocacy Center (CPAC) has a tool called the "Positive Student Profile" which we use as a guide to help us to identify things to share with a team or evaluator. We also make sure to understand what areas of development or learning the evaluator is assessing, and how the evaluation will be used to guide the team in providing support to Lauren.

The best piece of advice I can give parents is to remember that we know our children best. We have valuable information to share about our children. As parents, we are essential to the assessment process.



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Este boletín está disponible en inglés y en español. Visite el sitio del Sistema para Infantes a Tres Años en www.birth23.org y pulse a Publicaciones o el del Departamento de Educación en www.sde.ct.gov. Pulse entonces el enlace 'Early Childhood' (primera infancia).

ICC Update

By Mark A. Greenstein, MD,
ICC Chairperson

Hello all,

These notes are always written months in advance. It is another roller coaster time. Budgets, influenza, cutbacks...not an easy time. Yet through all this, parents and families keep on helping not only their children, but others as well. Among those are the parents who serve on the State's Interagency Coordinating Council (ICC). We are a friendly group and it is so helpful to have parents share their thoughts and insights as we all work to help the lead agency help the children in our Birth to Three System. We are always looking for parents who would like to share their thoughts and work with us. If you are interested in joining or would like to learn more about the ICC, please contact Anna Gorski, ICC staff sup-

port, 860 418-8716 or Anna.gorski@ct.gov, or better yet, join us at a future meeting!

Here are the thoughts of one of our members. I cannot say what she says any better; please read it and see what I mean about how valuable parent and family input and support can be.

"As more and more children with learning disabilities, developmental delays and health challenges are diagnosed each day, it's comforting to know that the appropriate resources and supports are available and in place, to help parents take the vital steps necessary to support their child's development. All children have the right to independence. They have the right, as they mature, to find out who they are, explore the world, and establish a life for themselves. As a parent of a challenged child, my participation on the ICC, to further empower other

parents through policy, education and awareness, has been extremely rewarding. Our willingness, as parents, to share our hard-won knowledge with other ICC members and the many families that are affected by our decisions, is of the utmost importance. Our voices not only champion those causes which face our children today, but also beckon to those who come after us to continue our work. The advancement of advocacy to help all children live well is no longer a dream. While many challenges remain, our accomplishments have done wonders to help our children ultimately live full, productive, happy, and satisfying lives! For this I am deeply grateful and remain ever optimistic of our future goals. I strongly urge all interested parents to join us in helping to further our cause...together we do make a difference."

Elise Minor, Parent -
ICC Member

