

## **DISABILITIES / MENTAL HEALTH SERVICE AREA**

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## **2 DISABILITIES SERVICE AREA**

The Disabilities component of Luzerne County Head Start complies with the 1972 mandate requiring that at least 10% of the program enrollment consists of children with disabilities. Children and their families receive the full range of HeadStart services. In addition, Head Start staff members work closely with community agencies to provide services to meet the special needs of the child, following an IEP (Individualized Education Program).

Children can not be denied placement depending on the severity of their disability.

## **2 MENTAL HEALTH SERVICE AREA**

The objective of the Mental Health component is to provide for prevention, promotion and early intervention that best supports the social/emotional development of young children and their care givers. We provide children with social/emotional support through the curriculum, materials, and parent education. Parents are referred to necessary services in the community which will ensure that the child and family achieve the full benefits of participating in the program. A certified play therapist is available to meet with staff and parents to help meet the mental health needs of the child and family.

A happy and healthy child wants to learn and will learn if the conditions around him/her are right for learning.

## **2 INCLUSION**

Emphasis has been placed to include children with special needs into the least restrictive environment. Evidence has shown that inclusion is "psychologically healthy". Children with disabilities develop social and emotional gains and show subsequent academic progress over a child who is placed in a preschool special education classroom. The non-disabled child learns to accept all differences in society.

## **2 SCREENING**

A child must receive the initial screening for developmental, sensory and behavior concerns within 45 days of the child's entry into the program. The Teacher will administer the Ages and Stages Developmental Questionnaire at the in-home orientation to address physical, communication, problem solving, and social emotional development. All children are screened regardless if they are a second year returning child or have an IEP already in progress. The teacher will input the date into ChildPlus.

## **2 INDIVIDUALIZED EDUCATION PROGRAM (IEP)**

All children diagnosed as having a disability have an I.E.P. (Individualized Education Program) developed by a multidisciplinary team to include the parent, Early Intervention representative and

therapist with input from the Head Start teacher. Education and/or related services are provided according to the I.E.P, based on the child's present level of understanding and needs. Related services could include speech therapy, (OT) occupational therapy (PT) physical therapy, vision and hearing therapy, transportation, supportive intervention, and behavioral intervention. An IEP is updated annually.

### **3 SPEECH THERAPY**

Speech therapy is provided weekly at each center, depending on the child's need, as specified on the child's I.E.P. Some children are taken out of the classroom so the therapist can work on specific speech skills. A list of the children receiving therapy should be in each classroom. Study trips should not be scheduled on speech therapy days.

### **3 INTEGRATED THERAPY**

Integrated therapy is an innovative type of programming where therapeutic services are provided in the child's natural setting in the classroom. The teacher and therapist develop activities that can be incorporated into the child's daily routine. An Itinerant from Early Intervention meets monthly with teachers to provide Technical Assistance for individualizing and monitoring of IEP goals for children with a developmental delay diagnosis.

### **3 WHAT IS A TSS/BSC?**

A TSS is a Therapeutic Staff Support and a BSC is a Behavior Specialist Consultant assigned from a mental health agency to work within the classroom with a specific child with a behavioral diagnosis. The TSS follows a behavioral plan to work on the child's emotional and behavioral needs. If a TSS is not assigned to a child and the child has qualified for hours with the agency, a BSC will work with the child based on the child's needs in the classroom on a monitoring basis. TSS workers and BSC's will read and sign a Luzerne County Head Start Protocol for Non Head Start Staff to assure quality programming within our classrooms.

### **3 TRANSPORTATION FOR CHILDREN WITH A DISABILITY**

Special Education and related services are provided at each center by Early Intervention. In an area where Head Start doesn't provide transportation, Early Intervention will provide transportation for a child with a full IEP. It will be documented on the child's IEP. The Head Start fleet complies with the Americans with Disability Act of 1990.

### **3 REFERRAL PROCESS**

1. Any child who scores in the refer range on the education screening (ASQ-3 and ASQ;SE) and/or may have emotional or developmental concerns observed in the classroom setting, should be discussed with the ECE/Disability Specialist.
2. Teacher will give a copy of the ASQ screening to the Early Intervention Service Coordinator as soon as completed.

3. ECE/Disabilities Specialist will meet with the LEA (Local Education Agency) Itinerant Teacher to review the screenings and recommendations.
4. If further assessments are recommended, the Teacher will make the parent aware of the process.
  - a. Review the screenings, present level and strengths of the child, and concerns observed.
  - b. Ask parents for suggestions and observations. Always involve parents as a partner.
  - c. Explain to parent we want further testing done so we can develop an individual program for their child. Further assessments will be administered by Early Intervention or mental health agency.
  - d. Explain that the referral process will begin with a signed parental consent form. The Early Intervention or mental health agency will be sending out the permission to evaluate.
5. After obtaining a signed consent from parent/guardian the LEA will administer a more extensive developmental assessment. Parents are asked to complete a Family Information Packet for Early Intervention to help develop goals. Teachers complete a similar packet.
6. An Early Intervention Teacher or mental health specialist will observe the child and administer appropriate testing, if needed.
7. Results of testing will be reported back to appropriate staff by the Early Intervention Teacher.
8. Results will be explained to parents by a scheduled conference. The agency will schedule a convenient time with parent and inform the Head Start teacher.
9. An IEP (Individualized Education Program) and/or Behavioral Prescription is developed by a team which may include the parent, appropriate agencies, therapists and Head Start staff. Copies of the plan will be given to team members.
10. Teacher should review and give parent a copy of A Family's Introduction to Early Intervention in Pennsylvania; making sure to explain family educational rights and privacy act and supports and services offered to families. Also given to families are other supporting documents about Early Intervention and children's development.
11. ECE/Disabilities Specialist will secure results of testing (Evaluation report), the permission to evaluate, and the IEP. All data will be entered into ChildPlus. A copy of the IEP or Behavioral prescription will be kept in the child's file at the center to individualize goals on the lesson plans.
12. Further Assessments will be administered by a licensed professional if recommended by the team.
13. Individual instruction will be provided by the classroom staff, under the direction of the

Teacher following the IEP goals and objectives. Teacher will use IEP goals for creating meaningful experiences in the classroom on lesson plans to address the specific needs of the child. Other related services will be scheduled as needed. Early Intervention support staff may provide technical assistance according to the IEP.

14. A transition meeting will be held in February with the teacher, parents, school district and Early Intervention staff in order to provide for a productive year and smooth transition into the public school. Additional tests may be administered to a child. The district will discuss placement options with the parent. The parent will be encouraged to observe the classrooms.

## **5 PARENTAL CONSENT**

Written parental consent is obtained prior to any testing or release of information sent to different agencies or school districts. Parents are updated during each process.

## **5 PARENT CONFERENCES**

Parents are involved in each step of the referral process. Parent conferences are held to review assessment, discuss concerns parents may have at home or in school and to help write an Individualized Education Program (I.E.P.) for their child with a disability. It is vital for you to encourage parents to be an active part of this process. This will better prepare them to become advocates for their child throughout school.

## **5 PARENTS' RIGHTS AND EDUCATION**

Parents are provided information throughout the year and during Parent/Teacher conferences. The Teacher provides them with A Family's Introduction to Early Intervention in PA at the IEP Conference that includes information on IDEA (Individuals with Disabilities Education Act) , Early Intervention services, IEP process and transition information. The information educates parents to become more knowledgeable about the Early Intervention System. This is made available to parents of children with disabilities to better prepare them for the placement of their child into the public school system. Parents will be informed about useful workshops pertaining to their child's special needs throughout the year.

## **5 MENTAL HEALTH INPUT FORM**

Families are given the opportunity two times a year to share concerns they have about their child's social emotional development with their child's teacher. Teachers are able to provide resources to the family based on their concerns about their child. If a family requests additional support, referrals to the Certified Play Therapist can be made through the Trauma Request form.

## **5 MENTAL HEALTH OBSERVATIONS**

After the ASQ:SE is completed, the teacher will identify if a child needs to be referred to the ECE Specialist that is responsible for that region. The teacher will administer the ASQSE in the home

to get a home score and will administer it again in the classroom if the child is exhibiting challenging behavior in the classroom. If the child scores in the refer range for the home score, the ECE Specialist will provide resources and strategies for the family. If a child scores in the refer range for the classroom, Step 1 of the Positive Guidance will be started. The Behavior Protocol will be started with a discussion and signature from the family. In Step 2 of the Positive Guidance, the teacher will reflect on their teaching practices, routine, and environment in the classroom. In Step 3 of the Positive Guidance, the ECE Specialist will make recommendations for individualized strategies and additional supports for the child. After the ECE Specialist has made recommendations and the child continues to show behavioral concerns, the Certified Play Therapist according to Step 4 of the Positive Guidance will observe the classroom as a whole, the education staff's interaction with the children, behavior management techniques, and the child's interaction with his/her environment and peers.

The Certified Play Therapist will meet with the teacher and discuss concerns the education staff has for specific children. The Certified Play Therapist will review the Positive Guidance and notes from the Early Childhood Specialist prior to the visit. The Certified Play Therapist will determine if follow up observations need to be made after the initial observation. If needed, a meeting may be scheduled with the parent to discuss concerns and provide referrals to outside agencies or therapists.

## **6 TEAM MEETINGS**

The teaching team and Family Workers will meet monthly to discuss each child's needs and strengths. IEP and Behavioral Prescription revisions and related services will be reviewed and documented.

## **6 SCANNING PROCEDURE**

### Applications

Disability Specialist will remove attached disability documentation when application is received to review. Disability Specialist will scan all paperwork into a folder that is saved in the computer and the hard copy will go into a locked drawer. Once child's information has been uploaded in ChildPlus, the information will then be uploaded into the Disability attachment of ChildPlus, and the folder will be deleted from the computer. The hard copy will be given to the teacher for the child's file.

### IEP's, Evaluation Reports, and Permission to Evaluate

Disability Specialist will receive the paperwork directly in the mail from Early Intervention. Disability Specialist will then scan the documents into the child's attachment section in the Disability section of ChildPlus. The hard copy will then be given to the teacher for the child's file.

### Mental Health Observations and Behavior Plans

Disability Specialist will receive the Behavior Plans from the teacher. Disability Specialist will then scan the documents into the child's attachment section in the Mental Health section of ChildPlus. The hard copy will then be given to the teacher for the child's file. The observations and recommendations from the Mental Health Specialist will be received through a secure server via email. The paperwork will then be uploaded into the Mental Health Section of ChildPlus by the Disability Specialist.