

**MEMORANDUM**

**TO:** Directors of Special Education, Coordinators of Early Childhood Special Education Programs and Special Purpose Preschools

**FROM:** Colleen Riley, KSDE Early Child Special Education Services  
Tiffany Smith, KSDE Early Child Special Education Services  
David Lindeman, KITS

**RE:** Recognition of Application of Best Practice in Early Childhood Special Education

**DATE:** 26 September 2011

We are pleased to announce a request for applications to recognize as many as four (4) programs across the state that have incorporated innovative component(s) of best practice into their early childhood special education program. An amount of \$1,250 will be awarded to programs identified as demonstrating a best practice by a panel of early childhood professionals in Kansas.

Please disseminate this information to the appropriate people within your organization, as we want to acknowledge your many outstanding accomplishments and dedicated professionals in early childhood special education.

Applications must be postmarked on or before **Friday, January 13, 2012**.

Mail the completed application (**original and 4 copies**) to:

Dr. David Lindeman  
KITS Project  
KUCDD Building  
2601 Gabriel  
Parsons, Kansas 67357

**Please forward or give to staff in  
Early Childhood Special Education Programs**

**Kansas University Center on Developmental Disabilities**

Kansas Inservice Training System  
2601 Gabriel | Parsons, KS 67357-2399  
(620) 421-6550 Ext. 1618 | V/TTY (620) 421-8367  
Fax (620) 421-0671 | [kskits@ku.edu](mailto:kskits@ku.edu)

**APPLICATION FOR RECOGNITION OF BEST PRACTICE IN SERVICES**  
**Part B Programs**

Date Submitted: \_\_\_\_\_

Name of Program: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

Name of Agency: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

Circle (only one) the Best Practice Component you are addressing:

- |   |  |
|---|--|
| A. Child Find/Screening/Identification/<br>Assessment | F. Use of IFSP in Preschool Setting      |
| B. Family-Centered Services                           | G. Integrated Service Delivery           |
| C. Transition from Part C to Part B                   | H. Inclusionary Environments             |
| D. Transition from Preschool to Kindergarten          | I. Developmentally Appropriate Practices |
| E. School/Community Collaboration                     | J. Other: _____<br>_____                 |

Proposal Contact Person: \_\_\_\_\_

Contact Person Telephone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Potential use of the money: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Network Representative: \_\_\_\_\_

Signature of Network Representative: \_\_\_\_\_

Name of Local Newspaper: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

## APPLICATION FOR RECOGNITION OF BEST PRACTICE IN EARLY CHILDHOOD SPECIAL EDUCATION (ECSE)

The Kansas State Department of Education is requesting applications for recognition of "best practice" in the delivery of special education services to young children, ages three through five, with disabilities and their families from across the state of Kansas.

### RECOGNITION OF RECIPIENTS

As many as four recipients will receive recognition based on review by a peer panel. Each recipient will be given a certificate and an award of \$1,250. Review of applications will be completed prior to the 2012 KDEC Conference in Wichita on February 23-24, with the initial announcement of the recipients at the conference. Also, notice of recognition will be given to the contact person on the application for release to the LEA's advisory and school boards, information will be provided to the local newspaper, and a description of the programs identified will be in the KITS newsletter.

### CRITERIA FOR AWARDS

Applications are to include the cover sheet with a text of a maximum of four (4) pages (not including cover page form) in length using 12 point font (not including addendum), one inch margins and follow the enclosed outline. Each section of the application should have the same heading as the outline (sections A through F) and should reflect the vision of services presented in the Kansas Mission Statement for Services for Children Birth Through Five Years of Age (mission statement is included). Addendum might include information referenced in text such as example needs assessment form, citations for evidence base supporting this practice, program descriptions, or other supportive information. Applications should include data as it relates to the application. For example, if a survey is used, data from that survey should be included; if a specific intervention approach is described, child change data as a result of the intervention should be reported; or if a memorandum of understanding is described that MOU should be a part of the appendix. Services described must demonstrate the application of best practice, go above and beyond the minimum requirements of IDEA (Individuals with Disabilities Education Act), and, to the extent practicable, reflect application of peer-reviewed research practices. Local education agencies (LEAs), agencies collaborating with an LEA, special education cooperatives, and KSDE approved developmental preschools or special purpose schools may apply.

### COMPONENTS OF THE APPLICATIONS

"Best practice" is defined as an approach based upon an evidence-base in the delivery of special education and related services to preschool children and their families. Evidence-based practice has been defined as "a decision-making process that integrates the best available research evidence with family and professional wisdom and values" (Buisse & Wesley, 2006). Each application should address one of the following components or may address a self-identified component. Applications addressing other areas are encouraged.

(A). Child Find/Screening/Identification/Assessment - An activity that occurs within the identification process that demonstrates best practice. Examples may include the following: assessments that are play based, family guided, transdisciplinary, or arena based; interagency screening activities; child find, or cost effective public awareness activities; or follow-up monitoring of students not referred for a comprehensive evaluation.

(B). Family-Centered Services - The infusion of family guided services that may include the following: parents as team leaders, parents as trainers, parents in policy development, or parents in decision making roles. Examples may also include practices to increase the involvement of families of diverse cultures and native languages.

(C). Transition from Part C to Part B - A collaborative inter/intra agency approach to the transition from Part C to Part B services. Examples may include the following: comprehensive planning for transition, family involvement, use of an IFSP for children entering Part B services, assessment preparing for transition, or follow-up after the completion of the transition.

(D). Transition From Preschool to Kindergarten - A collaborative inter/intra agency approach to transition from preschool to kindergarten. Examples might include: parental involvement, planning conducted between sending and receiving programs, staff training related to transition or follow-up following transition.

(E). School/Community Collaboration - Comprehensive interagency services that would provide unique options for families. Examples might be the utilization of Head Start, community based preschools and childcare, Evenstart, Chapter I, and teen parenting programs.

(F). Use of IFSP in Preschool Setting - The use of an IFSP is permissible for children age 3 through 5. Examples might include the following: the change process from using an IEP to an IFSP; how Part B requirements are met through the IFSP, or changes in parental involvement as a result of using an IFSP.

(G). Integrated Service Delivery - The infusion of related services into the total curriculum and daily routine of the classroom. Examples might include components of the following: thematic learning, transdisciplinary teaming, integrated therapy, and functional IEP development.

(H). Inclusionary Environments - Unique utilization of resources to provide diverse, educational environments for young children. Examples may include the following: the development of peer modeling and/or social interaction projects in community settings.

(I). Developmentally Appropriate Practices for All Children - Programming efforts that move toward a unitary system for all children that is activity based and developmentally appropriate. Examples may include the adoption of NAEYC Accreditation standards, or adopting activity based approach to intervention.

(J). Other – Self-identified component of services that apply best practice such as early childhood curriculum and alignment with Kansas Early Learning Guidelines and Standards;

State Performance Plan (SPP) indicators, progress of children in Early Childhood Outcome (ECO), areas of early language/communication, literacy, and social emotional development; readiness for kindergarten; universal design and evidence-based instructional strategies to address the special needs of young children with specific disabilities.

#### PROCEDURE FOR THE AWARDS

A committee of early childhood professionals will select the recipients from the applications. Please make sure to complete the cover page with contact information. **Return one original application and four copies postmarked by January 13, 2012** to:

Dr. David Lindeman  
KITS Project  
KUCDD Building  
2601 Gabriel  
Parsons, KS 67357.

APPLICATION OUTLINE  
(100 TOTAL POINTS)

**Please use the following headings to ensure all points are covered in the proposal**

**A. PLEASE DESCRIBE THE PROGRAM COMPONENT THAT DEMONSTRATES YOUR APPLICATION OF BEST PRACTICE, INCLUDING A CLEAR DESCRIPTION OF THE PROGRAM SETTING. (25 points)**

This section should clearly identify and describe the best practice component of your service program. Include a brief background of the program including a description of the model of service delivery, classroom or caseload composition, staffing patterns, numbers of students (including ratio of typically developing children to children with disabilities), and how many families/staff/students are affected by implementation of the practice. Provide a clear description in the changes the program has undergone in the component area. Provide data to reflect change where appropriate. I.e. if area of best practice is public awareness to increase number of children screened, provide numbers involved in screening activities before and after component or activities were initiated.

Reviewer's questions:

- Do you clearly understand the best practice component described?
- Do you clearly understand the program model and demographics?
- Does the application provide information (data) on circumstances that prompted the utilization of the best practice?
- Does application reflect the evidence base literature for the practice?
- Is there sufficient detail to understand how practice is applied to all services/settings in the agency?

**B. IDENTIFY THE SPECIFIC UNIQUE QUALITIES OF THIS PRACTICE THAT ARE EXEMPLARY AND BASED ON EVIDENCE. (25 points)**

This section should clearly describe the distinctive qualities of the practice and demonstrate how the practice goes beyond the minimum requirements of IDEA. Include specific citation for evidence base supporting this practice.

Reviewer's questions:

- Are the practices listed for this project evidence-based?
- How are the qualities listed unique?
- Are examples of the practice provided?
- Does the application address an identified need?
- Does the application provide data on the impact of the practice?

**C. DESCRIBE THE PLANNING THAT WENT INTO THE DEVELOPMENT OF THE PRACTICE, (20 points)**

This section should delineate the process the program went through from inception to the delivery of the service and should describe the participants and resources involved in the planning.

Reviewer's questions:

- How was the need for change identified  
(Was needs assessment conducted?)
- How does need relate to existing program goals? (Child/family outcomes?)

- What goals/outcomes were developed to meet identified need(s)?
- How was progress toward meeting goals/outcomes to be measured?
- Were all parties involved in preplanning (staff, families, collaborative partners)?
- Are there plans to implement the practice system wide? How?

**D. DESCRIBE STAFF DEVELOPMENT ACTIVITIES AND HOW STAFF WAS PREPARED TO IMPLEMENT THIS PRACTICE? (15 points)**

This section should describe staff development activities from needs assessment to how training was delivered and evaluated.

Reviewer's questions:

- How were training needs identified?
- Have all parties (families, staff, partner programs) involved in the services participated in training?
- How will you know that training has met identified needs?

**E. DESCRIBE THE SUPPORT AND HOW YOUR ADMINISTRATION (BOARD OF EDUCATION, SUPT., ETC.) HAS CONTRIBUTED TO THIS PROJECT? (10 points)**

This section should describe the initial and continued involvement of administrative staff.

Reviewer's questions:

- Was administrative support enlisted and has this support continued?
- Are specific administrative support activities described?
- What specific supports/plans are in place to maintain this practice in the future?

**F. A MINIMUM OF TWO LETTERS OF SUPPORT MUST BE INCLUDED. THESE LETTERS SHOULD BE FROM FAMILIES, COLLABORATING PROGRAMS, AND/OR OTHER PARTICIPATING AGENCIES. THE TWO REQUIRED LETTERS ARE NOT TO COME FROM PERSONS WORKING WITHIN THE SUBMITTING AGENCY. HOWEVER, ADDITIONAL SUPPORT LETTERS FROM WITHIN THE AGENCY WOULD BE OF BENEFIT. (5 points)**

The letters should provide verification of the best practice nature of the program.

Reviewer's questions:

- Is there a minimum of two support letters, including families, collaborating programs or participating agencies?
- Are there additional support letters, e.g. administrators?

## MISSION STATEMENT

### SERVICES FOR CHILDREN BIRTH THROUGH FIVE YEARS OF AGE

Early intervention provides the necessary services to enable young children who experience or are at risk for developmental delays to progress toward the maximum of their abilities. When these services are provided in a timely and appropriate manner, and in the context of the family, the need for further intervention can often be eliminated or reduced.

The family should be the primary focus in assessment and intervention activities. Collaboration with the family is essential to meet the developmental needs of young children.

Recognizing the variable nature of young children's performance and the potential for rapid change in their developmental status, assessment and diagnosis should be undertaken with caution. Assessment should focus on children's developmental needs and be linked directly to intervention. Consequently, administrative structures and funding mechanisms for services to young children should not require assigning specific diagnostic labels.

No single agency is capable of meeting all the needs of young children with or at risk for developmental delays. The utilization of interagency collaboration is essential and will produce the most comprehensive and uninterrupted services. These services should be multi-disciplinary, and to the maximum extent appropriate, delivered in settings which are typical for young children and should include a predominance of normally developing children.

Coordinating Council on  
Early Childhood  
Developmental Services  
Adopted January 1995

EVALUATION OF BEST PRACTICE IDENTIFICATION PROCESS  
IDEA Part B Preschool Programs

Participants:

Whether you complete the application or not, we would like your input regarding this process for self-nomination. Would you please take a few minutes and answer the questions at <https://www.surveymonkey.com/s/XTKMBD3>