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## **Initiating change at the local level: Delivery of Educational Services to Students with Moderate to Severe Handicapping Conditions**

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Initiating Change at the Local Level :

Delivery of Educational Services to Students with Moderate to Profound Handicapping Conditions<sup>1</sup>

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Running head: *Initiating Change*

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### Abstract

This article describes program initiatives undertaken by a rural educational cooperative in an effort to bridge the gap between "current best practices" and local educational program opportunities for school-aged students with moderate, severe, and profound handicapping conditions. It compares previous program characteristics with current practices in areas such as educational placement, student groupings, curriculum, community-based instruction, therapeutic services, and post-school preparation. Factors which influenced major program changes discussed.

Initiating Change at the Local Level :

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What the field of Special Education accepts as "current best practices" are frequently generated through University-based programs where highly trained faculty work with government grant monies and motivated graduate students to develop model programs designed for use by practitioners. While the work done in University settings is a vital component to advancing the state of the art, generalization of model programs from atypically endowed college communities to local school systems is a concern since such models are of limited practical value unless they can be replicated in the real world. In order for the foundational work conducted by the nation's universities to be tailored to the variety of unique school situations, individually designed strategies must be developed to assist in the process of transference. Due to factors such as history, inertia, turf, funding mechanisms, and politics, the main responsibility for initiating those strategies lies squarely with local education agencies.

This article describes one rural educational cooperative's attempt to bridge the gap between "current best practices" and local programs. The program components explained herein are not presented as models or ultimate answers, rather as positive samples of what can happen when schools become proactive.

### The System

The Cayuga-Onondaga Board of Cooperative Educational Services (BOCES) is an educational cooperative located in the eastern Finger Lakes region of central New York State. It serves one small city school district and eight additional districts in a primarily rural region. A total population of approximately 85,000 people is dispersed across 744 square miles of territory. The BOCES offers direct instructional services to students with special educational needs, occupational education for nonhandicapped high school students and adults, as well as a variety of other educationally relevant supportive services.

During the 1984-1985 school year, program initiatives were undertaken to bridge the gaps between existing services and those generally considered to be the best known current practices (Bates, Renzaglia & Wehman, 1981; Horner, Meyer & Fredericks, 1986) for 110 students identified as having moderate, severe, or profound handicapping conditions. The following section describes major program components from the viewpoint of recent historical perspectives as well as current practice and proposed future directions.

### Major Program Components

#### Educational Placement

Although the professional literature is filled with articles about the integration of students with severe handicaps (Brown, Ford, Nisbet, Sweet, Donnellan, & Gruenewald, 1983; Gilhool & Stutman, 1978; Hamre-Nietupski & Nietupski, 1981; Taylor, 1982), reality reminds us that the transformation has been incomplete, with a relatively small number of school districts truly embracing a zero-reject commitment for the inclusion of all students in integrated

public school settings regardless of the intensity of the handicapping condition.

Like many districts around the country, Cayuga-Onondaga BOCES had a history of providing segregated programs for students with moderate to profound handicaps. The 1984-1985 academic year saw approximately 45 school-aged students with severe handicaps isolated from their nonhandicapped peers. At that point in time no plan was in place to alter this situation, and in reality, it was not widely perceived as a major issue among local educators.

The 1985-86 school year marked the beginning of a plan for including all students with moderate to profound handicaps in integrated schools with nonhandicapped peers of the same chronological age within their home school district or as close to it as possible. September 1985 saw nine of twelve classrooms including 95 of the 110 students located within chronologically age-appropriate integrated schools. Included in this integration effort was the establishment of a classroom for students ages 18 - 21 with moderate to severe handicaps at Cayuga Community College. Plans for the 1986-87 school year call for all 12 classrooms serving 110 students, to be located in integrated public schools.

### Student Groupings

Prior to the 1984-85 school year, students identified as having the most severe handicapping conditions typically were grouped homogeneously. Such groupings provide poor models for social and communicative interactions (Guralnick, 1981), make group and community-based instruction difficult, and lead to high staff turnover due to burnout (Fimian & Santoro, 1983). Even given quality staff, such classrooms are at best less than adequate settings for instruction and at worst may be dumping grounds for the most severely handicapped and socially maladjusted.

While homogeneously grouped classrooms still exist in the Cayuga-Onondaga BOCES area, a three-phased approach was instituted to address this concern. During 1985-86, homogeneous class sizes were reduced from a maximum of 12 to six and were grouped by chronological age at the elementary, middle school, and high school levels. Secondly, new students entering the program were placed in heterogeneously grouped classrooms. Staffing and/or class size was altered to ensure appropriate support for students. No more than one to three students identified as severely or profoundly handicapped were placed in any single classroom with other students functioning in the moderate range of mental retardation. Thirdly, students already placed in homogeneous classes were dispersed into heterogeneously grouped classrooms. During the 1986-87 school year it is projected that 100 of 110 students will be heterogeneously grouped in this fashion.

### Curriculum

No system-wide curricula were employed prior to the 1984-1985 school year. Since each teacher selected his or her curricula individually, children who moved through the system were greeted by well intentioned yet disjointed programming which was not directed toward any identified outcomes.

Faculty members developed a functional curriculum-based assessment entitled Cayuga - Onondaga Assessment for Children with Handicaps (Giangreco, 1986a). The Cayuga - Onondaga Assessment for Children with Handicaps (COACH) represents a longitudinal view of program assessment and planning which encourages a balance between the two major curricular components, environmental and cognitive, as well as a shifting of curricular emphasis depending upon the learner's chronological age and individually prioritized needs. This balance

and shifting is characterized by a heavier emphasis on direct instructional approaches to teaching cognitively geared curricula during the elementary years. The emphasis gradually shifts toward more functional life skills at the middle school and secondary levels.

### Community-Based Instruction

Instruction prior to the 1984-1985 school year was almost exclusively school-based. Ventures into the community consisted of episodic "field trips" with the focus being primarily experiential and where entire classes travelled together. These large group excursions resulted in significant imbalances between the natural proportion of persons who were nonhandicapped compared to those that were handicapped at a particular community site (Taylor, 1982). The result of this en masse approach was frequently undesirable. What started out as well intentioned "field trips" ended up as "Handicapped Day at the Grocery Store" with students attracting undue negative attention due to their disproportionate numbers.

Recently community-based instruction has emerged as major component of educational programs for students with severe handicapping conditions (Hamre-Nietupski, Nietupski, Bates, & Maurer, 1982; Falvey, 1986; Snell & Browder, 1986). Partly, this has occurred because the focus of curriculum has shifted away from strict developmental models toward teaching activities which have contextual relevance for learners in current and potential future frequented environments (Brown, Branston, Hamre-Nietupski, Pumpian, Certo, & Gruenewald, 1979). Additionally, many researchers and practitioners believe that as the cognitive functioning level of learners becomes lower, instructors must be increasingly concerned about the learners' ability to generalize acquired behaviors (Brown et al, 1983; Giangreco, 1982). Ultimately, skills learned in school are only useful if they can be applied in the settings and



under the conditions where they typically are employed.

In an effort to provide such natural environment instruction, a longitudinal approach to instruction was instituted characterized by increasing amounts of community-based training augmented by in-classroom instruction. Unlike traditional "field-trips", community-based instruction is ongoing rather than episodic. It extends beyond the experiential level by teaching activities that are required for the person to maximally participate in the identified environment. This maximal participation includes the options of partial participation and/or use of individualized adaptations (Baumgart, Brown, Pumpian, Nisbet, Ford, Sweet, Messina, & Schroeder, 1982). Community training sites extend from primarily the school and neighborhood at the elementary level to purchasing, recreational, domestic locations and public transportation training at the middle school or junior high level. During the high school years all of the aforementioned areas continue as potential instructional sites with the addition of a community-based vocational component

In order to promote community acceptance and form manageable student groupings, typically a staff member accompanied no more than three heterogeneously grouped students into the community for instructional purposes. Generic community resources represented a viable way to ensure community training without large expenditures of money (Falvey, 1986; Hamre-Nietupski et al, 1982). For example, middle school and high school students received domestic skills training through agreements with local human service agencies operating community residences or by providing services to elderly citizens in their own homes.

Grocery stores were identified as one of the most commonly frequented community

environments. This posed a dilemma because in order to make the shopping experience realistic, sufficient amounts of cash needed to be available. School could not provide cash and many families were financially unable to send money for special class projects. Even when parents did send money, typically it was still an unrealistically small amount. To address this issue, a cooperative venture was begun with the Cayuga County Office for the Aging whereby students would provide a shopping service for elderly clients that had such a need. Working through agency case managers, service recipients were identified and procedures were developed and implemented to serve the needs of both populations through this activity.

The following note from a parent to a middle school teacher typifies the response of many to the impact community instruction has had on students and families. The student subsequently referred to as Jenny was 13 years old, with Down Syndrome, functioning in the severe range of mental retardation, and diagnosed as legally blind.

*Laura,*

*After school we went to Wegman's shopping, me, Jenny, and Scott (the baby). After grocery shopping, on our way home, Jenny said "Mom, you forgot the Italian bread." She was right. I said we would have to go without - I was not hauling the baby out of the car again. Jenny said "I can buy it myself at P & C." I said, "I don't know Jenny?" "Yes mom, my teacher helped me." She was so sure she could that I didn't want to defeat her - so off to P & C. I pulled up in front with mounting panic. Jenny was still positive she could do it. I explained that the bread was back by the meat and bakery - we had bought it here before, but not recently. Jenny said, "I know - it has a light." I then gave Jenny \$2 and let her go. Four minutes later (it seemed like two hours) she was back at the car with her Italian bread in a shopping bag and her change tight in her hand. I couldn't believe it - talk about the taste of success - I think that was the best bread we have ever had! Be proud teacher - Mom is !!*

### Therapeutic Services

Related services primarily consisting of Speech/Language , Occupational , and Physical Therapy were delivered in a mode which may be considered primarily direct and isolated (Giangreco, 1986b). This model, while implemented with the best of intentions, was frequently incongruent with the role of related services as defined by P.L. 94-142. The Education for All Handicapped Children Act of 1975 states that related services, such as the aforementioned therapies, are provided "as may be required to assist a handicapped child to benefit from special education.....". This legislation clearly advocates related services which are educationally relevant.

Efforts were initiated between educators and related service personnel to ensure the provision of related services which were programmatically integrated (Giangreco, in press). Through a series of ongoing meetings, expanded options emerged which included previously untapped or underutilized possibilities such as a primary therapist model for occupational and physical therapy, more group and classroom-based therapy, therapy conducted in a variety of nonschool natural environments including vocational training sites and varied generic community settings. Through revised administrative procedures the system seeks to promote evolving team atmosphere and functioning in order to provide effectively synthesized educational and related services which assist students in benefiting from their educational program.

### Post-School Preparation

Vocational preparation has long been considered an important component of secondary programs for students with handicapping conditions. Such programs have frequently excluded persons identified as having more moderate or severe handicaps. It is speculated that this

exclusion may have been the result of low expectations for vocational achievement. Many students completing secondary public school programs graduated to find three basic options - many were tracked into a day treatment program, a small number were served in a sheltered workshop, and some ended up with no program at all. In an attempt to upgrade vocational expectations and expand postschool options for this population the "Community-Based Vocational Experience Program" was initiated. This longitudinal approach to vocationally oriented postschool preparation begins with in-classroom jobs for elementary aged students, on-school-grounds jobs done cooperatively with nonhandicapped peers at the middle school / junior high level, and increasing amounts of community-based vocational experiences on competitive job sites at the high school level. Currently, 22 students have participated at 20 different sites such as restaurants, a pharmacy, motel, hand bag factory, public library, conference center, a livestock auction barn, various stores, a machine shop, garage, and City Hall. Through these supervised, unpaid, training experiences students learn generalized work behaviors while instructors assess interests, abilities, adaptations, and needs to assist in the transition from school to the adult world. Since transition to both vocational and other postschool options remains a need, the "Interagency Linkage Council" was established as a mechanism to facilitate the coordination of local service agencies.

#### Major Factors Facilitating Change

While organizational change is certainly a complex phenomenon, the following factors have been identified as instrumental in facilitating change within the system described in this article.

- 1) Catalysts for change must be present.
- 2) A clear philosophical position must be stated and open to modification. Such a philosophical statement guides direction and serves as a measurement tool to judge the congruence between the philosophy and change activities.
- 3) A strong commitment to the agreed upon philosophical tenets and a willingness to operationalize this commitment programmatically and politically must be present.
- 4) Short, medium, and long range plans must be developed so that original intentions do not become obscured over a period of time.
- 5) Effective change in ordinarily endowed school systems may be dependent on the organizational ability to distinguish between essential versus optimal components of change. If a system waits for all the components of desired program to be in place, positive changes will come slowly if at all. Rather, systems must determine the essential components necessary to provide a viable service with the realization that refinements will be required on an ongoing basis if excellence is to be achieved.
- 6) Change implementation must be highly persistent. During the early stages change can be highly reinforcing to those initiating the innovation. Change becomes significantly less glamorous when the changes must be solidified, refined, and transferred to others. Persistence becomes crucial because innovations which are not retained have limited value. In reality it may be easier to initiate change and more difficult to sustain it.
- 7) Change agents must be highly conscious of expanding the base of support for innovations by transferring ownership to others at various levels in the organizational hierarchy. From parents and teachers to superintendents to noninstructional staff, people must perceive themselves as part of the innovation. While there will always be divergent views regarding innovations, a simultaneous top-down and bottom-up approach is desirable in

order to facilitate retention of innovations through transfer and expansion of ownership.

- 8) Ongoing staff development and support represent the nourishment that sustains innovations and transforms them from "changes" to "part of the program". Structured and unstructured opportunities need to be seized to train people at all levels of the organization in the rationales and implementation of the proposed changes. Correspondingly, few endeavors are more frustrating than attempting to make a change without the appropriate supports. Plan to support innovations financially and politically as well as through appropriate staffing, materials, training, consultations and encouragement on an ongoing basis.

### Conclusion

As stated at the outset of this article, the aforementioned program components have been described because of their change status over the past two years, rather than being presented as models for change. It is the writers' belief that discussions of changing programs hold value in that they encourage us by demonstrating that positive changes can be affected in systems without extraordinary resources. Secondly, they tend to shed light on the mechanisms of change. Finally, they assist us by identifying and clarifying unresolved issues that do not fit neatly into the conceptualizations we have created. How can we serve persons with the most profound and multiple handicaps appropriately? How can we actualize a home-district placement model for low incidence populations which provides integrated experiences as well as a strong instructional program? How can we expand postschool options which will lead to high quality of life opportunities during adulthood? How can we adequately prepare students with handicaps to be choice-makers, decision-makers, and problem-solvers? These are but a few of the many questions we must continue to ask ourselves as we seek to improve the services we

provide to persons with severe handicaps. It is encouraging that our questions have shifted from " If we should educate, integrate, include ....." to " How can we ..... ? ". While University-based models are a necessary link in the chain of growth in our field, professionals, parents, advocates, and consumers would be well advised to invest in homegrown solutions to problems. Through cooperative efforts, local and regional education agencies are in surprisingly strong and influential positions to affect positive changes to assist persons with severe handicaps to access a higher quality of life through educational opportunities.

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