

CRITERION SCALE FOR THE EVALUATION OF
INDIVIDUAL EDUCATIONAL PROGRAMS (IEPS)
OF MILDLY HANDICAPPED CHILDREN IN
GRADES ONE THROUGH SIX

A DISSERTATION
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With sincere appreciation to my son,
Roger Seth Hoffman, who inspired me to study.

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CHAPTER I

INTRODUCTION

Statement of the Problem

The Education for All Handicapped Children Act (Public Law 94-142) was enacted in November, 1975. It requires that an Individual Educational Program (IEP) be written for every student who is handicapped. The law also guarantees a free appropriate public education to all handicapped children as of September 1, 1978. The term "appropriate" is not defined as such, but rather receives its definition through the mechanism of the IEP. The law states that the IEP should reflect programming needed by the child.

Public Law 94-142 and accompanying federal rules and regulations provide guidelines for developing IEPs. However, Marver and David (1977) reviewed and analyzed 150 IEPs obtained from 15 local school districts in California, Massachusetts and Montana and found they were in compliance with the law but that the quality range was great. Plans varied from a simple check sheet to very sophisticated comprehensive documents. They

reported a high degree of confusion over writing goals and objectives. Schipper and Wilson (1978) also reported that IEPs which they studied ranged from a simple checklist to a forty page document. The implication of these studies was that there was a need to specify quality criteria for written plans and a need to develop a monitoring tool for school systems to use in evaluating IEPs.

At present, the Dallas Independent School District has no formal criteria for evaluating IEPs. Dr. Allen Sullivan, the Assistant Superintendent of Schools in charge of Special Education and Dr. Daniel Macy, Director of Research in Special Education have expressed an interest in having quality criteria established by academicians in the field of Special Education.

Purpose of the Study

There were two purposes for this study. The first was to determine whether there were significant criteria which ensure quality programming for Individual Education Programs (IEPs) of handicapped children. The second was to develop a scale for evaluating the quality of IEPs.

Definitions

Special Education. Special Education is defined in P.L. 94-142 as:

specially designed instruction to meet the unique needs of a handicapped child, including classroom instruction, instruction in physical education, home instruction and instruction in hospitals and institutions. (P.L. 94-142 4(a)(16))

The key phrase in this definition is "specially designed instruction which meets the unique needs of a handicapped child." This definition implies that special education proceeds from the basic goals and expected outcomes of general education. Therefore, intervention with a child does not occur because he or she is handicapped but because the child has a unique educational need that requires specially designed instruction.

Handicapped children. When the law refers to "handicapped children," it specifies "those children evaluated as being mentally retarded, hard of hearing, deaf, speech impaired, visually handicapped, seriously emotionally disturbed, orthopedically impaired, other health impaired, blind, multihandicapped, or as having specific learning disabilities, who because of those impairments need special education services" (P.L. 94-142 12a.5).

Individual Education Program (IEP). The P. L.

94-142 states that:

The term 'individualized education program' means a written statement for each handicapped child developed in a meeting by a representative of the local educational agency or an intermediate educational unit who shall be qualified to provide, or supervise the provision of, specially designed instruction to meet the unique needs of handicapped children, the teacher, the parents or guardian of such child, and whenever appropriate, such child, which statement shall include (A) a statement of the present levels of educational performance of such child, (B) a statement of annual goals, including short-term instructional objectives, (C) a statement of the specific educational services to be provided to such child, and the extent to which such child will be able to participate in regular educational programs, (D) the projected date for initiation and anticipated duration of such services, and (E) appropriate objective criteria and evaluation procedures and schedules for determining, on at least an annual basis, whether instructional objectives are being achieved. (P.L. 94-142 4(a)(19))

An expert in the field of Special Education. An expert for purposes of this study was defined as an individual with a masters or doctoral degree and at least three years of experience in developing educational programs for mildly handicapped children.

Mildly handicapped children. Mildly handicapped children are defined as those children requiring special education for half or less than half of the school day.

Limitations

The IEPs of mildly handicapped children in grades one through six were considered in this study. It was necessary to limit the population because the program needs of all handicapped children are diverse and would yield more quality criteria than could be investigated within the structure of this study. The population of mildly handicapped children in grades one through six was selected because it constituted a large population with similar needs.

The population of experts to whom the questionnaire was mailed was limited to Educational Diagnosticians employed in Texas. This population was selected because many Educational Diagnosticians in Texas have fulfilled the requirement of expert in this study. Further, a mailing list containing more than 400 names and addresses of Educational Diagnosticians was available from the Texas Education Agency.

This study was initiated in August of 1978 and continued through June of 1979. When the questionnaire was developed, the final federal regulations were not available to the investigator; therefore, many of the quality criteria studied relate to the proposed rules and regulations.

The number of quality criteria included on the questionnaire was limited to ensure response. A 30-minute time limit was considered realistic to require of respondents. Therefore, only criteria suggested by law or the proposed rules and regulations and endorsed by experts in available published documents were investigated.

CHAPTER II

REVIEW OF THE LITERATURE

Public Law 94-142 requires that an Individual Educational Program (IEP) be written for every handicapped child (Sec. 602). The intent of the law is that the IEP should document that a free appropriate education is being offered by the local school district. Federal funds are appropriated to states on the basis of proof that special education which meets the unique needs of a handicapped child is being offered. The IEP must contain the specifications of the child's unique educational needs and the steps taken to facilitate compensation for them.

The purpose of this study was to identify quality criteria for writing Individual Education Programs (IEPs). The quality criteria should minimally meet the requirement of the law. The law requires that an IEP must include:

A statement of the child's present levels of educational performance (P.L. 94-142, 609(19)(a), FR, 121a.225(a), FR, 121a.346(a)).

A statement of annual goals (P.L. 94-142, 602(19)(b), FR, 121a.225(b), FR, 121a.346(b)).

A statement of short-term instructional objectives (P.L. 94-142, 602(19), FR, 121a.225(c), FR, 121a.346(b)).

A statement of the services to be provided to the child (P.L. 94-142, 602(19)(c)), including:

the type of physical education program the child will receive (FR, 121a.225(d)(1), FR, 121a.307)

any special media and materials (FR, 121a.225(d)(2)).

the projected date and anticipated duration of those services (P.L. 94-142, 604(19)(d), FR, 121a.225(e), FR, 121a.346(d)).

a description of the extent to which the child will participate in regular education (FR, 121a.225(f)).

a justification for the child's placement (FR, 121a.225(g)).

a list of all individuals who will implement the child's IEP (FR, 121a.225(h), FR, 121a.344).

Objective criteria, evaluation procedures, and schedules for determining, on at least an annual basis, whether short-term instructional objectives are being achieved (P.L. 94-142, 609(19)(e), FR, 121a.225(i), FR, 121a.346(e)).

These IEP content requirements were considered in order to determine specifically what should be written on the IEP. According to the Federal Regulations, an IEP must include

. . . a statement which describes what a child can and cannot do in as many of the following areas as are appropriate to the nature of the child's problems, including: academic achievement, social

adaptation, pre-vocational and vocational skills, psychomotor skills, and self-help skills. (FR, 121a.225)

The P.L. 94-142, Regulations Section 121a.531 state that before any action is taken with respect to the initial placement of a handicapped child in a special education program, a full and individual evaluation of the child's educational needs must be conducted. In addition, Higgins (1977) suggested that program development would be facilitated if assessment data had been interpreted and stated in present level performance terms prior to the IEP conference. Evaluation is defined in Section 121a.500 as

. . . procedures used to determine whether a child is handicapped and the nature and extent of the special education and related services that the child needs. The term means procedures used selectively with an individual child and does not include basic tests administered to or procedures used with all children in a school, grade or class.

Higgins (1977) stated:

After all assessment data have been gathered, the problem of integrating the data into a comprehensive statement of the child's educational performance still remains. The statement must provide enough information so that any special instructional services can be determined. Further, the assessment information must be displayed so that when the program is developed the annual and short-term objectives and other requirements can be determined. (Pg. 13)

According to the law,

(a) The team shall prepare a written report of the results of the evaluation.

(b) The report must include a statement of:

(1) Whether the child has a specific learning disability;

(2) The basis for making the determination;

(3) The relevant behavior noted during the observation of the child;

(4) The relationship of that behavior to the child's academic functioning;

(5) The educationally relevant medical findings, if any;

(6) Whether there is a severe discrepancy between achievement and ability which is not correctable without special education and related services; and

(7) The determination of the team concerning the effects of environmental, cultural, or economic disadvantage.

(c) Each team member shall certify in writing that the report reflects his or her conclusions; the team member must submit a separable statement presenting his or her conclusions. (FR, 121a.543)

Losen and Diament (1978) state:

Following assessment, a meeting which can be informal should be scheduled to inform the parents of the outcomes. In order to prepare for the meeting that will serve to develop their child's individualized education program it is essential that parents understand most of the assessment data, the reasons for determination of their child's eligibility and of their rights. (Pg. 14)

A statement of the student's present levels of

functioning taken from the assessment data and presented in terms of strengths, weaknesses and needs is necessary for developing an IEP. The Texas Education Agency Guidelines state that this brief statement should include:

(1) the grade level, competency level, or functional level at which the student is currently performing in content areas. If the student is functioning at pre-academic levels, there must be a statement of developmental skill levels.

(2) the physical abilities and disabilities exhibited by the student which would affect his/her participation in instructional settings and/or in physical education and leisure time activities.

(3) the behaviors demonstrated by the student which affect his/her programming.

(4) the skills demonstrated by the student (particularly at secondary level) which may be prerequisite to participation in vocational education. (Pg. 33-34)

Annual Goals

The Federal Regulations require annual goals to describe the educational performance to be achieved by a child by the end of a school year (FR, 121a.346).

Annual goals may be derived from comparing the child's needs based on his present level of performance in an area of concern with the desired level of performance. It is suggested by Blankenship (1977) that an annual goal be defined as

A statement which includes a cluster of related behaviors in a given area (academic, speech/language self-help, prevocational and vocational, motor or social behavior), which are appropriate to a child's needs and can reasonably be achieved by the end of the school year. (Pg. 15)

Hayes (1977) states that "Goals must be built upon present levels as a house is built upon a foundation, otherwise the program will not be appropriate" (pg. 17). It is suggested that goals be stated in specific student terms in order to personalize them and make their meaning clear to the child, parent, and teacher. Hayes further states that there are at least five benefits of written goals and objectives that should be remembered:

1. Written goals and objectives provide accountability;
2. Written goals and objectives can motivate students;
3. Written goals and objectives facilitate teacher-parent communication;
4. Goals and objectives will make teacher preparation more relevant;
5. Goals and objectives help focus learning activities. (Pg. 15)

Arena (1978) defines a goal as

. . . a point to which effort is directed. It is a statement of general intent. Embedded in that definition is a way of knowing that the destination has been reached. Clearly a goal refers to a behavior which can be measured or observed. (Pg. 33)

The National Advisory Committee on the Handicapped (NACH, 1977) recommends that the IEP should be seen as concerning the whole child, in all aspects of his or her life outside of school as well as in it, and bearing on physical and emotional as well as intellectual needs, implying that an annual goal should be written for each curriculum area in which the child is functioning below his/her expected level.

The law requires a statement of the services that the school will provide to the child. The regulations ask for a statement of the specific services the child needs, irrespective of whether those services are actually available, thereby providing parents and administrators with a checkpoint for determining what the school must do to provide handicapped children with the kind of education foreseen in the law (NACH, 1977).

Short-Term Instructional Objectives

The law requires that annual goal statements be accompanied by short-term instructional objectives (Sec. 602(19)). The federal regulations specify that short-term instructional objectives must be "measurable intermediate steps between a child's present level of performance on a skill and the desired level as stated in an annual goal."

Schipper and Wilson (1978) suggest that in quality IEP plans the following rules for writing objectives should be applied:

1. Objectives should denote an expected change in the child's behavior;
2. Objectives should be stated in measurable terms which will assist in the evaluation function;
3. Objectives should be approximations of long-term goals. (Pg. 45)

Blankenship (1977) states that short-term instructional objectives may be defined as

. . . a series of statements (expressed as behavioral objectives) which represent measurable intermediate steps between a child's present level of performance in a goal area and the desired level as stated in an annual goal. (Pg. 20)

Further, these four components are required by the Illinois State Department of Education for short-term objectives:

A written short-term instructional objective should include the following four components: (1) a learner; (2) an observable or measurable behavior; (3) the conditions under which the objective be performed; and (4) the standard or criteria which describes the minimum performance required to master the objective. (Pg. 18)

Hayes (1977) states that the number of short-term objectives required by law is left up to the district to determine, but three or four steps in each area seem to be reasonable.

The Pennsylvania Department of Special Education has suggested that published curriculum guides provide good sequences of instructional objectives which can be used in developing short-term objectives. Further, Hayes states;

The annual goals for each student are established by the planners themselves; the short-term objectives can be obtained from a variety of published sources. A curriculum guide is the best tool to use for sequencing short-term objectives. (Pg. 18)

The evaluation of long-range goals is a more difficult process than the evaluation of instructional objectives, since the goals are more general and are not stated for direct assessment. Lilly (1977) states that

A long-range goal can be seen as a culmination of a series of short-term objectives, and the process for evaluating progress must be less data based and less objective than is the case with instructional objectives. (Pg. 30)

Services To Be Provided

The federal law requires an IEP to contain a list of "the specific educational services" to be provided to the child, including the projected date for initiation and anticipated duration of such services (Sec. 602(19)). Individuals providing supportive services to a handicapped child are an integral part of the IEP process. The objectives which are written should logically be related to the child's annual goals which appear on the IEP. Therefore, individuals providing supportive

services to handicapped children need to be involved in both the development and implementation of IEPs (Blankenship, 1977).

The NEA (1978) has published numerous articles which address the collective bargaining implications of the teacher's participation in IEP meetings and in the education of handicapped children. In "P.L. 94-142, Negotiations Impact" it was asserted that teachers should have an opportunity to decide on the placement arrangements for implementing the IEP goals and objectives.

The intent of Public Law 94-142 is clearly to ensure that handicapped children receive every educational service which non-handicapped children receive (Section 602(19)). The law requires a statement of the services the school will provide to the child, including the services provided in regular classes, ensuring that schools provide documentation of equal services with non-handicapped children (Annual Report of the National Advisory Committee on the Handicapped, NACH, 1979).

The federal regulations indicate that handicapped people have a right to public museums, libraries, parks, theaters, etc., and have required that barriers which prevent their availability to handicapped people to be removed. Hawkins (1976) stated that it is now possible for schools to include in their curricula for

handicapped children the use of public recreational and educational facilities. Under the full educational opportunity goal of P.L. 94-142 it is stated that each public agency should take whatever steps are necessary to provide non-academic and extracurricular services and activities to handicapped children.

Public Law 94-142 does not specify pupil/teacher ratio in special education classes. Each state may determine pupil/teacher ratio. Texas Education Agency Policy Number 4121 specifies that a teacher may be assigned for each six students (full time in special class) who are visually handicapped, auditorily handicapped, orthopedically handicapped, other health impaired, mentally retarded or emotionally disturbed and a teacher may be assigned for every 16 language/learning disabled children. However, 60 speech handicapped children require one speech therapist. The assignment of students to special class for part of the school day requires adjusting the calculations. One teacher can be assigned to a minimum of six students although they may be six different students each hour. Under Policy Number 4121, the Texas Education Agency would allocate funds for an aide if nine students are in a class.

The Council for Exceptional Children in its Special Education Administrative Policies Manual (1977) stated

that counselors trained to work with handicapped children need to be available to assist with mainstreaming problems. Further, the Council for Exceptional Children noted in their administrative policies manual (Torres, 1977) that:

Many states are moving towards noncategorical descriptions to define handicapped children by their special educational needs, rather than by specific handicapping condition. The trend is towards looking at a child in terms of what the education needs might be as opposed to labelling the child and then fitting the label to a program. P.L. 94-142, however, requires data to be reported by disability of child. (Policy Area: Definitions, pg. 1)

The National Association of State Directors of Special Education (NASDSE, 1977) advised that special needs transportation be provided for field trips and after school activities. It follows that the designated individual with responsibility for special needs transportation for these activities should be listed on the IEP.

The Council for Exceptional Children (CEC, 1977) in a document enumerating Special Education Administrative Policies states that: "Each education agency shall include individual transportation services when required by the exceptional student in the written individualized program of the student" (see Sec. E, pp. 13).

Participation In Regular Education Programs

Both the federal law (Sec. 602(19)) and the federal regulations (FR, 121a.225) require an IEP to contain a description of the extent to which a child will participate in regular education programs. It is to be expected that many children with mild learning and behavior problems will be able to profit from regular education programs. Blankenship (1977) states that

The requirement to specify a child's participation in regular education programs has been interpreted to mean that an IEP should indicate whether a child will participate in regular education programs and if so the type of programs in which the child will participate. (Pg. 3)

The National Association of State Directors of Special Education (NADSE) (1977) has interpreted the rules to mean that "handicapped children should spend an equivalent amount of time in school as non-handicapped children." This statement implies that the length of the instructional day, for children receiving special services for half the day or less, should be equivalent to that of regular class children.

Type of Physical Education Program

The federal regulations can be interpreted to mean that an IEP should contain a description of the type of physical education program in which the child will participate. In some cases, handicapped children can

participate in regular education physical education programs. In instances where this is not possible, some provision should be made to provide the child with a physical education program which is tailored to his or her needs. Physical education should be considered as an integral part of the total educational process and, therefore, it should be included on a child's IEP (FR, 121a.307).

Special Media and Materials

The federal regulations specify that an IEP must contain a description of any special media and materials which are required to implement a child's IEP (Section 121a.225(d)(2)). Special media and materials have been defined by Blankenship (1977) as a listing of those media and/or materials used which are unique, i.e., not typically used in regular classroom, e.g., braille writers; and/or media and materials used because of and in reference to specific instructional objectives of the child, e.g., Language Masters. The National Center on Educational Media and Materials for the Handicapped (NCEMMH) recommends that special media and materials be listed on a child's IEP next to the specific short-term instructional objective for which the media or material is used (Niederer, 1977).

Some school districts have found it helpful to list media and materials by name, author, publisher, level and to indicate the dates on which the materials were used with a child. By noting the type and the perceived effectiveness of media and materials used by a child, the IEP becomes a complete record of the materials used by the child in his/her special education program (Blankenship, 1977).

Justification for Placement

Public Law 94-142 requires that justification be provided for the type of educational placement which is selected for a handicapped child. The law states that

Procedures to assure that, to the maximum extent appropriate, handicapped children, including children in public or private institutions or other care facilities, are educated with children who are not handicapped, and that special classes, separate schooling, or other removal of handicapped children from the regular educational environment occur only when the nature or severity of the handicap is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily. (Sec. 612.5.B)

The Illinois State Department of Education has suggested that a list of reasons why the particular placement was selected for a handicapped child should be indicated on his/her IEP (Blankenship, 1977).

The justification for the type of placement should correspond to the specific educational needs of the

child. The appropriate placement will follow from the annual goals and short-term objectives. Schipper and Wilson (1978) discussed problem areas regarding individualized education programs (IEPs). In a report to the National Association of State Directors of Special Education (NADSE) they made the following observations:

The IEP must be developed before the child is placed in a special education program in order to be in strict compliance with P.L. 94-142. Further, the placement decision must be based upon the IEP. Unfortunately, because of historical precedent, misunderstanding and/or an unwillingness to change existing practices, many LEAs are making placement decisions first and then asking teachers to write IEPs. Until this pattern or practice changes, the correct concept of the development and role of the IEP cannot be realized.

The National Association of State Directors of Special Education (NASDSE) indicates that the exact arrangements made to educate each handicapped child must be specified in order to comply with Public Law 94-142. Greer and Torres (1977) state that:

Specifying the relationship that the supportive services are to have to the rest of the child's program minimally accomplishes two tasks. First, it makes it possible to go beyond the general level of the services--speech pathology, for example--and begin to describe the necessary services within the area of speech pathology that will be delivered. Perhaps this will be a step toward unveiling the mystery behind the therapy. Second, everyone, including parents, school personnel, and the related service people will have a clearer understanding of what service will be provided to the child. (Pg. 22)

This statement implies that IEPs should specify the type of placement (i.e., small group instruction with LLD teacher, one-to-one instruction in language development with speech therapist for an auditorily impaired child) rather than the name of the placement (i.e., Resource Room, Speech Therapy).

Section 121a.552 of the federal regulations includes some of the main factors which must be considered in determining the extent to which a handicapped child can be educated with children who are not handicapped. The overriding rule in this section is that placement decisions must be made on an individual basis. The section also requires each agency to have various alternative placements available in order to insure that each handicapped child receives an education which is appropriate to his/her individual needs.

Identification of Implementers

Federal regulation (Sec. 121a.344) states that:

(a) General. The public agency shall insure that each meeting includes the following participants:

(1) A representative of the public agency, other than the child's teacher, who is qualified to provide, or supervise the provision of, special education.

(2) The child's teacher.

(3) One or both of the child's parents, subject to §121a.345.

(4) The child, where appropriate.

(5) Other individuals at the discretion of the parent or agency.

(b) Evaluation personnel. For a handicapped child who has been evaluated for the first time, the public agency shall insure:

(1) That a member of the evaluation team participates in the meeting; or

(2) That the representative of the public agency, the child's teacher, or some other person is present at the meeting, who is knowledgeable about the evaluation procedures used with the child and is familiar with the results of the evaluation. (20 U.S.C. 1401(19); 1412(2)(B), (4), (6); 1414(a)(5))

The comments which accompany FR. 121a.344 state that:

1. In deciding which teacher will participate in meetings on a child's individualized education program, the agency may wish to consider the following possibilities:

(a) For a handicapped child who is receiving special education, the "teacher" could be the child's special education teacher. If the child's handicap is a speech impairment, the "teacher" could be the speech-language pathologist.

(b) For a handicapped child who is being considered for placement in special education, the "teacher" could be the child's regular teacher, or a teacher qualified to provide education in the type of program in which the child may be placed, or both.

(c) If the child is not in school or has more than one teacher, the agency may designate which teacher will participate in the meeting.

2. Either the teacher or the agency representative should be qualified in the area of the child's suspected disability.

3. For a child whose primary handicap is a speech impairment, the evaluation personnel participating under paragraph (b)(1) of this section would normally be the speech-language pathologist.

Blankenship (1977) states that "the name of each individual may be written next to the particular goals which he/she will implement on the child's IEP" (pg. 8). Further, it is strongly suggested by Blankenship (1977) that an individual be identified to monitor the overall implementation of a child's IEP. An IEP manager should be appointed at the multi-disciplinary staff conference and the name of the IEP manager should be listed on the child's IEP. Any one of the child's teachers, or a member of the school's supervisory staff could serve as an IEP manager. In some districts, case coordinators are presently serving in the capacity of IEP managers. The function of an IEP manager is to coordinate the implementation of the IEP with a child's parents and the local district. As a coordinator, the IEP manager could be available to discuss with the child's parents any minor revisions which must be made to a child's IEP during the school year (Blankenship, 1977).

Objective Criteria and Evaluation Procedures

According to the federal law (Sec. 602(19)) and the federal regulations (Sec. 121a.346) each IEP must contain "appropriate objective criteria and evaluation procedures and schedules for determining, on at least an annual basis, whether instructional objectives are being achieved."

Lilly (1977) states

Perhaps the most far reaching implications of Public Law 94-142 is that teachers must become data collectors, in that they must have data available on student progress toward instructional objectives. The vast majority of student progress measures used in special education are norm referenced and do not provide information on progress toward specific objectives. If this problem is solved by writing objectives with reference to available measuring instruments, the very essence of the individualized education program is violated, since the objectives would be test based, not child based. The only alternative is to collect criterion referenced evaluation data on student performance as specified in the individualized education program. (Pg. 28)

Kazdin (1978) asserts that no performance can be measured unless it can be reliably observed and reliable observation depends on behavioral descriptions of problems. Lilly (1977) confirms this statement in the following remarks:

If the objective is to decrease the frequency of inappropriate talk out of leaving the seat without permission then direct, reliable assessment is possible. Likewise, decreasing the error rate in oral reading or increasing the percentage of

comprehension questions answered correctly represent objectives amenable to reliable measurement. (Pg. 28)

Public Law 94-142 requires that a decision be made in regard to whether a given child reached a specified instructional objective. If the child's implementers write measurable short-term objectives and evaluate the child's progress in reference to those objectives, the requirement to objectively evaluate performance has been satisfied.

Public Law 94-142, Section 602(19) (FR, 121a.225(i)) requires that an evaluation of the student's performance on his goals and objectives be done at least annually at a meeting with the parent, the child (when appropriate), the teacher, and a representative of the educational agency. However, in developing Public Law 94-142, the Senate passed a bill which contained provision for three individualized planning conferences for each child each year (National Advisory Committee for the Handicapped, 1977). Later in an effort to facilitate implementation of P.L. 94-142 the Senate agreed to two meetings to evaluate progress the first year and at least one each succeeding year for two years with a complete evaluation required after the third year of services.

Kazdin and Lilly (1978) agree that evaluation on objectives requires continuous data collection, on a

daily basis. They point out that progress which is frequently measured and recorded can save time since the teacher can objectively account for progress or can change methods when no progress is observed.

Progress is recorded on a monthly basis by the Frostig Center in California. This school was the first private special education school in the state to receive a major three-year grant from the Bureau of Education for the Handicapped of the United States Office of Education.

According to the federal regulations (Sec. 121a.222), Sec. 121a.343), a meeting to develop an IEP for a newly referred child must be held within 30 days of the determination that the child is handicapped or that the child will receive Special Education. A reasonable interpretation of the federal regulation according to Blankenship (1977) is that an IEP should be developed at the beginning of each school year and then reviewed and revised as appropriate, but at least annually. The purpose of the annual review is to consider the educational status and continued special placement of the child and to determine the extent to which the child has met the objectives, to recommend further evaluation if indicated, and to revise the IEP including establishing goals, services, placement and all other components of the IEP (Blankenship, 1977).

CHAPTER III

DESIGN OF THE STUDY

The purpose of this study was to identify criteria which insure quality programming on Individual Education Programs (IEPs). A scale for evaluating the quality of IEP documents was proposed based on the identified criteria.

The Questionnaire

Forty-eight quality criteria were selected from the literature. These criteria applied to each requirement for writing IEPs stated in P.L. 94-142 or in the rules and regulations associated with the law. The specific categories of the criteria presented on the questionnaire are:

1. Present levels of educational performance;
2. Annual goals;
3. The short-term instructional objectives;
4. Specific educational services to be provided, including initiation date and anticipated duration of services;

5. Participation in regular education programs, including a description of the extent to which a child will participate in regular education programs;

6. Type of physical education programs;

7. Special media and materials;

8. Justification for placement;

9. Objective criteria for evaluation procedures; and

10. Identification of implementers.

An ERIC computer search revealed 30 sources related to writing IEPs. The primary source was Public Law 94-142, Section 602 of that law, and Section 121 of the federal rules and regulations associated with the law. All of the criteria on the questionnaire require written notation on IEPs. Each criterion was referred to in P.L. 94-142 and/or the rules and regulations associated with the law. Further, the criteria were referred to in "Developing the Compliance Monitoring System in Special Education" which was published by the National Association of State Directors of Special Education in 1977. All of the criteria were agreed to in the Illinois, Pennsylvania or Texas manuals prepared to give local school districts guidelines for writing IEPs.

Finally, all of the criteria were discussed in the publications of The Council for Exceptional Children.

The IEP quality criteria considered in this study were limited to those pertaining to mildly handicapped children in grades one through six. These handicapped children, receiving services for half or less of the school day, constituted a large population with similar needs. There was no attempt to select quality criteria for implementing the child's program. Further, there was no attempt to select quality criteria for complying with the requirement of the law other than those pertaining to written IEPs.

In developing the questionnaire special attention was given to quality specifications for writing annual goals and short-term objectives. Early studies of Marver and David (1977) indicated that this was a particularly weak area in written IEPs. Fourteen statements about goals and objectives were included in the questionnaire. There were also two statements referring to assessment and three statements on evaluation of student progress which were related to goals and objectives. The questionnaire also included; six criteria referring to assessment, twelve criteria referring to specific services, four criteria referring to participation in regular classes, six criteria referring to evaluation

and annual review, two criteria referring to dates of initiation and duration of services and four criteria referring to the IEP committee. A reproduction of the questionnaire appears in Appendix A.

In order to determine the degree to which experts would approve of each of the criteria, the following rating scale was used:

Please indicate the extent to which you agree or disagree with each statement by circling the appropriate number.

- | | |
|---|-------------------------|
| 1 | Strongly Disagree |
| 2 | Disagree |
| 3 | Mildly Disagree |
| 4 | Undecided or No Opinion |
| 5 | Mildly Agree |
| 6 | Agree |
| 7 | Strongly Agree |

This rating scale allows the respondent a continuous choice among three levels of agreement and three levels of disagreement. Further, it allows the respondent the option of being undecided or having no opinion on the question. The rating scale yielded an evaluation of the quality of each criterion by the respondent.

The individuals responding to the questionnaire participated voluntarily. A stamped return mailer was included with each questionnaire.

The following information was requested of each participant:

1. Your most advanced degree is
Masters Doctorate
2. You have had ____ years of experience
developing programs for handicapped children.

The questionnaire was designed and printed professionally to assure response. Consideration was given to clarity of the material and ease in handling.

Four hundred questionnaires were mailed during the month of March 1979. A request for a response within 30 days was included in the questionnaire. One hundred and thirty questionnaires were returned by May 1979. One hundred and five of the respondents qualified for the study.

Subjects

For the purpose of this study an expert in the field of special education was defined as an individual with a masters or doctorate and at least three years of experience developing programs for handicapped children. In the State of Texas, certification is offered for Educational Diagnosticians after three years of teaching experience and 18 graduate hours in special education courses and clinical educational diagnosis. Many Educational Diagnosticians practicing in Texas qualified

as experts for this study. A list of names and addresses of all the Educational Diagnosticians employed by public schools in Texas was obtained from the Texas Education Agency. Every third name on the list was selected for the mailing. This group constituted a random selection of people working in urban and rural settings, in large and small schools systems, and with every economic and ethnic group of children living in Texas.

Analysis of the Data

At the conclusion of the collection of the data from the questionnaires the responses were analyzed by computer programs. Frequency distribution tables containing absolute frequencies of the responses for each criterion were compiled. Nonparametric correlations and a Chi-square Test were computed by the Statistical Package for the Social Sciences (SPSS) Nonpar. Corr. subprogram. This program is designed to determine whether two rankings of the same cases are similar. Spearman's rho was computed to determine the significance of similar responses for each criteria on the questionnaire.

Criteria rated 6 (Agree) or 7 (Strongly Agree) by 80 or more of the respondents were considered accepted

criteria. Criteria rated 5 (Mildly agree), 6 (Agree) or 7 (Strongly Agree) by 90 or more of the respondents were also considered accepted criteria.

For interpretive purposes, Spearman correlation coefficient above .4500 were considered significant. These correlations had a common variance of twenty percent or more. The criteria on the questionnaire addressed seven categories suggested by the U.S. Department of Housing, Education and Welfare for inclusion on an IEP. Correlation tables were prepared for each of the categories. The criterion statements, corresponding to the correlations were blended in order to develop concise statements of the concept implied by the correlation. A scale for evaluating the quality of IEPs was proposed from those criteria considered accepted by the respondents to the questionnaire and based on the Spearman correlations considered to be significant.

CHAPTER IV

ANALYSIS OF DATA

There were two purposes for this study: to determine whether there were significant criteria which insure quality programming for Individual Education Programs (IEPs) of mildly handicapped children in grades one through six and to develop a scale for evaluating the quality of those programs.

A questionnaire was designed to poll the opinion of educational diagnosticians in Texas, with regard to the quality of forty-eight criteria for writing IEPs. There were 105 qualified respondents. Of the respondents 14 were men, 87 were women and 4 were unidentified because they removed their names from the questionnaire. All of the respondents who qualified for the study reported that they had master's degrees. The respondents reported from three to thirty-two years of experience developing programs for handicapped children (see Table 1).

The respondents worked in 83 different school districts across the state of Texas. Twenty-two of the respondents were working in the large school districts

TABLE 1

RESPONDENTS' YEARS OF EXPERIENCE DEVELOPING
PROGRAMS FOR HANDICAPPED CHILDREN

Years of Experience	Number of Respondents
3	9
4	11
5	17
6	11
7	13
8	12
9	7
10	7
11	4
12	2
13	3
14	3
15	4
19	1
32	1

of Austin, Dallas, Houston, Fort Worth or San Antonio. A Chi-square Test was computed from the 105 qualified questionnaires. The results were significant for all items. The absolute cumulative frequency for respondents scoring 5 (Mildly Agree), 6 (Agree), and 7 (Strongly Agree) was tabulated. Eighteen of the criteria were scored agree (6) or strongly agree (7) by 80 or more respondents. Another four criteria were scored 5, 6 or 7 by 90 or more respondents. Those 22 criteria were considered to be accepted quality criteria (see Table 2).

A Spearman correlation was computed among the responses to the questionnaire. Correlations for the 22 accepted criteria were studied. There were 32 correlation coefficients above .4500. These correlations were considered significant because they had a common variance of twenty percent or more.

There were 5 correlation coefficients above .5000; on criteria which were not considered accepted by the respondents to the questionnaire. These high correlations indicated some particular interest of the respondents. Therefore they were studied for the purpose of recommending future investigation of these areas.

The criteria considered accepted in these data analyses were used to propose a quality criteria scale. Frequency tables displaying the distribution of the

TABLE 2
CUMULATIVE ABSOLUTE FREQUENCIES FOR
CRITERIA RATED (N=105)

Questionnaire Criteria	Cumulative ₁ Frequency	Cumulative ₂ Frequency
+ * 1	95	98
+ * 2	86	96
+ * 3	94	100
4	75	82
5	15	19
+ * 6	86	97
7	72	83
+ * 8	82	90
+ 9	78	96
+ * 10	93	103
+ 11	76	92
12	68	78
+ * 13	97	101
+ * 14	102	104
+ * 15	87	95
16	66	82
+ * 17	96	101
+ 18	74	92
19	35	62

¹Cumulative frequency of responses rated 6 and 7.

²Cumulative frequency of responses rated 5, 6 and 7.

*Absolute frequency of 80 or above for 6 and 7.

+Absolute frequency of 90 or above for 5, 6 and 7.

TABLE 2 (Continued)

		20	21	50
		21	55	84
+	*	22	98	102
+	*	23	95	101
+	*	24	80	97
		25	46	66
		26	61	83
		27	45	62
		28	64	76
+	*	29	95	99
		30	75	87
+	*	31	88	100
		32	39	51
		33	60	89
		34	47	69
		35	29	43
		36	72	87
+	*	37	96	103
		38	62	79
+		39	71	90
	*	40	95	102
		41	58	77
		42	15	29
		43	36	66
		44	39	61
		45	46	73
		46	67	89
		47	55	71
+	*	48	85	96

¹Cumulative frequency of responses rated 6 and 7.

²Cumulative frequency of responses rated 5, 6 and 7.

*Absolute frequency of 80 or above for 6 and 7.

+Absolute frequency of 90 or above for 5, 6 and 7.

responses and Chi-square Test results for criteria 1-48 are in Appendix B.

Spearman correlation coefficients were considered in order to determine the significance of the criteria. The correlation coefficients above .4500 were studied. They were significant at the level of .001. The criterion statements, corresponding to the correlations were blended in order to develop concise statements of the concepts implied by the correlations.

The criteria on the questionnaire addressed the seven categories suggested by HEW for inclusion on an IEP.

1. Assessment. Determining the present level of educational performance were explored in Criteria 1 through 6.

2. Goals and Objectives. Annual goals and short-term objections were explored in Criteria 7 through 21.

3. Specific Services. Educational and related services needed are named were explored in Criteria 22 through 28, 39 through 43.

4. Participation. Extent of the child's participation in regular programs were explored in Criteria 29 through 32.

5. Dates. Dates for initiation and duration of services were explored in Criteria 36 and 38.

6. Evaluation. Objectives for evaluation and provision for annual review were explored in Criteria 33 through 38.

7. Other. Persons responsible for developing and writing the IEP (IEP Team) were explored in Criteria 44 through 48.

The Spearman correlation study for each of the seven suggested areas follows:

Assessment. Determining the present levels of educational performance; Criteria 1-6 (see Tables 3 and 4).

TABLE 3
SPEARMAN CORRELATION COEFFICIENTS-
ASSESSMENT (N=105)

Criteria	1	2	3	4	5	6
1		.4908 (.001)	.3375 (.001)	.1963 (.022)	.0236 (.406)	.4590 (.001)
2			.5383 (.001)	.3277 (.001)	.1235 (.105)	.3266 (.001)
3				.2767 (.002)	-.0174 (.430)	.3918 (.001)
4					-.0334 (.368)	.0694 (.241)
5						-.0953 (.167)
6						

*Numbers in brackets indicate level of significance.

TABLE 4

SPEARMAN CORRELATION COEFFICIENTS ABOVE .4500
PATTERN OF ASSESSMENT ITEMS (N=105)

1 & 2	2 & 3	3 & 17	6 & 7
.4908	.5383	.4562	.5451
1 & 6		3 & 45	6 & 8
.4589		.4600	.6618
1 & 13			6 & 15
.5236			.4744
			6 & 17
			.5269
			6 & 31
			.4841

Concise Statements Corresponding to
Spearman Correlations Related
to Assessment

1. This statement is based on the correlation of 1 and 13 (.5236). A multidisciplinary evaluation team collected the assessment information in each curriculum area in which the child required special services. The evaluation was made on an individual basis for establishing what the child could and could not do in as many of the following areas as were appropriate to the nature of the child's problems, including academic achievement, social adaptation, pre-vocational skills, psychomotor skills and self-help skills.

2. The correlation of criteria 2 and 3 (.5383) is the basis for this statement. A multidisciplinary evaluation report, prepared prior to the IEP conference, included a statement of whether the child had specific unique learning needs requiring special education and the basis for making the determination, including the relevant behavior noted during the observation of the child in the child's regular classroom setting, the relationship of that behavior to the child's academic functioning, and the relevant medical findings.

3. This statement was developed from the correlations of 6 and 8 (.6618), 6 and 7 (.5451), 6 and 17 (.5269), 3 and 17 (.4562), and 6 and 15 (.4744). The

child's present levels of performance, pertinent to the child's age and grade, were displayed as a list of statements of measured and/or observed behaviors each of which could be considered the baseline behavior preceding a behavioral objective. The list included a baseline behavior for each area in which the child required special services, including physical education, art and music, and including problem areas which could be addressed in the child's regular classroom.

4. The correlation of criteria 3 and 45 (.4600) is the basis of this statement. An individual identified to monitor the overall implementation of the IEP continued to note the child's relevant classroom behavior.

Goals and Objectives. Annual goals and short-term objectives; Criteria 7-21 (see Tables 5 and 6).

TABLE 5
SPEARMAN CORRELATION COEFFICIENTS-
GOALS AND OBJECTIVES (N=105)

7	8	9	10	11	12	13	14	15	16	17	18	19	20
7	.4532 *(.001)	.3579 (.001)	.4169 (.001)	.2049 (.018)	.3164 (.001)	.2431 (.006)	.3321 (.001)	.3273 (.001)	.5220 (.001)	.4184 (.001)	.3227 (.001)	.0775 (.216)	.2636 (.003)
8		.4483 (.001)	.3978 (.001)	.1405 (.076)	.2202 (.012)	.4106 (.001)	.4881 (.001)	.4507 (.001)	.4327 (.001)	.3575 (.001)	.2459 (.006)	.1586 (.053)	.2157 (.014)
9			.4957 (.001)	.3772 (.001)	.4381 (.001)	.3730 (.001)	.3602 (.001)	.4308 (.001)	.3674 (.001)	.3520 (.001)	.3289 (.001)	.2619 (.003)	.3411 (.001)
10				.2654 (.003)	.3701 (.001)	.2387 (.007)	.4532 (.001)	.4615 (.001)	.3865 (.001)	.4553 (.001)	.4005 (.001)	.0744 (.225)	.1273 (.098)
11					.3600 (.001)	.2909 (.001)	.0604 (.270)	.1788 (.034)	.2233 (.011)	.1118 (.128)	.2909 (.001)	.1606 (.051)	.2306 (.009)
12						.3850 (.001)	.3749 (.001)	.3176 (.001)	.3058 (.001)	.4172 (.001)	.3854 (.001)	.3268 (.001)	.2606 (.004)
13							.4633 (.001)	.3504 (.001)	.3536 (.001)	.4701 (.001)	.4643 (.001)	.2440 (.006)	.2345 (.008)
14								.4448 (.001)	.3690 (.001)	.5723 (.001)	.3948 (.001)	.2070 (.017)	.1512 (.062)
15									.4432 (.001)	.5728 (.001)	.5485 (.001)	.2825 (.002)	.2783 (.002)
16										.3894 (.001)	.2123 (.015)	.0568 (.282)	.2450 (.096)
17											.6052 (.001)	.2320 (.009)	.2431 (.006)
18												.3136 (.001)	.1755 (.037)
19													.2215 (.012)
20													

*Numbers in brackets indicate level of significance.

TABLE 6

SPEARMAN CORRELATION COEFFICIENTS ABOVE .4500
PATTERN OF ANNUAL GOALS AND SHORT-TERM
OBJECTIVE ITEMS

7 & 8	8 & 14	9 & 10	10 & 14	13 & 14	14 & 17	15 & 17	17 & 18
.4532	.4881	.4957	.4532	.4633	.5623	.5728	.6052
7 & 6	8 & 15		10 & 15	13 & 17		15 & 18	17 & 22
.5451	.4507		.4615	.4701		.5485	
	*8 & 6		10 & 17	13 & 18		15 & 48	17 & 37
	.6618		.4553	.4643		.4726	.5397
				*13 & 1		*15 & 6	17 & 38
				.5236		.4744	.4634
							17 & 3
							.4562
							*17 & 6
							.5269

*Related to Assessment section.

Concise Statements Corresponding to
Spearman Correlations Related to
Annual Goals and Short-Term
Objectives

1. This statement is based on the correlations of 6 and 7 (.5451), 6 and 8 (.6618), 7 and 8 (.4532), 15 and 17 (.5728), 6 and 7 (.5269), 8 and 15 (.4507), 13 and 18 (.4643), and 13 and 17 (.4701). Annual goals are clusters of related behaviors in a specific area in which the child required special services. They are pertinent to the child's performance in his/her regular class. They included the behavioral baseline (present level of performance) and the expected level of performance to be achieved by the end of the school year.

Short-term instructional objectives are measurable intermediate steps between a child's present level of performance on a skill and the desired level as stated in the annual goal.

2. This statement was developed from the correlations of 17 and 18 (.6052), and 15 and 18 (.5485). Annual goals and short-term objectives are stated in behavioral terms which are measurable and/or observable. They included the following four components: 1) a learner, 2) an observable and/or measurable behavior, 3) the condition under which the objective is to be performed, and 4) the standard or criterion which described

the minimum performance required to master the objective.

3. The correlations of 10 and 9 (.4957), 10 and 15 (.4615), and 10 and 17 (.4553) were used to develop the following statement: Each annual goal and short-term objective should reflect the child's rate of learning, strengths and weaknesses in health factors, special talents, and best mode of learning (sensory perceptual functioning).

4. This statement is based on the correlations of 8 and 14 (.4881), 13 and 14 (.4633), 10 and 14 (.4532), and 17 and 14 (.5723). Parents and teachers should establish priorities among the behavioral goals and objectives in accordance with what is pertinent to the child's age, grade and unique educational needs.

5. The correlations of 15 and 40 (.4726) and 17 and 22 (.4726) are the basis of this statement: Annual goals and short-term objectives stated in behavioral terms which were measurable and/or observable were written for physical education, art, music, home economics and pre-vocational education when special services were required in these areas.

6. This statement is based on the correlation of 17 and 37 (-.5397) and 17 and 38 (.4634). The annual review was held for the purposes of determining the

extent to which the child met the objectives, recommending further evaluation if indicated, and beginning the process of developing goals and objectives for the next school year.

Specific Services. Educational and related services needed are named; Criteria 22-28 and 39-43 (see Tables 7 and 8).

TABLE 7
SPEARMAN CORRELATION COEFFICIENTS-
SPECIFIC SERVICES

Criteria	22	23	24	25	26	27	28
22		.5355 *(.001)	.4695 (.001)	-.0328 (.370)	.1868 (.028)	.1782 (.035)	.1496 (.064)
23			.2945 (.001)	-.0194 (.422)	.2955 (.001)	.2849 (.002)	.2908 (.001)
24				.0831 (.200)	.2941 (.001)	.1266 (.099)	.1951 (.023)
25					.1210 (.109)	-.0224 (.410)	.0507 (.304)
26						.4117 (.001)	.1912 (.025)
27							.3354 (.001)
28							
Criteria	39	40	41	42	43		
39		.3892 *(.001)	.1937 (.024)	.1798 (.033)	.2242 (.011)		
40			.2800 (.002)	.1967 (.022)	.1788 (.034)		
41				.4506 (.001)	.6057 (.001)		
42					.5087 (.001)		

*Indicates level of significance.

TABLE 8
 SPEARMAN CORRELATION COEFFICIENTS ABOVE .4500
 PATTERN OF SPECIFIC SERVICES ITEMS (N=105)

22 & 23 .5355	26 & 29 .5191	*40 & 15 .4726	41 & 42 .4506	42 & 43 .5087	43 & 44 .5810
22 & 24 .4695			41 & 43 .6057		
*22 & 17 .4631					

*Related to goals and objectives.

Concise Statements Corresponding to
Spearman Correlations Related to
Specific Services Needed
by the Child

1. The correlation of 22 and 23 (.5355) is the basis for this statement . Program arrangements were made to ensure that the child had available to him/her the variety of services available to non-handicapped children including art, music, industrial arts, home economics, pre-vocational education and extracurricular services and activities.

2. This statement is based on the correlation of 22 and 24 (.4695). The number of handicapped children assigned to special classes for half days or less should not exceed eight children at a time without an aide, or 12 children with an aide.

3. This criterion was developed from the correlation of 26 and 29 (.5191). Some of a mildly handicapped child's goals were implemented in a regular classroom. An elementary school counselor trained to work with handicapped children was assigned to facilitate adjustments required of the child when he/she had to adapt to procedures which were different from those which non-handicapped children followed.

4. The following concise statement is based on the correlations of 14 and 42 (-.4506), 41 and 43 (-.6057),

42 and 43 (-.5087), and 43 and 44 (.5810). The IEP manager, appointed at the multidisciplinary staff conference, should note the perceived effectiveness of media and materials used to implement the short-term instructional objectives.

Participation. Extent of the child's participation in regular programs; Criteria 29-32(see Tables 9 and 10).

TABLE 9
SPEARMAN CORRELATION COEFFICIENTS-
PARTICIPATION (N=105)

Criteria	29	30	31	32
29		.3229 *(.001)	.3053 (.001)	.2348 (.008)
30			.5353 (.001)	.2356 (.008)
31				.3945 (.001)
32				

*Indicates level of significance.

TABLE 10
SPEARMAN CORRELATION COEFFICIENT ABOVE .4500
PATTERN OF PARTICIPATION ITEMS

30 & 31	32 & 43
.5353	.4739
*26 & 29	32 & 44
.5191	.4608

*Related to specific services.

Concise Statement Corresponding
to Spearman Correlations Related
to Participation in Regular
Programs

1. This statement is based on the correlations of 30 and 31 (.5353), 32 and 43 (.4739), and 32 and 44 (.4608). The placement selected for the child followed from the annual goals and short-term objectives. The placement was in the least restrictive environment in terms of contact with non-handicapped children, in which the child could be expected to achieve the goals sets. The IEP manager continually monitored the appropriateness of the placement.

Dates. Dates for initiation and duration of services; Criteria 36 and 38 (see Table 11).

TABLE 11

SPEARMAN CORRELATION COEFFICIENT-DATES OF
INITIATION OF SERVICES (N=105)

36 & 38	38 & 17
.4749	.4634
*(.001)	(.001)

*Indicates level of significance.

Concise Statement Corresponding to
Spearman Correlation Related to
Dates of Initiation and Duration
of Service.

1. The correlations of 36 and 38 (.4749), and 17 and 38 (.4634) are the basis for this statement. A child's IEP should be completed within 30 days of the beginning of the school year, by the child's new teachers, or within 30 days of the determination that the child is handicapped, and reviewed near the end of the school year.

Evaluation. Objectives for evaluation and provision for annual reviews; Criteria 33-38 (see Tables 12 and 13).

TABLE 12
SPEARMAN CORRELATION COEFFICIENTS-
EVALUATION (N=105)

Criteria	33	34	35	36	37	38
33	.1063 *(.140)	.1309 (.092)	.0931 (.172)	.3152 (.001)	.2415 (.007)	
34		.4739 (.001)	.2334 (.008)	.1714 (.040)	.3446 (.001)	
35			-.0068 (.473)	-.0184 (.426)	.1548 (.057)	
36				.1860 (.029)	.4749 (.001)	
37					.3171 (.001)	
38						

*Indicates level of significance).

TABLE 13

SPEARMAN CORRELATION COEFFICIENTS ABOVE .4500
PATTERN OF EVALUATION ITEMS (N=105)

34 & 35	*36 & 38	37 & 17	38 & 17
.4739	.4749	.5397	.4634

*Related to dates for initiation and duration of services.

Concise Statement Corresponding to
Spearman Correlations Related to
Evaluation and Provision for
Annual Review

1. This statement was developed from the correlations of 34 and 35 (.4739), 37 and 17 (.5397), and 38 and 17 (.4634). Measurable short-term instructional objectives were written and the child's progress toward the objectives was evaluated by the child's teachers. An annual review was held for the purpose of determining the extent to which the child met the objectives and to revise the IEP.

Other. Persons responsible for developing and writing the IEP (IEP Team); Criteria 44-48 (see Tables 14 and 15).

TABLE 14
SPEARMAN CORRELATION COEFFICIENTS-
IEP TEAM (N=105)

Criteria	44	45	46	47	48
44		.5704 *(.001)	.4198 (.001)	.3438 (.001)	.1183 (.115)
45			.5186 (.001)	.4073 (.001)	.1759 (.036)
46				.1631 (.048)	-.0675 (.247)
47					.3152 (.001)
48					

*Indicates level of significance.

TABLE 15
SPEARMAN CORRELATION COEFFICIENTS ABOVE .4500
PATTERN OF IEP TEAM ITEMS

*44 & 41	
. 4944	
*44 & 42	*45 & 46
.5087	.5186
*44 & 43	+45 & 3
.5810	.4600
44 & 45	
.5704	

*Related to specific services.

+Related to assessment.

Concise Statement Corresponding to
Spearman Correlations Related to
the Composition of the IEP Team

This statement is based on the correlations of 44 and 45 (.5704), and 45 and 46 (.5186). An individual should be appointed at the multidisciplinary staff conference to monitor the overall implementation and listed on the IEP.

Criterion 48 was agreed to by 96 questionnaire respondents. It refers to the composition of the IEP team.

Criterion 48. The composition of the IEP team is not fixed its membership at any given time depends on the type of information needed to plan an appropriate program.

Proposed Scale

A scale for evaluating the quality of IEPs of mildly handicapped children in grades one through six was proposed. The scale was based on the accepted criteria and the statements generated by the Spearman correlations. The accepted criteria were those rated 6 (Agree) or 7 (Highly Agree) by 80 or more respondents to the questionnaire and those criteria rated 5 (Mildly Agree) 6, and 7 by 90 or more respondents. The statements generated by the Spearman correlations, excluding

those based on unaccepted criteria, were re-phrased in order to produce a checklist which would facilitate evaluating the quality of an IEP. The proposed scale items are presented in the categories suggested by the U.S. Department of Housing, Education and Welfare which were described previously. The category for dates for initiation and duration of services was excluded because the criteria addressing dates were not accepted at the level set.

Assessment

This statement includes criteria 1, 2, 3 and 13 and was developed from the Spearman correlations of 2 and 3 (.5383) and 1 and 13 (.5236). A multidisciplinary report of an assessment carried out on an individual basis included:

a. A rationale for stating that the child had specific unique learning needs requiring special education.

b. Assessment data establishing what the child could and could not do, including each curriculum area in which the child required special services and including, when appropriate to the child's problems, the areas of social adaptation, pre-vocational skills, psychomotor skills and self-help skills.

c. The relevant behavior noted during the observation of the child in the child's regular classroom setting and the relationship of that behavior to the child's academic functioning.

d. Relevant medical findings.

Criteria 3, 6, 8, 15, 17, 22 and 40 are included in this statement. The Spearman correlations of 6 and 8 (.6618), 6 and 7 (.5451), 6 and 17 (.5269), 3 and 17 (.4562), 6 and 15 (.4744) and 6 and 31 (.4841) were considered in developing this criterion. The child's present levels of performance, pertinent to the child's age, grade and unique educational needs, were displayed as a list of statements of behaviors each of which represented the baseline behavior to precede a behavioral objective.

This list included:

- a. Each curriculum area in which the child requires special services including, when appropriate to the child's need
- b. Physical education
- c. Art and music
- d. Problem areas which could be addressed in the child's regular classroom.

Annual Goals and Short-Term Objectives

This statement includes criteria 6, 8, 13, 15, 17 and 18 and was developed from the Spearman correlations of 6 and 7 (.5451), 6 and 8 (.6618), 7 and 8 (.4532), 13 and 17 (.4643), 13 and 18 (.4643), 8 and 15 (.4507), 15 and 17 (.5128), 6 and 17 (.5269), and 17 and 22 (.4625). Annual goals included the present level of performance, in a specific area in which the child required special services, and the expected level of performance to be achieved by the end of the year. They are pertinent to the child's performance in his/her regular class.

The criteria 15, 17 and 18 were included in this statement. It was developed from Spearman correlations of 15 and 18 (.5485) and 17 and 18 (.6052). Short-term instructional objectives were measurable intermediate steps between a child's present level of performance on a skill and the desired level as stated in the annual goal. They include:

- a. A learner
- b. An observable and/or measurable behavior
- c. The condition under which the objective is to be performed

d. The standard or criterion which described the minimum performance required to master the objective.

This statement includes criteria 10 and 11 and was developed from the Spearman correlations of 10 and 9 (.4957), 10 and 15 (.4615) and 10 and 17 (.4553). Each goal and objective reflects the child's

- a. rate of learning
- b. strengths and weaknesses in health factors
- c. best mode of learning (sensory perceptual functioning)
- d. specific talents.

Criteria 8, 10, 13, 14 and 17 were considered in this statement. It was developed from the Spearman correlations of 8 and 14 (.4881), 13 and 14 (.4633), 10 and 14 (.4532), and 14 and 17 (.5723). Parents and teachers established priorities among the goals and objectives in accordance with what was pertinent to the child's age, grade and unique educational needs.

Specific Services

This statement was developed from the Spearman correlation of criteria 22 and 23 (.5355) and 22 and 24 (.4695).

Program arrangements were made to ensure that the child had available to him/her the variety of services available to non-handicapped children including art, music, industrial arts, home economics, prevocational education and extracurricular services and activities.

Children assigned to special classes for half the school day or less did not exceed eight children at a time without an aide or 12 children with an aide.

Participation in Regular Education

This statement was based on criterion 37.

The justification for the type of placement corresponded to the specific educational needs of the child. The appropriate placement followed from the annual goals and short-term objectives.

This statement was based on criterion 29.

Some of the child's goals were implemented in a regular classroom.

Evaluation and Provision for an Annual Review

This statement includes criteria 17 and 37. It was developed from the Spearman Correlation of criteria 17 and 37 (.5397).

Measurable short-term objectives were written and the child's progress toward the objectives was evaluated by the child's teachers.

An annual review was held for the purpose of determining the extent to which the child met the objectives, recommending further evaluation if indicated and revising the IEP.

IEP Team

This statement is based on criterion 48.

The composition of the IEP was not fixed. Its membership was selected to provide the information needed to plan an appropriate program.

CHAPTER V

CONCLUSIONS AND RECOMMENDATIONS

The two purposes of this study were to determine whether there were significant criteria which ensure quality programming for Individual Education Programs (IEPs) to mildly handicapped children in grades one through six, and to develop a scale for evaluating the quality of their IEPs.

A questionnaire presenting forty-eight criteria was used to poll the opinions of experts with regard to quality standards for writing IEPs. Public Law 94-142 Education For All Handicapped Children Act of 1975 Section 602 of the Act and Federal Regulations 121 Revised as of October 1, 1978 provided the primary source of the criteria. The expert population of respondents to the questionnaire included a 105 Educational Diagnosticians employed in Texas public schools.

As a result of this research experts agreed upon thirteen criteria which ensure quality in IEPs for mildly handicapped children in grades one through six.

It was proposed that these thirteen criteria form the basis of a scale to evaluate the quality of those IEPs.

The scale items are as follows:

1. A multidisciplinary report of an assessment carried out on an individual basis included:

- a. A rationale for stating that the child had specific unique learning needs requiring special education.

- b. Assessment data establishing what the child could and could not do including each curriculum area in which the child required special services and including, when appropriate to the child's problems, the areas of social adaptation pre-vocational skills, psychomotor skills and self-help skills.

- c. The relevant behavior noted during the observation of the child in the child's regular classroom setting and the relationship of that behavior to the child's academic functioning.

- d. Relevant medical findings.

2. The child's present levels of performance, pertinent to the child's age, grade and unique educational needs, were displayed as a list of statements of behaviors each of which represented the baseline behavioral objective.

The list included:

- a. Each curriculum area in which the child required special services including (when appropriate to the child's need):

- b. Physical education

- c. Art and music

- d. Problem areas which could be addressed in the child's regular classroom.

3. Annual goals included the present level of performance, in a specific area in which the child

required special services, and the expected level of performance to be achieved by the end of the year. Goals are pertinent to the child's performance in his/her regular class.

4. Short-term instructional objectives were measurable intermediate steps between a child's present level of performance on a skill and the desired level as stated in the annual goal. Short-term objectives include:

- a. A learner
- b. An observable and/or measurable behavior
- c. The condition under which the objective is to be performed
- d. The standard or criteria which described the minimum performance required to master the objective.

5. Each goal and objective reflected the child's

- a. rate of learning
- b. strengths and weaknesses in health factors and special talents
- c. best mode of learning (sensory perceptual functioning).

6. Parents and teachers established priorities among the goals and objectives in accordance with what was pertinent to the child's age, grade and unique educational needs.

7. Program arrangements were made to ensure that the child had available to him/her the variety of services available to non-handicapped children including art, music, industrial arts, home economics, pre-vocational education and extracurricular services and activities.

8. The number of children assigned to special classes for half the school day or less did not exceed eight at a time without an aide or twelve with an aide.

9. The justification for the type of placement corresponded to the specific educational needs of the child. The appropriate placement followed from the annual goals and short-term objectives.

10. Some of the child's goals were implemented in a regular classroom.

11. Measurable short-term objectives were written and the child's progress toward the objectives was evaluated by the child's teachers.

12. An annual review was held for the purpose of determining the extent to which the child met the objectives, recommending further evaluation if indicated and revising the IEP.

13. The composition of the IEP team was not fixed. Its membership was selected to provide the information needed to plan and appropriate program.

Limitations

The states were required to comply with Public Law 94-142 in October of 1978. This study was undertaken in August of 1978 and the data collection was completed in May 1979; therefore, it resulted in early estimates of quality standards.

The population of subjects who responded to the questionnaire were all Educational Diagnosticians employed by public schools in Texas. The selection of this population was limited by the need to find a large population with training and experience in writing IEPs.

In isolating criteria to be tested by the questionnaire, it was necessary to include some that were clearly defined in the law or in the rules and

regulations. These criteria had not been studied for the purpose defined by this research and there was not sufficient literature to support their inclusion on the scale without presenting them to the expert population. The following list of criteria are in this category. They are numbered as they were on the questionnaire.

1. The intent of the law is that assessment information should be collected on an individual basis for the purpose of establishing what a child can and cannot do in as many of the following areas as are appropriate to the nature of the child's problems including academic achievement, social adaptation, pre-vocational skills, psychomotor skills and self-help skills.
3. The report should include a statement of whether the child has specific unique learning needs requiring special education and the basis for making the determination; the relevant behavior noted during the observation of the child in the child's regular classroom setting; the relationship of that behavior to the child's academic functioning; and the relevant medical findings.
7. An annual goal should be a statement which includes a cluster of related behaviors in a given area (academic, speech/language, self-help, pre-vocational, motor or social behavior) which are appropriate to a child's needs and can be achieved by the end of the school year.
13. An annual goal should be written for each curriculum area in which the child requires special services.
17. Short-term instructional objectives should be measurable intermediate steps

between a child's present level of performance on a skill and the desired level as stated in an annual goal.

22. Program arrangements should be made to ensure that handicapped children have available to them the variety of programs and services available to non-handicapped children, including art, music, industrial arts, home economics and pre-vocational education.
23. Extracurricular services and activities should offer handicapped children an equal opportunity for participation.
31. The justification for the type of placement should correspond to the specific educational needs of the child. The appropriate placement will follow from the annual goals and short-term objectives.
36. The handicapped child's IEP should be completed within 30 days of the beginning of the school year or within 30 days of the determination that the child is handicapped and reviewed near the end of the school year.
37. Annual reviews should be held for the purpose of determining the extent to which the child has met the objectives, recommend further evaluation if indicated and revise the IEP.
39. Developing motor skills and motor control, taking part in games and sports, learning to participate in recreation and leisure activities are especially important for handicapped students, not simply in terms of the individual health but in building self-confidence and in opening doors for fuller participation in the larger society. The goals and objectives should include these areas.
40. Youngsters who can take part in regular physical education safely and

successfully should do so. Those who have problems involving confidence, physical conditions, skills or emotional stability should be offered an "adapted" physical education program that aims at ultimate participation in regular programs.

48. The key to a successful team should be that its composition is not fixed and its membership at any given time depends on the type of information needed to plan an appropriate program.

The number of criteria included on the questionnaire was limited to ensure response. All of the areas thought to be necessary on the IEP document were presented. However, in order to include all of the criteria thought to be necessary on written IEPs, two ideas are expressed in one statement. For example:

27. Special needs transportation should be provided for field trips and after school activities. The designated individual with responsibility for special needs transportation should be listed on the IEP.

It is possible that the need for transportation could be approved and the requirement of a signature of the individual responsible might not be approved, thereby confounding the results.

The questionnaire was submitted for editing to twenty-five persons considered to be experts for the purpose of this study. However, no preliminary mailing nor analysis of the data was undertaken.

Results of the data analysis were inconclusive in determining the need for signatures of program implementers on the IEP. The specific service of an IEP monitor and/or manager could not be included on the proposed evaluation scale. The Spearman correlation data indicated possible agreement among the respondents for an IEP monitor and/or manager to assume responsibility for

- a) continuing evaluation of the appropriate placement
- b) arranging for specific transportation needs
- c) arranging for appropriate media and materials and
- d) co-ordinating services.

Results of the data analysis were inconclusive in determining the dates for the initiation of services. Spearman correlations indicate possible agreement among the respondents that short-term objectives should be written by the child's new teachers within 30 days of the beginning of the school year. A statement concerning the length of time permissible before services are initiated could not be included on the proposed scale.

Recommendations

Research to define quality criteria for writing IEPs should be continued. The insight gained by experienced professionals working with handicapped children should be polled in order to establish quality standards.

Populations of subjects for these studies should include teachers, parents and experts in the field of special education. These studies should be conducted within states and nationally.

Questionnaires developed to poll expert opinion should include single specific criteria and require not more than a thirty-minute response time. It is suggested that a preliminary questionnaire presenting the requirements of PL 94-142 and the regulations related to quality standards for writing IEPs be mailed to a random selection of this population. The data should be analyzed in order to exclude criteria with conclusive outcomes and possibly to generate other criteria to be polled. Further, a series of short questionnaires should be developed presenting different combinations of criteria found in the preliminary study with criteria found in the literature. The series of questionnaires should be mailed to random selections of the population. Finally, the complete questionnaire should be presented

to a selected random population. The preliminary study should include solicitation for this more elaborate questionnaire.

Future studies should explore the need for an IEP monitor or manager and the services to be provided by this person. It is also recommended that guidelines for setting the initiation of services be determined by future studies.

APPENDIX A
Questionnaire

March 1979

Dear Colleague,

The Education for All Handicapped Children Act (Public Law 94-142) requires that an Individual Education Plan (IEP) be written for every student who is handicapped. The purpose of this dissertation study is to establish quality criteria for evaluating IEPs. I have hypothesized that there are significant criteria, to which authorities in Special Education will agree upon, for ensuring quality programming on IEPs. These criteria and the requirements of the law will be the basis for the development of a scale which can be used to evaluate the IEPs written for mildly handicapped children in grades one through six.

It is my hope that this scale will facilitate our work in developing excellent programs for the children we serve. Your assistance in responding to this questionnaire will help us in developing quality criteria.

Your response will be confidential and will be used solely for the purpose of this study. No names are needed; if you prefer, please feel free to remove your name from the questionnaire. However, upon your request, I will be happy to send you a copy of the scale.

Thank you very much for your cooperation.

Sincerely,

Jane Hoffman
Educational Diagnostician DISD
Doctorial Candidate T.W.U.

Information required of participants in this study:

1. Your most advanced degree is Masters Doctorate
2. You have had ____years of experience developing programs for handicapped children.
3. You would like a copy of the completed scale ____yes ____no.

The questionnaire must be returned within 30 days of receipt.

Best scan available based on pages available. Lighter printed texts may not be readable.

Please indicate the extent to which you agree or disagree with each statement by circling the appropriate number.

SCALE

1 Strongly Disagree	2 Disagree	3 Mildly Disagree	4 Undecided or No opinion	5 Mildly Agree	6 Agree	7 Strongly Agree
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1. The intent of the law is that assessment information should be collected on an individual basis for the purpose of establishing what a child can and cannot do in as many of the following areas as are appropriate to the nature of the child's problems including academic achievement, social adaptation, prevocational skills, psychomotor skills and self-help skills.

1 2 3 4 5 6 7

2. A written multidisciplinary evaluation conference report should be prepared prior to the IEP conference.

1 2 3 4 5 6 7

3. The report should include a statement of whether the child has specific unique learning needs requiring special education and the basis for making the determination; the relevant behavior noted during the observation of the child in the child's regular classroom setting; the relationship of that behavior to the child's academic functioning; and the relevant medical findings.

1 2 3 4 5 6 7

4. Parents or guardians should be informed of the results of the multidisciplinary evaluation conference and of their rights prior to the IEP conference.

1 2 3 4 5 6 7

5. Specific information that will document the strengths and weaknesses of the current educational performance of the child should be the only information collected for and reported at the IEP conference.

1 2 3 4 5 6 7

6. The assessment information should be displayed so that when the program is developed the annual goals and short term objectives follow the present levels of performance as a logical next step.

1 2 3 4 5 6 7

7. An annual goal should be a statement which includes a cluster of related behaviors in a given area (academic, speech/language, self-help, pre-vocational, motor or social behavior) which are appropriate to a child's needs and can be achieved by the end of the school year.

1 2 3 4 5 6 7

8. The student's age, grade and amount of learning to date should be used to determine a starting point for each annual goal.

1 2 3 4 5 6 7

9. The previous rate of learning and teaching methods used should be considered in estimating what the child will be able to learn in a year.

1 2 3 4 5 6 7

10. Each goal should reflect consideration for the student's strengths and weaknesses in health factors, special talents, best mode of learning and sensory perceptual functioning.

1 2 3 4 5 6 7

11. Each goal should reflect consideration for the student's motivation allowing the teacher to help the student learn in a way that is most enjoyable to him/her.

1 2 3 4 5 6 7

12. An annual goal should be written for each curriculum area in which the child is functioning below his/her expected level.

1 2 3 4 5 6 7

Best scan available based on pages available. Lighter printed texts may not be readable.

Please indicate the extent to which you agree or disagree with each statement by circling the appropriate number.

SCALE

1 Strongly Disagree	2 Disagree	3 Mildly Disagree	4 Undecided or No opinion	5 Mildly Agree	6 Agree	7 Strongly Agree
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13. An annual goal should be written for each curriculum area in which the child requires special services.
- 1 2 3 4 5 6 7
14. Critical areas that need attention should be pinpointed by parents and teachers and priorities among the goals established.
- 1 2 3 4 5 6 7
15. Goals should be stated in behavioral terms which are measurable and/or observable.
- 1 2 3 4 5 6 7
16. Goals should be stated in specific pupil terms, i.e., John will print entire name, John will copy letters, numbers and shapes.
- 1 2 3 4 5 6 7
17. Short-term instructional objectives should be measurable intermediate steps between a child's present level of performance on a skill and the desired level as stated in an annual goal.
- 1 2 3 4 5 6 7
18. A written short-term instructional objective should include the following four components: (1) a learner; (2) an observable or measurable behavior; (3) the conditions under which the objective be performed; (4) the standard or criteria which describes the minimum performance required to master the objective.
- 1 2 3 4 5 6 7
19. A minimum list of three short-term objectives which represent milestone steps for each goal should be written.
- 1 2 3 4 5 6 7
20. Curriculum guides which are used in regular classes are the best tools to use when pinpointing academic behaviors and sequencing short-term instructional objectives. (Objectives in curriculum guides may be adjusted to meet individual needs.)
- 1 2 3 4 5 6 7
21. Individuals providing services should suggest the arrangements required to attain each annual goal including: setting (i.e., Resource Room) pupil teacher ratio in that setting and the number of class hours estimated to achieve each goal.
- 1 2 3 4 5 6 7
22. Program arrangements should be made to ensure that handicapped children have available to them the variety of programs and services available to non-handicapped children, including art, music, industrial arts, home economics and pre-vocational education.
- 1 2 3 4 5 6 7
23. Extracurricular services and activities should offer handicapped children an equal opportunity for participation.
- 1 2 3 4 5 6 7
24. Handicapped students assigned to special classes for half day or less should not exceed eight students at a time without an aide or 12 students with an aide.
- 1 2 3 4 5 6 7
25. Assignment of handicapped children to a Resource Room should be non-categorical.
- 1 2 3 4 5 6 7

Best scan available based on pages available. Lighter printed texts may not be readable.

Please indicate the extent to which you agree or disagree with each statement by circling the appropriate number.

SCALE

1	2	3	4	5	6	7
Strongly Disagree	Disagree	Mildly Disagree	Undecided or No opinion	Mildly Agree	Agree	Strongly Agree

26. An elementary school counselor trained to work with handicapped children should be available to all children receiving special education services for half a day or less in order to compensate for additional adjustments required of the child when he/she must adapt to procedures which are different than non-handicapped children follow.

1 2 3 4 5 6 7

27. Special needs transportation should be provided for field trips and after school activities. The designated individual with responsibility for special needs transportation should be listed on the IEP.

1 2 3 4 5 6 7

28. The length of the instructional day, for children receiving special services for half day or less, should be equivalent to that of regular class children of the same age level.

1 2 3 4 5 6 7

29. It is expected that many children with mild learning and behavior problems will profit from regular education programs. Therefore, some of a mildly handicapped child's goals should be implemented in a regular classroom.

1 2 3 4 5 6 7

30. Justification for placement should be interpreted to mean a list of reasons why a particular placement selected for a handicapped child is seen as the least restrictive environment in terms of contact with non-handicapped children, in which the child can be expected to achieve the goals set.

1 2 3 4 5 6 7

31. The justification for the type of placement should correspond to the specific educational needs of the child. The appropriate placement will follow from the annual goals and short-term objectives.

1 2 3 4 5 6 7

32. It is important that the justification specify the type of placement (i.e., small group instruction with LLD teacher; one-to-one instruction in language development with speech therapist for an auditorily impaired child) rather than the name of the placement (i.e., Resource Room, Speech Therapy).

1 2 3 4 5 6 7

33. If a child's implementers write measurable short-term instructional objectives and then measure a student's performance on those objectives, the requirement to objectively evaluate performance has been satisfied.

1 2 3 4 5 6 7

34. While the law requires a minimum of one evaluation of performance on objectives per year, this provides too infrequent a measure of student performance.

1 2 3 4 5 6 7

35. Student performance on objectives should be measured at least on a monthly basis.

1 2 3 4 5 6 7

36. A handicapped child's IEP should be completed within 30 days of the beginning of the school year or within 30 days of the determination that the child is handicapped and reviewed near the end of the school year.

1 2 3 4 5 6 7

Best scan available based on pages available. Lighter printed texts may not be readable.

Please indicate the extent to which you agree or disagree with each statement by circling the appropriate number.

SCALE

1 Strongly Disagree	2 Disagree	3 Mildly Disagree	4 Undecided or No opinion	5 Mildly Agree	6 Agree	7 Strongly Agree
---------------------------	---------------	-------------------------	---------------------------------	----------------------	------------	------------------------

37. Annual reviews should be held for the purpose of determining the extent to which the child has met the objectives, recommend further evaluation if indicated and revise the IEP.

1 2 3 4 5 6 7

38. Revision of the IEP should include new goals, determination of services, placement and all other components of the child's IEP with the exception of short-term instructional objectives, media and materials. The child's new teachers, within 30 days of the beginning of the next school year, should develop the child's short-term objectives in a meeting with the parent(s), child (when appropriate) and the IEP manager.

1 2 3 4 5 6 7

39. Developing motor skills and motor control, taking part in games and sports, learning to participate in recreation and leisure activities are especially important for handicapped students, not simply in terms of the individual health but in building self-confidence and in opening doors for fuller participation in the larger society. The goals and objectives should include these areas.

1 2 3 4 5 6 7

40. Youngsters who can take part in regular physical education safely and successfully should do so. Those who have problems involving confidence, physical conditions, skills or emotional stability should be offered an "adapted" physical education program that aims at ultimate participation in regular programs.

1 2 3 4 5 6 7

41. Special media and materials should be listed on a child's IEP next to the specific short-term instructional objectives for which the media or materials are used.

1 2 3 4 5 6 7

42. The list of media and materials should include name of material, author, publisher, levels and the dates on which the materials were used with a child.

1 2 3 4 5 6 7

43. The perceived effectiveness of the media and materials should be noted.

1 2 3 4 5 6 7

44. An IEP manager should be appointed at the multidisciplinary staff conference and the name of the IEP manager should be listed on the child's IEP (the function of the IEP manager is to coordinate the implementation of the IEP with a child's parents and local district).

1 2 3 4 5 6 7

45. An individual should be identified to monitor the overall implementation, and listed on the IEP.

1 2 3 4 5 6 7

46. The name of each individual responsible for implementing part of the child's IEP should be written next to the particular goal which he/she will implement on the IEP.

1 2 3 4 5 6 7

Best scan available based on pages available. Lighter printed texts may not be readable.

Please indicate the extent to which you agree or disagree with each statement by circling the appropriate number.

SCALE

1	2	3	4	5	6	7
Strongly Disagree	Disagree	Mildly Disagree	Undecided or No opinion	Mildly Agree	Agree	Strongly Agree

47. In order for the team to develop an IEP which will address the total educational needs of the child, a multidisciplinary effort is needed. Therefore, the IEP team should be as follows:

Person	Permanent Members	Required on Core Committees	Consulting Experts invited When Appropriate for Planning A Child's Program			
Special Education Administrator	x	x				
Referring/receiving Teacher(s)		x				
Parent and Child (when appropriate)		x				
Psychologist			x			
Educational Diagnostician			x			
Speech Pathologist			x			
Physical Therapist			x			
Occupational Therapist			x			
Audiologist			x			
School nurse			x			
Social worker			x			
Guidance Counselor			x			
Curriculum Specialist			x			
Methods & Materials Specialist			x			
Physician			x			
Ophthalmologist/Optometrist			x			
Other consultants			x			
1	2	3	4	5	6	7

48. The key to a successful team should be that its composition is not fixed and its membership at any given time depends on the type of information needed to plan an appropriate program

1	2	3	4	5	6	7
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Your participation in this study is sincerely appreciated. Please fold back the return mailer and staple before mailing.

Best scan available based on pages available. Lighter printed texts may not be readable.

APPENDIX B

CHI SQUARE TABLES

APPENDIX B

Chi-Square Tables

1. The intent of the law is that assessment information should be collected on an individual basis for the purpose of establishing what a child can and cannot do in as many of the following areas as are appropriate to the nature of the child's problems including academic achievement, social adaptation, prevocational skills, psychomotor skills and self-help skills.

VALUE	1.	3.	4.	5.	6.	7.
Count	2.	1.	1.	3.	47.	48.
Expected	17.00	17.00	17.00	17.00	17.00	17.00
Chi-Square	164.353					
D.F.	5					
Significance	0.000					

2. A written multidisciplinary evaluation conference report should be prepared prior to the IEP conference.

VALUE	1.	3.	4.	5.	6.	7.
Count	3.	3.	1.	11.	51.	35.
Expected	17.33	17.33	17.33	17.33	17.33	17.33
Chi-Square	124.808					
D.F.	5					
Significance	0.000					

3. The report should include a statement of whether the child has specific unique learning needs requiring special education and the basis for making the determination; the relevant behavior noted during the observation of the child in the child's regular classroom setting; the relationship of that behavior to the child's academic functioning; and the relevant medical findings.

VALUE	2.	4.	5.	6.	7.
Count	1.	4.	6.	61.	33.
Expected	21.00	21.00	21.00	21.00	21.00
Chi-Square	126.571				
D.F.	4				
Significance	0.000				

4. Parents or guardians should be informed of the results of the multidisciplinary evaluation conference and of their rights prior to the IEP conference.

Value	1.	2.	3.	4.	5.	6.	7.
Count	3.	8.	7.	4.	7.	41.	34.
Expected	14.86	14.86	14.86	14.86	14.86	14.86	14.86
Chi-Square	99.538						
D.F.	4.						
Significance	0.000						

5. Specific information that will document the strengths and weaknesses of the current educational performance of the child should be the only information collected for and reported at the IEP conference.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	24.	44.	12.	4.	4.	11.	4.
Expected	14.71	14.71	14.71	14.71	14.71	14.71	14.71
Chi-Square	88.990						
D.F.	6.						
Significance	0.000						

6. The assessment information should be displayed so that when the program is developed the annual goals and short-term objectives follow the present levels of performance as a logical next step.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	1.	1.	2.	3.	11.	51.	35.
Expected	14.86	14.86	14.86	14.86	14.86	14.86	14.86
Chi-Square	162.673						
D.F.	6.						
Significance	0.000						

7. An annual goal should be a statement which includes a cluster of related behaviors in a given area (academic, speech/language, self-help, pre-vocational, motor or social behavior) which are appropriate to a child's needs and can be achieved by the end of the school year.

VALUE	2.	3.	4.	5.	6.	7.
Count	3.	3.	8.	17.	42.	30.
Expected	17.17	17.17	17.17	17.17	17.17	17.17
Chi-Square	73.796					
D.F.	5					
Significance	0.000					

8. The student's age, grade and amount of learning to date should be used to determine a starting point for each annual goal.

VALUE	2.	3.	4.	5.	6.	7.
Count	2.	6.	4.	8.	51.	31.
Expected	17.00	17.00	17.00	17.00	17.00	17.00
Chi-Square	114.588					
D.F.	5					
Significance	0.000					

9. The previous rate of learning and teaching methods used should be considered in estimating what the child will be able to learn in a year.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	1.	3.	3.	1.	18.	45.	33.
Expected	14.86	14.86	14.86	14.86	14.86	14.86	14.86
Chi-Square	128.750						
D.F.	6						
Significance	0.000						

10. Each goal should reflect consideration for the student's strengths and weaknesses in health factors, special talents, best mode of learning and sensory perceptual functioning.

VALUE	3.	4.	5.	6.	7.
Count	1.	1.	10.	57.	36.
Expected	21.00	21.00	21.00	21.00	21.00
Chi-Square	116.286				
D.F.	4				
Significance	0.000				

11. Each goal should reflect consideration for the student's motivation allowing the teacher to help the student learn in a way that is most enjoyable to him/her.

VALUE	1.	3.	4.	5.	6.	7.
Count	2.	2.	7.	16.	55.	21.
Expected	17.17	17.17	17.17	17.17	17.17	17.17
Chi-Square	117.136					
D.F.	5					
Significance	0.000					

17. Short-term instructional objectives should be measurable intermediate steps between a child's present level of performance on a skill and the desired level as stated in an annual goal.

VALUE	2.	3.	5.	6.	7.
Count	1.	2.	5.	67.	29.
Expected	20.80	20.80	20.80	20.80	20.80
Chi-Square	153.692				
D.F.	4				
Significance	0.000				

18. A written short-term instructional objective should include the following four components: (1) a learner; (2) an observable or measurable behavior, (3) the conditions under which the objective be performed; (4) the standard or criteria which describes the minimum performance required to master the objective.

VALUE	2.	3.	4.	5.	6.	7.
Count	2.	5.	5.	18.	44.	30.
Expected	17.33	17.33	17.33	17.33	17.33	17.33
Chi-Square			81.423			
D.F.			5			
Significance			0.000			

19. A minimum list of three short-term objectives which represent milestone steps for each goal should be written.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	1.	8.	10.	23.	27.	24.	11.
Expected	14.86	14.86	14.86	14.86	14.86	14.86	14.86
Chi-Square			38.692				
D.F.			6				
Significance			0.000				

20. Curriculum guides which are used in regular classes are the best tools to use when pinpointing academic behaviors and sequencing short-term instructional objectives. (Objectives in curriculum guides may be adjusted to meet individual needs.)

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	4.	19.	16.	16.	29.	13.	8.
Expected	15.00	15.00	15.00	15.00	15.00	15.00	15.00
Chi-Square			25.867				
D.F.			6				
Significance			0.000				

21. Individuals providing services should suggest the arrangements required to attain each annual goal including: setting (i.e., Resource Room) pupil teacher ratio in that setting and the number of class hours estimated to achieve each goals.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	3.	6.	5.	6.	29.	44.	11.
Expected	14.86	14.86	14.86	14.86	14.86	14.86	14.86
Chi-Square			98.192				
D.F.			6				
Significance			0.000				

22. Program arrangements should be made to ensure that handicapped children have available to them the variety of programs and services available to non-handicapped children, including art, music, industrial arts, home economics and pre-vocational education.

VALUE	1.	4.	5.	6.	7.
Count	1.	1.	4.	44.	54.
Expected	20.80	20.80	20.80	20.80	20.80
Chi-Square	130.135				
D.F.	4				
Significance	0.000				

23. Extracurricular services and activities should offer handicapped children an equal opportunity for participation.

VALUE	1.	3.	4.	5.	6.	7.
Count	1.	2.	1.	6.	48.	47.
Expected	17.50	17.50	17.50	17.50	17.50	17.50
Chi-Square	155.286					
D.F.	5					
Significance	0.000					

24. Handicapped students assigned to special classes for half day or less should not exceed eight students at a time without an aide or 12 students with an aide.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	1.	2.	1.	3.	17.	37.	43.
Expected	14.86	14.86	14.86	14.86	14.86	14.86	14.86
Chi-Square			133.058				
D.F.			6				
Significance			0.000				

25. Assignment of handicapped children to a Resource Room should be non-categorical.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	1.	10.	11.	13.	20.	31.	15.
Expected	14.43	14.43	14.43	14.43	14.43	14.43	14.43
Chi-Square			36.020				
D.F.			6				
Significance			0.000				

26. An elementary school counselor trained to work with handicapped children should be available to all children receiving special education services for half a day or less in order to compensate for additional adjustments required of the child when he/she must adapt to procedures which are different than non-handicapped children follow.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	2.	5.	4.	10.	22.	36.	25.
Expected	14.86	14.86	14.86	14.86	14.86	14.86	14.86
Chi-Square			67.635				
D.F.			6				
Significance			0.000				

27. Special needs transportation should be provided for field trips and after school activities. The designated individual with responsibility for special needs transportation should be listed on the IEP.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	6.	6.	14.	16.	17.	31.	14.
Expected	14.86	14.86	14.86	14.86	14.86	14.86	14.86
Chi-Square			28.596				
D.F.			6				
Significance			0.000				

28. The length of the instruction day, for children receiving special services for half day or less, should be equivalent to that of regular class children of the same age level.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	2.	6.	5.	13.	12.	48.	16.
Expected	14.57	14.57	14.57	14.57	14.57	14.57	14.57
Chi-Square			99.627				
D.F.			6				
Significance			0.000				

29. It is expected that many children with mild learning and behavior problems will profit from regular education programs. Therefore, some of a mildly handicapped child's goals should be implemented in a regular classroom.

VALUE	1.	3.	4.	5.	6.	7.
Count	1.	2.	3.	4.	54.	41.
Expected	17.50	17.50	17.50	17.50	17.50	17.50
Chi-Square		159.400				
D.F.		5				
Significance		0.000				

30. Justification for placement should be interpreted to mean a list of reasons why a particular placement selected for a handicapped child is seen as the least restrictive environment in terms of contact with non-handicapped children, in which the child can be expected to achieve the goals set.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	1.	2.	4.	11.	12.	59.	16.
Expected	15.00	15.00	15.00	15.00	15.00	15.00	15.00
Chi-Square	163.200						
D.F.	6						
Significance	0.000						

31. The justification for the type of placement should correspond to the specific educational needs of the child. The appropriate placement will follow from the annual goals and short-term objectives.

VALUE	2.	3.	4.	5.	6.	7.
Count	1.	3.	1.	12.	72.	16.
Expected	17.50	17.50	17.50	17.50	17.50	17.50
Chi-Square	214.714					
D.F.	5					
Significance	0.000					

32. It is important that the justification specify the type of placement (i.e., small group instruction with LLD teacher; one-to-one instruction in language development with speech therapist for an auditorily impaired child) rather than the name of the placement (i.e., Resource Room, Speech Therapy).

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	3.	11.	11.	16.	25.	29.	10.
Expected	15.00	15.00	15.00	15.00	15.00	15.00	15.00
Chi-Square			33.200				
D.F.			6				
Significance			0.000				

33. If a child's implementers write measurable short-term instructional objectives and then measure a student's performance on those objectives, the requirement to objectively evaluate performance has been satisfied.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	1.	5.	4.	6.	29.	48.	12.
Expected	15.00	15.00	15.00	15.00	15.00	15.00	15.00
Chi-Square			119.467				
D.F.			6				
Significance			0.000				

34. While the law requires a minimum of one evaluation of performance on objectives per year, this provides too infrequent a measure of student performance.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	2.	11.	14.	9.	22.	32.	15.
Expected	15.00	15.00	15.00	15.00	15.00	15.00	15.00
Chi-Square			37.333				
D.F.			6				
Significance			0.000				

35. Student performance on objectives should be measured at least on a monthly basis.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	8.	20.	24.	10.	14.	25.	4.
Expected	15.00	15.00	15.00	15.00	15.00	15.00	15.00
Chi-Square			26.800				
D.F.			6				
Significance			0.000				

36. A handicapped child's IEP should be completed within 30 days of the beginning of the school year or within 30 days of the determination that the child is handicapped and reviewed near the end of the school year.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	6.	4.	4.	3.	15.	58.	14.
Expected	14.86	14.86	14.86	14.86	14.86	14.86	14.86
Chi-Square			155.942				
D.F.			6				
Significance			0.000				

37. Annual reviews should be held for the purpose of determining the extent to which the child has met the objectives, recommend further evaluation if indicated and revise the IEP.

VALUE	2.	3.	5.	6.	7.
Count	1.	1.	7.	65.	31.
Expected	21.00	21.00	21.00	21.00	21.00
Chi-Square	144.381				
D.F.	4				
Significance	0.000				

38. Revision of the IEP should include new goals, determination of services, placement and all other components of the child's IEP with the exception of short-term instructional objectives, media and materials. The child's new teachers, within 30 days of the beginning of the next school year, should develop the child's short-term objectives in a meeting with the parent(s), child (when appropriate) and the IEP manager.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	5.	3.	5.	12.	17.	48.	14.
Expected	14.86	14.86	14.86	14.86	14.86	14.86	14.86
Chi-Square			97.385				
D.F.			6				
Significance			0.000				

39. Developing motor skills and motor control, taking part in games and sports, learning to participate in recreation and leisure activities are especially important for handicapped students, not simply in terms of the individual health but in building self-confidence and in opening doors for fuller participation in the larger society. The goals and objectives should include these areas.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	1.	2.	4.	5.	19.	46.	25.
Expected	14.57	14.57	14.57	14.57	14.57	14.57	14.57
Chi-Square				114.039			
D.F.				6			
Significance				0.000			

40. Youngsters who can take part in regular physical education safely and successfully should do so. Those who have problems involving confidence, physical conditions, skills or emotional stability should be offered an "adapted" physical education program that aims at ultimate participation in regular programs.

VALUE	1.	2.	3.	5.	6.	7.
Count	1.	1.	1.	7.	50.	45.
Expected	17.50	17.50	17.50	17.50	17.50	17.50
Chi-Square	156.543					
D.F.	5					
Significance	0.000					

41. Special media and materials should be listed on a child's IEP next to the specific short-term instructional objectives for which the media and materials are used.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	1.	12.	8.	6.	19.	42.	16.
Expected	14.86	14.86	14.86	14.86	14.86	14.86	14.86
Chi-Square	72.750						
D.F.	6						
Significance	0.000						

42. The list of media and materials should include name of material, author, publisher, levels and the dates on which the materials were used with a child.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	14.	28.	19.	13.	14.	11.	4.
Expected	14.71	14.71	14.71	14.71	14.71	14.71	14.71
Chi-Square	22.252						
D.F.	6						
Significance	0.001						

43. The perceived effectiveness of the media and materials should be noted.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	7.	12.	6.	13.	30.	25.	11.
Expected	14.86	14.86	14.86	14.86	14.86	14.86	14.86
Chi-Square	33.577						
D.F.	6						
Significance	0.000						

44. An IEP manager should be appointed at the multidisciplinary staff conference and the name of the IEP manager should be listed on the child's IEP (the function of the IEP manager is to coordinate the implementation of the IEP with a child's parents and local district).

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	9.	4.	4.	27.	22.	28.	11.
Expected	15.00	15.00	15.00	15.00	15.00	15.00	15.00
Chi-Square	43.733						
D.F.	6						
Significance	0.000						

45. An individual should be identified to monitor the overall implementation, and listed on the IEP.

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	4.	2.	7.	17.	27.	36.	10.
Expected	14.71	14.71	14.71	14.71	14.71	14.71	14.71
Chi-Square	65.748						
D.F.	6						
Significance	-0.000						

46. The name of each individual responsible for implementing part of the child's IEP should be written next to the particular goal which he/she will implement on the IEP.

VALUE	1.	3.	4.	5.	6.	7.
Count	3.	6.	6.	22.	51.	16.
Expected	17.33	17.33	17.33	17.33	17.33	17.33
Chi-Square	93.423					
D.F.	5					
Significance	0.000					

47. In order for the team to develop an IEP which will address the total educational needs of the child, a multidisciplinary effort is needed. Therefore, the IEP team should be as follows:

Person	Permanent Members	Required on Core Committee	Counsulting Experts in- vited When Appropriate for Planning a Child's Program
Special Education Adminis.	X	X	
Referring/receiving Teacher(s)		X	
Parent and Child (when appropriate)		X	

	Permanent Members	Required on Core Committee	Consulting Experts in- vited When Appropriate for Plan- ning a Child's Program
Psychologist			X
Educational Diagnostician			X
Speech Pathologist			X
Physical Therapist			X
Occupational Therapist			X
Audiologist			X
School nurse			X
Social worker			X
Guidance Counselor			X
Curriculum Specialist			X
Methods & Materials Specialist			X
Physician			X
Ophthalmologist/Optometrists			X
Other consultants			X

VALUE	1.	2.	3.	4.	5.	6.	7.
Count	6.	10.	6.	7.	16.	39.	16.
Expected	14.29	14.29	14.29	14.29	14.29	14.29	14.29
Chi-Square			57.780				
D.F.			6				
Significance			-0.000				

48. The key to a successful team should be that its composition is not fixed and its membership at any given time depends on the type of information needed to plan an appropriate program.

VALUE	1.	2.	3.	5.	6.	7.
Count	1.	4.	4.	11.	48.	37.
Expected	17.50	17.50	17.50	17.50	17.50	17.50
Chi-Square			113.686			
D.F.			5			
Significance			0.000			

REFERENCES

References

- Arena, J. I. How to write an IEP. Novato, Cal.: Academic Therapy, 1978.
- Blankenship, C. S. Illinois interim resource manual for preparing individualized education programs. Bureau of Education for the Handicapped, Washington, D.C.: U.S. Government Printing Office, 1977.
- Davis, J. L., & Marver, J. D. Summary of research findings on individualized education programs (Monograph, National Association of State Directors of Special Education Report). Washington, D.C.: U.S. Government Printing Office, 1977.
- Galloway, J. R., Schipper, W. V., & Wilson, W. C. Developing the compliance monitoring system in special education (National Association of State Directors of Special Education Report). Washington, D.C.: U.S. Government Printing Office, 1977.
- Garcia, V., & Pinkelton, M. The teacher's role in development. In S. Torres (Ed.), A primer on individualized education programs for handicapped children. Reston, Va.: The Foundation for Exceptional Children, 1977.
- Greer, J., & Torres, S. Arranging specific educational services to be provided. In S. Torres (Ed.), A primer on individualized education programs for handicapped children. Reston, Va.: The Foundation for Exceptional Children, 1977.
- Hayes, J. Annual goals and short-term objectives. In S. Torres (Ed.), A primer on individualized education for handicapped children. Reston, Va.: The Foundation for Exceptional Children, 1977.

- Hawkins, D. E. The IEP and physical education, recreation and leisure (Monograph, National Advisory Committee on the Handicapped Annual Report). Washington, D.C.: U.S. Government Printing Office, 1977.
- Higgins, J. Present levels of performance and assessment, some basic considerations. In S. Torres (Ed.), A primer on individualized education programs for handicapped children. Reston, Va.: The Foundation for Exceptional Children, 1977.
- Implementation of part B of the education of the handicapped act, rules and regulations (Federal Register Vol. 42, No. 163). Washington, D.C.: U.S. Government Printing Office, 1977.
- An introduction to individualized education program plans in Pennsylvania: Guidelines for school age IEP development. Harrisburg, Penn.: Pennsylvania State Department of Education, 1977.
- Johnson, D. J., & Myklebust, H. R. Learning disabilities: Educational principles and practices. New York: Grune & Stratton, 1967.
- Johnson, R. A., & Kowalski, A. P. (Eds.). Perspectives on implementation of the Education for All Handicapped Children Act of 1975. Washington, D.C.: Council of the Great City Schools, 1976.
- Kazdin, A. E. The application of operant techniques in treatment, rehabilitation and education. In A. E. Bergin & S. L. Garfield (Eds.), Handbook of psychotherapy and behavior change. New York: John Wiley & Sons, 1978.
- Lilly, S. M. Evaluating individual education programs. In S. Torres (Ed.), A primer on individualized education programs for handicapped children. Reston, Va.: The Foundation for Exceptional Children, 1977.
- Losen, S. M., & Diament, B. Parent conferences in the schools: Procedures for developing effective partnership. New York: Allyn and Bacon, 1978.

McCormack, J. E., Jr. Developing individualized educational plans for severely handicapped: A systems approach. Medford, Mass.: Massachusetts Department of Education, 1978.

National Advisory Committee on the Handicapped (NACH). The individualized education program: Key to an appropriate education for the handicapped. (Publication No. 017-080-01699-1). Washington, D.C.: U.S. Government Printing Office, 1977.

National Education Association (NEA). A teacher's reference guide to P. L. 94-142. Washington, D.C.: Division of Instruction and Public Development, 1978.

Nieder, M. (Ed.). Media services for exceptional children: Some current practices in Illinois. Illinois Libraries, September, 1977, J9(7).

Policies and administrative procedures for the education of handicapped students. Austin: Texas Education Agency, 1978.

Robinson, H. G., & Robinson, N. M. The mentally retarded child. (2nd ed.) New York: McGraw Hill, 1976.

Ross, A. O. Psychological aspects of learning disabilities and reading disorders. New York: McGraw Hill, 1976.

Scipper, W., & Wilson, W. Implementation of individualized education programming: Some observations and recommendations. (Monograph, National Association of State Directors of Special Education) Washington, D.C.: U.S. Government Printing Office, 1978.

Torres, S. Developing an administrative process: Some decisions. Reston, Va.: The Foundation for Exceptional Children, 1977.

. Special education administrative manual. Reston, Va.: Council for Exceptional Children, 1977.

Ujidi, W. Developing an individualized education program (IEP) for children with learning and emotional problems. The Marianne Frostig Center of Educational Therapy Newsletter, 1977, 18(3), 1-9.

Walker, J. (Ed.). Function of the placement committee in special education. (Monograph, National Association of State Directors of Special Education) Washington, D.C.: U.S. Government Printing Office, 1976.

Weintraub, F., Jr. Understanding the individualized education program (IEP). AMICUS, 1977, 2(3), 26-31.